

CHILD-PARENT RELATIONSHIP THERAPY (CPRT) TREATMENT MANUAL

AN EVIDENCE-BASED 10-SESSION FILIAL THERAPY MODEL

TREATMENT PROTOCOLS - PARENT NOTEBOOKS - HANDOUTS - RESOURCES - STUDY GUIDE

Sue C. Bratton and Garry L. Landreth



"This is a must-have companion to the CPRT book. Like the book, this is a true second edition, not only updated, but vastly expanded to work with new populations. This manual provides four new *Therapist Protocols* and accompanying *Parent Notebooks*. Experts with each population provide all resources needed to expand working with younger and older children, adoptive families, and teachers. Given the profound research support for CPRT, this new edition provides the filial/CPRT therapist with the tools to forever impact families and classrooms!"

—Linda E. Homeyer, PhD, LPC-S, RPT-S, distinguished professor emerita, Texas State University and director emerita, Association for Play Therapy

"The expanded CPRT manual provides child therapists with detailed curriculum to understand and actively use play therapy concepts and skills to improve child-parent relationships and children's emotional and behavioral areas of concern. Bratton and Landreth offer a clear, understandable treatment plan to address the complexity of child-parent relationships, along with providing demonstrable steps to applying the approach. Four new protocols address the unique needs of parents of toddlers and preadolescents, adoptive families, and systemic partners. Child therapists will find this manual to be a valuable tool in their work with parents."

Dee C. Ray, PhD, LPC-S, NCC, RPT-S, distinguished teaching professor and director of the Center for Play Therapy, University of North Texas

"CPRT has been empirically demonstrated to improve child-parent relationships and child behaviors. The expanded treatment manual provides the essentials needed for therapists to implement the program successfully with parents of toddlers through preadolescents and other special populations. The notebook for parents expands on the principles, allowing parents to apply them to home situations. The additional resources included in the treatment manual enable users to experience the full value of CPRT."

—Louise Guerney, PhD, RPT-S, professor emerita at Penn State University, co-developer of Filial Therapy, and faculty member of the National Institute of Relationship Enhancement (NIRE)



CHILD-PARENT RELATIONSHIP THERAPY (CPRT) TREATMENT MANUAL

This newly expanded and revised edition of the *Child-Parent Relationship Therapy (CPRT) Treatment Manual* is the essential companion to the second edition of *Child-Parent Relationship Therapy (CPRT)*. The second edition is updated to include four new CPRT treatment protocols and parent notebooks adapted for specific populations: parents of toddlers, parents of preadolescents, adoptive families, and the teacher/student relationship, along with the revised original CPRT protocol and parent notebook for ages 3–10.

This manual provides the CPRT/filial therapist with a comprehensive framework for conducting CPRT. Included are detailed outlines, teaching aids, activities, and resources for each of the 10 sessions. The manual is divided into two major sections, *Therapist Protocol* and *Parent Notebook*, and contains a comprehensive *CPRT Training Resources* section along with an index to the accompanying *Companion Website*.

The accompanying *Companion Website* contains all necessary and supplemental training materials in a format that allows for ease of reproduction and enhanced usability including the following:

- CPRT Protocol—Ages 3 to 10 and Parent Notebook
- Toddler Adapted CPRT Protocol and Parent Notebook
- Preadolescent Adapted CPRT Protocol and Parent Notebook
- Adoptive Families Adapted CPRT Protocol and Parent Notebook
- Teacher-Student Adapted Protocol and Teacher Notebook
- Therapist Study Guide
- Training Resources, Teaching Aids and Supplemental Materials
- Marketing Materials
- Assessments

Drawing on their extensive experience as professional play therapists and filial therapists, Bratton and Landreth apply the principles of CCPT and CPRT in this easy-to-follow protocol for practitioners to successfully implement the evidence-based CPRT model. By using this manual and the accompanying *Companion Website* in conjunction with the CPRT text, filial therapists will have a complete package for training parents in CCPT skills to act as therapeutic agents with their own children.

Sue C. Bratton, PhD, LPC-S, RPT-S, is professor emerita, department of counseling and higher education, and director emerita, Center for Play Therapy at the University of North Texas.

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CHILD-PARENT RELATIONSHIP THERAPY (CPRT) TREATMENT MANUAL

An Evidence-Based 10-Session Filial Therapy Model

2nd Edition

Sue C. Bratton and Garry L. Landreth



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Note: All Materials in this Treatment Manual as well as full versions of all 5 CPRT
Therapist Protocols and the corresponding Parent Notebooks, Therapist Study
Guide, and supplemental materials and resources are available on the Companion Website at www.routledge.com/cw/bratton

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Getting Started

OVERVIEW OF THE CPRT TREATMENT MANUAL CONTENTS AND USE

The *Child-Parent Relationship Therapy (CPRT) Treatment Manual: An Evidence-Based 10-Session Filial Therapy Model, 2nd Edition*, is a companion to the textbook *Child-Parent Relationship Therapy (CPRT): An Evidence-Based 10-Session Filial Therapy Model* (Landreth & Bratton, 2020), available from the publisher, Routledge. The CPRT Protocol is an evidence-based protocol intended for use by mental health professionals trained and certified in the CPRT model (https://cpt.unt.edu/child-parent-relationship-therapy-certification). Permission to copy training materials is granted to the therapist in conjunction with the purchase of this manual for personal use only. The copyright statement must appear on each page.

The training materials included in this manual assume the reader is familiar with the information contained in the textbook. The textbook contains information essential to conducting CPRT including developmental and cultural considerations and interpersonal neurobiology concepts relevant to CPRT. This manual is designed to be helpful to therapists with all levels of experience.

The *CPRT Treatment Manual* has two major sections, *Therapist Protocol for Ages 3–10* and *Parent Notebook for Ages 3–10*, and contains a comprehensive *CPRT Training Resources* section along with an index to the accompanying Companion Website. The Companion Website found at www.routledge.com/cw/bratton contains the 10-session *CPRT Study Guide*, *Appendices* containing supplemental training materials, clinical forms, organizational tools, assessments, and marketing materials, as well as the electronic version of the *Therapist Protocol for Ages 3–10*, *Parent Notebook for Ages 3–10*, and **four new protocols designed to help therapists respond to the specific needs of parents of toddlers, parents of preadolescents, adoptive families, and teacher-student relationships.** The complete *Therapist Protocol* and the corresponding *Parent/Teacher Notebook* for each of the four new protocols are downloaded from the Companion Website. The electronic files allow the therapist to print the necessary training materials for each new CPRT group. Unlike many commercially available parent training programs, there are no additional books or materials that must be purchased to conduct CPRT.

The *Therapist Protocol* for each of the five CPRT protocols is organized by sessions and contains all materials required to conduct the 10-session CPRT model, including Treatment Outlines

for Sessions 1–10 and all corresponding parent handouts, homework, and parent worksheets. The *Therapist Protocol* contains copies of all handouts in the *Parent Notebook*—with sample answers for the therapist. Sample answers are provided only as an example of an appropriate response that is consistent with the Child-Centered Play Therapy (CCPT) philosophy. For additional CCPT skills and responses, refer to Chapter 6, "CPRT Skills, Concepts, and Attitudes to Be Taught," in the companion CPRT text (Landreth & Bratton, 2019).

Prior to conducting CPRT, therapists download and print the 10-session *Therapist Protocol* from the accompanying Companion Website. This method allows therapists to print new protocols as needed. We have found that using a three-ring binder with pocket dividers and tabs for each of the 10 sessions is an efficient and useful method of organizing the materials. In preparation for each parent training session:

- Print the Materials Checklist (Appendix A) several days ahead to allow time to gather materials, videos, books, etc.
- Review the *Study Guide* (Appendix B) for the respective session. The Study Guide is designed with the novice CPRT therapist in mind.
- Review the CPRT demonstration video featuring Drs. Landreth and Bratton illustrating the
 delivery and process of the CPRT model with four couples (source referenced in Chapter
 VIII), and the session transcripts provided in the companion text (Landreth & Bratton,
 2019). These resources illustrate the delivery of the CPRT curriculum and the delicate
 balance of presenting didactic content with group process and experiential activities.
- Be familiar with the organization of the Parent Notebook and page numbers of handouts, so that you can quickly refer parents to a specific handout or assignment during the weekly sessions.

The CPRT protocol is designed to be flexible to help you adapt the training to the unique needs of parents and children. As noted in the CPRT text (Landreth & Bratton, 2019), the 10-session curriculum presented in this manual can be adapted for use in fewer sessions, as well as extended for a longer number of sessions, depending on parent needs and group size. Although designed for use with groups of parents, the materials are also easily adapted for use with individual parents and couples. As with any treatment/intervention, therapists are expected to **exercise clinical judgment** in the use of materials and procedures.

The *Parent Notebook* for each of the five CPRT protocols includes all the printed materials that parents will need to complete CPRT training. For ease of duplication and to ensure correct pagination, *Parent Notebooks* are printed from the accompanying Companion Website found at www.routledge. com/cw/bratton. The website version of each *Parent Notebook* is formatted for two-sided printing with blank pages inserted where needed so that each new session begins on odd numbered page. We suggest organizing the notebook into a three-brad pocket folder or small three-ring binder with 1–10 tabs to designate the 10 sessions. Other useful strategies for the organization of training materials include printing the most-used handouts, *Play Session Dos and Don'ts, Play Session Procedures Checklist, and CPRT Cliff Notes* on different colors of paper or using tabs to provide an easy method for parents to locate them in their notebooks. Note: The Parent Notebooks and marketing materials in the Companion Website refer to CPRT as Child-Parent-Relationship (C-P-R) Training for Parents (designation used by Landreth in the early development of the model), whereas all therapist materials retain the title Child-Parent Relationship Therapy (CPRT), the formal name of the model.

Handouts in the *Parent Notebook* are organized by the CPRT training session they are typically used in. Some flexibility in presenting materials is allowed, depending on the needs of a particular group of parents. *Appendix A* in the Companion Website contains additional resources that the therapist can print and provide to parents. Supplemental skill practice worksheets for parents are also included in *Appendix D*. Although these supplemental worksheets are provided as additional practice for CPRT skills that a particular group of parents may be having difficulty with, the therapist is cautioned to avoid overwhelming parents with too much information or homework. Again,

it is expected that the therapist will **exercise clinical judgment** in determining when and if to use supplemental materials.

CPRT Training Resources includes a list of useful resources for professionals and parents. Resources are organized by videos, books, and manuals. Each of those categories is further divided into recommended and supplemental resources.

Appendix A includes helpful organizational and practical materials for CPRT training. These materials are prepared for ease of reprinting for each new group and include (a) *Parent Information Form* to complete prior to Session 1 and to note important information about group participants. This form should be brought to every session; therefore we suggest inserting it in the front of the *Therapist Protocol*; (b) the *Materials Checklist* for Sessions 1–10 to help therapists know what to bring to each session; the therapist is advised to bring a few extras of all printed materials that parents will need for each session, in the likely case a parent forgets the *Parent Notebook*; (c) *CPRT Progress Notes* to document the clinical progress of individual group members throughout Sessions 1–10; and the (d) *Therapist Skills Checklist* for the novice CPRT therapist or student intern for supervision purposes and to self-assess important CPRT skills. This appendix also contains items for parents that are to be handed out separately from the *Parent Notebook* materials, including *Homemade Playdough and Paint Recipes, Special Playtime Appointment Cards*, "Do Not Disturb" Template, and Certificates of Completion.

Appendix B contains the *Study Guide* and is designed for the beginning CPRT therapist to review prior to each CPRT training session. It is not intended for use <u>during</u> the CPRT sessions. The *Study Guide* is an expanded version of the *Therapist Protocol* and is designed to provide a more in-depth explanation of content. This section begins with "Helpful Hints for Conducting CPRT" followed by the expanded Treatment Outlines for each session. Embedded within each Treatment Outline are shaded text boxes with additional information and examples for each training concept or activity to aid you in preparing for each session. The material in the shaded text boxes is not meant to be presented in full or memorized. In several cases, the authors have shared personal parenting experiences to illustrate a point, but it is important to use your own stories and metaphors, making teaching points in a way that feels comfortable and congruent. If you are not a parent and have little personal experience with children, do not try to pretend that you do. You can draw on your professional experience as a play therapist, teacher, and so forth, or share stories of friends' or relatives' experiences with children. For the experienced CPRT therapist, the *Study Guide* can serve as a brief review.

We suggest that therapists have the *Therapist Protocol* at hand when reviewing the *Study Guide* in preparation for each session, making any additional notes directly on the Treatment Outline for that session. **Never use the** *Study Guide* **during CPRT sessions**; training should not be scripted. The CPRT curriculum is designed to be used by experienced play therapists with prior training, experience, and certification in both Child-Centered Play Therapy and CPRT, as well as training and experience in facilitating group therapy. This training and experience base is necessary in order to facilitate a lively, spontaneous, and interactive group training process. Reading from the *Study Guide* would interfere with this process and impede the development of a therapeutic connection between the parents and therapist. The therapist should become familiar enough with the material in the *Study Guide* to deliver the training in his or her own unique way of engaging parents in the treatment process. As noted earlier, it is expected that the therapist will exercise clinical judgment in using these materials in order to best meet the specific needs of a particular group of parents. Note: It is also necessary to refer to the *Materials Checklist* (see Appendix A in the Companion Website) as you prepare for each training session.

Appendix C includes a poster format of the most frequently used handout, *Play Session Dos and Don'ts*, formatted so that the therapist can print it out on three colored sheets of $8\frac{1}{2}$ " × 11" paper, tape it together, and laminate it as a poster to provide a handy visual for referencing these important skills during Sessions 3–10.

Appendix D includes supplemental parent handouts and worksheets with therapist versions containing example answers. The supplemental handouts provide opportunities for additional practice of CPRT skills and are used at the discretion of the therapist's assessment of the parents' needs. The session numbers on each worksheet corresponds to when that particular skill is generally intro-

duced or practiced. Worksheets include Feelings Response Practice for Session 2, Choice Giving 101 for Session 6, Esteem-Building Responses for Session 7, Encouragement vs. Praise for Session 8, and Advanced Limit Setting: Giving Choices as Consequences for Noncompliance for Session 9. There is also a handout on *Structured Doll Play*. References to these optional worksheets are included in the Study Guide for the sessions in which we recommend their use; however, they may be used flexibly, depending on the needs of a particular group of parents. Although these supplemental worksheets are provided as additional practice for CPRT skills that a particular group of parents may be struggling to implement, the therapist is cautioned to avoid overwhelming parents with too much information or homework. Again, it is expected that the therapist will exercise clinical judgment in determining when and if to use supplemental materials.

Appendix E includes information for successful marketing of CPRT to parents. Sample flyers and brochure are included. These materials may be electronically adapted for therapist use. Note: The acronym C-P-R Training is used on all marketing materials for parents as well as materials that they receive in their parent notebooks.

Appendix F includes three unpublished assessments that have been used for research in CPRT and filial therapy: *Porter Parental Acceptance Scale* (PPAS), *Filial Problems Checklist* (FPC), and *Measurement of Empathy in Adult-Child Interaction* (MEACI). All three measures are designed to be administered pre and post treatment. The PPAS and FPC are self-report instruments administered to parents; the PPAS measures the parents' attitude of acceptance toward the child of focus, while the FPC measures the parents' perception of the child of focus's behavior. The MEACI is a direct observational measure of parental empathy that requires pre and post video-recording of parents (the use of this instrument requires substantial training and inter-rater reliability). Instruments and scoring are included in separate files for ease of printing. We gratefully acknowledge Dr. Louise Guerney and Dr. Blaine Porter for generously allowing us to include these materials for use by CPRT therapists.

The CPRT Treatment Manual also contains a Companion Website to allow the therapist to easily print the required CPRT training materials (*Therapist Protocol* and *Parent Notebook*). The Companion Website also includes the *CPRT Study Guide* and several useful appendices not found in the manual. The appendices contain organizational materials, clinical forms, marketing materials, assessments, and supplemental skill practice worksheets for parents.

Note: Permission to copy the materials is granted to the therapist in conjunction with the purchase of this training. The copyright statement should be printed out and included on all copied materials.

Helpful Hints for Conducting CPRT

The following tips are excerpts from Chapter 5: "Critical Components in Facilitating the Process of CPRT" in Child-Parent Relationship Therapy (CPRT): An Evidence-Based 10-Session Filial Therapy Model, 2nd Edition (Landreth & Bratton, 2019).

The CPRT process is characterized by **two key components: a didactic component and a group process component in the context of a safe, reassuring, supportive, and nonthreatening environment** that encourages parents to explore feelings, attitudes, and perceptions about themselves, their children, and about parenting.

The supportive format in a CPRT group often resembles group therapy as the therapist responds empathically to parents' issues and emotional reactions related to their family or their role as parents. Likening the emotional exploring and supportive component of CPRT to group therapy does not imply that the objective is to provide group therapy, only that some aspects of the group interaction and process take on the nature of group therapy for short periods of time as parents explore their

feelings about themselves, their children, and their families. The transition from this empathic group therapy type element of exploring an emotional issue to the didactic element can be accomplished by limiting the group therapy exploration to a few minutes of interaction, making an empathic reflection that summarizes the parents' feelings, and then making a teaching point that is related to the content of the parents' sharing.

Processing parents' reactions and feelings about their children promotes the beginning of change in parents' perceptions about their children. The CPRT therapist must maintain a delicate balance between the didactic and process dimensions without being rigid in covering the scheduled training material or allowing the group to become bogged down in the group therapy dimensions of the process.

It is imperative that the therapist intersperse the teaching component of CPRT with building **group cohesiveness**, especially in the first two or three training sessions. This is accomplished when the therapist generalizes parent disclosures to help parents identify with each other by asking questions: "Does this sound familiar to anyone else?" or "Anyone else ever yell at your child?" and "What was that like for you?" when a parent responds affirmatively. When parents nod their heads understandingly as a parent describes a problem, the therapist can comment: "So the rest of you know what that is like." This **linking of parents** helps break down barriers of isolation and the feeling, "I'm the only one who feels this way" or "I'm the only one who ever yells at her child."

If a parent describes a point of difficulty in a play session, the therapist can ask, "Group, what Rule of Thumb applies here?" The therapist can also encourage group interaction by inviting parents to respond to each other's questions: "Linda, how would you suggest Erika respond when her son wants to paint her glasses?" This question not only facilitates interaction, but also decreases parents' dependence on the therapist for solutions by inviting parents to contribute their ideas. If a parent seems to be thoughtful about something, the therapist can invite sharing: "Angela, what are you thinking?" The guiding principle for the therapist is careful adherence to the **Rule of Thumb: The therapist is a facilitator of interaction, not just a trainer.** An objective is that, as the training progresses, the interaction among the parents will increase, and they will be more actively supportive and offer suggestions to one another.

The following teaching components should be observed in conducting the training sessions:

- Presenting the information to be learned in **simple, concise teaching points** is the key to parents learning and assimilating new information.
- Remember the **3 Ds: Describe, Demonstrate, and Do**. Therapists first **describe** and teach the skill, next **demonstrate** the skill (video or live), then ask the parents to **do**—role-play what they saw you do.
- **Simple homework assignments** and concise informational handouts are provided to reinforce teaching points made in the training sessions.
- Active affirmation of parents' efforts is considered to be a critical key to the effectiveness
 of CPRT.
- Employing a variety of teaching tools such as **stories**, **analogies**, **and metaphors to emphasize teaching points** helps to maintain a high level of parent interest and facilitates the learning process. Parents may have difficulty recalling a teaching point in isolation, but when the point is attached to a short interest-catching story, parents will remember the story and, in turn, the teaching point.
- Catchy "Rules of Thumb" also help make teaching points easier for parents to remember.
- The therapist's responses to parents should consistently **model basic Child-Centered Play Therapy principles and skills**.
- The therapist can **use self-disclosure** about his or her efforts and mistakes as a parent to illustrate teaching points and to model permission to make mistakes.

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- Modeling is also utilized by **showing videos of the therapist's play sessions** or by the therapist conducting a live play session to demonstrate the kind of responses hoped for by parents in their play sessions.
- When viewing the video of a parent's play session, the video should be stopped frequently to validate and affirm the parent's efforts. **The focus is on what the parents are doing correctly** rather than focusing on mistakes.

We hope that you find this manual helpful and informative.

Sue and Garry

Note: For information on CPRT training workshops and Certification as a CPRT Practitioner and Practitioner-Supervisor, please contact the Center for Play Therapy, cpt.unt.edu, or contact Garry and Sue at sue.bratton@unt.edu

CHILD-PARENT RELATIONSHIP THERAPY (CPRT) AGES 3–10

THERAPIST PROTOCOL

Treatment Outlines and Handouts for Sessions 1–10

Using the CPRT Therapist Protocol for Ages 3–10

The CPRT Protocol for ages 3–10 is an evidence-based protocol intended for use by mental health professionals trained and certified in the CPRT model (https://cpt.unt.edu/child-parent-relationship-therapy-certification). Note: We have included four new protocols in this second edition designed to help therapists respond to the specific needs of parents of toddlers, parents of preadolescents, adoptive families, and teacher–student relationships. The complete Therapist Protocol and the corresponding Parent/Teacher Notebook for each of the four new protocols are downloaded from the accompanying Companion Website.

CPRT practitioners are expected to download the *Therapist Protocol—Ages 3–10* from the Companion Website found at www.routledge.com/cw/bratton, rather than copy from this manual, and familiarize themselves with the organization and content prior to conducting CPRT. The *CPRT Therapist Protocol* is organized by sessions and contains all materials required to conduct the 10-session CPRT model, including Treatment Outlines for Sessions 1–10 and all corresponding parent handouts, homework, and parent worksheets. The *Therapist Protocol—Ages 3–10* contains copies of all handouts found in the *Parent Notebook for Ages 3–10* and provides sample answers for the therapist. Sample answers are provided only as an example of an appropriate response that is consistent with the Child-Centered Play Therapy (CCPT) philosophy. For additional CCPT skills and responses, refer to Chapter 6, "CPRT Skills, Concepts, and Attitudes to Be Taught," in the companion CPRT text (Landreth & Bratton, 2019).

Downloading and printing the *Therapist Protocol for Ages 3–10* from the Companion Website allows for ease of reproduction and correct pagination. Therapists can easily print new protocols as needed. We have found that using a three-ring binder with pocket dividers and tabs for each of the 10 sessions is an efficient and useful method of organizing the materials. In preparation for each parent training session:

- Print the Materials Checklist (Appendix A) several days ahead to allow time to gather materials, videos, books, etc.
- Review the *Study Guide* (Appendix B) for that session. The Study Guide is designed with the novice CPRT therapist in mind.
- Review the CPRT demonstration video, CPRT in Action with four couples (Bratton & Landreth, 2014) and the detailed transcripts from actual CPRT Sessions 1–10 provided in the companion text (Landreth & Bratton, 2019). These resources illustrate the delivery of the CPRT curriculum and the delicate balance of presenting didactic content with group process and experiential activities.
- Print *Parent Notebooks* from the accompanying Companion Website. Be familiar with the organization of the Parent Notebook and page numbers of handouts, so that you can quickly refer parents to a specific handout or assignment during the weekly sessions.

The CPRT protocol is designed to be flexible to help you adapt the training to the unique needs of parents and children. As noted in the CPRT text (Landreth & Bratton, 2019), the 10-session curriculum presented in this manual can be adapted for use in fewer sessions, as well as extended for a longer number of sessions, depending on parent needs and group size. Although designed for use with groups of parents, the materials are also easily adapted for use with individual parents and couples. As with any treatment/intervention, therapists are expected to *exercise clinical judgment* in the use of materials and procedures.

Child-Parent Relationship Therapy (CPRT)

Session 1—Treatment Outline

Time Marker

Note: **See Companion Website (www.routledge.com/cw/bratton)** to download and print Therapist Protocol—Session 1–10 and Parent Notebook—Sessions 1–10. Appendix A contains the Materials Checklist for this session, along with any additional materials for Session 1. The CPRT Training Resources Section in this manual provides information about suggested books and videos. For the experienced CPRT practitioner, the Treatment Outlines provide a suggested order for didactic components and allow for flexibility based on clinical judgment. The novice CPRT therapist is expected to refer to the Study Guide found in Appendix B in the Companion Website.

I. Give Name Tags and Parent Notebooks to All Parents as They Arrive

(Ask parents who need to complete intake information to stay afterward.)

- Introduce yourself/co-leader and welcome parents to group!
- Facilitate brief parent introductions.
- Help parents feel supported and not alone in their parenting struggles.

II. Overview of CPRT Training Objectives and Essential Concepts

Note: Strive to weave-in training objectives and concepts in response to parents' questions and sharing concerns, rather than teaching in a linear way,

Rule of Thumb: "Focus on the donut, not the hole!"

(Optional: Bring in glazed donuts for parents and illustrate this concept in a creative way.)

CPRT focuses on the relationship, your strengths, and your child's strengths (the dough; what's there)—not on the problem (the hole; what's missing).

• Play is the child's language.

Play provides opportunities for your child to express thoughts, feelings, and wishes.

• CPRT helps *prevent* problems because parents become aware of child's emotional and relational needs.

• Rule of Thumb: "Be a thermostat, not a thermometer!"

(Process briefly as group: What does a thermostat do; a thermometer?)

You will learn to RESPOND rather than REACT. Your child's feelings are not your feelings and needn't escalate with your child's.

The best way to calm your child is to first calm and center yourself (Perry & Szalavitz, 2006).

Remember: In-control parents are thermostats; out-of-control parents are thermometers!

 You will learn basic play therapy skills that graduate students learn in a semester course.

These skills will:

- o Return control to you as a parent and help your child to develop self-control.
- o Promote secure attachment and provide closer, happier times with your child—more laughter, joy, and warm memories.

"What do you want your child to remember about you/your relationship 20 years from now?" (Process as group: what are parents' best memories from childhood?)

- o Give you the key to your child's inner world—learn how to really understand your child and communicate this understanding to your child.
- "Best of all—you only have to practice these new skills and do something different for 30 minutes per week!"
- Reminder: Patience is an important component of learning this new "play language."
- "In 10 weeks, you are going to be different, and your relationship with your child will be different."

_____ III. Group Introductions

(Goal: Facilitate sharing and connection between parents.)

- Invite each parent to describe his/her entire family (help parents select a child of focus if not identified during intake).
- Take notes on *Parent Information Form* as parents share blessings and concerns about their child of focus.
- Make normalizing/generalizing comments to link parents as they each share.

Example: "Anyone else feel angry/frustrated with their child this week?"

• Rule of Thumb: "What's most important may not be what you did, but what you do *after* what you have done!"

We are all certain to make mistakes, but we can recover. It is how we handle our mistakes that makes the difference.

In this way, parents offer children a model of how to repair relationships!

IV. Reflective Responding

- A way of <u>following rather than leading</u> during the 30-minute playtimes.
- Reflect behaviors, thoughts, needs/wishes, and feelings (without asking questions).

If you know enough to ask a question, you know enough to make a reflection.

• Helps the parent understand the child <u>and</u> helps the child feel understood.

	"Be-With" Attitudes Convey:	Not:
	I am here; I hear you.	I always agree.
	I understand.	I must make you happy.
	I care.	I will solve your problems.
V.	Optional—Show Video Clips of	Life's First Feelings (see Training Resources)
	• Video clip #1: Watch; discuss we they notice about the baby in t	what parents notice in "typical" interaction and what the "Still Face" experiment.
		nt-child dance), notice co-regulation process and parent to stay connected in the relationship.
	As parents, how often are we finities for connection with our	focused on a task or the phone and miss opportuchildren?
	• Video clip #2: Watch; discuss p feelings are shown in the babie	parents' reactions to universal feelings and how es' faces (especially mad-sad).
VI.	Feelings Response: In-Class Pra Complete worksheet together with	actice Worksheet (<i>Parent Notebook</i> p. 128).
	 Ask parents as a group to decident child in each scenario is feeling 	de on feeling words that best describe how the g.
	• Then, as a group, decide on a	short reflective response.
VII.	Role-play (Goal: Parents actively	practice reflective responding)
		their day for 30 seconds (or demonstrate with seconds, simply reflect what you heard.
	• Then, pair up parents and ask reflective responding.	them to take turns being the "listener" practicing
VIII.	Optional—Video Demonstration	(if time permits)
	Show a video clip of an example feeling and allowing the child to	ble play session demonstrating skills of reflection of to lead.
IX.	Homework Assignments (Parent	Notebook p. 127)
	☐ Practice reflective responding- and bring to group next week	—complete Feelings Response: Homework Worksbeet
	☐ Notice one physical characteri	stic about your child you haven't seen before.

	☐ Bring your favorite, heart-tugging photo of your child of focus.
	□ Practice giving a <u>30-second Burst of Attention</u> . Example: If you are on the telephone, say, "Can you hold for 30 seconds? I'll be right back." Put the phone aside, bend down, and give your child undivided, focused attention for 30 seconds; then say "I have to finish talking to" Stand back up and continue talking with your friend.
X.	Close with Motivational Poem, Story, or Rule of Thumb (optional)
	Suggest: I'll Love You Forever by Robert Munsch or other children's books and resources included in the CPRT Training Resources section of this manual

RULES OF THUMB TO REMEMBER:

- 1. "Focus on the donut, not the hole!" Focus on the relationship, NOT the problem.
- 2. "Be a thermostat, not a thermometer." Learn to RESPOND (reflect) rather than REACT.
- 3. "What's most important may not be what you do, but what you do after what you have done!" We all make mistakes, but we can recover. It is how we handle our mistakes that makes the difference.

CHILD-PARENT-RELATIONSHIP (C-P-R) TRAINING Parent Notes and Homework—Session 1

NULES OF THUMB TO REMEMBER:

- 1. "Focus on the donut, not the hole!" Focus on the Relationship, NOT the Problem.
- 2. "Be a thermostat, not a thermometer." Learn to RESPOND (reflect) rather than REACT.

Remember: The best way to calm your child is to first calm and center yourself.

3. "What's most important may not be what you do, but what you do after what you have done!" We all make mistakes, but we can recover. It is how we handle our mistakes that makes the difference.

Reflective Responding:

	A way of following, rather than leading.
	Reflect behaviors, thoughts, needs/wishes, and feelings (without asking questions).
	Helps you understand your child and helps your child feel understood.
	"Be-With" Attitudes Convey: I am here; I hear you. I understand. I care. Not: I always agree. I must make you happy. I will solve your problems.
	Notes: (use back for additional notes)
lome	ework Assignments:
	Practice reflective responding (complete Feeling Response: Homework Worksheet and bring next week).
	Notice one physical characteristic about your child you haven't seen before.
	Bring your favorite, heart-tugging picture of your child of focus.
	Practice giving a 30-second Burst of Attention. If you are on the telephone, say, "Can you hold for 30 seconds? I'll be right back." Put the phone aside, bend down, and give your child undivided, focused attention for 30 seconds; then say, "I have to finish talking to" Stand back up and continue talking with your friend.

CHILD-PARENT-RELATIONSHIP (C-P-R) TRAINING Feelings Response: In-Class Practice Worksheet—Session 1

Directions: (1) Look into child's eyes for clue to feeling. (2) After you've decided what child is feeling, put the feeling word into a short response, generally beginning with <u>you</u>, "you seem sad" or "you're really mad at me right now." (3) Your facial expression and tone of voice should match your child's (empathy is conveyed more through non-verbals than verbals).



Child: Oscar is telling you all the things he's going to show his older cousin, Sophia, this weekend.



Child: Serena gets in the car after school and tells you that Bert, the class pet hamster, died—and then tells you about how she was in charge of feeding Bert last week and how he would look at her and then get on his wheel and run.

Child Felt: Excited, Happy

Parent Response: You're excited to play with Sophial

Child Felt: Sad, Disappointed

Parent Response: You're sad that Bert died.



Child: Andre was playing with his friend, Harry, when Harry grabbed Andre's fire truck and wouldn't give it back. Andre tried to get it back and the ladder broke off. Andre comes to you crying and tells you what happened and that it's all Harry's fault.

Child Felt: Mad, Angry, Upset

Parent Response: You're really mad at Harry or You're

really upset about your truck.



Child: Zara was playing in the garage while you were cleaning it out, when a big box of books falls off the shelf and hits the floor behind her. She jumps up and runs over to you.

Child Felt: Scared, Surprised (depends on child's facial

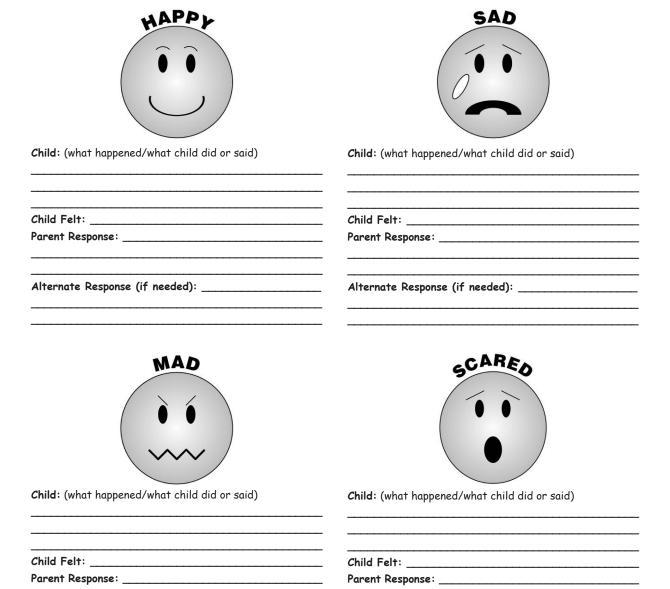
expression)

Parent Response: That (scared, surprised. . .) you!

CHILD-PARENT-RELATIONSHIP (C-P-R) TRAINING Feelings Response: Homework Worksheet—Session 1

Directions: (1) Look into child's eyes for clue to feeling. (2) After you've decided what child is feeling, put the feeling word into a short response, generally beginning with <u>you</u>, "you seem sad" or "you're really mad at me right now."

(3) Remember the importance of your facial expression and tone of voice matching child's (empathy is conveyed more through non-verbals than verbals).



Alternate Response (if needed):

Alternate Response (if needed):

CHILD-PARENT-RELATIONSHIP (C-P-R) TRAINING What Is It and How Can It Help?

What Is It?

Child-Parent-Relationship (C-P-R) Training is a special 10-session parent training program to help strengthen the relationship between a parent and a child by using 30-minute playtimes once a week. Play is the most natural way children communicate. Toys are like words for children and play is their language. Adults talk about their experiences, thoughts, and feelings. Children use toys to explore their experiences and express what they think and how they feel. Therefore, parents are taught to have special structured 30-minute playtimes with their child using a kit of carefully selected toys in their own home. Parents learn how to respond empathically to their child's feelings, build their child's self-esteem, help their child learn self-control and self-responsibility, and set therapeutic limits during these special playtimes.

For 30 minutes each week, the child is the center of the parent's universe. In this special playtime, the parent creates an accepting relationship in which a child feels completely safe to express himself through his play—fears, likes, dislikes, wishes, anger, loneliness, joy, or feelings of failure. This is not a typical playtime. It is a special playtime in which the child leads and the parent follows. In this special relationship, there are no:

- reprimands
- put-downs
- evaluations
- requirements (to draw pictures a certain way, etc.)
- judgments (about the child or his play as being good or bad, right or wrong)

How Can It Help My Child?

In the special playtimes, you will build a different kind of relationship with your child, and your child will discover that she is capable, important, understood, and accepted as she is. When children experience a play relationship in which they feel accepted, understood, and cared for, they play out many of their problems and, in the process, release tensions, feelings, and burdens. Your child will then feel better about herself and will be able to discover her own strengths and assume greater self-responsibility as she takes charge of play situations.

How your child feels about herself will make a significant difference in her behavior. In the special playtimes where you learn to focus on your child rather than your child's problem, your child will begin to react differently, because how your child behaves, how she thinks, and how she performs in school are directly related to how she feels about herself. When your child feels better about herself, she will behave in more self-enhancing ways rather than self-defeating ways.

Child-Parent Relationship Therapy (CPRT)

Session 2—Treatment Outline



Note: **See Companion Website** Appendix A to download and print Materials Checklist and any additional materials for this session. The CPRT Training Resources section in this manual provides information about suggested books and videos

I. Informal Sharing and Review of Homework

- Check in about each parent's week and reflect briefly.
- Review homework from Session 1:
 - 30-second Burst of Attention
 - Feelings Response: Homework Worksheet—refer parents to worksheet to review and practice reflective responding. Reflect parents' experiences and model encouragement as parents share.
 - Physical Characteristic/Favorite Picture—invite parents to share. Reflect their emotions as they report noticing their child's characteristic and share their photos
- **II. Demonstration of Toys:** *Toy Checklist for Play Sessions* handout (Bring toys for demonstration and for parents to use to role play in IV. Helpful to bring example filial toy kit)
 - Briefly review Toy Categories on *Toy Checklist for Play Sessions (Parent Notebook* p. 132). Don't read the entire list.
 - Demonstrate/show toys and briefly explain rationale—especially for toys that may concern parents (dart gun and baby bottle). You might ask parents: "What toys surprise you to see on the list?" Process their concerns.
 - As toys are shown, briefly provide examples of how you might respond to child playing with that toy (co-leader can role-play with you!).
 - Discuss finding inexpensive, used, or free toys to include in kit.
 - Emphasize the importance of the toys. *Ask parents to commit to having over half the toys by next week—preferably all.* If they don't, they likely won't be ready for their first play session.
 - Discuss pros and cons of involving child in collecting toys for play session kit.

_____ III. Basic Principles of Play Sessions handout (Parent Notebook p. 133)

Briefly review the Basic Principles with focus on "Be-With" Attitudes.

I'm here—I hear you—I understand—I care—I delight in you!

- **1.** Parent allows the child to lead and parent follows, without asking questions or making suggestions.
 - o Show keen interest and closely observe.
 - Body language conveys interest and full attention.
 (Optional: Spontaneously role-play with one parent in group what it is like to talk without giving parent full attention vs. what it is like to talk when receiving full attention/toes follow nose body language.)

Rule of Thumb: "The parent's toes should follow their nose."

- o Actively join in when invited.
- o Parent is no longer a teacher; the child is "expert" for 30 minutes.
- 2. Parents' major task is to empathize with their child.
 - o See and experience your child's play through your child's eyes.
 - o Understand child's needs, feelings, and thoughts expressed through play.
- **3.** Parents communicate this understanding to their child by:
 - Describing what the child is doing/playing.
 - Reflecting what the child is saying.
 - Reflecting what the child is feeling.
- **4.** Parent is clear, firm, and consistent about the *few* "limits" that are placed on child's behavior during playtimes.
 - o Parent gives child responsibility for behavior.
 - Limits are set for safety, to prevent breaking toys or damaging play area, and to end session.
 - o Limits are used only when needed.

Note: If time allows, briefly review goals of play sessions on handout.

_ IV. Demonstration and Role-Play of Basic Play Session Skills

• At least 10 minutes: Demonstrate (video or live) play skills, stopping to answer questions and process reactions.

- 10–15 minutes: Parents pair up and role-play with the toys, taking turns being a child and a parent practicing basic play session skills just demonstrated.
- 5–10 minutes: Therapist role-plays "scenarios" to which parents had difficulty responding during partner role-play.

Structuring for Success Tips:

Show video clip (never a client video) that clearly demonstrates the concept of setting the stage, allowing child to lead (without asking questions), tracking, and conveying "Be-With" Attitudes (or conduct live demo focusing on same attitudes and skills).

V. Choosing a Time and Place for Play Sessions

• Suggest a room that parent believes will offer the fewest distractions to the child and greatest freedom from worry about breaking things or making a mess.

Example: Kitchen area is ideal if no one else at home; otherwise, choose a space where the door can be closed.

- Set aside a regular time in advance. This time is to be undisturbed—no phone calls or interruptions by other family members, and a time when the child is not tired or hungry.
- Most importantly, parents choose a time when they feel most relaxed, rested, and emotionally available to their child.

Rule of Thumb: "You can't give away that which you don't possess."

(Analogy: Oxygen mask on airplane—take care of yourself first, then your child.)

As your child's most significant caregiver, you are asked to give so much of yourself; often when you simply don't have the resources within you to meet the demands of parenting.

You can't extend patience and acceptance to your child if you can't first offer it to yourself.

VI.	Н	omework Assignments (Parent Notebook p. 131)
		Priority—Collect toys on <i>Toy Checklist for Play Sessions</i> . Brainstorm ideas and sources and suggest parents share resources.
		Select a consistent time and an uninterrupted place in the home suitable for the play sessions and <u>report back next week</u> . Set aside a regular time in advance.
		<i>Day/Time</i> : <i>Place</i> :
		Review Basic Principles of Play Sessions handout (Parent Notebook p. 133)
		Additional Assignment:

_____ VII. Close with Motivational Poem, Story, or Rule of Thumb (optional)

RULES OF THUMB TO REMEMBER:

- 1. "The parent's toes should follow his/her nose."
- 2. "You can't give away that which you don't possess." Remember the analogy of the oxygen mask on an airplane!

CHILD-PARENT-RELATIONSHIP (C-P-R) TRAINING Parent Notes and Homework—Session 2

RULES OF THUMB TO REMEMBER:

- 1. "The parent's toes should follow his/her nose."
- 2. "You can't give away that which you don't possess." You can't extend patience and acceptance to your child if you can't first offer it to yourself. As your child's most significant caregiver, you are asked to give so much of yourself, often when you simply don't have the resources within you to meet the demands of parenting.

Remember the analogy of the oxygen mask on an airplane!

Focus on the "Be-With" Attitudes
I'm here—I hear you—I understand—I care—I delight in you!

	Notes: (use back for additional notes)
Home	ework Assignments:
	Priority—Collect toys on Toy Checklist for Play Sessions.
	Select a consistent time and an uninterrupted place in the home suitable for the play sessions and report back next week—whatever room you feel offers the fewest distractions to the child and the greatest freedom from worry about breaking things or making a mess. Set aside a regular time in advance that is best for you and your child. This time is to be undisturbed—no phone calls or interruptions by other children.
Tit	ne: Place:
	Review Basic Principles of Play Sessions handout
	Additional Assianment:

CHILD-PARENT-RELATIONSHIP (C-P-R) TRAINING Toy Checklist for Play Sessions—Session 2

Note: Obtain sturdy cardboard box with lid or plastic container with lid to store toys (copy paper box is ideal—the deep lid becomes a dollhouse). Use an old blanket to spread toys out on and to serve as a boundary for the play area.

Real-Life Toys (also promote imaginative play)	
☐ Small baby doll: should not be anything "special"; can be extra one that child does not play with anymore	
☐ Baby bottle: real one so it can be used by the child to put a drink in during the session ☐ Doctor kit (with stethoscope): add three Band-Aids for each session (add disposable gloves/Ace bandage	if
you have)	, 11
☐ Toy phones: recommend getting two in order to communicate: one cell, one regular	
□ Doll family: bendable mother, father, brother, sister, baby, and so forth (representative of your family)	
□ Play money: bills and coins; credit card is optional	
☐ Couple of domestic and wild animals: if you don't have doll family, you can substitute an animal family (e.g.,	,
horse, cow family) Car/truck: one to two small ones (could make specific to child's needs, e.g., an ambulance)	
☐ Kitchen dishes: couple of plastic dishes, cups, and eating utensils	
<u>Optional</u>	
Small dollhouse: use lid of box the toys are stored in—draw room divisions, windows, doors, and so forth	
inside of lid	
□ Puppets: one aggressive, one gentle; can be homemade or purchased (animal-shaped cooking mittens, etc.)	
□ Doll furniture: for a bedroom, bathroom, and kitchen □ Dress up: hand mirror, bandana, scarf; small items you already have around the house	
·	
Acting-Out Aggressive Toys (also promote imaginative play)	
□ Dart guns with a couple of darts and a target: parent needs to know how to operate □ Rubber knife: small, bendable, army type	
□ Rope: prefer soft rope (can cut the ends off jump rope)	
☐ Aggressive animal: (e.g., snake, shark, lion, dinosaurs—strongly suggest hollow shark!)	
□ Small toy soldiers (12-15): two different colors to specify two teams or good guys/bad guys	
☐ Inflatable bop bag (Bobo <i>clown style preferable</i>)	
 ☐ Mask: Lone Ranger type ☐ Toy handcuffs with a key 	
·	
Toys for Creative/Emotional Expression	<i>a</i>
□ Play-Doh: suggest a cookie sheet or plastic placemat to put Play-Doh on to contain mess—also serves as a surface for drawing	tlat
□ Crayons: eight colors, break some and peel paper off (markers are optional for older children but messier	~)
☐ Plain paper: provide a few pieces of new paper for each session	,
☐ Scissors: not pointed, but that cut well (e.g., child Fiskars	
☐ Transparent tape: remember, child can use up all of this, so buy several of smaller size	
☐ Egg carton, styrofoam cup/bowl: for destroying, breaking, or coloring	
□ Ring toss game □ Soft foam ball	
☐ Small musical instrument (preferably two)	
<u>Optional</u>	
☐ Selection of arts/crafts materials in a ziplock bag (e.g., colored construction paper, glue, yarn, buttons,	
beads, scraps of fabrics, raw noodles, etc.—much of this depends on age of child)	
□ Tinkertoys/small assortment of building blocks □ Binoculars	
☐ Magic wand	
☐ Two balloons (per play session)	
Reminder: Toys need not be new or expensive. Avoid selecting more toys than will fit in a box—toys should be	
small. In some cases, additional toys can be added based on child's need and with therapist approval. If unable t get every toy before first play session, obtain several from each category—ask therapist for help in prioritizing	
Note: Unwrap any new toys or take out of box before play session. Toys should look inviting.	,
Note: Offwright any new toys or take out of box before play session. Toys should both inviting.	
Good Toy Hunting Places: garage sales, friends/relatives, "dollar" stores	

CHILD-PARENT-RELATIONSHIP (C-P-R) TRAINING Basic Principles of Play Sessions—Session 2

Basic Principles for Play Sessions:

- 1. The parent sets the stage by structuring an atmosphere in which the child feels free to determine how he will use the time during the 30-minute play session. The child leads the play and the parent follows. The parent follows the child's lead by showing keen interest and carefully observing the child's play, without making suggestions or asking questions, and by actively joining in the play when invited by the child. For 30 minutes, you (parent) are "dumb" and don't have the answers; it is up to your child to make his own decisions and find his own solutions. Your child is the expert.
- 2. The parent's major task is to empathize with the child: to understand the child's thoughts, feelings, and intent expressed in play by working hard to see and experience the child's play through the child's eyes. This task is operationalized by conveying the "Be-With" Attitudes below.
- 3. The parent is then to communicate this understanding to the child by (a) verbally describing what the child is doing/playing, (b) verbally reflecting what the child is saying, and (c) most importantly, by verbally reflecting the feelings that the child is actively experiencing through his play.
- 4. The parent is to be clear and firm about the few "limits" that are placed on the child's behavior. Limits are stated in a way that give the child responsibility for his actions and behaviors—helping to foster self-control. Limits to be set are time limits, not breaking toys or damaging items in the play area, and not physically hurting self or parent. Limits are to be stated only when needed, but applied consistently across sessions. (Specific examples of when and how to set limits will be taught over the next several weeks; you will also have lots of opportunities to practice this very important skill.)

"Be-With" Attitudes:

Your intent in your actions, presence, and responses is what is most important and should convey to your child:

"I am here—I hear you—I understand—I care—I delight in you!"

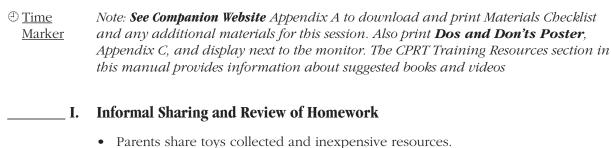
Goals of the Play Sessions:

- 1. To allow the child—through the medium of play—to communicate thoughts, needs, and feelings to his parent, and for the parent to communicate that understanding back to the child.
- 2. To help the child experience more positive feelings of self-respect, self-worth, confidence, and competence—through feeling accepted, understood, and valued—and ultimately develop self-control, responsibility for actions, and learn to get needs met in appropriate ways.
- 3. To strengthen the parent-child relationship and foster a sense of trust, security, and closeness for both parent and child.
- 4. To increase the level of playfulness and enjoyment between parent and child. Enjoy 30 minutes of time together!



Child-Parent Relationship Therapy (CPRT)

Session 3—Treatment Outline



- Tarento sinare toyo concerca and mexpensive resource
- Parents share time and place for play sessions
 Important to ask specific questions about when and where
- Hand out appointment cards—one for parent and one for child to keep (Suggest taping card to mirror in bathroom where child brushes teeth)
- _____ II. Play Session Procedures Checklist handout: (Parent Notebook p. 135)
 - Briefly go over handout—especially what to do before the session to structure for success. Ask parents to read over carefully at least 2 days before their play session.
 - Refer parents to photograph (p. 137) showing toys set up for play session.
 - ____ III. *Play Session Dos & Don'ts* handout: (*Parent Notebook* p. 136); also refer to *Play Session Dos & Don'ts* poster
 - Begin with brief review of **Don'ts**: Ask parents to circle the **Don't** that will be hardest for them.

Don't:

- 1. Don't criticize any behavior.
- 2. Don't praise the child.
- 3. Don't ask leading questions.
- 4. Don't allow interruptions of the session.
- 5. Don't give information or teach.
- 6. Don't preach.
- 7. Don't initiate new activities.
- 8. Don't be passive or quiet.
 - (Don'ts 1–7 are taken from Guerney, 1972.)

• Next, ask parents to refer to *Play Session Dos*. Ask them to circle 1, 2, 3, & 6. *Emphasize those are the only Dos parents need to focus on in the first play session*.

Do:

- 1. Do set the stage (structuring).
- 2. Do let the child lead.
- 3. Do join in the child's play actively, as a follower.
- 4. Do verbally track child's play (describe what you see).
- 5. Do reflect the child's feelings.
- **6. Do set firm and consistent limits** (give two brief examples. e.g. Play-Doh, dart gun).
- 7. Do salute the child's power and encourage effort.
- 8. Do be verbally active.

IV.	Demonstration of Play Session Dos: View Video Clip (preferably) and/or Condu	ıct
	a Live Demonstration	

- Video clip should focus on demonstrating the "Be-With" Attitudes and Dos 1,
 2, & 3; secondary focus on 4 track child's play/describe what you see
- Briefly review 2 limit setting examples with dart gun and Play Doh if you have not. Focus on Communicate the limit and Target an alternative

_____ V. Parent Partners Role-Play

Have parents take turns being the parent and practice skills they saw you demonstrate, as well as practice beginning and ending the session.

_____ VI. Discuss with Parents How to Explain "Special Playtime" to Their Child

Example explanation: "You may wish to explain to your child that you are having these special playtimes with her because 'I am going to this special play class to learn some special ways to play with you!"

VII. Arrange for One to Two Parent(s) to Video-Record This Week

Hint: Handpick the first 1–2 parents whom you think will be most successful

- Name/phone number _____ day/time (if recording at clinic) ______
- Name/phone number _____ day/time (if recording at clinic) _____
- Remind parent(s) who are video-recording this week to make note on their *Parent Notes and Homework* handout.

VIII. Homework Assignments (Parent Notebook p. 134)

☐ Complete play session toy kit—get blanket/tablecloth and other materials (see *Photograph of Toys Set Up for Play Session* in handouts) and confirm that the <u>time</u> and place you chose will work. Make arrangements for other children.

	Explain to your child why you are having these special playtimes with him or her. Then, give your child an appointment card (display where child can see the card: suggest taping card to mirror in the bathroom where child brushes teeth).
	Make "Special Playtime—Do Not Disturb" sign with child 1 to 3 days ahead (depending on child's age). The younger the child, the closer to the time of play session.
	Note to Therapist: Print out <i>Appointment Cards</i> and <i>Template for "Do Not Disturb" Sign</i> from Appendix A in the Companion Website and distribute to parents.
	Read handouts prior to play session:
	• Play Session Procedures Checklist
	• Play Session Dos & Don'ts
	Play sessions begin at home this week—arrange to video-record your session and make notes about problems or questions you have about your sessions.
1	will bring my video next week (if video-recording at clinic: my appt. day/time)
IX.	Close with Motivational Poem, Story, or Rule of Thumb (optional)

RULE OF THUMB TO REMEMBER:

"Be a thermostat, not a thermometer."

Reflecting/responding to your child's thoughts, feelings, and needs creates an atmosphere of understanding and acceptance for your child and helps prevent problems.



CHILD-PARENT-RELATIONSHIP (C-P-R) TRAINING Parent Notes and Homework—Session 3

SECOND REMEMBER:

"Be a thermostat, not a thermometer."

Reflecting/responding to your child's thoughts, feelings, and needs creates an atmosphere of understanding and acceptance for your child and helps prevent problems.

During the 30-minute play session, you are to be a thermostat for your child.

Basic Limit Setting: Focus on Communicate the limit and Target an alternative				
	If child picks up the gun and aims it at you:			
	"Jamal, I know you'd like to shoot the gun at me, but I'm not for shooting. You can <u>choose</u> to shoot at that" (point at something <u>acceptable</u>)."			
	If child starts to smash Play-Doh on the floor:			
,	"Lucy, I know you're really having fun with that, but the Play-Doh is not for the floor/carpet. You can choose to smash it on the tray or a piece of paper."			
	Notes: (use back for additional notes)			
Hom	ework Assignments:			
	Complete play session toy kit—get blanket and other materials (see <i>Photograph of Toys Set Up for Play Session</i> in handouts) and confirm that the time and place you chose will work. Make arrangements for other children.			
	Explain to your child that you are having these special playtimes with him or her because "I am going to this special play class to learn some special ways to play with you!" Then, give your child an appointment card (display where child can see the card: suggest taping card to mirror in the bathroom where child brushes teeth).			
	Make "Special Playtime—Do Not Disturb" sign with child 1 to 3 days ahead (depending on child's age). The younger the child, the closer to the time of play session.			
	Read over handouts prior to play session:			
	Play Session Procedures Checklist			
	Play Session Dos & Don'ts			

□ Play sessions begin at home this week—arrange to video-record your session and make notes about

_ I will bring my video next week (if video-recording at clinic: my appt. day/time ____).

problems or questions you have about your sessions.

CHILD-PARENT-RELATIONSHIP (C-P-R) TRAINING Play Session Procedures Checklist—Session 3

Depending on age of child, may need to remind him or her: "Today is the day for our special playtime!"

B. Beginning the Session Child and Parent: Hang "Do Not Disturb" sign (can also "unplug" phone if there is one in play sess area). Message to child: "This is so important that No One is allowed to interrupt this time toge Tell Child: "We will have 30 minutes of special playtime, and you can play with the toys in lots of ways you want to." (Voice needs to convey that parent is looking forward to this time with child.) From this point let the child lead. C. During the Session Sit on the same level as child, close enough to show interest but allowing enough space for child move freely. Focus your eyes, ears, and body fully on child. (Toes Follow Nose!) Conveys full attention! Your voice should mostly be gentle and caring, but vary with the intensity and affect of child's Allow the child to identify the toys. (To promote make-believe play [e.g., what looks like a car to you be a spaceship to your child], try to use nonspecific words ["this," "that," "it"] if child hasn't named to Play actively with the child, if the child requests your participation. Verbally reflect what you see and hear (child's play/activity, thoughts, feelings). Set limits on behaviors that make you feel uncomfortable. Give 5-minute advance notice for session's end and then a 1-minute notice. ("Anika, we have 5 minutes left in our special playtime.") D. Ending the Session At 30 minutes, stand and announce, "Our playtime is over for today." Do not exceed time limi more than 2 to 3 minutes. Parent does the cleaning up. If child chooses, child may help. (If child continues to play while "cing," set limit below.) If child has difficulty leaving: Open the door or begin to put away toys. Reflect child's feelings about not wanting to leave, but calmly and firmly restate that the pla is over. (Restate limit as many times as needed—the goal is for child to be able to stop herse "I know you would like to stay and play with the toys, but our special playtime is over for to Adding a statement that gives child something to look forward to	A .	Prior to Session (Remember to "Set the Stage") Make arrangements for other family members (so that there will be no interruptions). Prepare a snack or activity for after the play session (see item D. below) Set up toys on old quilt—keep toy placement predictable. Have a clock visible in the room (or wear a watch). Put pets outside or in another room. Let the child use the bathroom prior to the play session. Switch on video recorder.	
 Sit on the same level as child, close enough to show interest but allowing enough space for child move freely. Focus your eyes, ears, and body fully on child. (Toes Follow Nose!) Conveys full attention! Your voice should mostly be gentle and caring, but vary with the intensity and affect of child's Allow the child to identify the toys. (To promote make-believe play [e.g., what looks like a car to you be a spaceship to your child], try to use nonspecific words ["this," "that," "it"] if child hasn't named the play actively with the child, if the child requests your participation. Verbally reflect what you see and hear (child's play/activity, thoughts, feelings). Set limits on behaviors that make you feel uncomfortable. Give 5-minute advance notice for session's end and then a 1-minute notice. ("Anika, we have 5 minutes left in our special playtime.") Ending the Session At 30 minutes, stand and announce, "Our playtime is over for today." Do not exceed time limit more than 2 to 3 minutes. Parent does the cleaning up. If child chooses, child may help. (If child continues to play while "cing," set limit below.) If child has difficulty leaving: Open the door or begin to put away toys. Reflect child's feelings about not wanting to leave, but calmly and firmly restate that the plat is over. (Restate limit as many times as needed—the goal is for child to be able to stop herse. "I know you would like to stay and play with the toys, but our special playtime is over for to Adding a statement that gives child something to look forward to helps child see that, althous she cannot continue to play with the special toys, there is something else she can do that is a enjoyable. For example:	В.	 □ Child and Parent: Hang "Do Not Disturb" sign (can also "unplug" phone if there is one in play area). Message to child: "This is so important that No One is allowed to interrupt this time □ Tell Child: "We will have 30 minutes of special playtime, and you can play with the toys in loways you want to." (Voice needs to convey that parent is looking forward to this time with child.) 	together.'
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	D.	Ending the Session At 30 minutes, <u>stand</u> and announce, "Our playtime is over for today." Do not exceed time more than 2 to 3 minutes. Parent does the cleaning up. If child chooses, child may help. (If child continues to play whing," set limit below.) If child has difficulty leaving: Open the door or begin to put away toys. Reflect child's feelings about not wanting to leave, but calmly and firmly restate that the is over. (Restate limit as many times as needed—the goal is for child to be able to stop. "I know you would like to stay and play with the toys, but our special playtime is over. Adding a statement that gives child something to look forward to helps child see that, a she cannot continue to play with the special toys, there is something else she can do the enjoyable. For example: 1. "You can play with the toys (or specific toy) next week during our special playting." "It's time for snack; would you like grapes or cherries today?"	ile "clean- e playtime herself.) for today. although at is also

Note: Patience is the order of the day when helping child to leave—OK to repeat limit calmly several times to allow child to struggle with leaving on her own. (Key is showing empathy and understanding in your voice tone and facial expressions as you state the limit.) Younger children may need more time to "hear" limit and respond.

Never use Special Playtime as a reward or consequence—no matter the child's behavior that day!

CHILD-PARENT-RELATIONSHIP (C-P-R) TRAINING Play Session Dos & Don'ts—Session 3

Parents: Your major task is to show genuine and intentional interest in your child's play. You communicate your interest in, and understanding of, your child's thoughts, feelings, and behavior through your words, actions, and undivided focus on your child.

1. Do set the stage. (Structure for Success!)

- Prepare play area ahead of time (old blanket can be used to establish a visual boundary of the play area, as well as provide protection for flooring; a cookie sheet under the arts/crafts materials provides a hard surface for Play-Doh, drawing, and gluing and provides ease of clean up).
- Display the toys in a consistent manner around the perimeter of the play area.
- Convey freedom as you introduce your special playtime to your child: "During our special playtime, you can play with the toys in lots of the ways you'd like to.
- Allow your child to lead by <u>returning responsibility</u> to your child using responses, such as "That's up to <u>you</u>," "<u>You</u> can decide," or "That can be whatever <u>you</u> want it to be."

2. Do let your child lead.

- Allowing your child to lead during the playtime helps you to better understand your child's world and what your child needs from you.
- Communicate your willingness to follow your child's lead through your responses: "Show me what you want me to do," "You want me to put that on," "Hmmm...," or "I wonder..."
 Use whisper technique (co-conspirators) when child wants you to play a role: "What should I say?" or "What happens next?" (Modify responses for older kids: use conspiratorial tone, "What happens now?" "What kind of teacher am I?" etc.)

3. Do join in your child's play actively and playfully, as a follower.

- Convey your willingness to follow your child's lead through your responses and your actions, by <u>actively</u> joining in the play (child is the director, parent is the actor) using responses such as "So I'm supposed to be the teacher," "<u>You</u> want me to be the robber, and I'm supposed to wear the black mask," "Now I'm supposed to pretend I'm locked up in jail, until you say I can get out," or "<u>You</u> want me to stack these just as high as yours."
- You can also use the whisper technique described above.

4. Do verbally track the child's play (describe what you see).

- Verbally tracking your child's play is a way of letting your child know that you are paying close attention and that you are interested
- Use observational responses, such as "You're filling that all the way to the top," "You've decided you want to paint next," or "You've got 'em all lined up just how you want them.

5. Do reflect your child's feelings.

- Verbally reflecting children's feelings helps them feel understood and communicates your acceptance of their feelings and needs.
 Use reflective responses, such as "You're proud of your picture," "That kinda surprised you," "You really like how that feels on your hands," "You really wish that we could play longer," "You don't like the way that turned out," or "You sound disappointed." (Hint: Look closely at your child's face to better identify how your child is feeling.)

6. Do set firm and consistent limits.

- Consistent limits create a structure for a safe and predictable environment for children.
- Children should never be permitted to hurt themselves or you.
- Limit setting provides an opportunity for your child to develop self-control and self-responsibility.

 Using a calm, patient, yet firm voice, say, "I know you're having fun, but the carpet's not for putting Play-Doh on; you can play with it on the tray" or "I know you'd like to shoot the gun at me, but I'm not for shooting. You can choose to shoot at that" (point to something acceptable).

7. Do salute the child's power and encourage effort.

- Verbally recognizing and encouraging your child's effort builds self-esteem and confidence and promotes self-motivation.
- Use self-esteem-building responses, such as "You worked hard on that!" "You did it!" "You figured it out!" "You've got a plan for how
 you're gonna set those up," "You know just how you want that to be," or "Sounds like you know lots about how to take care of babies."

8. Do be verbally active.

- Being verbally active communicates to your child that you are interested and involved in her play. If you are silent, your child will feel
- Note: Empathic grunts—"Hmm . . ." and so forth—also convey interest and involvement, when you are unsure of how to respond.

Don't:

- 1. Don't criticize any behavior.
- 2. Don't praise the child.
- 3. Don't ask leading questions.
- 4. Don't allow external interruptions of the session.
- 5. Don't give information or teach.
- 6. Don't preach.
- Don't initiate new activities.
- 8. Don't be passive or quiet.
 - (Don'ts 1-7 are taken from Guerney, 1972.)

Remember the "Be-With" Attitudes: Your intent in your responses is what is most important. Convey to your child: "I am here—I hear you—I understand—I care—I delight in you!"

Reminder: These play session skills (the new skills you are applying) are relatively meaningless if applied mechanically and not as an attempt to be genuinely empathic and truly understand your child. Your Intent and Attitude Are More Important Than Your Words!

CHILD-PARENT-RELATIONSHIP (C-P-R) TRAINING Photograph of Toys Set Up for Play Session—Session 3



Child-Parent Relationship Therapy (CPRT)

Session 4—Treatment Outline

TimeMarker

Note: **See Companion Website** Appendix A to download and print **Materials Checklist** and any additional materials for this session. Also print **Dos and Don'ts Poster**, Appendix C, and display next to the monitor. The CPRT Training Resources section in this manual provides information about suggested books and videos.

Informal Sharing, followed by Parent Sharing Highlights of Preparing for and Conducting Home Play Sessions (parents with video go last)

- Be aware of time as parents share how their week has gone—keep group process moving!
- During informal sharing, parents often report times during the week when their children were upset and parents didn't know how to respond. *The following Rule of Thumb can be used when it naturally fits with parents' comments or at the end of the session.*

Rule of Thumb: When a child is drowning, don't try to teach her to swim.

When a child is feeling upset or out of control, that is not the moment to impart a rule or teach a lesson.

Your job is to "save your child" when he/she is drowning in emotions. You can help calm your child and co-regulate his/her feelings and behavior by calmly conveying your understanding and acceptance in your words and actions.

- Transition into parents sharing about their play sessions.
- Model encouragement by prizing parents' efforts.
- Use parents' sharing to emphasize examples of **Play Session Dos**; look for something positive to reflect for <u>each</u> parent.
- Refer to poster or handout and encourage parents' efforts to recognize the Play Session Dos.
- Seize opportunities to forge connections between parents with similar struggles.

____ II. Video-Recorded Play Session Review and Supervision

Note: Comment on the **positive**, taking a few words the parent said or nonverbal behavior and turning that into a **Play Session Do** or another teaching point (**Remember, the Donut Analogy applies to parents, too**).

- Encourage the parent who video-recorded the session to share what it was like to be video-recorded knowing that she would have to share it with the class.
- Ask if the parent has a question about some part of the session or if there is some part he/she would particularly like to show—play that portion of the video. If the parent does not have a spot to start, fast forward approximately 5–8 minutes.

- Play video until a strength is evident.
- Focus on importance of parent's awareness of self in the play session.
- Identify *only one* thing the parent might do differently.
- After stopping the video, refer parents to *Play Session Dos & Don'ts* poster or handout. Ask parents to identify the **Dos** they saw demonstrated in the video-recorded play session.

____ III. Limit Setting: A-C-T Before It's Too Late! and Limit Setting: A-C-T Practice Worksheet handouts: (Parent Notebook p. 139)

- Briefly review the A-C-T model—go over importance of consistency. (optional) Show video clip on limit setting.
- Parent is in charge of the structure for the play session: selecting the time and place, establishing necessary limits, and enforcing the limits.
- Child is responsible for choices and decisions, within the limits set by parent during playtimes.
- Briefly give a few examples of possible limits to set during play sessions.
- Rule of Thumb: "During play sessions, limits are not needed until they are needed!"
- Review Limit Setting: A-C-T Practice Worksheet (Parent Notebook p. 140)

Do at least two or three examples together—discuss the rest next week as completed homework; point out question where parents are asked to write down a limit they think they might need to set for their child.

 Be prepared for discussion regarding parent concerns about guns (used in limit-setting example).

IV. Demonstration of Play Session Skills and Limit Setting Followed by Role-Play

- Always allow time for parents to see a demonstration of play session skills (video or live) that you want them to emulate, focusing on those skills they report the most difficulty with.
- After viewing demonstration, ask parents to take turns as a parent and a child and
 role-play a few scenarios they believe will be most difficult for them, including at
 least one limit-setting role-play.

_ V. CPRT Cliff Notes handout (p. 142 in Parent Notebook)

 Ask parents to review prior to this week's play session as a quick review of helpful responses but not to memorize in a rote manner.

VI.	Arrange for Two Parents to Video-Record This Week					
	•	Name/phone number	day/time (if recording at clinic)			
	•	Name/phone number	day/time (if recording at clinic)			
	• Remind parent(s) who are video-recording this week to make note o ent Notes and Homework handout.					
VII.	Но	omework Assignments (Par	rent Notebook p. 138)			
		Complete Limit Setting: A-C	C-T Practice Worksheet.			
		Read over handouts prior t	to play session:			
 Limit Setting: A-C-T Before It's Too Late! CPRT Cliff Notes Play Session Procedures Checklist (from Session 3) Play Session Dos & Don'ts (from Session 3) 						
		Conduct play session (sam	e time and place):			
		 Complete <i>Play Session Notes</i>. Notice one feeling in yourself during your play session this week. 				
I	will	bring my video next week (if	video-recording at clinic: my appt. day/time).			
VIII.	Clo	ose with Motivational Poen	n, Story, or Rule of Thumb (optional)			
		RULES OF T	HUMB TO REMEMBER:			
1.	"When a child is drowning, don't try to teach her to swim." When a child is feeling upset or out of control, that is not the moment to impart a rule or teach a lesson.					
	Your job is to "save your child" when he/she is drowning in emotions. You can help calm your child and co-regulate his/her feelings and behavior by calmly conveying your understanding and acceptance through your words and actions.					
	(O _j	ptional: Show YouTube vide	o clip of Dan Siegel's "Hand Model of the Brain")			
2.	"Dı	uring play sessions, limits are n	ot needed until they are needed!"			



CHILD-PARENT-RELATIONSHIP (C-P-R) TRAINING Parent Notes and Homework—Session 4

SOLUTION RULES OF THUMB TO REMEMBER:

1. "When a child is drowning, don't try to teach her to swim." When a child is feeling upset or out of control, that is not the moment to impart a rule or teach a lesson

Your job is to "save your child" when he/she is drowning in emotions. You can help calm your child and co-regulate his/her feelings and behavior by calmly conveying your understanding and acceptance through your words and actions.

"During play sessions, limits are not needed until they are needed!"

Basic Limit Setting:
Start by saying child's name: "Sarah,"
Acknowledge the Feeling: "I know you'd like to shoot the dart gun at me " (with empathy
Communicate the Limit: "but I'm not for shooting."
Target acceptable <u>Alternative</u> : You can <u>choose</u> to shoot at that" (point at something <u>acceptable</u>).
Notes: (use back for additional notes)
Homework Assignments:
□ Complete Limit Setting: A-C-T Practice Worksheet.
□ Read over handouts prior to play session:
• Limit Setting: A-C-T Before It's Too Late!
• CPRT Cliff Notes
 Play Session Procedures Checklist (from Session 3) Play Session Dos & Don'ts (from Session 3)
☐ Conduct play session (same time and place):
 Complete Play Session Notes. Notice one feeling in yourself during your play session this week.
I will bring my video next week (if video-recording at clinic: my appt. day/time).
I win bring my video heat week (i) video-recording at chinic, my appt. ady/time).

CHILD-PARENT-RELATIONSHIP (C-P-R) TRAINING Limit Setting: A-C-T Before It's Too Late!—Session 4

Acknowledge the feeling Communicate the limit Target alternatives

Three Step A-C-T Method of Limit Setting:

Scenario: Damian has been pretending that the bop bag is a bad guy and shooting him with the dart gun; he looks over at you and aims the dart gun at you, then laughs and says, "Now, you're one of the bad guys, too!"

- 1. Acknowledge your child's feeling or desire (your voice must convey empathy and understanding).
 - "Damian, I know that you think that it would be fun to shoot me, too. . . "

 Child learns that his feelings, desires, and wishes are valid and accepted by parent (but not all behavior);
 just empathically reflecting your child's feeling often defuses the intensity of the feeling or need.
- 2. $\underline{\boldsymbol{c}}$ ommunicate the limit (be specific and clear—and brief).
 - "but I'm not for shooting.
- 3. Target acceptable alternatives (provide one or more choices, depending on age of child).

"You can pretend that the doll is one of the bad guys (pointing at the doll) and shoot at it."

The goal is to provide your child with an acceptable outlet for expressing the feeling or the original action, while giving him an opportunity to exercise self-control. Note: Pointing helps redirect child's attention.

When to Set Limits?

Rule of Thumb: "During play sessions, limits are not needed until they are needed!"

Limits are set only when the need arises, and for four basic reasons:

- To protect child from hurting himself or parent.
- To protect valuable property.
- To maintain parent's acceptance of child.
- To provide consistency in the play session by limiting child and toys to play area and ending on time.

Before setting a limit in a play session, ask yourself:

- "Is this limit necessary?"
- "Can I consistently enforce this limit?"
- "If I don't' set a limit on this behavior, can I consistently allow this behavior and accept my child?"

Avoid conducting play sessions in areas of the house that require too many limits. Limits set during play sessions should allow for greater freedom of expression than would normally be allowed. The fewer the limits, the easier it is for you to be consistent—consistency is very important. Determine a few limits ahead of time (practice A-C-T): no hitting or shooting at parent, no Play-Doh on carpet, no purposefully breaking toys, and so forth. Hint: Children really do understand that playtimes are "special" and that the rules are different—they will not expect the same level of permissiveness during the rest of the week.

How to Set Limits?

Limits are not punitive and should be stated firmly, but calmly and matter-of-factly. After empathically acknowledging your child's feeling or desire (very important step), you state, "The Play-Doh is not for throwing at the table," just like you would state, "The sky is blue." Don't try to force your child to obey the limit. Remember to provide an acceptable alternative. In this method, it really is up to the child to decide to accept or break the limit; however, it is your job, as the parent, to consistently enforce the limit. Remember to be patient. This is a new experience for your child. It may be necessary to repeat the limit 2-3 times to allow your child to bring self under control.

Why Establish Consistent Limits?

Providing children with consistent limits helps them feel safe and secure. This method of limiting children's behavior teaches them self-control and responsibility for their own behavior by allowing them to experience the consequences of their choices and decisions. Limits set in play sessions help children practice self-control and begin to learn to stop themselves in the real world.

CONSISTENT LIMITS → PREDICTABLE, SAFE ENVIRONMENT → SENSE OF SECURITY

CHILD-PARENT-RELATIONSHIP (C-P-R) TRAINING Limit Setting: A-C-T Practice Worksheet—Session 4

Acknowledge the feeling Communicate the limit Target alternatives

EXAMPLE # 1

Gabrielle is using glue to make a creation during playtime. In attempt to be funny, she puts the glue bottle over your head as if she will squeeze glue in your hair.

- A "Gabrielle, I know that you think that would be funny,"
- C "but my hair is not for glue."
- T "You can squeeze glue all over on the paper." (Your voice can match her playfulness.)

EXAMPLE # 2

The play session time is up, and you have stated the limit two times. Your child becomes angry because you won't give in and let him play longer; he begins to hit you. Hitting is not allowed, so go immediately to second step of A-C-T, then follow with all three steps of A-C-T method of limit setting.

- C (firmly) "Eduardo, I'm not for hitting."
- A (empathically) "I know you're mad/frustrated,"
- <u>C</u> (firmly) "but people aren't for hitting."
- T (neutral tone) "You can hit the bop bag or hit this pillow." (pointing to bop bag or pillow)

PRACTICE:

1.	1. In the midst of a playful sword fight between you a	and your	child, your	child hits
	your face with the foam sword.			

- A [Child's name], I know you're getting excited
- C But my face is not for hitting
- T You can choose to hit my sword or hit at that (point to bop bag)
- 2. After 15 minutes of the play session, your child announces that she wants to leave and go upstairs to play a video game.
 - A I know you would like to go play your game right now
 - C but we have 15 minutes more in our special playtime
 - T Then you can play your game

Child-Parent-Relationship (C-P-R) Training
Page 2—Limit Setting: A-C-T Practice Worksheet—Session 4

	Your child wants to play doctor and asks you to be the patient. Your child asks you to pull up your shirt so that she/he can listen to your heart.		
	A [Child's name], I know you want me to pull up my shirt like at a real doctor's office.		
	C But my shirt is not for pulling up .		
	T You can listen to my heart through my shirt (as you state the alternative, take the stethoscope and place it where you are comfortable)		
4. Describe a situation in which you think you might need to set a limit during the session.			
	Situation:		
	<u>A</u>		
	<u>c</u>		
	T		

CHILD-PARENT-RELATIONSHIP (C-P-R) TRAINING Cliff Notes for Parents—Session 4

Remember:

- 1. Essential "Be-With" Attitudes: I'm here—I hear you—I understand—I care—I delight in you!
- 2. Importance of nonverbals (face and voice congruent with words; toes follow nose; lean towards child)
- 3. Avoid asking questions; instead make reflections/statements (trust your experience/instinct; sometimes you aren't sure, but child will correct you if you are wrong)
- 4. Often helpful to start reflection with: "You/You're. . ." to give child credit for actions/intent
- 5. Other reflections that can be useful in conveying (a) acceptance of the child, (b) freedom of the playtime, (c) belief that the child will take her play in the direction she needs, (d) belief that the child is inherently worthy of being valued and prized, and (e) capable of self-direction and problem solving:

"You're wondering . . ." "In here, you can decide." "It can be whatever you want it to be." "That's up to you." "Hmm - I wonder. . . . " "Show me what you want me to do." "What should I say/do; What happens next?" (stage whisper - child is director and you are the actor, with no script) "You know just what you want to do." "You decided to..." "You did it" (important that your affect matches child) "You got that just the way you wanted it to go." "You figured that out." "You're working hard to get that off." "You're determined to figure that out." "You look happy, proud, sad, etc . . . about that."

- 6. Therapeutic Limit Setting: conveys <u>your empathic understanding of the child's intent/desire</u> and provides the child with the opportunity to bring self under control. **Remember:** A-C-T
 - "Isabella, **(A)** I know you'd like to shoot the picture, **(C)** but, the picture isn't for shooting. **(T)** You can shoot the dart at the wall (pointing to wall)"
 - "Isabella, **(A)** You'd like to play with the playdoh on the carpet, **(C)** but the playdoh is for staying on the tray" (sometimes you don't need a "T")
 - "Isabella, **(A)** You'd really like to play longer, but **(C)** our time is up for today. **(T)** We can go outside and play on the trampoline **OR** We can go to the kitchen and get a snack" (have options prepared ahead of time that you know your child would look forward to)

CHILD-PARENT-RELATIONSHIP (C-P-R) TRAINING Play Session Notes—Session 4

	F	Play Session#	Date:	
Signi	ficant Happenings:			
Wha	t I Learned About My Child:			
	Feelings Expressed:			
	Play Themes:			
Wha	t I Learned About Myself:			
	My feelings during the play session	on:		
	What I think I was best at:			
	What was hardest or most challe	nging for me:		
Questions or Concerns:				
Skill	Skill I Want to Focus on in the Next Play Session:			