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## UNIT 11 OTHER THERAPIES

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### 11.0 OBJECTIVES

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After reading this unit, you will be able to:

- discuss about play therapy; and
- describe indigenous therapies like Yoga and meditation and mindfulness

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### 11.1 INTRODUCTION

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*The learners of BAPCH were having a session on BPCCI13 with Dr. Mahima (Academic Counsellor). Though before they started with the sessions they were having a general discussion when Dr. Mahima entered the classroom.*

**Dr. Mahima:** *Oh! looks like the class is busy in discussion. What are you discussing?*

**Salim (Learner):** *Maam, so far we have seen various therapies, therapies that focus on unconscious (psychoanalysis and psychodynamic psychotherapy), therapy that focus on behaviour and reinforcement (behaviour modification), therapies that focus on thought and therapy that focuses on thoughts, behaviour and emotions (REBT).....*

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**Sonali (Learner):** .....And Maam we also discussed about the therapies that focus on the individuals and his/ her potential to understand and solve his/ her own problems (Humanistic therapies).

**Salim (Learner):** Is there anything that is probably based on play or art etc.

**Dr. Mahima:** So that is what you were discussing. Well, learner, if you look at the unit 11 in BPC113 course material, it mainly talks about play therapy. And I think you all will be greatly interested in learning about the same. Also besides the play therapy, the unit will also focus on indigenous therapies.

**Navjyot (Learner):** Maam, by play therapy, we can guess that the therapy is implemented through play. But what are indigenous therapies?

**Dr. Mahima:** Well, counselling and psychotherapy though are western concepts, but they are not new to India. In India, attempts were made to understand and deal with various mental processes. In Indian context, there are various indigenous approaches like Yoga, meditation and mindfulness and these will be discussed under indigenous therapies.

From the above conversation between Dr. Mahima and the learners of BAPCH, it must be clear that we will mainly focus on play therapy and indigenous therapy in the present unit. We will first start with play therapy and then go on to discuss about indigenous therapies.

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## 11.2 PLAY THERAPY

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An interesting therapy that is often used to treat psychological illnesses especially in children is play therapy. Children are not very articulate and with difficulties in communicating their problems with parents and adults, play seems to be a good medium. Play therapy is much more than ordinary play.

Landreth (2012, page.11) defined play therapy as a dynamic interpersonal relationship between a child (or person of any age) and a therapist...who provides selected play materials and facilitates the development of a safe relationship for the child ... to fully express and explore self (feelings, thoughts, experiences, and behaviours) through play, the child's natural medium of communication, for optimal growth and development". The act of playing itself can be described as being therapeutic as was described by Winnicott (1971). Play therapy provides a conducive environment to the child or the client to explore his/ her uncertainties, fantasies fears, desired, pain, conflicts and so on.

Play therapy can also be explained as an interpersonal process wherein a trained therapist systematically applies the curative powers of play (for example, relationship enhancement, role-playing, abreaction, communication, mastery, catharsis, attachment formation, etc.) to help the clients resolve their current psychological difficulties and help prevent future ones. Play therapy techniques specify how to use the play materials so as to effectively implement the therapeutic powers of play (Schaefer, 1993).

The basic focus of play therapy is dealing with children. It helps children explore their life events and helps the therapist understand the influence of the same. It helps children communicate, explore repressed thoughts, buried

emotions. It allows them to address hidden traumas and through the process of therapy learn to experience personal growth. While therapy can also be used for adults, it is said to be important, effective and a developmentally critical tool for mental health. The best part of play therapy is that it can be done at the child's choosing and therapist's direction.

Play has always been an integral component of a child's journey growing up. He learns to be self-engaged as he plays, he educates himself through play. Play is an important agent of socialisation and can be fruitfully used as a coping tool in it being a therapy. Neurologically too, play has been considered to contribute significantly toward neural development. This leads to advancement in social skills, memory and emotional regulation. Play helps child-victims of trauma, come to terms, with play providing them a medium to vent. Furthermore, neuro-physical changes occur during play and techniques like role-play and expression activities, move trauma memories and sensations from the non-verbal areas of the brain (hippocampus, amygdala, thalamus, brainstem) to the frontal lobe where they can cognitively restructure and rewire themselves.

Psychotherapists often employ play therapy interventions. Children many a times have difficulty is verbalising what they are going through or having a trusted adult to express it to. They can often be misunderstood by adults as well. This is where play therapy comes in handy. It helps children their inner feelings and emotions without threat. Toys take greater meaning by being symbols of significant things the child has experienced. Play helps therapist to come down to the child's level and bridges psychological barriers. For this reason even behavioural, occupational therapists and social workers use play therapy interventions.

Play reduces pressure of being guarded on children. They are able to communicate in their own time and way. This control in their life helps them deal with the other things they have no control over. The execution of play therapy will depend on the therapist, the issue at hand and the child. Observation and interviews with the parents, teachers and the child are generally starting steps. This is followed by goal setting and charting an action plan. Boundaries and action limits on what is permissible and what is not is discussed with the child and its significant others.

The play therapist observes attachment patterns between the child and the parents, how the child reacts on separation and on re-uniting with them. Session to session behaviour changes and interaction with toys are closely noted and inferred.

During play children find solace and heal themselves, try to solve problems they are experiencing and even tend to act out their fears and anxieties. Play serves as a medium for catharsis. These inputs help play therapists to plan further course of action. It is to be kept in mind that play therapy sessions are customised to suit the individual needs of the child. A review of the therapy and its progress is to be taken timely. When parents, sibling or family members are involved in play it is called filial therapy. Understanding and improve family dynamics, conflict resolution and healing are achieved with filial therapy too.

One of the significant models of play therapy is Child Centered Play Therapy (CCPT). CCPT is essentially non-directive therapy that mainly focuses on acceptance and the child is not challenged during the activity. Thus, the

child can play during the sessions as he/ she wished to. The core principles of CCPT are as follows:

1. The play therapist needs to create a relationship with the child that is sincere as well as friendly.
2. There is acceptance.
3. The therapist needs to display genuineness and be open in order to encourage and facilitate the child to express his/ her feelings.
4. The therapist needs to pay attention and identify the emotions and feelings as expressed by the child during the play activity and then these need to be reflected in a way which helps the therapist develop awareness and an understanding about the child's behaviour.
5. The therapist needs to respect the skills possessed by the child that can help him/ her solve his/ her problems when opportunity for the same is provided.
6. The CCPT is non-directional, thus no direction is provided to the child by the therapist.
7. The therapists needs to be patient during the therapeutic process.
8. Certain boundaries could be created in order to ensure that the therapy is rooted in reality and that the child is aware of his/ her responsibilities.

Empathy and unconditional positive regard are two important aspects of CCPT.

### 11.2.1 How Play Therapy Works?

Having understood the importance and history and development of play as a therapy tool, now it is time to understand how it works and the interventions used. As seen earlier, play therapy is beneficial for children with emotional or behavioural challenges; and is very helpful in tackling inappropriate behaviour and acting out tendencies.

Play therapy sessions can be conducted with an individual child or in groups and typically sessions last for 30-45 minutes. Empathy, non-judgmental attitude and genuineness are the cornerstones of the therapeutic relationship.

In play therapy, there is a playroom that is equipped with a selection of toys and play material that help the child to express his feelings and in acquiring healthy behaviours. The manner in which the child plays with the toys gives the therapist information about the child's thoughts, emotion and conflicts.

There is a wide selection of toys that can be used. These may include a sandbox with associated miniature figurines, art materials, construction toys like Legos or other, costumes or other clothing, dolls, a doll house with miniature furniture, stuffed animals, puppets, indoor sports equipment, and other indoor games. Play therapy also involves the use of clay, storytelling, music, dance, drama and role-plays.

Initially children play as they wish, then the therapist introduces specific items or play activities related to the issues the child is facing. Play therapy encourages creativity, expression and awareness of emotions, troubles areas. It promotes healing and positive decision making skills, and facilitates social skills and communication. It can either be directive or non-directive in approach

**Treatment of Mental Disorders** Non-directive play therapy is non-intrusive since there is minimal instruction on how should the child engage in play. Directed play therapy involves much greater input from the therapist.

Although best meant for children, play therapy can be applied to adults as well. Play therapy is also be used to treat issues faced by teenagers and adults. As individuals reach adulthood they lose their ability to playfully explore themselves. Play therapists help adolescents, adults, and even the elderly relearn the values of play. It is even neurologically proven that play can help adolescents and adults enhance both cognitive and physical behaviours. Many organisations and experts are dedicated to play research and advocacy, that play is important for people of all ages.

A play therapy session is of about 30 minutes to an hour with a once a week duration. The number of sessions required depends on the child, the nature of problem and how well they respond to this type of therapy. Therapy can take place individually or in groups.

Play therapists can be directive or non-directive in their approach. The sessions take place in an environment where the child feels comfortable, safe and with few limitations. The therapist may use techniques that including creative roleplaying, story telling, using toys, puppets, soft toys etc., art and craft related activities, playing with sand, clay (play doll) and water, playing with blocks, dance and movements, music, creative visualisation and soon.

The therapist might offer the child a dollhouse and some dolls, asking them to act out a typical day at home or some problems they have. They could encourage the child to use hand puppets to recreate something they found stressful or frightening. Therapists ask the child to tell a “once upon a time” story to see what the child might bring to light. Or they might read stories that solve a problem similar to your child’s. This is referred to as bibliotherapy. Play therapy could also involve asking questions while the child is drawing or painting to try to gain insights into their thought process. Playing various games with the child to encourage problem-solving, cooperation, and social skills is also common.

Play therapy is used very effectively for intellectual disabilities, dementia, chronic illness, palliative care, and hospice care, substance use, trauma and physical abuse, anger management issues, post-traumatic stress disorder (PTSD), unresolved childhood issues

When working with adults, a therapist may use dramatic role-playing or sand-tray therapy to help get in touch with feelings that are hard to talk about.

### **11.2.2 Application of Play Therapy**

By now it must clear that play therapy is an effective therapy, especially while dealing with children. It is known to enhance learning optimise relationships, and improve overall health and well-being. Play therapy is suitable for adolescents and adults as well. Therapists have an opportunity to choose from a many of the modalities such as movement (body play), sand play, dream play, nature play, and social play, pretend (fantasy) play, creative play, storytelling, and vocal play. A variety of health challenges experienced by adults also can be addressed by play therapy. The biggest strength of play therapy is that it can be modified to any issue and establishing rapport and

the therapeutic alliance is very smooth. As a therapy it helps keep aside client defensiveness. Play therapy can be used to effectively treat (in children or adults) dementia, grief and loss, post-traumatic stress, obsessions and compulsions, attention deficit and hyperactivity, mood disorders, anxiety, developmental delays and arrested emotional development

Play therapy is an effective therapeutic approach for people from all age groups, though minors respond particularly well to this type of treatment. Like a regular session, therapists employ several general guidelines and practices in treatment in order to foster the greatest benefits for people in their care. It is critical that when working with a child, the therapist provides adjunctive therapy for adults who play key roles in the child's life. Throughout therapy, the therapist typically places emphasis on the promotion of mental health and psychosocial development. The treatment plan is explained to the child's legal guardians, if necessary. Therapists may also coordinate treatment with doctors or other health care professionals to ensure that a child's welfare remains the treatment priority. If inappropriately touched by a child in treatment, the therapist may find it best to explain that it is important that each person's body is respected, document the event, then discuss the situation with the child's legal guardians at the earliest opportunity. A therapist may also find it necessary to make arrangements to prevent the child, or any person they are treating, from feeling abandoned, should there be a break in treatment.

#### **Box 11.1 Techniques of Play Therapy<sup>1</sup>**

**1) The Feeling Word Game:** Often children have difficulty verbalising their feelings when directly questioned, either because they are guarded or they do not connect with those feelings they find most threatening. When involved in playing a game, children's defenses are reduced, and they are more likely to talk about their feelings. The Feeling Word Game allows children to communicate their feelings in an enjoyable, nonthreatening manner. The Feeling Word Game can be successfully used with all children, including those with conduct problems, attention-deficit/hyperactivity disorder (ADHD), or anxiety problems. This technique is a fun and nonthreatening way for therapists to discuss and question issues that are generally too intimidating for the child to communicate about directly.

**2) Colour-Your-Life:** Colour-Your-Life provides children with a nonthreatening, concrete method of understanding and discussing various affective states. It is critical for children to develop certain skills to successfully manage their affect. Specifically, children need to develop an awareness of numerous affective states, the ability to relate those states to their environmental events, and the skill to verbally express these feelings in an appropriate manner. Colour-Your-Life is suitable for all children between 6 and 12 years of age. The basic requirement is that the children are able to recognise and name colours as well as various affective states. The technique can be used in an individual or a group format. It is helpful to use the technique at several points throughout the therapy in order to examine what change has occurred.

1. Box 11.1 is adapted from Unit 1, Block 3 of BPCE017 and is authored by Dr. P. Swati

**3) The Pick-Up-Sticks Game:** The Pick-Up-Sticks Game was designed to facilitate affective expression in children. The technique is a fun way for children to express their feelings and pair various affective states with environmental events in a game context. In order for the Pick-Up-Sticks Game to be successful, the children must already be familiar with color–feeling pairs. One way to introduce them to this is by first playing Color-Your-Life, described above. The adapted version of the Pick-Up-Sticks Game is applicable for 6–12-year-old children. This technique can be used in an individual or a small group format.

**4) Balloons of Anger:** It is crucial to help children understand what anger is and how to release it appropriately. Balloons of Anger is an enjoyable, effective technique that provides children with a visual picture of anger and the impact that it can have upon them and their environment. It allows the children to see how anger can build up inside of them and how, if it is not released slowly and safely, anger can explode and hurt themselves or others. Balloons of Anger is effective for aggressive children who have difficulty controlling their anger and for withdrawn children who internalise their anger instead of expressing it. This technique can be used in an individual or a group format.

**5) The Mad Game:** The Mad Game was designed to show children that anger is a common, acceptable feeling, and it allows children to verbally and kinesthetically express their anger.

#### Applications

The Mad Game can be used in an individual or a group format. This technique can be slightly altered to express feelings other than anger, such as sadness or anxiety.

**6) Beat the Clock:** Beat the Clock was designed to increase children's self control and impulse control. The goal of this game is for the child to resist distraction, remaining on task and focused for a specified period of time. When the child successfully completes this task, she or he receives poker chips, which can be cashed in for a prize. When the child is successful at the game, the child is filled with a sense of competence and accomplishment. Beat the Clock can be used in an individual or a small group format. This technique is useful for any child who has impulse control problems (for example, children with ADHD).

**7) The Slow Motion Game:** It is well known that children learn best by doing. The Slow Motion Game was designed to have children actively practice self-control over their movements in a playful group context.

The Slow Motion Game is successful with any group of children that has difficulty maintaining self-control. Also, common board games can be effectively used to increase children's self-control.

**8) Relaxation Training: Bubble Breaths:** Bubble Breaths is an extremely useful and concrete relaxation technique designed to teach children deep and controlled breathing while helping them become aware of their own mind–body connections. Bubble blowing is fun, inexpensive, and allows nonthreatening interactions between the child and therapist. Bubble Breaths can be used in an individual or a group format. It is a simple, inexpensive technique that is extremely engaging and nonthreatening. This technique is especially useful in reducing anger, anxiety, or tension in children.

**9) Worry Can:** Children often worry about numerous things that they keep bottled up inside. These worries may be the root of some of their presenting problems, such as fears, peer conflict, temper tantrums, and separation anxiety. Worry Can is an effective method for helping children to identify and then discuss their worries with an adult and/or other children. Worry Can may be used in an individual or a group format. It can be adapted to be used as an Anger Can or as a Sad Can. A variation of this technique is The Garbage Bag Technique Two brown sandwich bags may be used as garbage bags one for garbage from home and one for garbage from school. The child is instructed to decorate the garbage bags and then place three strips of paper, each with a separate problem, in each bag. The following session, the child picks out a piece of garbage to play out in miniatures or in role-playing. Often children will develop their own solutions to their problems. If this does not occur, the therapist should be directive and intervene with suggestions in the context of the play. The therapist needs to keep the play in the third person so as to allow the child to maintain enough distance from the problem in order to solve it.

**10) Party Hats on Monsters:** Party Hats on Monsters is a drawing strategy designed to enable children to gradually face their fears in a nonthreatening, enjoyable manner. Most children find it more comfortable to express their fears through drawing as opposed to verbalising them. Furthermore, children find it reassuring when they are not required to face their worst fear or anxiety immediately. By experiencing step by step success facing the feared object, the children's confidence and sense of mastery are increased. This technique is appropriate for preschool and school-age children. Although it is beneficial for helping children face their common fears, it is especially effective for children who have anxiety disorders. This technique can be slightly altered by providing children with the option of sculpting their fears in clay.

**11) Weights and Balloons:** A common challenge in therapy is making abstract therapeutic constructs understandable, meaningful, and concrete to children. Techniques that are enjoyable and “hands-on” are an ideal way to teach children these complex concepts. Weights and Balloons is an easy, effective technique for teaching children the somewhat complicated cognitive behavioural theory of depression. Weights and Balloons



is an inexpensive technique that transforms a complex idea into something concrete and understandable. This technique is particularly useful for children who are depressed. However, it is useful with all children to illustrate the effect that thoughts have on feelings.

**12) The Power Animal Technique- Internalising a Positive Symbol of Strength:** Children who are referred for therapy often have low self-esteem, ineffective problem solving skills, and difficult relationships with peers and adults. Therefore, primary therapeutic goals often include improving the child's positive sense of self and increasing his or her coping skills. However, it is often difficult for children to articulate what strengths they wished they had or what attributes would help them cope more effectively. The Power Animal Technique is useful with any child who might profit from a positive introject.

**13) Using a Puppet to Create a Symbolic Client:** Puppets serve a crucial role in play therapy. Frequently, children project their thoughts and feelings onto puppets. In this way, puppets allow children the distance needed to communicate their distress. Furthermore, the puppets serve as a medium for the therapist to reflect understanding and provide corrective emotional experiences in the context of the children's play. Most children naturally project their experiences onto the puppets. However, some children are too fearful and withdrawn to become involved in any aspect of therapy. By using the puppet as a symbolic client the therapist is able to engage these children and overcome resistance. The creation of the symbolic client removes the focus from the child, thereby increasing the child's comfort level and allowing him or her to remain at a safe emotional distance. This technique is particularly effective for any child between 4 and 8 years of age who is anxious or withdrawn in the beginning stages of therapy. A variation of this technique would be to have the puppet present with the same problem as the child and to enlist the child's help in brainstorming solutions to solve the puppet's problem.

**14) Broadcast News:** It is much easier for children to play out their problems than discuss them. Furthermore, children are better able to solve their own problems when they can distance themselves from them. Broadcast News is an enjoyable, nonthreatening technique that enhances children's verbalisation and problem-solving skills. Broadcast News is an extremely useful technique for highly verbal children 6 years of age and older. Children who are very outgoing will find this an easy activity, whereas children who are withdrawn or anxious may have some difficulty. Puppets can be used if the therapist thinks that the child needs more distance from his or her problems.

A variation of this technique is to have a talk show where the child is the host. The therapist is the guest and guides what "issues" she or he is going to discuss.

**15) The Spy and the Sneak:** The Spy and the Sneak was designed to transform negative family interactions into positive ones, which would increase the family members' enjoyment of each other and improve their self-esteem. Parents begin to see many of their children's positive qualities and start to reward the good behaviour.

Children realise that they get more attention by acting in a positive manner than in a negative one. The Spy and the Sneak is a fun, engaging technique that involves no cost but results in huge therapeutic gains. This technique is excellent to use with any family that is experiencing negative interactions. After the family has engaged in the technique for a few weeks, the therapist may choose to instruct the parent and child to switch roles, with the child becoming the spy and the parent becoming the sneak.

A variety of toys recommended as staples in the therapeutic playroom, including a dollhouse with furniture and doll family, doll clothes, baby doll with bottle, puppets, building blocks, toy cars and trucks, toy guns, knives, and swords, stuffed animals, play telephones, crayons, paints, scissors, glue and paper, play dough, and clothes for playing dress-up. Toys should be available that allow children to be creative, to release emotion, to develop insight, to test reality, and to express themes from real life, such as anger and aggression, love and nurturing, and sadness when children find it difficult to express their emotions directly. Puppets provide effective stimuli for dramatised, symbolic acting out of emotions. Toy guns, toy soldiers, play dough, doll families, and drawing and colouring pictures can all be used to encourage expression of need for nurturance and love. Several sources provide suggestions for play activities that may be helpful when planning counselling sessions for children. Kaduson, Cangelosi, and Schaefer (1997) provide suggestions for using play therapy with children who have various internalising, externalising, or stress-produced disorders.

Sand and water are natural media that fascinate children. The sand box can symbolise the child's environment, allowing the child to build the world of his fantasy by using toy cars, building-block houses, and doll figures. The child then plays out themes representative of the conflicts he or she is experiencing. Use of dry and damp sand in separate waterproof trays that are painted blue so that a lake is represented when the sand is pushed aside provide stimuli for the changing themes of children's play. Chaos, struggle, and resolution are common stages that recur in children's sand play. Additionally, water play has been used for work with overly active and constricted children, providing an outlet for aggression or for relaxation.

### Check Your Progress I

- 1) Briefly state the application of play therapy.

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## 11.3 INDIGENOUS THERAPIES

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Indigenous therapies include interventions for human behaviour and pathology from the individual's native land. These approaches help in alleviating stress and tension and also provide a means of integrating one's experiences. It is a more holistic approach and also accounts for looking at one's own experiences in a different light. It accommodates newer experiences and allows the individual to heal physically, mentally and spiritually. For us in India, Yoga, meditation and mindfulness are prominent interventions that can be termed as indigenous therapies. These discover how the cultural views, theories, assumptions and classifications coupled with overarching social institutions influence psychological topics. Indigenous therapies are subjected to systematic influences of formal, political and educational institutions and social factors. They are formed of the basic, political, economic, religious, and social components of each culture. Indigenous therapies use scientific and applied knowledge reflected in scientific and professional psychology to help individuals with psychological problems. Indigenous therapies are widely applied to strengthening education, employment, health, population control and religious conflict.

Every indigenous therapy understands and finds to rectify factors such as affective, behavioural, and cognitive human systems that in turn impact attitudes, behaviours, beliefs, expectations, and values of the members of each unique culture". Psychology has the fundamental issues at the heart of its focus.

Kim, Yang and Hwang (2006) distinguish 10 characteristics of indigenous therapies.

1. They emphasise on examining psychological phenomena in ecological, historical and cultural context.
2. They need to be developed for all cultural, native and ethnic groups.
3. They advocate use of multiple methods.
4. They advocate the integration of "insiders", "outsiders" and multiple perspectives to obtain comprehensive and integrated understanding.
5. They acknowledge that people have a complex and sophisticated understanding of themselves and it is necessary to translate their practical and episodic understanding into analytical knowledge.
6. They are part of a scientific tradition that advocates multiple perspectives, but not multiple psychologies or absolute relativism.
7. Although descriptive analysis is the starting point of research, its final goal is to discover psychological universals that can be theoretically and empirically verified.
8. They are a part of the cultural sciences tradition in which human agency, meaning and context are incorporated into the research design.
9. They advocate a linkage of humanities (which focus on human experience and creativity) with social sciences (which focus empirical analysis and verification).

10. Two starting points of research in indigenous therapy can be identified: indigenisation from without and indigenisation from within.

While indigenous therapies have existed for a long time, only recently have they been studied in a global context. While international psychology influences indigenous therapies, it is within each indigenous psychology that the unique histories, social mores, needs and practicalities of a certain culture can be addressed. For example, many Indian psychologists with Western training have incorporated their instruction to include aspects of Indian culture that aren't necessarily relevant to Western psychology. They have learned to place more emphasis on extended family and community which is more suited to the societal norms of Indian culture than Western culture. However due to resource issues, the scaling up of indigenous therapies has not been that fast paced. The lack of trained professionals and the demands of an impoverished population have left psychologists in India struggling to meet the needs of its citizens. This has often taken priority over scientific advancement. Furthermore blind faith and superstition often come in way of the needy seeking treatment. Individuals do not seek professional assistance be it with psychiatrists or main stream psychologists and therapists willingly. Such a social mind frame also poses a challenge for use and application of indigenous approaches.

Indigenous therapies connected to the Indian culture include yoga, meditation and mindfulness.

### 11.3.1 Yoga

Yoga is a group of physical, mental and spiritual practices that are practiced to control and strengthen the human mind. It helps to calm our psychomotor agitation by calming our physiological processes. It helps to build attention by helping the individual to gain control of the mind. It aids stillness and helps one witness the surrounding with detached compassion. The individual is a witness as the consciousness is untouched by thoughts and mundane suffering. Yoga incorporates a broad variety of schools, practices and goals, coming from Hinduism, Buddhism and Jainism philosophies. Yoga was first mentioned in the Rig Veda and referenced in many Upanishads. These were around 5<sup>th</sup> – 3<sup>rd</sup> century BC. The Yoga Sutras of Patanjali is the most comprehensive text on Yoga.

In general and western world, yoga is represented by Hatha Yoga, a posture-based physical fitness, and stress relief and relaxation technique. It focuses on asanas. Yoga also constitutes meditation and deep breathing exercises. It can be understood that Yoga is in itself an entire discipline that warrants technical study and practice. Yoga is known to work beneficially for physical and mental issues.

A set of specific exercises, called poses, combined with specific breathing techniques and meditation principles are the building blocks of a yoga class. If a pose causes pain or proves too difficult, there are variations and modifications that can be made to help clients. Props like blocks, blankets and straps — even chairs — can be used to help clients get the most benefit from the poses. Yoga is not one-size-fits-all, the best yoga workout will depend on individual needs and goals.

**Treatment of Mental Disorders** Yoga is now introduced as a compulsory subject in most schools and colleges owing to the physical and mental health benefits it entails. It is form of mind-body conditioning, helping individuals to breathe better and increase their focus. Yoga is also a part of sport training programs

Before yoga was a popular physical exercise, it was, for thousands of years, mainly a meditation practice.

Yoga has different postures that serve a purpose for different illness and help manage it. Yoga works best for bodily ailments exacerbating out of stress. In combination with meditation and mindfulness yoga as an indigenous therapy makes positive development.

During yoga as one does the poses, one is asked to observe one's own breath and body as it moves through the exercises. This is the foundation of a mind-body connection and the underpinnings of mindfulness. A well-balanced series of yoga exercises gives an opportunity to scan the entire body, noting personal feelings as one move through the poses. One may begin to realise, for example, that one side of the body feels different than the other during a stretch, or that it's easier to balance on the right leg or that certain poses helps ease tension in neck. This is how yoga turns physical exercises into tools to help individuals become more mindful and even learn to meditate. Mindfulness begins at yoga classes and percolates beyond classes and to every sphere of life.

#### **11.3.1.1 Types of Asanas and Pranayama\***

International Day of Yoga on 21st June every year. Such is the effectiveness of Yoga that it is now promoted at International level in order to create awareness and promote practice of Yoga amongst the individuals so as to help them enhance their health and wellbeing. Yoga as a practice originated in India and the term Yoga is derived from Sanskrit meaning 'to unite', indicating a union of consciousness and body (<https://www.un.org/en/events/yogaday/>). The main goal of Yoga is self realisation (Balaji, 2012). Yoga find its mention in Bhagwad Gita, where a whole chapter is devoted to it. Three main types of yoga have been mentioned in this regard.

**Karma Yoga:** That is yoga related to one's actions.

**Bhakti Yoga:** Yoga related to devotion.

**Jnana Yoga:** That is Yoga related to knowledge.

There is also a fourth type that was put forth by Patanjali, who is also termed as father of Yoga. He introduced Ashtang Yoga, that is, power yoga. This yoga involves a movement or a flow from posture to posture (Balaji, 2012). Fig 11.1 shows various dimensions of Yoga (based on information given by Balaji, 2012).

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\*Section 11.3.1.1 is adapted from. BPCS 186 and is authored by Prof. Suhas Shetgovekar.

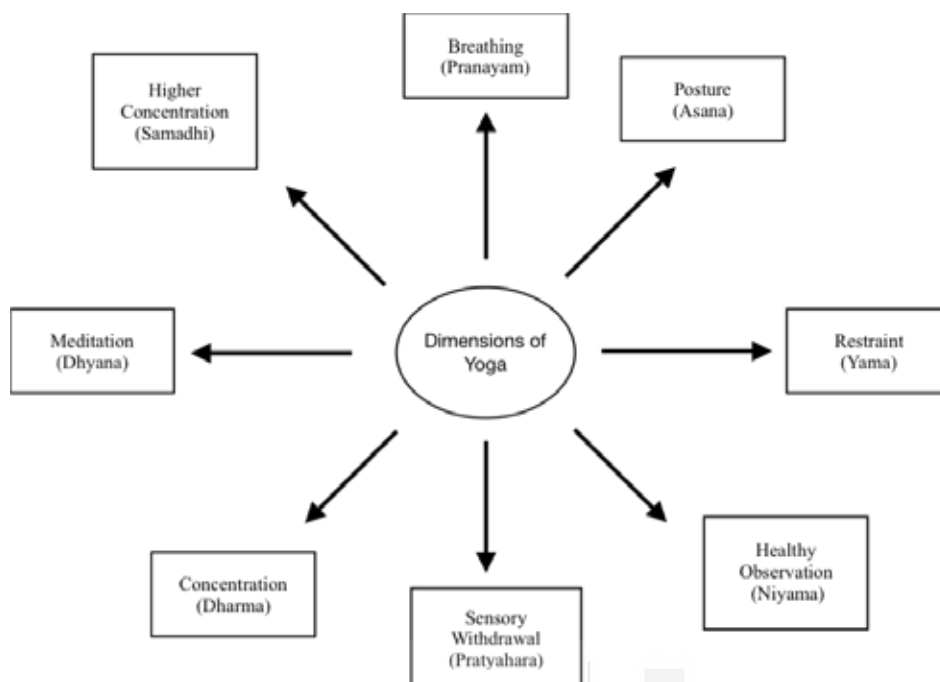


Fig.11.1: Dimensions of Yoga

Yoga mainly involves bodily postures (Asanas), breathing exercises and meditation that are to be carried out in a specific manner.

### Types of Asanas

There are various types of asanas, some of these have been briefly discussed as follows:

1. **Padmasana:** This is also referred as the lotus pose that can be used during meditation. Padmasana is practiced by sitting straight on the ground with your feet on top of your thighs. This asana is quite difficult and may need practice before one is able to carry it out adequately.
2. **Sukhasana:** This involves sitting cross legged. Thus, this is an easy asana and like Padmasana, it can be used during meditation.
3. **Siddhasana:** This is similar to Padmasana but less difficult. In this, you need to sit with your toes tucked in to your thighs (refer to figure 11.1).



Fig. 11.2 Siddhasana

4. **Vajrasana:** Vajra is a Sanskrit term that can be translated as ‘diamond’ (Balaji, 2012). This involves sitting on one’s heels by placing palms in the knees. (Figure 11.3)



Fig. 11.3 Vajrasana

5. **Trikonasana:** In this asana, you need to stand on the floor with legs apart and then you need to stretch your body to the left in such a way that spine is straight and your body is facing towards front and your both arms are perpendicular to the floor, with left hand resting on the floor and right hand straight up (Balaji, 2012, page 3). Refer to figure 11.4.



Fig. 11.4: Trikonasana

6. **Bhujangasana:** Also referred to as cobra pose, in this the person has to lie face down on the floor, with hands on the floor below the shoulder. Then he/ she has to lift his/ her head and chest slowly. The elbows are to be kept near the body, with neck straight and eyes looking up (refer to figure 11.5)



Fig. 11.5: Bhujangasana

### Pranayam

Pranayam is a breathing exercise that can be carried out for stress relief, though it has number of other health benefits as well. In this you need to put your right thumb on your right nostril and deeply inhale through your left nostril. Then you close your left nostril with your right index finger and

hold your breath for a few seconds. Then exhale through your left nostril. The same can be repeated with your left nostril (Balaji, 2012, page 3). Refer to figure 11.6.



Fig. 11.6: Pranayam

Yoga has a number of benefits including relief from stress, higher productivity, mindfulness and overall better physical and mental health. But it is important that one develops its understanding and take suitable training before it is practiced.

**Note:** Figures for Asanas have been taken from Balaji Deekshitulu PV (2012) Stress and Yoga. *Journal of Yoga and Physical Therapy*, 2:109. doi:10.4172/2157-7595.1000109

### 11.3.2 Meditation

Meditation is straightforward and benefits seen quickly. Breathing techniques are an essential part of yoga — not only do they help one to stay focused while practicing yoga, they can also help reduce stress and relax the nervous system and calm the mind.

Some of the breathing exercises include:

**Abdominal breathing:** Abdominal Breathing is also called as diaphragmatic or belly breathing, this is the most common breathing technique in basic yoga. It helps foster healthy, efficient breathing in general.

**Ujjayi or “victorious” breath:** This type of deep breathing allows one to slow and smooth the flow of breath. It is often used in flow classes to help students regulate their breathing as they move through the poses.

**Interval or interrupted breathing:** In this type of breathing, the individual is instructed to pauses and hold the breath during the inhalation or exhalation, or both. It is a good way to begin to learn to control the breath, especially if you are looking to try more advance yoga breathing techniques.

**Alternate nostril breathing:** This technique is said to be effective in balancing the nervous system and is a good idea to try before meditation. Meditation and its effects are being studied clinically as well.

Meditation is being regularly employed as a mainstay treatment in most cases of stress and anxiety. Mainstream medication and research have understood the utility of meditation in help ameliorate stress symptoms in those with chronic anxiety and even lifestyle disorders or terminal illness.

#### 11.3.2.1 Types of Meditation \*

Meditation is yet another technique that can be used to deal with stress. Meditation is the English term for Sanskrit term ‘Dhyana’. It can be

\* Section 11.3.3 is adapted from BPCS186 and is authored by Prof. Suhas Shetgovekar



described as a process of “quieting the mind in order to spend time in thought for relaxation with a goal to attain inner state of awareness and intensify personal and spiritual growth” (<https://www.yogapedia.com/definition/4949/meditation>). Meditation also will relax your body and thus the negative impact of stress on the body is reduced. Meditation leads to not only relaxation of body but also helps in increasing self-awareness. And regular practice of meditation will have long term benefits.

There are different types of meditation (Villines, 2017, Welch, 2019). Some of these are briefly explained as follows:

- **Mindfulness meditation:** This mainly includes becoming aware about one’s thoughts. It mainly involves sitting in a place without any distractions and non-judgmentally observing one’s thoughts and emotions.
- **Transcendental Meditation:** This involves chanting of a ‘mantra’/ chant or a word repeatedly in certain manner. This again can be done in a quiet place. One can sit straight but comfortably and practice this meditation for 15 to 20 minutes.
- **Guided meditation:** As the name suggests in this meditation, there is often a guide who will take you through the meditation process. This meditation mainly involves visualisation of certain images that you may find relaxing. It also involves utilising one’s senses. The person may be asked to sit in a quiet and calm place with eye close and visualise certain images that he/ she finds relaxing.
- **Vipassana meditation:** The main aim of this meditation is self-observation in order to transform oneself. It requires attention to be paid to different bodily sensations in order to create a connection between body and mind.
- **Loving kindness meditation (Metta meditation):** This meditation includes directing love and kindness towards others. The individual is required to sit straight but in a comfortable position in a quiet place. He/ she is then required to take a few deep breaths and repeat to oneself words that express kindness to self, then to family, friends and other significant people in his/ her life and then to everyone.
- **Chakra (means wheel) meditation:** In our body there are different energy centers and power that is spiritual in nature and they are referred to as chakras or wheels. There are a total of seven such chakras that are located in different parts of our body and are represented by a colour. The main aim of this meditation is to bring about an equilibrium in these chakras.

The benefits of meditation include not only reduction of stress but it can also help in managing anxiety, promoting affective health, enhancing self-awareness, increasing the span of attention and so on. Initially it can be practiced once in a day for a few minutes and later on the duration can be increased and it can also be practiced twice a day.

**Box 11.1: A simple way to meditate is given as follows:**

- You need to sit on a chair comfortably with your back straight. Let your feet touch the floor and do not cross your legs or arms. You can either rest your arms in your lap or keep them on the armrest.
- Then you need to close your eyes.
- Breathe in deeply and breathe out gently and try to relax your body.
- Keep your eyes closed and you can either repeat a mantra, a word to yourself or can have a (prewritten) self dialogue to yourself.
- If you get distracted, repeat the mantra, word or continue with the self dialogue.
- You can do this for 15 to 20 minutes (initially it can be done for smaller time period and later the duration can be gradually increased).
- As you complete the meditation, count backwards from ten to one.
- Rub your palms together and put them on your eyes.
- Slowly open your eyes.

**11.3.3 Mindfulness**

Mindfulness denotes awareness about one's thinking, the way one feels, physical sensations and one's surrounding in the present moment. It mainly involves becoming non-judgmental in one's awareness about one's thoughts and feelings. It mainly involves paying attention to things that generally we do not notice as we are too occupied with our lives, thinking about future and past and thus seldom focusing on present. It is often termed as a contrast to automatic pilot mode (or a default mode) where we do things without much thought or attention. Often, we are doing certain activities like driving, household chores or even eating which we may not do by paying our complete attention to the task and most often our attention and thought process may be somewhere else rather than these activities. Thus, we are in auto pilot mode. Whereas, mindfulness involves becoming aware and focusing our attention on these activities. The main characteristics of mindfulness according to Kabat-Zinn (1990) are being nonjudgmental, cultivating patience, being open minded, having trust, non-striving, acceptance and letting go. In fact Kabat-Zinn was also responsible for starting a programme on Mindfulness- Based Stress Reduction in 1997 at University of Massachusetts Medical School. It is also important that when mindfulness is practiced, one involves in observing one's experiences including thoughts, feelings and physiological sensations. Though when one is focusing at varied experiences, this is to be done one at a time. Besides observation, it also involves description of what is being observed but this is to be done in non-judgmentally. Mindfulness also requires complete participation, thus complete attention and focus needs to be provided to the task at hand. While practicing mindfulness, it is possible that one's attention and focus may drift, in which case one needs to gently bring back the focus and attention on observing that experience.

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1. Section 11.3.3 is adapted from BPCS186 and is authored by Prof. Suhas Shetgovekar

**Treatment of Mental Disorders** Practicing mindfulness can have a positive impact on an individual's body and mind. It not only helps in dealing with certain illness by strengthening one's immune system but it also helps deal with stress and promote positive mental health. Even memory, attention, problem solving and decision making can improve with the help of mindfulness. It can also enhance one's self esteem and can play a role in building and maintaining positive relationships.

One of the most important activities that we often do mindlessly is eating. We eat so that our body gets the necessary nourishment. But most often we do this activity on an auto pilot mode while we either watch television or browse our mobiles or engage in social networking. Next time you have your lunch or dinner try to exercise mindfulness eating. Do this by switching off the television, keeping aside the mobile and concentrate on your food. Appreciate your food and pay attention to its taste, colour, sound, texture, aroma and so on (sense it with all your senses) and be non- judgmental in doing so. And even while carrying out other activities as well, try to carry them out in a mindful manner.

#### **11.3.4 Effectiveness of Yoga, Meditation and Mindfulness**

Yoga can be effectively used not only to deal with stress but it can contribute to maintaining positive health and wellbeing. It has long term positive effects on both physical and mental health. The benefits of a regular yoga practice are wide-ranging. In general, a complete yoga workout can help keep back and joints healthy, improves overall posture, stretches and strengthen muscles and improves balance. Yoga has a restorative side that is deeply relaxing and rejuvenating, as relaxation is built into every yoga session. In addition, yoga's focus on the breath can calm and help one learn to be more mindful of the body. In recent years, more and more research is demonstrating the wide-ranging health benefits of yoga. Studies show that yoga can help manage psychosomatic symptoms. They help reduce back pain, improve balance, strengthen bones, stave off muscle decline, reduce stress and relieve depression.

Meditation expands attention and enable insight of one's own process, etiology and symptoms. Individuals with a wider attention span can be more insightful and help one be objective in emotionally laden situations. Meditation is known to bring about some positive physiological changes in the body. It works by impacting the autonomic/involuntary nervous system. Some mediation activates the sympathetic nervous system while some, the parasympathetic system. This is possible because of the relationship between amygdala and pre frontal cortex. Meditation increases gray matter and slows down deterioration. It was also noted that meditation improved integrity and efficiency of cognitive functions.

Meditation also impact perception with short term and long term effects. It temporarily or permanently alters top-down processing that is involved in filtering out 'noises'. Meditation is known to have biophysical and physiological changes that lead to a relaxation response – changes in metabolism, respiration, heart rate, blood pressure and blood chemistry. While there is established evidence of Yoga and meditation having positive effects on healthy individuals or with neurosis. Reports for psychotic

individuals or those with movement disorders can get worse. Further indigenous therapies require training and counselling knowledge in case meditation stirs up emotions.

Mindfulness is specifically a psychological quality that involves bringing one's attention to moment to moment interactions; it is awareness of the present. It involves paying attention in a non-judgmental way. Mindfulness has two aspects: self-regulation of attention and adopting a particular orientation towards one's experiences, curiosity, openness, and acceptance. Mindfulness is the awareness of one's surroundings and the way one negotiates the same. It is the metacognition of how events and experiences work. Mindfulness is associated with Buddhist processes that lead to stress reduction and elevation of positive responses. It is a concept that can be measured with self-report techniques like Attention Awareness scale, Freiburg Mindfulness inventory, Kentucky Inventory of mindfulness skills, and Cognitive and Affective Mindfulness scale. Mindfulness allows stress reduction and positive state elevation. Distress is reduced by reducing distractive and ruminating thoughts. Emotional regulation is also achieved by focused breathing. Stress-induced mood disturbances and functional impairments are also in check.

Mindfulness also promotes positive and enriching experiences. It enhances the purpose of life, social support, and decreased illness symptoms. Brain and immune functions get elevated, though more research is warranted. Attention and awareness along with gratitude are promoted with mindfulness based practices. Nonjudgmental awareness, self-regulation of attention, openness to experiences is tenants of mindfulness. Mindfulness allows for going with the flow of situations and inducing alternative conceptualisations and cognitive reframing of events and experiences. It allows us to break off from auto-pilot mode to embrace the moment to moment situations. Mindfulness is use adjunct to many theories as dialectical behaviour therapy, acceptance and commitment therapy, relapse prevention, cognitive change, self-management, relaxation, acceptance and overall well-being.

Though India had its roots ingrained in these indigenous techniques, it has not been able to tap these into professional therapy avenues. The scene is gradually changing wherein Indians are adapting to these therapies. Therapy is gaining popularity slowly among urban centers and so is the need to adopt indigenous practices for effective mental health outcomes.

India is a land rooted with indigenous and alternative therapies like Ayurveda, Unani, Siddha and these are interwoven with cultural and religious practices, along with magic and shamanic rituals. Education or the lack of it and blind faith come in way of analysing these practices scientifically and adopting a more rigorous stand. This could also be a reason why many shy away from indigenous therapy application. The stigma that lies in India regarding mental illness and wellness practices translates to the adoption of indigenous practices as well.

In India, the past few decades have been invested in promoting indigenous therapies for use in mental health and wellness. Of course revisions and adaptations regarding indigenous therapies are on line for India. There is an orientation moving towards studying culture. There is a need for indigenous

**Treatment of Mental Disorders** interventions to merge with the traditional systems of therapy and improve the consumption of wellness interventions.

### **11.3.5 Application of Indigenous Therapy**

Indigenous interventions as seen have cultural backgrounds and help instil in individuals a higher order sense of well-being. They help one answer questions relating to the purpose of life and in gaining a fresher insight into the current experiences. These interventions allow for an enriched perception towards oneself and others. Indigenous techniques help collate different world views regarding concepts of mental and physical health and have arrived at healing measures. These are holistic measures that also incorporate spirituality. Indigenous therapies are culturally rooted and imbibe the land's ritualistic notions and practices in healing. Practices like Yoga, meditation and mindfulness are amenable to scientific studies to arrive at theoretical and empirical validation for the same.

Indigenous therapies can get challenging as they can either be misunderstood as communal or take that turn. Also they may include processes that may not be very amenable to scientific rigor. These include reiki healing, pranic healing, crystal healing and the like. Client testimonials indicate these alternative healing approaches as helpful but it remains a question as to whether to include them in the technical list of indigenous approaches.

Yoga, meditation and mindfulness have been associated with improved holistic health outcomes and have also a basis in understanding neurochemistry and altering the same for better physiological functioning. Each of these techniques requires a specialised certification and clinically supervised exposure. It is imperative to understand the suitability of each of these interventions as per client complaints and client vulnerabilities. Each of these integrative therapies can also be initiated early in education syllabi to help train young minds to holistic healthy living.

In light of advancing eclectic incorporations in therapy, it is suggested to include indigenous interventions as well. Essential training is required for therapists in multicultural aspects of counselling and so also in the indigenous approaches. Cultural competency is an active, ongoing process that the therapists should be trained in. It is important that this starts with awareness of therapists' own values and beliefs and societal systems. Culturally competency also involves understanding the diversity that the client brings in therapy and lastly imbibing the relevant indigenous techniques that would help their clients. There has to be an emphasis on actively developing and practicing appropriate sensitive interventions.

### **Check Your Progress II**

- 1) Explain any one type of meditation.

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## 11.4 LET US SUM UP

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To summarise, in the present unit, we discussed about play therapy. Play therapy can be explained as an interpersonal process wherein a trained therapist systematically applies the curative powers of play (for example, , relationship enhancement, role-playing, abreaction, communication, mastery, catharsis, attachment formation, etc.) to help the clients resolve their current psychological difficulties and help prevent future ones. Play therapy techniques specify how to use the play materials so as to effectively implement the therapeutic powers of play (Schaefer, 1993). Child centered play therapy was also briefly discussed. the unit also focused on how play therapy works and the application of play therapy. The unit further discussed about indigenous therapies, Indigenous therapies include interventions for human behaviour and pathology from the individual's native land. These approaches help in alleviating stress and tension and also provide a means of integrating ones experiences. Yoga, meditation and mindfulness were discussed in this context.

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## 11.6 KEY WORDS

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**Indigenous therapy:** Indigenous therapies include interventions for human behaviour and pathology from the individual's native land. These approaches help in alleviating stress and tension and also provide a means of integrating ones experiences.

**Mindfulness:** Mindfulness denotes awareness about ones thinking, the way one feels, physical sensations and one's surrounding in the present moment. It mainly involves becoming non-judgmental in one's awareness about one's thoughts and feelings.

**Play Therapy:** Landreth (2012, page.11) defined play therapy as a dynamic interpersonal relationship between a child (or person of any age) and a therapist...who provides selected play materials and facilitates the development of a safe relationship for the child ... to fully express and explore self (feelings, thoughts, experiences, and behaviours) through play, the child's natural medium of communication, for optimal growth and development”.

**Yoga:** Yoga is a group of physical, mental and spiritual practices that are practiced to control and strengthen the human mind.

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## 11.7 ANSWERS TO CHECK YOUR PROGRESS

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### Check Your Progress I

- 1) Briefly state the application of play therapy.

Play therapy can be used to effectively treat (in children or adults) dementia, grief and loss, post-traumatic stress, obsessions and compulsions, attention deficit and hyperactivity, mood disorders, anxiety, developmental delays and arrested emotional development

### Check Your Progress II

- 1) Explain any one type of meditation.

Transcendental Meditation is one of the types of meditation and involves chanting of a 'mantra' / chant or a word repeatedly in certain manner. This again can be done in a quiet place. One can sit straight but comfortably and practice this meditation for 15 to 20 minutes.

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## 11.8 UNIT END QUESTIONS

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1. Explain play therapy with a focus on its application.
2. Describe various techniques of play therapy.
3. Describe Yoga and discuss various types of Asanas.
4. Discuss meditation and mindfulness.
5. Explain the effectiveness of Yoga, meditation and mindfulness.

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## 11.9 WEB RESOURCES

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- **How to Do Play therapy: Role Play with Explanation of Techniques.**  
<https://www.youtube.com/watch?v=ZeLL6u4RGhc>
- **Play therapy: What is it?**  
<https://www.youtube.com/watch?v=l-Jqj3WrrRU>