

The Effect of Filial Therapy on Physically Disabled Mothers' Empathy Ability and their Non-Disabled Children's Behavior Problems

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Abstract

The present research attempts to identify the effect of filial therapy on the empathy ability of physically disabled mothers and their non-disabled children's behavior. The experiment group of 6 physically disabled women were selected with the help of the association of disabled women of a city located in Choongcheongnam-do Province. The sessions of the therapy program ran weekly from March to April 2013: each of the 10 sessions lasted 1 and a half hours including a pre-test and a post-test. First, filial therapy enhanced the empathy ability of the experiment group, in comparison with the control group. Second, a variety of positive behavioral changes were observed in the process of participating in their therapy sessions: they became more receptive of the emotions of their non-disabled children, and less prescriptive and more supportive in children-led plays. Third, it was found that overall behavioral problems of the children of the experiment group were improved in contrast to those of the control group. The filial therapy was found to be effective in improving these problems of non-disabled children.

Keywords: Behavior Problem, Empathy, Filial Therapy, Non-Disabled Children, Physically Disabled Women

1. Introduction

Much psychological conflict between disabled parents and their children keeps them from establishing positive relationship. Their children might well suffer from a lot of stress from various indispensable experiences due to having disabled parents, which often results in maladjustment behavior.

Disabled parents also have a variety of difficulties in bringing up and treating their children. Many previous researches have dealt with various topics addressing such families with disabled mothers: support policies¹; qualitative case study of pregnancy, childbirth, and child-rearing^{2,3}. However, very few researches have addressed

the issue of improving the empathy ability of disabled parents and behavior problems of their non-disabled children, though some results have been reported on identifying the level of their stress from childrearing⁴.

However, most of the previous researches have been performed with normal families or multicultural families. Even the researches on families with disabled members have focused on disabled children or non-disabled siblings of disabled children. No research has been reported on the subjects of disabled parents with non-disabled children.

Filial therapy initially developed by⁵ is an attempt to expand parent education and improve the quality of the relationship between parents and children by applying children-oriented therapy to parents.

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The current research attempts to identify how filial therapy affects the empathy ability of disabled mothers and the behavioral problems of their non-disabled children. The results of the analysis are expected to help improve the empathy ability of disabled mothers, prevent emotional problems of non-disabled children and provide them with early therapeutic measures.

2. Methods

2.1 Subjects and Data Collection

The subject was 6 disabled women 6 from Association of Disabled Women of a city in Choongcheongnam-do Province participated in a series of 10 sessions.

The demographic characteristics of the experiment group are as follows: one in the 30's and five in the 40's. The ages of their children ranged from 7 to 9: two were 7 years old, one 8, and three 9. The control group, in contrast, consisted of two women in the 30's and four in the 40's. Their children were also from 7 to 9 years old: two 7, 8, and 9 years old, respectively. The program ran weekly from March to April, 2013, and each of the 10 sessions lasted one and a half hours. Their empathy ability was measured by a group of three evaluators who majored in child consulting or psychological therapy. They discussed to measure and evaluate their empathy ability after watching videotaped pictures. The pre- and post-test was conducted by using K-CBCL (Korean Child Behavior Checklist).

2.2 Tools

2.2.1 Measurement of Empathy in Adult-Child Interaction (MEACI)

The present research utilized Measurement of Empathy in Adult-Child Interaction (MEACI) to identify how filial therapy to physically disabled mothers would affect their empathy ability with their non-disabled children. MEACI include three emphatic elements of adults behavior factors: receptive communication, permission of children's self-guidance, and adult's intervention.

The scale measures three emphatic elements of adults behavior factors in the interaction between adults and children: receptive communication, permission of children's self-guidance, and adult's intervention. Receptive communication measures whether and how much a mother accepts or denies a child's emotion and

behavior during his play period. Permission of children's self-guidance, as it literally means, measures mothers willingness to agree with children's taking the lead in controlling their behavior.

Intervention, in turn, measures mothers' interest and participation in children's activities. These three categories were measured on a five-point scale by using 20-minute video taped pictures taken before and after the test: a video clip was divided into 6 sections with a three-minute interval. The current research was conducted with the help of three evaluators who majored child consulting or psychological therapy and had at least three year experience in play therapy. They received 3 sessions of preliminary training before real evaluation, watching a 20-minute play session and discussing together. Then, each of them performed evaluation of the play sessions independently. The reliability analysis of the subfactors of the empathy ability scale showed that Cronbach's α index for all the three elements of receptive communication, permission of self-guidance and intervention was obtained at .99.

2.2.2 Korean Child Behavior Checklist (K-CBCL)

The current research adopted⁶'s Korean Child Behavior Checklist (K-CBCL). This behavior checklist was designed for children aged 4-18 and parents were expected to check behavioral problem of their children in terms of a set of 10 items including timidity, physical symptoms, aggression, trust, sexual issues, and emotional instability.

Their measurement of pre- and post-test was performed with a three-point scale; 2 points for 'frequently', 1 point for 'occasionally' and 0 point for 'no', which indicates that a higher score meant being more problematic for that item of measurement. Cronbach's α index for the reliability analysis of the subfactors of behavior problems was obtained from .58 to .77.

2.3 Research Procedures

The Pretest Post-test Control Group Design was utilized for the current research. Each of the two groups, the experiment group and the control group, consisted of 6 physically disabled mothers who had non-disabled children. As reported in⁷, the filial therapy program is usually more effective when conducting with a small sized group.

The experiment group of the current research was recruited from the members of Association of Disabled

Women of C city of Choongcheongnam-do Province after sending the information and announcement including the outline and effect of the filial therapy to the organization. The therapy program lasted from March to April, 2013: Group A from March 11 to April 29 and Group B from March 4 to April 23. Each session was held in the morning between 10 and 11:30. A series of 8 weekly sessions was followed by an orientation meeting and a pre-test, and the whole program ended with a post-test to see the effect under discussion.

As mentioned above, a couple of measurement tools were used, by observing videotaped pictures, to investigate the issue under discussion - MEACI and K-CBCL: the former to measure interaction between the mothers and the children, and the latter to see improvement of the children's behavioral problems. The parents were asked to fill in the form and bring it back.

The whole program was designed in such a way that each of the 8 sessions of therapy lasted for 1 and a half to 2 hours once a week. A pre-test and a post-test were given before and after the therapy program, with the consent of videotaping all the activities.

The filial therapy sessions were intended, with two specific strategies, to improve the relationship between the mothers and the children. First, they learned to accept an environment in which children can express their opinions, desires and emotions. Second, they were led to participate in role plays and demonstrations. The mothers learned necessary techniques and were put into a 20 minute play session each week. They were asked to bring videotapes of play scenes recorded at home. Then, all the members of the program including trainers and other mothers watched the videotapes and provided comments, feedbacks, support and encouragement.

2.4 Data Analysis

The collected data was analyzed by using the SPSS 18.0 program. First, in order to identify the socio-demographic characteristics of the two groups, the frequency and percentage were calculated for a χ^2 test. Also, Cronbach's α was obtained to measure the reliability of the scales. Then, we conducted Mann-Whitney's U test in order to identify the effect of the filial therapy on the empathy ability of the disabled mothers and the behavioral problems of their non-disabled children and the nonparametric Wilcoxon Rank Sum-Test to see the differences among the subfactors.

3. Results

3.1 Effect of Filial Therapy on the Empathy Ability of Disabled Mother

Table 1. Effect of filial therapy on the empathy ability

	Experiment (n=6)	Control (n=6)	Z
pre-test	40.12.64	38.52.32	-2.89**
post-test	13.63.14	37.37.65	-2.89**
(signed rank + sum)	00.00	04.00	-2.89**
(signed rank - sum)	21.00	17.00	-2.89**
z	-02.20*	-01.36	-2.89**
p	00.03	00.17	-2.89**

** p < .01

Table 1. shows the result of analyzing the effect of filial therapy on the empathy ability of physically disabled mothers. Significant difference between the two groups was found in the post-test, which clearly indicates positive effect of the filial therapy.

The results displayed in Table 1 would clearly show that disabled mothers' participation in filial therapy would help enhance their empathy ability and interaction with their children.

3.2 Change Process of Disabled Mothers' Empathy Ability

The reports of these disabled mothers showed change in their behavior in terms of the three factors of MEACI. They changed in their way of communication from uttering critical remarks on the children's behavior to using receptive communication of accepting their emotions as well as their behavior. In terms of self-guidance factor, the mothers gradually changed from being directive to letting the children lead and make decisions. Finally, the mothers' way of intervention also showed positive changes; they expressed their own desires and emotions less and learned to show more interest and participate in the children's plays actively.

3.3 Behavioral Problems of Disabled Mothers' Non-Disabled Children

In sum, disabled mothers' participation in filial therapy would effectively enhance their empathy ability and

interaction with their children and reduce the behavioral problems of non-disabled children, in particular, in such areas as timidness, depression/anxiety, social immaturity, aggression, internationalization and externalization.

Table 2. shows the differences between the pre- and post-test. Let us take turns discussing whether the filial therapy helped decrease behavioral problems of the non-disabled children.

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Table 2. Behavioral problems of disabled mothers' non-disabled children

	Experiment (n=6)	Control (n=6)	Z
pre-test	32.17.40	29.50.57	-2.89**
post-test	11.67.12	32.17.63	-2.89**
(signed rank + sum)	00.00	19.00	-2.89**
(signed rank - sum)	21.00	02.00	-2.89**
z	-02.21*	-01.79	-2.89**
p	00.03	00.07	-2.89**

** p < 0.01

3.4 Children's Behavior Problem's Change Process

The experiment group showed significant difference between the pre-test and the post-test in terms of the factors of timidness, depression/anxiety, social immaturity, aggression, internalization, externalization and overall behavioral problem, whereas the control group did not. This naturally resulted in significant difference between the two groups in the post-test.

A slightly different result was found in the categories of physical symptoms, thought problems, attention and misdemeanor. The experiment group showed significant difference, while the control group did not. However, in the post-test no significant difference was found in these factors between the two groups.

In sum, disabled mothers' participation in filial therapy would effectively help reduce the behavioral problems of non-disabled children, in particular, in such areas as timidness, depression/anxiety, social immaturity, aggression, internationalization and externalization.

4. Discussions

First, it was found that filial therapy enhanced the empathy ability of physically disabled mothers with non-disabled children. According to the mothers' report, they felt awkward in earlier sessions about being silent, listening reflectively, and responding empathically and tried unconsciously to lead the play activities. But, as sessions pass, they showed more intimacy and receptive communication with their children and followed the children's activities. A similar result was also reported in filial therapy did improve parents' empathy ability. Thus, it seems essential that physically disabled parents be trained to learn to perform receptive communication and reflective listening.

Second, during the therapy program, the disabled mothers under analysis showed gradual change: they learned to accept the children's emotions more and more, and to participate children-led plays cooperatively and non-directly. The mothers also gradually followed and spontaneously participated in the children-led activities rather than control their children's play with directive attitude. Such positive changes are clear evidence of the positive effect of the filial therapy program.

Third, it was found that the filial therapy helped reduce the children's behavioral problems in six of the ten subfactors: timidness, depression/anxiety, social immaturity, aggression, internationalization and externalization. But no significant change was found in the other categories: physical symptoms, thought problems, attention and misdemeanor. However, overall evaluation led us to conclude that filial therapy is an effective way of reducing their behavioral problems.

As time passed, the mothers showed gradual changes in responding to their children, being more empathic, attentive, communicative and patient with their behavior. Such a change led the children to express their needs and desires more actively, which clearly indicates that improved empathy ability of the disabled mothers via the filial therapy helped reduce the behavioral problems of the children.

These results are consistent with the findings of other previous researches that found positive effect of filial therapy on reducing children's behavioral problems. We should admit a set of limitations of the research. First, it might be difficult to generalize the research

results, since the experiment group consisted of only 6 physically disabled women. Second, follow-up reviews of the analyzed effect of filial therapy have to be made. Third, very few researches have been conducted to non-disabled children of disabled parents partly because of the difficulty of sampling subject groups.

5. References

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