Child-Centered Play Therapy: Aggression, Empathy, and Self-Regulation: Article Analysis

Breaking Down the Research Process

In this paper, I will present a selected peer reviewed research article that connects to my week one topic, anxiety in children and aggressive behaviors. I will discuss the dominant research goal, sampling procedures, and discuss the types of data and data analysis that were performed. I will conclude with the study and the limitations found in the research.

Dominant Research Goal

The peer reviewed research article that I chose was “Child-Centered Play Therapy: Aggression, Empathy, and Self-Regulation”, by B.J. Wilson & D. RaySince, The research goals for this study was to examine articles and review data by exploring child centered play therapy for children with behaviors of anxiety and aggression. The effectiveness of child- centered play therapy for children (CCPT), is not presently considered an evidence -based therapy for aggressive child behavior. Although, according to Wilson and Ray, researchers have identified the need for better practical help in children with aggressive comportment in the area of play therapy (Wilson & Ray, 2018).

The recent research’s goal was to test CCPT 's accomplishment in children with excessive degrees of aggressive behavior in elementary schools by uncovering the impacts of empathy and self-regulation in connection to aggression. During the primary research, the question for this study was: ' How many parents and teachers foresee aggressive child scores on aggression, self-regulation and empathy, based on group affiliation in either a therapy or managed group? ' According to Wilson and Ray, researchers wanted to investigate the connections between aggression, self-regulation and empathy with interest to the involvement of a child in CCPT using a multivariate assessment methodology (Wilson & Ray, 2018).

Sampling Procedures

The sponsors of the study consisted of four elementary schools some that were Title I in the Southwestern region of the USA. The first test of students consisted of a study of 76 children. The final test of students consisted 71 children between the ages of 5 and 10 and grades kindergarten to fourth. The ethnicity of the partakers was 52.1% African American, 21.1% Latino, 19.7% Caucasian and 7% multiracial children. According to the article, 36 children joined the treatment group of which consisted of 28 boys and 8 girls, ranging between the ages of 5 to 10. Another 35 children took part in a waiting list control group which consisted of 31 boys and 4 girls between the ages of 5 and 10. Amazingly in both groups, the number of boys was far higher than girls. As the study progressed, it was noted that five children moved away during this study and have not been collected their post-evaluation data (Wilson & Ray, 2018).

According to the article the children that participated in the study had a criteria to meet, which required that children be between the ages of 5 and 10 years old. They also had to be identified

by their teachers or school staff as exhibiting problematic aggressive behavior as well as understand and speak English, and most importantly live with a parent who was inclined to give their consent to participate. (Wilson & Ray, 2018).

Data Analysis

The types of data that were used by researchers were two descriptive discriminant analyzes (DDAs). They used this information to determine which variables gave the best information to categorize variations between treatment groups and waitlist control groups from pre-to post-assessment. There were three dependent variables in the study which consisted of aggression, self-regulation, and empathy, the use of DDA for this randomized regulated test was an accurate method that permitted the immediate examination and relationship. According to the article,

researchers intentionally selected DDA over other multivariate investigations because of its ability to assess group variations between various dependent variables, and to recognize accurately where differences appeared in the same study (Wilson & Ray, 2018).

Researchers took in to account the size of the study and propose that a study of 10 to 20 participants per variable would be better determined in order to read the DDA results precisely. According to the study, the DDAs were properly used to detect which variables best captured the differences between treatment groups and waitlist control groups based on parent and teacher data. The first DDA included parent data and the second one included teacher data therefore the DDA's were conducted without relation to link the outcomes of parent and teacher data to each one. After the original data screening, processes were applied to sustain the reliability of the data and the following analysis with all the necessary expectations being examined. According to Wilson and Ray, each of the seven DDA theories have been achieved (Wilson & Ray 2018).

Study Limitations

Although the results from the CCPT prove to be successful in this study based on reducing aggression, increasing self-regulation and empathy, there are some limitations that pose a factor in treatments. In this study there was a large number of boys that were represented, African American children, and the factor of the specified age range of 5 to 10 years old which means this can pose a inaccurate generalization for all school aged children with aggressive symptoms. According to Ray and Wilson, this study did not incorporate a treatment control group with their study. (Ray & Wilson, 2018). According to the article the number of sessions were only 16, in some cases a child may require a longer time to begin to exhibit progress from the treatment. According to Wilson and Ray, the most effective amount of time of CCPT is about 30 to 40 sessions, in order to ensure steady results and to provide statistically significant outcomes for teachers (Wilson & Ray, 2018).

References

1. Wilson, B. J., & Ray, D. (2018). Child-Centered Play Therapy: Aggression, Empathy, and Self-Regulation. Journal of Counseling & Development, 96(4), 399-409. doi:10.1002/jcad.