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## Child Life Student Approaches to and Purposes of Play

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**CHILD LIFE STUDENT APPROACHES TO AND PURPOSES OF PLAY**

A Master's Thesis

Presented to

The Graduate College of

Missouri State University

In Partial Fulfillment

Of the Requirements for the Degree

Master of Science, Child Life Studies

By

Taylor Brower

May 2022

# **CHILD LIFE STUDENT APPROACHES TO AND PURPOSES OF PLAY**

Childhood Education and Family Studies

Missouri State University, May 2022

Master of Science

Taylor Brower

## **ABSTRACT**

The aim of this study was to research and gain a greater understanding of what child life students are learning about play. Qualitative data was collected via Qualtrics. Participants reported learning child-led play, structured play, and expressive play as learned approaches to play. Students reported the most learned purpose of play being self-expression, and normalization. Participants provided self-given definitions of the theories and concepts of play as the survey prompted in keeping with the researcher's goals. The Daisy model in the communication theory Coordinated Management of Meaning provided the theoretical framework, supporting preparation or familiarization, express emotions, process, or cope, assess, educate, or teach, and alternative focus or distract as the most reported approaches to and purpose of play seen in participants' self-definitions.

**KEYWORDS:** play, method, theory, Certified Child Life Specialist, child life

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A Master's Thesis  
Submitted to the Graduate College  
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May 2022

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In the interest of academic freedom and the principle of free speech, approval of this thesis indicates the format is acceptable and meets the academic criteria for the discipline as determined by the faculty that constitute the thesis committee. The content and views expressed in this thesis are those of the student-scholar and are not endorsed by Missouri State University, its Graduate College, or its employees.

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## INTRODUCTION

Perhaps one of the most integral components to the child life profession is play. Play is not only a child's first language, but it is also a child's most powerful tool (Thompson, 2009). Play is a leisure activity that is physically or mentally undertaken for the sake of enjoyment or amusement without any objective goals. Child life specialists rely heavily on the communicative power of play to assess children's physical, cognitive and psychosocial development. "A Child Life Specialist helps reduce these stresses and promote healthy coping skills and development through interventions that include therapeutic play, support and counseling, and patient orientation and education. In a hospital setting, Child Life Specialists are often part of a multidisciplinary team" (Farlex and Partners, 2009). These assessments are crucial to the profession and the way child life specialists use play to support hospitalized children. Play is used by child life specialists to teach children about medical procedures and supplies, normalize traumatic experiences, provide coping mechanisms for patient and families, and support the whole patient as is a critical component of family-centered care. (Thompson, 2009).

As pediatric medicine has advanced, so has the field of child life. One of the biggest advances for the profession was seen in the creating of the certification examination (Thompson, 2009). This exam was the first form of licensing and certifying for Certified Child Life Specialists by the governing body of child life.

Certified Child Life Specialists (CCLS) are health care professionals who possess specific education and clinical training to provide developmentally appropriate therapeutic interventions to help children in potentially traumatic healthcare situations. These specialists serve the family as a unit, using play to teach the patient or siblings about hospital experiences,



normalize the hospital environment and provide coping resources to the family to improve satisfaction. Certified Child Life Specialists possess a bachelor and/or master's degree in child and family development or psychology with a heavy emphasis on the child life profession. Additionally, CCLSs are certified by the Association of Child Life Professionals (ACLP) through the completion of a child life internship, a professional certification exam and continuing education courses taken annually (ACLP, 2020d).

With time this exam has not only grown in importance and now has a more standardized format made up of three basic areas of practice needed to be considered proficient to pass the exam and become a Certified Child Life Specialist. One of these basic concepts is play, and how child life specialists use this as a cornerstone of the profession. The current requirements by the Association of Child Life Professionals also known as the ACLP, for a child life specialist's knowledge of play is one course of a minimum of three credit hours or unit equivalency. Per the ACLP, "This course must focus on the therapeutic aspects and or learning objectives for play in infants, children, youth and young adults." (ACLP, 2019b). While the ACLP is making strides to update the examination with the growing field of literature and practice being seen within the child life community, there is potential for inconsistencies in what is being taught, learned, and practiced in the field of child life as it pertains to play. This information has the potential to enhance child life collaboration, create an ease in communication and practice, and ultimately enhance play practices in child life.

### **Significance of Study**

This study will give the child life community a significant look into what approaches to and purposes of play students report learning in child life academia. This study will offer both

students and academic programs with a more comprehensive understanding of the outlying approaches to and purposes, as well as those that are more commonly seen. The ACLP expects students to take 10 required courses, one of which being about play (Certification, 2019). However, within those play classes, the required play topics can vary. Further analysis will show the approaches to and purposes of play that students report learning. Data compiled will help to provide a greater understanding of any inconsistency found. Once these gaps are found and brought to light, collected data will help the ACLP and approved academic programs advance the quality of standardized education in child life academia. This could also better equip and prepare child life students, to be better clinicians with a greater ability to communicate, practice and provide continuity of child life care.

**Purpose of Study.** The purpose of this study is to provide data that could be used by the ACLP, and in turn ACLP approved child life academic programs, to recognize the approaches to and purposes of play that are considered the most widely learned amongst students. This understanding will provide the data that could be used by the ACLP to create consistency within child life academic standards of preparedness as it relates to the approaches and purposes of play within the practice of child life.

These individualized results will locate any gaps or inconsistencies of reported approaches to and purposes of play that are being learned by students. Results, if sufficient and applicable will be offered to the ACLP for use in evaluating and creating the future of the child life academia as it pertains to play.

**Research Questions.** This study used three research questions to help locate any gaps or inconsistencies reported by students:

- Research Question 1: What approaches to and purposes of play do students report learning as a key component in child life academia?
- Research Question 2: What concepts of play are students learning in child life academia?
- Research Question 3: How are the concepts of play being defined by students in child life academia?

To present the concept of surveyed without using the words “methods” and “theories”, alternative wording was chosen for the questions. All questions were approved by the IRB, which can be seen in Appendix A and will be expanded on further in this body of work. Questions asked to participants as a part of the survey can be seen in Appendix B.

Child life is very theory rich, and participants could easily assume the researcher was seeking information pertaining to a specific theorist when that was not the aim of the question. The new wording changed “methods” and “theories” to “approaches to” and “purposes of” instead. These specific phrases and questions were chosen to support participants in search of approaches to and purposes of play within the field of child life. Student were asked to provide self-definitions of these terms, and any others that they felt might be closely related yet are not commonly defined.

## **Theoretical Framework**

The theoretical framework of this study is based on Coordinated Management of Meaning (CMM). This communication theory developed by W. Bennett Pearce and Vernon Cronen in 1980, dives into how we communicate with one another, leading to the creation of meaning and managing these terms in social reality (Coordinated Management of Meaning, 2020) Pearce and Cronen go on to “suggest that communication is the relational process of creating and interpreting messages that elicit a response. Coordinated Management of Meaning also known as

CCM looks directly at the communication process and what it is doing (Kim, 2014).

Within CMM there are three models that can be applied to evaluate data. The Daisy model is used to call greater attention to all of the different conversations that can stem from one single conversation “Calling for attention for multiple conversations in the form of nexus is the Daisy model. This type of the conversation starts with the interesting common center and eventually forms as petals. Each petal forms a different conversation.” (Coordinated Management of Meaning, 2020). CMM and the Daisy model pay attention to not only the approaches to and purposes of play, but also to the circle of surrounding approaches to and methods of play that form the “petals” of the daisy in keeping with the Daisy model. Each “petal” surrounding the approaches to and purposes of play also holds the potential to serve as the center of its own conversation, or the center of the Daisy.

As the Daisy model continues to grow, it lays the theoretical framework for explaining how child life student are likely to report on the same approaches to and purposes of play, only with slight variances and differences when defining these terms. Using CMM and the Daisy model to evaluate the approaches to and purposes of play that child life students report learning and using has the potential to bring out any potential inconsistencies in how students report components of their child life education.

## **Chapter Summary**

The profession and practice of child life comprises many forms of play, all deeply rooted in evidence-based practice compiled over the history of the child life profession. Child life education requirements vary from institution to institution, yet students are expected to know and use the same method and theories in their practice when applying for internships, certification,

and entry-level positions. This chapter defined key concepts and outlined the subject matter explored in this body of work. Finally, this chapter outlined the research questions and established a foundation for the following literature review, methods, data results and conclusion.

## LITERATURE REVIEW

This study takes a deeper look into what theories and methods of play students report learning in courses that satisfy the (ACLP) play requirements. This chapter reviews how play is being presented to child life students in the ACLP required play courses, in ACLP official documents and in other child life publications. This will gauge what the ACLP deemed proficient in the practice of child life. A chapter summary ties the research together by utilizing the theoretical framework to better understand how students might report approaches to and purposes of play learned in child life education. This combination has the potential to bring greater clarity to the standard of child life play practices.

### **Evolution of the Profession**

The profession of child life was established in the early 1920's (ACLP, Association of Child Life Professionals, 2020) but the bulk of the educational advancement within the field has been recent. Since the establishment of early play programs for children at Motts Children's Hospital in 1922, the profession of child life has been evolving (ACLP, 2020). The first ACLP text *Working with Children in Hospitals* (Plank, 1970) was written and released establishing the first official text for the profession (ACLP, 2020). Following the creation of this text, the field saw a rapid growth in hospital programs in the 1970's and 1980's.

The number of child life programs ballooned, and colleges developed academic programs incorporating hospital internships to prepare a student to work with the hospitalized child. By the end of the 1980s substantial documents became common practice in child life such as, program review tools, requirements of professional competency, how to start a child life program,

standards of clinical practice and standards of educational preparedness (ACLP, 2020c). Since this time, the organization has changed its name to The Association of Child Life Professionals, grown exponentially and created and fine-tuned accreditation and certification standards as the profession continues to evolve in size, setting and research specific to child life is now being done.

In this ever-growing field, child life students and child life professionals are seeing a continual need to establish proficiency and improve knowledge and skill set to reflect value and expertise to satisfy employer expectations. The ACLP acknowledges this growth and change within the field and thus the educational process stating that “those individuals who have documented a basic mastery of child life theory and practice and have the initiative to learn new skills—will become increasingly valuable to their organizations” (Certification, 2021).

### **Becoming a Certified Child Life Specialist**

Child life specialists are health care workers, traditionally working in a hospital setting who utilize developmentally appropriate play to help pediatric patients cope with potential hospital stressors. To do this, a child life specialist must pass rigorous coursework, clinical internship, and certification process to become a Certified Child Life Specialist (CCLS). The ACLP is the governing body under which the profession is guided, and specialists are certified for practice. Per the ACLP “Certified Child Life Specialists are educated and clinically trained in the developmental impact of illness and injury. Their role helps improve patient and family care, satisfaction, and overall experience” (ACLP, 2020b). The credential of CCLS is:

Exclusive to child life certification and is only issued by the Child Life Certification Commission. The Child Life Certification Commission is a subsidiary

of the Association of Child Life Professionals. The CCLS credentialing program is a rigorous, examination-based professional certification. Child Life clinical internships and the certification exam promote the proficiency of child life professionals by identifying a body of knowledge of child life practice, establishing a level of comprehension, and verifying mastery of critical child life concepts, which play is one of (ACLP, 2020d).

To earn the title CCLS, child life students must adhere to a strict eligibility requirement.

This requires a minimum bachelor's degree, from an ACLP endorsed child life academic program or 10 qualifying courses in the following areas:

Required play content: this course must focus on the therapeutic aspects and or learning objectives of play for infants, children, youth, and young adults.  
Required number of courses: one course required a minimal of 3 credit hours or unit equivalency is recommended. Recommended component classical and contemporary theories of play, play as an essential element for children's growth and development and learning, influence of play environments on child play.  
Acceptable curricula: Observing, assessing, and using play to make judgments about a child learning. Play as the primary vehicle and indicator for physical, intellectual, social, and environmental development of children. Play principles and values. Structuring therapeutic play sessions. Creativity and play. Guidance of play. Play curriculum and program development (ACLP, 2019b).

Following the completion of these requirements, students complete an eligibility assessment in which the ACLP audits and verifies that the student has indeed met these requirements. Once this is done the student may then apply for a 600-hour certified internship. Following the approval of internship via the ACLP, the student is then eligible to sit for the ACLP child life certification exam, and upon successful completion of these requirements will be awarded the title of Certified Child Life Specialist (ACLP, Child Life Certification 2019 Academic Eligibility Requirements, 2019b).

These recommended components can be but are not currently required by university staff



while creating course curriculum. The ACLP, however, uses these same components when committee members create questions for the ACLP licensing exam. These components are mere recommendations when creating the child life course work that is intended to make child life student's qualified candidates for internships and certification. This researcher cannot identify any official ACLP documentation in which the ACLP provides a definitive list of theories and methodologies that students must know to be deemed an eligible candidate for an internship and have the knowledge necessary to answer detailed questions about the approaches to and purposes of play on the ACLP certification exam.

### **Reviewing the Evolution of the ACLP and Child Life Academia**

The ACLP has taken it upon themselves as an organization to create and adhere to standards for academic and clinical programs. The ACLP aims to set standards of the education and practice of child life. This commitment to continually striving to improve the already high standards is extended to all child life subject areas, not merely the concept of play specifically. These documents speak to the recent surge in child life due to the increased awareness to the of individualized developmental and psychosocial needs of the hospitalized child and families and the impact this has on coping and healing. These documents state "academic and clinical preparation programs exist to complement and support the child life profession. These programs are vital to child life as the excellence of any profession depends on performing its practitioners" (ACLP, 2010). The document states "the first edition of these standards was developed over time from 1987 to 1992 to achieve prime quality and maximum effectiveness in the profession. They undertook this revision to reflect the growth of profession and its practitioners" (ACLP, 2010). The need for clarification of the clinical and academic preparation standards is recognized by the

ACLP “as education and clinical training are key components to establishing eligibility to sit for the examination, it seems appropriate to take a fresh look at the standards for academic and clinical preparation”. (ACLP, 2010).

Practicums are typically one of the first hands-on experiences students have. A practicum is 6-10 weeks of shadowing a CCLS to give child life students a better understanding of the profession. This component of the education that was once an option is now required by most internship sites yet is only ‘strongly recommended’ by the ACLP. It is not uncommon for CCLS who have been in practice for over 5 years to have missed the opportunity for clinical experience. Speaking to practicums the ACLP states, “the student should have completed basic coursework in child development to enjoy this placement”. (ACLP, 2010).

Child life internships are a required clinical rotation to be eligible to sit for the child life certification examination test. The internship is often one of the last steps before graduating with child life undergraduate or graduate degree programs. This rotation requires a child life student to work 600 unpaid hours in a pediatric setting under a CCLS. Over the course of the internship, the child life student goes from shadowing the CCLS, to working alongside, and then being able to work as an independent child life specialist without the guidance of their CCLS internship site preceptor. The ACLP states the internship is aimed to “provide the student with an opportunity to build on coursework and put theory into practice while working in a variety of hospital and related settings under the direction of a certified Child Life Specialist CCLS”. (ACLP, 2010).

The ACLP standards for academic and clinical preparation programs covers certified academic programs that have applied and met the ACLP standards for accreditation. The approved programs can award students with accredited degrees comprised of approved coursework to ensure equal education across ACLP certified academic programs. The ACLP

states “the institution which offers a child life education program should show in its overall organizational structure or plan that there is a sufficient support to enable quality education of students.” When speaking to academic preparation for child life specialists. The document explains that child life academic programs should “represent a cohesive design for study with sound theoretical and scholarly bases”. (ACLP, 2010).

The ACLP recognizes several curriculum recommendations:

Importance of education the child life certifying committee has identified areas of study germane to child life professionals. This information has been incorporated in an education/course work eligibility requirement. (ACLP, 2010).

This list of approved coursework is in the candidate manual for the child life professional certification examination and is available to students perusing ACLP certification. Speaking to these standards and the list of course:

Is broad to accommodate variance within educational institutions and to allow for an aim review during the application process. These recommended content areas list play, therapeutic play, and developmentally supportive play as the only solid required components in the child life education. (ACLP, 2010).

Looking forward to the child life certification commission operational policy and procedures the ACLP establishes specific requirements as follows:

Option 1 is the successful completion of a degree from an ACLP endorsed academic program or option two is the successful completion of a bachelor’s degree and 10 college/university courses:

- 1) child life course taught by a CCLS

- 2) a minimum of 2 child development courses that cover ages birth to 18
  - 3) family systems course
  - 4) play course
  - 5) loss bereavement or death/dying course
  - 6) research course
  - 7) 3 additional courses in related content areas
- (ACLP, 2019a).

### **Gap in Child Life Literature and Call for Research**

The compiled research brings the following questions forward. If such a wide gap exists in what the ACLP has documented as a necessary component of child life education regarding play, then what are child life students learning? Because the pursuit of becoming a child life specialist starts in academia it is a logical first step to assess child life students. This study will survey and report on what child life students list as the most essential and critical approaches to and purposes of play that they believe they are learning during their education. The students are the future of the profession who will become practicing CCLS who will play an active role in shaping the field. The study will be tailored to child life student ACLP members who are preparing for their clinical internship eligibility report, which is necessary for internship placement and to sit for the ACLP certification exam.

### **Chapter Summary**

In summary, this chapter provided a brief history of the child life profession and education by reviewing documents from the ACLP and other quarterly child life print circulations. This chapter also highlighted a gap in child life literature and identified a need for research such as this study to provide clarity for students and professors as they both play key roles in the future of child life specialist and the evolving profession.

## METHODOLOGY

This chapter contains information on the research method, design, research questions and distribution of survey. Reviewing the survey itself, this chapter looks at the sample size, collecting procedures and analyzes data as an integral part of this study.

### **Research Methodology**

This qualitative study focused on approaches to, and purposes of play students reportedly learned in their child life education. Qualitative research methodology was selected to help better identify the defining terms. Patten's (Patten, 2014e) explanation of the purpose of qualitative research speaks to the flexibility and effectiveness of qualitative research, and it is fit to achieve the objectives of this body of research. "... the purpose of qualitative research is to gain an in-depth understanding of purposively selected participants from their perspective." (Patten, 2014e, pp. 29-30). The research itself assessed the participants' understanding of different approaches to and purposes of play. Qualitative research produced the most solid foundation for this research. Per Patten (Patten, 2014e), "trying to understand participants from their perspective requires the researcher to bring an open mind to the research setting. Thus, hypotheses are usually an inappropriate basis for qualitative research."

The survey was composed of both open and closed-ended questions. This design allowed the opinions of participants to be communicated without inference on the part of the researcher. This methodology is in keeping with Patten's view that, "the purpose of surveys is to describe the attitudes, beliefs, and behaviors of the population." (Patten, 2014a).

## **Research Design**

Qualtrics was used to produce and distribute survey. This research was in IRB compliance and IRB FY2021-171 received approval on September ninth of two thousand and twenty, which can be seen in Appendix A. Participants were asked to complete 12 questions at their convenience, which can be seen in Appendix B. The estimated time to take the survey was between five and ten minutes, encouraging the participant to provide their own definitions when prompted.

**Research Questions.** Specific questions were created to better support participants and promote exploration of play as it pertains to this research.

Research Question 1: What approaches to and purposes of play do students report learning as a key component of child life academia?

Research Question 2: What other concepts of play do students report learning in child life academia?

Research Question 3: How are these approaches to and purposes of play being defined amongst students in child life academia?

These specific questions were crafted to support participants in the exploration of broader concepts in the study of play within the field of child life. By providing self-definitions, participants identify concepts which, may be related to, but can be characterized differently from one student to another. Surveying the student population at large, this survey design lends itself to the most comprehensive answer for the population studied. This design is reinforced by (Patten (2014)), as is referenced above.

**Site of Study.** This research study took place online though Qualtrics data collection site, backed by Missouri State University. Participants had access to the survey with electronic devices such as computers, tablets, and smart phones.

## **Participants**

All participants were required to be students seeking any form of child life degree or a former student who, within the past six months completed a child life internship. This selective criterion was adopted in keeping with Patten's suggestion "...you should propose to purposively select participants who meet criteria that will yield a sample likely to provide the types of information you need to achieve your research purpose." (Patten, 2014a). All participants were voluntary. Following Institutional Review Board (IRB) approval, participants who satisfied the sample criteria were recruited via the ACLP website or participants saw the study posted about in social media groups designed to reach child life students. Ten total participants met the required criteria to provide data. Of the ten participants eight had either just finished or were pursuing a master's degree. Nearly all participants had also completed hands on learning experiences in addition to their child life classes.

## **Data Collection and Instrumentation**

Data collection was performed via Qualtrics software made accessible by Missouri State University. The survey took five to ten minutes for the average participant to complete. The survey was in circulation starting at January 18, 2021 via ACLP website, child life student groups on social media and personal social media accounts. Student participants had access to the survey from January 18 to February 1, 2021.

Prior to taking the survey, participants were asked to complete a consent form provided by the researcher. After consenting to take part in the study, participants could begin the survey. The survey allowed participants to pause and complete the survey at any time during that two-week period. All surveys were closed and forwarded to researcher regardless of completion.

The survey itself contained thirteen questions, the first of which was to acquire informed consent for participation in the study. Surveys questions sought a comprehensive understanding of what approaches to and purposes of play students report learning in child life academia. Questions sought to clarify what play approaches and purposes are commonly known and how they are defined by students. This data was needed to assess well known concepts and those that occurred as outlying concepts.

Four questions were open-ended, asking participants to provide self-definitions of terms. Nine questions which were multiple choice and asked the participant to select all that applied to their personal educational experience. The survey centered itself around the objective of answering the supporting research questions. This form of research was designed to obtain the maximum potential results while allowing participants the opportunity to personalize their responses to provide the researcher with clarity.

The survey consisted of twelve semi-structured questions. Per Patten (2014) "... these are semi-structured, meaning that some questions will be developed in advance with follow-up questions developed on the spot in light of participant's responses." Semi-structured questions were determined to be the most effective way for participants to share their own unique perspective. Semi-structured questions allow participants to select the most correct answer from their perspective and provide their own unique definition for the different approaches to and purposes of play based on their understanding. Seeking a comprehensive understanding of what approaches to and purposes of play students report learning as a key component of in child life academia semi-structured questions sought to clarify what approaches to and purposes of play are most commonly known as and how they are defined by students. This structure was intentionally designed, in keeping with qualitative instrumentation, "The main goal is to write a



description that is as specific as possible while permitting you the flexibility that is desirable in qualitative research.”

During the survey child life students were asked to report different approaches to play that they learned during their time as a student, all in their own words. By doing this, participants provided unique data while playing upon the flexibility of qualitative research as referenced by Patten, “The main goal is to write a description that is as specific as possible while permitting you the flexibility that is desirable in qualitative research.” (Patten, 2014a). This combination of both quantitative and qualitative research instrumentation allows for a blend in approaches that will make statistics and quotations of participants possible upon data collection per Patten:

...researchers conduct research that is a blend of the two approaches. For instance, a quantitative researcher who uses semi-structured interviews to collect data, reduces that to statistics, but also reports quotations from participants to support the statistics, is conducting research that has some characteristics of both approaches. (Patten, Topic 10 Quantitative Versus Qualitative Research: II, 2014b).

## **Data Analysis**

Descriptive and thematic coding was used as the main qualitative coding method for the data collected. (Andrasik, 2020). In doing this, data was broken into smaller data sets and reviewed one questions at a time. After the initial reading, frequently used words and phrases were identified, labeled and color coded. Codes were tailored and created to look for similarities and differences in participant replies to each question asked. After rereading the individualized codes were applied to the corresponding question and data provided by participants. Each individual participant’s response was then evaluated by these codes and grouped based on their similarity to other responses. In doing this, popular words and phrases became visually evident

based on the color coding. These common responses will be discussed further in the results section.

### **Chapter Summary**

This chapter provided information into background methodology and research design applied to generate the survey and choose its target audience. Survey instruction and methods of coding for data analysis were presented to establish a foundation moving into the results section.

## **RESULTS**

This chapter reviews and reports the results of the data collected in the corresponding survey. Multiple choice answers and text entries were coded and reported on in searching for concepts of and approaches to play reported by child life students. These results provide a greater understanding of approaches to and purposes of play that students' report learning during their child life education.

### **Participants and Demographics**

All participants were required to be a student seeking any form of child life degree or a former student who in the past six months completed a child life internship or received a child life degree. A total of 136 participants completed question one, which asked applicable candidates to sign for informed consent and only allowed participants that selected they had in the past six months either completed a child life internship, a child life degree or are currently in the process of pursuing a child life degree. Ten participants completed the survey in its entirety.

Participants were intended to be contacted via the Association of Child Life Professionals list serve email which was comprised of child life students. However, as of January 2021, the ACLP eliminated this feature and replaced it with "ACLP connect" which takes a "social network-style" approach to the way the child life specialists and students' network and interact in the increasing demand for virtual communication (ACLP, Association of Child Life Professionals Connect, 2021a). Instead, participants were contacted via social media platforms and ACLP connect. Specific groups on Facebook that are created for and cater to child life students were used, making Facebook the main social media platform used as well as the

researcher's personal Instagram and Facebook accounts. In a genuine attempt to keep the survey anonymous and reach child life students nationwide, no academic programs were contacted to help with survey.

Students were asked to answer questions to provided information about their educational background by choosing which option best fit the degree they are currently pursuing, as is seen below in Figure 1. Out of the nine recorded participants, six reported pursuing a master's degree in child life, two reported pursuing a bachelor's degree in child life or a related field, and the remaining one selected that their degree was not listed as an above option but did not provide further details as they were instructed to.

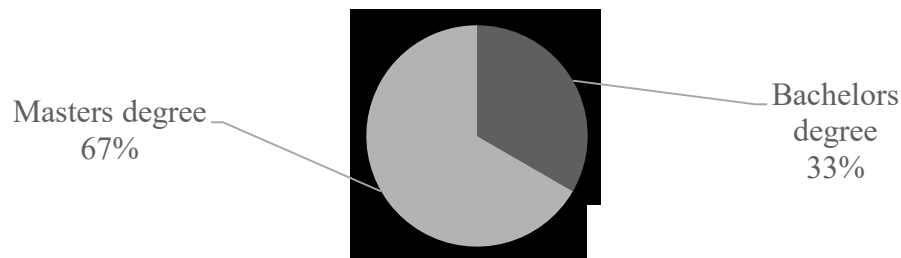


Figure 1. Participant degree demographic, type of degree participants are pursuing.

When reporting on the degree format, participant data was split evenly amongst the three provided options. In person, online and a hybrid model were all selected evenly with three students reporting each or 33.3%. Only nine out of the 10 participants provided data for this question.

Taking a deeper look at the academic program and child life education, participants were asked to provide information about the structure of the academic program. Students were asked to choose from the following options for the structure of their academic program, which is

represented below in Figure 2. The options were: child life degree, child life concentration, child life emphasis, child life minor, child life option or a text entry option for participants to enter a structure that might not have been listed. If participants selected that their program structure was not listed, they were asked to provide their own answer. Half of the of participants (5/10) reported that the structure of the program was a child life degree. The second most popular result was a child life concentration representing 2/10 participants. Child life emphasis, child life minor and child life option were not selected by any participants. Two participants entered a degree option that was not listed above. Text entries were “BA- psychology and MS–family and human development, this degree structure can be seen in Figure 2 below. Only nine out of the 10 participants provided data for this question.

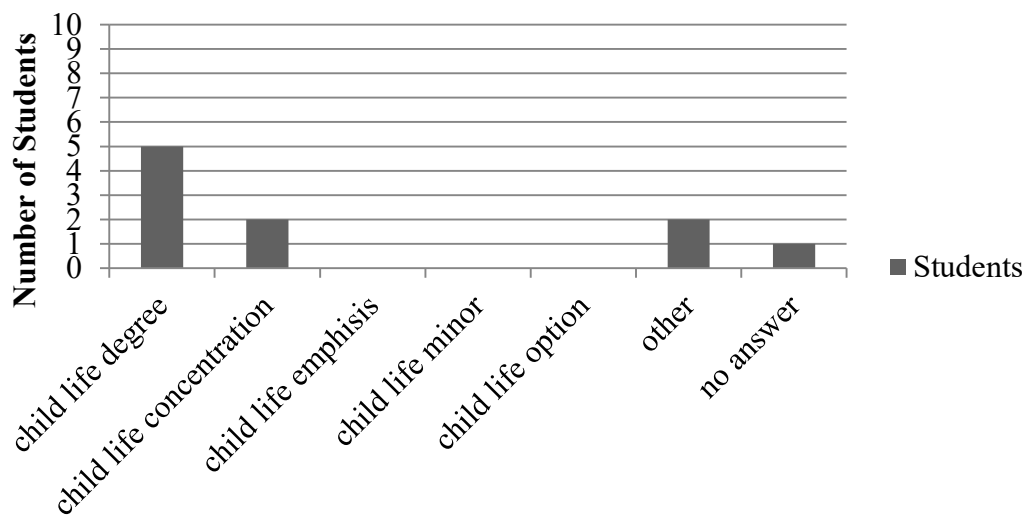


Figure 2. Participant degree demographic continued. Structure of degree participants reported.

### Learning Experiences in the Classroom and in the Field

Participants were then asked more specifically about their courses and experiences within their degree and how it shaped their understanding of play. Participants were asked “how many

courses have you taken that focused primarily on an aspect of play.” Participants were asked to choose a number one to five plus for the number of courses taken. Most participants at 6/10 selected that they had only taken one course that focused primarily on play. A smaller group of 2/10 selected had taken only two play courses, while one participant selected that they had taken five plus play courses during their education, as can be seen in Table 1 below.

Table 1. Participant education background.

Participant	Education	Play courses	Play covered in course	Hands-on experiences
1	MS	1	2	5
2	MA	1	1	5
3	MS	5	5	5
4	BS	1	5	5
5	MA	1	1	5
6	MS	2	0	5
7	MS	1	3	5
8	MS	1	5	3
9	MS	1	5	5
10	BS	2	2	5

Participants were then asked, “How many courses have you taken that briefly covered play as a topic, in addition to other closely related topics?” answer options were again one to five plus. The greatest number of participants at 4/10 participants selected that they had taken five plus courses in which play was briefly covered. A smaller group of two participants reported they had taken two classes that briefly covered play as a topic. One participant reported having taken one course briefly covering play, and one participant reported taking three courses that briefly covered play. Participants learning experiences and degrees are represented in Table 1

below.

Participants were then asked to report on any hands-on components in their education by selecting any of the following applicable experiences. Hospital/playroom labs and practicums were both reported by 8/10 participants. Internships, which require both hospital/playroom labs and practicums, were reported by 7/10 participants. Clinical rotations were reported by 6/10 participants, Student learning experiences were reported by 5/10 participants, child center labs were reported by 4/10 participants, and 3/10 participants reported that they had hands-on experiences that were not listed above. However, these participants did not provide any further details in the area for text entry, as prompted by survey, as can be seen below in Table 2.

Table 2. Educational experiences reported.

Educational experiences	Completed experiences
Hospital/playroom labs	8
Practicum	8
Internship	7
Clinical rotations	6
Student learning experiences	5
Child center jobs	4
Other	3

Participants were then asked, “please provide the total number of hands-on experiences completed”. Participants selected the appropriate number on a scale of one to five plus. One participant selected that they had completed three hands-on experiences in their education. The overwhelming majority of students at 8/10 selected that they had experienced five plus hands-on experiences as a component of their child life education.

## Approaches to Play

Participants were provided with a list of ten different approaches to play in the child life profession. They were told to select any approaches that they were familiar with and to provide their own definition of these terms. The most familiar of the ten provided approaches was a three-way tie of child-led play, structured play, and expressive play, all being identified by 8/10 of participants. Six out of ten of participants selected dramatic play. Non-directed play, non-verbal play, playing for children, and guided play were each selected by 5/10 participants. Silent play was selected by 3/10 participants and vicarious play reported by 2/10 participants as the least recognized approaches to play out of the ten provided, as can be seen in Table 3 below.

Table 3. Approaches to play reported by students.

Approaches to play	Students
Child-led	8
Structured	8
Expressive	8
Dramatic	6
Nonverbal	5
Playing for children	5
Non-directive	5
Guided	5
Silent	3
Vicarious	2

When reviewing self-definitions of participant over the provided approaches to play the words “child” and “play” were frequently seen as well as general themes in keeping with how



the play itself is facilitated. When providing self-definitions for “child-led” participants spoke to the child centered aspect of child-led play; “follow direction of the child”. Self-definitions provided for “structured play” all referred to goal-oriented approach that a child life specialist has for this type of play. Participant defined it as follows; “there are objectives to be met during this type of play” and “there is a routine and structure to what the child is playing”. Self-definitions for “expressive play” all referred to a child’s ability to express themselves, either physically or emotionally as an expressive outlet; “using art modalities for emotional or physical expression”, “play that gives the child an outlet to express themselves” and “play as a way to express emotions”.

Self-definitions of “nonverbal play” were limited and spoke to the lack of verbalization while engaging in play on both the part of the child and the child life specialist; “the child is using nonverbal actions while playing.” Self-definitions provide for “playing for children” as an approach to play also had limited response with one participant stating, “when children are not able to play or don’t want to play, but they want to watch you play”. “Silent play” was defined by only two participants who focused on the silent nature of play without explaining further; “the child is staying quiet and silent during play” and “done with no noise”. “Guided play” was defined by participants with an adult being present to guide the child through the experiences; “adult guides child through play with prompts and suggestions”, “the child is guided and led through play”, “teacher or person guides the direction of the play”. Self-definitions for “dramatic play” all mentioned play as a way for a child to play through situations the child cannot process cognitively to cope with; “pretend play or play that creates a situation or scenario”, “play is used in a dramatic form (i.e., Dress up, superheroes, etc.,)” and “reenacting events, role play, dress up”.

Participants were then asked to provide and define any approaches to play that they felt applied but were not provided in the survey. Two participants completed this question listing both parallel and solitary play as important approaches to play that were not listed in survey. Parallel and solitary play are critical phases of Partens “Six Stages of Play” which are as follows: unoccupied, solitary, onlooker, parallel, associative, and cooperative (Rymanowicz, 2021). These stages which are often seen in child development and child life literature explain how play develops along with a child’s cognitive and social skills over time.

### **Purposes of Play**

The survey asked participants to select all purposes of play they were familiar with and define the provided terms in their own words. “Self-expression” was selected by 9/10 participants as the most well-known purpose of play selected by 9/10 participants. Following that, enjoyment was listed as the second most common purpose of play at 8/10. Preparation, normalization, assessment, coping, establishing rapport and teaching were equally selected by 7/10 participants each. This left procedural support chosen by 6/10 participants and practice selected by 5/10 participants as the least commonly selected purposes of play among child life students.

Participants were asked to provide their own definition of these terms. The intention in having participants provide their own definitions, was to search for a continuity among students in the terms and definitions they reported. Participants were also asked to provide and define additional purposes of play in their own words. When reviewing participant’s self-definitions for the provided terms the follow themes emerged. When providing self-definitions for “enjoyment” as a purpose of play the most seen theme was play with the purpose of fun for the patient;

“Enjoyment for the child. Not exclusive motivation for play according to Piaget”, “play that brings joy” and “Play that brings the child happiness and is something they like to do”. The self-definitions for “preparation” as a purpose for play commonly mentioned preparing patient for procedures. “Play used to prepare a child for a procedure (I.e., medical play)”, “play to prepare for a procedure” and “play so the child understands something, medical play”, as can be seen in Table 4 below.

Table 4. Purposes of play reported by students.

Purposes of play	Students
Self-expression	9
Enjoyment	8
Preparation	7
Normalization	7
Assessment	7
Coping	7
Establish rapport	7
Teaching	7
Procedural support	6
Practice	5

Self-definitions for “normalization” shared the common theme of comfort and familiarity for patient. “To familiarize an environment or alleviate its unfamiliarity”, “play to increase comfort in the hospital” and “normalizing unfamiliar experience using play, familiar games, toys, etc.”

When providing self-definitions for “self-expression” participants frequently mentioned allowing expression through play. “Allowing a child to direct play and achieve a cathartic release, verbalize monologue, and exert control over expressive materials”, “play that allows freedom for self”, “the child expressing what is going on within them, during play”, “play to express emotions” and “play that allows a child an opportunity to express their emotions without thinking about it”. Self-definitions provided for assessment all centered around play to assess development; “Using play to assess a child’s knowledge/understanding on a topic or assess developmental milestones”, “to enable others to observe and process a child’s abilities”, “play to assess development” and “allows adults to assess where the child is developmentally with their types of play”. Self-definitions for “coping” all spoke to play as a means for a patient to cope with something in the present time. The word “stressful” was seen multiple times among participants’ answers; “Play as a coping mechanism for a stressful situation”, “play that calms”, “to help a child’s process and deal with something”, “the child is coping with something and is using play to make it better” and “play that helps the child cope with either current scenario”.

Practice was commonly defined as a purpose for play that promoted mastery through play. Participants provided self-definitions; “To allow a child to master something by doing it repetitively”, “play to master” and “allows a child to try through play”. Self-definitions provided for establishing rapport as a purpose for play all mentioned establishing a trusting relationship. Participants provided; “Simple play that builds trust”, “to allow an adult to build a relationship with a child”, “play to build a relationship with a child” and “lets the child know they can trust you”. Self-definitions for procedural support commonly mentioned the word “distraction”, participants also defined procedural support as; “Play to distract from procedure to help patient keep still during procedure”, “play to distract from procedure to help keep them still during a

procedure” and “distraction through play”. Participants’ self-definitions for teaching as a purpose of play commonly centered around preparing the patient for a new event. “Using play as a medium to teach a new skill or provide new knowledge”, “medical play so child learns”, “play to educate about a procedure” and “play used to teach the child what will be happening”.

Participants were also asked to provide and define any other purposes to play that they felt were important but not provided in the list terms given in study. The following answer were provided. “Socialization NON-COVID time” the participant continued, “It is important for the children to get socialization with others who may have been going through a similar situation. This helped them feel less isolated and normalized it for them more”.

### **Reviewing Terms Used in Survey**

While developing the survey this researcher chose specific terms were selected to mirror one another. This can be seen in the following similarities between approaches to play: “child-led” and “non-directive”, “structured” and “guided”, “expressive” and “dramatic”, “nonverbal” and “silent”, “Playing for children” and “vicarious”. It is of note that the terms “nondirective” and “vicarious” received no definitions by participants. However, the synonyms provide for these terms being “child-led” and “playing for children” respectively were defined by multiple participants. The similar term to “nondirective” being “child-led” was defined by four participants. The similar term to “vicarious” being “playing for children” was defined by two participants. The terms “child-led”, in addition to “structured”, and “expressive” all received the most definitions for approaches to play that participants were asked to define.

While coding data the following themes appeared based on participants’ definitions. Self-definitions for approaches to play also frequently referred to what role the child and child life

specialist take in the approach to play. Similar themes were seen in definition for purposes of play. Self-definitions for purposes of play also spoke to objectives for patients that can be accomplished through mastery of play. The word “allow” was also seen 11 times. Most frequently in self-definitions purposes of play in which play provides the child with a service like allowing the child “self-expression” and “practice”.

### **Chapter Summary**

This chapter reviewed and reported on data collected from child life students who participated in the survey. Students reported approaches to and purposes of play that they are learning in their child life education, as well as demographic information about their degree itself. Nearly all participants reported having five plus hands-on experiences while perusing their degree. The most reported approaches to play were child-led, structured, and expressive, all reported at 8/10 each. The most reported purpose of play was enjoyment by 9/10 participants.

## DISCUSSION

This chapter will provide a review of data collected and its relation to the research questions. Coordinated management of meaning which is the theoretical framework for this research will be used to evaluate survey results and interpret data. This discussion will cover the researchers expected results as they relate to the survey outcomes.

### **Learned Purposes and Approaches**

The most universally recognized and reported approaches to play amongst child life students were “child-led play”, “structured play” and “expressive play”. These three approaches to play are common themes in child life and are represented in many child life texts. Such as their representation in the (ACLP) mission, values, and operating principles Values Statement II B “Play facilitates healing, coping, mastery, self-expression, creativity, achievement and learning, and is vital to children’s optimal growth and development” (ACLP, 2021).

When looking to data for further insight into the reported approaches to and purposes of play it is of note that over half of participants had only had one course specific to play. While half of participants selected that their academic experience also included five plus courses that covered play as a topic amongst other related aspects of child development.

Additional approaches to play provided by students touched on Parten’s six stages of play (Rymanowicz, 2021). Both parallel and solitary play were listed by participants. Parten’s six stages of play are less commonly recognized theories in child life academia, but the theory lends itself well to the practice of child life. The Daisy Model of CMM can be used to evaluate the approaches listed by participants (Barge, 2014, pp. 187-189). With the approach itself in the

center, such as “child-led” and the individual self-definitions reported making the petals around the daisy to create a coordinated management of meaning for the concept in the center. This theory can be used to explain how despite learning the same core subjects while pursuing a child life degree, students reported these the approaches to and purposes of play with slight difference. Participant’s hands-on learning experiences were also considered when evaluating data and its relation to this research question. Nearly all participants selected that they had taken part in hospital/playroom labs and child life practicums and internships. These experiences are all integral parts of child life academia and are often education rich hands-on learning experiences where students can apply concepts learned in the classroom into practice with children while pursuing a degree. “Child-led play”, “structured play”, and “expressive play”, which were the most reported approaches to play are often some of the first forms of play learned in child life academia (Boling, 2005).

When evaluating the reported purposes of play, “self-expression” and “enjoyment” were amongst the most widely recognized purposes for using play as a child life intervention. These key purposes of play are often seen in child life academia and were expected by the researcher to be some of the most highly selected purposes of play amongst participants. The self-expressive power of play is highly valued in the child life profession and child development alike. This can be seen throughout literature surrounding child life making self-expression a common purpose of play. The ACLP and American Academy of Pediatrics both highlight the importance of self-expressive play while quoting the popular child development theorist Erik Erikson, “To play out is the most natural auto-therapeutic measure childhood affords. Whatever other roles play may have in the child’s development...the child uses it to make up for defeats, sufferings, and frustrations.” (Barbara Romito & Professionals, 2021).



Socialization was listed as an additional purpose of play by participants, although that could also fit into the category of “normalization”, which is “a critical factor in helping children cope with hospitalization in maintaining links to familiar environments, routines, and activities” (Hart & Rollins, 2011). One participant provided a text entry with an additional purpose of play, “socialization in non-covid time”. This participant expanded on the definition of socialization stating, “It is important for the children to get socialization with others who may have been going through a similar situation. This helped them feel less isolated and moralized it for them more.” Through participant provided information the Daisy model of CMM can be applied. With the phrase “socialization in non-covid times” as the center of the Daisy model, additional purposes of play can easily be provided if the phrase itself is studied further.

### **Concepts of Play**

When looking at participant’s self-definitions for the provided approaches to and purposes of play the following concepts were frequently seen in definitions provided by multiple participants.

“Preparation or Familiarization”

“Express emotions”

“Process or cope”

“Assess”

“Educate or teach”

“Alternative focus or distract”

### **Defining Concepts, Approaches and Purposes of Play**

The above concepts of play were commonly found when reviewing participants’ self-definitions for the approaches to and purposes of play learned while in child life academia.

“Preparation” or “Familiarization” are reported to alleviate unfamiliarity, build trust, and teach a new skill or provide new knowledge to patients when facilitated by child life specialist.

“Expressing emotions” was reported by students to have the power for patients to experience a cathartic release and exert control over expressive materials as a coping mechanism for stressful situations. “Process” or “cope” was reported by students as a purpose that allows children to direct play and achieve a cathartic release to exert control over materials as a coping mechanism in a stressful situation. “Assessment” was reported by students as a purpose of play that can be used to gauge a child knowledge or understanding of a topic or their developmental milestones. This purpose of play was also reported by students to have objectives to be met. “educate” or “teach” is a purpose of play that students report learning as a medium to teach a new skill or provide new knowledge. This can also allow a child mastery over something by allowing them to do it repeatedly while guiding the child through the teaching process. “Alternative focus” or “distract” is a purpose of play that students report learning of play to help a patient keep still during a procedure with objectives to be met during this play interaction.

### **Trends in Data Collection**

While reviewing data the following trends emerged in coding. As was mentioned previously, degree structure did not appear to give an impact on what participants reported. Participants in online, in person and hybrid programs all equally responded to questions.

An additional trend that emerged while reviewing data was seen in participants who did not provide self-definitions for purposes of play also did not provide definitions for approaches to play. This trend of not providing self-definitions at all was seen in three participants. The only notable similarity seen between these three participants was that they all reported having or

pursuing a master's degree. Two participants stood out as the leading contributors in providing definitions to both the approaches to and purposes of play. These two specific participants had no education demographics in common. One participant reported a master's degree through an online program. The second most contributing participant reported a bachelor's degree through a hybrid format. The participants only shared that they had completed the following hands-on experiences; hospital/practicum labs, practicum, internship. However, these hands-on experiences were also reported by at least 8/10 participants who provided data. It is also of note, that 3/10 participants provided self-definitions for purposes of play but did not provide self-definitions for approaches of play. This finding is difficult to explain when looking to the layout of the survey itself. While taking the survey participants first were asked to provide self-definitions for approaches to play before being prompted to provide self-definitions for purposes of play next. Why participants provided a higher number of definitions for a question later in the survey is unsure at this time.

## **Limitations**

This study saw varying limitations. The intended format for distribution of this survey was changed a matter of weeks before survey distribution began, which could have played a substantial role in the decreased sample size. The ACLP has used a list serve email function to communicate with members for years. This email allowed any ACLP member to reach out to a specific group via email with questions. The intended distribution of this survey was to be sent to the student mass email list. This email list had the reputation of being a very easy and effective way to generate conversation within the child life community.

In 2021, the Association of Child Life Professionals moved away from this format and

introduced ACLP connect (ACLP, Association of Child Life Professionals Connect, 2021a). The survey was instead distributed via ACLP connect and social media. The circulation of this survey appeared to be affected by this change. This change appeared to impact the sample size of this study and impact the ability to provide a qualitative assessment. In prior work this author saw an average of 25 responses to similar questions sent to students, while this study had only ten participants that fit the criteria, most of whom came from social media child life student groups. Additionally, the format by which the study sought to define these concepts required additional time and action on the part of the participant and could have easily contributed to the research question being unresolved. Text entry, while the most effective way to produce data for this research question, takes more time from participants to complete. For this reason, it is less likely to be provided, especially if participants were completing the survey on a smart phone.

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person, online and hybrid learning models. Many universities are either not allowing student to meet in person this year or are giving students the option to not meet in a physical location of classes. This could have impacted the reported number of hands-on experiences students engaged in during their educational process. It is not uncommon for a child life student to have anywhere from two to three different hands-on learning experiences built into the curriculum.

### **Future Research**

Moving forward with future research into child life academia could provide more information to students, professors, CCLS and the ACLP alike. Surveying professors, by asking what approaches to and concepts of play they cover in the curriculum, and to provide the definitions they teach, could collect data necessary to compare students' studies. Information gathered from professors would help bring to light any disconnect between what the teacher teaches and what the student is learning. Additionally, a similar survey could be given to practicing child life specialists to survey what approaches to and purposes of play they most frequently find themselves using on the job. This could provide professors with a more realistic view of the trends seen in the child life work force to better inform their curriculum.

### **Conclusion**

In summary, this research explored what child life students report learning about play as a key component of education by asking child life students tailored questions. Participants were required to currently be a child life student or to have been a child life student within the past 6 months. Sample size was only ten participants. Data collected online reflected the trend in child life academia for most popular degree choice to be a master's degree, which was selected by

6/10 participants. The bulk of those surveyed at 6/10 participants had only one course with play as the central focus, but play was a vital part of child life coursework with more than half of the participants identifying that they had taken five plus courses that covered play in some capacity. Students have also taken part in many hands-on learning experiences during their education. Hospital and playroom lab and practicums were the most common hands-on experience amongst participants, with nearly all participants at 8/10 students having taken place in a minimum of five plus hands-on learning experience like hospital labs and practicums.

Looking to data on the approaches to and purposes of play in child life academia, an even 8/10 of participants selected “child-led”, “structured”, and “expressive” as the top three approaches to play. The most selected purposes of play were “self-expression” and “enjoyment” at 9/10 and 8/10 respectively. As a key component of answering research question three, participants were asked to provide definitions of any unlisted approaches to or purposes of play. Participants provided that unlisted approaches to play were all in keeping with Parten’s six stages of play, participant listed parallel and solitary (Rymanowicz, 2021).

Overall, survey results did produce data in keeping with the researcher’s goals and fulfilled research questions. Students reported learning “child-led play”, “structured play” and “expressive play” as learned approaches to play to satisfy research question one. These approaches can be described by using the Daisy model of Coordinated Management of Meaning in which “approaches to” is the central concept and “child-led”, “structured” and “expressive” are all closely related yet have different managed meanings, placing them in the “petals” of the Daisy mode itself.

The same theoretical framework can be used on the identified concepts of play. Students most reported concepts taken from self-definition of approaches to, and purposes of play were

“Preparation or Familiarization”  
“Express emotions”  
“Process or cope”  
“Assess”  
“Educate or teach”  
“Alternative focus or distract”

In keeping with the Daisy model of CMM play could be placed in the center of the daisy with the above concepts each in an original petal as they all pertain to play and further definitions could branch from all the initial petals holding the concepts that all have different managed meanings while still belonging to the central purpose of play. The final research question is satisfied by tying the results provided by participant’s self-definitions back into the concepts pulled from the reported definitions of approaches to and purposes of play.

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# APPENDICIES

## Appendix A: Human Subjects IRB Approval

Date: 6-29-2021

IRB #: IRB-FY2021-171

Title: Child Life student approaches and purposes of play

Creation Date: 9-25-2020

End Date:

Status: **Approved**

Principal Investigator: Lindsey Murphy

Review Board: MSU

Sponsor:

### Study History

Submission Type	Initial	Review Type	Exempt	Decision	<b>Exempt</b>
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### Key Study Contacts

Member	Lindsey Murphy	Role	Principal Investigator	Contact	<a href="mailto:lindseymurphy@missouristate.edu">lindseymurphy@missouristate.edu</a>
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Member	Taylor Brower	Role	Primary Contact	Contact	<a href="mailto:clark7415@live.missouristate.edu">clark7415@live.missouristate.edu</a>
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## **Appendix B: Survey Questions**

**Question 1.** Dear child life student,

My name is Taylor Brower, and I am a Child Life graduate student at Missouri State University. I am under the supervision of the Dr. Lindsey Murphy, PhD, CCLS Associate professor and Director of Graduate Child Life Studies at Missouri State University. For my graduate thesis, I am collecting data exploring approaches to and purposes of play that child life students report learning while seeking a child life degree. Using an online survey, information will be collected and examined to gain a better understanding of how child life student communicate what they are individually creating, coordinating, and managing the meaning of as it pertains to the approaches to and purposes of play in their child life education. Thank you in advance for your participation in this survey.

Should you agree to anonymously participate in this research, you will be asked to complete an online survey. The survey is expected to take between 5 and 10 minutes to complete. During the survey you will be asked questions about your knowledge of child life studies as it pertains to different approaches to and purposes of play.

Your decision to participate or decline participation in this study is completely voluntary and anonymous, additionally you have the right to terminate your participation at any time without penalty. There are no risks to individuals participating in this research beyond those that exist in daily life. Although there are no direct benefits to you by your participation in this study, the data obtained will inform child life specialists on what child life students communicate learning as it pertains to child life terminology learned in their child life education. There will be no financial or other compensation for your participation in this research.

No personal identifying information will be obtained during participation. Your privacy and confidentiality will always be maintained. The researcher will not know your Internet Protocol (IP) or computer address when you respond to this Internet survey. The researcher will not share your identifiable or individual information with anyone. The researcher will be the only person authorized to view and access the survey data. If you have any questions or concerns about this study or if any problems arise, please contact:

Researcher:

Taylor Brower

Graduate Student

Department of Childhood Education and Family Studies – Child Life

Missouri State University

913-231-8120

Clark7415@live.missouristate.edu

Advisor:

Lindsey Murphy, PhD, CCLS, CTP

Assistant Professor, Director of Graduate Child Life Studies

Department of Childhood Education and Family Studies

Missouri State University

LindseyMurphy@MissouriState.edu

**Question 2.** I have read the consent form and give my consent to participate in this study,

Yes

No

**Question 3.** Are you currently completing a child life internship, or have you completed a child life internship within the past 6 months?

Yes

No

**Question 4.** What degree are you currently pursuing?

BS

MS

MA

PhD

MEd

If your degree is not listed above, please explain

**Question 5.** What is the format of your degree?

In person

Online

Hybrid model

**Question 6.** What was the structure of your academic program?

Child Life Degree

Child Life Concentration

Child Life Emphasis

Child Life Minor

Child Life Option

If your degree is not listed above, please explain

**Question 7.** How many courses have you taken that focused primarily on an aspect of play?

- 1
- 2
- 3
- 4
- 5+

**Question 8.** How many courses have you taken that briefly covered play as a topic, in addition to other closely related topics?

- 1
- 2
- 3
- 4
- 5+

**Question 9.** As a student, what hands-on play experiences have you completed? (e.g., Hospital/playroom labs, child center labs, student learning components, practicums, internships, clinical rotations etc.) Select all that apply.

Hospital/Playroom Labs

Child Center Labs

Student Learning Experiences

Practicums

Clinical Rotations

Internship

If your experience is not listed above, please explain

**Question 10.** Please provide the total number of hands-on experiences completed

1

2

3

4

5+

**Question 11.** Please select all approaches to play that you are familiar with and provide your own simple definition of selected terms:

Child-lead

Structured

Non-directive

Expressive

Nonverbal

Playing for children

Silent

Vicarious

Guided

Dramatic

**Question 12.** Please list and define any additional approaches to play that were not listed above

Space for text entry provided

**Question 13.** Please select all purposes of play that you are familiar with and provide your own simple definition of these terms:

Enjoyment

Preparation

Normalization

Self-expression

Assessment

Coping

Practice

Establish rapport

Procedural support

Teaching

**Question 14.** Please list and define any additional purposes of play that were not provided above

Space for text entry provided

**End of Survey**