

## What is AutPlay?

*Adapted from: The AutPlay Therapy Handbook: Integrative Family Play Therapy with Neurodivergent children by Robert J. Grant*

<https://autplaytherapy.com/about-autplay-therapy/>

Autplay is a family play therapy approach designed to address the mental health needs of neurodivergent (autistic, ADHD, learning and sensory differences, intellectual and developmental disabilities, etc.) children and their families. As an integrative model, Autplay consists of seminal play therapy theories and approaches integrated into a neurodiversity affirming framework. Autplay is designed to assist children, adolescents, across a spectrum of presentation, and their families.

- **Neurodiversity affirming** is a strength based approach to interacting and engaging with one another. It is based on the idea that everyone's brain develops differently, and that people with neurodivergence have brains that work differently in one or more ways than is considered typical.

### **Being Neurodiversity affirming includes:**

- Accepting neurodiversity which is an umbrella term for conditions like autism, ADHD, dyslexia, and more.
- Valuing strengths and differences of people with neurodivergence, without trying to change them to fit into a narrow idea of what's "normal".
- Making accommodations for individual needs, such as adjusting lighting, music, and smells.
- Communicating clearly and directly, avoiding irony and euphemisms.
- Challenging stigmas associated with neurodivergence.
- Seeking out ways to change environments to help people find success.

## Overview

- AutPlay approaches evidence based play therapy theories through a diversity understood and affirming lens.
- AutPlay is designed to assist clients and therapists in selecting and implementing neurodivergent affirming interventions for children, adolescents and families to support mental health needs.
- Parents and children are valued and understood as partners in the therapy process with the therapist.

## **Phases of AutPlay Therapy**

- **Intake and Assessment Phase ( Usually 3 - 5 sessions)**

- Focus is in relationship building, helping the child feel familiar with the therapist and office.
- AutPlay inventories are given to parents
- A parent and child observation is conducted
- Assessment processes, gathering information about child and family, and creating therapy goals with the family.

- **Why are we assessing?**

- To better understand the child we are working with
- To learn more about the child's strengths, needs, and interests
- To help create goals and develop a therapy plan.
- To assist in selecting play therapy interventions that best fit the child and target their needs.
- Using an evaluation system will ensure therapy goals are being met.

- **What are we assessing?** Assessments can be conducted through play observations, information inventories, intake forms, and interviews / conversations with caregivers and child

- Social Navigation
- Emotional Awareness / Strengths
- Regulation needs
- Connection ability
- Sensory processing differences
- Ways of communicating
- Unwanted behaviors
- Family supports and resources

- **Structured Play Intervention Phase (number of sessions will be different for each child / family)**

- This phase is when play therapy approaches and interventions are implemented to address the established therapy goals.
- The therapist should establish therapy goals and a plan, but can change them as sessions progress. It is likely that as therapy progresses, the goals and the approaches will shift.
- The therapist may move forward with a more nondirective` (child - led) approach, but begin implementing structured play interventions to address specific needs, or may do some kind of combination.
- This phase looks different for each family. Ideally, there is a level of parent involvement where parents become co - change agents, working with their children at home to implement what they are doing in therapy sessions.
- The amount of “structure” used in this phase is based on the client’s therapy goals and what seems like a best fit for them.
- The therapist uses their knowledge of various play therapy theories and approaches.

- **Termination Phase (Typically takes about 3 sessions)**

- The therapy plan is reviewed with parents and child, it is established that therapy goals have been accomplished and there are no new goals.
- The parents and child are told they will be having a final session and given the final session date.
- The session before the final session should include a play termination activity.
- The final session is a graduation party for the child. It should be a celebration of what the child and family have accomplished.

\* Some clients may not want to terminate and will want to maintain therapy as a maintenance or type of self care support. This is possible as long as all parties are in agreement and understand what is happening with the therapy time.

## **A Word about Videoing**

*(Adapted from Theraplay: The Practitioner's Guide by V. Norris and D. Lender)*

The purpose of videoing in AutPlay is to improve the effectiveness of the intervention. In other words, the purpose is therapeutic rather than evaluative. The videoing is not intended to be used as a way to collect evidence of poor parenting or to focus on the therapist's mistakes. The goal is to be strengths - based.

- Together, the therapist and parent may view selected clips to aid in discussion and understanding.
  - Parents and therapist can rewind and view video in more detail, review the pattern or sequence of moment - to - moment interactions.
  - Reviewing these interactions will significantly improve the quality of understanding about strengths and challenges for the parent and therapist.
  - When we review a video, we are always surprised at how much detail we see that was not obvious at the time.
  - The video is an incredibly rich resource which, when used well, can significantly impact parents' perception and experience with their child.