

School-Based Sandtray Counseling on a Shoestring

Sarah M. Blalock

Department of Counseling, Leadership, Adult Education & School Psychology, Texas State
University

Author Note

Sarah M Blalock  <https://orcid.org/0000-0001-5305-5003>

I have no known conflict of interest to disclose.

Correspondence concerning this article should be addressed to Sarah Blalock, Texas State University, Education 4017, 601 University Drive San Marcos, TX 78666-4616. Email: sarahblalock@txstate.edu

Abstract

The purpose of this article is to provide research evidence and a rationale for use of sandtray counseling in schools, as well as serve as a practical “how to” guide on conducting sandtray sessions inexpensively in a school setting, using case examples to illustrate. Especially now, in the midst of the COVID-19 epidemic and increased awareness of racial inequity, students (and teachers) will need interventions appropriate for trauma and grief. For school-based counselors, sandtray counseling is a developmentally appropriate intervention, particularly for preadolescents, who are old enough to feel uncomfortable with playroom toys and yet are not developmentally ready to use a primarily verbal intervention. Sandtray counseling can provide a culturally sensitive, safe, and soothing bridge between experience and expression, to facilitate integration and healing. With proper training, sandtray counseling can be a valuable addition to any practitioners’ toolbox and is effectively conducted by practitioners working from various theoretical orientations.

Key words: school counseling, sandtray, trauma, grief, school-based counseling, creativity in counseling

School-Based Sandtray Counseling on a Shoestring

The purpose of this article is to provide readers with a research-based rationale and a “how to” guide on conducting sandtray sessions inexpensively in a school setting, illustrated with case examples. Even before the COVID-19 pandemic, school children experienced mental and behavioral problems at an alarmingly high rate, with the need for services outnumbering services available (Rock & Leff, 2015). Children are even more vulnerable now (Bauer et al., 2021; McKegney, 2021). Of the children who do receive services, most receive them in school settings (Rock & Leff, 2015). School funds are likely to be more scarce than usual for many schools due to the economic downturn caused by COVID-19 (Partelow et al., 2020). School counselors and school-based counselors will be challenged to keep up with increased numbers of students needing services and will need effective, efficient, inexpensive, and developmentally appropriate approaches to counsel children and adolescents experiencing trauma, grief, anxiety, learning issues, homelessness, poverty, food scarcity, isolation, etc. Children of color are disproportionately impacted by COVID-19 (Godoy & Wood, 2020) and are also impacted by racism and inequity. Sandtray counseling can be a relatively inexpensive, effective, developmentally appropriate, and culturally sensitive way for school counselors and school-based counselors to provide services for students impacted by issues such as trauma, grief, loss, and anxiety (Homeyer & Sweeney, 2017). The term sandtray “counseling” rather than “therapy” is utilized as it is potentially less stigmatizing in a school setting (Landreth, 2012). The term “sandtray” refers to the technique, concept, creation, or process, whereas the term “sand tray” refers to the physical object of the tray. (Homeyer, personal communication, Aug. 10, 2020).

Sandtray counseling is a form of play therapy (Carmichael, 1994). Although it is important for counselors utilize the sandtray technique in a way that is consistent with their own

theoretical orientation, sandtray is effectively used by counselors practicing from a variety of counseling theories (Homeyer & Sweeney, 2017). Because this author successfully used a humanistic approach in the use of sandtray counseling in 10 years as a school counselor and later as a counselor educator, the humanistic approach to sandtray counseling will be described in this article. The humanistic approach is characterized by respect for students' subjective experience, trust in the students' inherent capacity for growth (Corey, 2017), facilitation of therapeutic relationship, and cross-cultural appropriateness (Shen & Armstrong, 2008). When utilizing the sandtray technique, students freely choose from a selection of hundreds of miniature objects (such as people, animals, transportation, natural and household objects) to place in their tray of sand to create a "world." As students create a miniaturized version of their worldview, the counselor bears witness and acts as a "safe container" for the child's experience (Kestly, 2015, p. 159). Homeyer and Sweeney (2017) define sandtray therapy as:

an expressive and projective mode of psychotherapy involving the unfolding and processing of intra- and inter-personal issues through the use of specific sandtray materials as a nonverbal medium of communication, led by the client or therapist and facilitated by a trained therapist. (p. 6)

To practice in accordance with ethical codes, practitioners need at least some training and supervision in sandtray, before conducting sandtray with students (ACA C.2.b, 2014). Additionally, Homeyer and Sweeney (2017) recommended that practitioners have the experience of participating in sandtray personally. Practitioners can receive training at the annual national play therapy conference, various state play therapy conferences, and from resources listed in the Association for Play Therapy website. Some universities offer courses that include the use of the sandtray technique, expressive arts courses, sandtray workshops, or training through affiliated

play therapy institutes or centers. Many certification programs exist. Books devoted to sandtray therapy can also be valuable resources. I particularly recommend Homeyer and Sweeney (2017). Costs vary. For example, the 2019 Annual Association for Play Therapy International conference offered half day workshops for \$60 and full day workshops for \$120 with a member registration fee of \$25. For more extensive training, the Texas State University Institute for Play Therapy, for example, offers Sandtray Therapy certification for about \$2,000. Additionally, Sandplay Therapists of America offer a bi-annual conference and trainings of all sizes and costs (ex: single workshops for \$10 and \$175; online course for \$350). Southern Sandtray Institute offers online and hybrid training and credentialing. The Sand Tray Institute of New Mexico is another resource for in-depth training (ex: \$295 for three half days). For those interesting in training, varied opportunities exist.

Sandtray as Solution

One crucial benefit of conducting sandtray counseling in schools is that it is developmentally appropriate for children and adolescents (Homeyer & Sweeney, 2017). Like traditional play therapy, it provides a bridge between right and left-brain hemispheres – between thoughts, feelings, implicit memories, and words (Kestly, 2015). Work in the sand tray provides an opportunity for children to integrate their experiences (Kestly, 2015) and to discover inner resources for future challenges (Bratton et al., 2009). Although sandtray counseling is appropriate for young children, sandplay in a sandbox, with the availability of traditional play therapy toys seems to work best for most children under the age of eight, as young children do not yet have the ability to delay playing long enough to create and discuss a sandtray scene (Homeyer & Sweeney, 2017). Although sandtray counseling is also developmentally appropriate for adolescents, and the information in this article is applicable to practitioners in middle and

high school settings, this article focuses on the use of sandtray counseling with preadolescents (defined here as ages 8 and up) in elementary schools.

According to Piaget (1977), children and preadolescents are in the cognitive stage of concrete operations which means it is not developmentally appropriate to expect them to be able to express their thoughts, emotions, and experiences verbally. Although preadolescents are beginning to use abstract thought, they are still often not able to verbalize thoughts and feelings easily (Bratton & Ferebee, 1999). Sandtray counseling is especially appropriate for those children in prepuberty who may find typical playroom toys too “childish” and yet are drawn to “play” with the miniature toys (Ginott, 1994). Through sandtray counseling, these preadolescents use concrete objects to symbolize the thoughts and experiences they are unable to access verbally. Additionally, they need the opportunity to move around the room provided by sandtray counseling (Bratton et al., 2009).

Research supports the use of sandtray counseling in schools with preadolescents. In a pretest-posttest control group study of 56 fourth and fifth graders with behavioral issues, Flahive and Ray (2007) found 10 sessions of school-based group sandtray counseling were related to statistically significant differences in externalizing, internalizing, and total behaviors as rated by teachers using the BASC-TRS. Shen and Armstrong (2008) examined the effectiveness of sandtray counseling using a quasi-experimental pretest-posttest control group design with 40 seventh grade girls identified as having low self-esteem. Researchers found nine sessions of four-person group sandtray counseling, were related to statistically significant increases in self-esteem. According to the research studies above, sandtray counseling is appropriate for use with students from various cultures and conditions. These research studies were conducted with

groups who were predominately African American or Hispanic, from low-socio economic groups, and were academically at-risk (Flahive & Ray, 2007; Shen & Armstrong, 2008).

As additional evidence of efficacy, neurobiological science supports the use of sandtray counseling as a healing agent (Kestly, 2015). Use of sandtray aids the client in storytelling, which according to Siegel and Bryson (2011) is one of the primary methods by which humans integrate their brains. As Kestly (2015) eloquently explained:

Because the sandtray process is a nonverbal medium, it can access experience that lies beyond the reach of language. By giving thoughts and feelings concrete form through expressive play in the sandtray, clients can represent their life experiences in a context where they can control, organize, and eventually integrate them. Drawing from the unique experiences of both the right and left hemispheres of the brain, clients are often able to interweave the embodied experiences of the right and the narrative knowledge of the left to tell their life stories in a coherent way. This integration often results in healthier perceptions, behaviors, and relationships...When clients create and re-create their own worlds in miniature form, in the presence of a skilled therapist, they often can integrate and master what has previously been disjointed and chaotic. (pp. 158-159)

In addition to developmental appropriateness and effectiveness, many other benefits to sandtray counseling exist. Most of these benefits relate to feelings of safety. As a non-verbal technique, sandtray counseling can help alleviate resistance for students who are not comfortable verbalizing their story and can provide an effective communication mechanism for students who struggle with verbal skills (Kestly, 2015). Another benefit of sandtray counseling is that it provides a soothing sensory experience for those children needing to self-regulate (Homeyer & Sweeney, 2017). Sandtray counseling is nonthreatening in that it requires no artistic ability. The

sandtray experience provides students a safe distance from which to examine experiences, and it provides an opportunity for therapeutic metaphors to develop (Homeyer & Sweeney, 2017).

Students can communicate in metaphor or “play” without referring to themselves. Sandtray counseling provides an opportunity for the student to experience control regarding their issues.

The abovementioned benefits make sandtray counseling an especially appropriate and safe technique for those students working through trauma, who can be retraumatized by being asked to retell or relive their story (Homeyer & Sweeney, 2017).

Sandtray Counseling on a Shoestring

Although practitioners can potentially spend a considerable amount on sandtray materials, school counselors and school-based counselors often do not have access to many funds. Students can benefit from even low budget materials. For trays, the typical recommendation is a rectangular plastic or wooden tray of 20”(W)x30”(D)x4”(H) (Carmichael, 1994), painted blue at the bottom to represent water and light blue in the sides, to represent sky. However, other less expensive containers can be used as well, such as clear plastic storage boxes with blue lids that can be placed under the tray when in use (Carmichael, 1994). Practitioners can use plastic food containers or plastic planter water trays bought at home-improvement stores. A six-drawer clear plastic storage container on wheels works well, with each drawer the same size and approximately the recommended size. Individual students or groups of up to six students can use these trays. Practitioners can paint trays blue on the bottom, tape blue construction paper to the bottom, or simply set the tray on top of a blue piece of construction paper. It is important that trays be small enough to view the entire scene in a single glance, while large enough so as not to restrict students’ expression (Homeyer & Sweeney, 2017).

Many choices of various textures and colors for sand exist. However, practitioners can buy play sand very inexpensively at home improvement stores. Practitioners can substitute other medium for sand if needed. In the wake of the coronavirus, practitioners could use small glass or plastic beads, which can be disinfected (Homeyer & Sweeney, 2017). Lentils work well and can be disinfected in a solution of 1/3 c bleach to 1 gallon water (as suggested by the Centers for Disease Control, [CDC, 2021]), rinsed, and reused. Although sandtray experts often recommend offering both a dry and a wet sandtray (Homeyer & Sweeney, 2017), some school-based practitioners (Carmichael, 1994) have found wet sand not to be practical or necessary in a school environment. For less mess, one can provide students with a spray bottle of water, so students can mold the sand without getting the sand so wet it is not be usable for the next student.

Collecting miniature figures can become a fun hobby but is also challenging when working with a small budget. When starting a miniature collection, it is helpful to enlist the help of family, friends, parents, and teachers, who donated fast food children's meal toys, old jewelry, used cake decorations, holiday decorations, small toys, etc. Practitioners can use dice, colored stones, and objects from board games. The trap and mice from the "Mouse Trap" game was a favorite of this author's students, as were houses from "Monopoly." Discount stores, dollar stores, and party stores can provide army personnel and vehicles, small cars, small animals, and small holiday decorations. Practitioners can collect "natural" objects such as interesting stones, twigs, and seashells. They can peruse hobby shops, import stores (Carmichael, 1994), and garage sales. As not all donated items will be appropriate for use as sandtray miniature figures, Homeyer and Sweeney (2017) caution counselors to be intentional in selecting appropriate miniature figures. To initiate a collection, practitioners can inexpensively buy sets or bags of small toys from grocery stores, dollar stores, or toy stores (Homeyer & Sweeney, 2017). It can be

helpful to purchase specific miniature figures not donated or easily found, such as an altar and a wishing well. Sandtray “starter kits” are available for under \$100 for those practitioners with little time to collect. To find these, one just needs to google “sandtray miniature starter kit.” The recommendation in the literature is a collection of about 300 miniature figures to provide enough objects to represent children’s many experiences, although some practitioners use as many as one thousand (Homeyer & Sweeney, 2017). Beginning practitioners can start by collecting a few miniature objects from each category recommended by Homeyer & Sweeney: 1) people, 2) animals, 3) buildings, 4) transportation, 5) vegetation, 6) fences/gates/signs/bridges 7) natural items, 8) fantasy, 9) spiritual/mystical, 10) landscaping 11) household items, 12) miscellaneous items related to medical needs, drugs, and alcohol, 13) tools to move the sand for those children not wanting to touch the sand (2017, pp. 27-31). In the author’s experience, children made much use of sports related objects such as a soccer ball and a baseball player cake decoration. As it is important counselors use interventions that are culturally appropriate to the populations they serve, miniature figures should include people from various cultures as well as other objects such as musical instruments and food from various cultures, especially cultures representative of students (Bratton et al., 2009). Aim to include houses ranging from single family dwellings to apartments and items resembling the local vegetation (Homeyer & Sweeney, 2017). Although the above recommendations are ideal, miniature figure collections are a work in progress, and children were able to benefit from the author’s less-than-ideal collection.

Practitioners should store miniature figures according to category, making it easier for students to find the figurine they want. This also provides predictability, which adds to students’ sense of safety. Many counselors use shelves to display miniature figures, or mobile sandtray carts that contain the sand tray and provide storage for the miniature figures (Homeyer &

Sweeney, 2017). Not having funds or space for either, this author stored miniature figures in shoe-box size clear plastic storage boxes, labeled for each category.

Conducting Sandtray Counseling

Sandtray is a flexible intervention. School counselors (and other school-based practitioners) can use sandtray with children, interns, and teachers. Sandtray works well as a single, one-time intervention or it can be used repeatedly in longer-term counseling. School counselors can use sandtray as the only intervention or in conjunction with other interventions such as expressive arts activities or activity therapy. They can use it with individuals or groups and with students experiencing various issues.

This author used the 6-step protocol outlined in Homeyer and Sweeney (2017), as shown in Table 1. Step 1. Prepare the room. Typically, school counselors or school-based counselors will be using rooms that are multipurpose and will need to set out the miniature figures before each session. School counselors do best to arrange the miniature figures by category and in the same order every session to provide consistency. Using sand trays at student-sized “table height” is helpful to most students (Homeyer & Sweeney, 2017). To comfortably accommodate individuals and groups a 6-person round group table can be ideal. Ensure access is unimpeded from sandtray to miniature figures. It is helpful for students to be able to move around the groups of miniatures to see everything provided (Bratton et al., 2009). Place the boxes of miniature figures on the table or on the floor depending on number of children participating and provide an opportunity for children to walk around and inspect the boxes from all angles. The counselors’ chair should be close enough to see the student working but far enough away as to not be intrusive. (In Step 4, the practitioner can move their chair beside the student).

Step 2. Introduce the sand tray and miniature figures (Homeyer & Sweeney, 2017). Encourage students to explore the sand and miniature figures with sight and touch (Shen & Armstrong, 2008). Point out some of the categories (Homeyer & Sweeney, 2017). Counselors can use either a non-directive or a directive prompt. An example of a non-directive prompt would be to ask students to look at the miniature figures, select a few that “speak” to them, and put them in the sandtray. Then assure students they can use as many additional miniature figures as they like to “create their world” or “create a scene” in the sand. Inform them that you will sit quietly while they work, and they can let you know when they are done (Homeyer & Sweeney, 2017). A more directive prompt would be “create your world since the divorce.”

Step 3. The students’ creation of their sandtray (Homeyer & Sweeney, 2017). The counselors’ role is to sit quietly and provide a safe space for the student, while mindfully observing the student’s process (Homeyer & Sweeney, 2017), being fully present (Kestly, 2015) without interfering. Notice how the student interacts with the miniature figures and the sand. Notice whether they select objects purposefully or not, whether they are relaxed or intense, hesitant, or determined. Notice how involved in the experience they are (Homeyer & Sweeney, 2017). Although the counselor’s role is to remain silent and provide safe space for the student, occasionally a therapeutic reason to speak may arise, such as facilitating ease for an anxious or reticent student. With young children who tend use the sandtray as a sand box, it is appropriate for the counselor to verbally “track” (Homeyer & Sweeney, 2017).

Step 4. Processing the sandtray (Homeyer & Sweeney, 2017). Once the student has indicated their sandtray is complete, both the practitioner and student take some time to look at the tray in its entirety and get the feel of the tray. Notice if the tray is organized or chaotic, peaceful or aggressive. Although Humanistic counselors believe healing happens just through the

process of creating a sandtray, and some counselors prefer not to ask questions, often counselors may want to ask some skillful questions to help students explore and process their sandtrays (Homeyer & Sweeney, 2017). As the sandtray experience is a right-brain experience, Bonnie Badenoch (2008) recommended first asking students what they are feeling as they look at their tray to stay in the right brain emotional world of the student before abruptly moving on to the left-brain world of words. Facilitate student processing by asking the student to give their sandtray a title. Follow up with asking the student to tell you about their sandtray. For a reluctant student, it could be less threatening to ask them to make up a story about their sandtray (Homeyer & Sweeney, 2017). The practitioner then summarizes the student's story, to show understanding and to provide an opportunity to correct any misunderstanding (Homeyer & Sweeney, 2017). It can then be helpful to say, "Tell me more about what is happening here" or invite the student to discuss specific figures. Ask the student, "Are you in here?" rather than "Where are you in here?" so as not to presuppose the student is represented in the tray (Homeyer & Sweeney, 2017, p. 60). Use "I notice...." observation statements such as "I notice you did not include your father in this scene" or "I notice this little figure laying in back of the truck is much smaller than these other figures." A counselor could ask the student, "What would this one say to that one?" "What happened just before this?" or "What is going to happen next?"

It is essential the counselor refrain from interpreting the objects in the sand tray, which imposes the counselor's meaning (Homeyer & Sweeney, 2017) and, instead, cultivate an attitude of curiosity about the student's unique experience and meaning. The counselor interpreting the sandtray may be experienced as intrusive and may interrupt and disrespect the student's own thought process. As stated earlier, through the sandtray experience, students may be able to access sensitive material they have not yet expressed. The sandtray provides a safe distance from

which the student can look at their experience. Therefore, the counselor should use the metaphor the student uses in speaking about the tray (Homeyer & Sweeney, 2017). For example, one child arranged army men and army vehicles on opposite sides of the tray, with a small human figure under the sand in the middle. This might or might not have been indicative of the child feeling caught in the middle of divorcing parents. Rather than say, “You are feeling caught in the middle of your parent’s fighting, and you want to hide,” it is more facilitative to say, “This little one is caught in the middle of these two groups, and is hiding.” Only in the case where the student indicates who the object represents should the counselor refer to the student’s situation.

Similarly, if a student does not want to discuss their sandtray, the counselor can respect that decision, trusting that healing occurs in the creation of the sandtray, regardless of whether or not the student puts words to the experience. (Homeyer & Sweeney, 2017).

As the sandtray provides safety, students may communicate experiences of abuse in the tray, as children sometimes do in play therapy using toys (Homeyer, 2001). Counselors must exercise good judgement before making a mandated report based on metaphors shown in the sandtray, without verbal confirmation from the child. Not only may an image mean something different to the student than it does to the counselor, but students may reveal fantasies as well as realities in the sand tray. On the other hand, many abused students never verbally report their abuse (Homeyer, 2001). The sandtray could appropriately be weighed along with other information in making decisions about reporting to protective services.

Given the possible need for processing time, the counselor needs to give thought to how much time to allow for the session and for each part of the session. This author typically allowed 30-45 minutes for individual sessions, and 45-60 minutes for small group counseling sessions, with 15-30 devoted to sandtray creation. Obviously, processing with groups takes a larger

percentage of allotted time than with individuals. Students will appreciate a five-minute and a one-minute warning before reaching time to complete the tray, and also before time to end the session, so that they can reach a place where they are comfortable stopping (Landreth, 2012).

Step 5. Dismantling the creation in the sandtray and returning the miniature figures (Homeyer & Sweeney, 2017). Although practitioners have differing views, a common recommendation is to not dismantle the sandtray until after the client has left the room, to honor the work and not “tear apart” the client’s words and experiences (Homeyer & Sweeney, 2017). This may or may not be feasible in a school setting, due to the time it takes to walk a student back to class, walk back to the counseling office, dismantle the sandtray, and pick up another student. Time might better be spent in a session with another child. Counselors working in a school setting will need to use their own judgement on this issue. Decisions about cleaning may depend on the student and situation. This author typically let the student decide whether or not to put up their objects. As students are used to picking up after themselves in school, they often put up the objects automatically. With permission, a counselor could appropriately join in putting away the objects, but only after allowing children to put away their first few objects themselves (Homeyer & Sweeney, 2017).

Step 6. Documenting the sandtray session (Homeyer & Sweeney, 2017). It can be helpful to take a photo of the completed sandtray, to put in the student’s file for documentation. Students or practitioners can later view these photos, discovering themes, evidence of progression, or other helpful information. With student permission, practitioners can take photos with an inexpensive digital camera and print them. Keep in mind that, like students’ drawings or art projects, any work the student does in the counseling room is confidential.

(Insert Table 1, separate document).

This same six-step process applies to groups as well as individuals. Group counseling is an efficient and effective way for school practitioners to counsel multiple students at once (Stone & Dahir, 2016). As in group play therapy, children should be within twelve months of age, typically same sex, and the counselor should screen children for appropriateness for the group (Bratton & Ferebee, 1999). This author preferred groups of two or four children, due to a few experiences of one child being not included by the other two children in a group of three. Due to the time constraints of the school-setting, this author found 45-minute counseling groups of six not to provide enough time for adequate processing. Although it was beneficial to use sandtray as part of divorce and grief groups, it is not necessary that all children be experiencing the same issue. In group settings, it is especially important the students be given the decision about whether or not to share or how much to share verbally about their sandtray. Some younger children may not be developmentally ready to attend to the processing of peers in the group and may need to continue to quietly play with the sand and objects as peers are sharing.

Sandtray Stories: Case Examples of Various Uses

Jack

Jack, a 5th grader, was receiving individual counseling due to becoming academically at-risk after the divorce of his parents. After being prompted to build his world “since the divorce”, he built a sandtray in which he placed a female figure in the middle, holding a tray in each hand. Near the female character, he placed a strong cartoon “George of the Jungle” flexing muscle. In front of the female figure was a baby surrounded by tiny objects. When asked to tell what was happening in his tray, he identified the figures as his mother, his older brother, and baby brother. He said mother was busy working and cleaning, his older brother was doing homework, and the baby brother was “making a mess everywhere.” When asked, “Are you in this tray?” he took a

relatively smaller object of a male and placed it on the side of the tray away from the other figures, with the face turned toward the side of the tray. He said, “I was sad, so mom told me to go to my room.” When the author “noticed” that there was no father in the tray, Jack took a large monster cartoon character and angrily placed it outside the tray, saying “He’s not in it!” Then Jack angrily picked up the object representing the father and took it all the way across the room and placed it on the chalkboard tray, saying, “That’s where HE is!” Words were not enough to express the anger and hurt he felt regarding his father. Jack’s tray helped the author in understanding and reflecting his feelings, thoughts, and experiences. His tray also assisted the author in her own process of case conceptualization. It was amazing how aptly Jack portrayed his mother, a newly divorced working mother of three, “with her hands full,” his oldest brother who excelled in school and sports as the “hero,” and himself as the “lost child” (Wegscheider-Cruse, 1989). Based on her conceptualization of Jack as “the lost child” the author was able to recommend his mother allow him to participate in an after-school drama class in which he gained attention – family and otherwise – on stage.

Catalina

Catalina a fourth grader, was participating in an activity-based divorce group, where sandtray was one of the interventions used. Catalina was experiencing intense distress over recent custody changes of herself and younger brother in the contentious battle occurring between her divorced parents. When prompted to build her world, she created a scene with large scary figures on opposite sides of the tray and two little mice under a trap in the middle. When the author reflected the mice were “caught in the middle” Catalina took handfuls of sand and dumped them on top of the two mice to indicate the depth of feeling went beyond being

“caught.” Again, words were not sufficient to describe her pain. Her peers, however, were able to normalize her feelings.

Jasmine

There is a myriad of other uses for sandtray. Jasmine, a fourth-grade girl receiving special education services for academic, speech, and emotional issues taught the author that sandtray could be an effective communication device and way to sooth dysregulation. Upon hearing loud distressed howling coming from the hallway, the author went into the hall and saw Jasmine collapsed on the floor in tears. The author invited Jasmine into her office, and as she was too distressed to speak, invited Jasmine to “show” her what was wrong using the miniature figures in the tray. Jasmine easily created a series of three trays. In the first tray, she depicted a girl figurine watching from the sidelines as other girl figures were playing soccer. In the second, she depicted a large car coming and picking up all the girl figures and taking them away, leaving the isolated figure alone. In the third, she depicted the girl figures at a party, with the isolated girl figure standing outside the tray. Jasmine very skillfully was able to communicate to the author that other girls in her class had been invited to a birthday party, and she was left out. By the end of the session, Jasmine was sad but composed. Jasmine continued to come into the school counseling office to use the “dolls” and the sand when she was experiencing distress. This greatly minimized her dysregulation issues. As Jasmine continued to “show” the author and even “tell” the author about situations where she was being excluded or not treated kindly, the author was able to conduct a grade-level intervention (with the help of a video recommended by Jasmine on the topic of her condition) to increase Jasmine’s peer acceptance and help her classmates use respectful and more sensitive behavior towards her.

Adults and Supervisees

Counselors can impactfully use sandtray with the adults working in schools, as well as with students. Many counselors supervise school-counselors or school-based counselors in training. Sandtray has been used effectively by counselors in supervision (Perryman et al., 2020). Through sandtray, supervisees can explore issues such as their own experience as a counselor-in-training or their conceptualization of a client. For example, one supervisee chose a wishing well to represent herself. She said, “It’s broken, like me, but it’s still standing and doing the work it was meant to do.” (Note: The author did not intend to provide a broken item. It was a fortunate accident). As an example of the use of sandtray as a means of case conceptualization, one supervisee was concerned about a student who was struggling in part because his teacher was frustrated with him. The supervisee created a sandtray about what she saw as the students’ struggle and what he needed from his teacher. The supervisee was able to share a photo of this tray with the teacher as a nonthreatening communication device. The result was that the teacher was able to understand this student, empathize, and provide more support.

In addition to individual or small group use, practitioners can effectively use the sandtray technique with large groups of adults. Recently, as part of a workshop on trauma, the author conducted group sandtray with 20 school counselors returning to school after working remotely during the current COVID-19 pandemic. Sandtray was used to help school counselors understand and integrate their own trauma, while teaching them an effective means to treat the anticipated increased numbers of traumatized students. The author has also used sandtray as a means for master’s level professional counseling students to process their semester in groups of over 20. Groups of 20 or 30 adults can inexpensively be accommodated using planter saucers with sand box sand. Large group sandtray experiences can even be accomplished through having

participants bring or draw their own miniature figures, utilizing a piece of paper in place of a sand tray (Bennett & Homeyer, 2018).

Conclusion Comments

With appropriate training, sandtray counseling can be a valuable addition to any practitioners' toolbox. Conducting sandtray counseling does not have to be expensive. For those practitioners providing services in schools, sandtray counseling is a developmentally appropriate intervention, particularly for preadolescents, who may be old enough not to feel comfortable with playroom toys and yet are not developmentally or cognitively ready to use a primarily verbal intervention. Especially now, amid the COVID-19 epidemic and racial inequity, students (and teachers) will need interventions that are appropriate for trauma and grief. Sandtray is one such developmentally appropriate and culturally sensitive intervention that allows students to process sensitive issues of trauma and grief caused by COVID-19 and heightened awareness of racial inequality using their own metaphors. Sandtray counseling can provide a safe and soothing bridge between experience and expression, to facilitate integration and healing.

References

- American Counseling Association (2014). ACA Code of Ethics. Alexandria, VA: Author.
- Badenoch, B. (2008). *Being a brain-wise therapist: A practical guide to interpersonal neurobiology*. W.W. Norton & Co.
- Bauer, K. W., Chriqui, J. F., Andreyeva, T., Kenney, E. L., Stage, V. C., Dev, D., Lessard, L., Cotwright, C. J., & Tovar, A. (2021). A safety net unraveling: Feeding young children during COVID-19. *American Journal of Public Health, 111*(1), 116-120.
<https://doi.org/10.2105/AJPH.2020.305980>
- Bennett, M., & Homeyer, L. (2018, October 3-7). *Understanding the journey toward healing in play therapy* [Conference session]. Annual Association for Play Therapy Annual Conference, Phoenix, AZ, United States.
https://cdn.ymaws.com/www.a4pt.org/resource/resmgr/annual_conference/2018_APT_Conference_Brochure.pdf
- Bratton, S. C., Ceballos, P. L., & Ferebee, K. W. (2009). Integration of structured expressive activities within a humanistic group play therapy format for preadolescents. *The Journal for Specialists in Group Work, 34*(3), 251-275.
<https://doi.org/10.1080/01933920903033487>
- Bratton, S. C., & Ferebee, K. W. (1999). The use of structured expressive art activities in group activity therapy with preadolescents. In D. S. Sweeney & L. E. Homeyer (Eds.), *The handbook of group play therapy: How to do it, how it works, whom it's best for* (pp. 192-214). Jossey-Bass.
- Carmichael, K. D. (1994). Sand play as an elementary school strategy. *Elementary School Guidance & Counseling, 28*(4), 302-307. <https://www.jstor.org/stable/42871132>

Centers for Disease Control (March 1, 2021). *Guidance for cleaning and disinfecting public spaces, workplaces, businesses, schools, and homes.*

<https://www.cdc.gov/coronavirus/2019-ncov/community/reopen-guidance.html#print>

Corey, G. (2017). *Theory and practice of counseling psychotherapy* (10th ed.). Cengage.

Flahive, M., & Ray, D. (2007). Effect of group sandtray therapy with preadolescents. *Journal for Specialists in Group Work*, 32(4), 362-382. <https://doi.org/10.1080/01933920701476706>

Ginott, H. G. (1994). *Group psychotherapy with children: The theory and practice of play therapy*. McGraw-Hill.

Godoy, M., & Wood, D. (2020, May 30). *Coronavirus by the numbers: What do coronavirus disparities look like state by state?* NPR. <https://apple.news/AQONqOjl6Rd-exmgBlqc-UA>

Homeyer, L. (2001). Identifying sexually abused children in play therapy. In G. L. Landreth (Ed.), *Innovations in play therapy: Issues, processes, and special populations*, (pp. 131-154). Routledge. <https://doi.org/10.4324/9780203768440>

Homeyer, L., & Sweeney, D. (2017). *Sandtray therapy: A practical manual* (3rd ed.). Routledge. <https://doi.org/10.4324/9781315651903>

Kestly, T. (2015). Sandtray and storytelling in play therapy. In D. A. Crenshaw & A. L. Stewart (Eds.), *Play therapy: A comprehensive guide to theory and practice* (pp. 156-170). Guilford Press.

Landreth, G. L. (2012). *Play therapy: The art of the relationship* (3rd ed.). Routledge.

McKegney, C. C. (2021). Understanding child development in the assessment of stress in children amidst the COVID-19 pandemic. *Pediatric Nursing*, 47(1), 48-51.

- Partelow, L., Yin, J., & Sargrad, S. (2020). *Why K-12 education needs more federal stimulus funding*. Center for American Progress.
- https://cdn.americanprogress.org/content/uploads/2020/07/20125644/K12-Stabilization-Funding-2.pdf?_ga=2.35376225.1151240418.1614368788-1562411500.1614368788
- Perryman, K. L., Houin, C. B., Leslie, T. N., & Finley, S. K. (2020). Using sandtray as a creative supervision tool. *Journal of Creativity in Mental Health*, *16*(1), 109-124.
- <https://doi.org/10.1080/15401383.2020.1754988>
- Piaget, J. (1977). *The development of thought: Equilibrium of cognitive structures*. Viking Press.
- Rock, E., & Leff, E. H. (2015) Ch. 16: The professional school counselor and students with disabilities. In Bradley T. Erford (Ed.), *Transforming the school counseling profession* (4th ed., pp. 350-391). Pearson.
- Seigel, D. J., & Bryson, T. P. (2011). *The whole-brain child: 12 revolutionary strategies to nurture your child's developing mind*. Random House Publishing Group.
- Shen, Y., & Armstrong, S. A. (2008). Impact of group sandtray therapy on the self-esteem of young adolescent girls. *The Journal for Specialists in Group Work*, *33*(2), 118-137.
- <https://doi.org/10.1080/01933920801977397>
- Stone, C. B., & Dahir, C. A. (2016). *The transformed school counselor* (3rd ed.). Cengage Learning.
- Wegscheider-Cruse, S. (1989). *The miracle of recovery: Healing for addicts, adult children and co-dependents*. Health Communications, Inc.