

Sandworlds, storymaking, and letter writing: the Therapeutic Sandstory Method

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Abstract

This article describes a new method of sandtray therapy, the Therapeutic Sandstory Method, as a therapeutic journey for children and adolescents. Three main theoretical tenets to the Therapeutic Sandstory Method are described. These are sandtray therapy, storymaking in therapy, and narrative letter writing. The article provides a stage-wise description of the method and concludes with a brief case study by means of illustration. It is proposed that the Therapeutic Sandstory Method provides an effective short- to medium-term therapeutic engagement which can be used in a range of settings outside the confines of the consulting room and in under-resourced settings. It is ideally suited for therapeutic work in a postmodern constructionist orientation and seeks to empower children and adolescents, affirming alternative identities and exceptional life stories.

Keywords

Expressive arts therapy, narrative letters, sandtray therapy, storymaking therapy, Therapeutic Sandstory Method

This article describes a novel method of combining the techniques of Sandplay, storymaking, and narrative letter writing as a combined therapeutic journey for children and adolescents. There are three main theoretical tenets to this method, namely, sandtray therapy, storymaking in therapy, and narrative letter writing. The article concludes by drawing together these techniques into a coherent Therapeutic Sandstory Method (TSM) and illustrates this method of therapeutic engagement with a brief case study.

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Sandtray therapy

Little did H. G. Wells realise when he wrote *Floor Games* in 1911, what far-reaching effects this 'discussion about the theory, purpose, and methodology of playing a variety of children's games with models, miniatures, and other props' (Ozebook, n.d.) would have. Inspired by Wells (1911), British paediatrician Margaret Lowenfeld (1939) recognised the diagnostic and therapeutic properties of working with sand expressions and expanded this technique during the 1920s and 1930s into the 'World Technique', the formal root of sandtray therapy. During the 1950s, Swiss Jungian analyst Dora Kalff (2003/1980), who studied under Lowenfeld, developed Sandplay as a Jungian analytic technique with both adults and children to 'promote healing and wholeness by activating the psyche' (Gallerani & Dybicz, 2011, p. 167).

Weinrib (1983) defines Sandplay as a 'nonverbal, non-rational form of therapy that reaches a profound preverbal level of the psyche' (p. 1). She describes the expression in sand as a 'game without rules' (p. 11) referring to the freedom of expression without direction or instruction from the therapist, a concept closely aligned with Kalff's original description of the 'free and protected space' of the sand tray.

Although the term 'Sandplay' was originally exclusively used within the context of Kalff's Jungian analysis, Bradway (2006) offers a useful definition of terms when she distinguishes Sandtray as the vehicle or medium of expression, Sandplay as the activity of expression, and Sandworld as the product of expression.

Jungian Sandplay has, for many years, been the lens of application and interpretation; however, the medium of sand expression has proven efficacy and has been adapted and translated by many non-Jungian therapists to reflect other frameworks of understanding, for example, by integrating creative art therapies (see Flahive & Ray, 2007; Homeyer & Sweeney, 2005; Pruyn-Reed, 1980). These adaptations represented a shift away from the original Jungian analysis and have effectively taken the sand tray out of the confines of the therapy room, and into other settings like hospitals, schools, and homes (Preston-Dillon, 2008). While still practised by Jungian therapists as a powerful and deeply transformative therapeutic technique, alternative lenses are now also being used to understand the work in, and with, sand (see Bainum, Schneider, & Stone, 2006 [Adlerian model], Griffith Clegg, 1984 [Kleinian applications] and Waterman, 1997 [Object Relations]). Dale and Lyddon (2000) have described the use of sandtray work as an assessment tool in the meaning construction of children and their worlds, thereby introducing postmodern interpretations. Gallerani and Dybicz (2011) describe De Domenico's (1986) work as a precursor to postmodern applications of sandtray therapy. They compare De Domenico's understanding of multiple dimensions of consciousness, which result in many levels of identity, as akin to Mikhail Bakhtin's (1981) notion of multiple voices that inhabit us. Gallerani and Dybicz (2011) made a significant contribution with their description of the orientation and stance of the therapist in postmodern Sandplay; the therapist moves from the conventional Jungian position of interpreter of the Sandworlds, to the position of co-creator and editor of the narrative identity reflected in the Sandworld. This 'editor/therapist' (Gallerani & Dybicz, 2011, p. 169) adopts both a reflective and a reactive stance to the client's Sandworld expressions. In this position of not knowing and through authentic curiosity, the therapist tries to understand the meanings and values the client attributes to his or her Sandworld expression. Aligned with narrative therapy, Gallerani and Dybicz (2011) also describe the therapist as actively encouraging, through a reactive stance, the exploration of different meanings and alternative understandings in search of new and preferred identities. This search for other preferred identities calls for new and different understandings of causality as a future orientation, where asking the question 'who would I like to be?' informs and guides present action. This postmodern view of causality, mimesis, as a future orientation (Ricoeur, 1985), is aligned with what Guilfoyle (2011)

describes as the 'ethical subject' (p. 1) in narrative therapy, the essence being where the question, 'who do I want to be?' is asked, or in Guilfoyle's words, 'How shall I conduct myself?' (p. 7), rather than 'who am I?'

Creating stories is not unusual in sandtray work (Bradway, 2006; Kukard, 2006). Engaging with sand images involves the telling of life stories and representing these through the non-verbal medium of sand and miniatures. Sandtray translates personal experience into a concrete, three-dimensional form involving all the senses. One commonality shared by most orientations in sandtray work is the fact that both the process (of creating) and the product (the Sandworld) acquire significance in the transformative healing process. Every scene, every Sandworld, tells a story.

Storytelling and storymaking in therapy

Gersie (1997) positions general storytelling and storymaking, outside of the confines of the therapy room, as crucial to the human experience when she says that 'telling matters [and] not telling has many undesirable consequences for our health' (p. 2). We all tell stories. They are universal, told across cultures, time, location, historicity and contexts (Gersie, 1997).

Within the context of psychotherapy, one can hardly conceive of therapeutic conversations without thinking of and allowing for the telling of stories. For the purpose of understanding the TSM described in this article, a distinction is drawn between, on the one hand, the telling of life stories and narratives as often incidental autobiographical storytelling in the general course of therapy conversations and, on the other hand, the deliberate fictional and metaphoric practice of storymaking in therapy. The construction and reconstruction of our life narratives, in an attempt to understand and give meaning to events in our lives and construct our identities, have become the object of postmodern therapeutic conversations exemplified in narrative therapy (M. White & Epston, 1990). However, deliberate storymaking as an instructional therapeutic technique is not as dominant and well known, and therefore possibly less frequently used in therapy. This involves the co-creation of story and metaphor with a client in an attempt to make sense of the world (for example, see Remotigue-Ano, 1980).

Storymaking is fundamental to our being, and we all have personal memories of storymaking and storytelling incidents in our personal history and development. Ricoeur (1985) reminds us that stories go beyond the mere attempt to tell objectively. Telling stories is even more than a personal intimate experience: telling stories creates a sense of rootedness in time. 'Telling a tale enables each of us to know ourselves as someone who has a voice which is worth listening to, someone who can be heard and understood', say Gersie and King (1990, p. 32). Thus, telling gives voice and worth. However, to tell requires to be heard. The teller-listener relationship is described by Gersie (1997) as enabling the teller to 'elicit and to sustain the listener's agreement to attend to the tale' (p. 8) and to the story's apparent incidental relevance. This co-creation of a story as a consensual engagement between teller and listener is particularly relevant in the TSM described in this article. Without the consent between teller and listener, 'the story could not be told: it freezes on the threshold of articulation and returns to the silence of memory ultimately to find another listener and telling place' (Gersie, 1997, p. 9).

Telling our stories is an attempt at meaning making. Each story told articulates, in encoded or explicit ways, the teller-listener's respective involvement with the dilemmas of their world; it provides a vessel for containing their concerns. Through our words, we both communicate information and create new meanings. Stories are thus both informative and performative and 'new meanings hatch each time a story is told' (Meade, 1995, p. 1). Stories, as a 'very real pseudo statement' (Gersie, 1997, p. 9) express something very tentatively, allowing us to have a say about

something without committing ourselves to an explicit opinion: what a story says, it only says provisionally.

The best storymaking time is during times of transition (Gersie & King, 1990). We are all familiar with bedtime stories, bridging wakefulness to sleep; teachers tell stories at the beginning or end of the school day; we tell or read stories on the road during travel. Therefore, what better place to tell and make stories, than in the safe space of transition provided by the therapeutic conversation?

Therapeutic documents and therapeutic letter writing

Therapists from diverse theoretical orientations have successfully worked with written documents as therapeutic tools with different clinical populations over many years (for an early description, see Burton, 1965). However, narrative therapy is credited with formalising this technique into a theoretically credible and successful mode of affirmation in therapy (Epston, 1994; Moules, 2003; M. White & Epston, 1990; and see Fox, 2003, for an in-depth summary). This, the third theoretical pillar of the TSM, draws on this narrative technique of therapeutic letter writing as a retelling of the story told. Nylund and Thomas (1994) estimate the worth of a single therapeutic letter as equivalent to between 3 and 10 face-to-face therapy sessions. This is supported by the estimates of M. White and Epston as reported by Pare and Majchrzak Rombach (2003).

V. E. White and Murray (2002) argue that adolescents and children are ideal candidates to benefit from therapeutic letter communication and indeed that they are particularly receptive to this mode of therapeutic communication in the counselling process. This is in part because writing letters and notes, communicating via text messages, and writing messages and posts on social network media are integral to teen culture in many parts of the world. Pare and Majchrzak Rombach (2003) provide specific and very useful guidelines for the writing of a therapeutic letter to a child or adolescent. Majchrzak Rombach (Pare & Majchrzak Rombach, 2003) explains that she frequently begins a letter by thanking the child for having the courage to share his or her story with a relative stranger and inviting the child to correct wrong assumptions and to contribute to the conversation, thus giving him or her editorial power over the letter. She reminds us that letters are written in a tentative register, speculating about meanings and possible outcomes. Letters are usually affirming, acknowledging wisdoms and reflecting on resources, strengths, and knowledges witnessed. Speculations about where these strengths might lead the child and an invitation to keep up to date with important progress are usually part of the closing paragraphs of a therapeutic letter.

The essence of a therapeutic letter is to highlight unique outcomes and amplify alternative life stories and narratives, to encourage the shaping of new and preferred identities through expressions of externalising, the use of metaphor, telling and retellings of the story, and highlighting the unexpected.

The TSM

Given the above theoretical foundation, I will proceed by providing a more personal description of what I have tentatively called the Therapeutic Sandstory Method (TSM) which combines deliberate storymaking, Sandplay, and reflective retelling. This method of working with sandstories and letter writing evolved and developed over many years of working with children in a range of settings, from my private-practice consulting room to the school classrooms that I worked in as a psychologist. I have used this method as a single, brief therapeutic intervention over a limited number of sessions where the luxury of continued conversations was not practically feasible.

However, I have also worked with this expression of children's (life)stories during the normal course of medium- to long-term engagement with children. What makes this method particularly attractive in under-resourced settings is that it can act as a brief single session intervention with a portable sand tray – the lid of an A4 paper box works perfectly well – and a small selection of transportable miniatures.

There are roughly four stages to the TSM, the first three of which are completed in conversation with the child, while the fourth stage happens outside of the session and is often revisited in a follow-up therapeutic conversation with the child.

Stage 1 – preparation

The psychological and developmental sophistication of the client will determine how preparation is done for the process. There is no real age limit to this work. I have worked successfully with the range of children from as young as 5 years to young adults. In preparation for the instruction, it is useful to revisit highlights from the child's life which are traditionally captured as significant life events in recording the history during the initial phases of contact with a client. Other known tools of history taking, such as the genogram completed as a collaborative exercise with the child, are important in this preparation stage. The use of a timeline or 'lifemapping' (Slivinske & Slivinske, 2011, p. 20) where life events that are significant *to the child* are discussed and highlighted is an equally useful tool in capturing the essence of certain life themes. Here one revisits the earliest memories of the child, talks about people from the past that are remembered, and highlights important change events or memories and what stands out from the recent past. This focus is not only on troubling events but also on strengths and achievements. It is important to be cognisant of the fact that what children describe as significant memories are often different to significant adults' descriptions and recollections on behalf of the child.

Stage 2 – building the life story in sand

After the initial orientation and preparation, which could be explicit as described above, but could also be incidental, the child is asked to make a story in the sand that could reveal something of his or her life. The child is alerted to the fact that once constructed in the sand tray, the Sandstory will be told and recorded verbatim. The story told is usually rich in symbolic imagery and metaphor, and it is encouraged not to be a direct, exact and biographical, or factual narration of the child's life. This can be achieved through the use of metaphor in the preparation conversations, a frequently used means of conversation in narrative therapy, and the technique of externalising conversations (see M. White, 2007). When asking a child to build their story, I usually say something like,

Let's make a story of your life and your world. This story will tell us something about your life and what is important to you. I want you to build a story, any story, in the sand that will tell and show me something about your life and the person you are or would like to be. After you have made your story, I am going to ask you to tell the story to me while I write it down or voice record it; and we'll also take a photo of the Sandstory.

I have found that children are often tempted to play a story, rather than to construct a scene. While this is not encouraged, simply because it complicates the recording of the story, it is allowed to a limited extent. However, I remind a child to construct a world and a Sandstory first, before the story is played out.

Stage 3 – storymaking and recording

Once the Sandstory is constructed in the sand tray, I invite the child to tell me the story. I usually start by moving closer and sub-vocalise (to slow down the telling) while I write. We usually start with a title, and I will talk while I write ‘Kara’s story about . . .’ waiting for the child to complete the title. The static scene of the Sandstory is often transformed at this point into a more dynamic playing of the story. I have frequently been surprised by the sophistication and creativity of the ‘tellings’ of children. The story is thus recorded verbatim, as it is created and told by the child.

Stage 4 – writing the story and retelling through a letter

This happens after and between sessions. The story is now recorded either as a scribbled handwritten document or as a voice recording. The next step for the therapist is to neatly retype the story. Depending on the child’s age, I use varying letter sizes and different fonts to emphasise and add effect to the child’s story-words. If available, adding colour and electronic pictures to the document creates the likeness of a properly published story. Once the story is recorded in the child’s own words, the therapist sets out to retell the story in his or her own words, back to the child, in the form of a therapeutic letter: the *retelletter*. Once again, stylistically the use of different font sizes and types as well as pictures are encouraged. I also attempt to semantically calibrate my retelling and write in the child’s register, to add age-appropriate experiential value to the retelling. The retelling focuses on attempting to strengthen and amplify exceptional moments and alternative thin story lines, on preferred identities and on reframing events in the story to reflect such preferred identities. Once the story is formally rewritten and retold through a letter, both letter and story are posted to the child. I have found that for a 6-, 7-, or 11-year-old, to receive a formal letter in the post, in an envelope with their name and a stamp on it in this electronic day and age, is hugely affirming and empowering. Younger children often ask their parents to read the stories and letters to them. While this is encouraged and often important since the story and letter are frequently as much a communication with parents as communication with the child, it remains important to emphasise that it is the *child’s* letter which could also be a private document *not* to be shared with anyone else.

Case illustration: the TSM in action

Background

Kara (pseudonyms are used and this sharing is done with the explicit consent of the child and parents) was a 8.5-year-old girl in an upper-middle-class family. She was the youngest of four siblings and the only girl child in the family. Her parents described a number of traumatic events within the family and a rather chaotic family lifestyle at the time we met. Although they talked about these events with insight, they had very little control or any plan of action to address these debilitating circumstances and family communication patterns. A conflicting picture was presented, and Kara was described as very loving and affectionate, yet very demanding, destructive, and closed-off. She was seen as intelligent by all significant adults, yet not performing scholastically at all. Conflict and controversy seemed to follow her. Her mother described a pattern of disruption and rejection in all social situations; disruption often instigated by Kara through ‘traumatic incidents and fighting’. When she came to me, she was described as extremely active, strong-willed, and very demanding. She had previously been diagnosed with attention-deficit/hyperactivity disorder, while conduct disorder was frequently used in conversations with significant adults, and pharmacological intervention had been recommended. Furthermore, Kara was in a previous ‘disastrous play

therapy experience' the year before we met, where she would scream, kick, and cry, refusing to leave the car when she was taken to her sessions.

Process

When I met Kara for the first time, I did not really meet her personally. Like so often when children present in therapy, she was constructed to me through the words and descriptions of the significant adults in her life. She was introduced to me through the initial telephone calls of her teacher and mother: a broken signal on a mobile phone while travelling, from her mother, a conversation during break between cups of tea with her teacher.

Her teacher described her as unable to accept 'no' as an answer to her demands, as well as having the 'emotional development of a 2 year old'. According to her mother, she showed 'progressive deterioration of behaviour from disruption and defiance to tantrums'. I realised that Kara was in serious trouble when her teacher said, 'Sometimes she is a real monster in a little girl's body'.

I met Kara 2 days later. While initially it took some convincing to join me in my consulting room, she willingly engaged with the drawing material and other toys in the room, and soon started telling me little bits about her life. We met three times during the first week, and we agreed to see each other twice the following week. This is a practice that I often follow with children when they seem to be in crisis and where the time between weekly meetings can seem an eternity (Carr, 1999).

A number of themes emerged during these early conversations with Kara. One of the most significant is illustrated in this early conversation between us, which went something like this:

- Jan: I spoke to your teacher yesterday.
 Kara: Ehmmm . . .
 Jan: I did tell you that I was going to talk to her, remember?.
 Kara: Yes, but you did not ASK me.

I should have been alerted to this thin life narrative right from the beginning when Kara once mumbled to her dad, 'No one ever listens to a little girl'. In another conversation, after I told her that I was not going to run after her if she does not want to come in after she promised to come back, Kara exclaimed, 'I never said I can come today, I had other things to do!'. Kara was slowly teaching me to listen to a little girl.

I acknowledged this to her, and after some more active listening and revisiting significant life events with her, I asked Kara in our fifth meeting to build her world in the sand and tell me the story that she built. She initially did not say a word, but slowly started packing her selected miniatures into the sand tray. 'Progressive deterioration of behaviour from disruption and defiance to tantrums', I thought, 'Sometimes a real monster in a little girl's body'.

Kara finished in silence. I moved closer and started writing while speaking the words, 'Kara's story about . . .' and Kara finished the title '. . . the monster who helps'.

This is, verbatim, the story that Kara built in the sand:

Kara's story about the monster who helps

The huge big monster comes and he found a broken helicopter. So he picked it up and puts it on the truck. And then the car's out of fuel and he pushes it.

They got to the door. Then they hoot at the door and the door opens. And Monster goes in and pulls it closed. He goes into the little girl's room and knocks on the door. And the little girl has a friend, but he runs away and hides behind the dog's blanket. The Monster came in and patted the dog, but the dog runs away too. Monster ran into the room and he was angry. He saw the girl . . . and he told her all about the story of the broken helicopter. He asked if he could use the phone to phone for help. The little girl gave her phone to him and he phoned: 'Come quick, we need to help here!!'

The police sent a rescue robot who was really really strong. Monster then runs out, jumps over and kicks the door open. Before he does this, the little girl runs out with him.

The camel and two lions ran out of the way. The little girl rode on the one lion. And then rescue robot took the helicopter from them and fixed it. Monster got a butterfly-badge for saving the helicopter . . . that the little girl gave to the police.

The little girl ran back home and smiled.

THE END!

This constructing, telling, and recording of the story can easily fill a full session with the child. When Kara left me with her Sandstory, I carefully reflected on what I already knew about her and how this relates to her story. I wrote and posted the following letter, with a copy of her story decorated with pictures, that same evening to Kara:

Thursday evening, 17 June

Dear Kara

It was good meeting you again this afternoon when your dad brought you to me. I really appreciate the time he took to bring you here safely and I want to ask you to thank him for making the special effort to bring you to me. Also thank your mom for being there to fetch you, even before our time was up. Our time together went so quickly that I hadn't even realized that she was waiting already until you opened the door: AND THERE SHE WAS! I was a bit surprised to see her there so early, but I don't think you were surprised at all ☺. I think she did not want you to wait alone at a place you did not know that well. Don't you also think that is why she always comes a couple of minutes early? That is very kind of her and makes me feel that mom and dad see you as someone very special, what do you think?

We had a good time and I could see that you really wanted to play your story in the sand and tell it to me. I want to thank you for telling me the lovely story: 'Kara's story about the monster who helps'. When you started telling the story, I was really scared of that huge monster!! But oh boy, how wrong was I – the scary monster was really a friendly and helpful monster!! WOW! Wasn't it just great when he fixed that helicopter? And you know what Kara, I think he really deserved that butterfly badge the girl asked the police to give to him for his help. Don't you also think Monster was very misunderstood and deserved the badge? I still wonder how many other people misunderstood the monster and ran away or went hiding when they see him. Like the little girl's friend who hid under the dog's blankets; and even the dog that ran away even though the monster tried to be friendly and patted him.

But not the little girl. Oh no! She knew the monster was there to help. She was the **only one** who knew that not all monsters are scary and dangerous beasts. WOW Kara, that story really taught me something, and I was not surprised that the little girl wasn't even afraid of the lions at the end and that she rode on one of them when she went outside with Monster, just as the Rescue Robot came. She is really a brave and very special little girl, and no one even knew that!

Actually that is not true. I think Monster knew it and **that** is the reason why he came to her, and to no one else, for help and to find the telephone. Don't you also think so?

So Kara, thank you very much for sharing your lovely story with me. I am also glad you want your mom to read the story too. I think mom also knows, like you and I do now after your story, that not all monsters are dangerous beasts. But that some are really helpful and could be friendly.

I am glad I know that now.

You are a very special girl. I am really looking forward to seeing you again next week. Maybe you can tell me some more stories about you and your school and your family this time. Will that be okay with you?

Have a good weekend. I'll see you on Tuesday.

Your friend, Jan

Tentative thoughts on the mechanism of change

The relational dance between tellings and retellings follows the narrative therapeutic tradition. Writing a therapeutic letter in response to a child's construction, playing, and telling of her Sandstory represents such a retelling. In this particular retelling of Kara's Sandstory, I attempt to highlight exceptions, 'sparkling moments' (Monk, 1997, p. 13) and unique outcomes (M. White, 2007). In the retelling of Kara's story, the focus on the narrative surrounds the 'Monster' rather explicitly becoming a good monster and thus non-monster, but even more than this, and in the affirmative, a courageous helper of others in need. The *retelletter* furthermore paves the way for a reauthoring conversation (see M. White, 2007), one that has already started in the letter, to continue. It furthermore has the potential for re-membering and *demebering* of characters with a particular judgement cast over the main character in the story, that is, whether the main character represents aspects or values or preferred identities of the child, as it so often does. I remember another Sandstory where Harry the Hermit Crab surrounded himself with friends in his little shell house, but only those whose heads were not too big to fit through the opening, all involving an elaborate process of selection, *demebering*, and re-membering of persons with certain qualities.

By nature of the storymaking, telling and retelling experiences, the process shared in the TSM is an externalising process. Children often find it difficult to express directly what is troubling in their lives, and symptoms more often than not visit in subtle and not in directly observable ways.

My letter-response to Kara's story had a profound impact on her. Her parents told me that she carried her letter and the story with her everywhere she went for the next couple of days. She slept with it under her pillow and she showed it to her teacher and 'Frankly', her mother said, 'to anyone who cared, or did not care, to listen to her'. These were the first steps in a process for people to start listening to a little girl and for a little girl to make her-self heard.

Not only did the *retelletter* assist with externalising 'the monster', it also assisted in repositioning Kara to both her parents and teacher as someone to be taken seriously, someone with a voice worth listening to, rendering her acting out behaviour unnecessary and ultimately redundant.

Conclusion

This article described the process and method of the TSM. This method seeks to combine aspects of sandtray therapy, storymaking in therapy, and therapeutic letter writing. It is described as a powerful technique for medium- to short-term work with children in a range of settings which go beyond the confines of the consulting room. It is ideally suited for therapeutic work in a post-modern constructionist orientation and seeks to empower children, affirming alternative identities,

unique outcomes, and exceptional life stories. Further exploration into the mechanism of change is necessary. The description of the characteristics of child populations particularly suited to this method of work will be valuable in further developing this method of engagement with children and adolescents. Future research needs to explore the exclusion of certain presenting problems, because clearly this work supports working with preferred identities and repositioning of problem behaviour. The response of adult clients to this particular technique could also fruitfully be explored.

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