



## A Comparison of Traditional Talk Therapy and Experiential Sandtray Approaches in Counselors in Training

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### Abstract

This study explored the comparative effects of traditional talk therapy (control group) and sandtray therapy (experiential group) on group dynamics within a true experimental design. Utilizing the Group Climate Questionnaire-Short Form (GCQ-S), we measured engagement, conflict, and avoidance among master's level counseling students. Findings revealed a significant interaction between therapy type and time on the engagement subscale, with participants in the experiential group experiencing greater increases in engagement over time. These results underscore the potential of expressive modalities in altering group dynamics and enhancing the effectiveness of group therapy in counselor education.

*Keywords:* humanistic, group counseling, sandtray, counselor education

Training in group counseling techniques is a required element of Council for Accreditation of Counseling and Related Educational Programs (CACREP) approved master's and doctoral level programs. To develop the needed skills for group facilitation, CACREP requires a didactic, as well as an experiential, component with a minimum of 10 clock hours of participation in a small group during a semester along with classroom instruction (CACREP, 2016). This combination of education and participation offers opportunities for counseling students to develop self-awareness while simultaneously learning about group dynamics (Johnson & Lambie, 2012; Yalom & Leszcz, 2020; Zhu, 2018), preparing them as group facilitators. Other benefits may include

learning about acceptance, dealing with ambiguity, vulnerability, and hostility, skill development, and confrontation as they participate as a group member but also observe group leadership in action (Johnson & Lambie, 2012; Kline et al., 1997; Shapiro et al., 1997; Yalom & Leszcz, 2020). A recent qualitative study by Lenés et al. (2024) noted

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similar findings but with the added benefits of student perception of personal and professional growth and their perceptions of programmatic components. Overall, research indicates both personal and professional benefits of group participation.

While counselor educators agree on the importance of experiential groups (Corey, 2022; Fall & Levitov, 2002; Kline et al., 1997; Osborn et al., 2003), there are no standards or consensus on the theoretical approach or best method for incorporating this requirement. Like CACREP, The Association for Group Work (2021) suggests the importance of completing 10 hours of experiential group participation for counseling graduate students in conjunction with a group course. However, neither organization offers a specific guide for implementation. This article will review the literature regarding traditional humanistic group counseling and incorporating the use of sandtray in a humanistic experiential group for graduate counseling students.

## **Use of Sand in Group Process**

The use of sand has been included in individual therapy for many years. Lowenfeld (1950) was the first to use sand as a therapeutic medium in 1929. Since that time, it has evolved and been referred to in different theories and techniques, such as sand therapy, sandplay therapy, and sandtray therapy through the work of Kalff (2003), Oaklander (1978), Homeyer and Sweeney (2023), Armstrong (2008) and others.

The use of sand in group therapy has been successfully implemented with elementary children in schools (Kwak et al., 2020; Tan et al., 2021), preadolescents (Wang & Ray, 2007), and adolescents, showing an increase in self-esteem and a decline in depression (Kwak et al., 2020; Lee et al., 2018). However, research on group sandtray is limited, particularly quantitative studies. Lee et al. (2023) conducted group sand therapy with adolescents with delinquent behaviors and found it effective in improving depression and anxiety and for externalizing problems associated with ADHD. A systematic literature review (Roesler, 2019) revealed that sandplay therapy with individuals and groups found significant positive changes with a moderate effect size for numerous emotional issues. However, the use of group sandtray, specifically with adults, is even more limited and has been primarily conducted with graduate students in supervision.

Garrett (2017) posited that sandtray provided a tactile and expressive experience for supervisees and increased their ability to reflect, conceptualize clients, and increase awareness and perception. Anekstein et al. (2014) further noted that using sandtray in supervision can increase counselor competence. Perryman et al. (2021) conducted a qualitative study with master's level counseling students using sandtray in supervision at the semester's beginning, mid-term, and final points. Findings indicated that participant sandtrays aligned closely with stages of counselor development as they gained self-awareness, explored new perspectives, and facilitated the acceptance of their struggles while also feeling empowered.



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Few studies exist on using sandtray in group counseling in counselor education programs. Existing literature in the field cites enhancements in the coping abilities of adults and relationship enhancements between parent and child because of sand therapy (James & Martin, 2002). However, a conceptual article by McCormick et al. (2021) posited that group sand interventions and other creative methodologies likely would benefit individuals in group-based approaches due to their ability to allow individuals to express themselves nonlinguistic and encourage group problem-solving. The current study sought to add to the literature on group-based sandtray and enhance the efficacy of past literature on the topic.

## **Humanistic Sandtray Groups**

Based on Carl Rogers's work (1942), humanistic group counseling is unstructured and non-directive. This client-centered approach was first developed for work with individuals but later extended for use with groups, believing individuals can fully develop if the right conditions are present. This approach focuses on the core conditions posited by Rogers (1970): empathy, genuineness, warmth, and unconditional positive regard, encouraging participants to be responsible for the group's direction rather than the group facilitator. While embracing the core conditions, the role of the facilitator is to create a safe environment for participants to interact honestly, gaining self-awareness and the ability to create change for themselves (Rogers, 1970). In this environment, clients become self-actualized, characterized by openness to new experiences, self-confidence, development of self-appraisal, and a desire for growth (Rogers, 1961).

Humanistic sandtray encompasses the core conditions established by Rogers (1970), highlighting the relationship as the therapeutic change agent. Even and Armstrong (2011) defined humanistic sandtray as "... a dynamic and expressive form of psychotherapy that allows clients to express their inner worlds through symbol and metaphor" (p. 395), emphasizing connecting the sandtray and miniatures with the internal experience of the client (Hansen, 2005). This study incorporated humanistic sandtray into a counselor education group course for master's students.

## **Purpose of the Study**

The primary aim of this study was to explore the comparative effects of two distinct therapeutic approaches—traditional talk therapy (control group) and sandtray therapy (experiential group)—on the dynamics of group therapy sessions for master's level counselors in training. Specifically, the researchers sought to understand how these different therapeutic modalities influence Engagement, Conflict, and Avoidance within the group setting over a series of seven sessions.



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Three main research questions were posited at the outset of this study: "How do traditional talk therapy and sandtray therapy differ in influencing participants' levels of engagement in group therapy sessions," "What impact do these therapeutic approaches have on the levels of conflict within the group sessions," and "How do the two therapies affect avoidance behaviors among participants over the course of the sessions?"

Correspondingly, the hypotheses were that the experiential group utilizing sandtray therapy, an expressive modality, would lead to significantly higher engagement levels, lower conflict levels, and reduced avoidance behaviors in group sessions compared to traditional talk therapy (Gold et al., 2013). These hypotheses were grounded in the theoretical proposition that expressive therapies, by facilitating non-verbal communication and creative expression, might offer unique advantages in promoting more profound and cohesive group interactions (Gullo et al., 2015).

## Methodology

### Participants

Participants included 15 master's level counseling students from a CACREP-accredited program at a prominent university in the southern region of the United States. These students were enrolled in their group therapy course. They were fulfilling their program's requirement for 10 hours of experiential group therapy—a crucial component of their clinical training as stipulated by CACREP standards. The cohort comprised a diverse group in terms of age, ranging from 23 to 47 years. Schweiger et al. (2012) estimated that 76% of the annual graduates from counseling programs identified as female. The demographic composition of the participants included 12 females and three males, reflecting common gender distributions within counselor education programs (CACREP, 2023). Ethnically, the group included ten individuals who identified as white/Caucasian, one as black/African American, and two as multi-racial, offering little diversity.

### Measure

The researchers used MacKenzie's (1983) Group Climate Questionnaire-Short Form (GCQ-S) to quantify the nuanced aspects of group dynamics through a concise yet comprehensive framework. Comprising 12 items, the GCQ-S utilizes a 6-point Likert scale for responses, ranging from 0 ("not at all") to 6 ("extremely"), enabling participants to express the extent of their agreement with each statement accurately. This scale captured the multifaceted nature of group climate across three distinct dimensions: Engagement, Conflict, and Avoidance (MacKenzie, 1983).

On the GCQ-S, Engagement assesses the group's cohesiveness and task-oriented focus, exemplified by items like "Members actively sought to make sense of their behaviors and



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thoughts" (MacKenzie, 1983). Conflict measures interpersonal tensions and mistrust among group members, highlighted by statements like "Noticeable tensions and disagreements were present among group members" (MacKenzie, 1983). Lastly, avoidance captures the extent to which individuals rely on others within the group instead of participating actively, with representative items such as "Group discussions tended to skirt around critical issues" (MacKenzie, 1983). Each dimension is reflected through carefully chosen items to accurately represent the core attributes of group climate (MacKenzie, 1983).

The GCQ-S has proven to be a reliable and extensively validated tool in group counseling research, with Cronbach's alpha levels for its subscales ranging from .70 to .94 for engagement, .36 to .92 for avoidance, and .69 to .86 for conflict across various studies (Beal et al., 2003; Bonsaksen et al., 2011; Johnson et al., 2005). It is widely regarded as a predominant instrument for assessing group climate, effectively capturing individual members' perceptions of their emotional environment (Gullo et al., 2015; Orfanos et al., 2020). The GCQ-S has been utilized to measure climate differences across diverse group counseling settings (Bilican & McEneaney, 2018) and to explore the relationships between group climate and various therapeutic outcomes (Kivlighan et al., 2012). Recognized globally as one of the most validated group process measures (Gullo et al., 2015; Orfanos et al., 2020), the GCQ-S has been successfully applied in brief group counseling settings (Þorgeirsdóttir et al., 2015) and continues to be a preferred tool in contemporary research (Kasimatis et al., 2020). Given its comprehensive application, robust validation, and widespread recognition, the GCQ-S was selected for this study to elucidate group climate dynamics across diverse therapeutic modalities effectively.

## Procedure

Participation in the study was entirely voluntary, with students informed that their decision to participate or decline would not impact their academic standing. All participants provided written informed consent after being apprised of the study's aims, procedures, potential benefits, and risks. Additionally, participants completed a demographic questionnaire to gather background information relevant to the study.

Random assignment of participants placed them into one of two therapeutic intervention groups: a traditional talk therapy (control) group ( $n=7$ ) or a sandtray therapy (experiential) group ( $n=8$ ). This randomization process ensured equitable distribution across the two groups, minimizing biases and potential confounding variables (Tabachnick & Fidell, 2018). Participants in both groups completed MacKenzie's (1983) Group Climate Questionnaire-Short Form (GCQ-S) after each of the seven group therapy sessions. This repeated measure allowed for the systematic assessment of group dynamics across the study period, capturing changes in Engagement, Avoidance, and Conflict as influenced by therapeutic interventions (Tabachnick & Fidell, 2018). The methodology explored the dynamics and therapeutic engagement of master's level counseling students within two distinct group therapy modalities: Traditional Talk Therapy



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(control) and Sand Tray Therapy (experiential). Both groups followed a parallel session structure, meticulously crafted to foster a conducive environment for therapeutic exploration and group cohesion.

The researchers conducted the study to meet educational requirements and contribute to the empirical understanding of therapeutic outcomes associated with different group therapy modalities. The researchers randomly assigned the student participants evenly and randomly allocated to two distinct therapeutic groups: the first, a control group utilizing traditional talk therapy techniques ( $n=7$ ), and the second, an experiential group employing sandtray therapy ( $n=8$ ). The researchers randomly assigned participants to ensure an unbiased distribution across the two treatment conditions, facilitating comparative analysis of the therapeutic efficacy and group dynamics engendered by each modality (Tabachnick & Fidell, 2007).

The traditional talk therapy group (control) engaged in sessions that prioritized verbal communication, focusing on fostering interpersonal relationships, enhancing self-awareness, and promoting behavioral change through dialogue (Badenoch & Cox, 2013). Conversely, the sandtray therapy group (experiential) utilized the expressive medium of sandtray, allowing participants to create physical representations of their thoughts and emotions, thereby accessing non-verbal modes of expression and introspection (Wang et al., 2017).

The study was conducted following the ethical guidelines set forth by the American Counseling Association (ACA) and was approved by the hosting university's Institutional Review Board (IRB). Participation in the study was voluntary, with all participants providing informed consent after being assured of confidentiality, the right to withdraw at any time and the absence of any adverse consequences on their academic standing. This ethical consideration was paramount to ensure the integrity of the research process and the welfare of the participants.

In this study, the facilitation of both the traditional talk therapy (control) and sandtray therapy (experiential) groups was undertaken by a single doctoral student, ensuring a controlled approach to group leadership and minimizing variations in facilitation style that could influence the outcomes (Kivlighan et al., 2012). The group leader, a 34-year-old White/Caucasian female, was actively enrolled in a CACREP-accredited doctoral program specializing in counselor education and supervision. She was a licensed associate counselor (LAC) within the state where the research was conducted and was also a Registered Play Therapist (RPT). As a doctoral candidate, she practiced under the rigorous supervision of the counselor education department's faculty, participating in at least 1 hour of weekly supervision. This doctoral-level supervision was complemented by additional supervision aligned with state licensure requirements, ensuring her practice met the high standards expected in professional counseling settings.

The group leader's approach to facilitation was rooted in person-centered therapy principles, emphasizing empathy, unconditional positive regard, and congruence in her interactions with group members (Rogers, 1961). In the traditional talk therapy (control) group, she employed person-centered techniques to foster a supportive, non-judgmental environment



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that encouraged members to explore their feelings, thoughts, and behaviors verbally. This approach aimed to enhance self-understanding among members and promote personal growth within the group context (Goor et al., 2022).

For the sandtray therapy (experiential) group, while maintaining the foundational principles of person-centered therapy, the group leader incorporated a sand tray as an additional therapeutic tool. This method allowed members to express themselves non-verbally by creating scenes in a sandtray using a variety of miniature figures and objects (Anekstein et al., 2014; Stark & Frels, 2014). The group leader facilitated discussions around these sandtray creations, helping members to articulate their emotional experiences and gain insights into their interpersonal dynamics and internal psychological states (Homeyer, 2016). The integration of sandtray therapy aimed to deepen emotional involvement and insight by providing a tangible medium through which members could externalize and examine their inner worlds (Bratton et al., 2008; Wang et al., 2017).

By having a single doctoral student lead both groups, the study aimed to isolate the therapeutic effects of the sandtray modality from those of the facilitator's style. This design choice ensured that any observed differences in group dynamics, engagement, conflict, and avoidance could be attributed more directly to the therapeutic interventions rather than group leadership variations (Tabachnick & Fedell, 2007). The following section provides the outlines of the weekly group sessions.

## **Group Therapy Procedures**

*Initial Session:* The first session for both therapy groups was foundational, emphasizing confidentiality, setting group norms and rules collaboratively, and guiding participants to establish personal and collective therapy goals. This session laid the groundwork for a focused and goal-oriented therapeutic journey (Yalom & Leszcz, 2020).

*Sessions 2-5:* In these sessions, a consistent framework was maintained, specifically, starting with a group member check-in, then engaging in the core therapy process, and concluding with a group member check-out. This structure was pivotal for encouraging deep exploration of therapeutic topics and enhancing participant engagement with the therapeutic process (Kaklauskas & Greene, 2019).

*Session 6:* The penultimate session mirrored the structure of the previous ones, with a distinctive emphasis on initiating discussions around termination, including brainstorming a termination activity for the next and final session. This shift aimed to prepare participants for the therapy experience's conclusion, starting the closure process (Corey, 2022).

*Session 7:* The final session was dedicated to termination activities, encompassing group processing and reflective discussions centered on individual and collective goals, key takeaways, and the cumulative journey of the therapy experience (Kaklauskas & Greene, 2019).



### ***Sandtray Therapy Group Specifics***

In addition to the shared structure with the traditional talk therapy (control) group, the sandtray therapy (experiential) group incorporated a unique element during the individual check-in phase. Participants selected a sandtray figure representing their current emotional or mental state, utilizing this figure as a springboard for their check-in. This method provided a tangible means for participants to express and share personal experiences (Homeyer, 2016). After each individual shared, they placed their figure into a communal sand tray for a moment of collective reflection. At the end of each session, the facilitator photographed the communal sandtray, documenting the group's evolution and thematic shifts over time. This visual record, alongside carefully resetting the sand tray, offered a unique narrative of the group's progression and the dynamic interplay of individual contributions within the shared therapeutic space.

### **Data Analysis**

Data were analyzed using a two-way repeated measures ANOVA to examine the effects of therapy type (traditional talk therapy vs. sandtray therapy) and time (session number) on each of the three GCQ-S subscales: Engagement, Conflict, and Avoidance (Tabachnick & Fidell, 2018). The interaction effect between therapy type and time was also assessed for each subscale. Mauchly's test tested sphericity assumptions (Mauchly, 1940). Post hoc analyses, using Bonferroni-adjusted pairwise comparisons (Etymologia: Bonferroni correction, 2015), were conducted to explore significant main or interaction effects. Effect sizes were reported using partial eta squared ( $\eta^2$ ) to quantify the magnitude of observed effects.

### **Results**

The researchers investigated the differential impacts of traditional talk therapy (control) and sandtray therapy(experiential) on group dynamics, as measured by the Engagement, Avoidance, and Conflict subscales of the GCQ-S (MacKenzie, 1983). Data were analyzed using a two-way repeated measures ANOVA with therapy type (traditional talk therapy vs. sandtray therapy) as the between-subjects factor and time (seven sessions) as the within-subjects factor (Tabachnick & Fidell, 2018). Throughout the study, the researchers tested several assumptions underlying the use of two-way repeated measures ANOVA to validate the appropriateness of the statistical analysis for the Engagement subscale across the seven group therapy sessions. The researchers evaluated the traditional talk therapy and sandtray therapy groups for normality, homogeneity of variances, and homogeneity of covariances at each data collection point (Tabachnick & Fidell, 2007).

The Shapiro-Wilk test assessed the assumption of normalcy (Shapiro & Wilk, 1965). The test results were non-significant for both groups across all sessions ( $p > 0.05$ ), indicating that the engagement scores were normally distributed. Normal Q-Q Plots for each group at each session revealed points that fell along the reference line, further confirming the adherence to normality.



Levene's Test of homogeneity of variance was employed to ascertain that the variances of engagement scores were equal across both groups. The significance values obtained from this test were greater than 0.05 for all sessions, suggesting no significant differences in variances between the traditional talk therapy and sandtray therapy groups, thereby meeting the assumption of homogeneity of variances. Box's Test of equality of covariance matrices tested the assumption that the covariance matrices of the engagement scores were equivalent across groups. The Box's M was non-significant ( $p > 0.05$ ) for each session, which supports the presumption that both groups demonstrated similar covariances in their engagement scores across all sessions.

### Engagement

In examining the Engagement subscale results for the groups undergoing traditional talk therapy and sandtray therapy, Mauchly's test indicated a violation of the assumption of sphericity ( $\chi^2(2) = 0.0429, p < 0.05$ ). Consequently, the Greenhouse-Geisser correction was applied to adjust the degrees of freedom for the repeated measures. The adjusted analysis revealed a statistically significant interaction between the type of therapy group and session on the engagement subscale,  $F(6, 78) = 20.12, p < .001$ , with a large effect size (partial  $\eta^2 = .606$ ). This interaction suggests that the differences in engagement between the traditional talk therapy and sandtray therapy groups varied across the different sessions.

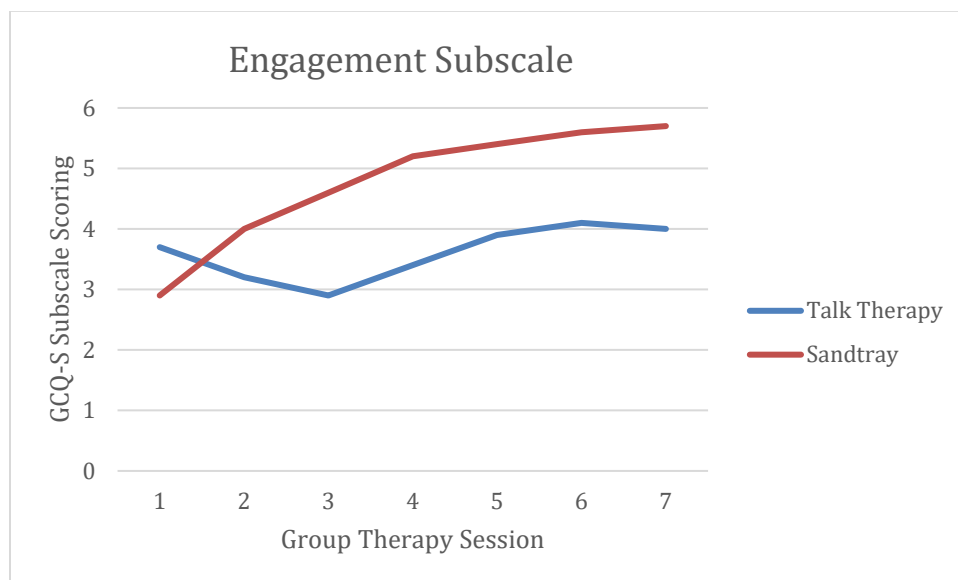
Follow-up simple main effect analyses were conducted to further investigate the interaction effect. These analyses yielded statistically significant differences between the two groups at all sessions: Session 1:  $F(1, 13) = 17.1, p < .001$ , partial  $\eta^2 = .568$ ; Session 2:  $F(1, 13) = 8.43, p = .012$ , partial  $\eta^2 = .393$ ; Session 3:  $F(1, 13) = 4.89, p = .046$ , partial  $\eta^2 = .273$ ; Session 4:  $F(1, 13) = 5.61, p = .034$ , partial  $\eta^2 = .301$ ; Session 5:  $F(1, 13) = 13.9, p = .003$ , partial  $\eta^2 = .516$ ; Session 6:  $F(1, 13) = 39.7, p < .001$ , partial  $\eta^2 = .753$ ; Session 7:  $F(1, 13) = 38.7, p < .001$ , partial  $\eta^2 = .748$ . These findings indicate that the sandtray therapy group consistently demonstrated higher engagement levels than the traditional talk therapy group, with notable differences emerging from sessions 1 through 5.

Within the sandtray group, simple main effects for session showed statistically significant results,  $F(6, 42) = 370.4, p < .001$ , with an exceptionally high effect size (partial  $\eta^2 = .910$ ), denoting significant changes in engagement across sessions. Further analysis revealed significant increases in engagement from sessions 1 to 5. However, no significant differences in engagement levels were observed between sessions 5, 6, and 7, suggesting a plateau effect where maximum engagement may have been reached. See Figure 1.



**Figure 1**

*Comparison of Traditional Talk Therapy and Sandtray Therapy by Group Therapy Session on the Engagement Sub-scale of the GCQ-S*



The engagement subscale findings highlight the impact of sandtray therapy on maintaining high levels of group cohesiveness and task-oriented focus throughout the therapeutic process. These results underscore the potential of sandtray therapy as a modality that encourages active participation and emotional involvement in a group therapy setting.

### **Conflict**

Mauchly's test of sphericity suggested that the assumption of sphericity was upheld for the two-way interaction between group type and session time on the conflict subscale ( $\chi^2(2) = 0.174, p < 0.052$ ). Consequently, no correction was required, and the degrees of freedom were left unadjusted for the analysis. A two-way repeated measures ANOVA was conducted on the conflict subscale scores, revealing a statistically significant interaction between the type of therapy group (traditional talk therapy vs. sandtray therapy) and session time,  $F(6, 78) = 87.6, p < .001$ , with a very large effect size (partial  $\eta^2 = .871$ ). This interaction indicates that the relationship between group type and conflict levels changed significantly over the course of the seven sessions.

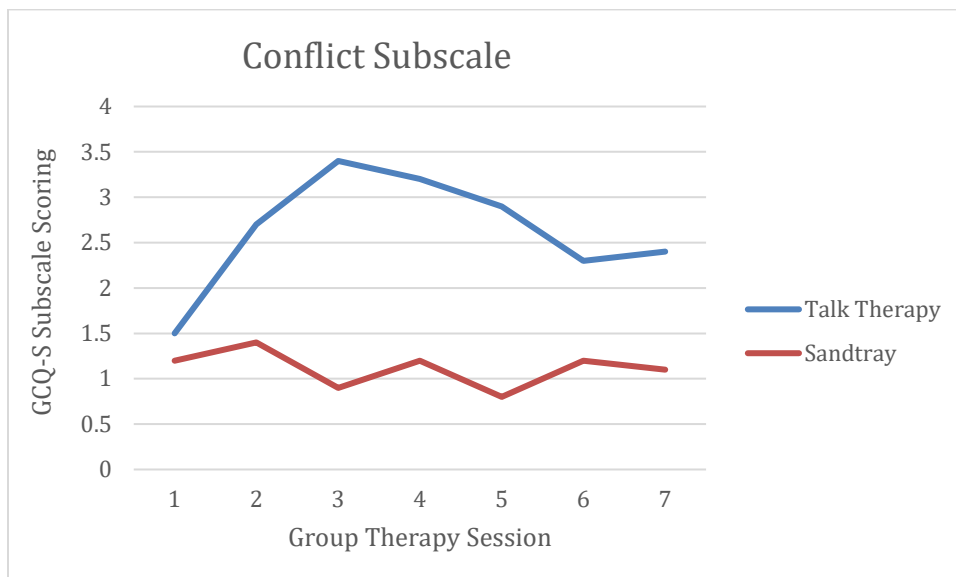


Follow-up simple main effects analyses showed statistically significant differences between the groups at every session, with the following results: Session 1:  $F(1, 13) = 6.99, p = .020, \text{partial } \eta^2 = .350$ ; Session 2:  $F(1, 13) = 13.0, p = .003, \text{partial } \eta^2 = .501$ ; Session 3:  $F(1, 13) = 81.7, p < .001, \text{partial } \eta^2 = .863$ ; Session 4:  $F(1, 13) = 129, p < .001, \text{partial } \eta^2 = .908$ ; Session 5:  $F(1, 13) = 35.9, p < .001, \text{partial } \eta^2 = .734$ ; Session 6:  $F(1, 13) = 30.1, p < .001, \text{partial } \eta^2 = .698$ ; Session 7:  $F(1, 13) = 24.8, p < .001, \text{partial } \eta^2 = .656$ .

Additionally, within-group analysis for the sandtray therapy group indicated statistically significant differences across sessions,  $F(6, 42) = 135, p < .001, \text{partial } \eta^2 = .951$ . Further examination showed statistically significant changes in conflict scores from Session 2 through Session 7, with no significant difference noted in Session 1. See Figure 2.

**Figure 2**

*Comparison of Traditional Talk Therapy and Sandtray Therapy by Group Therapy Session on the Conflict Sub-scale of the GCQ-S*



The results suggest that sandtray therapy had a pronounced impact on reducing conflict within the group setting across the sessions. Initially, both groups exhibited similar levels of conflict; however, as the sessions progressed, the sandtray therapy group experienced a more significant reduction in conflict scores. This reduction in conflict scores could be due to the therapeutic effects of the sandtray modality, which may provide a non-confrontational medium for exploring and resolving interpersonal tensions. The expressive nature of sandtray therapy



allows participants to project and work through conflicts symbolically, which may contribute to the observed decrease in overt conflict as the sessions advanced.

### **Avoidance**

The assessment of the avoidance subscale data began with Mauchly's test of sphericity, which indicated a violation of the sphericity assumption for the two-way interaction ( $\chi^2(2) = 0.00131, p < 0.05$ ). Consequently, the Greenhouse-Geisser correction was applied to adjust for this violation. The corrected results revealed a statistically significant interaction between the type of therapy group (traditional talk therapy vs. sandtray therapy) and session time on the avoidance subscale,  $F(6, 78) = 18.3, p < .001$ , with a moderate effect size (partial  $\eta^2 = .341$ ). This interaction suggests that the relationship between group type and avoidance levels changed significantly over time.

Follow-up simple main effect analyses were conducted to explore this interaction further: Session 1: No statistically significant differences were found between the groups ( $p > .05$ ); Session 2: There was a statistically significant difference between the groups,  $F(1, 13) = 13.3, p = .003$ , with a substantial effect size (partial  $\eta^2 = .506$ ); Session 3: A statistically significant difference was observed,  $F(1, 13) = 17.7, p = .001$ , (partial  $\eta^2 = .576$ ); Session 4: A statistically significant difference continued,  $F(1, 13) = 19.9, p < .001$ , (partial  $\eta^2 = .605$ ); Session 5: Statistically significant differences were maintained,  $F(1, 13) = 18.8, p < .001$ , (partial  $\eta^2 = .591$ ); Session 6: Differences remained significant,  $F(1, 13) = 13.2, p = .003$ , (partial  $\eta^2 = .503$ ); Session 7: The significance persisted,  $F(1, 13) = 11.0, p = .006$ , (partial  $\eta^2 = .458$ ).

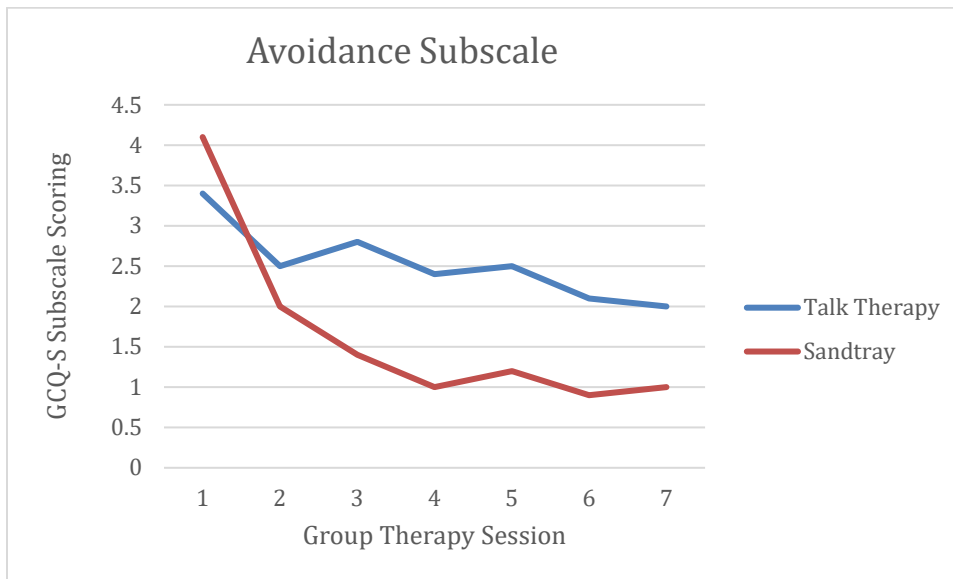
For the sandtray group, significant effects for the session were also observed, specifically,  $F(6, 42) = 81.2, p < .001$ , with an exceptionally high effect size (partial  $\eta^2 = .921$ ). Further analysis indicated significant changes in avoidance from sessions 1 through 7, except for session 4, where no significant difference was noted. See Figure 3.

The results indicate that sandtray therapy, as a medium, may facilitate a decrease in avoidance behaviors in group therapy. This therapeutic modality provides participants with a non-verbal, creative avenue for exploration and expression, which might encourage more direct engagement with difficult content and dynamics that would typically be avoided. While the traditional talk therapy group also showed changes over time, the sandtray therapy group demonstrated a more pronounced and consistent reduction in avoidance behaviors, supporting the potential utility of sandtray therapy in reducing avoidance within group therapy settings.



**Figure 3**

*Comparison of Traditional Talk Therapy and Sandtray Therapy by Group Therapy Session on the Avoidance Sub-scale of the GCQ-S*

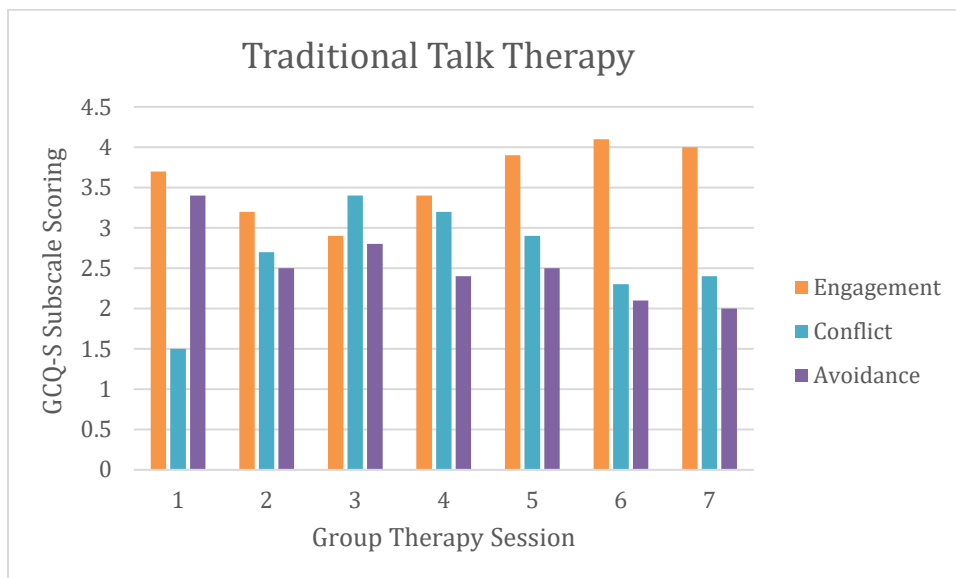


### Discussion

The traditional talk therapy (control) group exhibited trends in engagement, conflict, and avoidance that align closely with Yalom's stages of group therapy, providing an archetypal pattern of the therapeutic process (Yalom & Leszcz, 2020). During the initial forming stage, engagement levels were high as participants were orienting themselves to the group setting and their peers. This engagement slightly waned during the storming phase, where conflict naturally emerged as individuals navigated interpersonal boundaries and the group's norms (Corey, 2022). As the group transitioned into the norming stage, engagement levels rose again, with a corresponding decrease in conflict and avoidance, indicating the development of group cohesion and establishing a therapeutic alliance (Kaklauskas & Greene, 2019). Avoidance behaviors tended to decrease over time in the traditional talk therapy group, reflecting an increased willingness to engage with challenging topics as trust and comfort within the group grew (Corey, 2022). Conflict experienced a rise and then a fall, in line with the expected testing and resolution of interpersonal issues as the group matured and members learned to manage differences constructively (Yalom & Leszcz, 2020). See Figure 4.



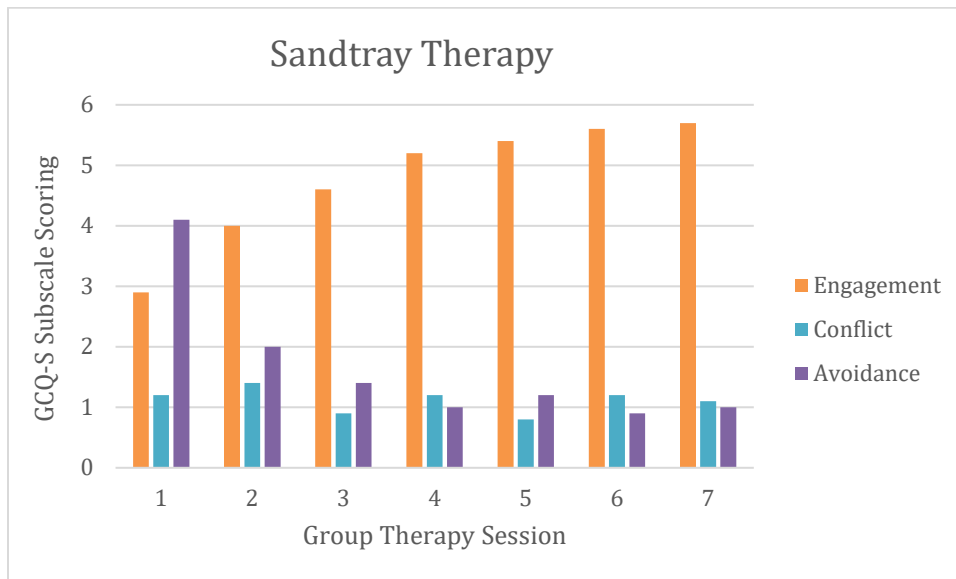
**Figure 4**  
*Changes in GCQ-S Sub-Scales Across Traditional Talk Therapy Sessions*



The sandtray therapy group, however, exhibited a distinctive departure from Yalom's traditional stages of group therapy, particularly in the phases typically characterized by heightened conflict and avoidance. According to Yalom's model, group therapy typically progresses through stages that include initial politeness, followed by conflict (storming), and eventually moving towards productive group work (norming and performing) (Yalom & Leszcz, 2020). However, the sandtray therapy group demonstrated an atypical trajectory, with notably low levels of conflict from the outset and notably low levels of avoidance across sessions 2-7. This deviation suggests that the expressive and non-verbal nature of sandtray therapy facilitates a different kind of group interaction, where emotional and interpersonal tensions are processed symbolically through the sandtray medium rather than through direct verbal confrontation (Bahrudin & Ku Johari, 2020; Holttum, 2018). This unique modality allows participants to externalize and explore their feelings in a controlled, less confrontational space, which may circumvent the traditional storming phase and promote quicker progression to deeper group cohesion and therapeutic Engagement (Mason, 2022; Wang et al., 2017). See Figure 5.



**Figure 5**  
*Changes in GCQ-S Sub-Scales Across Sandtray Therapy Sessions*



### Exploring Initial Avoidance

The data revealed that during the initial session of the sandtray therapy group, there was a pattern of higher avoidance and slightly lower engagement than in the traditional talk therapy group. This phenomenon is attributed to the novelty and inherent characteristics of the sandtray therapy method. Participants were encountering sandtray therapy for the first time, which might have elicited feelings of uncertainty or self-consciousness about engaging with this new form of self-expression (Houin & Perryman, 2021). While therapeutically potent, the tactile and visual elements of sandtray therapy require participants to engage in a less familiar communication form than verbal discourse. This unfamiliarity may lead to initial hesitation or reluctance, contributing to higher levels of avoidance and lower engagement as participants navigate their comfort levels with the medium.

As the sessions progressed, however, the sandtray group began to exhibit a significant increase in engagement, suggesting that as participants became more accustomed to the expressive nature of the therapy, their comfort and ability to engage more deeply also increased, like findings in a study by Houin and Perryman (2021) using creative arts therapies with master's level counseling students. Initially, students sought more direction when using creative arts, but with time, they became more confident to process through this medium and be vulnerable. This adjustment period was crucial as the tangible interaction with the sand and figures slowly



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became a compelling tool for expression and personal insight. This gravitation toward higher engagement mirrors previous findings on increased engagement in relationships over time in couples' sandtray work (Mason, 2022). However, it more potently aligns with a 2017 article by Wang et al. that evaluated the use of sand with college students. Both Wang et al. (2017) and the current research showed lower engagement early in the sand group work; however, it increased after a few sessions in both scenarios. The initial lower engagement and higher avoidance thus reflect a transitional phase where participants are still exploring and understanding the dynamics and potential of the sandtray environment (Wang et al., 2017). Over time, the direct and creative interaction with the sand tray likely facilitated a reduction in avoidance behaviors, as the medium provided a safe, contained space to express and process complex emotions and interpersonal dynamics without the need for direct verbal confrontation.

The sandtray group's tendency to reduce conflict and coerce discussion further aligns with prior findings about sandtray couple work and group work (Wang et al., 2007, 2017; Mason, 2017). The enhanced engagement seen, along with lowered avoidance, indicates a higher level of focus in the group by the members, which was another unexpected benefit in past sandtray research (Wang & Ray, 2007). Continued research in sandtray groups is needed to continue to uncover these underlying benefits of the approach.

## Limitations

The present study has limitations. Foremost, the study compared group-based approaches, which are always vulnerable to confounding variables existing within groups that result in significant data variations. Further study and repeated research will help secure and clarify the effects of group sandtray compared to other group methods.

While counseling groups contain multiple participants, they are relatively small for evaluation, limiting the generalizability of each group's data. A single case design could offer further insight into the impact, as could a mixed method design that includes qualitative inquiry. Long-term evaluation of the impact of the groups would further inform the study. Future studies should longitudinally evaluate the impacts of humanistic sandtray groups.

Finally, there was relatively little diversity in the participants studied. It is essential to consider the impact of systemic racism on minoritized individuals and the effect in a group counseling setting. There is a possibility that they could feel more anxiety in groups with predominantly White counterparts and a White leader. Further studies should include those with diverse individuals to generalize the findings to other populations.



## Conclusions

The researchers initiated this investigation prompted by the increasing interest in incorporating expressive therapies into counseling training programs (Houin & Perryman, 2021) and the need for empirical evidence supporting their efficacy in enhancing group cohesion and therapeutic outcomes (Badenoch & Cox, 2013). Findings from this study revealed a significant interaction between therapy type and time on the engagement subscale, with participants in the experiential group experiencing more significant increases in engagement over time. These results emphasize the potential of expressive modalities, specifically humanistic sandtray, in altering group dynamics and enhancing the effectiveness of group therapy in counselor education.

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