

Child Parent Relationship Therapy (CPRT): A 10-Session Filial Therapy Model

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CPRT Filial Therapy Model – filial therapy was developed by Bernard and Louise Guerney in the early 1960's in response to the growing demand for and unavailability of mental health services for children and their families (influenced by Axline's work with children in child-centered play therapy) --- further refined by Garry Landreth in the 1980s into an intensive 10-session training model. Rise van Fleet and Barry Ginsberg have also been influential in the growth of filial therapy. The ten-session filial training model is a proven model that has been recently manualized by Garry Landreth and Sue Bratton (Landreth & Bratton, 2006; Bratton, Landreth, Kellum, & Blackard, 2006). Over the years, Filial therapy training has been extended for use with teachers, student mentors, and other paraprofessionals who work with young children.

Definition of CPRT: A therapeutic intervention and preventative approach that can help both children and parents by training parents to become therapeutic agents. Parents are trained to become a constructive force for change in their child's life by utilizing basic play therapy principles in weekly, structured play sessions with their children using a special kit of selected toys. Utilizing a support group format in combination with didactic instruction and direct supervision, parents learn to recognize their child's emotional needs and learn to convey acceptance, empathy, and encouragement to their child, as well as master the skills of effective limit setting. Through this process the parent-child relationship is enhanced and strengthened, thus facilitating personal growth and change for child and parent.

Research: The filial therapy approach has been well-researched with diverse populations in a variety of settings. Over 35 pre-test post-test control group studies have been conducted involving over 1000 participants. A recent meta-analysis of filial therapy studies confirmed the efficacy of this intervention. The meta-analysis revealed a large effect size of 1.06 for all filial studies (including those that trained teachers, mentors, etc) and an effect size of 1.15 for those studies involving only parents. Further analysis revealed an effect size of 1.25 for outcome studies researching the effectiveness of the CPRT 10-Session model; ES = 1.30 when CPRT parent-only studies were analyzed.

Rationale/Basic Premises Underlying this Approach:

- Allows helping professionals to effectively assist more individuals.
- Preventative treatment, as well as intervention --- intergenerational effects.
- Assumes parents can learn the necessary therapeutic skills to be effective, focusing on conveying unconditional acceptance and empathy.
- Utilizes the naturally existing bond between parent and child, based on the assumption that the parent has more emotional significance to the child than does the therapist and the potential to continue to influence the child positively for a long period of time.
- Developmentally appropriate: utilizes play, children's natural and spontaneous way of expressing and mastering their world. Filial training focuses on helping parents understand and respond appropriately to their child's play.
- Utilizes an educational model in combination with a support group format, based on the assumption that most of the difficulties that parents experience with their children arise from a lack of knowledge and/or skill and that parents need emotional support and encouragement to begin to make changes as they acquire new knowledge/skills, just as their children do.
- Acknowledges the vital importance of the child-parent relationship as a foundation for a child's healthy growth and development. The relationship is seen as the vehicle for change, thus the focus is on the process of relationship enhancement, not on finding a "quick fix" to a specific behavior problem.
- Acknowledges that learning, growth and lasting change stem from within the child --- teaches parents to nurture an internal locus of control in their child, fostering creativity, self-direction, self-responsibility, and self-control.
- Children's problematic behaviors influenced by parental attitudes can be more effectively worked through under similar conditions --- provides opportunity to intervene into family dynamics.
- Empowers parents to help their children; thereby avoiding the potential feelings of guilt and helplessness parents may develop when dependent upon a professional for problem resolution.
- Acknowledges the importance of structuring training to ensure parents experience SUCCESS. Parents are asked to practice the skills they are learning only during their weekly thirty-minute special play time. Supervision of parents' videotaped and/or live play sessions requires them to demonstrate their skills and offers opportunities for specific feedback and encouragement from the therapist and the other parents.

Much of the above information is excerpted from Landreth, G., & Bratton, S. (2006). Child-Parent Relationship Therapy (CPRT): A 10-Session Filial Therapy Model and Bratton, Landreth, Kellum, & Blackard (2006). CPRT Treatment Manual, both published by Bruner-Routledge Publishing, NY.