

The Effectiveness of Child-centered Play Therapy on the Moral Intelligence and Bullying of Elementary Students

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Abstract: The present study was conducted to investigate the effectiveness of child-centred play therapy on the moral intelligence and bullying of primary school students. The statistical population studied was all primary school students in Shahriar city. The sampling method was available and a counselling centre called the "Hal Khoob Andisheh" Centre was selected. During the first four months of 2019, a moral intelligence and bullying test was performed on 60 elementary school students who came to the centre for behavioural disorders related to the subject. 30 students were selected who received the lowest scores in the moral intelligence test and the highest scores in the bullying test. The 30 individuals were then randomly assigned to control and experiment with 2 groups of 15 individuals. Data collection tools included Michele Borba's Moral Intelligence Questionnaire (1950) and Ellie Noise's Bullying Questionnaire (2001). Then, 11 30-minute sessions of child-centred play therapy were performed on the target group (experiments) and at the end of the session, two groups of experiments and post-test control were performed and the results were analysed. Results at a significance level of 0.001 showed that child-centred play therapy had an effect on the moral intelligence and bullying of elementary students.

Keywords: Child-centered play therapy, moral intelligence, bullying.

Introduction

Many human behaviors and actions are rooted in principles and moral values and is affected by it. Considering ethical principles has important implications for accepting differences and realizing different values (Flite & Harman, 2013). Morality is a set of teachings that can be summed up in two categories: protection of life and conflict with evil. Acquiring values and developing moral thinking is one of the most important tasks. Morality is one of the most complex components of human behavior. Parents, teachers, and leaders want to educate ethical people, and morality seems to increase people's sense of security and confidence. Ethics is defined as a set of principles that is often used as a prism for guidance. Many behaviors and actions of individuals are influenced by moral values. A frame work of the ethical principles for the proper functioning of human beings is the discussion of moral intelligence (Arasteh, 2013). Moral intelligence is a new concept that includes attention to human life and nature, economic and social welfare, free and honest communication and civil rights, which have different dimensions in relation to moral reasoning (Yaghoubi, Fathi and Mohammadzadeh, 2018).

In contrast, bullying is a problematic behavior in late childhood and adolescence that has recently attracted the attention of researchers and psychologists and has been the focus of many studies. Bullying is an intentional aggressive and annoying behavior that is repeatedly used by an individual and a group of people over a period of time and involves an imbalance of power (Olweus, 2012). Bullying is a major issue because it is associated with school injuries, mental health problems, and future injuries and

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delinquency. Bullying issue is a common issue in school today and is highly prevalent in schools (Cook, Williams, Guerra & Kim, 2010). In fact, children's behavioral disorders are common and disabling disorders that cause many problems for teachers, families, and children themselves, and are associated with many social issues. Researchers have found that behavioral disorders are usually first seen in the early years of elementary school. Behavioral disorders have a significant negative effect on children's academic and social performance and increase the risk of developing mental illness in adulthood (Safari, Faramarzi and Abedi, 2014). Disobedience or bullying disorder is reported when children do not fully meet the diagnostic criteria for the conduct disorder, for example, they do not have aggression and violence, but they constantly show outbursts of anger, disobedience and obstinacy, and actually do things that annoy others or provoke others to react hostilely (Ganji, 2014).

Frank (1982) believes that playing is a way for children to learn something that no one else can teach them. Playing is a way to explore and determine the real world of space and time, objects, animals, structures and people. By learning to play, children learn to live in the world of our meanings and values, and to explore, experiment, and learn as their own way. The child's self-motivated and self-created activities enable him/her to conceptualize, give structure, and get to tangible levels the experiences and emotions he/she spends on them. In this sense, play provides opportunities for the child to explore situations that are distressing, conflicting, and confusing to him/her. The young child, in particular, lacks semantic fluidity because his perceptual processes are constantly evolving and changing, and different types of play equipment seem to be the ideal tool for expressing his feelings and attitudes appropriately (Landreth, 1997). In non-guided play therapy (child-centered) no effort is made to control or change the child, and the main premise is that the child's behavior is always due to him/her desire for complete self-actualization. Non-demonstrative play therapy goals include self-awareness and self-guidance in the child. The therapist has a well-equipped playroom and the child is free to choose whether to play or sit quietly. The therapist actively reflects the child's thoughts and feelings, and believes that when the child's feelings are expressed, identified, and accepted, the child can accept them and then act freely to deal with those feelings. In line with the impact of child-centered play therapy, some researchers have shown that this treatment affects children's behavioral problems.

Jalali, Kar Ahmadi, Molavi and Aghaei (2011) showed in their research that group play therapy has affected the specific fears of children aged 5 to 11 years and has significantly reduced this fear. Asli Azad et al. (2012) also showed in a study that child-centered play therapy has an effect on anxiety and depression in girls with anxiety disorder and depression in primary school. In this regard, Sarihi, Pouransai and Nik Akhlaq (2015) during the study of the effectiveness of group play therapy on children's behavioral problems found that group play therapy significantly reduces children's behavioral problems. Masoudi (2016) also showed in a study that child-centered play therapy has an effect on self-control and improvement of impulsive behaviors in single-parent primary school children. Kazemi Zahrani, Ghorbani, Nikpai and Ebrahimi Jozdani (2019) examined the effectiveness of dramatic play therapy on academic motivation, moral judgment, and aggression in elementary school students in their research and showed that dramatic play therapy significantly affects students' academic motivation, moral judgment, and aggression. In a study of the effects of child-centered play therapy on the variables of bullying and poor social skills, Meany-Walen & Teeling (2018) showed that child-centered play therapy had a significant effect on children's bullying and also increased their level of social skills. Schottelkorb, Swan & Ogawa (2019) studied the effect of child-centered play therapy on children with autism spectrum disorders. The results showed that child-centered play therapy sessions reduced behavioral symptoms such as external problems, attention deficit disorder, and anxiety. According to previous research and reviewing the research mentioned in this section, it is possible to find the lack of various studies in the field of moral intelligence and bullying, as well as the effectiveness of various therapeutic approaches to these disorders. Accordingly, the researcher seeks to investigate the effectiveness of child-centered play therapy on the moral intelligence and bullying of elementary students.

Method

The aim of the present study is applied research and in terms of the type of research method, it is semi-experimental with pre-test-post-test design. The study population is all primary school students in Shahriar city with 48532 students. Sampling was performed by available method, so that Andisheh region was selected from different regions of Shahriar city and one of the counseling centers of this region was selected as a counseling center called "Hal Khoob Andisheh" center. During the first four months of 1398, moral and bullying intelligence tests were performed on 60 elementary school students who came to the center for behavioral disorders related to the subject. 30 students were selected who received the lowest scores in the moral intelligence test and the highest scores in the bullying test. The 30 individuals were then randomly assigned to control and experiment with 2 groups of 15 individuals. The experimental group underwent 11 half-hour child-centered play therapy sessions. However, the control group did not receive any intervention. After 11 sessions, test and post-test control were performed on 2 experimental group.

Criteria for entering the research

- 1- Subjects should be clients of "*Hal-e Khoob Andisheh*" counseling center.
- 2- During the intervention, the subjects should not participate in any counseling or psychotherapy program at the same time.

Criteria for exiting the research

- 1- Absence of more than three sessions of play therapy sessions.

Moral Considerations

In this study, the moral considerations that have been observed are as follows:

- 1- All participants in the study, participated in the study voluntarily.
- 2- The information was kept confidential without mentioning name or surname.
- 3- A sense of trust in the questioner was created in respondents to the questionnaires.
- 4- At the request of the participants, the results of the research will be provided to them.

Data Collection Tools

- 1- Michele Borba's moral Intelligence Questionnaire (1950)

This questionnaire has 33 items after validation in Iran. And its purpose is to measure children's moral intelligence, and its subscales are: self-control, empathy, conscience, tolerance, respect and justice (Amini Moghadam, Rezaei and Makvand Hosseini, 1397). In order to score this questionnaire, values for each of the options (never = 1), (sometimes = 2), (usually = 3), (most of the time = 4) and (always = 5) have been considered. Scoring questions 1 to 7 is reversed. Questions 1 to 7 for self-assessment, questions 8 to 14 for measuring empathy, questions 15 to 19 for measuring conscience, questions 20 to 24 for measuring tolerance, questions 25 to 29 for measuring respect, and questions 30 to 33 are intended to measure justice. The dimensions and components of the questionnaire are as follows: This questionnaire is based on the Likert scale (never 1; low 2; somewhat 3; high 4; very high 5). If the score of the questionnaire is between 23 and 61, the level of moral intelligence is weak. If the score of the questionnaire is between 61 and 99, the level of moral intelligence is moderate. If the scores are above 99, the level of moral intelligence is very good (Amini Moghadam et al., 1397).

- 2- Eli Noiz Bullying Questionnaire (2001)

The bullying questionnaire was designed by Eli Noiz in 2001. The scale has 18 items and three components, with a five-point Likert scale (never to forever) and each item has a value between 1 and 5; and measures bullying with questions such as: (I make other students upset so i would laugh). A score between 18 and 30 indicates a low bullying level; a score between 30 and 60 indicates a moderate bullying level, and a score above 60 indicates a high bullying level. In Chalmeh research (1392), the validity of the questionnaire has been confirmed by professors and experts in this field. Also, the reliability of the questionnaire was obtained above 0.70 from Cronbach's alpha method.

The number of members of the control group was 15 and the number of members of the experimental group was 15. The experimental group underwent child-centered play therapy sessions. This intervention was performed for 11 sessions and each for half-hour session for the experimental group.

The control group did not receive any programs and only pre-tests and post-tests were performed on them. After the end of the sessions, post-test was performed by both experimental and control groups and the results were statistically analyzed. In this study, SPSS 24 software was used to analyze the data and statistical methods were used as follows: Use of average descriptive statistics and standard deviation to describe research variables; Clomogrov-Smirnov test (to ensure that the distribution of scores is normal); Dispersion matrix homogeneity test, variance homogeneity and regression line homogeneity; ANCOVA and MANCOVA covariance analysis for research hypothesis testing. Table 1 summarizes the treatment sessions.

Table (1): Content of 11 child-centered play therapy sessions (Source: Landerst, 1997)

Sessions	Goals
1 st session	Guiding the child to the playroom and getting acquainted with the equipment in the room and communicating with the therapist and the available toys, the child is completely free in all sessions and has the right to choose.
2 nd session	Playing with animals and humanoid toys will be to relieve the child's emotions about the people around him/her
3 rd session	Play with the dough and make whatever the child needs to do
4 th session	Play with colors to vent the excitement and whatever the child needs to do
5 th session	Playing with puppets and making a play by a child will be to his/her liking
6 th session	Play with disposable items to relieve the excitement that the child can do with whatever they want
7 th session	Play with Lego freely by the child
8 th session	The game with internal and external masks to identify and regulate the child's emotional experiences
9 th session	Emotion picture games that will help develop the child's communication skills and moral intelligence
10 th session	Playing with sand will help reduce anxiety, anger and improve their relationships
11 th session	Painting and expressing the effect of play therapy effectiveness and review on the treatment process

Findings

The results showed that the highest frequency of the sample was in girls with 17 subjects. In other words, among the 30 samples, 13 were boys and 17 were girls. Therefore, 56.6% of the sample size was girls. It should be noted that because students were in the age group of 11 and 12 years to be able to answer the questions correctly, so the age category in this section was not described. Table 2 shows the results of the K-S test (Kolmogorov-Smirnov) to examine the distribution of data related to the research variables.

Table (2): K-S test results to examine the distribution of data related to research variables

Variable	Statistical indicators		Distribution result
	P	K-S	
Moral Intelligence	0.169	0.710	Normal
Bullying	0.621	0.414	Normal
Total	0.374	0.624	Normal

According to the values of P, which are greater than 0.05, then the null hypothesis that the data distribution is normal is confirmed, thus proving that the data distribution is normal, and the first condition for testing the hypotheses is established.

The main research hypothesis: Child-centered play therapy affects the moral intelligence and bullying of elementary students.

To test this hypothesis, multivariate analysis of covariance is used because there are two dependent variables (moral intelligence and bullying).

Table (3): The main hypothesis Multivariate analysis of covariance test

Effect	Statistics	Amount	F	Degree of Freedom	Error Release Degree	Meaningful	Relative Square Eta
Education	Wilkes Lambda Test	0.128	9.34	2	25	0.001	0.395

As shown in Table 3, the significant level of Wilks Lambda test indicates that child-centered play therapy has made a significant difference, at least in one of the dependent variables. On the other hand, according to the value of Eta's relative square 0.395, we can determine that the independent variable (child-centered play therapy) explains a relatively high amount of total variance. Therefore, approximately 40% of the total variance explains the dependent variables.

Table (4): Multivariate Covariance Analysis Results Group Effects on Moral Intelligence and Bullying Variables

Sources	Dependent Variable	SS	df	MS	F	Meaningful	Eta's square	Statistical power
Group	Moral Intelligence	329.625	1	329.625	23.239	0.012	0.205	0.283
	Bullying	254.754	1	254.754	18.184	0.017	0.142	0.325
Error	Moral Intelligence	324.265	26	26.509				
	Bullying	158.521	26	14.254				
Total	Moral Intelligence	197.362	30					
	Bullying	197.548	30					

As can be seen in Table 4, the results of multivariate analysis of covariance for the variables of moral intelligence and bullying show that there is a significant difference between the post-test averages of the two groups after removing the effect of the auxiliary random variable; In other words, there is a significant difference between the moral intelligence and bullying of the experimental group and the control group. Also, the effect size (eta square) is 0.142 and the statistical power is 0.325. Therefore, the main hypothesis was confirmed.

To determine which variables differ statistically, using a single-variable covariance analysis method, individual dependent variables (moral intelligence and bullying) are compared in the experimental and control groups.

The first sub-hypothesis: Child-centered play therapy affects the moral intelligence of elementary students.

To test the first sub-hypothesis, Table 9 must be considered.

Table (5): Interaction tests of the first sub-hypothesis

Source	Total Squares of the Third Type	Degrees of Freedom	Average of Squares	Statistics F	Sig.	Partial Eta Square
Group	325.215	1	325.215	71.854	0.010	0.415
Education	247.452	1	247.452	56.632	0.012	0.325
Group * Training	325.168	1	325.168	98.715	0.014	0.424
Error	218.548	27	8.094			
Total	213452.000	30				

According to the amount of sig. in the row (training * group) which is equal to (0.014), the average score of moral intelligence compared to the group and also the training has a significant difference and from partial Eta square coefficient in the same line (0.424) it is understood that 42% of the differences in the adjusted scores are explained by these two independent variables (group and training). Therefore, the first sub-hypothesis was confirmed.

Second sub-hypothesis: Child-centered play therapy affects the bullying of elementary students.

To test the second sub-hypothesis, table 10 must be considered.

Table (6): Interaction tests of the second sub-hypothesis

Source	Total Squares of the Third Type	Degrees of Freedom	Average of Squares	Statistics F	Sig.	Partial Eta Square
Group	321.326	1	321.326	74.591	0.014	0.324
Education	174.278	1	174.278	65.216	0.012	0.418
Group * Training	325.163	1	325.163	120.141	0.012	0.325
Error	221.201	27	8.192			
Total	142532.000	30				

According to the amount of sig. in the row (training * group) which is equal to (0.012), the average bullying scores compared to the group as well as the training, have a significant difference and from partial Eta square coefficient in the same line (0.325) it is understood that 32% of the differences between the adjusted scores is explained by these two independent variables (group and training). Therefore, the second sub-hypothesis was also confirmed.

Discussion and Conclusion

The present study was conducted to investigate the effectiveness of child-centered play therapy on the moral intelligence and bullying of primary school students. The statistical population studied was all primary school students in Shahriar city. The sampling method was available and a counseling center called the "Hal Khoob Andisheh" Center was selected. During the first four months of 2019, a moral intelligence and bullying test was performed on 60 elementary school students who came to the center for behavioral disorders related to the subject. 30 students were selected who received the lowest scores in the moral intelligence test and the highest scores in the bullying test. The 30 individuals were then randomly assigned to control and experiment with 2 groups of 15 individuals. Data collection tools included Michele Borba's Moral Intelligence Questionnaire (1950) and Ellie Noise's Bullying Questionnaire (2001). Then, 11 with length of 30-minute sessions of child-centered play therapy were performed on the target group (experiments) and at the end of the sessions, post-test control were performed on both groups and the results were analyzed.

Based on the results of the main hypothesis, child-centered play therapy has affected the moral intelligence and bullying of elementary students and has raised their level of moral intelligence and reduced their bullying level, which have been aligned with the findings of Kazemi Zahrani et al. (2019), Masoudi and Colleagues (2018), Nikpour et al. (2018), Mohammad Ali Lavasani et al. (2018), Najafi and Sarpolki (2016), Kahrizi et al. (2015), Ali Akbari et al. (2014) and Arqabai et al. (2013) that found the role of storytelling and especially play therapy effective on self-control, improvement of impulsive behaviors, stubbornness, disobedience, social and educational adjustment, aggression, spelling disorder, depression, anxiety, lack of attention, moral intelligence, communication skills and In general, behavioral disorders, as well as, the results of research conducted abroad, including Scotchclurb et al. (2019), Mini Wallen and Tilling (2018), Asjad et al. (2017), Davidsan et al. (2017), Salter et al. (2016), Morgenthall (2015), Stalmacker & Ray (2015), and Shatterclub et al. (2015) who found play therapy to be effective in aggression, bullying and social skills, anxiety, social and emotional development, communication skills and behavioral disorders in general. In fact, in play, the child is the creator of her own world and directly reveals the pleasures and conflicts of his/her unconscious life. The child shows the most comforting wishes in the game; As a child grows up in his or her play, imitating what he or she knows in the adult life around him or her thinks that playing as a diagnostic and therapeutic tool in child analysis is one of the most valuable ways. The goal of play therapy in the psychoanalytic approach is to focus on resolving relativities, returns, and, if possible, developmental defects and deviations that impair the child's normal development and in connection with this approach, either these obstacles are changed or person has enough trust to establish a positive relationship with his/her environment, thematic relationships in it and the relevant field of work to be able to revive natural evolution.

The results of the first sub-hypothesis showed that child-centered play therapy had an impact on the moral intelligence of elementary students and improved their level of moral intelligence. In fact, the game is a good tool for teaching ethics. It flourishes moral values and puts its issues and dimensions in

front of the child. Through play, the child's wrong activities and thoughts can be corrected and directed to goodness. Through morality, the child can be taught a lesson in self-defense, trying to revive the right, reforming and purifying the environment.

The results of the second sub-hypothesis also showed that child-centered play therapy had an effect on bullying in elementary school students and reduced their bullying level. It can be said that in the process of play therapy, children are involved in treatment, which can play a role in reducing these symptoms. Basically, play therapy is used cognitively for young children, and the role of the child in the treatment process and attention to issues such as the role of children in controlling, mastering, and accepting responsibility for behavioral changes are important. It should be noted that the training of those who spend the most time with the child and have the greatest impact on him/her, increases the likelihood of reducing inappropriate behaviors.

Research Limitations

Some of the limitations of this study include:

- 1- Due to the limited location of this research in Shahriar city, the results will not be generalizable to other cities.
- 2- Due to the lack of follow-up test, it is not possible to estimate with certainty the stability of the changes in the moral intelligence and bullying scores of elementary students in the coming months or even years.

Suggestion

Due to the important role of children in the future of the country, it is suggested that several counseling groups in cities and centers that work under the supervision of State Welfare Organization, including kindergartens, provides them therapeutic and educational sessions with different approaches, including cognitive-behavioral approaches, so that they can create a better future for students and future creators. It is also suggested that in order to control and improve the level of disobedience of children, pay attention to improving the level of social skills and problem solving in them more than anything, so that in facing enormous problems of today's society, the best decisions can be made by them. It should be noted that parental education is recommended beforehand. For future research, it is suggested that in order to achieve stronger and more reliable results, the follow-up test should be considered and this test should be performed a few months later to determine the stability of the results.

References

1. Ali Akbari, M.; Alipour, A. & Dor Najafi Shirazi, M. (2014). The effectiveness of storytelling on the components of moral intelligence of preschool girls in Isfahan. *Journal of Social Knowledge*, Year 3, No. 2, 33-43.
2. Amini Moghadam, Y.; Rezaei, A. M. & Makound Hosseini, Sh. (2018). Build and validate children's ethical intelligence scale based on Borba's theory. *Quarterly Journal of Educational Measurement*, Allameh Tabatabai University, Vol. 9, No. 34, 27-45.
3. Arasteh, H. R. (2013). Morality in universities and higher education centers; an option to improve behavior. *Journal of Science Transplantation*, 1 (2), 31-40.
4. Arghabaei, M.; Mianbandi, Y.; Delgsha, A. & Abdkhodaei, E. (2013). The effectiveness of child-centered play therapy on increasing the communication skills of autistic children. 6th International Congress of Child and Adolescent Psychiatry, Tabriz University of Medical Sciences and Health Services.
5. Asjad, A. T., Iqbal, N., & Masroor, U. (2017). Effectiveness of play therapy in enhancing social skills in intellectually disabled children. *Rawal Medical Journal*, 42(3).
6. Asli Azad, M.; Arefi, M.; Farhadi, T. & Sheikh Mohammadi, R. (2012). The effectiveness of child-centered play therapy on depression in girls with depression and depression in elementary school. *Psychological Methods and Models*, Second Year, Issue 9, 71-90.
7. Borba, M. (1950). Develop moral intelligence. Translation: Kavousi, F. (1396). Tehran: Roshd Publications.

8. Chalmeh, R. (2013). The sufficient psychometric adequacy of Ill-Nevis bullying scale in Iranian students: Narrative, reliability and factor structure. *Journal of Psychological Methods and Models*, Third Year, No. 11, 39-52.
9. Cook CR, Williams KR, Guerra NG, Kim TE. (2010). Predictors of bullying and victimization in childhood and adolescence: A meta-analytic investigation. *S Sch Psychol Q.* 25(2): 65-83.
10. Davidson, B., Satchi, N. S., & Venkatesan, L. (2017). Effectiveness of Play Therapy upon Anxiety among Hospitalised Children. *International Journal of Advance Research, Ideas and Innovations in Technology*, 3(5), 441-444.
11. Flite CA, Harman LB. (2015). Code of ethics: principles for ethical leadership. *Perspectives in Health Information Management.* 5(10), 1-11.
12. Ganji, M. (2014). *Psychological pathology*. Tehran: Savalan Publishing, Second App, 3-82.
13. Jalali, S.; Kar Ahmadi, M.; Molavi, H. & Aghaei, Asghar. (2011). the effect of group cognitive-behavioral play therapy on the social fear of children aged 5 to 11 years. *Behavioral Science Research*, Vol. 9, No. 2, 104-113.
14. Kahrizi, S.; Moradi, A. & Mo'meni, Kh. (2015). The effectiveness of play therapy sand on reducing behavioral disorders in preschool children, *educational studies and psychology*, Vol. 5, No. 1, 174-154.
15. Kazemi Zahrani, H.; Ghorbani, M.; Nikpai, K. & Ebrahimi Jozani, F. (2019). The effectiveness of dramatic play therapy on academic motivation, moral judgment and aggression of elementary school students. *First Conference on Modern Research in Psychology, Counseling and Behavioral Sciences*, 1-8.
16. Landerst, G.L. (1997). *Play therapy, communication art with children*. Translation: Mohammadi, Sh. & Jamshidi, K. (2016). Tehran: Ravan Publishing.
17. Masoudi, N. (2016). The effectiveness of child-centered play therapy on self-control and improvement of impulsive behaviors in single-parent primary school children. Master Thesis, Department of Rehabilitation Counseling, Faculty of Psychology and Educational Sciences, Allameh Tabatabai University.
18. Masoudi, N.; Sheriff Hormozi, A. & Farahbakhsh, K. (2018). The effectiveness of child-centered play therapy on self-control and improvement of impulsive behaviors in single-parent children. *Child Mental Health Quarterly*, Vol. 5, No. 4, 67-80.
19. Meany-Walen, K. & Teeling, S. (2018). Adlerian Play Therapy with Students with Externalizing Behaviors and Poor Social Skills. *International Journal of Play Therapy*, Vol. 25, No. 2, 64-77.
20. Mohammad Ali Lavasani, M.; Keramati, H. & Kadivar, P. (2018). The effectiveness of cognitive-behavioral play therapy on social adjustment and academic adjustment of students with reading disorders. *Journal of Learning Disabilities*, Vol. 7, No. 3, 91-109.
21. Morgenthal, A.H. (2015). *Child Centered Play Therapy for children with Autism: A Case study*. Candidate for the Degree of Doctor of Psychology. Department of Clinical Psychology. Antioch University- New Englandt.
22. Najafi, M. & Sarpolki, B. (2016). The effectiveness of cognitive-behavioral play therapy on aggression and spelling disorder in primary school children. *Quarterly Journal of Exceptional People*, Vol. 6, No. 21, 103-121.
23. Nikpour, Gh. A.; Zarehpour, M. & Nikpour, F. (2018). Investigating the effect of play therapy with a cognitive-behavioral approach on reducing the symptoms of stubbornness and disobedience in children aged 8 to 11 years. *Dolat-e-Salamat bi-monthly, Yazd School of Health*, Year 17, No. 1, 62-72.
24. Olweus D. (2012). Bullying at school and later criminality; finding from three Swedish community samples of males. *Criminal Behavior and Mental Health.* 21(2): 151-156.
25. Safari, S.; Faramarzi, S. & Abedi, A. (2014). The effect of cognitive-behavioral play therapy on the behavioral symptoms of disobedient students. *Urmia Medical Journal*, Vol. 25, No. 3, 258-267.
26. Salter, K., Beamish, W. & Davies, M. (2016). The Effects of Child-centered therapy (CCPT) on the Social and Emotional Growth of Young Children with Autism. *International Journal of Play Therapy.* 25(2), 78-90.
27. Sarihi, N.; Pouransai, Gh. & Nik Akhlaq, M. (2015). The effectiveness of group play therapy on preschool children's behavioral problems. *Journal of Analytical-Cognitive Psychology*, Vol. 6, No. 23, 35-41.
28. Schottelkorb, A. A., Swan, K. L. & Ogawa, Y. (2019). Intensive child-centered play therapy for children on the autism spectrum. *Journal of counseling & development*, Vol. 98, 63-73.

29. Schottelkorb, A. A., Swan, K. L., Jahn, L., Haas, S., & Hacker, J. (2015). Effectiveness of play therapy on problematic behaviors of preschool children with somatization. *Journal of Child and Adolescent Counseling*, 1(1), 3-16.
30. Stulmaker HL. Ray DC. (2015). Child-centered play therapy with young children who are anxious: A controlled trial. *Children youth serv, Rev*, 127-133.
31. Yaghoubi, A.; Fathi, F. & Mohammadzadeh, S. (2018). Meta-analysis of ethical intelligence studies. *Educational Psychology Studies*, No. 32, 247-270.