

Innovative applications and the possibilities of diagnostics and play therapy in inclusive educational environment

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Abstrakt The scientific study focuses on the explanation of the basic concepts of play, features of play, diagnosis and therapy through play, and it outlines its historical excursion in the current context. As well as it deals with creation of an inclusive educational environment through playful activities and the actual diagnosis. Then it talks about removing the barriers formed by the social environment towards building an inclusive educational environment by the activities themselves, as these are solved in the research tasks. By examining these issues the authors would like to contribute to the innovative application of resources of play (ie play therapy) play specialist, who is an advocate of inclusive trends in education, to promote the possibility of using therapeutic effects of plays.

Klíčová slova Play, therapy and diagnosis by play, methods of play diagnosis and therapy, special pedagogical diagnostics, play specialist, inclusion

1. THE IMPORTANCE OF PLAY IN SHAPING A CHILD'S PERSONALITY

The play is **one of the basic forms of human activity** and is important for a person throughout his life. **During childhood, it is a dominant activity** involving a child dealing with the surrounding reality; it is a way of child's understanding of the world and the realities of treatment available. A small child is not yet ready to enter the adult world, which is why play needs to be simplified to comprehensible form to him so he could handle a part of the real world and at the same time to examine it, experiment with it, gain experience in the material-physical and emotional-social environment (Světlíková, J., 2008, p. 145-146).

We agree with the statement P. Humpolíček (2005, p. 1-2) that has not been created yet clear and precise **theory of play** (the most famous writers, such as H. Spencer, GS Hall, K. Gross etc. always emphasized only one of the various aspects of the game, or focus only on some of the developmental period of human life). We can say that in humans **is the main feature of play free will** and a certain degree of **detachment from conventional methods of treatment of objects, materials and ideas**. "One playful" ("homo ludens") thus may be creative or fun, or just play to make life more enjoyable and interesting.

The play applies - many experts, so many opinions and definitions. Therefore in today's conspectus we offer different views of different authors and authorities on the **function of the play**. Play can be seen as **a natural human need** (JA Comenius), **means a natural resting** (A. Lazarus), or **the pumping of excess energy** (H. Spencer). G. S. Hall combines play with recapitulation of phylogenetic period in ontogeny (**atavistic theory of play**), K. Gross attributes feature **preparation and preparatory learning** to play. The play can serve as a **growth stimulant**, and **the practicing of learned actions** (theory of subsequent exercises). Among other things it may bring delight, functional arbitrariness or allow **kathartic abreaction** (S. Freud, K. Bühler, D. Carr). Due to play can **problems be solved** (MH Erickson) or it may **assist in the assimilation** (J. Piaget), **unconsciously fulfill unrealistic wishes** (LS Vygotskij) or provide the seeming **meet the needs of power and self-realization** (A. Adler). S. L. Rubinstein adds pragmatically, that the play is a labour for the child (eg, saying, "Who plays, not angry").

The premises of the **Department of Pedagogy, Faculty of Education, Constantine the Philosopher University in Nitra** held annually the vernissage and festive evaluation of nationwide round literary (reflection, reflections, essays presented in their own

views, thoughts and observations in the depiction of selected key topics in each category) **and the art competition** (in line with the main theme "Orbis Pictus of 21st century - new pages of "World in Pictures through the eyes of children" is in the art part focusing on one of the selected topics): **"Comenius and us"**. Attention is paid to the results of creative activities of children and youth contestants from primary schools (1st to 9th grade) and secondary schools (PASA, PAKA, four-year gymnasiums, II. level of eight-year gymnasiums /grammar schools/) from Slovakia. They are granting diplomas and awards for the winning work. (Works for the competition send more than 200 pupils.)

Every year we enjoy a very high quality level of the competitors work, therefore, the jury has a difficult task to choose the best and most interesting work of pupils and students as in previous years, thus this year (9th national contest "Comenius and us"). The jury ultimately decided in the art part of the competition alongside award-winning works to choose additional works. These are exhibited annually in the **Universe Gallery "Univerzum"**, Faculty of Education, entitled: **"Works that we are interested in."** In addition, the jury also awarded honorable mentions.

The Czech competition, which declares and guarantees professionalism **Union Comenius** in Prague (and is organized by the primary school Brandys nad Orlicí), follows Slovak round of the competition. The main event manager and the organizer of the competition in Slovakia is the Department of Pedagogy, Faculty of Education, CPU in Nitra. The competition is organized within the project **UGA IV/16/2012 "Development of children and youth personality by reference to knowledge and ideas of J. A. Comenius"**. Patronage above the national round of the competition take **prof. PhDr. Eva Szórádová, CSc.**, dean of FE CPU in Nitra. Professional guarantors are **doc. PhDr. Jana Privratská, CSc.** (Union Comenius), **prof. PhDr. Viera Kurincová, CSc.** and **doc. PaedDr. Júlia Ivanovičová, PhD.** (Department of Pedagogy).

The competition is involved by schools that carry the title of school in the name of J. A. Comenius, possibly schools which are located on the street named after him, as well as training schools of CPU in Nitra and also others, voluntarily participating schools. Awards took in a total 25 competing students of the 18 schools this year.

The closing of the ceremony organizers announced the **10th year contest** with the sincere expectation of even greater interest of schools and students in the Jubilee year. Enormously they are looking forward to meeting in the ancient **Nitra in 2013** - the year of 1150th anniversary of the arrival of Constantine and Methodius to Great Moravia. Following topics were proposed:

1. Topic of art competition: "TREE"
2. Topic of the literary competition for primary school: "IF YOU WERE ANIMAL, WOULD YOU BE PETS OR WILD AND FREE CREATURES?" (reflection)
3. Topic literary contest for high school: "MAN AND MASKS IN HIM" (essay, opinion essay)

Through a nationwide literary and art competition "Comenius and us" and by insight into literature and art is our primary aim to develop creative imagination of pupils with active creations of new, valuable works which demonstrate the ability of free realizing of the interests. We are distributing still current and rich ideas of J. A. Comenius designed for today's young generation.

For more information about the contest along photo gallery visit our web page <http://www.kpg.pf.ukf.sk> (Comenius and us).

1.1 Historical guide focused on methods of play diagnosis and therapy in the current context

Play is one of the basic forms of human activity and the most important formative resources in the development of human (used from an early age of child to learning about the outside world, and thus to the formation and integration of mental functions). As J. Svetlíková states (1999, p. 96), *"a children's play has long been considered the internal activity with emerging therapeutic effects especially in pre-school age and younger school-age. Playful therapy or play therapy is not just a simple play, but highly specialized medical procedure."*

Although it may seem unlikely, **Sigmund Freud** also really stood at the beginning of the therapeutic work with children. In 1909 he published the book *"Analysis of a Phobia in a Five-Year-Old Boy"* which is in a way the first practical and theoretical stimulus for diagnostic and therapeutic use of play (even though the boy Hans was analyzed indirectly - through his own father). Concised is paraphrased idea of Sigmund Freud: *"The play is one of the "royal paths" to the soul of the child (the other is mainly drawing and a dream)"* (In Humpolíček, P., 2005, p. 2).

In a transparent Tab 1 we offer a historical guide focused on methods of play diagnosis and therapy. As **the three most important outcomes in psychoanalytic play therapy** by P. Humpolíček (2005, p. 4-5) are presented approaches of **Melanie Klein, Anna Freud and Hans Zulliger**. Important representatives of the **diagnostic use of play** are then mainly **Margaret Lowendfeld** and **Charlotte Bühler**.

The current form of play diagnosis and therapy most likely continues to the ideas and practices of **Virginia M. Axline** (non-directive client-oriented approach) and **Violet Oaklander** (child gestalttherapy), based on the two directions so-called **nondirective psychotherapy**.

The playful therapy (psychotherapy and psychodiagnosis are inextricably linked together) in addition to the sand and the space provided are important **many other materials** (clay, finger paints, stones, paper, etc.) and a **larger spaces** (eg playrooms which are designed exclusively for peaceful play time for - individual or group therapy).

For example, **abroad** it is not exception that the clinical and consulting work is **named an expert who is dedicated solely to play diagnosis / therapy** and is determined to **do his own method and in his own room**. (This one works systematically primarily with children who have some specific problems - eg. syndrome CAN, or with children with whom the other fellow "does not know" what to do during the standard therapy, and so on.). Another option is to define **a single room or the entire facility** where number of professionals dedicates to play diagnosis and therapy.

Tab. 1 Historical guide focused on methods of play diagnosis and therapy

(Processed and modified by Humpolíček, P., 2005, p. 3-4)

HISTORICAL GUIDE FOCUSED ON METHODS OF PLAY DIAGNOSIS AND THERAPY	
SIGMUND FREUD (1856-1939)	HERMINE VON HUG HELLMUTH (1871-1924)
* He published <i>"Analysis of a Phobia in a Five-Year-Old Boy"</i> in 1909, it is considered as the first work, which shows possibilities of play and analysis of children.	* As first representative of play therapy (because she offered play as medium of announcement during therapeutic work with children) published the book <i>"Mental Life of the Child"</i> in 1913.
MARGARET LOWENFELD (1880-1973)	MELANIE KLEIN (1882-1960)

* As first assembled one of so called „Test of World“ (Welt-test) in 1929. She worked with pre-speech, pre-logical experiences, with primary system opposed to secondary one (rational thinking). She refused interpretation during play and interference with play . She was sure, that “only child himself can understand creatures of his play” . She focused on therapeutic aspects of the play .	* Used primarily sexual interpretations of play (as a counterpart to analytic work with adults). For the author was playing "a projection of the repressed and unconscious material" - by analogy with the free association of adults (she tried to analyze and interpret the elements of earlier plays). She worked with nonsystematic watching of plays. She published an article "Child Psychoanalysis" in 1937 which describes the gaming material used during work with children. She used similar procedures when interpreting as used in the analysis of dreams (archaic language of symbols). She sometimes actively intervenes in the play (such as that suggested possible solutions).
CHARLOTTE BÜHLER (1893-1974)	HANS ZULLIGER (1893-1965)
* She visited London Institute for Child Psychology in 1934, where she worked. As the first she attempted to study the standardization of Test World . For diagnosis she developed set with 160-strong objects for therapy leaving 300 subjects in 1955. She published „Picture World Test“ in 1956.	* He emphasized the benefits of play - kids get rid of symptoms by play rather than by interpretations.
ANNA FREUD (1895-1982)	GERD HILD IRMGARD ELISABETH VON STAABS (1901-1970)
* Representative worked with archaic and phylogenetical older expressive elements of speech, which we know from dreams – she interpreted the symbolic content of playful themes. Then mostly moments of everyday life are processed in play. She emphasized the relation therapist - client = aspect of transfer of feelings to family members on the therapist.	* She has been developing The scenotest since 1939 and has published a book about the first method in 1943 (because of the war). In her work she inclines to the psychoanalytic tradition of Freud and his pupils (CG Jung, A. Adler) and neoanalysis (H. Schultz-Hencke). "She originally created test as a diagnostic tool , which should serve to clarify the psychological context, especially in neurotic children. However, during its use in practice was soon showed that the scenotest is a very good tool for the treatment of neurotic disorders (just Freud's dual interpretation of the play as a meet of instinctive desire and as kathartic abreaction gives an understanding of why the diagnostic aspect is inextricably linked to the therapeutic)". The scenotest by its content of the material is based on the psychoanalytic tradition. The author is in their interpretations of scenes and in therapeutic work with the scenotest strongly influenced by psychoanalytic background and terminology. In more recent work, the basis of psychoanalytic method remains somewhat apart.
DORA KALFF (1904-1990)	GOSTA HARDING (1906-1976)
* She used playful techniques in the sand. As a pupil C. G. Jung was she analytically oriented. "The aim is to provide a protected sandpit space to encourage contact with the unconscious, to help express pre-verbal experience and release blocked energy in order to apply the regenerative power of the child itself ."	* He is the author of the Erica-method . He was inspired by visits to M. Lowenfeldovej at its creation and was supported by the Erica Foundation, which deals with working with disadvantaged children and Erica-method thus remains current, issued and widely used (Sweden, Denmark, USA).
HENRI ARTHUS	
* He is the author of Test of village (another modification of the Test World by M. Lowenfeld - this time for the French area), which serves as a diagnostic tool since 1939.	

aimed at play diagnosis and therapy were published, for example **Charles E. Schaefer** and **Kevin J. O'Connor** (1991, 1994, 2000). In the **Czech psychological theory and practice** the best known experts, who (among other things) involved play diagnosis and therapy are **Vladimir Borecký** and **Dana Krejčířová**.

British Association of playful therapy (BAPT) defines the current form of play therapy so that it is *"... a dynamic process between the child and therapist to whom a child goes through at their own pace and in their own way (programme), and using certain themes - past and present, conscious and unconscious - having a relationship (influence) to his life. Own funds allow a child - with the support of the therapeutic relationship - progress in the development and make a difference. Play therapy is directed at the child, its primary medium is a play and a secondary language (speech)."* (www.bapt.info)

Current methods applied in play diagnosis and therapy are shown in the Table 2. These are focused on the area of child development (ontogenesis), so called developmental scale to avoid warrant a tendency that every child assessment can be combined with playful activity. We mention a few specific methods, as well as P. Humpolíček (2005) that the play diagnosis and therapy related to a little more closely and draw primarily from the man's ability to project their experiences, concerns and wishes to inanimate objects.

Tab. 2 Current methods of play diagnosis and therapy
(Processed and modified by Humpolíček, P., 2005, p. 5-6)

CURRENT METHODS APPLIED IN PLAY DIAGNOSIS AND THERAPY	
WELT-TEST (M. Lowenfeld, Ch. Bühler)	THE SCENOTEST (G. I. E. von Staabs)
* In practice, it is still applied in our country as well as abroad.	* It is used in practice, especially in German-speaking countries and also in the Czech Republic.
ERICA METHOD (G. Harding)	DOLL-PLAY TECHNIQUES (e.g. Doll-play test by T. Moor)
* It has an interesting developed system for recording, scoring, interpretation criteria and it is mainly used in practice in Scandinavian countries - Sweden, Denmark, and also in the USA. It is a good example of the so-called "classical Test world", with the aid of figures and other materials in the sandbox (dry or wet) uses plays for diagnosis and therapy.	* Using different types of figures and dolls are trying to detect internal conflicts or relationship and can also indicate the most appropriate form of intervention. E.g. dolls with obvious secondary sex characteristics are used when working with sexually abused children.
TAT, CAT (H. Murray, Ch. Morgan; L. and S. Bellak)	MUG, THE TEDDY BEARS' PICNIC (T. Mueller)
* These are methods, whose essence is a set of images to which children or adults think up a story (to one picture one story). These methods are gaining in popularity again in the Czech Republic (had never lost in abroad).	* Similar methods such as TAT, CAT are mentioned methods but with the difference that even if they are based on the image patterns, child tells them a story (fairy tale). These methods are designed specifically for children with emotional problems for children with problem behavior.
POKIT (K. Mogford-Bevan)	CATO (Boš, Strnadová)
* Method is designed for young children (12-48 months), based on observations of the child's free play (with two standard "types of toys") and its systematic recording. Play originates in England, but is also used in the USA (especially in developmental analysis).	OSOBNOSTNÝ POKER (Hugentobler, Oetli, Ruckstuhl)
	* Is explained as psychodiagnostic play for children and adults.

Playful activity is still largely applied mainly **in the field of child psychotherapy and psychological diagnosis**. Surveillance works

1.2 The use of playful activities of children in special-pedagogical diagnosis by play specialist

As already mentioned the play is the most natural expression of the child's activities and at the same time one of the developmental needs of preschool age. Through the play the child's personality comprehensively is developed, so it is essential and important to diagnose the condition allowing the child during this period. Watching a child playing opens a window to his world. The play accurately reflects the state of its development, as well as development of children with special educational needs, who are significantly different from intact children.

Play of children with disabilities has its specific features arising from disability - sensory defect, somatic or mental. These defects in individual conditional influence their perceptions, thinking, imagination; it means their psychological functions and processes. Likewise, these have an impact on the formation of emotions, will and ultimately the formation of the whole personality. Of course, the differences in play of children with disabilities are determined by the type and level of disability. For mental or sensory impaired children, play has rather dull character; it means that plays are often stereotyped and mechanical repetition of the plot and with a lack of accompanying verbal expressions, inappropriate gestures, or lack of mastery of plot movement. These specific differences are in the age period due to disability or disturbances which can be corrected through special educational action. Developing plays for these children can develop their psychomotor activity. Plays targeted to individual circuits can also be used to diagnose what development - game tracks.

The play can be used to diagnose particular:

Great Moravia. Following topics were proposed:

1. Assessment and evaluation of **selected areas** (e.g. level of knowledge, speech, laterality, motor skills, sensory functioning, sociability, etc.).
2. Assessment and determination of the level of the **child's ability to play** (ie what game to play, especially with regard to claims on thinking, imagination, creativity and so on., To be applied at play, the game is considered as a whole). Its implementation is compared to criteria that are specific to certain ages of children intact, thereby determining whether children are adequately playing to their age.

Play as a **diagnostic situation may arise:**

1. **spontaneously** - diagnostician does not interfere with the course itself, but the child is playing freely, according to their wishes and desires;
2. **intentionally** - if diagnostician affects the formation and development of the game (in accordance with the aims pursued) stimulus, suggestions, rules, method of implementation etc.

A play that has criterial nature can be evaluated as a whole or only some of its components (monitored variables).

When evaluating the play as a whole is evaluated method of implementation of formal and content point of view, where it is all about determining the prevailing characteristics on which the type of play can be identified (in terms of spontaneous play) and quality. As a rule, there may be a handling game, theme, thematic, structural, intellectual, sensory, physical, imitators, verbal, rhythmic and musical, dramatic, and so on (Vasek, Š., 1994, p. 8-9).

Mission of play specialist became progressively compiled in relation to the application of the principle of "Family Centered

Care" in the concept of care for sick children. The profession filled imaginary gap in advocated comprehensive rehabilitation of health care team collaboration with the family. It began to worry not only about good mental status hospitalized patients (or ambulatory), children (juveniles), but also for their parents.

Thus oriented therapist creates conditions for building a play. In his action further analyzes or otherwise internally processes structures that child creates with the help of toys, dolls, masks and other objects. Subsequently, he helps the child to shape and share his naturally structured world. He often uses input to the role of objects and persons to fill the symbolic world. Alica Řezníčková (In Müller, O., 2007, p. 25-26) provides **a more detailed overview of the responsibilities and activities of play specialist:**

1. The play specialist provides his services in the office, on a standard inpatient department and also in other facilities providing care for children and adolescents, or in the home. He can also provide his services for healthy children in special outreach programmes.
2. The play specialist provides a friendly, safe and suitable hospital environment for children - completes and gives information about the needs of other child health professionals.
3. The play specialist proposes plan of playful activities with parents, creates and registers the appropriate play programmes and pursues individual therapeutic play.
4. The play specialist helps the child to understand the disease and treatment (including preparation for planned surgery). He helps children and parents to adapt to the hospital environment - he guides them and he is their contact person, too.
5. The play specialist pays special attention to adapting for poorer families, children in preterminal (called dying distant) stage, disabled children, children in institutions and foster homes (including their associates).
6. The play specialist accompanies children and their parents for treatment or medical interventions.
7. The play specialist takes care on running of playroom and its equipment.
8. The play specialist prepares appropriate information tools and materials. He is a regular member of the medical team and he participates in uniform team solutions of certain situations.
9. The play specialist leads and trains volunteers and other workers in training. We consider it appropriate to emphasize that therapeutically conceived play is no manipulation.

1.3 Applying the method of play diagnosis and play therapy in inclusive university environment

On 14 November 2012 a seminar "**Academic space as carrier of philosophy educational, cultural and social inclusion**" took place at the Faculty of Education, Constantine the Philosopher University in Nitra, which was focused on the issue of creating conditions for higher education for students with disabilities. Professional guarantors are prof. PhDr. Peter Seidler, CSc., doc. PaedDr. Júlia Ivanovičová, PhD., prof. PhDr. Viera Kurincová, CSc., doc. PaedDr. Jana Duchovičová, PhD. and PhDr. Janka Moravčíková.

The seminar follows the **addressing KEGA research project no. UKF-052 4/2011 "Building an inclusive environment in terms of high school"** carried on DP FE CPU in Nitra.

The aim of the workshop was to analyze the current state of inclusion opportunities for severely disabled students in the university. It pointed approaches of CPU in Nitra to this issue. The programme consisted of speech of vice-dean for study affairs **doc. PaedDr. Jana Duchovičová, PhD.** "Diversity as a core of inclusion and differentiation in educational environment", expert reports of **prof. PhDr. Viera Kurincová, CSc.** "Some thoughts on inclusion, or: everyone is like all other people, like some other people and like nobody else," **prof. PhDr. Peter Seidler, PhD.** "The philosophy of inclusive environment" and **PhDr. Janka Moravčíková** "Possibilities of cooperation and the use of student teaching experience in outpatient welfare of youth and adults with severe disability". The programme was moderated by **doc. PaedDr. Júlia Ivanovičová, PhD.**

The students of the university, of day care center for severely handicapped youth Baničova Street, in Nitra were starring in the programme. They presented their experience in the study and showed reserves of high school approaches to open space for free debate. At the end of the seminar day center clients presented their rich cultural program. Exceptional location and exceptional people have given us feel special, they're welcome is sincere thanks.

More information on the seminar with photo gallery can be found on the website <http://www.kpg.pf.ukf.sk> (news and announcements).

To perform the atmosphere of the seminar and programe, we offer some reflective thoughts of college students; FE CPU in Nitra (study field: Preschool and Elementary Education), who were attending the seminar, said:

- "...I think, such workshops should be done more because I loved it and I learned more about people with disabilities, which I would not have come otherwise. I really like our school's cooperation with these people and I would be glad if it has further enhancement. In this workshop, I realized that people would not condemn these "other people", but rather they might condemn us, because they know how to enjoy life, and we are much more "foot of".
- "... Seminar was very interesting; I most liked the lecture of prof. Seidler. I think he is a fantastic person, I immediately noticed how he can work with people and he created a "bridge" between people with disabilities and between us, intact ... "
- "... The course of the workshop was in my view very interesting; for me as a man who has never met people with disabilities of this type was that very beneficial. I liked the immediacy and openness of these people, hey undoubtedly interesting life stories..."
- "... I also really liked the interview with people from the center. It was interesting to meet them personally, to learn more about their lives - the lives those are quite different. Sometimes one realizes what has, only when he meets and listens to such people; they are HAPPY same time; it's nice to take it all so good! ADMIRATION!..."
- "... The seminar was very encouraging for me, because we had the opportunity, or more direct experience to see people who have proven that with their disabilities can live and even work; in a very interesting and effective way. The aforementioned is also reflected in the approach of people who have this workshop; they had the

opportunity to get to know. I really liked their effort and humility despite their disability helped to get to where they are now - the respect and recognition around takes them as equals. I think it would also be, as much as we do, so others have a right to everything. Personally, I had tears in my eyes and when I saw how much they wanted to give us learn in such a short time. They were kind, honest and caring. They seemed very openly. We greatly appreciate them and the fact that we were in this seminar could be.

- "... I liked that you are trying to bring this issue to us that you have organized such an afternoon. It was interesting, especially when people with health problems engaged in discussions, in activities. Phrase that most stuck in my mind is: Why do the rest of us do not show, what we are good at? ... "
- "... Every person, entity, so I also had a surreal feeling. The feeling of joy, of admiration. These people have given me incredible energy, memories. For me this seminar meant and gave me a lot. I had tears in my eyes, not because I regretted them, but the fact that they can give out energy and a smile on the faces of so many things and what can not do healthy people. It was incredible and were very positive. I 'm looking forward to practice in this institution ... "

As M. Hornáková states (2012, p. 30) and thus we fully share is that education is the foundation of any relationship, which is based on the meaningful interaction of two beings, while accepting and loving relationship is the basis for the necessary assistance with the development and learning. Unconditional respect for the individual and respect for the uniqueness are not new requirements in pedagogy. Adoption is not only a prerequisite for cooperation in any activity, but it is also a principal basis. Adoption (entering into a relationship and the other world) is the basis for understanding the situation.

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