

How effective is therapeutic play in supporting the emotional and social development of children from diverse backgrounds, and what are the implications for inclusive practice?

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Play is one of the most important aspects of children's lives according to Play Wales (2022) Play can be described as a fundamental behaviour where someone can develop skills and regulate emotions whilst exploring the world around them. It is vital throughout life but especially important through childhood. Although academically it is hard to define play, many theorists have developed their own theories for structure, and the beneficial elements play can provide. Definitions of play are based on what the play should provide instead of a definite statement (Pica 2024).

Play Therapy and Therapeutic Play are described as a psychological approach using play a structured way to help people, mainly children to process experiences, express emotions and develop coping skills. Play is a natural element that is an essential part of development especially throughout childhood where it is used as a way of communication, emotional expression and learning (Davis 2024). Play Therapy and Therapeutic Play are interactions used by professionals and adults to communicate with individuals through play. Children use play as a way of expressing themselves individually and a way to socialise with others. Children can find it difficult to express their thoughts verbally unlike most adults. To a child, play is a way for them to stretch their imagination and feel they are in control of a situation. Children will use play to explore an environment and connect with the world around them (Jennings 2020). Therapeutic Play is a form of a psychotherapeutic approach and for the children a psycho-diagnostic tool. It is different to Play Therapy as it is not structured. For Therapeutic Play to have a positive effect, adults need to act on the same level and mindset as the child (Pica 2024). The adult will allow the child to play with the toys at their own pace, so they are able to explore their feelings and hopefully in time the child will be able to accept them leading, to them being able to process their individual emotions and use imagination to portray them through play. It is emphasised how symbolic play, including verbal expression in the way that is seen as developmentally appropriate in supporting the child's needs (Baggerly 2010). It is an approach for the children that will address behavioural and emotional difficulties as it is based on their own individual stages of development. Abstract thinking skills are not developed fully for children under the age of 11 so it has a detrimental effect for their complex emotions, meanings understandings and for their understandings to be communicated through language (Smith 1997).

Piaget (1971) explains how play is a reflection of how children learn and think and games that provide rules allows for structured play and develop social skills later in

childhood. Sensorimotor play in infants allows them to explore through senses and movement whereas as they get older symbolic play becomes more noticeable. Play can help children practice and consolidate cognitive skills. Piaget (1971) feels play is part of intellectual development for a child, observing that children under the age of 11 lacked an ability for abstract thinking due to not having the understanding for complex issues, feelings and motivations. By play becoming more complex by including rules, their cognitive perspective was increasing (Kankaras 2023).

Play is important to children, giving them beneficial life skills that they will carry with them throughout their lives. It will help children develop social skills, language and communication whilst also developing their physical skills. Children will be able to learn about caring for others and the environment, connecting refining pathways in their brains (Davis 2024). Play can help a child feel happy, safe and loved and this will strengthen their confidence. While in a setting, practitioners need to make sure children have the chance at free play where it is not directed or intended. They will be free to use their imagination to help develop all the skills they require to help them succeed in life. Children are able to make their own choices, discover their own passions in a time that is unique to them. If adults control the play, rules are set and children will not be able to access all the benefits of play (Landreth 2012). Children will not be able to independently be creative and develop any leadership skills. By children having child-led play they are able to push their own boundaries and actively take part in risky play that will build resilience and determination. Play Therapy and Therapeutic Play can be often misconcepted as the same but there are many differences to the two and making sure a child is getting the right support is vital to their well-being and long-term recovery. They are both researched methods to support and help children emotionally and for their psychological well-being, but they are different with their professional training techniques, structure and therapeutic intent (Dougherty 2007). Play Therapy is a type of mental health therapy that will use play as a way to help children understand and express their experiences and emotions. Should children suffer with anxiety, depression, trauma, attachment issues and behavioural problems then Play Therapy will be provided and will plan sessions that are specific to that child's individual needs and requirements. The Play Therapy approach is always child-led to allow children to be able to explore their thoughts and feelings in their own time. Play will help children communicate and the Play Therapist will use talking as a more supportive way to help the child understand and promote positive change and emotional growth. Therapeutic Play differs and the sessions that provide play activities that are not structured like Play Therapy but still support children's social, emotional and physical well-being. It is more suppressive and preventive, it provides help and support for children to learn to deal with everyday life and stresses they face. It will help to build up their resilience and can support them with their social skills. It is also a stepping stone to help children learn to manage difficult situations that can be stressful like, medical procedures, hospitalisation and unfamiliar experiences (Jennings 1994). Therapeutic Play will provide comforting activities where children will play with the aim to improve

communication and reduce anxiety, allowing children a feeling of control and sense of normality. Therapeutic Play is a lot less structured and instead of trying to treat and cure long term psychological difficulties, it supports children with normal development. Another difference for Therapeutic Play is that it does not have to be provided by professionals and there is no need for a formal or academic therapeutic qualification. It can be provided by parents, carers, teachers, nurses and other health care professionals but basic knowledge of child development would be helpful and beneficial to them. Therapeutic Play activities can take place in settings that are informal and familiar to the child such as schools, community hubs or hospitals. Activities tend to consist of creative arts, drawing, pretend play, role play, relaxation, sensory play, storytelling and doll or puppet play and can also be medically related. The activity will be tailored to help the children to express their feelings and allow them to adjust to challenging experiences in a supportive environment where they will feel safe (Davis 2024).

Therapeutic Play can work with all children from all diverse, cultural linguistical backgrounds. As play is universal and a way to communicate, that does not have to rely on verbal skills. Children are able to engage in play activities even if they have additional challenges such as social marginalisation, cultural differences and language barriers and they will not feel misunderstood or excluded. When children come from diverse backgrounds, they can feel isolated and misunderstood. Therapeutic Play is universal so it can accommodate to all children's needs. It is a child-centred method of communication that is both flexible and inclusive. All children can be included in Therapeutic Play as it is a non-verbal medium, even children with language barriers or different linguistical backgrounds can be included. Should children come from refugee or migrant families, they can feel isolated and have lived through traumatic experiences, displacement and loss. Within Therapeutic Play sessions, the children will have the opportunity for imaginative and symbolic play. This will allow the children to delve into past experiences and with support be able to regain a sense of control. Socioeconomically disadvantaged children can have to deal with instability and varied access to support, leaving them exposed to stress and anxiety. As Therapeutic Play gives children the regular nurturing safe space, the children will feel secure enough to regain emotional well-being and build back resilience.

The play can be adapted to the child's interests, backgrounds and developmental level. This allows Therapeutic Play to be both inclusive and flexible, fostering a sense of belonging and helping with resilience. The play activities should have a variety of openminded materials that are also non-directive. For example, dolls that have different colour skin tones and culturally appropriate toys, so the child feels safe and surrounded by familiar objects. The first step with Therapeutic Play is to build trust between the child and the person delivering the session. There is no set time for this to happen, it is down to the child and when they feel safe, they will engage in the play. Therapeutic Play supports neurodivergent children by sensory

based play, enhancing communication skills and self-regulation, being mindful of their developmental needs. Bowlby (????) attachment theory shows how children need secure emotional bonds with adults to feel they can trust them enough to be able to feel safe to engage with the socially.

PACE: Playfulness, Acceptance, Curiosity, Empathy is a strategy that was created over 20 years ago by Dan Hughes. Its aim is to support adults with building trusting, safe and meaningful relationships with children that have experienced trauma and can be offered family therapy. It has been designed for children to have a way of thinking, communicating and behaving so they can feel safe. An adult must build trust to form a relationship so the child can make emotional connections to feel safe and play freely without feeling judged. The Framework by Dan Hughes provides help for Therapeutic Play, for the connection to be made between the child and the adult to develop attachment and strengthen their relationship. For adults the Framework will help understand that they need to slow down reactions and not jump to conclusions whilst staying calm so they can try to zone in on the child and the experiences within the session. Children can be very aware of the atmosphere adults can create and how they act towards the child. Children are able to pick up on situations and when something is not consistent, adding to their own worries. Something so insignificant and small can seem like a massive burden to children and adults need to be mindful not to discourage these worries and to allow the children the time they require to express just how they are feeling. Playfulness should be acknowledged by coming down to the child's level to interact and play games with them. During role play, it should be culturally based for the individual child and stories linking to their background and ethnicity should be read with expression and emphasis for the child to engage with the story and possibly relate it to them. Should a child divulge information or ask questions, care should be taken by the adult not to ask imposing questions and show any judgement or signs of worry on their face. This leads to Acceptance, where the adult must accept what the child is expressing or communicating but reserving judgement and showing them, it is okay for them to feel the way they do. By using Curiosity instead of judgement, it will allow for less frustration and anger to be felt by both the adult and the child. For a child to see that an adult is genuinely curious about them, helps them feel that the adult is actually there to help and support them not to be critical and dismissive. Empathy will help to build a connection with the child and for them to feel understood, Empathy is about supporting the child and being present when they share their emotions, it is not trying to fix the problem. Research will need to be carried out into a child's diverse background before Therapeutic Play should commence. This will allow for the adult to make sure the play activities are appropriate to the child including inclusive practice and promote effectiveness. If the adult feels that more intervention is needed, then a referral can be made and will start with an assessment period being carried out where an adult will observe the child and how they interact with the toys and activities. This will give them an insightful understanding of the child's thinking

patterns, emotional state and any possible sources of stress and anxiety (Hughes 2012).

Landreth (2012) states how a child's social, linguistical, family and cultural backgrounds will influence how they will communicate and engage in play to show their emotions. By adults having prior knowledge and understanding of these influences, adults will be able to provide tailor made play activities that are individually created for the child and are both respectful and meaningful. This is time will help the child feel safe and understood within the Therapeutic Play sessions. Landreth (2012) promotes on the process of how to relate to a child from a child-centred frame of reference. His framework consists of 10 Tenets of Relating to Children. 1. Children are not miniature adults: - children are not on the same level of understanding as adults, so should not be treated like one. 2. Children are people: - they are able to feel and experience emotions. 3. Children are unique and worthy of respect: - every child is unique and are not given enough respect, they should be treated equally no matter what their background. 4. Children are resilient: - children are able to overcome all barriers. 5. Children have an inherent tendency towards growth and maturity: - children have inner knowledge and adults need to allow them to flourish. 6. Children are capable of positive self-direction: - if children are given the opportunity, they can figure things out in their own unique way. 7. Children's natural language is play: - although play is the most comfortable way for a child to communicate, parents and carers should be aware that play isn't the child's language and that they do not use toys instead of words. 8. Children have a right to remain silent: - this is the most important tenet as adults need to respect a child's decision not to talk. 9. Children will take the therapeutic experience to where they need to be: - adults should not determine how the child should play. 10. Children's growth cannot be sped up: - adults must be patient with children and their individual progression. Landreth (2012) promotes that every child is individual in their own way including children from diverse cultural, social and developmental backgrounds. Every child has their own personality that is unique to them that is not defined by behaviour, age or relationships with others. Landreth's (2012) belief establishes Therapeutic Play that is child-centred where the effective practice foundation is based on respectful and accepting relationships. If adults honour these core principles, they will be able to create inclusive and safe environments where children will have the ability to heal, grow and thrive.

Vygotsky (1978) describes play more as a social activity that promotes higher mental functions. A Zone of Proximal Development (ZPD) is created by pretend play and whereas impulse control is derived from rules of play, children also learn to self-regulate and develop social skills and language development. Play also leads development and not just reflects it. Vygotsky (1978) sociocultural theory expresses how a child's individual learning and emotional development are moulded by their cultural and social experiences. With changes made to Therapeutic Play sessions for each individual child to reflect their own life experiences, the child is more likely to

express emotion by having trust with the adult and engaging in the play activities. Vygotsky (1978) states how play is created around the ability to use imagination, and he feels this is a unique intellectual ability and a higher psychosocial function of a human. It is a way for a child to be able to understand the world in their own way and be able to meet their individual needs and find solutions to the problems and difficulties they face. By adults planning and having knowledge of the Zone of Proximal Development (ZPD) they can create sessions that will help drive a child's cognitive and emotional development. For diverse children, they need to scaffold the activities using guidance from a More Knowledgeable Other (MKO) and use tools that are culturally relevant to encourage self-regulation, language and social skills (Holzman 2014)

Looking at inclusion through an ecosystem lens highlights how the emotional climate, relationships, materials and space are all interconnected to provide children with diverse abilities to take part in Therapeutic Play, incorporating Landreth's (2012) date child-centred play therapy principles. When adults are carrying out Therapeutic Play sessions, they need to incorporate different strategies and frameworks into the activities. The play sessions have to be unique to the child to support their needs and requirements (Pica 2024). A Loose Parts environment is flexible and resourceful, and the interaction is fundamental to future development (Hughes 2012). Within Therapeutic Play, Loose Parts play is child-centred and an effective practice. It is where open-ended materials that are non-prescriptive will allow children of diverse cultures and backgrounds the opportunity to communicate symbolically at their own pace. The play should provide the children with the opportunity to heal and express their feelings. Loose Parts play is beneficial to the children by supporting physical development with fine and gross motor skills being targeted and allows children to be challenged to develop problem solving skills. It encourages teamwork, connecting children to nature and allowing them to develop their imagination and creativity (Beloglovsky 2018).

Psychoanalytical theory from Freud and Erikson (Miller 2010) state how play helps to manage and express emotions. By allowing children to play, it can help them symbolically to work through fears, conflicts and desires and can help to reduce anxiety, helping to process trauma and through therapy play is a way to communicate identity development and emotional regulation. Freud (1923) details how children are able to express thoughts and feelings unconsciously through play. As children have the opportunity to work through past experiences and anxiety in Therapeutic Play, adults will be able to provide them with support and seek further help if the adult feels that is required. Erikson (1963) focuses on the view that for a child to navigate the developmental stages successfully, play is essential. As play involves social interactions and the ability to explore different roles, children are able to gain confidence. Within Therapeutic Play, this strategy supports children in dealing with conflicts and building resilience. Integrating both theories together as Freud (1923) stresses emotional expression through symbolic play and Erikson

(1963) stresses social skills development through play together, this supports Therapeutic Play as 'a tool for emotional insight' Freud (1923) and a 'mechanism for developmental growth and mastery' Erikson (1963) (Miller 2010).

Fearn (2021) details there are some strategies that should be followed when carrying out Therapeutic play. Adults should watch the child and observe how they are playing with the toys or activities. The adult should not say anything to the child unless the child communicates verbally with them first or until interaction is made with the play. The adult should not attempt to play or interact with the child unless asked or suggested by the child. After the child interacts with the adult, the adult can then interact with the child, reflecting on what the child is doing before talking about what the child is doing. The adult must make sure they do not start to direct the play or pass any judgement (Courtney 2022). Adults should validate the child's experiences by echoing their actions or words. When using open-ended questions, should the child not answer the adult should not ask again or challenge the child, they should give them time and space as silence is a powerful way to process emotions. By not interrupting their behaviour and validating the child, the child will be able to play freely without thinking or worrying they are being judged as the adult will have provided safe environment and trust will have been established. Although the sessions will be child-led, the adult must make sure that the Therapeutic play sessions are productive and both the child and adult are safe. Redirection can be used if the child's behaviour becomes dangerous. Should a child portray resistance within the session, the adult can model play or even encourage without forcing the child to participate (Dougherty 2007).

Play is a meaningful occupation that supports children's development and is influenced by cultural and environmental contexts. Looking at a study examined a short-term, culturally adapted board game intervention involving 12 immigrant mothers and their 12 children in Israel. The program led to improvements in mothers' knowledge, awareness, and self-efficacy related to play, as well as increased child participation in leisure activities. Although these gains showed a slight decline three months after the intervention, mothers reported high satisfaction and perceived the program as beneficial. The findings suggest that even brief, family-centred, play-based interventions can positively impact parental confidence and children's engagement when culturally relevant activities are used. These results underscore the value of culturally sensitive, occupation-based approaches and highlight the need for ongoing support to sustain long-term outcomes in diverse populations (Colliles 2020)

Conducted in a private nursery in northern England, the study explores how three children aged 3–4 articulate understandings of mixed ethnic identity during adult-directed play. Using a praxeological, two-stage qualitative design, data were generated through practitioner interviews and video-cued observations. Findings highlight children's capacity to negotiate and share socially constructed discourses, using both societal and self-generated skin-colour terminology to describe

themselves and others. While skin colour shaped their cultural understanding, children also demonstrated awareness of the values attributed to these labels beyond the nursery context. The study foregrounds play-based pedagogy, power and agency in identity formation, and researcher positionality, contributing insights into inclusion, early years practice, and curriculum and policy development.

Both studies conceptualise play as a culturally mediated occupation through which development, identity, and agency are negotiated. Their strength lies in foregrounding culturally sensitive, play-based approaches that amplify family and child voice. The Israeli intervention demonstrates that short-term programs can enhance parental self-efficacy and children's participation; however, the small sample size and post-intervention decline raise concerns about sustainability and long-term impact. The nursery-based study offers rich insight into young children's active negotiation of ethnic identity, challenging assumptions about their social awareness. Yet its reliance on adult-directed play and limited participant numbers restricts broader applicability. While power, agency, and positionality are acknowledged, structural and policy-level influences remain underexplored. Collectively, the studies highlight the need for longitudinal, multi-context research linking play, identity, and culturally inclusive practice to sustained outcomes (Golos 2021).

After looking at these two different case studies, they show play is a fundamental component of childhood development, offering far-reaching benefits across emotional, social, cognitive, and physical domains. Play offers children the autonomy to explore, experiment, and communicate in ways that are developmentally appropriate, accommodating diverse abilities, backgrounds, and experiences. Evidence from research emphasizes that culturally informed and family-centred play interventions can enhance engagement, identity formation, and parental confidence, reinforcing the value of play in fostering holistic development. Ultimately, child-led play—whether therapeutic or recreational—supports children in navigating challenges, expressing themselves freely, and building meaningful connections with adults and peers. By prioritising the child's perspective and providing responsive, empathetic guidance, adults can ensure that play remains a powerful tool for learning, healing, and growth, laying the foundation for well-being and success throughout life.

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