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Sands Through Time: Contextually Constructed Sandtray

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Abstract

This article explores the integration of Ivan Boszormenyi-Nagy's contextual therapy with sandtray therapy, providing a framework for addressing intergenerational relational patterns and fostering healing. Contextual therapy emphasises relational ethics and the multigenerational transmission of unresolved emotional debts, known as delegations, which shape family dynamics (Boszormenyi-Nagy & Krasner, 1986). It also highlights the role of invisible loyalties binding individuals to their family systems, often at the expense of personal autonomy (Hargrave & Pfitzer, 2004). Despite its profound insights, contextual therapy has been critiqued for its complexity and challenges in practical application (Fowers & Wenger, 1997).

To bridge this gap, sandtray therapy is utilised as a tactile and symbolic modality that externalises and explores these patterns. Sandtray therapy, with its focus on storytelling and relational dynamics, aligns with the principles of contextual therapy, fostering insight through creative and experiential methods (Homeyer & Sweeney, 2022). The author demonstrates this integration a case study of a client, Tamsin (pseudonym), who engaged in a multi-phase process involving contextual genograms and the representation of family dynamics using sandtray techniques. This process enabled Tamsin to uncover inherited relational patterns, give voice to familial influences, and renegotiate her roles within her family system.

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This integrative approach provides therapists with a powerful tool for addressing intergenerational wounds, promoting self-awareness, emotional resolution, and relational balance. By combining the relational ethical lens of contextual therapy with the experiential depth of sandtray therapy, clients can achieve meaningful transformation in their family narratives and personal identities.

Key Words: contextual therapy, contextual genogram, intergenerational patterns, relational ethics, sandtray therapy, sand therapy

Like the grains of sand in a sandtray, ancient, shaped by countless forces of nature, humans carry the imprints of their ancestors' stories. These stories, etched across generations, form the foundation of our identities and relationships. Ivan Boszormenyi-Nagy's contextual therapy (Boszormenyi-Nagy & Krasner, 1986) offers a profound lens to uncover these narratives, particularly through the concept of the *revolving slate*. This term refers to the transgenerational transmission of unresolved emotional *debts* or *injustices* passed unconsciously to subsequent generations. These inherited debts frequently influence family dynamics in subtle yet deeply impactful ways, shaping descendants' relational patterns and struggles (Boszormenyi-Nagy & Krasner, 1986). Nagy's theory reveals how innate ways of being are intricately connected to the threads of previous generations, spanning time and weaving through into every individual's present life (Hargrave & Pfitzer, 2004).

Contextual therapy has often been critiqued for its complexity and the challenge it presents in applying it practically in the therapeutic setting (Fowers & Wenger, 1997). This therapeutic approach requires therapists to integrate not only an individual's internal psychological state but also the broader relational, societal, and cultural contexts that shape their behaviour. Managing these multiple layers of influence demands advanced expertise and can make the therapy difficult to implement consistently, especially for clinicians who may not be fully familiar with its principles.

To address these concerns, the author explored different approaches to bridge the gap between theory and practical implementation. One of the most valuable tools that the author discovered in this journey was the application of sandtray therapy. This approach was found to provide a unique and tangible way to engage with the theoretical principles of contextual therapy in a more accessible and experiential manner for both child and adult clients.



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Sandtray therapy, as a therapeutic modality, provides a unique, non-intrusive way to access and express the intricate parts of ourselves. Using miniatures and tactile engagement with sand, clients externalise and process both conscious and unconscious thoughts and emotions (Homeyer & Sweeney, 2022). Sandtray becomes a powerful medium for storytelling, uncovering relational dynamics, internal conflicts, and personal narratives (Blom, 2004).

Homeyer and Sweeney (2022) highlight that one of the foundational elements of sandtray therapy is the dynamic and interpersonal relationship that shapes the process. This aligns with the contextual approach, where Nagy (Boszormenyi-Nagy & Krasner, 1986) emphasised the transformative power of therapy through the concept of *healing through meeting*. Both perspectives underscore the importance of the therapeutic relationship in fostering meaningful change.

This integration led to the question: "What additional dimensions to healing become possible when the therapist brings contextual therapy into the tactile and symbolic world of sandtray? How might this combined approach enable clients to excavate their inherited patterns and craft new, empowering stories?"

In this article, the author discusses a brief overview of both contextual therapy and sandtray therapy. The theory is then applied through the case study of a female client to demonstrate a working model of contextual sandtray in practice.

Contextual Therapy: A Multigenerational Framework

Ivan Boszormenyi-Nagy's contextual therapy emphasises the ethical balance of giving and receiving in family systems. This model views family relationships through an intergenerational lens, using the metaphor of the relational ledger to understand how fairness, care, and justice are distributed. Emotional debts emerge when imbalances occur through neglect, betrayal, or sacrifice. These unresolved accounts, known as delegations, are frequently unknowingly passed from parents to children. Delegations might take the form of expectations, responsibilities, or roles, shaping emotional patterns and relational dynamics (Boszormenyi-Nagy & Krasner, 1986).

Martin Buber influenced the work of Boszormenyi-Nagy, particularly the *I-Thou* dialectic, which asserts that human life finds meaning in relationships. Building on this, Nagy underscored the power of relationships and the essential role of acknowledgment, particularly from parents, in shaping a child's sense of self-validation. Self-validation is foundational to a child's sense of 'deserving to be alive' (Hargrave & Pfitzer, 2004).

Nagy coined the term, relational ethics which is at the heart of this approach. It examines fairness and mutual care within family relationships. Relational ethics are the lens



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through which the individual's factual information, personal characteristics, and systemic relationships are understood. Nagy's work also highlights visible and invisible loyalties that bind individuals to their family systems. Invisible loyalties often manifest as a subconscious adherence to unspoken family rules or the burden of redeeming the family name. These inherited patterns can hinder autonomy and self-actualisation unless consciously examined (Boszormenyi-Nagy & Krasner, 1986).

Building upon Nagy's foundational ideas, Nieuwenbroek (2014) provides concrete methods to assist practitioners in identifying and addressing intergenerational legacies. These principles equip therapists with strategies to navigate loyalty conflicts, acknowledge unspoken family narratives, and foster relational balance. Beyond theory lies the heart of what makes therapy truly transformative—the relational space we create as therapists. This space is not one where the therapist holds an authoritative or all-knowing stance but rather a meeting of equals, a *subject-to-subject* encounter (Nieuwenbroek, 2014). In this approach, the therapist does not see themselves as the expert analysing an object (the client), but instead, as a fellow human being engaging with another person's lived experience. In contextual therapy, this means recognising that each individual and family system has their unique history, values, and justified claims. Rather than imposing solutions, the therapist listens, validates, and collaborates, fostering healing through mutual understanding and trust (Hargrave & Pfitzer, 2004).

Contextual therapy is not merely about understanding intergenerational delegations and loyalties, known and unknown; it is about fostering a space where relational trust and fairness can be experienced. Therapy becomes an enactment of relational justice, a model of reciprocity where both therapist and client engage in the delicate dance of give and receive. It requires us to hold space without rescuing, to pause before responding. As Nieuwenbroek (2014) phrases it, we must *stadig om te versnel* (slow down to accelerate). Contextual therapy is an approach of *unblaming*—not to dismiss past pain but to illuminate pathways toward relational healing (Hargrave & Pfitzer, 2004).

The following section outlines key concepts of contextual therapy, including delegations, loyalties, and destructive entitlement.

Delegations

Family relational dynamics shape *delegations*, unresolved emotional debts, and systemic loyalties. Ivan Boszormenyi-Nagy conceptualised delegations as both explicit and implicit, forming a crucial part of how families maintain their relational balance or *relational ethics*. Delegations refer to the obligations, expectations, or roles imposed on a child—often without considering the child's individual interests, capacities, or developmental stage (Boszormenyi-Nagy & Krasner, 1986).



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Delegations are closely tied to the concept of the revolving slate, where unresolved injustices or unmet needs from one generation are unconsciously transferred to the next. Parents or caregivers may, without conscious intent, delegate tasks or roles to their children that reflect their own unresolved emotional struggles. For example, a parent who experienced neglect in childhood may delegate the role of "caretaker" to one of their children, requiring them to provide emotional support, essentially reversing the natural parent-child dynamic (Hargrave & Pfitzer, 2004). This can lead to *parentification*, where a parent burdens the child with responsibilities beyond their age or abilities. This reversal of roles, whether emotional or practical, forces the child into a position of caregiving, often at the cost of their own development and well-being (Hargrave & Pfitzer, 2004; van der Meiden, 2019).

Not all delegations are inherently harmful. Mild forms are common, such as a child taking over a family business, which can be a healthy continuation of familial bonds. However, pathological delegations occur when a parent imposes a way of being or behaving onto the child under the guise of benefiting them, when it primarily serves the parent's unmet needs. Though often unconscious, these delegations can be deeply destructive, leaving the child bound by invisible loyalties that shape their decisions and relationships in adulthood (Hargrave & Pfitzer, 2004).

Ultimately, a child cannot help but inherit the consequences of past relational endowments. When delegations remain unexamined, they perpetuate cycles of destructive entitlement, where those adults who were once burdened as children may later impose similar burdens on others, believing they are simply taking what was denied to them. Breaking this cycle requires awareness, recognition, and an intentional shift toward fairness and relational healing. Intergenerational loyalties often underpin these delegations.

Loyalties

In contextual therapy, *loyalties* describe individuals' profound, often unconscious, responsibilities and commitments toward their family members and close relationships. These loyalties are rooted in reciprocity, fairness, and the bonds that span generations. Nagy conceptualised loyalty as part of an '*invisible ledger*', where individuals unconsciously track the balance of giving and receiving within their relationships (Hargrave & Pfitzer, 2004). This sense of obligation can be *positive*, fostering strong and supportive connections, or *negative*, resulting in conflict or feeling trapped when these duties become inequitable or excessive (Boszormenyi-Nagy & Krasner, 1986).

Invisible loyalties refer to the unconscious commitment to honour the family system, often at the expense of one's own well-being (Boszormenyi-Nagy & Krasner, 1986). These loyalties compel individuals to fulfil delegations to preserve family bonds, even



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when the delegations cause emotional distress or hinder personal development (Hargrave & Pfitzer, 2004). This can lead to a sense of destructive entitlement.

Destructive Entitlement

Entitlement is the ethical claim to receive compensation in any relationship where one has given or contributed responsibly and reliably. When this entitlement is honoured, it fosters trust. A reciprocal cycle of giving and receiving emerges, which strengthens relationships. As trustworthiness grows, relational partners feel secure and free to give without the need for manipulation or coercion. This dynamic creates a positive spiral of mutual care and fairness (Hargrave & Pfitzer, 2004).

However, not all relationships operate on this foundation of trust. Destructive entitlement arises when a person, having been treated unfairly or harmed in their family of origin, feels they are owed something in return. Instead of restoring balance, they unintentionally pass their pain onto others. This cycle often begins in their own childhood, where a lack of fairness, care, or trust fosters resentment. In seeking to secure their entitlement, those affected by destructive entitlement may unknowingly deprive others, particularly their children, of their rightful entitlement to care and fairness. This perpetuates a generational cycle of injustice and distrust, a process known as the *revolving slate*, where unresolved pain creates new victims in the next generation (van der Meiden, 2019).

When there are severe imbalances in giving and receiving, whether within families (vertical relationships) or between peers and partners (horizontal relationships), individuals may feel exploited or over-benefitted. In such cases, trust is eroded, and relationships suffer. Those caught in destructive entitlement may become emotionally cut off, hostile, or even harm others in their quest to claim what they were denied. This can manifest in anger and rage or a sense of moral superiority, believing they are inherently deserving, even at the expense of others (Hargrave & Pfitzer, 2004; van der Meiden, 2019).

Parents with destructive entitlement often expect their children to provide the care and validation they lacked in childhood. However, because they feel inherently owed this, they fail to recognise these offerings as gifts. As a result, they struggle to meet their child's needs in a balanced and healthy way. When a young child's rightful entitlement to parental care goes unmet, they may eventually adopt an overentitled stance—paradoxically, a response shaped by years of one-sided giving. Without acknowledgment of their suffering, they may unconsciously seek retribution against innocent third parties, perpetuating the very injustice they once endured (Hargrave & Pfitzer, 2004; van der Meiden, 2019). Breaking the cycle requires conscious recognition of this pattern and a commitment to fairness for oneself and future generations. True healing begins when an individual chooses to restore balance rather than pass on pain (Hargrave & Pfitzer, 2004).



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The following section outlines the practical application of contextual therapy through the contextual genogram.

Therapeutic Implications

Uncovering and addressing delegations, hidden loyalties, and destructive entitlement is essential for fostering healing and relational balance in therapy. Therapists help clients identify the roles they have been delegated, explore the origins of these roles, and assess how they influence their current relationships and sense of self. By bringing these dynamics into conscious awareness and through the process of *exoneration*, individuals can begin renegotiating their roles within the family system, restoring their autonomy, and maintaining healthy connections with loved ones (Hargrave & Pfitzer, 2004).

Contextual Genograms: Mapping Intergenerational Narratives

The contextual genogram builds upon the traditional genogram by incorporating relational ethics, loyalties, and delegations into its structure. This enhanced mapping tool allows therapists and clients to uncover the deep roots of intergenerational dynamics while focusing on relational fairness (McGoldrick, Gerson, & Petry, 2008; Nieuwenbroek, 2014). Here is a step-by-step example of how a contextual genogram can be constructed, which focuses on delegations, hidden loyalties, and destructive entitlement:

Step 1: Mapping Family Structures

The contextual genogram begins by charting at least three generations of family relationships (grandparents, parents, child, and the client as a child within their family system). Clients depict connections between family members using symbols and lines. This structural overview sets the stage for exploring vertical relationships (parent-to-child relationships)—the patterns, traits, and values transmitted from generation to generation.

Step 2: Uncovering Delegations and Patterns

Clients are guided to reflect on inherited roles and expectations, often using prompts such as (Nieuwenbroek, 2014, p. 18 & 19):

- "Who in this family receives the greatest amount of care?"
- "With which family member do you feel the biggest connection?"

The author has adapted some of these questions:

- "In our family, a [surname] is always expected to..."
- "A [surname] must never... or should..."



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- "What have you received that you do not want to pass on to future generations".

These relational-ethical questions are utilised to identify explicit and implicit delegations and loyalties, creating opportunities for clients to question whether these inherited roles align with their values (Nieuwenbroek, 2014).

Step 3: Visualizing Loyalty Dynamics

Solid lines depict visible loyalties, dotted lines represent invisible ones, and jagged lines illustrate loyalty conflicts. By mapping these dynamics, clients can recognize the tensions between their individual needs and the expectations placed upon them by previous generations (Nieuwenbroek, 2014).

For example, a client, Susan (pseudonym), uncovers the hidden loyalty that "A Smith must always succeed." This belief passed from her grandfather to her father, shaped her father's emotional stoicism and Susan's ongoing struggle with vulnerability. Recognising this pattern marks the first step toward rewriting her story. Here are more questions the therapist could ask to guide the client in exploring different loyalty dynamics within their family system.

Below are some examples of contextually constructed therapeutic questions designed to uncover loyalties within the family system.

1. Identifying Visible and Invisible Loyalties

- "What unspoken family rules or expectations have shaped your choices and identity"?
- "Are there certain roles or responsibilities that you feel obligated to uphold, even if they do not align with your personal needs"?
- "Have you ever been told (explicitly or implicitly) that 'this is just how our family does things'"?
- "Do you feel pressure to continue a specific career, tradition, or way of thinking out of loyalty to your family"?

2. Exploring Loyalty Conflicts

- "Have you ever felt torn between your personal desires and family expectations"?
- "Do you struggle with guilt or anxiety when making choices that differ from what your family expects"?
- "Are there family members who have been labelled as "selfish" or "rebellious"



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for breaking away from family traditions"?

- "How do you navigate the tension between belonging to your family and being true to yourself"?

3. Intergenerational Influence on Loyalties

- "What beliefs or values have been passed down through multiple generations?"
- "Are there sacrifices made by previous generations that shape the expectations placed upon you?"
- "Have you noticed patterns of favouritism, exclusion, or rigid loyalty to certain family members over others?"
- "How has your family history influenced your sense of duty, success, or self-worth?"

Step 4: Uncovering patterns of destructive entitlement

Destructive entitlement arises when unresolved pain and injustices from one generation are unconsciously carried forward, often leading to cycles of harm. This step helps uncover patterns of unfairness, emotional debts, and how past relational imbalances continue to impact present relationships.

Key Questions to Explore:

1. Inherited Pain & Unresolved Injustices:

- "What injustices, neglect, or emotional wounds have been carried forward in your family?"
- "Are there stories of betrayal, abandonment, or favouritism in previous generations?"
- "Were certain family members denied fairness, care, or recognition?"

2. Patterns of Relational Imbalance:

- "Were any family members forced into roles that were not age-appropriate (e.g., caretaking a parent, becoming the family peacemaker, or feeling responsible for a sibling's well-being)?"
- "How did your family handle conflict and fairness? Were certain individuals consistently overbenefited while others felt unseen or used?"

3. Manifestations of Destructive Entitlement:

- "Have family members sought compensation for past pain in ways that have harmed



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others (e.g., controlling behaviour, emotional cutoff, excessive self-protection at others' expense)?"

- "Have you ever felt justified in prioritising your needs at the expense of others due to past hardships?"
- "Do you notice cycles of distrust, emotional distance, or patterns of revenge in your family?"

Contextual therapy, particularly through tools such as the contextual genogram, enables individuals to uncover and explore the intergenerational dynamics that shape their current experiences. By making unconscious delegations and loyalties visible, clients are given the opportunity to reassess and redefine their roles within their family systems, fostering both personal autonomy, and relational balance. This approach emphasises relational fairness and the healing potential which comes from addressing historical patterns, allowing individuals to create more equitable and transformative family narratives (Hargrave & Pfitzer, 2004).

The following section demonstrates the practical application of the contextual genogram through sandtray, integrating gestalt therapy techniques, particularly the empty chair exercise, to enhance dialogue, self-awareness, and the exploration of inner conflicts (Perls, Hefferline, & Goodman, 1951; Polster & Polster, 1973).

The Intersection of Contextual Therapy and Sandtray

The sandtray becomes a dynamic platform for exploring intergenerational patterns and relational ethics in this approach. Several authors have developed models for integrating genograms into sandtray therapy (e.g., Killam et al., 2016; McGoldrick et al., 2008; McGoldrick & Laszloffy, 1998), however, the literature shows no documented cases of the application to contextual therapy.

When applied to contextual therapy, the tactile and symbolic elements of sandtray therapy enhance the reflective process of contextual genograms, providing clients with a safe and creative space to externalise and reshape their family narratives. This integration allows therapists to help clients not only visualise their relational dynamics but also actively reconstruct them, grain by grain, story by story. Clients use the tray to externalise familial dynamics, such as delegations, loyalties, and systemic relationships. This process deepens their awareness of inherited patterns while fostering healing through creative and embodied engagement. Through the use of the sandtray, these often invisible and unseen ways of being become concrete and tangible to the client.

In practice, the author uses a central, regular-sized sandtray (approximately 50 cm x 72 cm x 7.5 cm) surrounded by smaller trays (sizes can vary). These smaller trays represent



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individual family members and can be placed within the central tray or arranged around it. Their positioning reflects the client's perception of the relationships, including closeness, tension, or disconnection.

Before this session, the therapist and client will map their contextual genogram, exploring family delegations and loyalties in detail. Expressive arts techniques, such as painting, are also incorporated to decorate the smaller trays, allowing the client to visually represent how they experience the traits and delegations of specific family members. Clients are encouraged to use materials like yarn or wool to symbolise the types of relationships between family members, adding another layer of tactile representation.

The therapist can incorporate an adaptation of Gestalt's "empty chair" and play therapy techniques by inviting clients to arrange miniatures at varying distances to reflect relational closeness or conflict. Therapists might pose questions such as:

- "What do you notice about the distance between these two figures?"
- "How does the relationship feel when you move this figure closer or farther away?"

This approach encourages clients to actively engage with their sandtray creations, fostering a sense of empowerment and enabling them to experiment with reimagining relational dynamics. By creating physical representations of relationships, clients can safely explore possibilities for change and develop new ways of understanding and engaging with their connections (Lyles & Homeyer, 2022).

The following section demonstrates the practical application of the contextual sandtray approach through a case study.

Case Study: Tamsin's Journey

Tamsin (pseudonym), a long-term client, participated in this integrative process to explore her family legacies. She began by constructing a central sandtray to represent her core world and current emotional state. Drawing from her familiarity with sandtray therapy, she created a detailed scene that captured her personal narrative. She then selected smaller trays representing her parents and grandparents, symbolising key familial relationships and dynamics. In previous sessions, we focused on these smaller sandtrays. She spent time painting each miniature tray using various mediums (acrylic, markers, etc.) to create visual interpretations of the delegations and loyalties associated with and passed down from each family member.

Phase 1: Mapping Delegations and Traits

Using her contextual genogram as a foundation, Tamsin examined family delegations, expectations, or tasks passed down generationally and traits inherited from



her ancestors. For each smaller tray, she selected miniatures representing specific traits or burdens, such as "strength under pressure" or "unspoken resentment." She physically arranged the trays to reflect her sense of emotional or relational distance from her family members, a method consistent with the Gestalt principle of representing relational dynamics through spatial arrangement.

Phase 2: Weaving the Web

To illustrate the connections, delegations, or shared traits between family members, Tamsin used coloured wool to weave threads between the trays. This tactile and visual process can highlight patterns of loyalty (split and hidden) and unresolved debts, reflecting contextual therapy's emphasis on understanding relational ethics and intergenerational entanglements. She used different colours, textures, and thicknesses of wool to demonstrate the different types of relationships that existed between family members. The images below depict a session that demonstrates Phase 1 and 2. In this session, she created a sandtray (Figure 1), which focused on the vertical female relationships within her maternal lineage (her grandmother, her mother, and herself). She had raised each of the smaller sandtrays on a block which she had labelled for each family member (Figure 2).

Figure 1
Vertical Maternal Genogram





Figure 2

Depiction of Raised Mini-trays



Phase 3: Giving Voice to the Figures

In this phase, Tamsin engaged in imagined dialogues with the miniatures, exploring each figure's emotional essence and influence on her life. This process aligns with Gestalt sandtray techniques, which emphasise giving voice to symbolic representations to deepen insight into internal conflicts and relational dynamics (Blom, 2004; Homeyer & Sweeney, 2022). For instance, the miniature representing her maternal grandmother expressed nurturing qualities but also carried the weight of sacrifice, revealing the complexities of familial legacies.

Phase 4: Integration

Finally, Tamsin reimagined the trays and their miniatures as representing various aspects of herself (Figure 3). Her personal miniature tray became the focal point of a larger sandtray. She incorporated elements from her mother's and grandmother's trays in the larger tray. By integrating these fragmented parts, she recognised their influence, began renegotiating their roles in her life, and created opportunities to explore how these



Figure 3
Integration of Intergenerational Parts



delegations and loyalties were currently impacting her. This process also opened space for envisioning a future narrative and facilitated unblaming, allowing her to reframe her relationship with her family legacies. During this stage, we utilised the empty chair technique, both with herself and within the sandtray, facilitating dialogues between these parts. This focus on understanding, acceptance, and reintegration fostered self-compassion. This work empowered the client to redefine her relationship with her inherited patterns, aligning with contextual therapy's goal of achieving balance and mutual care in relationships.

Conclusion

This integrative approach to contextual sandtray therapy provides a powerful framework for exploring and resolving intergenerational wounds. Combining the systemic lens of contextual therapy with the experiential and symbolic depth of sandtray therapy facilitates a process for clients to gain a deeper understanding of their family legacies and relational patterns. As Tamsin's case illustrates, this method fosters self-awareness,



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emotional resolution, and a renewed sense of agency over inherited dynamics.

For practitioners, this approach offers a creative and embodied avenue for therapeutic work, bridging the gap between relational ethics and experiential modalities. Using sandtray allows for non-intrusive exploration, making it particularly effective for clients who struggle to verbally articulate their experiences.

References

- Boszormenyi-Nagy, I., & Krasner, B. (1986). *Between give and take: A clinical guide to contextual therapy*. Brunner/Mazel.
- Blom, R. (2004). *The handbook of Gestalt play therapy: Practical guidelines for child therapists*. Jessica Kingsley Publishers.
- Fowers, B. J., & Wenger, A. (1997). Are trustworthiness and fairness enough? Contextual family therapy and the good family. *Journal of Marital and Family Therapy*, 23(2), 153-169. <https://doi.org/10.1111/j.1752-0606.1997.tb00240.x>
- Hargrave, T. D., & Pfitzer, F. (2004). *The new contextual therapy: Guiding the power of give and take*. Brunner-Routledge.
- Homeyer, L. E., & Lyles, M. R. (2022). *Advanced sandtray therapy: Digging deeper into clinical practice*. Routledge.
- Homeyer, L. E., & Sweeney, D. S. (2022). *Sandtray therapy: A practical manual* (4th ed.). Routledge.
- Killam, W. K., Degges-White, S., & Michel, R. E. (Eds.). (2016). *Career counseling interventions: Practice with diverse clients*. Springer Publishing Company.
- McGoldrick, M., Gerson, R., & Petry, S. (2008). *Genograms: Assessment and intervention* (3rd ed.). W.W. Norton & Company.
- McGoldrick, M., & Laszloffy, T. (1998). *You can go home again: Reconnecting with your family* (3rd ed.). W. W. Norton & Company.
- Nieuwenbroek, A. (2014). Twaalf contextuele methodieken: kompas voor een relationeethische ontmoeting. Oirschot: Quirijn Praktijkboek.
- Perls, F. S., Hefferline, R. F., & Goodman, P. (1951). *Gestalt therapy: Excitement and growth in the human personality*. Julian Press.
- Polster, E., & Polster, M. (1973). *Gestalt therapy integrated: Contours of theory and practice*. Brunner/Mazel.
- Van der Meiden, J. (2019). *Where hope resided: A qualitative study of the contextual theory and therapy of Ivan Boszormenyi-Nagy and its application for therapy and social work*. ProefschriftMaken.



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