

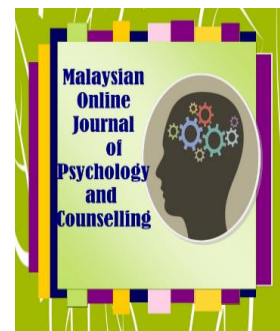
MALAYSIAN MOTHER'S CHALLENGES IN FILIAL THERAPY: A CASE STUDY

Cheng Chue Han & Diana-Lea Baranovich

ABSTRACT

Filial therapy was coined as a golden intervention to address children's behavioural and emotional issues for its effectiveness across various populations, family settings, and presenting problems. Efficacy studies for the past 57 years have proven the effectiveness of filial therapy, however, there is a lack of understanding of the parental experiences in facing challenges throughout the therapy process. Past studies have indicated that parents did face challenges in the therapy process, but little investigations were done. Furthermore, research and practice of filial therapy in Malaysia was minimal. Thus, the current research aimed to examine the challenges that Malaysian parent faced in the process of filial therapy. Qualitative case study was employed, and thematic analysis was used to analyse data. Three main themes of challenges were found throughout the process of filial therapy. The findings were difficulty in integrating skills, stressors from family members, and commitment of time.

Keywords: *Filial Therapy, Parental Challenges, Single Case Study*



**Volume 8 (1),
June 2021**

**Faculty of Education,
Universiti Malaya,
MALAYSIA**

Corresponding Author:
notokah@hotmail.com

INTRODUCTION

According to the National Health Morbidity Survey (NHMS) conducted by the Ministry of Malaysia in year 2015, one in twelve young children had mental health issues. Younger children from age five to nine years old have shown a higher susceptibility towards mental health problems. This worrying mental health issues in the country was highly concerned by the government. Deputy Prime Minister Datuk Seri Dr Wan Azizah Wan Ismail who is also Women, Family and Community Development Minister has expressed that more counsellors are needed to intervene and provide support (Kaos, 2018). Besides increasing the number of mental health practitioners, effective treatment modalities are crucial to determine the quality of help received by the people who are suffering from mental health problems. Filial therapy, an evidenced-based approach was found to be effective in helping a young child who suffered from mental health issues in this study. Filial therapy was coined as golden therapy (Cornett, 2015) for its effectiveness across cultures, family structures, presenting problems, and races. However, it was not widely known and practiced in Malaysia even though it has almost 60 years of history now.

Although abundant past filial therapy research studies have contributed to its efficacy, there is a lack of research that demonstrated the challenges and difficulties that parents face in filial therapy. Many research studies have supported that parents have shown positive changes, and have indicated positive perceptions towards filial therapy (Amy Wickstrom, 2009; Bavin-hoffman, Jennings, & Landreth., 1996; Foley, Higdon, & White, 2006; Sangganjanavanich, Cook, & Rangel-Gomez, 2010). However, the challenges faced by them have not been addressed in depth. In a study done by Solis, Meyers, and Varjas (2004), African American mothers indicated that they had difficulty in finding time to play with their children. It was anticipated that parents would face challenges when learning new skills whether in implementing change in the family or in their relationship with the target child. However, the existing literature does not provide findings that bridge the understanding of these challenges in a structured and detailed manner that would actuate advancement in the usage of filial therapy.

In addition, studies about dropout in treatment and intervention aimed to identify the risk factors and barrier to treatment to help families to better benefit from the treatments. Notably, research study that investigate the characteristics of children and families who are successful treatment completer is lacking (Campbell, Baker, & Bratton, 2000) . Evidently, Topham and Wampler (2007) reported that mother age, child age, social support, and communication of acceptance were found to be the factors to predict dropout rate in treatment. Thus, these dropout factors may be a barrier that obstruct parents in receiving and completing filial therapy. The current study aimed to examine the challenges and difficulties that a parent faced in the process of filial therapy. Furthermore, process-oriented research studies serve as important role in providing a holistic picture to the researchers and practitioners of filial therapy was found to be in scarcity as well. Although filial therapy has established to be an evidence-based approach because the research focus was mostly on the effectiveness and efficacy. In contrast, process-oriented research studies that focus on the process are on the minimal scale. The importance of a process-oriented research in play therapy contribute to the advancement of practical application among wider population (Reed, 2016). Thus, this research was specifically designed to fill the gap in the existing literature.

METHODOLOGY

The researcher concludes that the methodology employed in the past research studies did not provide a thorough understanding to the phenomenon of parent's experience of challenges in filial therapy. The data reported in the past (Amy Wickstrom, 2009; Bavin-hoffman et al., 1996; Foley et al., 2006; Sangganjanavanich et al., 2010) were scattered and the descriptions were not sufficient to provide further understanding. As a result, the current study employed single case study because it is a laser focus method that allow researcher to obtain thick and meaningful data of the phenomenon. Data collection methods such as documentation, observation, and interview were employed in the current study. Thematic analysis was used to analyse and identify the pattern and themes in the data collected.

Background of Research Participant

"TC" is the pseudonym for the research participant. She was a forty-one-year-old full-time housewife residing at Klang Valley, Malaysia. TC has three children. They were five years old daughter, Ruby (pseudonym) who was the target child in this study, John (pseudonym) who was three years old, and Jackson (pseudonym) who was one year old. In the intake assessment, TC expressed her concern about Ruby for being moody and emotionally needy. She had separation anxiety and constant worry whenever the parents had to leave her behind. For example, when they were dropping her at the swimming lesson, Ruby was not ready to let TC go and insisted to be closed to her. Another example was when the father had to go off for a business trip, Ruby exhibited behaviours that may reflect extreme anxiety, such as nail biting and visiting the toilet frequently. In addition, TC felt that she was bad in communicating with Ruby effectively especially when she needed to discipline her. Ruby often responded negatively when TC tried to correct her inappropriate behaviours. Ruby did not listen to the parents and continued to display undesirable behaviours such as tantrum throwing and outburst of anger. TC felt helpless and often resorted to give in to her. On top of the issues, the family has three young children, so sibling rivalry had brought tremendous stress to TC as she had difficulty to manage the argument and fights between Ruby and John because they were fighting for attention daily. According to TC's description, her daily lives "passes by with chaotic and exhausted feelings".

TC perceived Ruby as a loving and fun child and she enjoyed spending time with her most of the time. However, it was a challenge of having three young children at home who demanded for her attention most of the time. Fortunately, TC had supportive parents in law to share some of the responsibilities. The parents in law were staying nearby and often offered to transport the children to school. They also cooked for the family and offered babysitting service to TC's family. However, TC expressed that being a mother of three was exhausted and lethargic. Furthermore, TC's husband spent long time in work and often travelled for business trips as a result TC received limited support from him.

FINDINGS

Throughout the five months process of filial therapy, TC faced various types of challenges as she progressed and completed the therapy. Three major themes of challenges were found, namely (1) integrating skills in the learning process, (2) commitment of time, and (3) stressors from family members. TC started the filial therapy with five training sessions. The main objective in these training sessions was for her to master the skills and knowledge needed to conduct special playtime. In the learning process, it was found that there were five areas that TC had difficulties to practice. There

were skills such as tracking, limit setting, matching the mood, no teaching and guiding, and be present.

Integrating Skills in the Learning Process

Firstly, tracking was the first skill that TC had to learn in the training session. Basically, TC was taught to describe what she sees during the play with child. Since the parent needs to describe what she sees, she is required to be attentive at all time. During the training, the counsellor demonstrated the skill to TC by having TC pretended to be the child and engaged in any play. While TC was playing, the counsellor verbally described the moves and actions what TC was playing. TC then took turn to be the parent and practiced the tracking skill with the counsellor. At first, TC was uncomfortable and did not know what to say when it was her turn. She paused for long time and did not say a word while watching the play. She then told the counsellor that it was hard, and she had no clue what to say

"It was awkward; sometimes I don't know what to say." (Interview transcript)

She also mentioned that it could be due to the cultural differences of being an Asian, she was not encouraged to be verbally expressive since young as opposed to the Westerners who might find it easier to describe what you see. Although tracking was the hardest skill to master at the first place, TC has demonstrated great progress in every special playtime she had with Ruby. She started to pick up skill from the second session onwards and it was developed progressively. In the tenth session, TC has mastered the skill and she did the tracking easily and naturally.

Secondly, the second skill that TC had found it challenging was limit setting. This method of limiting children's behaviour teaches them self-control and responsibility for their own behaviour by allowing them to experience the consequences of their choices and decisions. It involves three steps, 1) acknowledge the limit 2) communicate the limit 3) target alternative. TC had difficulty to respond to Ruby's behaviour swiftly by using these three steps. For example, Ruby likes to move out from the play area to get something but she was supposed to stay in the designated area. TC found it hard to talk to Ruby using the three steps because it was happened too fast, when she figured out what to say, Ruby already stood up and walked out from the play area. TC also mentioned that the behaviours that she wanted to set limit on were usually happened in a quick manner and her immediate respond was, "No!" or "Stop!" Thus, using the three steps method in the play session was challenging.

"A few times she ran off and I never set the reminder and tell her before the session and when I do remember I think she was better. And later I also more relaxed right, so it was ok. Sometimes, it come so fast, when she was angry and shouting, I maybe like I don't know how to, it happen too fast I don't know what to tell her like no you not supposed to shout. She moved on her emotion is not like, it pass quite fast, not holding it." (Retrieved from interview transcript)

Thirdly, the essence of special playtime is to follow the child's lead and enter her world without teaching and guiding in other words being non-directive. On contrary, teaching and guiding are the common responsibilities of a parent. Hence parent does that almost all the time whenever the child is present. TC realised it was difficult to set the autopilot of teaching and guiding off during the special playtime. TC also realised that she tends to give suggestion in Ruby's play. Instead of following what Ruby might take her in the play, she pointed a direction for her. For example, in the second play session, Ruby said the little doll was sick and needs to rest on the bed, TC naturally responded with,

MALAYSIAN ONLINE JOURNAL OF PSYCHOLOGY & COUNSELING

“let’s bring her to hospital.” It was a common understanding that when one gets sick, one will be sent to hospital, but this common practice is not necessarily happened in a child’s play. The child might have her own plan, but it was disrupted when the adult suggested a specific way to guide her play. Thus, to be highly aware of not teaching and guiding in the 30-minute was a great challenge for TC.

“TC was trying to show her how to cut the paper into shapes properly. She also mentioned the dolls got sick and should go to the doctor. Ruby then took the dolls to hospital with her mother’s suggestion.” (Retrieved from observation note)

However, TC mentioned that being highly conscious about herself will help her restrain from teaching and guiding during the session. She said the feedback from the counsellor serves as an important reminder to help her be aware of not imposing any lessons onto Ruby. Again, reading and revising her note before the special play starts is important to help her stay on track.

Fourthly, another important element in conducting special playtime is to be able to match the child’s energy level. The child will experience a range of emotions during the play and parent is asked to match her energy level by imitating her tone of voice, facial expression, and body language. For instance, when a child was excitedly lifting a fire truck to save fire, the parent should respond by reflecting her feeling verbally with an exciting facial expression and tone of voice. The objective of this skill is to enable the child to feel connected and understood. In addition, it helps the parent to empathise the child easily by expressing the same emotions as the child is going through. Generally, children are natural in expressing their emotions and have high energy while playing. In contrast, adults are generally tended to be reserved, quiet, and calm. To match the child’s mood while play was found to be challenging for TC. Ruby often played in excitement and joy during the special playtime and TC found it hard to match the same energy level of Ruby’s. TC was not realised during the play until she replayed the recorded session and found out the difference of energy between Ruby and hers. She realised Ruby was excited and spoke in high tone of voice; in contrast, she was always calm and has neutral facial response.

“I think I have to consciously remind me to do (matching the energy). It depends on the play theme as well if she doesn’t involve me in the play, I will be like you know lose focus a little bit but if is something enjoying watching I would be.” (Retrieved from interview transcript)

Matching with the child’s energy is one of the important skills to enter the child’s world. Commonly, adult requires conscious effort to be able to go to the child’s level and engage in play with the child. TC was used to the way she interacted with adults and automatically she did the same with Ruby too. This adjustment was difficult because TC needed to breakthrough her internal barriers of being fun, joyful, silly, and excited like Ruby.

Finally, the foundation of special playtime is to give undivided attention to the target child. It required the parent to be fully present and engaged with the child during the 30-minute special playtime. Thus, the play area is specifically set with no distraction so that the child receives full attention from the parent. Skills such as tracking, matching with the child’s energy, reflecting, and encouragement are designed to help the parent to be present. Without paying full attention to the child, parent basically could not exercise any of those skills during the play. Although TC was physically present for every session, but she admitted that there were moments she drifted off and did not focus on Ruby. This

happened usually when Ruby did not involve her in the play, when TC was not rested enough, and when TC was busy thinking of the endless chores in her mind. TC realised the importance of being fully present and aware during the playtime, but she found it difficult to stay focus for the entire 30-minute.

“Another thing is I tend to procrastinate and there are a lot of things in my mind. Since the to-do list is always seems like always things on my mind, the house, the kids, my family, I never like worry-free.” (Retrieved from interview transcript)

Being present seems to be an easy concept but it is challenging when comes to practice even only for 30 minutes a week. As TC described, especially when she was on the go and had errands to complete, “being present” did not come easily or naturally to her. She realised she needed deliberate effort to remind herself.

Stressors from Family Member

Although the intervention of filial therapy only involves TC and Ruby, TC has constantly shared about her concerns for other family members throughout the four months process. It was challenging for TC to focus on the work with Ruby while she was receiving pressure from the closest family members at home. Firstly, TC has mentioned about her second child, John the most in these five months process. John had refused to go to school during that period has added up the stress on TC. She felt John required more attention from her so whenever she had to spend one-on-one time with Ruby, she felt guilty.

“John is getting a lot better now, he always wants to play, I cannot just play with him all day. I feel guilty. I move Ruby’s violin class to Monday so I can have special play with her after the class. John is almost 3 and a half, he does not want to go back to class, he said there is bully in the class. He keeps saying that I wondering if he was saying that as an excuse. Maybe really bothers him. There is a boy pushing the toy blocks in the class. That is why we are looking around the options for school. His schoolteacher’s turnover rate is high, it feels like the teachers just there to do their job, not really passion.” (Retrieved from interview transcript)

Furthermore, the stress that TC was undergoing with John, she felt lonely at times because her husband works long hour and came home late usually. When he was at home, he sometimes directed the anger and blame towards TC when the children were not behaving well. This is another example of TC’s mesosystem (between her husband and the children) has contributed to her stress. TC got emotional when this happened, and she chose to keep quiet.

“Daddy is more stressful, he doesn’t have much time with the kids, so he will give in. sometimes he yells, and he direct it at me, he blames me, all the stress. He comes home late; I try to do my best as much time as possible, but you come home you criticise. A lot of times he does not think is the kids, he thinks is me. There is a lot of unresolved issues between us. I think he has this frustration; I too have resentment and it builds up. We rarely spend quality time together. He comes up end up sleeping with the kids or open up the computer continue to work. I try to be the understanding wife and I keep things to myself and I am fine with not talking. I know is not good. For me, if I do not get it (the nurturance

and love from husband) that is fine but don't come home and criticizing me that's get me explode. I feel is so unfair." (Retrieved from interview transcript)

TC and her husband were not on the same page that got her even more stressful and lonelier in the parenting journey. The communication between the couple broke down in this specific issue has led to the feeling of disconnection. In addition to that, TC has revealed that the difference of value between her and the in-laws was pressuring. She said that the husband's family is result-oriented, and all the family members are high-achievers. They have high expectations towards the children and take their academic work seriously. In contrast, TC described herself as laidback, relax, and process-oriented person. Sometimes, she felt the pressure from the in-laws to watch on her parenting style.

"That's so interesting you know like so different from the Asian you know our parent, not my parents, my parents are quite liberal, but you know like in laws they usually like why do you give kids you know like they are supposed to this is why your kids are not discipline because they never do what you told them to do you know you have to just you know." (Retrieved from interview transcript)

Commitment of Time

TC has expressed that the first and foremost challenge that she needed to overcome was the commitment of time. She was uncertain if she would be able to commit the time needed in four months.

"My days are really quite hectic, my days I really need some quiet time but now is like a luxury. I have to send them to music class that was 3 mornings already." (Retrieved from interview transcript)

Being a mother, TC started the day early by sending Ruby and John to school. She then needed to take care of the young baby, Jackson throughout the day. In addition, she had to complete the errands in the house. Basically, TC was constantly getting the errands and house chores completed such as transporting the children to school, shopping for grocery items, and hosting the family events. Thus, she needs to arrange her time well and squeeze out a few hours to attend the training session and allocate one-on-one time with Ruby every week for the four months process.

IMPLICATIONS FOR THE COUNSELLING PRACTICE

The findings of this study have significant implications for counselling practice using filial therapy to help children with mental health issues. They reveal an in-depth description of the journey a parent has gone through in filial therapy. Thus, the following suggestions are made for application of the findings in counselling practice.

Firstly, counsellors are recommended to conduct a thorough interview or intake assessment with parent to screen the suitability of filial therapy in the family. The interview questions can be set based on PPCT model. It is important to identify potential challenges for parent so that he or she can be mentally prepared prior to the therapy to begin. It helps to increase the successful rate of the therapy. In addition, it also helps counsellor and parent to feel in control because they have anticipated the challenges and once it appears, they are prepared to face it with preparation. In addition to that, the information obtained from these questions may serve as a reference guide for counsellor in the process of filial therapy to help parent reconnect with their strength.

Secondly, the finding of the study showed that although filial therapy only involves a dyad of parent and child, but the ecological system of the family plays an important role in determining the smoothness of the therapy. Filial therapy is a systemic therapy that addresses the importance of understanding people revolving around the individual. Using the Bronfenbrenner's ecology system to understand the parent's various systems was found to be useful and offered a structured guidance for the counsellor. Through understanding the parent's microsystem, mesosystem, exosystem, and macrosystem provide insight for the parent and counsellor in the process of overcoming challenges. For example, in this study, the counsellor helped the parent realised her stressors that came from the four systems enabled them to have meaningful discussion that eventually offered relief for the parent. Thus, it is recommended that future practice may include Bronfenbrenner's ecology systems to discuss the issues with parents.

Thirdly, another important finding that was highly recommended by the parent herself was the training of mindfulness to be included in the filial therapy training process. Parent revealed that being fully present with the child was challenging even though the concept was easy to understand but practicing fully was difficult. Mindfulness practice such as breathing, and relaxation exercise were said to be useful to help parent be grounded and engaged at the present moment. It is recommended that mindfulness practice to be scheduled in all training sessions to help parent be reminded of staying fully focus on the present moment.

Fourthly, the study found that a simple revision before the special playtime starts was helpful for parent to feel confident and stay in control during the special playtime. It is recommendable to remind parent to conduct a five to ten minutes revision of the skills and important concepts before starting the session will greatly help parent to conduct a successful special playtime. This revision time also serves as a preparation time for parent to be mentally, emotionally, and physically ready for the session.

Finally, the fact that challenges exist in the filial therapy process provides counsellor a direction to help parent to better overcoming them. The study found challenges came from various aspects, however, parent managed to handle with open discussion and conscious effort. It is a great reminded for counsellor to always check on the difficulties or challenges a parent may face throughout the process of filial therapy. This helps parent to be able to express it and discuss with the counsellor as soon as possible. Counsellor acts as a coach in the process of filial therapy; thus, playing the role of understanding parent's situation from time to time will help in training a parent successfully.

DISCUSSIONS

Filial therapy requires parent to learn new skills and integrate them in the special playtime. In the past research studies, parents reported having difficulty in integrating skills of tracking, limit setting, giving encouragement, and be non-directive (Foley et al., 2006; Sangganjanavanich et al., 2010; Socarras, Smith-Adcock, & Shin, 2015). These results were consistent with the findings in the current study except that the mother in the current study had no difficulty in practicing the skill of giving encouragement. In other words, the skills of tracking, limit setting, and be non-directive are the repetition themes of challenges found in filial therapy. Challenges in learning play language are just like learning a foreign language for most people. It is difficult to pronounce, unnatural, lacking confidence, lacking choice of words, feeling of uncertain, awkward, and out of control.

Another set of challenges that came from the family members was found in this study. Stressful parents are prone to have harsh or abusive parenting (Beckerman, Van Berkel, Mesman & Alink, 2017). Thus, it was challenging for the mother to learn about filial skills when she was under stress and pressure. In time spent with children, parents may experience feelings of a combination of great meaning, joy, satisfaction, frustration, worry, and boredom (Senior, 2014). The intensity of both positive and negative feelings in child-caring may be especially relevant to mothers, who are intensely involved in every aspects of parenting (Musick & Bumpass 1999; Sayer, Bianchi, and Robinson 2004). It is apparent that parenting can be challenging, draining, and stressful especially with children who are defiance and boundary-testing that are considered as a normal part of child development (Daly, 2001).

As such, the mother of the current study also reported that she was experiencing a combination of positive feelings and negative feelings during the special playtime sessions. These feelings are the source of parenting stress. Mothers have lower quality downtime to cope with parenting stress (Bittman and Wajcman 2000; Craig and Mullan 2013; Burgard and Ailshire 2013; Mattingly and Bianchi 2003). For example, sleep deficit that every mother goes through was found to reduce cognitive functions and is associated with poorer health, less enjoyment, and harsher parenting (Buxton and Marcelli 2010). The mother of the current study has repeatedly reported that she was lacking sleep due to the tight schedule of child-caring daily. Research has shown that mothers who are lacking free time and have poor quality free time are associated with heightened time pressure and reduced wellbeing (Bird and Fremont 1991; Mattingly and Sayer 2006; Nomaguchi, Milkie, and Bianchi, 2005). Thus, the mother mentioned she needed personal time to recharge herself.

Finding time was found to be a challenging task for parent in filial therapy. This finding was consistent with the past researchers (Solis et al, 2004; Edwards, 2007) that parents reported that it was hard to commit their time for filial therapy. In filial therapy, parents require to attend training sessions follow by conducting weekly special playtime. The process usually takes at least up to five months to complete. Thus, to complete filial therapy requires commitment and effort. Time is the utmost requirement that parent needs to consider before deciding to take part in filial therapy. Although stay-at-home mother is claimed to spend more physical time with children but the quality time that can contribute to the child development might not be sufficient (Hsin & Felfe, 2014). Research has shown that married mothers' time in primary childcare is about two times higher, and overall time with children is one point five times higher as compared to married fathers' time (Bianchi 2000; Parker and Wang 2013). Mothers do more of the day-to-day, time consuming basic care and management tasks related to childcare, and they spend a lesser share of their overall time with children in play (Sayer, 2005; Sayer et al. 2004; Raley, Bianchi, and Wang 2012; Yeung, Sandberg, Davis-Kean, & Hofferth, 2001). Most of the time, mothers are cleaning, cooking, and housekeeping. These tasks are perceived to be infinitely undone; therefore, mothers struggle to commit consistent time in completing filial therapy.

In conclusion, parents generally are struggling with having sufficient time to take care of their children physically, emotionally, and academically. While filial therapy requires parents to allocate a substantial amount of time to be consistently spending the special playtime with their children as well as attending training sessions becomes the first and foremost challenge for parents to commit. However, through deeper understanding towards the parent's time management skills, values, and beliefs towards the time use in family potentially help to mitigate the time barrier at the first place.

REFERENCES

- Amy Wickstrom, M. F. T. (2009). The process of systemic change in filial therapy: A phenomenological study of parent experience. *Contemporary Family Therapy*, 31(3), 193–208. <http://doi.org/10.1007/s10591-009-9089-3>
- Bavin-hoffman, R., Jennings, G., & Landreth, G. (1996). Filial Therapy: Parental Perceptions of the Process. *International Journal of Play Therapy*, (5), 45–58.
- Beckerman, M., van Berkel, S. R., Mesman, J., & Alink, L. R. (2017). The role of negative parental attributions in the associations between daily stressors, maltreatment history, and harsh and abusive discipline. *Child abuse & neglect*, 64, 109-116.
- Bianchi, Suzanne M. (2000). "Maternal Employment and Time with Children: Dramatic Change or Surprising Continuity?" *Demography* 37(4): 401-14.
- Bird, Chloe E., & Allen M. Fremont. (1991). Gender, Time Use, and Health. *Journal of Health and Social Behavior* (32): 114-29.
- Bittman, M., & Wajcman, J. (2000). The rush hour: The character of leisure time and gender equity. *Social forces*, 79(1), 165-189.
- Burgard, Sarah A., and Jennifer A. Ailshire. 2013. "Gender and Time for Sleep among U.S. Adults." *American Sociological Review* 78(1): 51-69.
- Buxton, Orfeu M. and Enrico Marcelli. 2010. "Short and Long Sleep are Positively Associated with Obesity, Diabetes, Hypertension, and Cardiovascular Disease among Adults in the United States." *Social Science & Medicine* 71(5):1027-36.
- Campbell, V. a., Baker, D. B., & Bratton, S. (2000). Why Do Children Drop-Out from Play Therapy? *Clinical Child Psychology and Psychiatry*, 5(1), 133–138. <http://doi.org/10.1177/1359104500005001013>
- Cornett, Ni. (2012). A Filial Therapy Model Through a Family Therapy Lens: See the Possibilities. *The Family Journal*, 20(3), 274–282. <http://doi.org/10.1177/1066480712449128>
- Craig, Lyn and Killian Mullan. 2013. "Parental Leisure Time: A Gender Comparison in Five Countries." *Social Politics* 20(3): 329–57.
- Daly, K. J. (2001). Deconstructing family time: From ideology to lived experience. *Journal of marriage and family*, 63(2), 283-294.
- Edwards, N. a., Sullivan, J. M., Meany-Walen, K., & Kantor, K. R. (2010). Child parent relationship training: Parents 'perceptions of process and outcome. *International Journal of Play Therapy*, 19(3), 159–173. <http://doi.org/10.1037/a0019409>
- Foley, Y. C., Higdon, L., & White, J. F. (2006). A qualitative study of filial therapy: Parents 'voices. *International Journal of Play Therapy*, 15(1), 37–64. <http://doi.org/10.1037/h0088907>
- Hsin, A., & Felfe, C. (2014). When does time matter? Maternal employment, children's time with parents, and child development. *Demography*, 51(5), 1867-1894
- Kaos, J. J. (2018, October 02). More counsellors needed to tackle mental health. *The Star*. Retrieved from <https://www.thestar.com.my/news/nation/2018/10/02/more-counsellors-needed-to-tackle-mental-health>
- Mattingly, Marybeth J. and Suzanne M. Bianchi. 2003. "Gender Differences in the Quantity and Quality of Free Time: The US Experience." *Social Forces* 81(3): 999-1030.
- Musick, Kelly and Larry Bumpass. 1999. "How Do Prior Experiences in the Family Affect Transitions to Adulthood." Pp 69-102 in *Transitions to Adulthood in a Changing Economy: No Work, No Family, No Future*, edited by Alan Booth, Ann C. Crouter, and Michael J. Shanahan. Greenwood Publishing Group.
- Nomaguchi, K. M., Milkie, M. A., & Bianchi, S. 2005. Time strains and psychological wellbeing: Do dual-earner mothers and fathers differ? *Journal of Family Issues*, 26, 759– 792.

- Parker, Kim and Wendy Wang. 2013, March 14. "Modern Parenthood: Roles of Moms and Dads Converge as They Balance Work and Family." Pew Research Center, Washington, D.C. Available at <http://www.pewsocialtrends.org/2013/03/14/modern-parenthood-roles-of-moms-and-dads-converge-as-they-balance-work-and-family/> (accessed 10/6/14)
- Raley, Sara, Suzanne M. Bianchi, and Wendy Wang. 2012. "When Do Fathers Care? Mothers' Economic Contribution and Fathers' Involvement in Child Care." *American Journal of Sociology* 117(5): 1422-59.
- Reed, P. (2016). Tackling taboos: Research in play therapy. In *Challenges in the Theory and Practice of Play Therapy* (pp. 116-138). Routledge.
- Sangganjanavanich, V. F., Cook, K., & Rangel-Gomez, M. (2010). Filial therapy with monolingual Spanish-speaking mothers: A phenomenological study. *The Family Journal*, 18(2), 195-201. <http://doi.org/10.1177/1066480710364320>
- Sayer, L. C. (2005). Gender, time and inequality: Trends in women's and men's paid work, unpaid work and free time. *Social forces*, 84(1), 285-303.
- Sayer, L. C., Bianchi, S. M., & Robinson, J. P. (2004). Are parents investing less in children? Trends in mothers' and fathers' time with children. *American journal of sociology*, 110(1), 1-43.
- Senior, Jennifer. 2014. All Joy and No Fun: The Paradox of Modern Parenthood. New York: HarperCollins.
- Socarras, K., Smith-Adcock, S., & Shin, S. M. (2015). A Qualitative Study of an Intensive Filial Intervention Using Child-Parent Relationship Therapy (CPRT). *The Family Journal*, 23(4), 381-391. <http://doi.org/10.1177/1066480715601681>
- Solis, C. M., Meyers, J., & Varjas, K. M. (2004). A qualitative case study of the process and impact of filial therapy with an African American parent. *International Journal of Play Therapy*, 13(2), 99.
- Topham, G. L., & Wampler, K. S. (2007). Predicting Dropout in a Filial Therapy Program for Parents and Young Children. *The American Journal of Family Therapy*, 36(1), 60-78. <http://doi.org/10.1080/01926180601057671>
- Yeung, W. J., Sandberg, J. F., Davis-Kean, P. E., & Hofferth, S. L. (2001). Children's time with fathers in intact families. *Journal of Marriage and Family*, 63(1), 136-154.