University of Hormozgan

Iranian Journal of Educational Research

Print ISSN: 1735 - 563X Online ISSN: 2980 - 874X

Homepage: http://ijer.hormozgan.ac.ir

Educational and Behavioral Research Center

The Effectiveness of Art-Play Therapy and Filial Therapy on Attachment and Resiliency among Single-Parent Children

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Article Info

Article type:

Research Article

Article history:

Received 18 Nov. 2023

Received in revised form 20 Mar. 2024

Accepted 30 Gul. 2024

Published online 01 Sep. 2025

Keywords:

Play Therapy,

Art Therapy,

Filial Therapy,

Attachment,

Resiliency,

Single-Parent Children

ABSTRACT

Objective: Children of single parents often face challenges in attachment and resilience due to family structure and related psychosocial stressors. Effective therapeutic interventions are needed to strengthen their emotional and social development. This study aimed to determine the effectiveness of art-play therapy and filial therapy on attachment and resiliency among single parents' children.

Methods: A quasi-experimental design with three groups (two experimental and one control) and three stages (pre-test, post-test, and follow-up) was employed. The study population consisted of single parents' children aged 6 to 12 years in Isfahan, Iran. Using purposive sampling, 54 children were selected and randomly assigned to art-play therapy, filial therapy, and control groups. The Latency Attachment Scale and Resilience Scale were used to assess the dependent variables. Both intervention groups received 10 therapy sessions, while the control group received no intervention. Data were analyzed using repeated measures ANOVA.

Results: Findings revealed significant improvements in attachment in both intervention groups compared to the control group, as well as between the art-play therapy and filial therapy groups ($p < 0.01$). Similarly, significant differences were observed in resilience between the art-play therapy and filial therapy groups and the control group ($p < 0.05$).

Conclusions: Art-play therapy and filial therapy are effective in enhancing attachment and resilience among children of single parents. Their implementation in therapeutic and educational settings can be beneficial for supporting the well-being of this vulnerable population.

Cite this article: Esteki Azad, N., Marvi, M. & Ghaffari, Z. (2025). The effectiveness of art-play therapy and filial therapy on attachment & resiliency among single-parent children. *Iranian Journal of Educational Research*, 4 (3), 1-21.

. DOI: https://doi.org/10.22034/4.3.1

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Publisher: University of Hormozgan.

DOI: https://doi.org/10.22034/4.3.1

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Introduction

Children's mental health can be only expected in the family environment. In other words, the material and spiritual presence of parents and their abilities in playing their common role in the significant issue of parenting provide the context for the best development of children's talents and abilities and prevent parental burnout (Escalante-Barrios et al., 2020). In such families, the parents apply a common way of dealing with the child. Due to the findings reviewed previously, we may conclude that there is evidence to support both family involvement and child' socioemotional development as key factors in the promotion of development outcomes (Saracostti et al., 2019). The temporary or permanent absence of a parent for different reasons such as death, divorce, legal violations, imprisonment, job requirements such as military and medical services, illegitimate birth, and other reasons is called the new phenomenon of being a single parent. In such conditions, children live with only one parent (Lamb, 2017). Single-parent family, as a significant environmental variable, is one of the special family conditions which directly and indirectly has a special effect on the general development and different dimensions of children's behavior, especially in the field of mental health, physical health, and their adjustment (Aasen Nilsen et al., 2018; Nieuwenhuis & Maldonado, 2018). However, children experience the situation of parental absence differently from their parents and have a limited ability to understand what is happening during the separation, what they feel, and the questions they have regardless of their age (Hald et al., 2020).

Based on the results of previous studies, single parents' children have significant differences in functional areas such as psychological well-being (Maldonado & Nieuwenhuis, 2019), insecure relationships related to insecure attachments (Merchant, 2018), resiliency, and incompatibility with stressful situations (van der Wal et al., 2019) compared to two-parent families. In this context, systematic studies in the field of child and adolescent psychology are considered as a significant research priority by emphasizing the role of interpersonal factors or facilitating the occurrence of adaptive and effective social behavior in children as one of the essential contexts of clinical and developmental studies.

Based on Bowlby's theories, attachment means an emotional bond between the child and his main caretaker during childhood (Fallah, et al., 2022; Palma et al., 2021) and generally affects his social and emotional growth (Carlone & Milan, 2021). In his theory, Bowlby attempted to explain the

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role of secure attachment in freeing from negative emotions, rebuilding hope, optimism, and mental balance, and how different forms of insecurity can interfere with emotion regulation, social adjustment, mental health, and physical health (Shi et al., 2021). Single parenting has been often described as a more challenging situation that can reduce a single parent's ability to respond and be receptive to their child's signals and interactive cues as a result of economic constraints and pressures. Therefore, the high levels of single-parent stress may endanger the responsiveness and representation of independent parental attachment (Alink et al., 2019).

It seems that resiliency along with the quality of attachment can facilitate the tolerance of this loss for children in the process of parental mourning (Yousefian, 2023; Azim Oghlui Oskooi et al., 2021). In this context, resiliency is defined as increasing positive developmental consequences in the child and preventing maladaptive consequences in adverse conditions (Masten & Motti-Stefanidi, 2020). Resiliency refers to the dynamic process of positive adjustment to unpleasant experiences (Cambric, 2019), resistance to stress and the ability to adapt to challenges, threats, and overcome them (Southwick et al., 2016), physical resistance, spontaneous healing (Masten & Barnes, 2018), and the ability to restore emotional calmness (Tullius et al., 2021) in stressful situations (Panahali & Zanjani, 2019). It occurs at any age and any level and is a cognitive variable that can be developed (Cambric, 2019). The skills which support more precise and flexible thinking can be learned by children from a very young age and lead to the promotion of resiliency (Danese et al., 2020).

Play therapy and art therapy are among the therapeutic interventions used in childhood (Sigal & Rob, 2021). Play can help the establishment of social interpersonal relationships between children and their parents (Biddiss et al., 2021) and plays an effective and useful role in supporting the comprehensive growth of children (Patterson et al., 2018). Play is the language of the child and the language of the brain (Ashori & Abedi, 2020); Thus, play is in line with compatible evolution (Rathnakumar, 2020). Cognitive-behavioral play therapy, as presented by Knell, is a combination of cognitive therapy, behavioral therapy, and traditional play therapy. This method helps children to be actively involved in making therapeutic changes and overcome their problems.

Using puppets, animal puppets, books, and other toys, cognitive strategies can be used for children (Bahmani et al., 2018). The results of previous studies indicated that play therapy in the described form, structure and process, can affect different variables in different samples significantly, such

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the increased range of interpersonal relationships of children with separation anxiety (Yang & Wang, 2019; Farnam et al., 2020; Khojasteh, 2020) increased quality of attachment (Dousti et al., 2018), the frequency of children's resilient and self-restraining behaviors (Öztürk Serter & Balcı Çelik, 2020; Shafiei & Barhemat, 2020; Kim et al., 2018).

However, the method used in the present study for comparative therapy is Filial therapy. Landreth's therapeutic model is one of the most effective play therapy methods of play therapy (Salo et al., 2020). In this model, parents learn skills such as reflecting feelings, behavior, and empathy with their children by role-playing (Mohammadi Masiri et al., 2021). In which, parents as therapeutic agents learn to play with the child, establish non-judgmental, unconditional and original relationships with their child, and create a sense of security in their child instead of a counselor (Landreth & Bratton, 2006). Many studies have approved the effectiveness of play therapy based on the parent-child relationship on a variety of psychological variables. For instance, the effectiveness of this therapy can be mentioned on increasing the quality of attachment (Courtney & Nowakowski-Sims, 2019; Donald & Ceballos, 2020) and improving resiliency (Ashori & Abedi, 2020). Accordingly, since the absence of one parent can be a difficult, abnormal, and stressful situation for the child (Hirschfeld & Wittenborn, 2016), sometimes adults can understand such feelings and respond effectively despite the obvious expression of the child's feelings. Thus, the communication gap between the child and adult becomes deeper and irreparable. At this time, some steps should be taken to recognize the negative emotional functions of children using educational and psychological tools. In this regard, the barriers to child development as the greatest human capital can be eliminated.

Despite the growing body of literature on attachment and resiliency among children of single-parent households, there remains a dearth of studies specifically examining the efficacy of art-play therapy and filial therapy interventions in this context. This gap underscores the significance and novelty of the proposed research, which aims to contribute substantially to the field of child psychology and therapy. By delving into the effectiveness of art-play therapy and filial therapy, this study offers a distinct and innovative approach to addressing attachment and resiliency issues among single-parent children. While previous research has explored various therapeutic modalities in enhancing attachment and resilience, the integration of art-play therapy and filial therapy presents a unique intervention strategy. This innovation lies in the holistic nature of these

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therapeutic techniques, which not only target individual psychological processes but also incorporate elements of family dynamics and creative expression. Thus, the research holds promise in providing a comprehensive and multifaceted intervention model tailored to the specific needs of single-parent households.

The importance and necessity of this issue within the present sample are underscored by the unique challenges faced by children growing up in single-parent households. These children often encounter heightened stressors and disruptions to their socio-emotional development, stemming from factors such as parental absence, financial strain, and limited support networks. Consequently, there exists a pressing need to identify effective interventions that can foster secure attachment bonds and bolster resilience in this vulnerable population. By elucidating the potential benefits of art-play therapy and filial therapy, the research endeavors to address this critical gap in therapeutic interventions for single-parent children, offering tangible solutions to enhance their well-being and adaptive functioning. In essence, this research not only fills a notable void in the literature but also offers a novel and promising avenue for therapeutic intervention in the realm of child psychology. By elucidating the efficacy of art-play therapy and filial therapy on attachment and resiliency outcomes among single-parent children, the study contributes significantly to both theoretical understanding and practical application within the field. Ultimately, the findings are poised to inform clinical practice, policy development, and future research endeavors aimed at supporting the holistic development of children in single-parent households. As a result, this study focused on the implementation of a new integrated approach to the art of cognitive-behavioral play therapy along with Filial therapy to solve their problems. The main question of the research was whether art-play therapy and Filial therapy affect the quality of attachment and resiliency of single-parent children based on the framework, principles, and rules of the cognitive-behavioral approach?

Material and Methods

Research Design and Participants

The present study was a quasi-experimental study with a three-group design involving an art-play therapy, filial therapy, and control groups being performed in three stages of pre-test, post-test, and follow-up.

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The population included all single-parent children at the age of 6-12 years in Isfahan, Iran in winter 2020 who were included in the research process through a call. Among them, 54 children, including 18 children for each group, were selected by purposive sampling method based on inclusion and exclusion criteria and then placed in three groups by simple random method (poll). At the end of the study, one member from the art-play therapy group and three members of the filial therapy witnessed a fall, which reduced to 17 and 15 in terms of the number of samples in the above-mentioned groups, respectively. The entry criteria included being in the age group of 6-12 years, not undergoing parallel psychological or psychiatric therapy, not having childhood or other psychological disorders, complete consent to participate in therapy and research, and the child with the supervision of the mother while exclusion criteria included unwillingness to participate in the study, undergoing parallel psychological or psychiatric therapy and the absence of more than two sessions in the therapy.

Ethical considerations included maintaining confidentiality, using data solely for research objectives without disclosing names, complete freedom for individuals to withdraw from continued participation in the study, accurate notification of research results if requested by participants, obtaining written informed consent from participants, obtaining ethical code (IR.IAU.KHUISF.REC.1399.060) from the Ethics Committee, providing post-training for the control group upon participants' request in a condensed form , and informed consent was obtained from them and their parents.

Measures

Latency Attachment Scale (LAS). To assess the quality of attachment, the 75-item questionnaire of Susanna Barsky (2005) was used, having 18 positive key components and 57 negative key components. This scale was designed and high validity and reliability were reported for the scale. The items of this scale are organized into four definite factors such as avoidance/protector, avoidance/peer, anxiety/protector, anxiety/ peer. This scale is completed by parents and they are asked to rank the intensity of their child's behavior on a 5-point Likert scale from ‘’strongly agree’’ to ‘’strongly disagree’’. A high score in each of the subscales and a total score show the presence of more of these components (anxiety attachment and insecure avoidance), as well as a decrease in secure attachment style. Barsky (2005) in his study reported a high validity and reliability for each of these factors. However, for avoidance /protector, avoidance / peer, anxiety / protector,

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anxiety / peer was equal to .97, .94, .94 and .94, respectively. This scale was translated and standardized by Movahed Abtahi et al. (2015) in Iran. The number of scale items in the normalized Iranian form has decreased from 75 to 65 items. Using Cronbach's alpha, the reliability of each optimal scale factor was reported. .83 for the first factor (avoidance / protector), .83 for the second factor (avoidance / peer), .77 for the third factor (anxiety / protector) and .85 for the fourth factor (anxiety / peer). Cronbach's alpha of the attachment questionnaire for the present study was equal to .94.

Social-Emotional Assets and Resilience Scale (SEARS). To measure resiliency, the Merrell 52-item scale (Merrell, 2011), having four subscales of self-regulation (20 questions), social empowerment (12 questions), empathy (6 questions), and responsibility (14 questions) was used. The scale of scoring on the Likert scale is four degrees. This questionnaire was implemented on 1400 children and adolescents and the reliability coefficients of the test-retest for the child version were .81 while the validity of the test was reported at .67 to .72 (Nese et al., 2012). Cronbach's alpha coefficient of this questionnaire was obtained at .89 (Hoseini Yazdi et al., 2015). Cronbach's alpha of the social, emotional, and resiliency questionnaire in the present study was obtained at .97.

Procedure

After data collection in the pre-test stage and random placement of participants in two groups of art-play therapy and Filial therapy and a control group, art-play therapy (Esteki-Azad, 2021) and Filial therapy (Bratton et al., 2006) received 90-120 minutes of therapy during 10 sessions. The control group was on the waiting list during this period and received no intervention. Then, post-test and 45-day follow-up were performed for all three groups after completing the therapy sessions.

Interventions

The titles of the therapy sessions and a brief description of each session for the two used therapies are given in Tables 1 and 2.

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Table 1. Summary of art-play therapy

Sessions	Summary of sessions
First	Setting up playroom restrictions and preparing a poster called ‘’Our playroom rules’’, beginning the games based on identifying and naming the feelings and engaging the child in painting and art activities, as well as providing homework worksheets.
Second	Using art therapy techniques to teach fear and anxiety control, cognitive reconstruction of the beliefs caused by the anxiety of loneliness and separation by using the technique of hand effect on the heart with collage and storybook.
Third	Using art-play therapy techniques to teach emotional and behavioral management, practicing the non-violent communication using giraffe heart imagery with collage, creating the child's amazing ability to express feelings using the Little Bear World card.
Fourth	Using art-play techniques to reconcile with anger and express it without violence the play of leaving your mission in making the anger monster hungry! Using some tools and clay to model and giving away the clay.
Fifth	Use art-play therapy techniques to reduce clinical symptoms and teach behavioral management to siblings and parents through the techniques including paper shredding, and reversing techniques using illustration and making a map of habit returning and finger painting, mandala.
Sixth	Using art-play therapy techniques to identify dysfunctional beliefs and cognitive reconstruction through the techniques such as emotional cookies, weights and balloons, coloring geometric shapes by using the technique of perfect flower is God, the story of the black cloud, and activity of Lighten the color of your cloud.
Seventh	Using art-play techniques to promote desirable social behaviors and skills, as well as the enrichment of communication with parents and peers using the techniques such as yarn drawing games, inviting to a childish meeting using dolls.
Eighth	Using art- play therapy techniques to gain knowledge using the techniques such as the use of artistic and verbal metaphor in the form of storytelling with imagination before and after experiencing loss through activities such as everything is changing, life is a journey, this death was not the result of your mistake, commemorating the memory of a loved one, paint your life.
Ninth	Using the techniques of art-play therapy to require enjoyable and exciting activities through the techniques such as the use of magic tricks like volcanoes and coming to the surface.
Tenth	Using art-play therapy techniques for increasing physical strength and sleep quality, and summarizing the use of techniques such as the strong animal technique.

Table 2. Summary of the filial therapy

Sessions	Summary of sessions
First	Expressing the basic topics such as encouraging and strengthening parents, empathy with parents, showing communication problems between parents and their children as normal.
Second	Identifying the four main emotions. Teaching the empathetic response to the child, and practicing empathic response.
Third	Teaching the four principles of play: The child is the guide in play sessions. Considering the child's feelings through facial expressions, body, tone of voice, the speech of the child.
Fourth	Preparation of toys: toys related to real-life; toys related to the expression of anger. Some toys for creativity, teaching the do's and don'ts of play sessions, playing in a specific place and time, putting the same toys next to each other, the child being the guide
Fifth	Teaching restraint skills for children's inappropriate behaviors, applying the three steps of limitation including empathetic and intimate reflection of the child's feelings
Sixth	How to talk to the child, the significance of recognizing their feelings, list of play session skills such as maintaining structure, empathy, following, avoiding questions, and giving guidance
Seventh	Methods of giving the right to select (the right to select simply and empower the child, the right to select as a positive outcome, and the right to select to strengthen the rules of the house)
Eighth	Increasing self-confidence in children, the consequences of reducing self-confidence, ways of increasing self-confidence such as the opportunity of dealing with problems
Ninth	Teaching how to encourage and its difference with praise, the need to encourage instead of praising
Tenth	Reviewing the skill of the right to choose, limiting and encouraging, setting restrictions as advanced in the form of explaining the consequences of work, generalizing the restrictions outside the session

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Results

The findings of the chi-square test were that there was no significant difference between the experimental and control groups in the variables of child age, mother's education, child gender, number of children in the household, and years of single parenting. The comparison results of the two groups showed the homogeneity of these two intervention groups.

All data analyses were conducted using SPSS 26. The data obtained from the research were analyzed through the repeated measures of variance and Bonferroni post hoc test. Evaluating the mean and standard deviation of attachment and resiliency for experimental and control groups in three stages of research indicated that the two groups of art-play therapy and filial therapy in the post-test and follow-up stages revealed more significant changes than the control group (Table 3).

Table 3. The mean and standard deviation of attachment and resiliency of research groups in three-time stages

Variable	Time	Art-play therapy group		Filial therapy group		Control group	
		M	SD	M	SD	M	SD
Attachment	Pretest	167.88	41.39	175.67	44.09	187.22	32.43
	Post-test	43.29	24.34	114.53	27.25	186.22	31.85
	Follow up	42.82	23.99	114.33	27.46	186.28	31.40
Resiliency	Pretest	78.41	39.251	25.80	12.084	39.22	15.656
	Post-test	126.12	22.566	78.87	14.861	41.44	14.504
	Follow up	126.06	22.584	78.80	14.987	41.22	14.326

Note. M = Mean; SD = Standard Deviation

Before implementing the analysis of variance, in addition to reviewing the normality of data distribution, Levene's test indicated that the variance of error was equal ($p < .05$). In the intragroup effect and in the factor "time" for the variables of attachment ($F = 190.132$, $df = 1.002$) and $p < .01$) and resiliency ($F = 86.142$, $df = 1$ and $p < .01$). and time and group interaction for attachment ($F = 65.98$, $df = 2.005$ and $p < .01$) and resiliency ($F = 19.80$, $df = 2.001$ and $p < .01$). indicated a significant difference ($p < .01$) between pre-test, post-test and follow-up and time interaction with the group (Table 4).

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Table 4. Results of repeated-measures analysis of variance for attachment and resiliency

Variable	Source of effect		SS	DF	MS	F	P	Eta squared	Test power
Attachment	Intragroup	Time	128.818807	1.002	128.711511	19.1320	.001	.80	1
		Time × group	894.59706	2.005	446.53300	65.98	.001	.73	1
		Error (time)	318.883	4.1087	675.908	-	-	-	-
	Intergroup	Group	272.745543	2	136.873271	56.01	.001	.70	1
		Error	114.115335	47	243.6622	-	-	-	-
Resiliency	Intra-group	Time	389.23830	1	389.92313	86.142	.001	.65	1
		Time × group	179.67903	2.001	894.0888	19.80	.001	.45	1
		Error (time)	212.81440	4.0207	451.743	-	-	-	-
	Intergroup	Group	132.417474	2	662.20937	78.354	.001	.77	1
		Error	392.21031	47	834.707	-	-	-	-

The results of the Bonferroni post hoc test in line with comparing the two research groups indicated a significant difference in attachment and resiliency between cognitive-behavioral art-play therapy and Filial therapy with the control group ($p < .01$) between the two therapies, as well as a significant difference ($p < .01$) (Table 5).

Table 5. Bonferroni test results for paired comparison of research groups on attachment and resiliency

Variable	Base group	Compared group	MD	SE	Sig
Attachment	Art-play therapy	Filial therapy group	-50.178	10.08	.001
	Art-play therapy group	Control group	-101.907	9.63	.001
	Filial therapy group	Control group	-51.730	9.955	.001
Resiliency	Art-play therapy group	Filial therapy group	49.041	5.909	.001
	Art-play therapy group	Control group	69.566	5.641	.001
	Filial therapy group	Control group	20.526	5.832	.003

Discussion

The discussion This study which aimed to compare the effectiveness of art-play therapy and filial therapy on attachment and resiliency of single-parent children showed a significant difference between the art-play therapy group and filial therapy with the control group.

Comparing the findings of the present study to other studies showed that the results related to the effectiveness of play therapy on attachment variables are consistent with the findings of other studies about the effectiveness of art therapy on reducing anxiety and insecurity symptoms and increasing secure attachment in children (Sigal & Rob, 2021), play therapy on reducing social anxiety (Farnam et al., 2020;

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Khojasteh, 2020), reduction of insecure attachment symptoms in children (Yang & Wang, 2019; Dousti et al., 2018; Hirschfeld & Wittenborn, 2016), symptoms of separation anxiety disorder, attachment problems, and increase of secure attachment (Courtney & Nowakowski-Sims, 2019). In all of these studies, art therapy and play therapy were used as a kind of dynamic interpersonal relationship between the child, parent, and therapist.

In discussing the effectiveness of art-play therapy and filial therapy on attachment and resiliency among single-parent children, it is important to consider the underlying scientific theories that support these therapeutic approaches. Attachment theory, developed by John Bowlby and Mary Ainsworth, posits that early attachment relationships with caregivers significantly impact a child's emotional development and their ability to form future relationships (Yan, et al., 2024). Through the use of art-play therapy, children are able to express their emotions, thoughts, and experiences in a non-verbal way, which can help them process and make sense of their attachment patterns and relationships.

Explaining the effectiveness of the art-play therapy package on attachment indicated that the therapy process has created an opportunity for a secure relationship between the child, parent, and therapist so that the child can use all of his psychological and physical capacities. Perhaps, it can be said that the increase of care conditions and better performance of the child and family has caused this change. The pattern of insecure attachment and the increase of anxiety and avoidance symptoms is the result of inappropriate mother-child interaction and when a safe base is provided for the child's comfort and support, it is more probable that the child reconsiders his insecure pattern. In explaining the intervention method developed in this study, focusing on the techniques of simultaneous art therapy and play with a cognitive-behavioral approach specific to single-parent children, it should be stated that since children cannot express their frustration with an absent parent openly and orally. For this reason, non-verbal and natural techniques of art therapy and play therapy have helped the child to express such frustrations and complaints in a communicative and non-verbal way. In this intervention in the first session, the child is asked to express his favorite wish or play in the presence of a group of single-parent children with similar problems and hide his problem (having a single parent) and feel sharing the situation with others, and also express his wishes with full readiness and listen to the wishes and interests of similar children and also empathize with them. In addition, he should feel safe, attached, and belong to the group by participating in artistic activities to prepare a poster for the rules of the playroom. Furthermore, in explaining the reason for the effectiveness of art-play therapy on increasing secure attachment, it can be said that asking the child to explain, discuss and understand his feelings about his parents, divorce or absence of the father and make the conditions normal through the techniques of playing the toss of feelings, playing with emotional and named balloons,

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the emotional tree and also turn anxiety (insecurity) into calmness and a sense of security. That is why the discharge of emotions and control of fear and anxiety are highly important in the initial sessions of therapy. Even for the children who had not the courage to express grief and those who had shown delayed response to grief or the absence of a father, the messenger butterfly balloon technique, thread drawing, and commemorating a loved one were used to have a second chance for mourning and reduce their anxiety symptoms. Using art therapy techniques to teach fear and anxiety control, relaxation, cognitive reconstruction of beliefs caused by the anxiety of loneliness and separation through the hand-on-your-heart technique with collage and a storybook related to increasing secure attachment, using an anxiety test game technique for helping children increase their knowledge of this training with awareness on how anxiety works. The point is how anxiety affects the body and what changes occur in the body, the fact that the child is more aware of his disturbing thoughts and beliefs and how to deal with anxiety has been effective in the increase of secure attachment.

Filial therapy, on the other hand, focuses on strengthening the attachment bond between parent and child by teaching the parent skills to support their child's emotional development. This therapeutic approach is based on the idea that a secure attachment between parent and child can promote resilience and help the child navigate challenging situations. From a scientific perspective, research has shown that both art-play therapy and filial therapy can be effective interventions for improving attachment and resilience in children. Studies have demonstrated that these therapeutic approaches can lead to positive changes in a child's emotional regulation, social skills, and overall well-being.

Regarding the higher effectiveness of the art-play therapy package than filial therapy on increasing the secure attachment of single-parent children, it can be mentioned that in art-play therapy sessions, opposed to Filial therapy, where the participants are only the mothers of single-parent children who must do the training and exercises at home with their child, the focus is on the children while mothers just watched the sessions. Thus, it seems that the single-parent child has found a safe opportunity to be with his peers at a physical distance from his parent, in the playroom with the therapist, assistant therapist, and others and engage and tolerate far fewer anxiety and asymptomatic symptoms during the sessions and performing artistic activities and specialized games provided in the package. It was well manifested in the final sessions over time through some practice and repetition with higher transparency and quality.

In line with comparing the effectiveness of play therapy on the variable of resiliency in single-parent children, it can be stated that the results of the present study are consistent with the results of studies on the effectiveness of play therapy on the adjustment of children of divorced families (Öztürk Serter & Balcı Çelik, 2020), the resiliency of students (Shafiei & Barhemat, 2020), and resiliency of deaf children (Ashori

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& Abedi, 2020). On the other hand, the effectiveness of art therapy on increasing resiliency is in line with the findings of previous studies on the effect of art therapy training on promoting mental well-being, resiliency in psychiatric patients (Kim et al., 2018), and children's resiliency (Mohammadi Masiri et al., 2021). Increased resiliency due to art-play therapy in single-parent children is the result of the effects caused by this new type of intervention on changing the psychological and emotional environment more effectively among single-parent children and then the feeling of empowerment and higher self-efficacy caused by active participation in cognitive-behavioral art-play sessions. Content of art-play therapy focuses on accepting the realities in changing family structure, enduring frustration, children's readiness for coping with stress, self-control, promoting cognition of emotions, compassion, nonviolent communication, living happily, promoting relationships and social skills, and teaching relaxation. The content of the therapeutic intervention used is first due to the involvement of the child in positive interpersonal activities with other children, creation of positive inner emotions and increase of mood, provision of the way for using the power and capacity of self-control and resiliency to cope with family and school pressures.

In this regard, the use of therapeutic techniques can be mentioned such as playing with slow movements, playing the game “End your mission in making the monster of anger starve”, using tools and clay to model the clay. In addition, the regulation of the child's behavior has two other main goals such as regulating the emotion and creating a secure attachment in the child. The mechanism of the effectiveness of this type of play therapy is that creating safe attachment in children enhances positive feelings, social competence, self-esteem, empathy, emotional health, and resiliency in children. Furthermore, learning how to regulate emotion appropriately and apply it non-verbally at home is a critical element in children's development. In this regard, cognitive-behavioral art-play therapy of single-parent children makes a positive change in the child's attitudes and behaviors. In other words, the language of this kind of art therapy, which is mostly non-verbal, enhances healthy growth, emotion regulation, the quality of parent-child interactions, and secure attachment in the child. Thus, it is likely to have a positive effect on the resiliency of single-parent children.

Regarding the increase in resiliency due to the use of Filial therapy in single-parent children, it can be stated that the mother is acquainted with her educational role during the Filial therapy sessions as the person who has the most contact with her child and implements it in practice as this program is based on the interests and needs of the child. Although the mother as the head of the household causes many problems in the family and such problems affect the performance and resiliency of the family by affecting the quantity and quality of parent-child relationships and the interaction of family members, Filial therapy provides an opportunity for parents to freely express themselves in group meetings and express the problems and

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challenges of raising their children through a regular and structured program and ultimately learn the strategies to face such challenges practically in the natural position.

In general, the results of the present study revealed the effectiveness of the art-play therapy package for single-parent children on attachment and resiliency of single-parent children. In addition, filial therapy has acted much weaker but significant in relation to the results of comparing the two intervention approaches. Thus, it seems that the newly developed package (art-play therapy for single-parent children) is in priority. The studies of recent years on single-parent families indicated that the effects of this phenomenon can be highly lasting and sometimes destructive. The children who live with only one parent are twice as likely as children living with two parents to have behavioral and psychological problems. The children who live alone with their mothers and face the absence of their fathers are more likely to drop out of school, seek delinquency, drug use, crime, and other problems than the children whose parents are with them. Such studies emphasized that fathers give up their children's livelihoods in single-parent families headed by the mother and force mothers to take on the whole financial burden of the family. Thus, the pressure of life makes such mothers less likely to take care of themselves and their children. As a result, the qualitative absence of the mother causes the child to suffer irreparable problems during his most critical period of development.

The lack of a parent with the same gender of the child for single-parent boys in female-headed households weakens the child in learning gender-appropriate roles. Thus, it is necessary to consider strong psychological interventions for single-parent children. Art-play therapy changes the child's worldview by changing the capacity he creates in the child's perception of himself and his environment. After learning from play therapy, children realize that the world is not as insecure and unstable as they thought. Thus, they become optimistic about themselves and those around them, and the future. This issue will make them happy and increase their vitality. One of the goals of the art-play-based intervention process is making a positive and lasting difference. Finally, children experience a sense of accomplishment and victory by drowning themselves in play and artistic activities. All steps of art-play therapy end by eliminating the pressure of problems and receiving a certificate of attendance at play therapy sessions. This happy ending is always associated with the cheerfulness and joy of children. In the conclusion of the present study, it can be stated that art-play therapy and sometimes filial therapy with a combination of some enjoyable and amazing activities such as painting, acting (role-playing), storytelling, and acting in a structured and regular cognitive-behavioral format can be a humane and helpful strategy for single-parent children.

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Additionally, research has highlighted the role of attachment in shaping brain development and stress response systems. By addressing attachment issues through therapy, it is possible to help children build resilience and develop healthy coping mechanisms in the face of adversity (Esteki Azad, 2021).

Overall, by incorporating the latest scientific theories and evidence-based practices, art-play therapy and filial therapy can be valuable tools in supporting the attachment and resilience of single-parent children. These therapeutic approaches offer a holistic and individualized approach to addressing the emotional needs of children and enhancing their overall well-being (Esteki Azad, 2022).

This study has several limitations that should be noted. First, we found no evidence of a mediating effect of confounding variables such as children identity crisis, which could interfere with training effectiveness. Secondly, the sample size enrolled in the present study was relatively small, larger studies are needed to confirm this evidence of a mediating effect of attachment and resiliency concerns. Therefore, the long-term effects of art-play therapy on other aspects of single parent child need to be further investigated (Esteki Azad, 2022).

Data availability statement

The original contributions presented in the study are included in the article/supplementary material, further inquiries can be directed to the corresponding author.

Ethics statement

The studies involving human participants were reviewed and approved by ethics committee of the Islamic Azad University of Isfahan the patients/participants provided their written informed consent to participate in this study. {IR.IAU.KHUISF.REC.1399.060}

Author contributions

N. EA, M.M and Z.Gh contributed to the study conception and design, material preparation, data collection and analysis. All authors contributed to the article and approved the submitted version.

Funding

The authors did (not) receive support from any organization for the submitted work.

Conflict of interest

The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

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