

JOURNAL
OF THE
TEXAS ASSOCIATION
FOR
MARRIAGE AND FAMILY
THERAPY



ISSN # 1524-2331

VOLUME 13
NUMBER 1
2008

2008 JOURNAL

of the Texas Association for Marriage and Family Therapy

Table of Contents

| | |
|---|----|
| Editorial Advisory Board, Editorial Staff, And TAMFT Board of Trustees..... | 4 |
| Editor’s Comments..... | 5 |
| Cultural Diversity: Factors Influencing Cultural Diversity Recruitment in COAMFTE- Accredited Programs | 6 |
| <i>Jared Dupree, Michael P. Anderson, Yolanda Bernard, Andrew Bratawidjaja, Katie Daniels, Kimberly Dockery</i> | |
| Playful Parents: The Relationship Between Parental Level of Differentiation and a Parent’s Interactive Styly in a Play Setting | 24 |
| <i>Molly Kuzmich, Linda Metcalf, Joel Muro</i> | |
| Reviews..... | 46 |
| Call for Papers | 55 |
| Instructions for Authors..... | 56 |

2008 JOURNAL

of the Texas Association for Marriage and Family Therapy

Content Editor

James Morris, Ph.D.
*Texas Tech University
Fredericksburg, TX*

TAMFT Board of Trustees

Officers

Marvarene Oliver, Ed.D.
President

Michael S. Bishop, Ph.D.
Past President

Liz Gentry, M.A.
Secretary

Susan Perry, Ed.D.
Treasurer

Board Members

Kenneth Bateman, Ed.D.

Megan Bayles Bartley, MAMFT

Becky Davenport, Ph.D.

Robin Eisen, M. A.

Steve Rowlands, MMFT

Brandon Wheeler
Student Board Member

Editorial Advisory Board

Brent Bradley, Ph.D.
University of Houston- Clear Lake
Houston

Jared Dupree, Ph.D.
University of Houston- Clear Lake
Houston

Kyle Killian, Ph.D.
York University
Toronto, Ontario CANADA

Leslye King Mize, Ph.D.
University of Houston-Clear Lake
Houston

Marvarene Oliver, Ed.D.
Texas A&M University-Corpus Christi
Corpus Christi

Dan Ratliff, Ph.D.
St. Mary's University
San Antonio

Shari Scott, M.A.
Children's Medical Center
Dallas

J. Paul Sorrels, Ph.D.
East Texas Baptist University
Marshall

Frank Thomas, Ph.D.
Texas Christian University
Fort Worth

Kirk Zinck, Ph.D.
University of Texas at Tyler

2008 JOURNAL

of the Texas Association for Marriage and Family Therapy

Editor's Comments

This volume of the *Journal* includes a timely article by Jared Dupree and colleagues on factors influencing cultural diversity recruitment in MFT programs, as well as an article by Molly Kuzmich and colleagues exploring the impact of intergenerational dynamics on the parent-child relationship. Additionally, we have added a Book Reviews section under the able direction of Steve Harris. Included in this volume are four reviews of books covering topics about couple relationships as well as genograms.

I express my gratitude to members of the Editorial Advisory Board for their continuing service to the *Journal*. In particular I want to acknowledge my appreciation to outgoing member Terry Hargrave (1996-2008). I welcome several new Board members including Shari Scott, Brent Bradley, and Jared Dupree.

I welcome and encourage submissions from all readers. The *Journal* aims to provide a professional development resource for members and interested individuals that address the current practice interests of clinicians, both theoretical and empirical scholarly research interests of academicians, and bridging between clinicians and academicians.

James Morris

CULTURAL DIVERSITY RECRUITMENT: FACTORS INFLUENCING CULTURAL DIVERSITY RECRUITMENT IN COAMFTE-ACCREDITED PROGRAMS

*Jared Dupree, Michael P. Anderson, Yolanda Bernard,
Andrew Bratawidjaja, Katie Daniels, Kimberly Dockery*

ABSTRACT

Culturally diverse therapists are important to mental health professions in regards to reaching the needs of culturally diverse clients. Census projections predict that the United States will continue to evolve into an ethnically diverse country with minority populations increasing dramatically. The field of Marriage and Family Therapy (MFT) has increased its efforts to recruit more diversity to graduate programs in order to meet the demands of the changing population. Unfortunately, minority populations are increasing faster than the field's ability to recruit more diversity. A number of studies have been performed in order to explore strategies to recruit more diversity. However, very few studies have actually sampled minority students. The purpose of this paper is to present factors that influence cultural diversity recruitment in COAMFTE-accredited Doctoral and Master's programs based on survey questions posed to 298 MFT graduate students with a minority sample of 63. Descriptive statistics are used to present data on factors that contribute to student recruitment. Open-ended questions were also analyzed and compared with descriptive results. Strategies to improve cultural diversity recruitment are explored.

W. Jared Dupree, Ph.D, School of Human Sciences & Humanities, University of Houston-Clear Lake. Katie Daniels, Ph.D, College of Education & Human Sciences, University of Nebraska-Lincoln. Andrew Bratawidjaja, Ph.D, Kimberly Dockery, M.S., Yolanda Bernard, M.S., School of Family Studies and Human Services, Kansas State University. Michael P. Anderson, Department of Statistics, Kansas State University.

Address correspondence to Jared DuPree, Ph.D., 2700 Bay Area Boulevard, Houston, TX 77058-1098. Email: dupreew@uhcl.edu

Journal of the Texas Association for Marriage and Family Therapy
Volume 13, No. 1, 2008

In 2002, AAMFT stated that 85 accredited graduate programs reported ethnicity data revealing that 77% of the students identified themselves as European Americans, 8% African Americans, 4% Asian Americans, 6% Hispanic Americans, and .6% as Native Americans (COAMFTE, 2003). With US population trends consisting of 73.9% Whites, 4.4% Asian Americans, 12.4% African Americans, 14.8 % Hispanic Americans, and .8% Native Americans (U.S. Census Bureau, 2006), Green (1998) notes that there continues to be an under-representation of therapists of color in the field. The need for more minority therapists has been well documented. Wilson and Stith (1993) found that in the past 10 years before their study, less than 1% of master's degrees and only 1.8% of doctoral degrees in Marriage and Family Therapy (MFT) were awarded to African Americans. In 1995, a survey conducted by the California Association of Marriage and Family Therapists indicated that out of 12,900 family therapists, 94% were European American, whereas 66% of their clients were from other racial groups (Green, 1998). One of the more recent surveys of family therapists shows that 95% of family therapists nationally are Caucasian (Bailey, Pryce, & Walsh, 2002).

Census projections suggest an even greater need to recruit more diverse therapists in the near future as the United States evolves into a minority-majority country. The Department of Health and Human Sciences (2001) estimates that by 2050, people of color will make up the majority of the US population. Thus, the need to recruit diverse therapists will increase as the populations of minority groups dramatically changes. If the mental health system is not well equipped now to meet diversity needs, it is difficult to imagine how the mental health system will be able to meet the demands of such large minority populations in the future if recruitment trends do not change. The purpose of the present study is to present findings that will help COAMFTE-accredited programs recruit more diverse students to meet the needs of minority populations.

A number of studies suggest that minority clients are more likely to feel trust, continue with treatment, and feel satisfied with treatment when the therapist comes from a similar ethnic background (e.g., Sladen, 1982; Atkinson, 1983; Helms & Carter, 1991; Coleman, Wampold, & Casali, 1995;). Other studies suggest that some minority clients do not have a preference and ethnicity of the therapist is not important in regards to satisfaction or outcome (Sattler, 1977; Speight & Vera, 1997; Murphy, Faulkner, & Behrens, 2004).

In addition to improving mental healthcare delivery, recruitment of minority therapists also seems to improve the discipline of marriage and family therapy itself. Minority therapists/students offer multiple perspectives in the classroom, in theory development, and in producing sensitive research. It has also been noted that traditional models and research methods have relied on the expertise of majority researchers sampling majority populations termed as “scientific racism” (Sue, 1999). As more minority therapists and researchers enter the discipline, multiple perspectives will add more validity to theory and research. Killian and Hardy (1998) note that systems theory itself may have experienced “tunnel vision” due to the lack of cultural components addressed through theory development. Minority theorists can add to family systems model developments. As minority therapists become therapists, theorists, and researchers, measures can be taken to learn how to better improve treatment delivery, outcome effectiveness, clinical decision-making, and theory development using multiple perspectives (Killian & Hardy, 1998; McDowell & Shelton, 2002; McDowell, Fang, Brownlee, Young, & Khanna, 2002).

Although cultural diversity seems to greatly add to the mental health system’s needs of treating minority groups, cultural diversity recruitment appears to be difficult for many disciplines. Wilson and Stith (1993) noted that low minority representation in graduate programs is a widespread problem across disciplines. More recently, Swail, Redd, and Perna (2003) found that Caucasians and Asians were much more likely to pursue higher education than other ethnicities. Furthermore, they found that many ethnic minorities leave higher education before they finish their degree. Within the field of Marriage and Family Therapy, Wilson and Stith (1993) surveyed 29 COAMFTE-accredited programs and found that 80% of the programs attempted to recruit minority students. However, only 29% of those programs felt they were successful in their endeavors.

A number of studies have presented strategies to improve multicultural training and enhance diversity in MFT programs (McDowell et al., 2002; Inman, Meza, Brown, & Hargrove, 2004; Killian & Hardy, 1998). Unfortunately, little is known about what minority students actually experience in the recruitment process based on the report of minority students. There is only one known MFT study that actually sampled minority students with a sample size of 15 master’s and doctoral African Americans (Wilson & Stith, 1993).

McDowell et al. (2002) feels that in order to address multicultural recruitment, university, organization, program, and faculty readiness need to be examined in regards to cultural awareness and abilities to meet the needs of minority students. Furthermore, they indicate that traditional means of recruiting through current networks and media resources (e.g., brochures, internet) may not be reaching targeted populations. Finally, they specifically suggest identifying targeted populations, networking and building relationships with population communities, helping make cultural connections on campus with faculty and/or organizations, and addressing admission procedures that may discourage minority students in order to improve recruitment. Kaplan and Small (2005) have offered insight to strategies that improved minority recruitment at the Ackerman Institute. They suggest a “bottom up” approach in which emphasis is placed on entering the world of the minority student rather than inviting the minority student to enter the majority institution.

Wilson and Stith (1993) encourage the following in order to enhance African American recruitment: 1) improving financial assistance; (2) increasing the number of African-American faculty members; (3) informing and educating prospective African-American students; and (4) paying special attention to why MFT programs have not been more successful in recruiting African-American students in the past.

In summary, cultural diversity recruitment in COAMFTE-accredited programs appears to be a growing need as US minority populations continue to increase. Currently, the field of MFT is falling short in terms of attracting culturally diverse students. Significant changes need to be made in order to meet and even greater need in the near future. Although excellent strategies to improve diversity recruitment have been presented in a number of studies, only one known study has actually sampled a minority population from COAMFTE-accredited programs. The purpose of the current study is to use what Kaplan and Small (2005) referred to as a “bottom up” approach in which we give voice to minority students as they provide the data and describe experiences that will help shape strategies to improve diversity recruitment in MFT programs. It is important to note that although a major focus of the present study is to examine diversity in terms of ethnic differences, data regarding other areas of diversity (e.g., age, gender, geographic region, bachelor degree major, and religion) will be presented as well in order to offer insight into attracting many types of diversity to MFT programs.

METHODS

Internet surveys were completed by 298 master's and doctoral students in COAMFTE-accredited programs. Student demographics included 223 (75%) of students identifying themselves as Caucasian while 63 (25%) identified themselves as an ethnic minority (See Table 1). Surveys contained questions regarding demographics, a 22-item scale related to graduate program selection factors, and open-ended questions addressing recruitment experiences and suggestions. Surveys were e-mailed to program directors and were then forwarded to students to complete. Two waves of e-mails were sent over a three-week period of time. The average time spent completing each survey was between 39 and 40 minutes.

TABLE 1

| Master's Students (234)* | | Doctoral Students (64)* | |
|--------------------------|-----------|-------------------------|----------|
| Gender: | | Gender: | |
| Female | 195 (83%) | Female | 48 (75%) |
| Male | 37 (17%) | Male | 15 (24%) |
| Ethnicity: | | Ethnicity: | |
| African-American | 15 | African-American | 9 |
| Asian | 13 | Asian | 4 |
| Bi-racial | 7 | Bi-racial | 2 |
| Caucasian | 179 | Caucasian | 44 |
| Middle-Eastern | 1 | Hispanic | 2 |
| Native-American | 1 | | |
| Hispanic | 9 | | |
| Caucasian | (76%) | Caucasian | (72%) |
| Minority | (24%) | Minority | (28%) |
| School Location | | School Location: | |
| Northeast | 30% | Northeast | 13% |
| Southeast | 23% | Southeast | 30% |
| Midwest | 42% | Midwest | 42% |
| Southwest | 0% | Southwest | 11% |
| Northwest | 5% | Northwest | 2% |
| International | 0% | International | 0% |

*Some participants did not respond to all demographic questions.

QUESTIONNAIRE DEVELOPMENT

A pilot study was performed in which 6 doctoral students and 14 masters' students completed an Internet questionnaire containing 82 Likert-scale questions addressing factors that influence graduate program selection in MFT. Of these 20 students, 30% identified themselves as belonging to an ethnic minority. These 82 questions were developed by faculty and students in a Midwestern COAMFTE-accredited program containing both a master's and doctoral program and placed into 9 categories: 1) Geographic Location, 2) Financial Assistance, 3) History of Program, 4) Faculty Connections, 5) Student Connections, 6) Interview Process, 7) Program Opportunities, 8) Family/Colleague Influences, and 9) Values/Beliefs. These factors are similar to the factors Hertlein and Lambert-Shute (2007) developed in a study examining factors that influence selection of a graduate program. Based on the responses and feedback gained from the pilot study, a shorter version of the questionnaire was created with a total of 22 questions including a section on category rankings (See Appendix I). Finally, open-ended questions were added to gain more insight about recruitment strategies.

DESCRIPTIVE ANALYSIS

Descriptive statistics were used to present data on factors that are important for various minority groups in regards to recruitment. In addition, students ranked categories with each category receiving between a 1 and 16 with 1 equaling the most influential factor in choosing a program. Rankings for each category were averaged in order to determine which categories were more influential.

CONTENT ANALYSIS

Researchers before the analysis discussed ways to address power. The group came up with the following boundaries: 1) In order to not overly interpret or adapt the data to dominant paradigms, only direct quotes were used to report the findings, 2) Past assumptions about certain ethnicities were questioned in order to avoid the tendency of fitting the findings into traditional stereotypes, and 3) Three indicators of rigor were used to establish trustworthiness: credibility, dependability, and confirmability (Lincoln & Guba, 1985; Merriam, 1998).

Indicators of rigor in qualitative research are the approximate equivalents of the terms internal validity, external validity, reliability, and objectivity, which are used in quantitative research (Lincoln &

Guba, 1985). Credibility (internal validity) was used by triangulating the data through the use of multiple investigators and peer debriefing. Two doctoral students who were highly involved throughout the process analyzed the results. In addition, a faculty member who was not involved in the research process analyzed the data. A faculty member outside of the research team conducted a peer debriefing. Dependability (reliability) was established through the use of an audit trial. Finally, confirmability (researcher neutrality) was established throughout the content analysis as well as the final analysis (quantitative and qualitative results) by intensifying triangulation (e.g., multiple investigators inside and outside of research team, comparison of quantitative and qualitative results, controlling biases through audit trailing).

Participants answered five open-ended questions during the online survey addressing cultural diversity recruitment. Researchers placed direct quotes into themes and patterns that emerged from the data using inductive analysis. Coding and classifying data relied on convergence and divergence properties in which internal homogeneity (extent to which data fits together) and external heterogeneity (extent to which differences among categories is clear) was emphasized (Patton, 2003, p. 465). Emic analysis was used during this process in which the language and categories of the people studied are used rather than categories created by the researchers (Pike, 1954 as cited in Patton, 2003, p. 267). Following analysis, overall results were compared and contrasted.

DESCRIPTIVE STATISTICS

Results from doctoral programs and master's programs are separately reported in order to address unique differences students experience while applying to different degree levels. In addition, data capturing the entire sample will be presented in addition to data separated by ethnicity.

It is interesting to note that based on the results of this survey, the average Master's student is a single 29 year old Caucasian female with a bachelor's degree in psychology. The average doctoral student is a married Caucasian female with no children between the ages of 26 and 28 with a Master's degree in Marriage & Family Therapy and a bachelor's degree in psychology.

MASTER'S PROGRAM RESULTS

Overall, almost 50% of students only apply to one program with the majority applying to a program within their current state of residence. Almost 50% were in school the year before they

Journal of the Texas Association for Marriage and Family Therapy
Volume 13, No. 1, 2008

applied with about 20% working in the mental health field. The top five factors that influence their choice of school are: 1) Clinical Opportunities (3.97 average ranking); 2) Geographic Location (3.97); 3) Faculty-Student Connection (4.54); 4) Financial Assistance (4.57); 5) Personal Values/Beliefs (7.05). In regards to the most influential people that help them decide which program to choose, the three most important people were: 1) MFT faculty from the program (1.94); 2) Family Members (2.57); and 3) Students in the program (3.27).

In regards to specific minorities, the average African-American student (n=15) is a 25 year old single female with a bachelor's degree in psychology. The top five factors that influence their choice of school are: 1) Financial Assistance (1.53); 2) Faculty-Student Connection (3.9); 3) Clinical Opportunities (3.91); 4) Geographic Location (4.7); and 5) Cultural Diversity (6.25). The three most influential people in helping them decide which program to choose include: 1) MFT faculty (2); 2) Family members (2.63); and 3) Friends (3.22).

The average Asian-American (n=13) student is a 28 year old single female with a bachelor's degree in psychology. The top five factors that influence their choice of school are: 1) Geographic Location (2.875); 2) Clinical Opportunities (4.8); 3) Cultural Diversity (5); 4) Faculty-Student Connection (5.56); and 5) Financial Assistance (6.125). The three most influential people in helping them decide which program to choose include: 1) Students in the program (1.63); 2) Family Members (2.33); and 3) MFT faculty (2.7).

The average Latino/Hispanic student (n=9) is a 28 year old single female with a bachelor's degree in psychology. The top five factors that influence their choice of school are: 1) Geographic Location (4.28); 2) Financial Assistance (5.57); 3) Clinical Opportunities (5.83); 4) Faculty-Student Connection (6); and 5) Cultural Diversity (6.33). The three most influential people in helping them decide which program to choose include: 1) Students from their previous program (1.67); 2) Family members (3); and 3) MFT faculty (3.6).

There was not enough data to report on Native American trends.

DOCTORAL PROGRAM RESULTS

Overall, about 27% of students applied to one program while over 30% applied to four or more programs with the majority applying to programs outside of their current state of residence. About 58% of students were in school the year before they applied with 27% working in the mental health

field. The top five factors that influence their choice of school are: 1) Financial Assistance (3.2 average ranking); 2) Faculty-Student Connection (4.18); 3) Geographic Location (4.93); 4) Clinical Opportunities (5.38); and 5) Research Opportunities (6.47). The most influential people in helping them choose a program include: 1) MFT faculty from the program of consideration (1.92); 2) Family Members (2.42); and 3) Faculty from Previous Program (2.47).

In regards to specific minorities, the average African-American doctoral student (n=9) is a single female between the ages of 29 and 31 with a Master's degree in Marriage and Family Therapy and a bachelor's degree in Psychology. The top five factors that influence their choice of school are: 1) Financial Assistance (3.5); 2) Clinical Opportunities (4.4); 3) Geographic Location (4.6); 4) Faculty-Student Connection (4.67); and 5) Cultural Diversity (6.25). The three most influential people in helping them decide which program to choose include: 1) MFT faculty (2); 2) Family members (2.63); and 3) Friends (3.22).

In regards to Hispanic and Asian-American doctoral students, sample sizes were low. It would be difficult to make any conclusions based on the descriptive data alone.

CONTENT ANALYSIS RESULTS

We chose to analyze overall results and compare ethnic differences as well. Thus, under each question, overall results will be reported in addition to results related to each minority ethnic group. Originally, results from doctoral programs and master's programs were analyzed separately; however, the findings among the two groups were so similar that it was decided to combine the results. Thus, the following findings can be generalized to both doctoral and master's programs.

Question 1: What were the most important factors that contributed to you choosing to go to a particular program over another?

Overall, the findings indicated a number of major factors that influenced the choice of one program over another including financial assistance, geographic location, and faculty relationship. Other significant findings that were mentioned included the prestige of the program, cultural diversity, and family concerns.

When examining ethnicity, African American students (n=24) listed geographic location and faculty relationship as the most important factors with financial assistance, acceptance to the program, only choosing one program, and cultural diversity also being mentioned. It is interesting to

note that acceptance to the program was a significant factor to one student suggesting that some students may only get accepted to one program, thus, narrowing their choice.

Asian students (n=17) mentioned financial assistance and the ability of the program to meet research and clinical interests as the strongest factors along with a connection with faculty and other students. Latino students (n=11) mentioned geographic location, shared interests with the faculty, reputation of the program, time to finish the degree, and financial assistance as important factors contributing to program selection. There were not enough responses to make conclusions about biracial or Native American doctoral students' responses.

Question 2: How did you hear about Marriage & Family Therapy before graduate school?

When examining all the results, there was a clear indication that most students heard about Marriage and Family Therapy through a school connection with the majority mentioning a previous class or faculty member. Other significant factors include previous job experience, the internet, and family or friends.

Specifically, African Americans (n=24) mainly mentioned previous education and the internet as sources for learning about the field of MFT. Asian students (n=17) mentioned previous faculty members and the internet as well as family. Latino students (n=11) only mentioned previous school connections (undergraduate education) including a flyer posted, an advisor, and undergraduate classes and textbooks.

Question 3: What would have helped you more in making a decision to attend a particular Ph.D/MS program?

Total results indicated that most students wanted more contact with students in the program to understand their experiences. In addition, they mention more contact with faculty and more information about cost of the program including resources related to financial assistance. A number of students also mentioned wanting to know more about the field in general in regards to finding a school that provided classes and opportunities that fit their needs. Updating websites, specific information on classes and curriculum, projections of time to finish the degree, and more honesty about the zeitgeist of the program were also mentioned.

African Americans (n=24) mainly focused on more information on financial aid. In addition, learning more about the school and geographical area was also mentioned. Asian students (n=17)

discussed the importance of speaking with previous or current students including international students. They also mentioned needing to have faculty support and speaking with faculty face-to-face rather than through a phone interview. Latino students (n=11) reported wanting more information on curriculum, costs, and research opportunities.

Question 4: Currently, the field of MFT is trying to attract more cultural diversity. How do you feel programs could attract more diversity to the field?

The strongest finding when examining all responses was an emphasis on connecting more with cities, areas, and schools that represent ethnic minority populations. More diverse faculty, financial aid, and cultural diversity embedded in the curriculum were strong findings as well. In addition, minority research and diversity advocacy were also mentioned.

African Americans (n=24) mainly focused on recruiting in schools (e.g., historically Black colleges) and areas where MFT is traditionally not seen or heard. They also feel that increasing program diversity and financial aid would help attract more diversity. Asian students (n=17) discussed the importance of program environment in terms of policy, clinical emphasis on diversity, and minority research. Latino students (n=11) mentioned the importance of mentoring programs through cultural events and networking in order to attract more diversity.

Question 5: In your own words, what should a student look for in choosing a Doctoral/MS program in MFT?

Students indicated that fitting their research/clinical interests with the interests of the faculty and program was the most important factor to look at when choosing a program. They also emphasized financial aid opportunities and faculty availability. A number of students also mentioned examining the “personality” of the program to see if it fits with one’s own style of learning and interacting.

African Americans (n=24) discussed the importance of looking at faculty and student support as an indicator of choosing a program. They also stated the need to fit clinical and research interests with the interests of the faculty, especially in terms of looking at incorporating diversity issues in the research and the curriculum. At the Master’s level, many African Americans mentioned the need to find out about financial aid. Asian students (n=17) mainly focused on meeting research and clinical interests with faculty expertise. In addition, how the faculty members interact and support students

were also important factors when choosing a school. At the Master's level, strong emphasis is placed on faculty reputation and strength in terms of skills and expertise. Latino students (n=11) mentioned the importance of examining whether or not the program has timely plan laying out coursework and expectations. They also mentioned financial aid and faculty-student fit as indicators of a good program.

DISCUSSION

Combining quantitative results with the content analysis results, a number of important trends arise. Specifically, the common threads presented can help supervisors and academicians create strategies for attracting more culturally diverse students.

OVERALL TRENDS

First, it appears that the most important factors for students when choosing a doctoral program are the faculty relationship with the student, financial assistance, and geographic location. Second, it appears that a number of minority students believe that current marketing strategies are not reaching minority populations. It appears that connections are not being made with the right people in the right places.

When choosing a Master's program, geographic location appears to be much more important as many students do not leave their home state. In addition, financial assistance and faculty relationship are also important factors.

AFRICAN AMERICAN STUDENTS

In regards to trends related to African American students, it appears that geographic location and financial assistance are the most important factors when considering a school. It may be important to spend more time helping African American students feel comfortable in a new community and help them understand that they will be able to financially survive if there are financial concerns. It was suggested by African American students to connect with key stakeholders in Historically Black Colleges, minority communities, and religious/community organizations as well as traditional university programs in order to build long-term relationships with mentors that influence African American students. In addition, it appears that providing students with research and clinical opportunities related to minority issues along with increasing diversity among the faculty and incorporating diversity into the curriculum are important factors that will help attract students.

ASIAN AMERICAN STUDENTS

Asian American students seem to place importance on matching their clinical and research interests with the faculty's interests. Most Asian students learn about a program through faculty members or the internet. They also place importance on forming a connection with current and previous students to learn about the program. A number of them mentioned the importance of connecting with international students as well. Thus, it may be important to provide more opportunities to Asian students to connect with current students and faculty along with international students within the entire university system.

LATINO STUDENTS

In regards to Latino students, most students learn about MFT programs through the advisement of previous faculty and/or advisors. Some mentioned the need for a detailed plan of costs, time expectations, class curriculum, and graduation time in order to make a decision. They also suggested having more mentoring programs in which Latinos can connect with programs through cultural events or programs. Faculty-student connections and financial assistance are also factors that help them decide one program over another.

OVERALL STRATEGIES

In summary, we recommend using a "bottom up" approach in order to attract minority students to MFT programs. It is suggested that programs conduct marketing analysis in order to understand where targeted minority students find information keeping in mind the application of websites, brochures, flyers, presentations, etc. Marketing analysis techniques that tap into the voice and perspective of minority students will help programs learn how to adjust current recruiting strategies. Based on the conclusions of this study, it appears that many students find schools based on previous faculty members. It will be important for MFT programs to connect with school advisors, faculty members, and key players at targeted universities that represent minority populations (e.g. Historically Black Colleges). In addition, we recommend connecting with minority community leaders, organizations, and programs to create mentoring programs and cultural events in order to establish long-term relationships in cities and regions that represent minority populations.

Once students express an interest in a program, it will be important to provide opportunities to connect with faculty, students, university organizations, and community institutions that are valued by

the targeted population. Many students may have a difficult time moving from their family or a familiar environment; thus, providing opportunities for minority candidates to form new communities can help students feel more comfortable when considering a particular program. Faculty are encouraged to take time and connect with minority students on a personal level and discuss program fit in terms of clinical, research, and teaching opportunities. Emphasizing minority research, clinical opportunities with minority populations and multicultural training through cultural experiences and curriculum development can help students feel excited about coming to a particular program. In addition, addressing financial concerns in terms of discussing assistantships, financial aid and opportunities for funding can help students feel more confident in their decision-making process.

Overall, it is apparent that recruitment strategies need to improve when attempting to attract more cultural diversity. Traditionally, it appears that many programs have not fully succeeded in this endeavor possibly due to using a “top heavy” approach in which programs expect diversity to come to them. If programs expect minority populations to get out of their comfort zone by moving to a new area and beginning a life-changing program, it would be isomorphic for programs to get out of their comfort zone and be proactive in building bridges with students and gatekeepers in order to improve minority recruitment. It is apparent through the data presented that a “bottom up” approach is recommended in which programs go to the targeted populations, make the first connections, get out of their comfort zone to enter new communities, make long-lasting relationships with key players in targeted populations and schools, address multicultural competence in their training programs, establish a minority population research agenda, attract minority clients, and enhance faculty diversity. Hopefully, as the field attracts more cultural diversity, the needs of minority populations can be met through more clinical work, theory development and refinement, and culturally sensitive research coming from diverse groups of marriage and family therapists.

It is important to note that this study has a number of limitations. First, although the overall sample size was large, the sample size of the minority groups were small. Attempts were made to triangulate the data by using both quantitative and qualitative means to capture trends. Larger sample sizes will be needed to be able to statistically control for ethnic differences; however, the problem that there are not many minority students in COAMFTE-accredited programs makes it difficult to obtain larger samples. Thus, the purpose of this study is to give some initial insight based on the sample size

that is available. Our hope is that the data presented here will initiate conversation and examination of current minority recruitment strategies among COAMFTE-accredited programs.

REFERENCES

- Atkinson, D. R. (1983). Ethnic similarity in counseling psychology: A review of the research. *Counseling Psychologist, 11*, 79–92.
- Bailey, C., Pryce, J., & Walsh, F. (2002). Trends in author characteristics and diversity issues in the Journal of Marital and Family Therapy from 1990–2000. *Journal of Marital and Family Therapy, 28*, 479–486.
- Coleman, H. L. K., Wampold, B. E., & Casali, S. L. (1995). Ethnic minorities' ratings of ethnically similar and European American counselors: A meta-analysis. *Journal of Counseling Psychology, 42*, 55–64.
- Green, R. (1998a). Race and the field of family therapy. In M. McGoldrick (Ed.), *Revisioning family therapy: Race, culture, and gender in clinical practice* (pp. 93–110). New York: Guilford Press.
- Helms, J. E., & Carter, R. T. (1991). Relationships of white and black racial identity attitudes and demographic similarity to counselor preferences. *Journal of Counseling Psychology, 38*, 446–457.
- Hertlein, K. M. & Lambert-Shute, J. (2007). Factors influencing student selection of marriage and family graduate students. *Journal of Marital & Family Therapy, 33*(1), 18-24.
- Inman, A. G., Meza, M. M., Brown, A. L., & Hargrove, B. K. (2004). Student-faculty perceptions of multicultural training in accredited marriage and family therapy programs in relation to students' self-reported competence. *Journal of Marital & Family Therapy, 30*(3), 373 – 388.
- Kaplan, L. & Small, S. (2005). Multiracial recruitment in the field of family therapy: An innovative training program for people of color. *Family Process, 44*(3), 249 – 265.
- Killian, K. D., & Hardy, K. V. (1998). Commitment to minority inclusion: A study of AAMFT conference program content and members' perceptions. *Journal of Marital and Family Therapy, 24*, 207-223.
- McDowell, T., Fang, S., Brownlee, K., Young, C. G., & Khanna, A. (2002). Transforming an MFT program: A model for enhancing diversity. *Journal of Marital and Family Therapy, 28*, 179–191.
- McDowell, T. & Shelon, D. (2002). Valuing ideas of social justice in MFT curricula. *Contemporary Family Therapy, 24*(2), 313-331.

- Murphy, M. J., Faulkner, R. A., & Behrens, C. (2004). The effect of therapist-client racial similarity on client satisfaction and therapist evaluation of treatment. *Contemporary Family Therapy, 26*(3), 279-292.
- Oliver, J., & Brown, L. (1988). The development & implementation of a minority recruitment plan: Process, strategy & results. *Journal of Social Work Education, 24*, 175-185.
- Olson, C. (1988). Recruiting and retaining minority graduate students: A systems perspective. *Journal of Negro Education, 57*, 31-42.
- Patton, M. Q. (2002). *Qualitative research and evaluation methods* (3rd ed.). Thousand Oaks, CA: Sage.
- Sattler, J. M. (1977). The effects of therapist-client racial similarity. In A. S. Gurman, & A. M. Razin (Eds.), *Effective psychotherapy: A handbook for research* (pp. 252–290). New York: Pergamon Press.
- Sladen, B. J. (1982). Effects of race and socioeconomic status on the perception of process variables in counseling. *Journal of Counseling Psychology, 29*, 560–566.
- Speight, S. L., & Vera, E. M. (1997). Similarity and difference in multicultural counseling: Considering the attraction and repulsion hypotheses. *The Counseling Psychologist, 25*, 280–298.
- Sue, S. (1999). Science, ethnicity, and bias: Where have we gone wrong? *American Psychologist, 54*(12), 1070-1077.
- Swail, S. W., Redd, E. K., & Perna, W. L. (Eds.). (2003). *Retaining minority students in higher education (ASHE-ERIC Higher Education Report)*. San Francisco: Wiley Publishers.
- U. S. Census Bureau (2000). *Annual Demographic Components of Change for the Resident Population by Race and Hispanic Origin: Lowest, Middle, Highest, and Zero International Migration Series, 1999 to 2100*.
- U.S. Census Bureau (2006). *American Community Survey*. Retrieved March 12, 2009 from http://factfinder.census.gov/home/saff/main.html?_lang=en
- U.S. Department of Health and Human Services (1999). *Mental health: Culture, race, ethnicity supplement*. (SAMSHA Publication No. 01-3613). Rockville, MD.
- Wilson, L. L., & Stith, S. M. (1993). The voices of African-American MFT students: Suggestions for improving recruitment and retention. *Journal of Marital and Family Therapy, 19*, 17–30.

APPENDIX I

1. I would more likely choose a program within a state that had a familiar culture.
2. I wanted to be familiar with the area before I attended a particular program.
3. I was more likely to choose a program near my home state.
4. I would more likely choose a program where I had few financial concerns.
5. I was more likely to attend a program that offered me financial assistance.
6. I would more likely choose a program within a state that had a lot of MFT opportunities.
7. I was more likely to go to a program that would cost less than other programs.
8. I was more likely to choose a program that had been accredited for a long time.
9. I was more likely to choose a program within a state that had rigorous licensing laws.
10. I was more likely to choose a program where I felt I got along with the faculty.
11. I was more likely to choose a program where I seemed I would get along with the other students.
12. The interview process helped me choose the program I wanted to attend.
13. I was more likely to choose a program that offered more research opportunities.
14. I was more likely to choose a program that offered more teaching opportunities.
15. I was more likely to choose a program that offered more clinical opportunities.
16. I was more likely to choose a program that took less time to finish.
17. Information I was able to access on my own (e.g., websites, brochures, etc.) were helpful in my decision making process.
18. Faculty from my previous school helped me decide which program to attend.
19. Students from my previous school helped me decide which program to attend.
20. My immediate family (partner, parents, and/or children) helped me decide which program to attend.
21. I was more likely to choose a program with people that had different beliefs from my own.
22. I was more likely to choose a program with similar values.

PLAYFUL PARENTS: THE RELATIONSHIP BETWEEN PARENTAL LEVEL OF DIFFERENTIATION AND A PARENT'S INTERACTIVE STYLY IN A PLAY SETTING

Molly Kuzmich, Linda Metcalf, Joel Muro

ABSTRACT

The purpose of this preliminary quantitative study was to explore the impact of intergenerational relational dynamics on the parent-child relationship between a parent and a preschool-aged child. From a larger population who completed the Personal Authority in the Family System Questionnaire, Version A (PAFS-QA), a smaller sample was invited to participate in a parent-child free-play interaction that was independently-scored using the Maternal Behavior Rating Scale, Revised (MBRS-Revised). Several statistically significant relationships were found. Results indicated that highly affective parents and highly directive parents reported higher intergenerational intimidation, and highly achievement-oriented parents reported higher intergenerational triangulation and intimidation.

Molly Kuzmich, Ph. D. is a Visiting Professor, and Linda Metcalf, Ph.D. is an Associate Professor, in the Department of Graduate Counseling at Texas Wesleyan University, 1201 Wesleyan Street, Fort Worth, Texas 76105. Joel Muro, Ph.D. is an Assistant Professor in the Department of Family Sciences at Texas Woman's University, Denton, Texas.

Correspondence may be sent to: Molly Kuzmich, Ph.D., mkuzmich@txwes.edu.

Journal of the Texas Association for Marriage and Family Therapy
Volume 13, No. 1, 2008

THE RELATIONSHIP BETWEEN PARENTAL LEVEL OF DIFFERENTIATION AND A PARENT'S INTERACTIVE STYLE IN A PLAY SETTING

The concept of differentiation of self, as developed by Murray Bowen (1978), proposes the intergenerational inheritance of individual emotional dynamics. In the interactions with their children, parents pass on their anxieties and coping mechanisms through repeated patterns throughout the child's development. One group of interactions between parent and child includes play, and this is especially relevant when children are at younger ages. Playful interaction between parents and children may serve as a window to the emotional and relationship dynamics present.

DIFFERENTIATION OF SELF

Bowen family systems theory (Kerr & Bowen, 1988) is based on the concept of differentiation of self within an individual and from the family of origin. An adult's level of differentiation is directly related to his or her emotional separation from, or fusion with, significant members of the family-of-origin. Bowen's theoretical differentiation of self scale measures an individual's adaptability to stress (Kerr & Bowen). A person who is higher on the scale, having a higher level of differentiation of self, carries a lower level of chronic anxiety, and displays symptoms only when a great amount of stress occurs. A person who is lower on the scale of differentiation, having a lower level of differentiation of self, carries a higher level of chronic anxiety and displays symptoms when under a relatively smaller amount of stress (Kerr & Bowen). Additionally, Williamson (1991) developed the concept of personal authority in the family system (PAFS), which is an enhancement of Bowen's concept of differentiation of self. Williamson argued that differentiation is a critical piece, but requires the development of intimate family relationships to avoid emotional isolation.

In well differentiated families, there is low emotional intensity, low pressure for togetherness, and children are permitted to think, feel, and act independently. In poorly differentiated families, there is high emotional intensity, high pressure for togetherness, and children are not allowed to think, feel, or act independently. Family members emotionally react to each other rather than rationally choosing behaviors (Kerr & Bowen, 1988).

Because Bowen (1978) considered the family to be an emotional unit, parents are believed to pass on their levels of emotional maturity, or differentiation, to their children in a process called the family projection process. In theory, children emerge from their families of origin at approximately the same level of differentiation as their parents. The child's level of differentiation is strongly influenced by the primary caregiver and his or her reaction to the child's growing independence. At one extreme, the primary caregiver works to undermine the child's emotional separation, and at the other extreme he or she works to promote this emotional separation. This dyadic negotiation depends largely on the primary caregiver's level of differentiation and determines that of the child (Bowen; Kerr & Bowen, 1988).

PARENT-CHILD RELATIONSHIP FACTORS

Parental sensitivity, parental intrusiveness, and parental control are some of the most often cited factors that influence the parent-child relationship (Adams, 2006; Campbell, Breaux, Szumowski, & Pierce, 1986; DeGroat, 2003; NICHD Early Child Care Network, 1999). Additional research findings indicate that anxious parents display higher criticism levels (Ginsburg, Grover, & Cord, 2006; Whaley, Pinto, & Sigman, 1999), more catastrophizing (Moore, Whaley, & Sigman, 2004; Whaley, Pinto, & Sigman, 1999), less encouragement of autonomy (Rutherford, 2003; Whaley, Pinto, & Sigman, 1999), more disengagement (Rutherford, 2003; Woodruff-Borden, Morrow, Bourland, & Cambron, 2002), more overcontrolling behaviors (Cambron, 1998), more ignoring (Woodruff-Borden, Morrow, Bourland, & Cambron, 2002), less warmth (Whaley, Pinto, & Sigman, 1999), and less agreement and praise (Woodruff-Borden, Morrow, Bourland, & Cambron, 2002) in parent-child interactions than non-anxious parents. Overall, it appears that anxiety in parents leads to interactions that weaken, rather than support, the parent-child relationship.

PLAY: ANXIETY REDUCTION AND RELATIONSHIP ENHANCEMENT

Play, in its many forms, is a natural antidote for anxiety. It provides relaxation, emotional release, pleasure, and healing for children and adults. According to Gilbert (1999), play provides the anxiety release that creates balance in life. Within the context of a relationship, play contributes to a shared emotional and pleasurable experience. Additionally, a parent who enlists humor and a playful attitude makes parenting more enjoyable and presents a more authentic self (Elkind, 2007). Because

Journal of the Texas Association for Marriage and Family Therapy
Volume 13, No. 1, 2008

play is the natural mode of expression for children (Axline, 1947; Landreth, 1991), and because they have not yet achieved the cognitive and verbal skills of adults (Piaget, 1962), by utilizing play, a parent can enter a child's symbolic world to help create greater intimacy and shared meaning within the parent-child relationship.

RATIONALE

Theory and research regarding Bowen family systems theory and Williamson's personal authority in the family system have focused on adults' relationships with their families of origin and marital or couple relationships in adulthood. Research has not examined the impact a parent's level of differentiation has upon the parent-child relationship when the child is young. Preschool-aged children are in a unique stage of development, in that there is an emergence of independence and the development of sociodramatic play (Bowlby, 1969; Bowlby, 1973; Erikson, 1963; Mahler, 1975; Smilansky & Shefatya, 1990). One element that is required for this type of play is the social context, which presents an opportunity for a parent to be involved in his or her child's experiential world. In order for a parent to become immersed in sociodramatic play with his or her child, that parent must be able to shed the formalities and inhibitions of adult life. When considering the tenets of Bowen family systems theory (Kerr & Bowen, 1988), an adult who makes this connection will likely experience some level of anxiety. It would be useful to examine the emotional characteristics of a parent engaging in play interactions with his or her child to better understand those qualities that contribute to a strong parent-young child relationship.

PURPOSE OF THE STUDY

The purpose of this preliminary study was to determine whether there is a relationship between a parent's level of differentiation of self and his or her interactive style within a play setting with a preschool-aged child. In this study, each parent's level of differentiation was measured using the Personal Authority in the Family System Questionnaire, Version A (Bray, 1991). A parent's interactive style was measured quantitatively by utilizing the Maternal Behavior Rating Scale-Revised (Mahoney, 1992). The main effects research questions were the following: (1) What will be the correlation between parental play behavior, as measured by the four subscales of the Maternal Behavior Rating Scale-Revised, and a parent's level of differentiation, as measured by the five

Journal of the Texas Association for Marriage and Family Therapy
Volume 13, No. 1, 2008

intergenerational subscales of the Personal Authority in Family System Questionnaire, Version A? (2) What will be the correlation between maternal play behavior, as measured by the four subscales of the Maternal Behavior Rating Scale-Revised, and a mother's level of differentiation, as measured by the five intergenerational subscales of the Personal Authority in Family System Questionnaire, Version A? (3) What will be the correlation between paternal play behavior, as measured by the four subscales of the Maternal Behavior Rating Scale-Revised, and a father's level of differentiation, as measured by the five intergenerational subscales of the Personal Authority in Family System Questionnaire, Version A?

METHOD

PARTICIPANTS

The sample in Phase I of this research study was drawn from a variety of locations throughout several counties in a southwestern state. Participants responded to recruitment fliers placed in various professional locations in the community, including preschools, daycare centers, physicians' offices, community agencies, and places of worship. Of the 134 recruitment packets that were requested and sent out, 101 were completed and returned for participation in this study ($N=101$). The data collected from this sample was used only for demographics and to serve as a population from which to draw participants for Phase II. The sample of participants for Phase II of this study ($n=27$) was drawn from the 101 participants who were involved in Phase I. Participants were chosen for Phase II participation if their scores on the PASF-QA were significantly high or low in at least 3 of the 5 following intergenerational subscales: Intergenerational Intimacy, Intergenerational Fusion, Intergenerational Triangulation, Intergenerational Intimidation, and Personal Authority. These criteria were selected to ensure that the two groups of parents observed would be significantly different. Highly differentiated parents were defined as those whose scores fell at or above one half of a standard deviation ($+1/2 \sigma$) from the mean. Poorly differentiated parents were defined as those whose scores fell at or below negative one half of a standard deviation ($-1/2 \sigma$) from the mean. Additionally, participants were classified as poorly differentiated if they met the following criteria outlined by Bray (1991). Bray described two patterns of relationship dynamics that make up a fused or undifferentiated relationship.

In one, an individual will report high intimacy, high intimidation, and low individuation. In the second, the individual will report low intimacy and low individuation, or will report low intimacy and high intimidation. Bray describes that either of these conditions indicates an emotional cutoff with one's family of origin.

From the population of parents who completed the PAFS-QA, a sample of 15 highly differentiated and 12 poorly differentiated parents were invited to participate in video-recorded parent-child play interactions. The sample consisted of 18.5% male ($n=5$) and 81.5% female ($n=22$) parents between the ages of 29 and 49 years ($M=36.5$, $SD=4.2$). Participants classified themselves as Caucasian (92.6%), Latino/ Latina (3.7%), and Native American (3.7%). The majority of participants reported themselves to be in their first marriages (77.8%), while 14.8% were in their second marriages, and 7.4% were divorced. Additionally, the participants were primarily biological parents of the preschool children they were reporting (96.3%), while the remainder of the sample (3.7%) were step-parents.

INSTRUMENTATION

Personal Authority in the Family System Questionnaire, Version A (PAFS-QA). The Personal Authority in the Family System Questionnaire, Version A, was selected to measure levels of differentiation of self for the participants in this study. This instrument was selected over the Differentiation of Self Inventory (Skowron & Friedlander, 1998), which is also a comprehensive self-report instrument, as the PASF-QA is a version specific to adult individuals who are parents themselves. The PAFS-QA, developed by Bray (1991), is a 132-item self-report questionnaire measured on a Likert-scale. The PAFS-QA evaluates current intergenerational family processes in a three-generational family system. There are eight subscales contained in this instrument, which directly correspond to eight key theoretical concepts: Spousal Fusion-Individuation (SPFUS), Intergenerational Fusion-Individuation (INFUS), Spousal Intimacy (SPINT), Intergenerational Intimacy (ININT), Nuclear Family Triangulation (NFTRI), Intergenerational Triangulation (INTRI), Intergenerational Intimidation (INTIM), and Personal Authority (PerAut). The PASF-Q has been submitted to factor analysis, and internal consistency was found to range from .74 to .96.

Maternal Behavior Rating Scale-Revised (MBRS-Revised). The Maternal Behavior Rating Scale-Revised, developed by Mahoney (1992), is a 12-item quantitative instrument to be completed during observations of parents and children in free play interactions. The MBRS-Revised measures the quality of maternal behaviors during play with their children on a 5-point Likert scale. Factor analysis of the instrument (Boyce, et al., 1996) revealed three subscales. The responsiveness factor was split into two subscales, responsiveness and directiveness, as directiveness is an important factor in the child development literature that has been found to be negatively correlated with responsiveness (Mahoney, 1992). The MBRS-Revised is broken down into the following four subscales: Responsive/Child Oriented, Affect/Animation, Achievement Orientation, and Directive.

The Maternal Behavior Rating Scale (1986) was originally established from a normative sample of 60 mothers in play interactions with their mentally retarded children between 1- and 3-years-old. The MBRS-Revised was later submitted to factor analysis from ratings of 150 mother-child dyads (Boyce, et al., 1996). Research projects involving children who are disabled, who are at-risk, and who are typically developing have utilized this instrument (Kim & Mahoney, 2004; Mahoney, Boyce, Fewell, Spiker, & Wheeden, 1998). According to Mahoney (personal communication, October 23, 2006), the MBRS-Revised is appropriate for use with disabled or typically developing children as there is nothing about the scale that is specific to disabilities. The author reports calculating inter-rater reliability for the MBRS-Revised each time it is used until acceptable rates of reliability are met.

The MBRS-Revised was selected as it allowed for observation and quantitative scoring of a parent's interactions in a free play interaction with his or her young child. The purpose of this study was to measure a parent's actual behaviors, so this instrument held significant relevance. Other instruments considered for use in this study focused on directive parental interactions (Chase & Eyberg, 2005; Sigel, Flaughner, LaValva, & Dahn, 1986) or were not as comprehensive or reliable as the MBRS-Revised (Dunst, 1986).

PROCEDURES

This research study was conducted in two stages. Research participants were recruited as volunteers and through snowball sampling to complete questionnaire packets. The participants involved in the first phase provided a pool from which to draw the sample for the second phase. All

Journal of the Texas Association for Marriage and Family Therapy
Volume 13, No. 1, 2008

participants from each phase were provided with a list of counseling referrals and a summary of the results of the study. From the 101 adult participants who completed research packets, twenty seven participants that were identified as highly or poorly differentiated were verbally contacted and invited to participate in the second phase of the study which involved a video-recorded parent-child free play interaction. Participants interacted with their children in a fully equipped play therapy room in a private practice or university setting. The parents were instructed to play with their children as they normally would at home, and they would be signaled by the investigator when their 10-minute play session was complete.

Upon completion of the second phase, the video-recordings were reviewed by independent raters who were blind to the purposes of the research study. Three raters met with the investigator to receive training regarding the MBRS-Revised and the criteria for its items. The three raters jointly evaluated video-recorded sessions until they were able to establish consistent rating criteria. Two of the raters then evaluated the remaining video-recordings independently. The third independent rater reviewed 10 of the 24 independently-viewed video samples to ensure consistency of rating throughout. Interrater reliability was achieved among the three evaluators. Spearman's rho correlations were computed for each of the four subscales: Responsiveness/ Child Oriented, Affect/ Animation, Achievement Orientation, and Directive ($R^2 = .88, p < .01$; $R^2 = .82, p < .01$; $R^2 = .86, p < .01$; $R^2 = .80, p < .01$).

RESULTS

Table 1 presents statistically significant correlations found for Phase II participants when comparing subscales on the PAFS-QA with subscales on the MBRS-Revised. There were statistically significant relationships between Intergenerational Intimidation (INTIM) and Affect/ Animation and Achievement Orientation. These results indicate that there is a negative correlation between Intergenerational Intimidation and Affect/ Animation, and an additional negative correlation between Intergenerational Intimidation and Achievement Orientation. Additional significant negative correlations occurred when comparing Intergenerational Triangulation (INTRI) with Achievement Orientation and with Directive.

Journal of the Texas Association for Marriage and Family Therapy
Volume 13, No. 1, 2008

TABLE 1

Correlations between PAFS-QA and MBRS Subscales for Parents in Phase II

| | ININT | INTRI | INFUS | INTIM | PerAut | Resp | Affect | AchOrient | Directive |
|------------|---------|--------|--------|---------|--------|-------|--------|-----------|-----------|
| ININT | 1.000 | | | | | | | | |
| INTRI | .522** | 1.000 | | | | | | | |
| INFUS | .689** | .569** | 1.000 | | | | | | |
| INTIM | -.464** | -.105 | -.360* | 1.000 | | | | | |
| PerAut | .550** | .823** | .634** | -.029 | 1.000 | | | | |
| Responsive | .027 | -.037 | -.024 | -.180 | -.090 | 1.000 | | | |
| Affect | .123 | -.107 | -.007 | -.457** | -.129 | .100 | 1.000 | | |
| AchOrient | -.069 | -.328* | -.044 | -.362* | -.185 | .189 | -.249 | 1.000 | |
| Directive | -.056 | -.352* | -.156 | -.115 | -.023 | .338* | -.119 | .062 | 1.000 |

Note. All data were analyzed via one-tailed tests.

* $p < .05$. ** $p < .01$.

Table 2 presents statistically significant correlations found for mothers in Phase II when comparing subscales on the PAFS-QA with subscales on the MBRS-Revised. As Table 2 indicates, there was a statistically significant negative relationship between Intergenerational Intimidation (INTIM) and Affect/ Animation. For these mothers, an increase in reported intergenerational intimidation was accompanied by an observed decrease in affect and animation with their children. Additional significant negative correlations were found between Intergenerational Triangulation (INTRI) with Achievement Orientation and with Directive in this group of mothers.

TABLE 2

Correlations between PAFS-QA and MBRS Subscales for Mothers in Phase II

| | ININT | INTRI | INFUS | INTIM | PerAut | Resp | Affect | AchOrient | Directive |
|------------|--------|--------|--------|--------|--------|--------|--------|-----------|-----------|
| ININT | 1.000 | | | | | | | | |
| INTRI | .553** | 1.000 | | | | | | | |
| INFUS | .744** | .651** | 1.000 | | | | | | |
| INTIM | -.445* | -.086 | -.198 | 1.000 | | | | | |
| PerAut | .629** | .784** | .763** | -.049 | 1.000 | | | | |
| Responsive | .081 | -.195 | -.077 | -.153 | -.257 | 1.000 | | | |
| Affect | .170 | -.209 | -.092 | -.470* | -.240 | .727** | 1.000 | | |
| AchOrient | -.144 | -.435* | -.182 | -.323 | -.252 | .340 | .643* | 1.000 | |
| Directive | -.076 | -.418* | -.167 | -.108 | -.023 | -.081 | .194 | .649** | 1.000 |

Note. All data were analyzed via one-tailed tests.

* $p < .05$. ** $p < .01$.

Table 3 indicates one statistically significant correlation was found for fathers in Phase II when comparing subscales on the PAFS-QA with subscales on the MBRS-Revised. As Table 3 indicates, there was a statistically significant positive relationship between Intergenerational Triangulation (INTRI) and Responsiveness. For this small group of fathers, those who reported low levels of triangulation in their families of origin also displayed higher amounts of responsiveness to their children in play sessions.

TABLE 3

Correlations between PAFS-QA and MBRS Subscales for Fathers in Phase II

| | ININT | INTRI | INFUS | INTIM | PerAut | Resp | Affect | AchOrient | Directive |
|------------|-------|--------|----------|-------|--------|-------|--------|-----------|-----------|
| ININT | 1.000 | | | | | | | | |
| INTRI | -.200 | 1.000 | | | | | | | |
| INFUS | .770 | .300 | 1.000 | | | | | | |
| INTIM | -.700 | -.300 | -1.000** | 1.000 | | | | | |
| PerAut | .300 | .800 | .000 | .000 | 1.000 | | | | |
| Responsive | -.051 | .975** | .410 | -.410 | .667 | 1.000 | | | |
| Affect | .369 | .738 | .580 | -.580 | .316 | .865* | 1.000 | | |
| AchOrient | .718 | .359 | .564 | -.564 | .051 | .526 | .865* | 1.000 | |
| Directive | – | – | – | – | – | – | – | – | – |

Note. All data were analyzed via one-tailed tests.

* $p < .05$. ** $p < .01$.

DISCUSSION

The purpose of this study was to determine whether there is a relationship between a parent's level of differentiation of self and his or her interactive style within a play setting with a preschool-aged child. The findings of this study may be considered preliminary and a starting point for further research. Several statistically significant findings in this study suggest that parent's intergenerational qualities may be related to the parent-child relationship in play.

HIGHLY RESPONSIVE PARENTS

According to Mahoney (1992), a highly responsive parent is one who is more sensitive to his or her child's interests, more appropriate in responding to the child, and more effective in engaging the

Journal of the Texas Association for Marriage and Family Therapy
Volume 13, No. 1, 2008

child in a play session. In reviewing the limited data from this study, it appears that fathers who report less triangulation with their own parents tend to display more responsive/ child-oriented behaviors in an observed free play session.

In considering theories of differentiation, namely Bowen and Williamson, these preliminary results suggest consistency with theory. Although the results for the fathers should be cautiously considered (n=5), a strong correlation emerged. Fathers who reported feeling less pulled into their parents' marital relationships displayed more responsiveness to their children in play. One theoretical possibility for this result is that since these fathers do not report having a significant amount of emotional energy tied up in intergenerational anxiety, they are better able to respond to their own children without emotional reactivity.

HIGHLY AFFECTIVE AND ANIMATED PARENTS

A parent who scores high in affect and animation displays more acceptance, more enjoyment, more emotional expressiveness, more inventive stimulation, and more warmth toward his or her child in play (Mahoney, 1992). By statistically correlating the data regarding this kind of parent in this study, it may be that a parent who fears disapproval from his or her own parents (intergenerational intimidation), displays more affect and animation in an observed play session with his or her child. These behaviors may be viewed as efforts to seek approval from their children. These preliminary results may suggest some consistency with Bowen's thoughts about triangulation.

HIGHLY ACHIEVEMENT-ORIENTED PARENTS

A parent who displays very high encouragement and very high praise "exerts much pressure on the child to achieve," and elicits praise more so than would an average parent (Mahoney, 1992). Quantitative data from this study suggest that parents who display these behaviors in an observed play session may fear disapproval from their own parents and feel pulled into their own parents' marital relationship. Similarly, this may also be the case for highly achievement-oriented mothers who reported high triangulation in their relationships with their parents.

In theory, individuals who experience intense intergenerational intimidation and triangulation are more emotionally reactive and more poorly differentiated (Bowen, 1988; Williamson, 1991). In this study, these poorly differentiated parents displayed high pressure for their children to achieve and

above-average levels of praise. Parents who report emotional sensitivity and fear of disapproval may alleviate anxiety by pressuring their children to achieve.

HIGHLY DIRECTIVE PARENTS

Mahoney (1992) describes a highly directive parent as one who tries to continually direct the child's play, and his or her rate of behavior is very fast. According to the data examined in this study a highly directive parent reports being highly triangulated with his or her own parents.

According to Bray (1991), triangulation occurs in a three-person relationship in which the third person is drawn into the relationship between the first two to diffuse tension in the dyadic relationship. The data collected suggest that a parent who feels pulled into his or her own parent's marital relationship may also be overly directive and fast-paced in play interactions with his or her child. These directive behaviors are possible indicators of anxiety, which may be related to the anxiety of intergenerational triangulation.

Implications

Despite what we know about the critical nature of play in the development of the child (Axline, 1947; Landreth, 1991; Lowenfeld, 1991; Piaget, 1962), play is becoming an endangered experience for many children. Elkind (2001, 2007) argued that as we "hurry" children through childhood, they miss a critical part of their development—play. He argues that as our children become passive spectators to life, especially through video media, there may be significant psychological consequences for missing out on spontaneous, self-initiated play. Elkind's arguments suggest a parental component to facilitate play for children.

Some researchers and authors have suggested that children are a valuable resource and can make important contributions in family therapy (Bailey, 2000; Gil, 1994; Keith & Whitaker, 1981; Sori, 2006; Sori & Sprenkle, 2004; Zilbach, 1994). According to Keith and Whitaker, "families change less and more slowly when children are not part of the therapy process." Alternatively, one could validly argue that children change less and more slowly when their families are not part of the therapy process.

Filial therapy, also referred to as filial play therapy and child relationship enhancement family therapy, is a therapeutic modality first developed by Guerney (1964) that incorporates family systems principles with child centered play therapy skills so parents can be trained to be therapeutic agents for

Journal of the Texas Association for Marriage and Family Therapy
Volume 13, No. 1, 2008

children (Bratton, Ray, Rhine, & Jones, 2005; Guerney, 1991; Schuman, 2002). The systemic aspects of filial therapy introduce several benefits to the family and its members, including family involvement, taking the focus off the child as the identified client, parents recognizing their role in the problem and the solution, enhancing parental leadership, increasing differentiated relating, and highlighting unhelpful family patterns (Johnson, Bruhn, Winek, Krepps, & Wiley, 1999).

For family therapists who have been trained in various mainstream family therapy models and approaches, this study and its results will hopefully motivate systemic therapeutic actions that include, not only the young children in the family, but also family-of-origin work. Although the results are observational and preliminary, they do suggest that there may be aspects of the parent-child relationship that are passed on from one generation to the next. Family therapists can intervene in the current family system by encouraging clients to address family-of-origin issues, and by working with the current parent-child relationship. If the child in this system is a young child, play is an appropriate method of intervention, and family therapists need to get training in order to guide intervention.

Because family systems theories typically have not been utilized by professionals who work exclusively with children, this is a unique, but logical path to consider. Although the results from this study can be considered preliminary in nature, noteworthy relationships have emerged between concepts of Bowen family systems theory and observed play interactions between parent and child. If similar results emerge from further research, relationships between intergenerational emotional dynamics and actual relational behaviors may be a starting point for clinicians who wish to assist families in improving the emotional legacies in their families.

LIMITATIONS

It is important to note the limitations of this study and how they affect the ability to generalize the results. The most noticeable limitations revolve around the sample characteristics. All of the participants in this research were volunteers who either responded to fliers or to recommendations from other participants. Most certainly, participants who volunteer to be involved in research possess certain characteristics that may be qualitatively different than those who do not volunteer. Additionally, the overall sample was quite homogenous in ethnicity, social class, education, and gender

despite attempts to recruit volunteers from a variety of diverse locations. The lack of diversity in this study results in difficulties in generalizing the findings to a greater population.

Sample size would also be considered to be a limitation in this study. In Phase I of this study, 101 individuals completed questionnaires, yet in Phase II, only 27 individuals participated. This relatively small number was realistic for the scope of this study, yet creates challenges in generalizing and in finding statistical significance. Further, it is important to note that the statistically significant correlations in this study note only relationships between the variables. Readers and researchers cannot draw causal conclusions from the data collected in this study.

There are additional limitations to external validity in the observational nature of this study. As per the Hawthorne effect, participants behave differently just from the experience of being observed, and results on the self-report PAFS-QA and observed parent-child free play interactions may have been affected in this way. This study created consistency by video recording the participants in Phase II in a playroom setting rather than in their homes. However, this may also have an impact on the validity of the results. This opportunity for uninterrupted one-on-one play time may be the exception rather than the rule in day-to-day life.

Directions for Future Research

From a theoretical perspective, children inherit, or learn, anxiety management skills and differentiation levels from their parents. This study was an attempt to isolate and observe particular parent-child interactions to potentially find a piece of the puzzle that explains this process in systemic terms. In doing so, it is hoped that more related research will be conducted to find other pieces.

The hypotheses of this study could be tested using different methodology, different instrumentation, and different samples of individuals. Perhaps these differences could illuminate some questions from this study or could minimize the limitations. For instance, future studies could take a qualitative approach by interviewing parents to determine differentiation levels, and then observe parent-child interactions over a variety of situations. A longitudinal approach would likely be even more informative, as the qualitative nature of parent-child relationships can change through developmental stages. From a family systems theoretical perspective, relationship patterns would likely emerge, and perhaps these would shed light on the questions addressed in this study.

Journal of the Texas Association for Marriage and Family Therapy
Volume 13, No. 1, 2008

REFERENCES

- Adams, K. L. (2006). *Parental stress, parenting behavior, and observed parent-child interaction*. Unpublished doctoral dissertation, Pace University, New York.
- Axline, V. M. (1947). *Play therapy*. New York: Ballantine Books.
- Bailey, C. (Ed.). (2000). *Children in family therapy: Using the family as a resource*. New York: Norton.
- Bavin-Hoffman, R. C. (1994). Filial therapy: A qualitative study of the parental perceptions of the process. *Dissertation Abstracts International*, 55 (10), 3091A. (UMI No. 9506567)
- Belsky, J., Jaffee, S. R., Sligo, J., Woodward, L., & Silva, P. A. (2005). Intergenerational transmission of warm-sensitive-stimulating parenting: A prospective study of mothers and fathers of 3-year-olds. *Child Development*, 76, 384-396.
- Belsky, J., Youngblade, L., Rovine, M., & Volling, B. (1991). Patterns of marital change and parent-child interaction. *Journal of Marriage and the Family*, 53(2), 487-498.
- Bowen, M. (1978). *Family therapy in clinical practice*. New York: Aronson.
- Bowlby, J. (1969). *Attachment and loss: Volume I: Attachment*. London: The Hogarth Press.
- Bowlby, J. (1973). *Attachment and loss: Volume II: Separation: Anxiety and Anger*. London: The Hogarth Press.
- Boyce, G. C., Marfo, K., Mahoney, G., Spiker, D., Price, C., & Taylor, M. J. (1996, March). *Parent-child interaction in dyads with children at risk for developmental delays: A factor analytic study*. Poster session presented at the Gatlinburg Conference on Research and Theory in Mental Retardation and Developmental Disabilities, Gatlinburg, TN.
- Bratton, S., Ray, D., Rhine, T., & Jones, L. (2005). The efficacy of play therapy with children: A meta-analytic review of the outcome research. *Professional Psychology: Research and Practice*, 36, 376-390.
- Bray, J. H. (1991). *PAFS: Personal authority in the family system questionnaire manual* (2nd ed.). Houston, TX: D-Boy Productions.

- Bray, J. H., Williamson, D. S., & Malone, P. E. (1984). Personal authority in the family system: Development of a questionnaire to measure personal authority in the intergenerational family processes. *Journal of Marital and Family Therapy, 10*, 167-178.
- Bromley, M. C., & Blieszner, R. (1997). Planning for long-term care: Filial behavior and relationship quality of adult children with independent parents. *Family Relations, 46*, 155-162.
- Bronfenbrenner, U. (1977). Toward an experimental ecology of human development. *American Psychologist, 32*, 513-531.
- Brusilow, M. H. (2000). Long-term family system correlates of parental death during adolescence. *Masters Abstracts International, 38* (3), 806. (UMI No. 1397567)
- Calkins, S. D. (1994). Origins and outcomes of individual differences in emotion regulation. *Monographs of the Society for Research in Child Development, 59*(2/3), 53-72.
- Cambron, S. L. (1998). Anxious parent and child interactions: Perceptions of family environment and parental behavior. *Dissertation Abstracts International, 60* (4), 1844B. (UMI No. 9924976)
- Campbell, S. B., Breaux, A. M., Ewing, L. J., Szumowski, E. K., & Pierce, E. W. (1986). Parent-identified problem preschoolers: Mother-child interaction during play at intake and 1-year follow-up. *Journal of Abnormal Child Psychology, 14*, 425-440.
- Chorpita, B. F., Brown, T. A., & Barlow, D. H. (1998). Perceived control as a mediator of family environment in etiological models of childhood anxiety. *Behavior Therapy, 29*, 457-476.
- Contreras, J. M., Mangelsdorf, S. C., Rhodes, J. E., Diener, M. L., and Brunson, L. (1999). Parent-child interaction among Latina adolescent mothers: The role of family and social support. *Journal of Research on Adolescence, 9*, 417-439.
- Crandall, L. E., Fitzgerald, H. E., & Whipple, E. E. (1997). Dyadic synchrony in parent-child interactions: A link with maternal representations of attachment relationships. *Infant Mental Health Journal, 18*(3), 247-264.
- Davenport, B. R. (2005). An examination of parent-child play as influential in the development of aggression in preschool boys. *Dissertation Abstracts International, 65* (12), 4739A. (UMI No. 3158325)

- DeGroat, J. S. (2003). Parental stress and emotion attributions as correlates of maternal positive affect and sensitivity during interaction with young children. *Dissertation Abstracts International*, 64 (5), 2383B. (UMI No. 3090207)
- Denham, S. A., Renwick, S. M., & Holt, R. W. (1991). Working and playing together: Preschool social-emotional competence from mother-child interaction. *Child Development*, 62, 242-249.
- Dennis, T. (2006). Emotional self-regulation in preschoolers: The interplay of child approach reactivity, parenting, and control capacities. *Developmental Psychology*, 42, 84-97.
- Dunst, C. J. (1986). *Caregiver styles of interaction scales* (Family, infant, and preschool program and human development research and training institute). Morganston, NC: Western Carolina Center.
- Elkind, D. (2001). *The hurried child: Growing up too fast too soon* (3rd ed.). Cambridge, MA: DaCapo Press.
- Elkind, D. (2007). *The power of play: How spontaneous, imaginative activities lead to happier, healthier children*. Cambridge, MA: Decapo Lifelong Books.
- Erikson, E. H. (1963). *Childhood and society* (2nd ed.). New York: W. W. Norton.
- Fagan, J. (1996). A preliminary study of low-income African American fathers' play interactions with their preschool-age children. *Journal of Black Psychology*, 22(1), 7-19.
- Field, T. (1994). The effects of mother's physical and emotional availability on emotion regulation. *Monographs of the Society for Research in Child Development*, 59(2/3), 208-227.
- Fiese, B. H. (1990). Playful relationships: A contextual analysis of mother-toddler interaction and symbolic play. *Child Development*, 61, 1648-1656.
- Frodi, A., Bridges, L., & Grolnick, W. (1985). Correlates of mastery-related behavior: A short-term longitudinal study of infants in their second year. *Child Development*, 56, 1291-1298.
- Gardner, F., Ward, S., Burton, J., & Wilson, C. (2003). The role of mother-child joint play in the early development of children's conduct problems: A longitudinal observational study. *Social Development*, 12, 361-378.
- Gil, E. (1994). *Play in Family Therapy*. New York: The Guilford Press.

- Gilbert, R. M. (1999). *Connecting with our children: Guiding principles for parents in a troubled world*. New York: John Wiley & Sons.
- Ginsburg, G. S., Grover, R. L., & Cord, J. J. (2006). Observational measures of parenting in anxious and nonanxious mothers: Does type of task matter? *Journal of Clinical Child and Adolescent Psychology, 35*, 323-328.
- Guernsey, L. F. (1991). Parents as partners in treating behavior problems in early childhood settings. *Topics in Early Childhood Special Education, 11*(2), 74-90.
- Guernsey, B. G., Jr. (1964). Filial therapy: Description and rationale. *Journal of Consulting Psychology, 28*(4), 303-310.
- Haight, W., & Miller, P. J. (1992). The development of everyday pretend play: A longitudinal study of mothers' participation. *Merrill-Palmer Quarterly, 38*, 331-349.
- Johnson, L., Bruhn, R., Winek, J., Krepps, J., & Wiley, K. (1999). The use of child-centered play therapy and filial therapy with Head Start families: A brief report. *Journal of Marital and Family Therapy, 25*, 169-176.
- Johnson, S. K. D. (2001). Assessment of parent and child behaviors in preschool children. *Dissertation Abstracts International, 63* (4), 2046B. (UMI No. 3049930)
- Kerr, M. E., & Bowen, M. (1988). *Family evaluation: An approach based on Bowen theory*. New York: W. W. Norton.
- Keith, D. V. & Whitaker, C. A. (1981). Play therapy: A paradigm for work with families. *Journal of Marital and Family Therapy, 7*, 243-254.
- Kim, J.-M., & Mahoney, G. (2004). The effects of mother's style of interaction on children's engagement: Implications for using responsive interventions with parents. *Topics in Early Childhood Special Education, 24*(1), 31-38.
- Landreth, G. L. (1991). *Play therapy: The art of the relationship*. Bristol, PA: Accelerated Development.
- Lawson, D. M., & Brossart, D. F. (2001). Intergenerational transmission: Individuation and intimacy across three generations. *Family Process, 40*, 429-442.
- Lindsey, E. W., & Mize, J. (2000). Parent-child pretense play: Links to children's social competence. *Merrill-Palmer Quarterly, 46*, 565-591.
- Journal of the Texas Association for Marriage and Family Therapy*
Volume 13, No. 1, 2008

- Lowenfeld, M. (1991). *Play in childhood*. London: MacKeith Press.
- Mahler, M. S., Pine, F., & Bergman, A. (1975). *The psychological birth of the human infant: Symbiosis and individuation*. New York: Basic Books.
- Mahoney, G. (1992). *The Maternal Behavior Rating Scale (Revised)*. Tallmadge, OH: Family Child Learning Center.
- Mahoney, G., Boyce, G., Fewell, R. R., Spiker, D., & Wheeden, C. A. (1998). The relationship of parent-child interaction to the effectiveness of early intervention services for at-risk children and children with disabilities. *Topics in Early Childhood Special Education, 18*(1), 5-17.
- McBride, B. A., Schoppe, S. J., & Rane, T. R. (2002). Child characteristics, parenting stress, and parental involvement: Fathers versus mothers. *Journal of Marriage and Family, 64*(4), 998-1011.
- McFarland, J., & West, A. (1997). Effects of family interventions on adolescent mothers' self-differentiation, personal authority, and health risks. *Dissertation Abstracts International, 58* (1), 136B. (UMI No. 9720738)
- Meyers, S. A. (1999). Mothering in context: Ecological determinants of parental behavior. *Merrill-Palmer Quarterly, 45*, 332-357.
- Moore, P. S., Whaley, S. E., & Sigman, M. (2004). Interactions between mothers and children: Impacts of maternal and child anxiety. *Journal of Abnormal Psychology, 113*, 471-476.
- NICHD Early Child Care Research Network. (1999). Chronicity of maternal depressive symptoms, maternal sensitivity, and child functioning at 36 months. *Developmental Psychology, 35*, 1297-1310.
- NICHD Early Child Care Research Network. (2003). Early child care and mother-child interaction from 36 months through first grade. *Infant Behavior & Development, 26*, 345-370.
- Pass, S. F. (1997). The relationship between mothers' response to children's developing autonomy and children's utilization of symbolic play. *Dissertation Abstracts International, 57* (7), 4749B. (UMI No. 9637276)
- Peleg, O. (2005). The relation between differentiation and social anxiety: What can be learned from students and their parents? *The American Journal of Family Therapy, 33*(2), 167-183.

- Peleg-Popko, O. (2002). Bowen theory: A study of differentiation of self, social anxiety, and physiological symptoms. *Contemporary Family Therapy, 24*, 355-369.
- Piaget, J. (1962). *Play, dreams, and imitation in childhood*. New York: W. W. Norton.
- Repetti, R. L., & Wood, J. (1997). Effects of daily stress at work on mothers' interactions with preschoolers. *Journal of Family Psychology, 11*(1), 90-108.
- Rutherford, J. L. (2003). Impact of parental anxiety on parenting behavior. *Dissertation Abstracts International, 65* (5), 2648B. (UMI No. 3134211)
- Sallinen, B. J. (2005). Parent-child interactions in the maintenance of childhood anxiety disorders. *Dissertation Abstracts International, 66* (11), 6292B. (UMI No. 3194265)
- Schaffer, H. R., & Crook, C. K. (1979). Maternal control techniques in a directed play session. *Child Development, 50*, 989-996.
- Schuman, B. (2002). Filial therapy. *ERIC Digest* (ED470599). Retrieved February 12, 2007, from www.eric.ed.gov
- Shine, S., & Acosta, T. Y. (2000). Parent-child social play in a children's museum. *Family Relations, 49*(1), 45-52.
- Sigel, I. E., Flaugh, J., LaValva, R., & Dahn, A. (1986). *Parent-child and family social interaction rating scales*. Princeton, NJ: Educational Testing Service.
- Siqueland, L., Kendall, P. C., & Steinburg, L. (1996). Anxiety in children: Perceived family environments and observed family interaction. *Journal of Clinical Child Psychology, 25*(2), 225-237.
- Skowron, E. A. (2005). Parent differentiation of self and child competence in low-income urban families. *Journal of Counseling Psychology, 52*, 337-346.
- Skowron, E. A. & Friedlander, M. L. (1998). The differentiation of self inventory: Development and initial validation. *Journal of Counseling Psychology, 45*(3),
- Slade, A. (1987a). A longitudinal study of maternal involvement and symbolic play during the toddler period. *Child Development, 58*, 367-375.
- Slade, A. (1987b). Quality of attachment and early symbolic play. *Developmental Psychology, 23*, 78-85.
- Sori, C. (Ed.). (2006). *Engaging children in family therapy*. New York: Routledge.
- Journal of the Texas Association for Marriage and Family Therapy*
Volume 13, No. 1, 2008

- Sori, C. & Sprenkle, D. (2004). Training family therapists to work with children and families: A modified Delphi study. *Journal of Marital & Family Therapy, 30*(4), 479-495.
- Strom, R. D. (1981). Learning to play with preschoolers. *Journal of Creative Behavior, 15*(2), 135-149.
- Tamis-LeMonda, C. S., Shannon, J. D., Cabrera, N. J., & Lamb, M. E. (2004). Fathers and mothers at play with their 2- and 3-year-olds: Contributions to language and cognitive development. *Child Development, 75*, 1806-1820.
- Weinfield, N. S., Ogawa, J. R., & Egeland, B. (2002). Predictability of observed mother-child interaction from preschool to middle childhood in a high-risk sample. *Child Development, 73*, 528-543.
- Whaley, S. E., Pinto, A., & Sigman, M. (1999). Characterizing interactions between anxious mothers and their children. *Journal of Consulting and Clinical Psychology, 67*, 826-836.
- Williamson, D. S. (1991). *The intimacy paradox: Personal authority in the family system*. New York: The Guilford Press.
- Wood, J. J., McLeod, B. D., Sigman, M., Hwang, W.-C., & Chu, B. C. (2003). Parenting and childhood anxiety: Theory, empirical findings, and future directions. *Journal of Child Psychology and Psychiatry and Allied Disciplines, 44*(1), 134-151.
- Woodruff-Borden, J., Morrow, C., Bourland, S., & Cambron, S. (2002). The behavior of anxious parents: Examining mechanisms of transmission of anxiety from parent to child. *Journal of Clinical Child and Adolescent Psychology, 31*, 364-374.
- Youngblade, L. M., & Dunn, J. (1995). Individual differences in young children's pretend play with mother and sibling: Links to relationships and understanding of other people's feelings and beliefs. *Child Development, 66*, 1472-1492.
- Zilbach, J. (1994). *Young children in family therapy*. New York: Aronson.

REVIEWS

Steven M. Harris, Reviews Editor

Snyder, D. K., Baucom, D. H., and Gordon, K. C. (2007). *Getting past the affair: A program to help you cope, heal, and move on-together or apart*. New York: Guilford, 330 pp., \$ 14.95 paperback.

Few clinical issues approach the collective despair and agony that couples experience as they attempt to cope and heal from the devastating effects of infidelity. Clinicians may find themselves struggling with strategies to help their clients maneuver around the treacherous landscape of dealing with the emotional complexities of affairs. Indeed the authors cite their desire to provide couples with a program that encourages a “healthy process” as they work through an affair as the primary motivating factor in compiling this text.

The authors masterfully synthesize their extensive years of research and clinical experience into a palatable, user-friendly approach for couples dealing with the affair. Though the text is formatted in a “self-help” format, the step by step programming and principles can be seamlessly integrated into a therapeutic treatment plan. The authors’ intentionally write in first person language directed toward both the injured partner and the offending partner. The writing style conveys the authors’ compassion, concern and positive regard for each individual reader. An underlying message of hope and healing is artistically woven throughout the text. Couples are often paralyzed by the question, “Should I stay or leave?” following the disclosure of an affair. The authors are cautious not to endorse any one stance, yet focus on the healing that needs to take place, for both the injured and offending partner, before such a important decision is made. Finally, each chapter is punctuated by a series of small exercises that enable the reader to internalize the material from the presented topic.

The text is divided into three sections. Section 1 of the book, entitled “How Do We Stop Hurting?” presents a framework for coping with the immediate aftermath of an affair. The authors outline, and normalize the usual thoughts, feelings, and behaviors for both the injured and participating partner. This section teaches each partner how to cope with what happened to them by addressing the

following topics: the practicality of dealing with the affair, daily experiences/routines, dealing with family members and outsiders, and self care. This section instructs the reader how to communicate strong and difficult emotions while maintaining civility.

Section 2 of the book assists couples on how to navigate their relationship once the initial shock wears off. The authors begin to help move the couple toward an understanding of themselves, as well as the vulnerability factors that led to the infidelity in the first place. In this section, partners are encouraged to honestly assess what was truly happening in and outside their relationship prior to the affair. Additionally, this section addresses some common pitfalls that couples face during the aftermath of dealing with the affair; simultaneously helping the couple develop an understanding of their current circumstance.

Finally, Section 3 helps the couple navigate decision making in regard to moving forward whether separately or together. The last chapter anticipates the future of deciding to stay married or separate. The authors forecast potential setbacks and advise strategies for maintaining the progress that has already been achieved. The final message is encouraging, positive, and promising—couples can recover from the bitterness of an affair and enjoy the fruits of a strong and healthy relationship thereafter.

Damon L. Rappleyea, M.Ed.

Morgan Stinson, B.S.

East Carolina University

Johnson, S. (2008). *Hold Me Tight: Seven Conversations for a Lifetime of Love*
New York: Little, Brown and Company, 320 pp., \$29.95.

Sharon sat gritting her teeth, churning with anger. Tim, her partner, gazed at the wall directly ahead of him, avoiding all eye contact with her. Tension mounted. Sharon finally broke the silence, “It is impossible to live with this man! What you see right now is what I get at home all the time. I get nothing but blank stares and silence! I wonder if he even cares about this marriage anymore!?” As Sharon spoke, a sigh formed on Tim’s mouth. He finally spoke up, “I’m done fighting with her. Every time we try to have a conversation about something it turns into an argument and I’m sick of it. It’s like she can’t control herself. Every time I open my mouth I get grilled. I am done.”

Sharon and Tim’s story is not uncommon. Many couples find their way into therapy with similar stories, seeking ways to heal the pain and hurt inflicted upon one another. Until recently it’s been widely assumed that the source of couple distress stemmed mainly from poor communication skills. In this vein, what couples need is to learn how to manage conflict more effectively through improving their communication abilities—their ability to negotiate, compromise, and use “I” statements, for example. In *Hold Me Tight: Seven Conversations for a Lifetime of Love* Dr. Sue Johnson challenges these and many other longstanding assumptions. Johnson points couples into discussions of emotional safety, accessibility, and responsiveness with each other. Therapists familiar with Emotionally Focused Therapy for Couples (EFT: Johnson, 2004) will recognize the emphasis on interactional cycles, emotion, and adult attachment theory. But this work is for *couples* to read together at home – whether or not they are seeing a therapist. In *Hold Me Tight* Dr. Johnson brings decades of experience as a clinician, researcher, and teacher to couples themselves.

The book is organized into three parts. Part One provides an understanding of love and intimate connection rooted in attachment theory. Using significant scientific research and clinical examples, couples are invited to see themselves and their partners in new relational and healthy ways. Part Two asks couples to consider how they have become emotionally disconnected over the years. After reflection and conversation, partners are led to engage in seven conversations meant to begin the process of rebuilding their emotional bonds and creating lasting intimacy. Play and Practice exercises

Journal of the Texas Association for Marriage and Family Therapy
Volume 13, No. 1, 2008

are mingled throughout each chapter to provide a structure that allows the material to remain relevant for each unique couple coming to the text. The exercises are emotion and attachment-focused, user-friendly, and tailored to married, unmarried, and gay/lesbian couples. Part Three addresses the healing power of love. Interdependence is presented as essential to holistic health. A complete chapter is devoted to traumatic experiences for couples that face such repercussions daily in their relationships.

Therapists can easily have their couples read this text while simultaneously going through the therapy process. Caveat: The therapist may need to slow down and deepen the emotional processing in-session begun by couples while reading the text. This is an enrichment version of EFT, not a replacement to the therapy approach that is EFT. Therapists will need to moderate the ability and timeframe for their couples to effectively go through this material based on each unique couple. The book may also prove a bit long for some couples, so going slow is recommended on several fronts.

Hold Me Tight is a breath of fresh air into the enrichment literature. It effectively brings to the masses an enrichment version of EFT and Attachment Theory (Bowlby, 1988). With so many “pop” enrichment books available, it is refreshing to see a work born and shaped from clinical research. While we believe the book could effectively be edited and a bit shorter without losing its effectiveness, it is an invitation for couples to explore the emotional underpinnings of their relationship, and to begin creating secure bonds in which they can weather the storms of life - together. Therapists will find the chapter dealing with trauma a very nice asset – something rarely seen in the couples’ enrichment literature. The website for the book is located at: <http://www.holdmetight.net/>

Brent Bradley, Ph.D.

Associate Professor of MFT
University of Houston-Clear Lake
bradleyb@uhcl.edu

Nicholas A. Lee, M.A.

Marriage & Family Therapist
Still Waters Professional Counseling, LLC

Seth, R. (2008). *First comes marriage: Modern relationship advice from the wisdom of arranged marriages*. New York: Simon & Schuster, 196 pp., \$14.00

We live in a media-dominated society. Everything from our political views to our beliefs about love and sex are often handed to us by advertisers and media moguls. These hand-me-down views then influence our goals and relationships. A colleague once shared with me the opinion that those seeking marriage are often searching for the ever-elusive soul mates abundant in romantic comedies. Unrealistic expectations and hopes for the perfect spouse lead many on an unending search resulting in frustration, loneliness, and hopelessness, instead of love, commitment, and romance. In *First Comes Marriage*, Seth seeks to remedy that by sharing advice gleaned from 300 interviews with women currently living in arranged marriages.

The author begins by describing arranged marriages, differentiating them from forced marriages. While not suggesting that the answer to love, commitment, and romance lies in having an arranged marriage, the author does posit that the general success of these marriages provides valuable insight into making any relationship work. "The idea behind arranged marriages is that although the couple is not in love when they enter the relationship, feelings of affection and intimacy will grow as they start to build their lives and their family together" (p. 8). These feelings of attraction and intimacy are fostered and developed by implementing seven themes found in arranged marriages. These seven themes, termed "secrets" by the author, are chaptered accordingly and are designed to create more realistic expectations in one's partner.

Written for females, the book uses an abundance of stories from individuals who have struggled to find the Mr. Right based on societal definitions, allowing the reader to identify with these struggles. These stories are then contrasted with those from women in arranged marriages. Topics such as romance, sex, common interests, and commitment are addressed. The author does an excellent job of not only describing the benefits of the secrets, but also of detailing the effort necessary to obtain them.

First Comes Marriage reads well and is clearly designed to be a self-help, do-it-yourself guide to developing more meaningful, lasting relationships. Each chapter includes exercises to help the reader

Journal of the Texas Association for Marriage and Family Therapy
Volume 13, No. 1, 2008

challenge their current expectations and create more realistic, honest goals. Similarly, each chapter has a 'Living this Secret' section where the main points are highlighted and described, allowing the reader to tie it all together.

While many of the secrets outlined in this book may not be new to some, and while some seem to have a large amount of overlap, *First Comes Marriage* would be a valuable resource for therapists working with premarital couples and individuals. Though written specifically to females, the advice offered transcends gender. Similarly, it is written in a way that highlights valuable lessons for any reader, despite personal feelings toward arranged marriages. *First Comes Marriage* provides sound advice for counteracting the implausible mate theory rampant in society, without pushing for arranged marriages.

Robert D. Porter
Texas Tech University

McGoldrick, M., Gerson, R., & Petry, S. (2008). *Genograms* (3rd ed.). New York: W.W. Norton & Company, 272 pp., \$27.00.

Clinicians and researchers involved with family systems are continually faced with the complexity inherent in family structures and patterns. Since the 1980's the genogram has become a widely used tool and graphical representation for family histories and relationships. Genograms have aided professionals, ranging from clinicians to historians, through its standardized format providing organization, clarity and direction for conceptualizing family patterns. *Genograms* (3rd ed.) maintains the same focus of previous editions by offering practical guidance toward the construction, interpretation and utilization of the genogram, while displaying a more comprehensive overview than previous editions.

Genograms (3rd ed.) progresses similarly to its predecessor, *Genograms* (2nd ed.), by following a similar layout and structure of the book's contents. Both editions begin with how to construct the genogram, and then discuss how various family and social factors affect family patterns and structures, and end with how to use the genogram clinically and how family research focuses on the genogram. The third edition maintains the same intriguing examples of famous people, ranging from the families of Sigmund Freud to Bill Clinton. These genograms personalize the examples and provide a systemic perspective toward familiar individuals and families.

Certain themes and areas of emphases found in *Genograms* (3rd ed.) mirror McGoldrick's other contributions to the field. For example, Carter and McGoldrick's (2005) use of a multi-contextual framework emphasizing the impact of larger societal structures and stressors on the family system appears in the first chapter of the book. Additionally, Carter and McGoldrick's (2005) work on the impact of life cycle transitions on the family heavily influences chapters 4 and 8. Furthermore, this edition is marked by its expansion of contextual and social factors, such as ethnicity and religion/spirituality (McGoldrick, Giordana & Garcia-Preto, 2005). Thus, while not all concepts are new or revelatory, they complement McGoldrick's other contributions.

The first part of the book guides the reader through the creation and construction of the genogram. McGoldrick navigates the complexity of various family structures by offering lucid genogram

Journal of the Texas Association for Marriage and Family Therapy
Volume 13, No. 1, 2008

illustrations and thoroughly describing diverse family forms. An addition to this section includes examples and useful questions regarding more tailored genograms such as cultural, socioeconomic status, religious/spiritual and community genograms. McGoldrick, Gerson and Petry's writing is marked by clarity; however, they often note the difficulty in integrating broad contextual factors stating, "there quickly comes a point at which the complexity cannot be mapped in any graphic form" (p. 57). Confronting this tension, they propose the possibility for current and future software to track complex patterns.

"Clarifying family patterns is at the heart of genogram usage" (p. 235) and identification, interpretation and assessment of these patterns are largely the focus after the first three chapters. The structure and content from chapters 4 through 9 are similar to the earlier edition covering broad, relevant systemic issues. For example, familiar family patterns such as underfunctioning and overfunctioning are represented through genogram examples. Also, common family triangles are described and represented in a genogram. Family patterns covered ranged from sibling birth order to triangles in families with foster children. Again, this book is not introducing new concepts to the field, but cogently and clearly presents how diverse family patterns would be displayed in the genogram.

The book follows with how clinicians can use genograms. Engaging the family and formulating useful interventions are approached in this section. Additionally, the authors present a comprehensive clinical example intertwining family patterns, significant events, concurrent life stressors and cultural issues. Unique to the third edition is the inclusion of a chapter coauthored with Eliana Gil, which discusses using the genogram in a play therapy context.

It can be conclusively stated that genograms are not only widely applicable, but useful in providing a framework for clinicians. However, genogram research focusing on reliability and clinical utility has "attracted the attention of so few researchers in family therapy" (p. 283). Reflected in the closing chapter is the tension that the genogram is a widely applicable tool lacking sufficient research to delineate reliability and efficacy. The authors realize the genogram's effectiveness as a clinical tool and also advocate for more genogram research.

This book is well written and comprehensive. It maintains the strengths and goals of earlier editions yet makes its own unique contribution through additional emphases on larger societal factors, *Journal of the Texas Association for Marriage and Family Therapy* Volume 13, No. 1, 2008

diversity within family structures, and play therapy. This edition is arguably more accessible, placing the genogram symbols inside the cover and providing color-coded genogram examples in the middle of the book. This book is highly recommended for students in undergraduate and graduate courses focusing on family systems and for professionals and clinicians working with the assessment, diagnosis and/or treatment of family issues. *Genograms* (3rd ed.) has the content and tools necessary for clinicians and researchers to conceptualize family patterns through the construction and assessment of the genogram.

Rebecca Culver
Kansas State University

REFERENCES

- Carter, B. & McGoldrick, M. (2005). *The expanded family life cycle* (3rd ed.). New York: Pearson Allyn & Bacon.
- McGoldrick, M., Gerson, R., & Petry, S. (2008). *Genograms* (3rd ed.). New York: W.W. Norton & Company.
- McGoldrick, M., Giordana, J., & Garcia-Preto, N. (2005). *Ethnicity and family therapy* (3rd ed.). New York: The Guilford Press.
- McGoldrick, M., Gerson, R., & Shellenberger, S. (1999). *Genograms* (2nd ed.). New York: W.W. Norton & Company.

CALL FOR PAPERS

The *Journal of the Texas Association for Marriage and Family Therapy* is a TAMFT sponsored and refereed on-line journal published annually. The *Journal* aims to provide a professional development resource and communication link for members and interested individuals which addresses: (1) current practice interests of clinicians, (2) both theoretical and empirical scholarly research interests of academicians, and (3) practical bridging between clinicians and academicians.

Papers published in the *Journal* go through an anonymous review process and are selected from manuscripts submitted to the Content Editor and from materials presented at the annual TAMFT conference. Authors need not be members of TAMFT.

Inquiries and manuscripts should be directed to the Content Editor, and manuscripts should be submitted in electronic form. James Morris, *JTAMFT* Content Editor, james.morris@ttu.edu, 830.990.2717.

INSTRUCTIONS FOR AUTHORS

The *Journal of the Texas Association for Marriage and Family Therapy* is published on-line annually as a professional resource for members in accordance with the purposes of the sponsoring organization, the Texas Association for Marriage and Family Therapy. Toward that end, the *Journal* publishes articles that address current practice interests for clinicians, theoretical research interests, and those that can build bridges between clinicians and academicians. Articles are selected on the bases of appropriateness, clarity, significance, timeliness, and contribution to the field of marital and family therapy. Papers published in the *Journal* are selected from materials presented at the TAMFT conference and from papers submitted directly to the Editor. Authors need not be members of TAMFT. No remuneration is paid for accepted manuscripts.

BUSINESS MATTERS

Business matters such as advertising, reprints, and subscriptions are handled by the *Journal's* Business Office. Inquiries about such matters should be addressed to: Texas Association for Marriage and Family Therapy, P. O. Box 49009, Austin, Texas 78765-9009 (512)263-4048 or 800-270-4320 or admin@tamft.org.

Copyright on materials published in the *Journal* is held by TAMFT. Authors sign a copyright agreement when their article is accepted for publication. Permission to reproduce such copyrighted materials must be obtained from the *Journal's* Managing Editor; nothing may be reprinted without this permission in writing.

MANUSCRIPTS

Manuscripts should be submitted in electronic form to: James Morris, *TAMFT Journal* Content Editor, james.morris@ttu.edu

EVALUATION OF MANUSCRIPTS

Manuscripts are accepted for consideration with the understanding that they have not been published previously and are not being considered simultaneously for publication elsewhere. The right to reject any manuscript or to return it to the author for format, style, or other revisions before accepting it for publication is reserved to the Content Editor.

Papers should be submitted in a form that will permit "blind" refereeing. The author's name and other obvious identifying notations should appear only on a ***separate title page***.

The Content Editor acknowledges receipt of manuscripts and reaches a decision concerning publication as quickly as possible.

Page proofs will be sent to authors and **must be returned within 48 hours**. Changes are limited to the correcting of printing error, spelling, dates, and grammar. Substantive changes such as adding phrases, sentences, and paragraphs are not permitted.

FORMAT FOR MANUSCRIPTS

Please refer to a current issue of the *Journal* for examples of the format and style elements described below. Most commonly used word processing programs will be acceptable. (Consult the Managing Editor for specifics.) All typing including footnotes, reference, and quoted materials should be *double-spaced*. Margins of at 1 1/2 inches should be left at the top, bottom, and sides of pages. Manuscripts should be typed in the following order.

Title page. The title page should give the title of the article and, if appropriate, a starred footnote to the title indicating any acknowledgements of previous presentations of the paper. Each author's name should be placed under the title along with his/her primary professional affiliation. Underneath a short dividing line at the bottom of the page please provide: (1) the starred footnote, if any; (2) a sentence about each author that includes the authors' name, highest earned degree, current professional position and address; (3) additional information such as addresses for requests for reprints, special thanks and acknowledgements, etc. (See a current issue of the *Journal* for a model.)

Abstracts. A separate page should give an abstract of not more than 100 words, describing the paper's topic, method, and conclusions or implications. *All words in the abstract should be italicized. No abstract is needed for Brief Reports.*

Text. Following the introduction, long papers should be divided into appropriate sections with headings. First-order headings should be centered on a separate line and each major word capitalized. Second-order headings should be placed on a separate line, begin with the left margin, and be completely italicized. Third-order headings should begin on the same line with the first sentence of the section, be indented five spaces, have only the first word capitalized, end with a period, and be completely underlined. Manuscripts should not exceed 30 pages in length.

References. Citations should be given in the text by enclosing in parentheses the surname of the author(s) and the year of publication; the page number(s) should be included only when a direct quotation is used: (Jones, 1970); (Jones, 1970, p. 156).

References for all citations should be typed, double spaced, and listed alphabetically on a separate sheet(s) following the text:

Hill, H. I. (1965). An example of family diagnosis. *The Family Therapists*, 5, 235-250.

Jones, J., & Smith, D. E. (1973). *Marriage Therapy*. New York: ABC Books.

Journal of the Texas Association for Marriage and Family Therapy
Volume 13, No. 1, 2008

Note that the Journal does not use Reference Notes; all citations should be listed in the references.

Notes. Notes should be typed double-spaced and numbered consecutively on a separate sheet(s) following the references. Notes should be *used rarely*.

Figures (Tables, Charts, Graphs). Figures of all kinds should be kept to a minimum because they are expensive to publish. Each figure should be given on a separate sheet. All artwork to be submitted to the printer should be high-resolution linotronic output, 1200 dpi preferred. (Consult the Managing Editor for details.) The desired location of figures in the text should be noted, and figures should be numbered appropriately so that they correspond to mention of them in the text. Figures submitted in electronic formats should be accompanied by clean black and white laser printouts. Electronically formatted figures that are incompatible may be recreated for publication. Figures may also be reset to preserve a consistent style throughout the *Journal*. Authors should review recreated artwork carefully.

Style. The style of the *Journal* calls for formal usage. Contractions, slang, and abbreviations should be omitted, except in cases of direct quotation or when such usage is specifically demanded by the context and set forth in quotation marks. The use of the first person should be avoided unless it facilitates greater clarity in expression than would use of another form. All accepted manuscripts are subject to editing. The guide for style is the *Publication Manual of the American Psychological Association (5th ed)*. This guide can be ordered from APA Order Department, P.O. Box 92984, Washington, DC 20090-2984, or online at www.apa.org/books/. Articles not submitted in this format will be returned to authors for revision.

Questions concerning all editorial matters should be directed to the Content Editor.