## **Eastern Illinois University** The Keep

Faculty Research & Creative Activity

Counseling & Student Development

January 2010

# My real home is inside

Angela M. Yoder Eastern Illinois University, amyoder@eiu.edu

Paige Spangler

Follow this and additional works at: http://thekeep.eiu.edu/csd\_fac

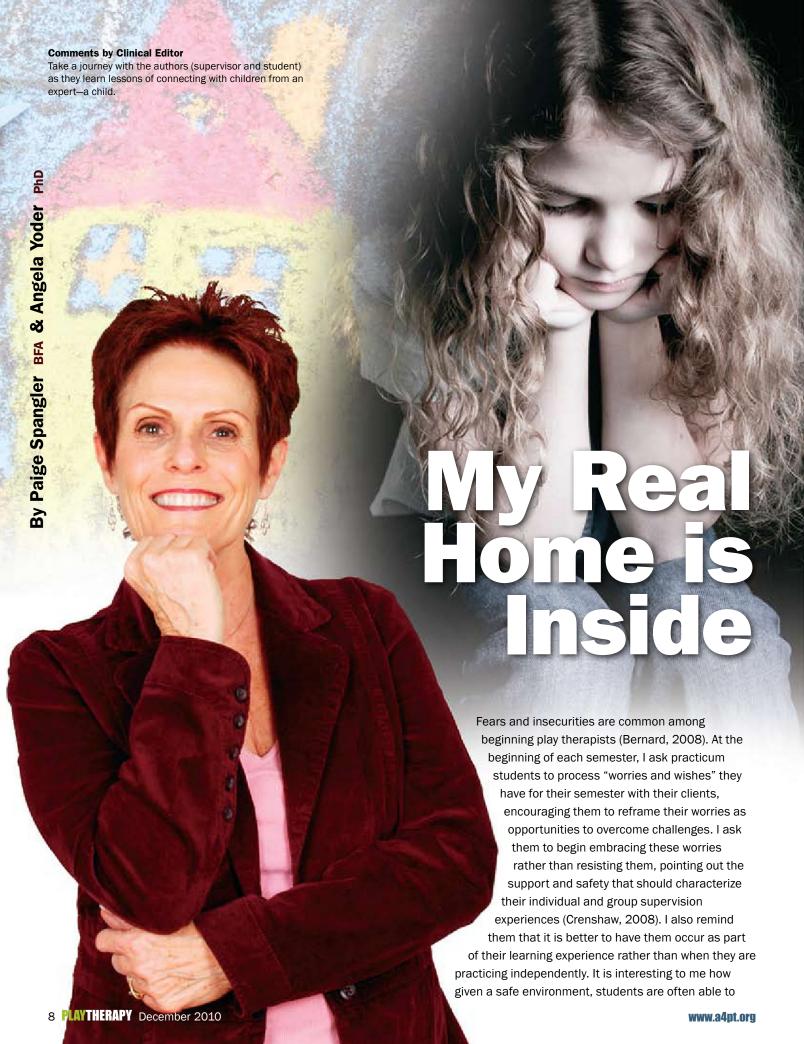


Part of the Student Counseling and Personnel Services Commons

## Recommended Citation

Yoder, Angela M. and Spangler, Paige, "My real home is inside" (2010). Faculty Research & Creative Activity. 46. http://thekeep.eiu.edu/csd\_fac/46

This Article is brought to you for free and open access by the Counseling & Student Development at The Keep. It has been accepted for inclusion in Faculty Research & Creative Activity by an authorized administrator of The Keep. For more information, please contact tabruns@eiu.edu.



sense their growth areas (Bratton, Ceballos, & Sheely, 2008). Even more amazing is how the universe often serves up the very best learning experiences to address such challenges. I knew going into the semester that Paige was one of our most gifted graduate clinicians. What she and I both didn't realize was that the thing she most feared ended up being one of the most powerful therapeutic experiences for her client.

Paige and Sheila's story

As a graduate student in my first semester working with clients, I was formulating a list of worries before I even began. I would be working with highly disenfranchised clients while carrying a deficient toolbox (due to lack of real world experience). To add to these insecurities, my concerns were heightened by the fact that I am a very emotional individual. In most circumstances I feel that this is what helps me connect to others with ease as I am rarely, if ever, veiling who I am. However in my preconceived notions of what it would be like to counsel others, particularly children of trauma, I wondered if my sensitivity would be too permeable and that the grief of my clients would become mine. Upon reflection over my semester experience I believe that by using play therapy so consistently with clients it became an instinctual way to care for others and myself (Bratton, Ceballos, & Sheely, 2008). Without realizing it over the semester, I was applying the fundamentals of play therapy to my life. I began developing ways of coping with the demands of

clinical work; often applying the same techniques in my life that I was using with my clients: such as the practice of presence, unconditional positive regard, and creating an arena for methods of boundless expression. I started working on how I could think about my clients in ways that would be helpful to them and me. I could mull over everything, all the traumas, and sit in guilt, or I could use this time creatively. So what I did was look at these children's burdens as their strengths and to see the art and beauty in their defenses. I chose to treat myself with kindness by allowing for mistakes and messes, and most importantly to be creative with my expression. For me this

meant formulating some imagery based on their play themes; I wrote poetry from their point of view. I also began to learn that what I thought would be my detriment ended up being my strength. My emotionality and vulnerability with clients transparently demonstrated how special they were to me. For clients who have been forgotten and obliterated by their original caregivers, their environment and personal defenses often keep a space (a large space) around them. When a present adult is transparent, it can become easier to enter that space, or better

As counselors we try to see the world through the eyes of our clients. In order to conceptualize Sheila's world I put on my "Sheila vision" goggles and wrote a poem from her point of view adding what I saw as the meaning within her story.

## My real home is inside

By "Sheila"

My real home is not safe, yet it is the most real to me. They removed me Took me nowhere Now here, I long for somewhere else. In the space between that place and where I want to be I write the words I need to write. What I write changes me My words transform into a map This map will guide me as I hunt for a home. I can find a place without danger, I can find a place worthy of me, I can write a new life. And there will be a day, A day when I will realize that my real home is inside. My real home is inside of me.

yet, create conditions that generate a desire in the client to close the gap until there is little to no space between remaining. This choice by the client can allow for closeness with those who have earned it. This was particularly important for a client named "Sheila."

During my first week at my site, I met Sheila, an eight year-old female in foster care. I found Sheila to be engaged and appropriately guarded. There was a clear sense of approval seeking from the client as we sat and talked not unlike most first meetings, but from Sheila I felt an additional hunger. She had a longing in her eyes that went deep. This was not lost on me for it demonstrated to me the weight of the work I would need to do with this client. Throughout our work together Sheila often referred to a desire to return to her "real home." In my case conceptualization. I saw this as her theme. I wrote a poem from her point of view entitled "My Real Home is Inside". Creating personal writings was my way of externalizing some of the difficult feelings that come along with

working with traumatized children. It

also helped me to conceptualize a treatment plan in that the client had a deep desire to return to a home that was real. She could not return to this literal home of origin which was abusive, but perhaps she could discover the essence of a home in another way. It struck me as I wrote her poem that her strength lies within her own ability to tell her story.

I dreaded termination with all my clients, but with Sheila I was especially hesitant because there were recent negative changes in her foster home. On my last day, Sheila arrived disheveled; she was really struggling. In reflecting upon what I felt an ending could be for her, I thought it would be therapeutic to have her do

www.a4pt.org December 2010 PLAYTHERAPY 9

a "safe place" drawing. In my mind, if she could develop that space during our last session, then when we are no longer meeting she will have a "place to go." When I suggested this to her, she surprised me with her enthusiasm at the idea. She got settled in to the drawing area and began furiously writing as a determined author. She was not drawing as we had discussed, so I was very curious as to what she was concocting. She finished and read her note aloud describing how she had no place safe to go. She spoke of how she hated herself for letting the "new girl" in the foster home ruin her house and of a desire to return to her "real home" (with her biological mom). It was hard to hear as it told of her pain so vividly. How could I leave her in this state? I offered another opportunity to do a drawing of a safe spot to escape what she had just described and she replied, "I'm just too angry to do that right now." This still stuns

me to think of now, that this little girl had the courage to say that. So I responded, "That is so good that you can tell me that." I was very proud of her.

We then sat for a few moments. She eventually picked up the small dry erase board and wrote me a message: "I love you, Paige." I started to get choked up at her words. I then asked if I could write something back and she agreed. I chose to celebrate her with words and told her how amazing I thought she was. We exchanged messages of this nature back and forth. I even thought to myself that I was "in the clear." We were able to connect through our messages and while my heart was full, I wasn't feeling the emotionality I so feared. Then Sheila took my breath away with her next message. This session was videotaped for supervision and when you hear me read her note out loud, you can hear my initial stumbling over her words until I

"Creating personal writings was my way of externalizing some of the difficult feelings that come along with working with traumatized children."



very quiet. Tears start welling up in my eyes and I can't contain my feelings of joy over her depth. She had written: "I love you Paige for loving me back." This client's awareness is truly astounding. For her to see, understand, and express in words the experience of loving someone based on their care for her is just absolutely mind-boggling. Based upon her history of abuse and neglect, witnessing love based on care was likely a rare - if not unseen - event in her life. Sheila noticed my emotion and inquired, "Teary-eyed?" I nodded yes, as I was rendered speechless by my overwhelming emotions. She let out a short laugh and began to draw a face with tears coming down both cheeks. I asked if the picture was of me (which I regret, perhaps it was of her?) and she said it was. I asked if I could add something to the drawing. She agreed. I grabbed a marker and added a heart to the figure she had

realize what it says. I go

www.a4pt.org



drawn. Around the heart I drew rays of light radiating out and I explained that while I was so sad that this was our last day, I was so full of joy that I got to meet and be graced by her presence in my life. As I explained this to her, she began erasing the tears off the face she had drawn. We were able to end our last session on this awe-inspiring note. In retrospect, this ending modeled all that is required of a farewell: mourning and celebration. I'm so very proud of my client and the depths she reached; somehow she managed to demonstrate the depth of a much older human being.

While I was blown away by the work of my client, I was extremely concerned that I had broken some kind of cardinal counselor rule by showing such emotion during a session. Because of this and my impending vulnerability before my review I was very worried that others would see this as me making a grave error with this client. It was not until I saw the tears in my supervisor's eyes as we reviewed this session that I realized how phenomenal it had been. What culminated with her was that I ultimately mourned the loss of her, which showed her how deeply she was valued. In modeling an appropriate and openly emotional farewell she observed someone who saw her worth. Maybe those glimmers of unconditional regard speak volumes because this is something that will reverberate within the client for years to come. When someone finally says to us "I see you, I believe you" we begin to feel more three-dimensional for our life is not an illusion or a mirage; it is being shared. Perhaps we finally feel real when others see us in this manner and still choose to cherish us. Sheila's concept of returning to her "real home" - though in her mind literally meant being with her biological mom - hits the target conceptually in that it speaks to all human beings' quest to have safety, unconditional regard and worth. This had to be modeled in counseling for it never happened in her original home or foster homes. The care in counseling ideally starts a spark within the client to create an internal self-care, like a home from within. This gives some control back to the client. The "home inside" is theirs', not to be disturbed or taken away. Sheila was so cherished in counseling that I believe this incited her drive to continue to express herself and to care for her real home inside.

#### **Epilogue**

During our last supervision session, Paige hesitantly played her last session with Sheila. She, indeed, was quite concerned about how she had managed her emotionality. As supervisors, we must assist our supervisees in managing the complicated, difficult emotions that arise during clinical work with children (Hansen & Dagirmanjian, 2008). While we normally caution students about the dangers of processing their emotions during client sessions, Paige's tears were not about her issues. She had quite successfully worked through the challenges of termination with clients. These tears were courageous ones in that they demonstrated to this child that she was special and cared about. As Paige struggled with whether or not she should

have let her tears show, my question to her was this: "How many people do you suppose have shed tears when Sheila had to leave?" This child had never experienced a "good" bye. In fact, she had been shuffled from home to home without anyone showing her that they cared much whether she was there or not. My tears communicated to Paige what a beautiful moment she had shared with this client and was an interesting parallel process to her transparency with Sheila (Hanson & Dagirmanjian, 2008). What Paige feared most was quite possibly the most healing aspect of her work with this phenomenal child. Her story is a powerful lesson for beginning play therapists: we need not dread our fears, but embrace them and await the tremendous life lessons we may learn. Paige's work with Sheila is also a beautiful illustration of how play therapists can utilize the power of play in their own quest to manage the pain of clinical work with abused children, as well as how transparency can be transformative.

#### References

Bernard, J. (2008). Fundamentals of clinical supervision (4th ed.). Needham Heights, MA: Allyn & Bacon.

Bratton, S., Ceballos, P., & Sheely, A. (2008). Expressive arts in a humanistic approach to supervision. In Drewes, A., & Mullen, J. (Eds.), *Supervision can be playful*. New York: Jason Aronson.

Crenshaw, D. (2008). Supervision of play therapists working with aggressive children. In Drewes, A., & Mullen, J. (Eds.), Supervision can be playful. New York: Jason Aronson.

Hansen, S., & Dagirmanjian, J. M. (2008). The supervision process: Working with traumatized children in an outpatient mental health clinic. In Drewes, A., & Mullen, J. (Eds.), Supervision can be playful. New York: Jason Aronson.

Pipes, R., & Davenport, D. S. (1999). *Introduction to psychotherapy: Common clinical wisdom* (2nd ed.). Needham Heights, MA: Allyn & Bacon.





Paige Spangler

Angela Yoder

#### About the Authors

Paige Spangler, BFA, is a master's candidate in Clinical Counseling wishing to aid other counselors with self-care techniques by using creative expression and play therapy. She has co-authored this article with her professor, Angela Yoder, PhD, HSPP, a licensed psychologist and assistant professor in the Department of Counseling & Student Development at Eastern Illinois University. She also teaches play therapy and has practiced it since 1994. amyoder@eiu.edu

# In a Perfect World

you wouldn't have to worry about lawsuits...



# Professional Liability Insurance for Counseling Professionals

But in the real world, you are wise to join over 1,000,000 healthcare and counseling professionals who depend on the professional liability insurance offered through Healthcare Providers Service Organization (HPSO) for their peace of mind.

### So make the wise choice.

Apply today for up to \$1,000,000 each claim, up to \$5,000,000 aggregate professional liability coverage! Rates as low as \$123 a year for a full-time employed counselor! Students pay only \$29 a year!



Endorsed By:

Association for Play Therapy, Inc.

### Plus, you get these additional coverages at no extra cost!

- ✓ License Protection
- ✓ Defendant Expense Benefit for Lost Wages
- ✓ Deposition Representation
- ✓ Assault Coverage\*
- ✓ Personal Liability Protection
- Plus more!

Apply now! Go to www.hpso.com/apt6
For easy, quick and secure on-line application.

This program is underwritten by American Casualty Company of Reading, Plemsylvania, a CNA company, and is effered through the Healthcare Providers Service Organization Purchasing Group. Coverages, rates and limits may differ or may not be available in all States. All products and services are subject to charge without notice. This material is for illustrative purposes only and is not a contract. It is intended to provide a general overview of the products and services offered. Only the policy can provide the actual terms, coverages, amounts, conditions and exclusions, CNA is a service mark and trade name registered with the U.S. Patent and Trademark Office.

Healthcare Providers Service Organization is a division of Affinity Insurance Services, Inc.: in CA (License #0795485), MN & DK, AIS Affinity Insurance Agency, Inc.: and in NY, AIS Affinity Insurance Agency.

© 2010 Affinity Insurance Services, Inc.

Call 1-800-982-9491 for more information.

CON-APT610

www.a4ut.org December 2010 PLAYTHERAPY 13