



The Therapeutic Powers of Play Core Agents of Change in AutPlay® Therapy

Schaefer & Drewes (2014) presented twenty core change agents of the therapeutic powers of play. Therapeutic factors refer to specific clinical strategies, and the therapeutic powers of play refer to the specific change agents in which play initiates, facilitates, or strengthens their therapeutic effect. The change agents include self-expression, access to the unconscious, direct teaching, indirect teaching, catharsis, abreaction, positive emotions, counterconditioning fears, stress inoculation, stress management, therapeutic relationship, attachment, social competence, empathy, creative problem solving, resiliency, moral development, accelerated psychological development, self-regulation, and self-esteem.

Through specific consideration and selection of the cores change agents, autistic children can learn social navigation, develop relationships, learn how to communicate and express themselves through verbal and nonverbal means, improve emotional regulation ability, decrease stress and anxiety, improve their awareness of self and positive self-esteem, and develop problem solving/coping abilities.

The AutPlay® Therapy protocol can potentially incorporate and address any of the 20 core agents of change of the therapeutic powers of play. AutPlay® utilizes structured play therapy interventions that are specifically chosen and or created for the individual child. Therapeutic play processes and play interventions are mindfully chosen with input from both the parent and the child. Each intervention embodies one or more of the 20 core agents of change depending on the child’s assessed needs. Although any of the core change agents could be identified and addressed with an autistic child with, typically, autistic children benefit from a focus on specifically identified agents of change.

Primary Agents of Change in AutPlay® Therapy Protocol

Direct Teaching	Positive Emotions	Therapeutic Relationship	Stress Management	Social Competence
Positive Peer Relationship	Stress Inoculation	Empathy	Counterconditioning Fears	Self-Regulation
Moral Development	Attachment	Self Esteem	Creative Problem Solving	Resiliency

Examples

Positive Peer Relationships – The therapist might select the *AutPlay Intervention Paper Friend*. The therapist would introduce the intervention and complete it with the child focusing on developing and improving friendships. Parents would support the implementation of the intervention to help advance peer relationships. The therapist would continue to follow up with the child after the intervention had been completed to ensure the child was making gains in developing better friendships.

Therapeutic Relationship - Beginning sessions focus on helping the child feel safe and familiar with the therapist and environment. Emphasis is placed on being present with the child. Early in therapy, the therapist might play the intervention *Obstacle Course* to continue working on relationship development between the child and therapist or child and parent. The therapist might also let the child choose an intervention to play or read the child a social story about being in play therapy.

Direct Teaching – The therapist could choose any play intervention with a purposeful therapy goal focus to help improve issue or challenges the child might be experiencing. For example, the therapist could choose the play intervention *Let's Practice Conversation* to help teach children who are more nonverbal or have difficulty participating in reciprocal conversations how to feel more comfortable and confident.

Positive Emotions – The therapist could choose the intervention *Emotion Mane* to help children identify positive emotions they experience and to understand how to recognize and connect to their emotions. The therapist could also role model, reflect, and reinforce positive emotions that the child shares or displays during sessions.

Self-Regulation – The therapist could introduce *AutPlay* regulation games based on movement (interhemispheric crossing) such as *Mirror Midline Moves* or *Progressive Balloon Game* and establish a regulation play time at home where children could continue learning and practice implementing regulation strategies to help keep their systems regulated.

Play is the natural language of all children and holds many benefits including therapeutic components. Within the therapeutic powers of play, autistic children have a validating and naturalist process to address needs and work on mental health growth and goals. *AutPlay Therapy* protocol is mindfully infused with play core agents of change that specifically align with the neurodivergence of autistic children and children with other neurodevelopmental needs.

References

Grant, R. J. (2017). *AutPlay therapy for children and adolescents on the autism spectrum*. Routledge.

Schaefer, C. E. & Drewes, A. A. (2014). *The therapeutic powers of play: 20 core agents of change*. Wiley and Sons.