

Psychotherapy Guidebook

SHADOW THERAPY

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Shadow Therapy

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Shadow Therapy

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DEFINITION

Shadow Therapy is a two-dimensional method of therapy for children. The method of treatment consists of involvement in three environmental alternatives and in a focus on inner-psychoic experiences. The therapy environment consists of three environmental potentials that are under the control of the child:

- 1) darkness,
- 2) candlelight, and
- 3) full light. These therapy environments mimic dusk, dawn, and the day/night environment.

The inner-psychoic potentials consist of:

- 1) objects,
- 2) shadow of objects, and
- 3) inner images.

This two-dimensional approach was developed by the author as an expanded concept of Shadow Therapy. It offers a varied environmental structure for access to subconscious and unconscious material and increases the potential for child and therapist to communicate.

HISTORY

Shadow Therapy originated because of a disturbed, isolated child's needs and because of the author's childhood experiences watching shadow plays in Chengtu, China. I integrated the child's needs and my childhood recollections into a method of therapy.

I initially reported on this method of treatment at the International Congress for the Further Scientific Study of Mental Deficiency held in Copenhagen, Denmark, August 1964. I have continued to expand the use of environmental variants as well as focused on a broadened concept of image processing.

TECHNIQUE

Shadow Therapy is conducted in a windowless room where darkness can be achieved. Chairs for patient and therapist are available along with a small table. There are no toys, puppets, dollhouses, etc., as are usually found in a play therapy room. Placed on the table are a candle, matches, paper and

pencils, and crayons and pen (these vary, depending on the needs of the child). Prior to the beginning of the session, the candle is lit. The patient is then brought into the room, and the therapist faces the child toward the wall saying, "Look, there is your shadow."

In the initial sessions of Shadow Therapy, this method of procedure continues. However, autonomy is soon established, and the child chooses darkness, candlelight or a regularly lit environment. The length of time in each type of environment varies according to where the child is in therapy and what environmental needs the child has. Reporting on self and the environment through drawings also varies. The child has autonomy to choose the medium of communication both environmentally and inner-psychically. The therapist responds to the level of communication the child uses in the different environments. Most children reveal more primitive types of material when in the darkness environment. Changes in times spent in the different environments appear related both to inner-psychic feelings as well as to known traumatic events that have occurred at some time prior to the specific therapy session. Usually, if patients find the darkness environment too difficult to handle, they turn on the light or ask to have the candle lit. Regression is easily documented in Shadow Therapy both by recording environmental choices and by the behavioral manifestation in these environments. Fear of primary processing following external trauma frequently results in maintaining a candlelight environment for one or more

sessions. Difficulties in self-concept may result in displacement by patients onto their own shadow or onto the shadow of the therapist. Shadows frequently become symbolic representations of people or events the child is unable to handle directly.

APPLICATIONS

This method of therapy is particularly effective with depressed children, with children with delayed mourning, with isolated, abused, and psychotic children.