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# Filial Therapy

Strengthening
Parent-Child Relationships
Through Play

Third Edition

Risë VanFleet

Professional Resource Press Sarasota, FL

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# **SERIES PREFACE**

As a publisher of books, multimedia materials, and continuing education programs, the Professional Resource Press strives to provide clinical and forensic professionals with highly applied resources that can be used to enhance skills and expand practical knowledge.

All of the titles in the Practitioner's Resource Series are designed to provide important new information on topics of vital concern to psychologists, clinical social workers, counselors, psychiatrists, and other clinical and forensic professionals.

Although the focus and content of each title in this series will be quite different, there will be notable similarities:

- 1. Each title in the series will address a timely topic of critical importance.
- 2. The target audience for each title will be practicing professionals. Our authors were chosen for their ability to provide concrete "how-to-do-it" guidance to colleagues who are trying to increase their competence in dealing with complex problems.
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We feel that one of the unique assets of Professional Resource Press is that all of our editorial decisions are made by practitioners. The publisher, all editorial consultants, and all reviewers are practicing psychologists, marriage and family therapists, clinical social workers, and psychiatrists.

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## **FOREWORD**

It is an honor to be asked to write the foreword for the third edition of Risë VanFleet's widely recognized *Filial Therapy* book. Dr. VanFleet is the leading U.S. figure in the education and publishing of the Guerney Model of Filial Therapy.

The author has expanded and enhanced what was already a wonderful previous edition. Outstanding is the revised section on "Theoretical Integration," in which she lays out the seven theoretical sources underlying the complex approach that is Filial Therapy. She also gives a clear explanation of the psychoeducational approach, of which Filial Therapy is one of the first. The many facets of Filial Therapy are made readily understandable. The author uses case examples to clarify points.

Reading this book would allow those who wish to pursue the method, or brush up on its finer points, to do so. Of course, additional training and supervision are highly recommended to become truly proficient.

Dr. VanFleet's focus is on Filial Therapy for individual families. In addition, she explains how to adapt the model for application with children and families with special clinical issues. She emphasizes the value of working with as many family members as possible – including siblings – to attain the best outcomes.

Experienced or new to Filial Therapy, a therapist will find many touches not found elsewhere. I can recommend this book without reservation to professionals seeking an efficient, effective method for working with families. Dr. VanFleet presents a convincing rationale, as well as detailed guidance on how to apply the model for therapeutic or preventive purposes, in clinical or educational settings. In this volume, of readable size, Dr. VanFleet packs in all the essential information the Filial Therapist will need.

Louise Guerney, PhD, RPT-S Professor Emerita, The Pennsylvania State University North Bethesda, MD

# **ABSTRACT**

Filial Therapy has been shown through 50 years of research and clinical experience to be an effective intervention for children and families experiencing a variety of social, emotional, and behavioral difficulties. This unique therapy involves parents as the primary change agents to resolve child-related problems, to encourage children's healthy psychosocial development, and to strengthen entire families. Filial therapists train and supervise parents as the parents conduct child-centered play sessions with their children, an approach that not only helps eliminate presenting problems but also strengthens parent-child and family relationships. This guide covers the principles, theoretical foundations, research, concepts, and specific methods used in Filial Therapy. Common problems are discussed, and one family's experience is followed throughout the course of therapy.

In the 20 years since this volume was first published, public and professional interest in Filial Therapy has grown substantially throughout the world. Research on the approach continues to grow. The third edition elaborates on the principles, values, and theories on which Filial Therapy is based and updates the research as well as the applications of the method with a wide range of presenting problems. References have been updated, derivative formats have been included, and the method's multicultural value continues to be highlighted.

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# Filial Therapy

# Strengthening Parent-Child Relationships Through Play

(3rd Edition)

### **BACKGROUND**

Countless articles in newspapers, popular magazines, and professional journals have reported disheartening stories and statistics about the problems facing children and families today. Our world is changing rapidly and dramatically, and some fear that society's basic unit, the family, may not survive the turmoil.

Although current trends seem grim, signs of strength and hope do exist. Strong families of many configurations remain, and we are learning more about what makes them strong (Stinnett & DeFrain, 1985). Parents seem more willing to attend parent education programs, and more families are seeking professional help to cope with their problems. Professionals may very well have greater opportunities to assist children and families with intervention and prevention efforts than ever before. Filial Therapy can be an extremely useful tool in helping children and

families overcome or prevent problems that might otherwise weaken them. Developed during the 1960s by Dr. Louise Guerney and Dr. Bernard Guerney as a treatment for children with social, emotional, and behavioral problems (B. G. Guerney, 1964; L. F. Guerney, 1976a, 1983a, 1991, 1997, 2000, 2003a, 2003b; L. F. Guerney & Ryan, 2013), Filial Therapy has received increasing recognition by the clinical and research communities as an effective approach to strengthening parent, child, and family relationships.

In Filial Therapy, parents become the primary change agents as they learn to conduct child-centered play sessions with their own children. Filial therapists, using a competence-oriented psychoeducational framework, teach parents to conduct specialized play sessions, supervise parents during these play sessions, and help them eventually integrate the play sessions and parenting skills at home.

Filial Therapy is most frequently used with children aged 3 to 10 or 12 years, but in some trauma cases, the use of Filial Therapy has been extended to children in their mid-teens with little alteration required.

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The substitution of child-centered "special times" for the play sessions can easily extend its applicability to other adolescents as well. Special times involve activities selected by the adolescent during which parents use many of the same skills learned in the play sessions. The play sessions or special times are dyadic in nature – one parent and one child at a time. This format permits optimal relationship development and attention to the child's needs. Ideally, all children in the family become involved in play sessions or special times with their parents.

#### WHAT IS FILIAL THERAPY?

Filial Therapy is a form of family therapy. It is based on a psychoeducational model rather than a medical or expert model of practice. It harnesses the power of play therapy within the family context to empower children, parents, and the family as a whole. It helps children, parents, and families make changes that lead to closer, more cohesive relationships and better individual and collective adjustment.

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The term "filial therapy" comes from the Latin filios or filias, technically meaning sons or daughters. Loosely translated, it means parent-child. As Filial Therapy evolved, the Guerneys and others tried to find more user-friendly terms for it (Child Relationship Enhancement Family Therapy, Filial Play Therapy, Filial Family Therapy), but the name Filial Therapy remains the most widely recognized. In 2003, Louise Guerney (personal communication) requested that the term be capitalized when referring specifically to the Guerney model of conducting Filial Therapy, and that the lower case "filial therapy" or other terminology be used to refer to significant variations from the original approach (VanFleet, 2011a). That request is incorporated in this edition.

Filial Therapy refers to a theoretically integrative form of therapy in which practitioners train and supervise parents (or other caregivers) as they conduct special nondirective play sessions with their own children. The therapist provides feedback to the parents to aid in the development of their competence and confidence. Using a collaborative approach, therapists also discuss children's play themes with parents, helping parents understand their children's motivations, feelings, intentions, and behaviors in context. As parents develop the skills for conducting and understanding their play sessions, the therapist helps them shift the play sessions to the home environment. At this point the therapist continues to monitor the play sessions and overall progress with weekly or biweekly meetings with the parents alone. The therapist also helps

parents generalize what they have learned to daily life and parenting situations (VanFleet, 2011a).

Filial Therapy is considered a time-limited intervention, typically requiring 15 to 20 one-hour sessions for families experiencing moderately challenging problems. It was originally developed as group family therapy, and it is still conducted as such today when feasible (L. F. Guerney & Ryan, 2013). The length of family therapy-oriented groups ranges from 16 to 24 weeks, and there are several parenting-skills-type group adaptations that run from 8 to 12 weeks. These will be outlined later in this volume. Filial Therapy easily can be used with individual families, and this book focuses on that process. Therapists can use Filial Therapy for prevention work as well as an intervention for seriously distressed children and families.

#### THEORETICAL INTEGRATION

Much of the section that follows first appeared in a three-part article series, Filial Therapy: What Every Play Therapist Should Know, that appeared in the *Play Therapy Magazine of the British Association of Play Therapists* (VanFleet, 2011a,b,c) and is reprinted with slight modification here with their permission.

The heart and soul of any form of therapy depends on the theories and assumptions behind it. To truly understand an intervention, one must understand its foundations. When Bernard Guerney began detailing his idea of having parents conduct nondirective play sessions with their own children under the supervision of a therapist, he pulled what he considered to be the strongest aspects of several theories of human psychology (personal communication). Filial Therapy represents a true synthesis of features of psychodynamic, humanistic, interpersonal, behavioral, developmental, cognitive, and family systems theories. For example, while parents learn to show acceptance and unconditional positive regard to their children, they also provide clear behavioral limits and consequences for unsafe or destructive behaviors. While therapists teach parents using reinforcement and social learning theories, they also convey considerable empathy and support to the parents. The contributions of these theories for children and parents in Filial Therapy are described below and in greater detail in several sources (Cavedo & B.G. Guerney, 1999; Ginsberg, 2003; L. F. Guerney, 1997, 2003b; L.F. Guerney & Ryan, 2013; VanFleet, 2009a).

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**Psychodynamic.** From psychodynamic theory, Filial Therapy pulls a recognition of the importance of the unconscious and of defense mechanisms, and highlights their importance for developing self-understanding and growth. Catharsis offers release and healing, while Adlerian psychology emphasizes the need for goals, mastery, and social interest. It is assumed that children's play during Filial Therapy reveals their inner worlds, including their anxieties and their hopes. Their play is considered symbolic and meaningful. From the parents' perspective, children's play themes reflect matters of family dynamics. Children's play within the safety of the parent-child play sessions helps parents see dynamic issues, not only for the child, but for themselves and the entire family. The therapist helps parents work through these insights so that families can reach goals that yield better adjustment for all family members and the family as a whole.

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Humanistic. Filial Therapy applies humanistic, and specifically, Rogerian, theory amply throughout its process. Filial Therapy aims to enhance each family member's self-concept through the use of acceptance, genuine respect, and empathy. Children receive positive regard from their parents during the nondirective, child-centered play sessions. Parents learn to provide genuine acceptance and empathy for the children's feelings, thoughts, and motives. It is a key feature of Filial Therapy that practitioners provide this same type of safe and accepting environment to convey understanding of parents' feelings, thoughts, conflicts, and desires. Deep levels of empathy are essential for the effective engagement of parents in the process, and understanding and acceptance help parents make the sometimes difficult but necessary changes for a more satisfying family life. Filial Therapy represents a chain of empathy, giving to parents the same acceptance the therapist helps them provide for their children and each other.

**Behavioral**. Filial Therapy employs principles and methods from behaviorism and learning theory, including the use of teaching methods that ensure success. There are behavioral components within the play sessions for children, where the structuring and limit-setting skills add security, boundaries, and clear consequences to eliminate unwanted child behaviors. Parents learn a balanced approach to parenting. Therapists use reinforcement, shaping, and vicarious learning to help parents master new skills and behaviors for use with their children. The parent

training process heavily depends on behavior and learning principles (VanFleet, 2009b).

Interpersonal. Filial Therapy is based on the premise that individual behavior is largely in fluenced by interpersonal experiences. Sullivan's (1947) circumplex model of interpersonal theory suggests that one's reactions are closely associated with and in fluenced by other people's behaviors and reactions. Filial Therapy seeks to alter the action-reaction pairings that are common in the parent-child relationship by helping parents bring them to awareness and select different ways of acting or reacting to circumstances or each other. Also of great importance in Filial Therapy is the idea, drawn from interpersonal theory, that paying attention to the reciprocal nature of parent-child relationships during play sessions helps both parent and child take responsibility for changes, resulting in more satisfying family relationships overall.

Cognitive. Cognitive therapy is based on the idea that what we think affects how we feel and how we behave. In Filial Therapy, it is believed that nondirective play sessions help children change the way they think about themselves, others, and the world. This occurs as children play, expressing different feelings and acting out different roles, identities, and scenarios through their imaginary play. As often happens in the parent-child play sessions of traumatized children, they might put themselves in an imaginary victim role in the early play sessions, but increasingly assume more powerful roles that eventually vanquish the "bad guys" as their play progresses. Practitioners also help parents think differently about their children and themselves. When parents react to themes that arise in their children's play, therapists help them sort out their thoughts and help them reframe their understanding of the situation. For example, many parents start therapy thinking that their children are deliberately trying to anger them, but they often leave Filial Therapy without this belief, having replaced it with a more realistic and compassionate understanding of how trauma or anxiety drives behavior.

**Developmental/Attachment.** Children's feelings and behaviors are deeply infl uenced by their developmental levels and attachment experiences. Children's play during Filial Therapy sessions often reflects developmental tasks relevant to them at the time, such as when a 5-year-old pours water back and forth ad infi nitum, demonstrating developmental mastery at work. Therapists help parents understand

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