PLAY AND SOCIAL-EMOTIONAL WELLBEING: CREATING SPACE FOR UNSTRUCTURED PLAY IN MONTESSORI ENVIRONMENTS

by

Carmelle J Hermoso

A Paper

Presented to the Gordon Albright School of Education

In Partial Fulfillment of the Requirements

For the Degree of Master of Education

EGC640 School Counselling Project

April, 2021

PLAY AND SOCIAL-EMOTIONAL WELLBEING: CREATING SPACE FOR UNSTRUCTURED PLAY IN MONTESSORI ENVIRONMENTS

APPROVED:

_____ (Faculty Advisor)

_____ (Principal of Canadian Programs)

Dedication

I dedicate this paper to all the incredible people in my life who have supported me through my graduate studies journey. Firstly, I want to express my gratitude to my mom, Emilie, who has been my rock since the very beginning. Without her love, unending support and guidance, I wouldn't have made it through. I'm especially grateful for her help caring for my two children while I spent so much of the last few years studying, writing, and working. Her tireless devotion to caring for her family and friends is what inspires me to help and serve others. Secondly, I dedicate this work to my dad, Tony, who although is no longer here with us, continues to be present in my life in so many ways. My dad's daily acts of kindness, patience, and boundless empathy for others taught me how to put myself in another's shoes. What I have learned from my dad is something I try to practise regularly, not only in my work as a counsellor, but as a human being. I would also like to dedicate this paper to my big brother, Chad, who has shown me how faith and hope can heal all wounds. His determination and commitment to overcoming his drug addiction and putting his family first is what inspires me to endure the tough times in life. To my husband Rey, who constantly shows me unconditional love and support - thank you for laughing with me and always bringing me light when its dark. I don't know where I'd be without you. And lastly, I dedicate this paper to my two beautiful children, Amelia and Roston. The joy you bring into my life has fueled me each day, especially in completing my Master's degree, which is something I did not believe was possible for me as a working mom. I hope that this accomplishment is proves that anything is possible for the two of you. I know you both have so much to offer this world and I can't wait to see it unfold. But for now, thank you for being the playful and brilliant children that you are. It is the time we spend

together playing, creating, discovering, and imagining, that continues to give me reason to believe in the power of play and relationships.

Acknowledgements

I would like to acknowledge all the CityU faculty whom I had the opportunity to learn from throughout my graduate studies journey. Thank you to my capstone advisor, Natashia Bacchus, for all her helpful feedback and support in writing this paper. I would also like to thank my internship supervisor, Sarah Frizelle, and my counselling mentors, Shannon Gomboc and Charlotte King-Harris, for all their guidance and support over the last two years. I am so grateful to have learned from all of you during my time as a counsellor in-training. Finally, I would like to acknowledge my Selkirk Montessori School family, especially Penny Barner and Erin Hayes, for all their support and love, not only during my time as a graduate student, but also over the last decade leading up to my decision to pursue school counselling. I would not be where I am today, personally and professionally, if it weren't for the two of you, Penny and Erin. Thanks for always believing in me and for all your support throughout the years.

Abstract

Research indicates that most Canadian children and youth fill their time outside of school participating in extracurricular activities or on a screen (Statistics Canada, 2008, 2018). This suggests that many young people are having less time for unstructured activities and free play. Furthermore, there is evidence that Canadian millennials have an increasing risk for mental illness, specifically 63% can be classified as "High Risk", which is a 41% increase from the previous year (Ispos, 2017). The significant rise in the rates of mental illness occurs in parallel with a decrease in time spent on unstructured play. One must wonder whether there is a connection between the increase in mental health issues and the decrease in unstructured play time. Many early childhood education settings incorporate play as a major component of their programs, as recommended by BC Early Learning Framework. In contrast, many traditional Montessori education programs, although hands-on and didactic in nature, steer children away from unstructured pretend play while in the Montessori environment (Torrence, 2001). In this paper, I aim to investigate the impact of unstructured and pretend play on children's social-emotional development and overall wellbeing. Further, this study examines whether play can take place in Montessori environments without compromising the benefits of the approach and philosophy. Recommendations on how Montessori schools can incorporate play are provided, outlined using 3-tiered Response to Intervention (RtI) framework.

Keywords: play, unstructured play, pretend play, play therapy, child-centered, social-emotional development, well-being, mental health, early learning, Montessori, intervention, school counsellors.

Table of Contents

Play and Social-Emotional Wellbeing: Making Space for Unstructured Play in Montessori Environments

Chapter 1: Introduction

Introduction

Since the genesis of recorded history, play has been evident in nearly every culture (Drewes & Schaefer, 2010). For humans, and many other species, play can be considered as critical to development as sleep and food (Drewes & Schaefer, 2010). This important role of play in children's development was highlighted in the United Nations 1989 Convention on the Rights of the child, Article 31.1, which recognizes "the right of the child to rest and leisure, to engage in play and recreational activities appropriate to the age of the child and to participate freely in cultural life and the arts." The importance of play can be found in literature from centuries ago, dating back to Plato's work in *The Republic* and *The Laws* (Smith, 2009). Considering that research on play has grown over the last few decades and continues to be an area of interest today, most would expect children to spend much of their leisure time playing (Torrence, 2001). Statistics Canada has highlighted an evolution in the way children spend their leisure time. The average amount of screen time for children and youth ages 5 to 17 is 3 hours per day, meaning young people are sitting more and moving less than ever before (Statistics Canada, 2018). Conversely, children spend so much of their remaining time at school, making the balance of direct instruction with rest and play times so important for educators to consider. In addition to providing recess times for unstructured free play, the BC Early Learning Framework encourages preschool and elementary schools to incorporate play into their curriculum. One of the principles

of the BC Early Learning Framework, which guides pre-school and primary educators in BC, states that "Play is integral to wellbeing and learning" (British Columbia Ministry of Health & British Columbia Ministry of Children and Family Development, 2009, p. 24). The BC Early Learning Framework encourages educators to provide a variety of materials and experiences for students to learn through play. In contrast however, many traditional Montessori education programs, although hands-on and didactic in nature, steer children away from unstructured pretend play while in the Montessori environment (Torrence, 2001). With the declining amounts of time for free play at home due to society's emphasis on extracurricular activity, paired with restricted opportunities at school, Montessori-educated children have the potential of losing out on the benefits of play, particularly those related to social-emotional development and overall mental health and wellbeing (Canadian Public Health Association, 2019; Torrence, 2001). Advocates of the Montessori approach would argue that the pedagogy and structure of Montessori classrooms provide everything that children need to thrive academically, socially, and emotionally (Lillard et al., 2017). But perhaps there is room for change and improvement?

Background

In 2000/2001, 86% of Canadian children and youth "were reported to have taken part in at least one organized extracurricular activity during the previous year" (Statistics Canada, 2008, p. 65). A more recent report from Statistics Canada (2018), states that the average amount of screen time that children and youth access is 3 hours per day. With these factors considered, it can be assumed that many young people are having less and less time for unstructured activities and free play. As stated in the BC's Early Learning Framework, "Play is integral to well-being and learning," and furthermore, the framework "promotes the importance of play for children to

experience the world through seeing, feeling, touching, listening, and by engaging with people, materials, places, species, and ideas" (British Columbia Ministry of Health & British Columbia Ministry of Children and Family Development, 2009). In 2019, the Canadian Public Health Association (CPHA) published a document titled, *Children's Unstructured Play Position Statement.* The CPHA stated that "[Unstructured play] supports the formation and maintenance of friendships, which promotes the maintenance of good mental health; physically active play may decrease anxiety and depressive symptoms" (2019, p. 5). With less time for unstructured play and free time, Canadians are seeing the consequences among their young people. The Ispos 2017 Mental Health Risk Index revealed that 63% of Canadian millennials can be classified as "High Risk" for mental illness, which was an increase from 41% the previous year. (Ispos, 2017). The Ispos Mental Health index reveals a dramatic rise in the rise in the rates of mental illness among our millennials; at the same time, we have also seen a dramatic decrease in the amount of time spent playing. Although I have not found any research linking these two factors, I cannot help but wonder about the connection between the increase in mental health issues and the decrease in unstructured play time.

The Canadian Public Health Association also recognizes the importance of unstructured play. Their position statement on unstructured play also advocates for community stakeholders to do their part:

> The Canadian Public Health Association (CPHA) recognizes unstructured play as a child's right and a critical component to child and youth health and well- being. Actions are necessary to reduce the barriers limiting opportunities for unstructured play at school

> and in the community. CPHA commends those school boards, municipalities, other governments and non- governmental organizations that are taking positive steps to improve children's access to unstructured play; however, further steps are needed (2018, p. 3).

Although schools across Canada are expected to provide recess breaks, the only guidelines that seem to direct the length of recess times are based on suggested daily physical activity. In British Columbia, the Ministry of Education mandates that schools provide students from Kindergarten to Grade 7 at least 30 minutes of physical activity each day (Parmenter et al., 2005). The daily physical activity, however, could be structured and teacher led, so the amount of unstructured play time that each school provides students is unclear. Therefore, it seems that in most cases, it is up to individual teachers to balance structured and unstructured times throughout the day. For some schools, however, an overarching philosophy is what guides teachers' decision-making. For example, one school may be more arts-based and it is agreed upon by all teachers that an emphasis is placed on presenting concepts through art-based lessons. The same is true for play-based or exploration-based programs, where the classroom is set up in a manner that encourages learning through play and exploration.

One popular approach in education, especially for the preschool and primary years, is the Montessori method, developed by Maria Montessori in the early 1900s. Montessori schools are known for the careful design of child-sized environments, which according to Torrence (2001), "encourage independence and autonomy and enables children to get close to reality through a personal voyage of discovery embedded in sensory training curriculum and practical life

activities" (p. 381). Because Montessori education is well known for its use of didactic materials, movement around the classroom, and the opportunities to work collaboratively, many view the approach as playful learning. Interestingly however, Maria Montessori herself considered play "developmentally irrelevant" (Rubin, Fein, & Vandenberg, 1983, p. 694). Montessori was particularly against encouraging fantasy or pretend play. Dr. Angeline S. Lillard, an author and professor of psychology at the University of Virginia, has been studying both the Montessori method and pretend play for over a decade (University of Virgina College and Graduate School of Arts & Sciences, 2020). According to Lillard (2013), "Pretending has no place in Montessori education, and this strikes many educators as odd given the popular belief that pretending helps children's development" (p. 171). In a preschool-kindergarten classroom, one child was observed playing with the knobbed cylinder material as little dolls. She was playing quietly, holding a few cylinders up to one another, using motions and voices to portray them talking to one another. Because the knobbed cylinder material is meant for sensorial development where the child is shown to line them up in size, she was gently redirected to do the work as instructed. The child was not reprimanded for playing, as Montessori teachers are well trained to patiently guide and redirect behaviours. The pretend play the child felt drawn to pursue, however, was not seen as an appropriate choice at the time. The child was 4 years old.

Purpose Statement

Research examining Montessori education has provided evidence that there are many benefits of the approach. Many students who go through Montessori preschool programs have been found to measure higher in "academic achievement, social understanding, and mastery orientation" (Lillard et al., 2017, p. 1). However, with the rising rates of mental health concerns

along with more disruptions in social-emotional development among many young people today, the possible benefits of unstructured play in Montessori environments are worth exploring. Therefore, the purpose of this paper is to examine the impact of unstructured and pretend play on children's overall wellbeing, and to investigate whether play can take place in Montessori environments without compromising the benefits of the approach and philosophy. Furthermore, this paper will consider ways Montessori schools can incorporate unstructured and pretend play into their programs as interventions for children with social-emotional concerns.

Theoretical Framework

In investigating the benefits of play and its impact on the mental, social, and emotional development of children, the lens through which the research of this paper will be analyzed is threefold: Vygotsky, Montessori, and Child-Centred Play Therapy. Lev Vygotsky, a pioneer in the field of play research, based his theory of the Zone of Proximal Development on play, stating, "In play, the child is always behaving beyond his age, above his usual every day; in play, he is, as it were, a head above himself" (Vygotsky, 1978, as cited in Bodrova, 2003, p. 32). According to this theory, there is a gap between what a child can accomplish independently and what a child can do with support, which is what Vygotsky refers to as the Zone of Proximal Development (Mooney, 2003). It is through the interaction between the child and an adult or a peer which supports the learning of a new concept (Mooney, 2003). Through pretend play, children naturally stretch themselves beyond what they are independently capable of, thus encouraging the learning of new skills and concepts (Mooney, 2003). In contrast, Maria Montessori, a leader in education was a constructivist like Vygotsky, but did not place importance on pretend play. Vygotsky's view was significantly different from Montessori's

view, which did not see play having an important role in classrooms. As cited by Bodrova (2003) Montessori referred to playing with dolls as a "useless amusement" and that "children are happy to trade for more meaningful 'work' on the apparatus" (p. 32). The Montessori approach, however, has resulted in so much success in many domains among children, that her theories continue to be relevant today (Lillard et al., 2017). With the growing rates of mental health concerns and challenging behaviours in schools, the possible benefits of unstructured and pretend play may outweigh the philosophical aversion to play in Montessori environments (Ispos, 2017; Lillard et al., 2013).

While it is the goal for most educators to be able to provide the necessary activities, materials, and in-class instruction for healthy development, it is inevitable for some children to require additional social-emotional interventions in schools. Considering this, Child-Centred Play Therapy, a non-directive approach, is naturally unstructured and utilizes children's innate capacities to resolve their issues and challenges. In the book *Child-Centered Play Therapy,* VanFleet et al. (2010) describes the approach:

> The foundation for CCPT is the belief that *the child leads the way*. At the theoretical and philosophical center of this approach is an appreciation for human capacity; it stresses the ability of all clients, including children, to be self-directive in their search for healing (p. 15).

Interestingly, a well-known principle of Montessori's approach is to *follow the child.* In Montessori's writings in *The Theosophist*, she states, "In the child is much knowledge, much wisdom. If we do not profit from it, it is only because of neglect on our part to become humble

and to see the wonder of this soul and learn what the child can teach" (as cited in American Montessori Society, 2021, para. 12). Knowing Montessori's deep belief in the innate wisdom of the child, many of the principles of CCPT are in line with the Montessori philosophy. Hendron (2016), compares the Montessori Education and play therapy, highlighting the parallels of the use of materials as symbolic representations of abstract concepts, the freedom to choose activity within the environment, and the importance of the adult's careful observation of the child. Therefore, unstructured play, CCPT, and the Montessori approach, are in many ways compatible with one another.

Significance of the Study

The lifestyle of North American children has changed drastically over the last few decades with greater access to technology and fuller schedules (Canadian Public Health Association, 2019). What has not changed, however, is the natural tendency for children to play. By investigating the benefits of unstructured play and uncovering its impacts on children's mental health and wellbeing, educators and school counsellors in Montessori schools may be encouraged to rethink how their students' days are structured. Research in this area may lead to recommendations for teachers on how to incorporate unstructured play in their classrooms. Recommendations may also include small group or individual play therapy interventions for students requiring additional social-emotional support. Understanding the implications of unstructured play for children in general would also provide a foundation of information for educators and school counsellors to share with parents. By helping parents recognize the importance of unstructured play, safeguarding time and space for play may also become a priority at home. The main goal of this research is to determine how unstructured play can

support children's overall wellbeing in order to inform the development of a useful and effective model for Montessori schools and communities.

Definition of Terms

Exercise play: A type of physical activity play which involves "running, jumping, crawling, climbing, and so forth" (Smith, 2009, p. 9).

Free play: "Includes object play, pretend and sociodramatic play, and rough-and-tumble play, in all of which children engage without close adult oversight or control. Free play is fun, flexible, active, and voluntary (i.e. Without extrinsic reward). Free play also often includes elements of make-believe and also often involves peers" (Lillard, 2013, p. 157).

Guided play: "Occurs when an adult aims a child towards specific knowledge in a playful, fun, and relaxed way. Guided play often involves specific toys with which a child can interact to gain knowledge. A supervising adult observes the child closely and asks questions to help the child learn, but as with free play, respects the child's own interests and pacing" (Lillard, 2013, pp. 157-158).

Object play: A type of play that involves activity with objects. Some examples include "fitting Lego blocks together, making block towers, using modeling clay, pouring water from one container to another" (Smith, 2009, p. 9).

*Play: "*Behaviour that is intrinsically motivated, freely chosen, process-oriented, and pleasurable (often cited, as well: nonliteral)" (Torrence, 2001, p. 9).

Physical activity play: A type of play involving "gross bodily movements (rather than the smaller-scale bodily movements" which includes *exercise play* and *rough-and-tumble play* (Smith, 2009, p. 9).

Pretend play (or Fantasy play): A type of play that is "characterized by the nonliteral use of objects, actions, or vocalizations. A block becomes a cake, or a piece of paper becomes a bus ticket. Actions can mime pretend behaviours such as drinking a cup of tea, or turning the steering wheel of a car" (Smith, 2009, p. 9).

Sociodramatic play: A type of play that "refers to dramatic play, that is, play in which the child is clearly enacting a role, and to social play (dramatic play can be solitary, but this is relatively uncommon and would not count as sociodramatic)" (Smith, 2009, p. 159).

*Unstructured play: "*Happens when children follow their instincts, ideas, and interests without an imposed outcome. It may include challenging forms of play, and provides opportunities for exploring boundaries that allow children to determine their own limits in a variety of natural and built environments" (Canadian Public Health Association, 2019, p. 3)

Work: "Activity done for a clear external goal" (Smith, 2019, p. 11).

Work (in Montessori Philosophy): "That spontaneous activity by which the child creates the self: physical and mental activity freely chosen by an individual" (Torrence, 2001, p. 9).

Summary

As discussed in Chapter 1, the benefits of unstructured play have been explored and theorized in the field of child development and education for decades (Torrence, 2001). In British Columbia, play has been made a main principle of the province's Early Learning Framework, supported by several researchers and early childhood educators involved in the creation of the document. As stated in the framework, "Play is integral to wellbeing and learning," which gives reason to believe that it plays a significant role in the mental health of children and youth (British Columbia Ministry of Health & British Columbia Ministry of Children and Family Development, 2009, p. 24). However, with unstructured and pretend play not being valued in traditional Montessori classrooms, it raises the concern that Montessori-educated children may not be getting enough exposure to these types of play opportunities. By delving deeper into the Montessori philosophy and investigating how one can 'follow the child' in their urge to play and pretend, perhaps room can be made for unstructured play in Montessori classrooms.

In Chapter 2 I will review the literature outlining the theories and benefits of unstructured play and the Montessori philosophy on play in classrooms. In this chapter I will also discuss the parallel foundational beliefs of Child-Centred Play Therapy with the Montessori approach and how these commonalities may give way to supporting children's wellbeing through play in Montessori schools.

Chapter 2: Literature Review

Introduction

With play being a natural part of childhood, there is an abundance of literature regarding its influence on development. For the purpose of this literature review however, the social-emotional benefits of unstructured play, particularly pretend and imaginary play, will be the focus. The Montessori approach, with its philosophy rooted in hands-on work with educational materials, does not value pretend play the way many other early learning pedagogies do (Bodrova, 2003). In this review will also examine literature on the efficacy of traditional Montessori programs in the domains of social-emotional development and the reasoning behind its avoidance of pretend play. Lastly, considering the nature of social-emotional development in schools and the necessity of increased support for some students, literature on the benefits of play therapy interventions will also be presented. In line with the child-centred approach of Montessori education, the primary beliefs of Child-Centred Play Therapy (CCPT) will be discussed and compared with the Montessori philosophy.

Benefits of Play

Before discussing the benefits of play it is important to first discuss what play is. Play has a variety of forms and has several different definitions which describe its purpose and observed qualities. One definition of play is: "Behaviour that is intrinsically motivated, freely chosen, process-oriented, and pleasurable (often cited, as well: nonliteral)" (Torrence, 2001, p. 9). In Peter Smith's book, *Children and Play: Understanding Children's World*, the definition of play is offered in the words of a variety of theorists, based on different perspectives of research. Smith

(2009) shares three approaches of describing play: the functional approach (the objective of the play behaviour), structural approach (the mechanics of the behaviours), and a criteria-based approach, which is based on the perspective of the observer. For the purpose of this discussion, the criteria-based definition is most relevant and is easily referenced when observing and working with children in a school setting. In his book, Smith (2009) refers to four "play criteria" coined by Krasnor and Pepler (1980):

- "Intrinsic motivation" refers to the idea that play is not constrained by external rules or social demands, but is done for its own sake; taken from the functional approach.
- "Nonliterality" refers to the "as if" or pretend element. Behaviours do not have their normal or "literal" meaning. This can also be seen as derived from the functional approach, but really comes into its own when we consider play in children.
- "Positive affect" refers to the enjoyment of play, especially indexed by signals such as laughter. Specific play signals are taken from the structural approach.
- "Flexibility" refers to variation in form and content. This captures some of the sequencing aspects of the structural approach (p. 6).

In an empirical study to test out the model, Smith and Vollstedt (1985) added a fifth criteria: "'Means/ends': the child is more interested in the performance of the behaviour than its outcome; another reflection of the structural approach" (Smith, 2009, p. 7). The aim of the study was to investigate whether observers use the criteria to identify play (Smith and Vollstedt, 1985).

The seventy observers participating in the study were asked to view video episodes of preschool aged children and to provide a score of playfulness. Some scored based on individual judgement, while others scored based on the five criteria listed above. It was found that the play episodes scored to have the highest playfulness were those with more criteria present. Specifically, the criteria “nonliterality”, “flexibility”, and “positive affect”, appeared to carry the most weight (Krasnor and Pepler, 1980, p. 6). It is apparent that playfulness exists on a continuum and cannot be defined in a black and white manner. This is important to note when observing children during unstructured play.

Unstructured play, which can be considered synonymous with free play, takes place when children have the freedom to pursue their own interests and ideas without the expectation of a result or product (CPHA, 2019). Unstructured free play can include any type of play such as pretend play, either solitary or social, and in any environment (Lillard, 2013). In school settings, unstructured free play can often be seen occurring during recess periods when children are usually free to choose whom they play with, what equipment to use, and how they play.

As outlined in *Children’s Unstructured Play Position* Statement, published by the Canadian Public Health Association (2019), unstructured play is said to provide a range of benefits for the well-being of children and youth, including the improvement of physical health and gross motor skills, mental and emotional health, social health and teamwork, learning and attention at school, and resiliency and risk management skills. Specific to mental and social-emotional health, unstructured play provides opportunities for children to create and build friendships and develop the communication skills in order to effectively negotiate and cooperate

with others. Unstructured play is also believed to improve emotional intelligence, self-awareness, and empathy (CPHA, 2019). In the journal article *Resurrecting Free Play in Young Children,* social skill development is said to be a key component of unstructured play due to the natural occurrence of social problems that arise during interactions (Burdette & Whitaker, 2005). Typically, questions or problems that arise during unstructured play include what game to play, who can participate, when to begin and end, and what the rules are (Burdette & Whitaker, 2005). The authors of the article point out the importance of this problem-solving practice:

> Solving these dilemmas and conflicts that arise in play encourages children to compromise and to cooperate. This process can cultivate a range of social and emotional capabilities such as empathy, flexibility, self-awareness, and self-regulation. Such capabilities, sometimes referred to together as "emotional intelligence," are essential for successful social interactions in adult life (p. 48).

There is also evidence that unstructured free play combined with mindfulness practice can help to promote healthy wellbeing among children. In a study conducted by Lee et al. (2020), levels of happiness and playfulness were measured among kindergarten students before and after the interventions. Over the period of five days, the students engaged in 45 minutes of outdoor play with loose play materials including "paper boxes, hula hoops, cones, bean bags, car tires, tree sticks, tree leaves, strawman, paper sticks, blank paper, paint, and paint brushes" (Lee et al., 2020, p. 5). The unstructured free play time was then followed by 10 minutes of a mindfulness exercise, such as storytelling, deep-breathing, and body scanning. (Lee et al., 2020). It was found that there was an increase of happiness and

playfulness after the five days, both of which are considered factors significant to the maintenance of mental health and wellbeing (Lee et al., 2020). The limitations of this study, however, include a limited sample size and short time period for the interventions applied. Nonetheless, this study offers evidence that unstructured free play combined with an element of mindfulness can have a positive impact on children's social, emotional, and physical well-being. Overall, it is evident that unstructured play has beneficial effects on children's development, and what children choose to do during free time is also noteworthy.

Among the many ways children play during free or unstructured time, one type of play that is often seen among young children between the ages of 2 to 6 years old is pretend or fantasy play (Smith, 2009). Pretend play can be identified as the play which involves the "nonliteral use of objects, actions, or vocalizations" (Smith, 2009, p. 9). For example, a child may be seen making scooping actions with her hand into her mouth, pretending to eat ice cream. Another example might be a child pretending a wooden block is a car. Pretend play relies on the ability to represent ideas through symbolism, which therefore also relies heavily on language, both verbal and non-verbal. With its reliance on communication, intention, and awareness, pretend play can then be considered uniquely human, apart from what is observed among great apes (Smith, 2009).

Lev Vygotsky's theory of the Zone of Proximal Development relies heavily on the belief that during pretend play, children act above their age and above their typical daily behaviour (Vygotsky, 1978, as cited in Bodrova, 2003). Through pretend play, children take risks and experiment with tasks that they would not normally be able to do independently, thus promoting

learning of new skills (Mooney, 2003). This belief, therefore, has been one reason for early childhood curriculum developers to promote pretend play in daily programming. In the BC Early Learning Framework, it states:

> Play is vital to children's learning, growing, and making meaning. This framework uses many terms related to play, such as "engagement," "experimentation," "inquiry," "building theories," "participating," "making meaning," and "investigating." By broadening the vocabulary around play, educators may begin to see play in different ways, which in turn can enrich conversations. (British Columbia Ministry of Health & British Columbia Ministry of Children and Family Development, 2009, p. 24).

Specific to social-emotional development among children, several studies have been conducted to investigate the influence of pretend play. One study conducted in 2018 examined the impact of pretend play games on emotional control in young children (Goldstein & Lerner, 2018). The study compared three groups of children, each receiving different interventions over the course of twenty-four sessions. The interventions compared included guided dramatic pretend play games, guided block play, and story time (Goldstein & Lerner, 2018). It was found that the children who participated in the pretend play games over the course of 24 sessions had lower "personal distress across two measures of emotional control" compared to the children who participated in the other two groups (Goldstein & Lerner, 2018, p. 8). Additionally, it was found that engaging in pretend play games was related with increased levels of positive social behaviours (Goldstein & Lerner, 2018, p. 8).

Another key component of social-emotional development among children, often emphasized in school settings, is the development of self-regulation. In a 2017 study, researchers investigated the quality of pretend play as a predictor of cognitive and emotional self-regulation (Slot et al., 2017). Cognitive self-regulation involves the ability to plan, regulate task behaviour, and sustain attention, while emotional self-regulation involves the ability to understand one's own emotions, control the expression emotions, and resolve conflict with others (Slot et al., 2017). The study revealed a strong correlation between pretend play and cognitive and emotional regulation. According to Slot et al. (2017), "Pretend play requires children to coordinate their goals, negotiate plans, monitor their play and the children they play with as the play progresses, and adapt their actions accordingly. Hence, complex pretend play requires metacognitive regulation strategies and persistence" (p. 16). Therefore, the study suggests that pretend play settings provide an opportunity for children to develop their ability to communicate and regulate their emotions in a socially acceptable manner (Slot et al., 2017). Limitations to this study, however, include a small sample size and was based on very few observations, which makes it difficult to generalize the results.

Separately, there is evidence to suggest that unstructured play and pretend play have positive influences on children's social and emotional development. Unstructured free play provides opportunities for children to develop problem-solving skills and emotional intelligence, while pretend play offers children the avenue to take risks and learn skills from pretending to be someone or something they are not. These reasons are why it is not surprising to see preschools and elementary schools intentionally incorporate unstructured and pretend play in their daily programs.

Montessori and Play

Montessori education was established in the early 1900s by Maria Montessori, an Italian doctor and educator (American Montessori Society, 2021). In 1907, the very first Montessori classroom for underprivileged pre-school aged children, "Casa dei Bambini," was opened in Rome (Lillard, 2013, p. 158). Montessori's approach became widely adopted worldwide and its success led Montessori to leave her medical career to focus on expanding her education system for birth to adolescence (Lillard, 2013).

Montessori classrooms contain multi-aged groupings, "traditionally spanning three years: infant to three years old, three to six, six to nine, and nine to twelve" (Lillard, 2013, p. 159). Areas of the classroom are also specifically organized by subject with specific didactic materials carefully laid out on shelves. The materials are also designed so that they are self-correcting, that is if a child makes an error, the material will automatically make the error visible so that the child can correct the mistake without relying on the teacher (Lillard, 2013). Also unique to the Montessori approach is the emphasis of the child's independence and autonomy, promoted by child-sized furniture and carefully arranged environment encouraging the hands-on exercises that imitate real life as closely as possible (Torrence, 2001). Montessori classrooms are also known to offer freedom to students, within quite rigid structures and expectations (Lillard, 2013). For example, students are free to choose to work with materials if they have received a specialized lesson on how to use the material. Even the choice of washing a table is structured by specific steps, such as dipping a sponge into soapy water, squeezing out the excess, then wiping the table from left to right, and so on (Lillard, 2013).

According to the American Montessori Society (2021), the five main components of Montessori Education are: trained Montessori educators, the multi-aged classroom, using Montessori materials, child-directed work, and uninterrupted work periods. The AMS website additionally states:

> Within the community of a multi-aged classroom – designed to created natural opportunities for independence, citizenship, and accountability – children embrace multi-sensory learning and passionate inquiry. Individual students follow their own curiosity at their own pace, taking the time they need to fully understand each concept and meet individualized learning goals. (American Montessori Society, 2021, para. 2)

In the journal article, *Playful Learning and Montessori Education,* Lillard (2013) compares Montessori education with other forms of playful learning, suggesting that although there are some similarities, Montessori education differs in that it specifically shies away from unstructured and pretend play. For example, the carefully designed materials are presented to children through sequenced lessons and are to be used in the way they are shown. A classic Montessori material called the Brown Stair, composed of ten blocks that each increase in height, is meant to be arranged sequentially. Consequently, children would not be permitted to use this same material to build houses with (Lillard, 2013). In contrast, a play-based learning environment would likely encourage the use of blocks to explore one's imagination and creativity. Montessori placed greater importance on activities that allowed children to learn about real life (Smith, 2009).

The last few decades, there has been growth of research on the influence of play on child development (Torrence, 2001). In the article *Montessori and Play: Theory vs. Practice*, Torrence (2001) states, “Despite this surge of interest in play from the scientific community, there exists a shared belief among many in the Montessori community that children’s pretend-play is trivial and rather inconsequential” (p. 8). Maria Montessori herself considered play “developmentally irrelevant” and traditional Montessorians have continued to stand by this belief (Rubin, Fein, & Vandenberg, 1983, p. 694). According to Lillard (2013), there are several reasons why Montessori education resists pretend play. Firstly, Maria Montessori was an empiricist. She had originally provided toys in her classroom but found that the children chose to use the materials she had designed (Lillard, 2013). Secondly, Montessori was against forcing fantasies on children because of the worry that they would be quick to believe and confusing real life with make-believe (Lillard, 2013). There is evidence that Montessori placed importance on imagination as it is a major component of the elementary curriculum; however, she believed that “truth underpins all great acts of imagination and, thus, that children should be told the truth” (Lillard, 2013, p. 173).

Among many early childhood education programs, play is often considered to be an organic medium through which children can explore and communicate ideas (Soundy, 2009). In Montessori classrooms, however, with play being traditionally discouraged, it can put progressive Montessori educators in a difficult position. On one hand, there is the deep-rooted belief that the child’s mind is best developed through the senses and real-life experiences, which is what the collection of carefully designed materials provides (Soundy, 2009). The specialized use of each material, prohibiting ‘play’, also serves additional purposes, such as maintaining

classroom order and promoting self-discipline (Lillard, 2013). Therefore, loosening up on restrictions with materials would go against a key foundational tenet of the Montessori philosophy. On the other hand, however, many Montessori educators find themselves naturally wanting to "follow the child", another tenet of the Montessori approach, where following the child can often result in pretend play (Torrence 2001). Torrence (2001) shared her experience as a Montessori teacher in her journal article *Montessori and Play: Theory vs. Practice*:

> My own interest in play developed through observation in my 3-6 classroom. Despite my best efforts at the practice of redirecting children toward a carefully prepared, reality-based curriculum, and despite their obvious interest in and enjoyment of same, I frequently observed children's spontaneous and persistent interest in pretend-play. I had the nagging and uncomfortable feeling that a rich layer of hidden meaning quite important to the children lay just beyond the scope of my vision. (p. 8)

Torrence (2001) decided to examine the likelihood of Montessori teachers intervening during children's pretend play. The question asked to participants in the study was, "A decision to intervene in fantasy play always takes into account the particular child and situation. In general, how likely would you be to intervene in each of the following situations?" (Torrence, 2001, p. 10). The scenarios included in the questionnaire are as follows:

- Potentially destructive
- Noisy/distracting
- Block-building (sensorial material) (e.g., making a spaceship)
- Playing "store" with the bank game

- Fantasy play with farm game
- Artistic/decorative use (any material, if other than intended use)
- Role-playing in the book area
- Creative exploration (sensorial material)
- Role-playing (practical life material)
- Fantasy play with clay/playdough models

The questionnaire was sent to 100 Montessori schools in the U.S., affiliated with the American Montessori Society, and the results showed divided opinions (Torrence, 2001). Over half of the respondents indicated that they were "*very unlikely"* to intervene if a child was using a classroom material for pretend play, however less than a quarter would intentionally provide pretend-play materials such as puppets or dolls (Torrence, 2001, p. 10). Overall, the study revealed very clear mixed feelings regarding pretend play and it was identified that further research in the area is needed, particularly to compare "strict" and "play-modified" programs (Torrence, 2001, p. 11). Soundy (2012) investigated imaginary play in seven American toddler and preschool Montessori classrooms through a project carried out over a period of 5 months. The purpose of the project and article was to offer a foundation of information in order to support the establishment of a position statement on imaginary play among the early years (Soundy, 2012). Data collected included audio-recordings and detailed notes of observed pretend play episodes among children during 90-minute work periods (Soundy, 2012). The play scenes observed demonstrated that imaginary talk and play would often take place 15 minutes into a work period and would last from a few minutes to 30 or more minutes (Soundy, 2012).

One play episode described in the article was of a small group of children portraying a veterinary office where injured birds were cared for. The children discussed when it was ideal to release the birds and if additional care might be required (Soundy, 2012). The author of the article stated, “The previous play scene depicting the veterinary office contained a degree of social responsibility that was far more advanced than those that typically occur in teacher-directed thematic play in more traditional settings” (Soundy, 2012, p. 32). This suggests that allowing such spontaneous imaginative play in a Montessori environment may provide even more advanced social development opportunities than would be otherwise possible. In reference to the children during the play scenes, Soundy (2012) continued to state, “The content of their fantasy enactments is characterized by well-developed sensitivities toward each other and high levels of creativity, originality, and constructive problem solving” (p. 32). Therefore, it is possible that the spontaneous imaginary play that occurs naturally in the Montessori environment, even without intentional pretend-play materials available, enriches the social-emotional development of the children who participate.

A 2010 study conducted at Montessori school in the U.S. aimed to also investigate spontaneous imaginary play in a Montessori classroom, specifically to identify what occurs during play and how it supports in children’s development (Soundy, 2010). Three play episodes in a pre-school classroom, of three different children and using different materials, were observed and analyzed. The results suggested that imaginary play “occurs as a social activity embedded within interactions with friends” (Soundy, 2010). Additionally, Soundy (2010) states:

> In particular, as children depict imaginary worlds while dialoguing with the materials, they practice interpersonal cooperation and role-taking skills. Although superheroes and pop stars were not invited into this Montessori school, the children found surrogates to express their feelings and needs, and they looked to their classmates in these little scenarios for an endorsement of their ideas. (p. 23)

In one play scenario, two children ages 3 and 4 used the Russian nesting dolls, a sensorial material meant to be lined up in sequence from shortest to tallest. The children appointed each doll as a family member, and one of them eventually carried on with the scene and engaged in a dialogue between the dolls representing sisters (Soundy, 2010). In response to the observed scene, the author stated, "[T]he availability of Russian nesting dolls opened a path for understanding emotions and family relationships" (Soundy, 2010, p. 23). It is relevant to note that in the scenarios outlined in the study, the teachers did not recognize the pretend play that occurred, nor did they participate or stop it. Instead, the children simply had the freedom to follow their instincts (Soundy, 2010). The author of the article closed with the statement:

> If Montessori teachers work together to preserve the integrity of the Montessori model, they too can protect the right of children to play, and use their imaginations on their journey toward becoming care and peaceful citizens, at any age along the way. (Soundy, 2010, p. 24)

Child-Centred Play Therapy as an Intervention

Apart from providing diverse opportunities for social and emotional development in households, communities, and schools, children and youth may benefit from therapeutic

interventions from a mental health professional. One form of therapy known to be successful among children and youth with challenges at home, school, or in their community, is play therapy (Canadian Association for Play Therapy, 2014). Play therapy is described as "the systematic use of a theoretical model to establish an interpersonal process wherein trained play therapists use the therapeutic powers of play to help clients prevent or resolve psychosocial difficulties and achieve optimal growth and development" (Association for Play Therapy, 1997, p. 7). Much like how an adult might go to a therapist to 'talk out' their issues, a child might see a play therapist 'play out' their emotions and experiences using toys and objects (Canadian Association for Play Therapy, 2014, para. 4). Through play, children can communicate their feelings and ideas at their developmental level, and because play often involves elements of pretend and storytelling, there is distance between the child and their problem creating a sense of psychological safety (Association for Play Therapy, n.d.)

Much like many other approaches of psychotherapy, play therapy comes in many forms. One type of play therapy is Child-Centred Play Therapy, a non-directive approach based on Carl Rogers' person-centred counselling approach (Blanco & Dee, 2011). It was Virginia Axline, one of Carl Rogers' students, who was first known to combine play with the non-directive philosophy in her therapeutic work with children (Blanco & Dee, 2011). According to Blanco & Dee (2011), Virginia Axline established eight principles as the basic guidelines for nondirective play therapy:

> These principles are the establishment of a caring relationship between the therapist and the child; full acceptance of the child for who he or she is; creation of a free atmosphere

> in which the child feels capable of expressing a range of emotions; recognition and reflection of the child's feelings; respect for the child's ability to internally solve difficulties and provision of opportunities to establish responsibility; allowance of the child's leadership in play sessions; understanding of gradual process of therapeutic change; and, finally, provision of therapeutic boundaries only when necessary. (p. 235).

Other forms of play therapy include directive approaches such as Cognitive-Behavioural Play Therapy, Release Play Therapy, Sandtray and Sandplay Therapies, Theraplay, and Filial Therapy (VanFleet et al., 2010). Regardless of what specific approach one chooses to guide their intervention with a child, it is the relationship and attunement with the child's needs and emotions that should be the foundation (VanFleet et al., 2010). Furthermore, play acts as the child's language, offering the therapist a pathway to their world. When considering this the idea of meeting the child where they are at, one can say that CCPT and the Montessori philosophy are compatible in their foundational values.

According to VanFleet et al. (2010), at the heart of CCPT is the belief that "*the child leads the way"* (p. 15). Similarly, a foundational tenet of the Montessori philosophy is to "*follow the child."* In many ways, CCPT and the Montessori approach are similar, particularly in special roles of the environment, the materials, the adult, and the child. The Montessori approach is well-known for its "prepared environment", which is carefully designed to meet the developmental needs of the child (Gettman, 1987, p. 13). One important aspect of this prepared environment is the child-sized furniture, such as tables, chairs, and shelves, that are easily

accessed and used by the children. Similarly, in CCPT, child-sized furniture is also often included, as it sends a message that it is the child's needs at the focus (Van Fleet et al., 2010).

The materials in both the Montessori classroom and a CCPT playroom also play an important role in the child's development. In the Montessori classroom, the carefully designed and crafted Montessori materials are organized by subject on shelves in specific areas of the room: sensorial area, mathematics area, language area, cultural arts area, and in age 3-6 classrooms, the practical life area (Gettman, 1987). The materials are also expected to be in a specific place on the shelves to create order and consistency (Gettman, 1987). In CCPT, the materials are the toys, which are also grouped by category: family and nurturance, communication, aggression, mastery, and creative expression (Van Fleet et al., 2010). Much like in the Montessori classroom, the toys are also meant to be placed in their own special locations in the room, also to create consistency, which offers feelings of safety and comfort (Van Fleet et al., 2010).

The adult's role in the Montessori classroom is threefold: the caretaker, the facilitator, and the observer (Gettman, 1987). As the caretaker, the teacher cares for and manages the work environment and the materials. As the facilitator, the teacher facilitates the child activities with the materials, and as the observer, the teacher carefully watches how the child moves through the classroom and he develops (Gettman, 1987). In the Montessori philosophy, there is a deep belief that the teacher should not overpower the child, but rather prepare the environment so that the child can develop naturally (Gettman, 1987). In CCPT, the therapist takes on a similar role in that they allow the child to follow their instincts. According to Landreth (2012), "The therapist

allows the child to lead the way and is content to follow. What is important is not the therapist's wisdom, but the wisdom of the child; not the child's direction, but the child's direction; not the therapist's solution, but the child's creativity. Therefore, the child is accepted for all that she is in order to free the child to be unique" (p. 110). The child, therefore, plays a significant role in their own self-construction and development, a belief that is also at the heart of the Montessori philosophy.

What is most significant of all the similarities between the Montessori philosophy and CCPT is the importance placed on the child's inner capacity, which is uncovered through discovery. It is through the freedom to choose activities that allows for this discovery, which happens in both the Montessori classroom and the CCPT playroom. According to Montessori's beliefs, the child is ultimately guided by their "inner guide", which will naturally lead the child to growth and development if it is paired with the prepared environment (Follow the Child Montessori School Inc., n.d.). Comparatively, according to Van Fleet et al. (2010), "In CCPT, there is absolute belief in children's ability to solve their own problems through play, given an appropriate play therapy atmosphere" (p. 30).

Research has shown that play therapy in school settings have resulted in positive outcomes. A meta-analysis was conducted to examine 23 studies aimed to investigate the effectiveness of CCPT in elementary schools (Ray et al., 2015). Results demonstrated that among all 23 studies, there was improvement in the participating students' behaviour. Ray et al. (2015), stated that the students improved problematic behaviour "at a statistically significant level compared with their peers who received no intervention" (p. 115). Another study aimed to

investigate the effectiveness of CCPT for grade 1 students who were academically at-risk for various reasons (Blanco & Ray, 2011). After 8 weeks of 30-minute play therapy sessions, the student participants in the experimental group showed a statistically significant improvement on a standardized academic achievement test compared to students in the control group (Blanco & Ray, 2011). Considering the positive effect on student performance, both in the areas of behaviour and academics, play therapy has been identified as an effective intervention for all levels of need. In the journal article, *Treating the Tiers: Play Therapy Responds to Intervention in the Schools*, Winburn et al. (2017) examine play therapy as a behavioural intervention for K-12 students. The recommended model is discussed using the Response to Intervention (RtI) model, which is a model originally developed to provide intervention for children unable to meet classroom expectations (Winburn et al., 2017). According to Winburn et al. (2017), "RtI is a process of implementing high quality instructional practices that are based on students' needs, monitoring progress, and then adjusting instruction based upon the data collected from the students' responses" (p. 4). The RtI model provides interventions in a three-tier system: Tier 1 acts as the basis of instruction, where all students are provided with the core curriculum; Tier 2 is aimed to providing "differentiated instruction" for students who are require additional behavioural and academic support; Tier 3 is for students requiring the highest level of intervention, which is usually provided by school staff other than the classroom teacher (Winburn et al., 2017).

Winburn et al. (2017) recommend that at the Tier 2 level, group play therapy is offered to students displaying challenging behaviours, such as aggressive or disruptive behaviours, stating, "In small groups, students can work through behaviour and emotional issues while increasing

positive peer relationships" (p. 5). Furthermore, group-centred play therapy provides children with opportunities to "work through challenges in a positive, supportive environment" (Winburn et al., 2017, p. 5). At the Tier 3 level, it is recommended that students receive play therapy interventions at an individual basis, where the goals of therapy is based on each students' behaviour plan (Winburn et al., 2017). Overall, the article offers a framework for play therapy interventions that is in line with what many schools already have in place through the RtI model.

Summary

Play, in its many forms, serves a function in children's lives. Research offers evidence that unstructured and pretend play provides opportunities for children to develop socially and emotionally. Through play, children learn to cooperate, communicate, and problem solve, which are important social skills used for an entire lifetime. Additionally, play promotes a healthy wellbeing and emotional regulation. Considering the many benefits of play, many Montessori settings have yet to fully accept play as a part of their programs. As a result, many Montessorians are left to wrestle with preserving the Montessori approach while also acknowledging and promoting the developmental benefits of play. It is evident, however, that children naturally find a way to incorporate pretend play in Montessori classrooms, which we now know results in different responses from teachers. Contemporary Montessori teachers who are more willing to consider current research are more likely to include play in their programs, either intentionally by providing play materials, or by allowing natural pretend play scenes to occur without intervention.

In addition to the many benefits of unstructured play, play therapy utilizes play with specific intention to provide support for children experiencing challenges with behaviour, emotional regulation, and social difficulties. In a school setting, play therapy is one approach that research has shown can be an effective form of intervention, both in the Tier 2 and Tier 3 levels. Although traditionally, Montessori classrooms steer away from including play as part of the learning environment, it is interesting to note the many similarities between the Montessori philosophy and Child Centred Play Therapy. The parallels of the foundational beliefs of putting the child's needs at the centre is what makes the two philosophies compatible. Whether or not unstructured and pretend play can be intentionally incorporated in Montessori classrooms, play therapy as a method of filling the gap for children with social-emotional challenges may be an effective option. In Chapter 3 I will offer a summary of findings as well as recommendations for educators and school counsellors on how to incorporate unstructured play and play therapy interventions in Montessori schools.

Chapter 3: Summary, Recommendations and Conclusions

Summary of Findings

As discussed in Chapter 2, there is a variety of research that demonstrates the benefits of unstructured play. Specifically, unstructured free play offers children opportunities to develop social-emotional skills and to improve overall wellbeing and behaviour. In Montessori schools, where unstructured play is not traditionally prioritized, children are often observed finding ways to incorporate pretend play in their work with the Montessori materials, which is either permitted or redirected by teachers. Some contemporary Montessori educators are more open to including unstructured play in their programs, providing intentional play spaces and materials, or by allowing play to occur without stopping or redirecting children back to their work. However, regardless of where and how children play, there is evidence that Child Centred Play Therapy (CCPT) is an effective intervention for children with social-emotional difficulties who may require support outside the classroom. When comparing the foundational beliefs of CCPT and the Montessori philosophy, it seems there are several parallels. With this considered, it appears plausible that CCPT could be a suitable approach to be offered to students with social-emotional challenges in Montessori schools.

Implications

There is significant evidence showing that unstructured play has a role to play in the development and maintenance of children's social-emotional skills and overall wellbeing (Lee et al., 2020). When we consider the recent statistics revealing that 63% of Canadian millennials can be characterized as "High Risk" for mental illness, as well as the fact that the average amount of

screen time for children and youth is 3 hours per day, it seems reasonable to conclude that many young people are simply not getting enough unstructured playtime (Ispos, 2017; Statistics Canada, 2018). It is also important to note that extracurricular activities, in addition to children's school day, reduce the opportunities for unstructured play. As a result, it is probable that this reduction of playtime during the early years of development is having a negative effect on children's mental health and wellbeing. Therefore, this research has significant implications for all those who have control over how children and youth spend their time.

Parents and guardians are ultimately responsible for what children and youth participate in daily. It is up to working parents and guardians to decide who cares for their young children while they are at work, whether they attend a daycare center, or are looked after in a home setting. Other considerations include whether the children spend time with other children or if they are cared for alone. When thinking about children's access to unstructured play, these factors are significant in determining the quality of play and whether interactions with others are possible. Overall, it is in the caregivers' hands to decide how much time children spend outdoors, indoors, or in front of a screen. With the understanding that free play, and particularly pretend play, has a positive impact on children's development, caregivers may choose to prioritize time for these types of activities, whether it occurs in outdoor or indoor environments. For school-aged children, parents and guardians may also decide to limit organized extracurricular activities in order to ensure that free time is available for children to engage in unstructured play. If parents and guardians can choose the schools their children attend, being informed about schools' philosophy about unstructured free play would be helpful in determining how much time is allotted for unstructured play during the school day.

As discussed in Chapter 1, there have been several recommendations for education institutions on how to incorporate play in their programs. For example, the Canadian Public Health Association (CPHA) has stated that children have a right to unstructured play, and that "actions are necessary to reduce the barriers limiting opportunities for unstructured play at school and in the community" (CPHA, 2018, p. 3). For pre-school aged children, the BC Early Learning Framework outlines play as an essential part of children's development and wellbeing, which is why it suggests that early childhood teachers provide opportunities for children to learn through play (British Columbia Ministry of Health & British Columbia Ministry of Children and Family Development, 2009). Therefore, in accordance with the play research, BC pre-schools and primary schools are encouraged to ensure that unstructured play is protected and promoted. Considering the research showing the benefits of play, in addition to the province-wide promotion of play in early learning programs, it is necessary for Montessori schools to evaluate how unstructured play can be purposefully incorporated into their programs. Whether the decision-making happens at an administrative level or at a classroom level, the importance of play cannot be ignored. This means that Montessori school leaders must be informed about the ways in which play supports children's development and wellbeing, and that perhaps these benefits outweigh Montessori's traditional views of play.

Individual teachers have a great deal of power in providing opportunities for play at school. As discussed in the Literature Review, there are many Montessori teachers today who have come to recognize that pretend play with classroom materials is quite a natural occurrence for young children. Most teachers who participated in one study indicated that they were very unlikely to intervene if a child was using a classroom material for pretend play (Torrence, 2001).

This shows that today's teachers are likely more aware of children's need to play. On the other hand, however, it is necessary to point out that Montessori educators who are much more attached to traditional beliefs around play are likely to discourage such activities in the classroom. As a Montessori-trained educator myself, I can acknowledge the importance of protecting the Montessori environment to support the deep concentration of children at work. At the same time, the impact of play on children's social-emotional development is too great to ignore. Thus, perhaps a hybrid approach that values both philosophies can exist, one that creates time and space for both work and play.

Like the varying learning needs that children may have social-emotional needs will also vary from student to student. As a result, additional support with social interactions, emotional regulation, or overall mental health and well-being, are often required by students at all levels. In addition to providing individual and group counselling services, school counsellors play a significant role in supporting teachers with their students' needs at the classroom level. Knowing the impact that play has on children's social-emotional development, as well as the powerful ways play can be used as a medium for children to communicate their thoughts and experiences, school counsellors are able to utilize play in meaningful ways. Therefore, based on the research discussed, incorporating play therapy in school counselling programs, particularly in Montessori school settings, can have significant positive effects on students' wellbeing, relationships, and academic performance.

Recommendations

Children can be seen engaging in play in all types of environments, including in the home, out in the community, and at school. With the understanding of the Canadian Public Health Association's recognition of unstructured play as a child's right, as well as the research demonstrating its significant impact on development and wellbeing, it is important to consider the ways it can fostered in all settings. For the purpose of this paper, I will focus on recommendations for parents and caregivers, teachers, and school counsellors.

Parents and caregivers.

Parents and caregivers can easily encourage unstructured free play at home, which requires very little in terms of supplies or materials. According to Lillard (2013), "free play" is defined as the following:

> Free play includes object play, pretend and sociodramatic play, and rough-and-tumble play, in all of which children engage without close adult oversight or control. Free play is fun, flexible, active, and voluntary (i.e. Without extrinsic reward). Free play also often includes elements of make-believe and also often involves peers. (p. 157).

The key for parents and caregivers in this description is that free play does not involve adult control. Therefore, providing opportunities for children to engage in free play implies that adults remove their ideas and intentions from the activity, and simply allow the children to follow their interest, of course with safety boundaries in place. It is important to note that each family will have their own rules and expectations around what is appropriate in their home, including whether rough-and-tumble play is acceptable indoors or outdoors, or whether loud or messy play

is acceptable. Rules and expectations can co-exist with children's freedom to engage in free choice, which is a popular concept in the Montessori philosophy, often referred to as "freedom within limits" (Schmidt, 2015, para. 1). Parents and caregivers must therefore be aware of their children's developmental abilities and communicate what freedoms and limits they have at home, such as requiring an adult to supervise them outdoors, cleaning up art supplies and any mess that is left after a project is complete, etc. When these boundaries are clearly communicated and reinforced, children will be better able to follow their interests and engage in free play activities independently.

According to Caro (2012), adults can become a "learning ally" by supporting children in child-led play. In order to do this, she offers parents and guardians a few guidelines. Caro (2012) states, "It is our job as a 'learning ally' to -

- offer a safe learning environment
- let them follow their own play urges
- support them without interrupting
- watch and wait as they discover, invent and explore" (para. 7).

Schools.

In the school setting, a greater amount of preparation and structure may be necessary to ensure that play is incorporated consistently and appropriately. The 'appropriateness' of play is particularly important to consider when trying to maintain the foundational values of the Montessori method in the classroom. Recommendations on how promote play in Montessori schools will be outlined using the Response to Intervention model (RtI), the three-tiered system

described in Chapter 2 (Winburn et al., 2017). With social-emotional development as the focus, tier 2 and tier 3 interventions will be those meant to be delivered by the school counsellor or other school staff with appropriate training.

Tier 1: Whole school level and classroom level.

Recess times are typically when children can engage in unstructured free play outdoors. In order to encourage a variety of play for children, schools can offer movable play equipment in addition to traditional playground equipment. Some ideas for movable play equipment include:

- old tires
- swim noodles
- hula hoops
- stacking crates
- large foam shapes
- cardboard boxes
- pipes
- wooden planks or blocks
- twigs or sticks
- sand
- different sized containers or buckets

There are also commercial companies that create and distribute movable play equipment that are weather-proof and durable. This may be a good option for schools with a budget for new play equipment, however there are many alternatives that are inexpensive and easily accessible

through hardware stores or even recycling bins. At an administrative level, school leaders can ensure that school play spaces have materials available for students to be used communally. Without providing any directives for the children on how to use the loose parts, apart from safety rules, the children are likely to engage in a variety of types of play, including construction, pretend play, sensory play, and so on.

Apart from outdoor recess times, classroom teachers can encourage play among their students inside the classroom as well, at appropriate times of course. Regardless of pedagogy, teachers of all grade levels have an important task of maintaining calm and quiet during times for concentration and focus, so proper planning for indoor play is necessary. This task may seem specifically challenging for Montessori teachers since uninterrupted work periods are embedded in the daily schedule. Additionally, children have the freedom to choose activities which means several different activities and lessons happen simultaneously. Considering this element of freedom, it is important to have clear expectations and boundaries regarding play in an early years or primary Montessori classroom. Torrence (2001) offers an important recommendation for Montessori teachers:

Montessorians, particularly those conducting all-day classes for preschoolers, should include play props in their classrooms or other areas available to children, so that children have the option to use them freely and regularly. Each teacher will best be able to decide how to facilitate this in his or her own environment. This is not suggested as a means of weakening the beauty, purpose, and order of the well-prepared Montessori environment, but rather as a means of enhancing its strength by sanctioning and providing for what is already going on. (p. 11).

In line with what Torrence recommends, a designated play area with carefully selected toys and materials kept on shelves is advisable, much like the Montessori materials in the other areas of the room. Gordon Biddle et al. (2014) recommends the following play materials and equipment for an early childhood preschool classroom:

- Dramatic Play: child-sized house appliances (kitchen equipment, ironing board, iron), dolls, doll clothes, dollhouse and furniture, cleaning supplies, dress-up clothing and costumes.
- Blocks: blocks, block accessories (people, cars, safety signs, etc.), small coloured blocks, sturdy wooden vehicles
- Art: adjustable easels, brushes, paint, painting smocks, crayons, clay, scissors, glue, paper, drying rack for paintings, miscellaneous supplies (fabric scraps, rickrack, yarn, ribbon, buttons, natural materials)
- Manipulative/Games: hand puppets, puzzles, board games, beads and strings, sewing cards, LEGO bricks, Bristle Blocks, tinkertoys, manipulative materials (p. 260-261).
- Science/Discovery: magnets, pattern blocks, sandbox, water table, workbench with equipment

The goal would be to have a few options available in each category, which can be rotated out with other materials on a regular basis. With this area of the classroom being available throughout the day, it would be advisable to limit the number of children in the area at one time. In a Montessori classroom, where children are taught early on how to take turns and respect each other's workspaces, this boundary would likely not be an issue for most children. Each

individual teacher can determine what would be a suitable number of students to access the area at one time, depending on the size of the space. Work mats or rugs, which would typically be used with other Montessori materials in the classroom, could also be expected to be used in the play area as well. This would help to maintain consistency of expectations in the classroom.

The nature of open-ended play may increase the likelihood of elevated noise in the classroom, so a lesson on appropriate volume in the play area would be advised. A discussion about sharing the classroom and respecting the other students concentrating on their work would encourage the children to think about how their actions affect others. A few basic rules for using the play area are as follows:

1. Only a certain number of children are permitted in the play area at once.
2. Play materials and toys must remain in the play area.
3. Play materials and toys must be used safely and respectfully.
4. Materials must be returned to their place on the shelf after being used.

Of course, young children will need redirection and multiple lessons on how to follow these basic rules, but that is expected in all areas of the Montessori classroom. The main difference between these materials and the Montessori materials is that they may be used in whatever way the child would like to use them, given that the material is used safely and respectfully. This open-ended and non-directive element provides children with the opportunity to use their imaginations and to fulfill their need to play.

In consideration of the varying ways Montessori classrooms may be structured, both in schedules and environment, I offer a few different options of how this play area can be accessed:

Option 1: Play area and materials available all day.

In this option, the play area and materials can be accessed by students at any point during the day, much like how the other areas and materials are available. This suggests that play has equal value with work, therefore balancing time between the different activities will be a skill learned early on.

Option 2: Play area and materials available during specific times.

In this option, the play area and materials are made available at scheduled times. This option may be more appropriate for certain groups of children, particularly those who require more support with focus and attention. Having all day access to an open-ended play area may be too difficult for some children to manage. However, it would be important to carefully consider the reason why a child finds it difficult to manage free play activities. It could be that the child is not ready for cooperative play and would be more successful in solitary or parallel play. Getting to know each child and their abilities would be necessary when introducing a play area, for both all-day access and scheduled access.

To help regulate the areas' use, a visual sign can be placed by the area to signal to children that it is 'closed' or 'open'. Deciding on when to make the area available may depend on the classroom's schedule. One suggestion is to have the play area open during the hour before lunchtime and before the end of the day. This would help to maintain the first portions of the morning and afternoon as designated work periods. Having scheduled play times, much like recess times, sends the message to children that rest time and play time is earned, meaning that focused work time is the priority.

Option 3: Play materials allowed in all areas of the classroom.

In this option, the play materials and toys can be taken from their designated shelves and brought to any area of the classroom. This means that they can be used and accessed just like the Montessori materials in the class. By allowing children to use non-Montessori materials in an open-ended way near children working with Montessori materials, teachers would need to set clear rules and boundaries in order to maintain a peaceful environment. Some suggested rules are:

1. Play materials and toys must remain within student's designated play space (identified by using a play mat).
2. Play materials and toys must be used safely and respectfully.
3. Dramatic play must take place in a specific area away from others (to avoid too much distraction).
4. Materials must be returned to their place on the shelf after being used.

Dramatic play is recommended to take place in a specific area because this type of play often involves higher levels of movement, interaction, and noise. By designating a 'dramatic play area', students not involved are less likely to get distracted. Other types of play, such as constructive play and exploratory play, is more easily restricted to a play mat, whereas dramatic play usually requires children to be moving around and acting out characters.

There are pros and cons with every option. It is ultimately up to each individual teacher to determine which approach would best suit their classroom environment, schedule, and group of students. Overall, what matters most is acknowledging that play can have a place in the

Montessori classroom and that by offering intentional opportunities for play is in fact 'following the child'.

Tier 2: Targeted group play.

Students requiring support at the Tier 2 level are those who need intervention beyond what can be offered at the classroom level. In terms of social-emotional interventions at this level, the school counsellor or another school staff may facilitate a targeted group. Group play therapy or play-based social groups would provide students with social-emotional challenges to use play as a basis for learning skills such as emotional regulation, communication, empathy, and cooperation (Winburn et al., 2017). Additionally, offering unstructured and non-directive play to a small group can support children to build peer relationships in an organic way. However, what differs from recess and other unstructured play times with a targeted group is the careful guidance and involvement of a trained teacher-facilitator or school counsellor. Apart from building a positive and trusting relationship with the children, the group leader must also ensure that the group takes place in an appropriate environment and creates some sort of framework to guide the group's sessions.

Child-centred play therapy: Leading a group.

There are various approaches to leading group therapy in a group setting, however to continue to be in line with the unstructured and open-ended theme, what I recommend is Child-Centred Group Play Therapy. This approach follows the tenets of Child-Centred Play Therapy, but is simply expanded to a group format; therefore, its foundation is based on belief that "*the child leads the way"* (VanFleet et al., 2010, p. 15). Furthermore, Landreth (2012) states,

"Children are quite capable of appropriately directing their own growth, and they are granted freedom in the play therapy relationship to be themselves in the process of playing out feelings and experiences" (p. 53). Considering this belief, group play provides the opportunity for children to learn and grow through the positive relationships established with the group leader and the other group members (Shen, 2010). The relationships, then, are what drives the growth and change, and so it is vital that the group leader models this positive relationship building through their attitude, beliefs, and presence in the group. Shen (2010) suggests that a group leader must:

> 1) Develop a warm and friendly relationship with members, 2) accept children as they are, 3) establish a sense of permissiveness, 4) recognize and reflect back children's feelings, 5) maintain a deep respect for children's ability to solve their problems, 6) follow the way children lead, 7) appreciate the gradual change of the healing process rather than attempt to hurry it along, and 8) only set up limits to therapeutically help children accept responsibility in the relationship. (p. 245).

Environment for group play.

The environment where the group sessions take place largely depends on what space is available. In my own experience as a school counsellor at an urban independent Montessori school, group spaces are quite limited. Ideally, I would have access to an indoor and outdoor space, supplied with materials and equipment listed in Tier 1 (for outdoor recess play and indoor classroom play). Having a variety of equipment for open-ended play would provide students with opportunities to follow their interests and interact with one another in their play. However, if

equipment is limited, open play spaces in nature or on playgrounds can also be suitable for group play therapy. In these situations, children find ways to play with one another using their imaginations, turning nature objects into pretend objects, or initiating child-led games. I have led several child-centered groups at my school which took place on the school's playground spaces, using only the playground equipment. Even without a variety of additional open-ended play materials, I found the groups to be quite successful.

Session structure.

Below is a recommended structure of a group play therapy program:

Session 1: The initial session's focus is introducing one another and creating group rules together. The remainder of the time would be designated for free play. This would allow the group leader to observe the children and make note of behaviours and group dynamics.

Agenda:

- Opening circle - Initial greeting and introductions (each participant sharing something about themselves)
- Brainstorm of group rules
- Free play
- Closing circle

Sessions 2 – 7: These sessions are focused on child-centred play with the group leader observing, reflecting thoughts and feelings, asking questions, and intervening when necessary. Reflecting thoughts and feelings may sound like: "Jamie, you look sad because you want to join the game. I

wonder what you can do?" The main point here is that I am not offering a solution, but rather stating what I observe and offering a question that may spark problem solving. Intervening and offering directives may be necessary if children's behaviours are escalating, causing some feelings of unsafety. Some directives may include recommendations for calming/regulating strategies or problem-solving strategies.

Agenda:

- Opening circle - Initial greeting and check-in: To begin each session, the leader greets the students and invites them to check-in by sharing how they are feeling and a piece of news. A feelings check-in can be done in different ways, such as simply stating how you are feeling or using a type of weather or colour to representing how you are feeling. For example, one might say, "I feel sunny today! This morning, I found out we are going to be getting a new puppy!"
- Introduction of session's theme of the day (optional): It may be helpful to have some structure to follow for some groups. For example, if there are specific skills or competencies that the school hopes students will develop, they can be incorporated as a guide for the children's free play. At my school, the acronym ROCKS is used as a positive behaviour framework, which stands for Respect, Open-mindedness, Communication, Kindness, and Success. Therefore, at this point in the session, a theme can be introduced and briefly discussed. An example of a possible script might be: "Today's theme is 'open-mindedness'. What are some ways we can be open-minded?" After the short discussion, the leader can then encourage the students to practise open-

mindedness during their free play time and to notice how others display open-mindedness.

- Closing circle: At this point, the group leader offers the students an opportunity to acknowledge one another or themselves for showing examples of the session's theme of the day. It is important for the group leader to model this by acknowledging students as well. This might sound like, "I acknowledge _____ for showing open-mindedness when he joined the tag game today. I noticed he doesn't usually like to play tag, but today he gave it a try!"

Final Session: The final session is meant to be a celebration. At this point, students typically would have built positive relationships with one another and with the group leader. A positive way to end the time together is by celebrating what each student offered to the group. This can be done in a variety of creative ways. One way might be by offering each child with a piece of poster paper with their name on it. Each child then goes around to each paper and writes a positive message or word such as, "You are kind." If the children are younger or not yet able to write, a picture of symbol can be drawn instead. This exercise offers a positive close to the program with a tangible item that each child can take away with them. Depending on the school's rules, you can also offer a small treat that can be eaten together. Sharing food often symbolizes celebration in many cultures and practices.

Agenda:

- Opening circle – initial greeting and check-in
- Special activity & treat

- Free play
- Closing circle

Communication and reporting.

At the end of the sessions, it is recommended that the classroom teachers and parents are provided with a short summary and report of what was covered in the group sessions. Of course, because of confidentiality, specific things shared in the group would not be reported to parents and teachers. Instead, observations of behaviour, the student's growth, and recommendations for future growth would be offered. By involving the classroom teachers and parents, there is a greater chance that the students will receive ongoing support outside the group, through the recommendations offered in the report. The hope is that students will continue to develop and grow in many other contexts and through the creation of other relationships in their lives.

Tier 3: Individual play therapy.

Intervention provided at the Tier 3 level is for students who require a higher level of support beyond what is offered in the classroom or in small groups (Winburn et al., 2017). For students with more extensive social-emotional challenges, they would typically be referred first to a group and would then be identified by the group leader. Tier 3 support in this suggested framework would be individual Child-Centred Play Therapy facilitated by the school counsellor. In order to effectively use the CCPT approach, the counsellor must learn the basic principles and techniques through additional reading or specialized play therapy training. Regardless of route one chooses, it is vital for the counsellor to be aware of the *"Eight Basic Principles"* of the CCPT therapeutic relationship, first outlined by Axline (1969, as cited in Landreth, 2012, p. 80):

1. The therapist is genuinely interested in the child and develops a warm, caring relationship.
2. The therapist experiences unqualified acceptance of the child and does not wish that the child were different in some way.
3. The therapist creates a feeling of safety and permissiveness in the relationship, so the child feels free to explore and express herself completely.
4. The therapist is always sensitive to the child's feelings and gently reflects those feelings in such a manner that the child develops self-understanding.
5. The therapist believes deeply in the child's capacity to act responsibly, unwaveringly respects the child's ability to solve personal problems, and allows the child to do so.
6. The therapist trusts the child's inner direction, allows the child to lead in all areas of the relationship, and resists any urge to direct the child's play or conversation.
7. The therapist appreciates the gradual nature of the therapeutic process and does not attempt to hurry the process.
8. The therapist establishes only those therapeutic limits necessary to anchor the session to reality and which help the child accept personal and appropriate relationship responsibility.

The therapist's presence and relationship with the child is what offers growth. Therefore, according to this approach, "The relationship is the therapy; it is not the preparation for therapy or behavioural change" (Landreth, 2012, p. 82). Specific ways of being and interacting with the

child requires practice and development. Below are some recommended books and training programs in CCPT:

Recommended play therapy books.

- VanFleet, R., Sywulak, A., & Sniscak, C. C. (2010) *Child-centred play therapy.* The Guilford Press.

Drewes, A. A., & Schaefer, C. E. (2010). *School-based play therapy* (2nd ed.). John Wiley & Sons, Inc.

- Landreth, G. L. (2012). *Play therapy: The art of the relationship*. ProQuest Ebook Central https://ebookcentral.proquest.com

Recommended play therapy training.

- Canadian Association of Play Therapy (CAPT) - Foundation Play Therapy Training
- Rocky Mountain Play Therapy Institute
- Grove Centre – Intensive Child-Centered Play Therapy Training
- Justice Institute of British Columbia – Expressive Play Therapy Training
- Synergetic Play Therapy Institute

Conclusions

One can simply observe a young child in his or her environment to see play naturally unfold. Opportunities for this basic human tendency to create, explore, imagine, and discover is needed more than ever before. Play comes many forms and when given the chance, children naturally engage in play, often requiring very little to spark their imaginations. A stick can

become a magic wand, a telescope, a snake, or it can simply be a stick. Through play, a child can imagine herself as a teacher, a doctor, an astronaut, or simply someone's friend. Play acts as a medium through which children communicate their inner worlds with others, offering adults a glimpse into their experiences, thoughts, and feelings. When children are given leadership in their play, they fulfill an inner need that often cannot be communicated with words. Further, play opens possibilities that would otherwise not be an option. Landreth (2012) states:

> Play is a voluntary, intrinsically motivated, child-directed activity involving flexibility of choice in determining how an item is used. No extrinsic goal exists. The process of play is usually enjoyed, and the end product is less important. Play involves the child's physical, mental, and emotional self in creative expression and can involve social interaction. Thus when the child plays, one can say that the *total* child is present. (p. 11).

Currently, we are in a time when society is overcome with technology, busy schedules, and high levels of stress, all of which are factors that affect children as much as they affect adults. No matter the environment, whether at school or at home, children have a thirst to be playful. For those of us who have the fortune to be a part of children's learning and development, play is a gift. It is my hope that parents, educators, administrators, and school counsellors, recognize the impact of play and its power to help children heal, learn, and grow.

References

American Montessori Society. (2021). 5 Core Components of Montessori Education. Retrieved from https://amshq.org/About-Montessori/What-Is-Montessori/Core-Components-of-Montessori

American Montessori Society. (2021). Maria Montessori Quotes. Retrieved from https://amshq.org/About-Montessori/History-of-Montessori/Who-Was-Maria-Montessori/Maria-Montessori-Quotes

American Montessori Society. (2021). Who Was Maria Montessori? Retrieved from https://amshq.org/About-Montessori/History-of-Montessori/Who-Was-Maria Montessori

Association for Play Therapy. (n.d.). *Play therapy makes a difference.* The Association for Play Therapy. https://www.a4pt.org/page/PTMakesADifference/Play-Therapy-Makes-a-Difference.htm

Association for Play Therapy. (1997). A definition of play therapy. The Association for Play Therapy Newsletter, 16(1), 7.

British Columbia Ministry of Health, & British Columbia Ministry of Children and Family Development. (2009). Early Learning Framework, 1–48. Retrieved from http://www2.gov.bc.ca/gov/content/education-training/early-learning/teach/early-learning-framework

Blanco, P., & Ray, D. (2011). Play therapy in elementary Schools: A best practice for improving academic Achievement. *Journal of Counseling and Development*, *89*(2), 235–243. https://doi.org/10.1002/j.1556-6678.2011.tb00083.x

Bodrova, E. (2003). Vygotsky and Montessori: One Dream,Two Visions. *Montessori Life, 15*(1), 30–33.

Burdette, H. L., & Whitaker, R. C. (2005). Resurrecting Free Play in Young Children. *Archives of Pediatrics & Adolescent Medicine*, *159*(1), 46. https://doi.org/10.1001/archpedi.159.1.46

Canadian Association for Play Therapy. (2014, February 21). *About Play Therapy*. Canadian Association for Play Therapy. https://cacpt.com/

Canadian Public Health Association. (2019). *CHILDREN'S Unstructured Play*. Retrieved from https://www.cpha.ca/childrens-unstructured-play.

Caro, C. (2012, September 17). The adult role in child-led play – How to become a learning ally. *Nature Play.* http://www.nature-play.co.uk/blog/the-adult-role-in-child-led-play-how-to-become-a-learning-ally

Drewes, A. A., & Schaefer, C. E. (2010). *School-based play therapy* (2nd ed.). John Wiley & Sons, Inc.

Follow the Child Montessori School Inc. (n.d.). *Why montessori?* Follow the Child Montessori School. https://followthechild.org/montessori/

Gettman, D. (1987). *Basic montessori learning activities for under-fives.* St. Martin's Press.

Goldstein, T. R., & Lerner, M. D. (2018). Dramatic pretend play games uniquely improve emotional control in young children. *Developmental Science*, *21*(4), 1–14. https://doi.org/10.1111/desc.12603

Gordon Biddle, K. A., Garcia-Nevarez, A., Roundtree Henderson, W. J., & Valero-Kerrick, A. (2014). *Early childhood education: Becoming a professional.* SAGE Publications, Inc.

Hendron, R. (2016). Comparing the approaches of Montessori Education and Play Therapy. Retrieved from https://montessoricommons.cc/comparing-the-approaches-of-montessori-education-and-play-therapy/

Ispos. (2017, April). *Public Perspectives* [PowerPoint slides]. 3rd Annual Canadian Mental Health Check-up. Ispos. https://www.ipsos.com/sites/default/files/2017-08/IpsosPA_PublicPerspectives_CA_April%202017%20Mental%20Health.pdf

Krasnor, L. R., & Pepler, D. J. (1980). The study of children's play: Some suggested future directions. In K. Rubin (Ed.), Children's play (pp. 85– 95). San Francisco: Jossey-Bass.

Landreth, G. L. (2012). *Play therapy: The art of the relationship*. ProQuest Ebook Central https://ebookcentral.proquest.com

Lee, R. L. T., Lane, S. J., Tang, A. C. Y., Leung, C., Louie, L. H. T., Browne, G., & Chan, S. W. C. (2020). Effects of an unstructured free play and mindfulness intervention on wellbeing in kindergarten students. *International Journal of Environmental Research and Public Health*, *17*(15), 1–15. https://doi.org/10.3390/ijerph17155382

Lillard, A. S. (2013). Playful learning and Montessori education. *American Journal of Play*, *5*(2), 157–186. Retrieved from http://www.journalofplay.org/sites/www.journalofplay.org/files/pdf-articles/5-2-article-play-learning-and-montessori-education_0.pdf

Lillard, A. S., Lerner, M. D., Hopkins, E. J., Dore, R. A., Smith, E. D., & Palmquist, C. M. (2013). The impact of pretend play on children's development: A review of the evidence. *Psychological Bulletin*, *139*(1), 1–34. https://doi.org/10.1037/a0029321

Lillard, A. S., Heise, M. J., Richey, E. M., Tong, X., Hart, A., & Bray, P. M. (2017). Montessori preschool elevates and equalizes child outcomes: A longitudinal study. *Frontiers in Psychology*, *8*(OCT). https://doi.org/10.3389/fpsyg.2017.01783

Mooney, C. (2013). Theories of childhood: An introduction to Dewey, Montessori, Erikson, Piaget, and Vygotsky. St. Paul, MN: Redleaf Press.

Parmenter, M. A., Strath, S. J., Swartz, A. M., & Parker, S. J. (2005). Daily Physical Activity. *Medicine & Science in Sports & Exercise*, *37*(Supplement), S385–S386. https://doi.org/10.1249/00005768-200505001-01993

Ray, D. C., Armstrong, S. A., Balkin, R. S., & Jayne, K. M. (2015). Child-centered play therapy in the schools: Review and meta-analysis. *Psychology in the Schools*, *52*(2), 107–123. https://doi.org/10.1002/pits.21798

Rubin, K. H., Fein, G. G., & Vandenberg, B. (1983). Play. In E. Mavis Hetherington (Eds.), *Handbook of child psychology*: *Vol. 4. socialization, personality, and social development* (693–774). Wiley.

Schmidt, M. (2015, December 3). Freedom within limits of responsibility. *Montessori Rocks!* https://montessorirocks.org/freedom-within-limits-of-responsibility/

Shen, Y. (2010). Trauma-focused group play therapy in the schools. In Drewes, A. A., & Schaefer, C. E. (Eds.), *School-based play therapy* (2nd ed.) (pp. 237-255). John Wiley & Sons, Inc.

Slot, P. L., Mulder, H., Verhagen, J., & Leseman, P. P. M. (2017). Preschoolers' cognitive and emotional self-regulation in pretend play: Relations with executive functions and quality of play. *Infant and Child Development*, *26*(6), 1–22. https://doi.org/10.1002/icd.2038

Smith, P. K. *Children and Play: Understanding Children's Worlds*, John Wiley & Sons, Incorporated, 2009. ProQuest Ebook Central, https://ebookcentral.proquest.com/lib/cityuseattle/detail.action?docID=427984.

Smith, P. K., & Vollstedt, R. (1985). Defining play: an empirical study of the relationship between play, and various play criteria. Child Development , 56 , 1042– 1050.

Soundy, C. S. (2009). Young children's imaginative play: Is it valued in montessori classrooms? *Early Childhood Education Journal*. https://doi.org/10.1007/s10643-008-0282-z

Soundy, C. S. (2010). We had to be sneaky! *Montessori Life*. Retrieved from https://search-proquest-com.proxy.cityu.edu/docview/847147617/fulltextPDF/B208299671BB4C44PQ/1?accountid=1230

Soundy, C. S. (2012, Winter). Imaginary play in montessori classrooms: Considerations for a position statement. *Montessori Life, 24*, 28-35. https://proxy.cityu.edu/login?url=https://www-proquest.com.proxy.cityu.edu/magazines/imaginary-play-montessoriclassrooms/docview/1267666312/se-2?accountid=1230

Statistics Canada. (2008). Health Reports. *Government of Canada*, *8*(3), 1–53. Retrieved from http://www5.statcan.gc.ca/access_acces/archive.action?loc=/pub/82-003-s/2005000/pdf/9087-eng.pdf&archive=1

Statistics Canada. (2018). Health Fact Sheets. *Statistics Canada*, (82). Retrieved from www.statcan.gc.ca

Torrence, M. (2001). Montessori and Play: Theory vs. Practice. *Montessori Life - A Publication of the American Montessori Society*, *13*(3), 8–11.

University of Virginia College and Graduate School of Arts & Sciences. (2020). *Lillard*. https://psychology.as.virginia.edu/lillard

VanFleet, R., Sywulak, A., & Sniscak, C. C. (2010) *Child-centred play therapy.* The Guilford Press.

Winburn, A., Gilstrap, D., & Perryman, M. (2017). Treating the tiers: Play therapy responds to intervention in the schools. *International Journal of Play Therapy*, *26*(1), 1–11. https://doi.org/10.1037/pla0000041