

Investigating the Effectiveness of Solution-Focused Couples Therapy (SFCT) on the Inefficiency of the Function of Couples Referring to Counseling Centers in Shiraz

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Abstract

Background and Propose: healthy function of family prevents problems such as addiction, divorce, infidelity, boredom, diversity and much harm. The study aim was investigating the effectiveness of solution-focused couple's therapy (SFCT) on the inefficiency of the function of couples referring to counseling centers in Shiraz. **Method:** This quasi-experimental study was performed using a pretest-posttest design with a control group. The statistical population of the study was maladapted couples referring to counseling centers in Shiraz in 2018. Sixty people (30 pairs) were randomly selected as experimental groups (15 pairs) and 15 pairs as a control group. The data collection tool was the McMaster Family Assessment Device Scale. In this study, multivariate covariance test (MANCOVA) was used. **Results:** The results of multivariate analysis of covariance (MANCOVA) on the mean scores of inefficiency of family function in pre- and post-test of experimental and control groups showed a significant difference in the inefficiency of family function variable ($p < 0.0001$). One-way analysis of covariance in MANCOVA text was also based on the mean scores of post-test of inefficiency of family function of experimental and control groups with pre-test control ($p < 0.0001$ and $F=172.59$), which indicates the degree of effect or difference, and shows the percentage of individual differences in post-test scores of variables related to the effect of solution-focused couple's therapy (SFCT). **Conclusion:** the results of the analysis showed the originality and importance of the solution-focused couple's therapy (SFCT) intervention in reducing the inefficiency of the function of

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incompatible couples and the mentioned variable can explain the high degree of variability in the function of couples in incompatible conditions.

Keywords: *solution-focused couple's therapy (SFCT), couples function*

I. Introduction

The family has been considered as a living and changing substance which uses the members to organize a whole by constant, interactive, and patterned communication and expands over time and space. The family can be considered as an emotional unit and a network of intertwined relationships that is built from the marital bond of man and woman. The need to establish a lasting, intimate and loving relationship is one of the vital reasons that caused to choose and marry among men and women. The creation and persistence of an intimate relationship is increased by special emotional bonds (Badihi Zaraati, Mousavi, 2016). It can be said with certainty that the family is the vital bases of society in which individuals grow and enter society. Regarding to this point, the strength of society is a big building that is completely relies on the stability of its pillars, i.e. the family, whose changes in members cause changes in its dynamics and functions. So it leads to disruption of peace and integration and compatibility; therefore, any inefficiency of family function leads to the disturbed of the pillars of society (Khodayari Fard, Zandi, Haj Hosseini and Ghojari Bonab, 2016).

In this regard, divorce as one of the common issues in today's societies has been considered by psychologists and counselors, which seeks marital conflicts and incompatibilities that occur due to reasons such as addiction, the development of disordered behavior between spouses and verbal and physical conflicts due to lack of basic life skills and infidelity, marital boredom and diversity, improper function and..... Fifty percent of divorces in Western societies show that families are unable to solve their problems. In our country, citing marriage and divorce statistics provided by the Civil Registration Organization, has reported the registration of 20 divorces per hour in the first nine months of 2016. Referring to the registration of 135,677 divorces in the first nine months of this year in various provinces, it can be concluded that more than 20 divorce cases occur in the country every hour.

The report also says that the highest number of divorces occurred in 1994 and 1995, among girls in the 25-29 age groups and among boys in the 30-34 age groups. According to the Office of Marriage and Family Planning in the Ministry of Sports and Youth, in the first seven months of 1995 it the Tehran, Alborz, Qom, Gilan and Mazandaran provinces the highest divorce rates reported (Arabzadeh, Sudani and Shahbazi, 2019).

Family function is one of the most important indicators of quality of life and mental health. Family function refers to the family's ability to perform its responsibilities, including meeting the emotional, psychological, and physiological (material) needs of its members. Research has shown that in families where relationships between members and interactions within the family are based on closeness, intimacy, and understanding between individuals, all members are relatively resilient to the pressures of life. There is a significant relationship between

poor family function and children suffering from physical symptoms, stress and social inefficiency (Kahrizeh, Bazazian and Ghamari, 2014).

One of the vital role models in family function review is the McMaster function model. This model was introduced by Epstein, Bishab, and Levin in the early 1960s at McMaster University. The McMaster model assessed marriages and families. This model is based on a systemic method, describes the structure, organization and exchange pattern of the marital unit and allows family or marital relationships to be tested on a superficial range, from health status to severe mental disorder. Therefore the McMaster model does not cover all aspects of family function; it does address important aspects that are often clinically evident. To understand the structure, organization, and interaction pattern related with the family, this model assesses and measures six dimensions of family life: 1. Problem solving: in short, problem solving shows the ability to solve problems at a level that increases the efficient family function. 2. Communication: refers to how information is exchanged between family members. 3. Roles: roles show the efficiency of the family style in distributing and performing tasks. 4. Emotional response: it refers to the ability of family members to respond appropriately to different stimuli. 5. Emotional companionship: refers to the level of interest, attention and investment of family members towards each other. 6. Behavior control: Describes standards and behavioral freedoms (Karami, Zakiei and Alikhani, 2012).

We have to admit that the problems of families and the increase in divorce lead to the decrease of society and contain heavy and irreparable social costs, and this time doubles the responsibility of counselors and psychologists and social planners. For this reason, it is necessary to deal with this issue as soon as possible by using up-to-date, effective and diverse therapy methods and interventions (Nemati, Dukanefard and Behboodi, 2017) and improve the couple's function as well as their well-being in life.

In this regard, today, different methods to couple therapy and family therapy have been improved with the aim of decreasing conflicts and communication disorders between couples. The goal of couple therapy is to help couples better adjust to current issues and learn more effective methods to communicate with each other. One of the effective therapeutic methods in solving couples' marital problems is "emotion-focused approach". The emotion-focused approach was proposed by Greenberg and Johnson in the early 1980s based on systems theory, humanistic and experimental therapy, and attachment theory (Mohammadi, Ejei, and Gholamali Lavasani, 2015). This therapy is also one of the modern methods to couple therapy that has been considered as an effective therapy in injured couples (Aghagadi, Golparvar, Aghaei, Khayatan, 2018). One of the counseling models has obtained more followers today due to its effectiveness and shortness is solution-focused couples therapy (Krahi, Farjamfar, Mortazavi, Nazari, Goli, 2019). The model was developed in the early 1980s at a short-term family therapy center in Milwaukee. Short-term solution-focused couple's therapy was developed by two social workers named Dissizer and Kim Berg et al. who wanted to study the effect and methods of short-term therapy to help change clients (Arianfar, Rasouli, 2019)

This is a postmodern method regarding to the collaboration of clients and therapists, and is a form of concise therapy that relies on the resources and ability of clients to adapt and create solutions. The main premise of solution-focused couple's therapy is that the problem or issue that leads the person to therapy is not needed to

specify the direction of the discussion; because the cause of every problem is not necessarily related to its solution, and the clients themselves have resources that they will use to make a difference. According to solution-focused couple's therapy, clients are specifically wanted to map out the company's future vision, and recall their past strengths, strengths, and resources to build that vision in their daily lives. In this therapy, instead of focusing on the present and the future, and instead of paying attention to the weaknesses and shortcomings of the clients, their abilities are considered. He is reminded and accompanies him in finding a solution (Mohammadyari, Hosseinian, 2018).

The solution-focused couple's therapy has a non-pathological view of the clients and helps the clients to find solutions to their current problems. This view emphasizes the here and now and the future. According to the solution-focused couple's therapy perspective, change is inevitable and especially constructive changes are possible. So, in this type of counseling, the focus is on problems that are likely to change and not in difficult and unchangeable contexts. Instead of emphasizing the shortcomings and disabilities of individuals, this method focuses on highlighting the capabilities and successes of individuals and establishing supportive relationships during the therapy process. Short-term solution-focused couple's therapy is a future-focused and goal-focused method that focuses on solutions and construction of scales to measure client progress (Krabi, Farjamfar, Mortazavi, Nazari, Goli, 2019).

The most important feature of solution-focused therapy is to help clients find exceptions. Exceptions are times when the problem was less severe or did not exist at all, or times when there was a problem but the authorities dealt with it in an acceptable manner. Instead of emphasizing the shortcomings and inability of individuals, this method focuses on highlighting the capabilities and successes of individuals and creating supportive relationships during the therapy process (Arianfar, Rasouli, 2019).

It can be said that this therapy, by discovering exceptions in the life of the client lead to hope and help him to have a better future. In this therapy, the client is considered a leader. A person has inner privileges and unique characteristics. These differences lead each client to be able to find their own solutions (Krabi, Farjamfar, Mortazavi, Nazari, Goli, 2019).

In this therapy, there is always an attempt at attachment concerns, namely security, trust, contact, and barriers. From the perspective of solution-focused couple's therapy, when couples are disturbed and vulnerable, it is unlikely that they will use their coping and communication skills. In this therapeutic method, couples' confusion and vulnerability are thought to be due to cognitive deficits, and emphasis is placed on achieving new roles in psychosocial conflicts (Yavari, Aghaei, Golparvar, 2019).

Short-term solution-focused couple's therapy has obtained a lot of popularity over the past few years due to its focused on rapid therapy -related changes and respect for the views of clients, both of which are consistent with the philosophy of health care (Arianfar, Rasouli, 2019).

Regarding to its fast and effective results, this methods has been broadly welcomed in clinical problems such as depression, spirituality, substance abuse and domestic violence, different conditions such as the elderly,

schools, couples and families. In recent years, an increasing number of researches have proven the effectiveness of the solution-focused couple's therapy. Studies has shown that solution-focused couple's therapy is effective in increasing communication skills, quality of life in children, as well as resilience and a sense of cohesion in people with MS. This therapy believes that people have strengths, resources and problem-solving skills. Solution-focused couple's therapy is in favor of talking about solutions instead of talking about the problem and explaining it. Solution-focused couple's therapy helps clients to develop exceptions instead of emphasizing problems, that is, effective solutions that the client has already used (Hosseini Tabatabai, Balghanabadi, Bazargan, 2018).

Because solution-focused couple's therapy believe that couples problems persist and worsen because of the way couples use them to solve, solution-focused couple's therapy use problem-solving skills when needed. Recalls couples, enabling them to break the vicious cycle of the problem and develop long-term solutions. Solution-focused couple's therapy focuses not only on recognizing what is being done and being built, but also on the ineffectiveness of useless patterns that do not work. Changing one of the couples leads to other people in the system to change (Arianfar, Rasouli, 2019).

This method in addition its short history, it is used by a large group of counselors and mental health professionals around the world. Studies have also shown the positive effects of this method on a group of clients. Numerous studies have shown the effectiveness of this therapy in marital problems (Mohammadyari, Hosseinian, 2018).

Johnson and Li Bao (2000) was founded that solution-focused couple's therapy improves couple relationships. Another study by Stewart (2011) presented as a pilot study of short-term solution-focused couple's therapy for couples showed that short-term solution-focused couple's therapy in increasing relationship satisfaction, communication skills and individual functions of couples it is affect. In Iran, Davernia, Zahrakar and Nazari (2015) founded that the effect of solution-focused couple's therapy on reducing the dimensions of marital burnout in women (Arianfar, Rasouli, 2019).

Solution-focused couple's therapy begins with optimistic hypotheses. People are capable and healthy. They have the ability to create good solutions to improve their lives and live happily based on it. In this approach, people do not resist change. They really want to change, and it is enough to simply shift their focus from the deteriorating situation to the work that is currently doing so. Discovering and harnessing the potential of clients is the ultimate goal of solution-focused couple's therapy. Solution-focused couple's therapy focuses on what clients want to achieve, rather than focusing on the problem. The solution-focused couple's therapy does not focus on the past, but instead focuses on the present and the future. During the solution-focused couple's therapy process, the therapist encourages clients to set structures or goals for themselves in order to move towards their desired future (Mahmoudi, Sanaei, Nazari, Davarnia, Bakhtiari Saeed, Shakermi, 2015).

Short-term solution-focused couple's therapy is a future-focused and goal-focused approach that focuses on solutions and building scales to assess the client progress (Trepper, Dolan & McCllum, 2006). In solution-focused couple's therapy a problem is conceptualized as an exception to the problem. If the exceptions are strengthened and

identified, then the solution to the problem can be brought effectively and efficiently (De castro & Guterman, 2008). In this therapy, it is assumed that clients are able to identify their best personal goals. Research shows that this approach can have good results even in emergencies. The short-term solution-focused couple's therapy approach does not pathologize clients, but rather treats them as a person with a problem (Kok_mun, Sejal & Lan, 2012).

Zhang et al. (2018) examine solution-focused couple's therapy to reduce anxiety among parents of pediatric cancer patients in China, the results suggest that solution-focused couple's therapy is a consistent, culturally consistent and promising measure to reduce anxiety among Chinese parents of children He has cancer. Moreover experiments are required to obtain more definitive results. Short-term solution-focused couple's therapy may be useful for increasing the vital support systems of parents of cancer patients. So, this therapy may be potentially effective for increasing the health of children during cancer therapy and recovery.

Since the basis of solution-focused couple's therapy is the idea that change is constant and inevitable. Therefore, in counseling and therapy instead of addressing the impossible, something that is possible and changeable is emphasized. This model emphasizes taking small steps to start change. Small changes pave the way for bigger changes. Also, in this type of counseling, people are attempted to use their abilities and capabilities to face problems instead of facing the problem and drowning in it (Sharifzadeh, Bolboli Haghghi Keramat, Goli, Mottaqi, 2018). So, considering the emphasis on small changes to start the change in this study, we want to know "whether solution-focused couple's therapy is effective in couple's function referring to counseling centers?"

II. Methodology

Since this research seeks to investigate the effect of solution-focused couple's therapy on family function. Study population consisted of couples referring to counseling centers. The research is of an applied type. The research method is quasi-experimental and a pre-test-post-test design with a control group is used. The samples size was 60 people (30 couples), of which 15 couples were randomly selected as experimental groups and 15 couples in control group. The research design is a quasi-experimental field. Before starting the treatment, both groups will be tested with a family function questionnaire and then the experimental group participated in solution-focused couple's therapy sessions. At the end of the training period (ten one and a half hour sessions), couples with a family function questionnaire retested. They were retested and at the end, due to the normal distribution of data and the homogeneity of variance of variables, from multivariate regression test in "SPSS" software environment, their function changes were examined.

2-1 Research instruments

2-1-1 McMaster Family Assessment Device Scale (Family Assessment)

The McMaster Family Assessment Device Scale was developed in 1983 by Epstein, Baldwin, and Bishab and has 60 questions and seven dimensions entitled problem solving, communication, roles, emotional response,

emotional integration, behavior control, and general function, which evaluate the family function. This questionnaire has 93% accuracy and good validity (Sanaei, 2000; Zadeh Mohammad and Malek Khosravi, 2006).

In the study, the reliability coefficients of the family function questionnaire were obtained by Cronbach's alpha method, which is 0.97 for the total scale which show the optimal reliability coefficients of the questionnaire.

2-2 Ethical considerations

While the members voluntarily participated in the training groups, in accordance with the principle of confidentiality, the right to freedom or non-freedom to participate in research and the right of anonymity of the participants were observed.

III. Results

Table 1: Results of Kolmogorov-Smirnov test on the hypothesis of normal distribution of inefficiency scores of family function

Normal distribution of scores	Examination group	Kolmogorov-Smirnov			Control group	Kolmogorov-Smirnov		
		Statistics	Df	P		Statistics	Df	P
Family function		0.146	15	0.200		0.210	15	0.074

According to table 1, the null hypothesis for the normality of the distribution of scores between the two groups in the inefficiency of family function variable is confirmed. That is, the hypothesis of normal distribution of scores in the pretest and in both experimental and control groups was confirmed.

Table 2: Results of one-way analysis of covariance in MANCOVA text on mean pre- and post-test scores of inefficiency of family function in experimental and control groups

Variable	Source of changes	Total squares	Degrees of freedom	Mean of squares	F	Significance Level (p)	Eta Squared	Statistical power	
Family function	Pre-test	4746.91	1	4746.91	56.30	0.0001	0.58	1.00	
	Group	29103.15	2	14551.57	172.59	0.0001	0.86	1.00	
	Error	3372.47	40	84.31					

According to table 2, according to pre-test control, there was a significant difference between the couples in experimental and control group in terms of function ($p < 0.0001$ and $F = 172.59$). The statistical power is equal to 1.00, in other words, there was no possibility of the second type of error.

Table 3: The results of Bonferroni post hoc test between the mean scores of pre- and post-test of inefficiency of family function in experimental and control groups

Groups		Mean	Solution-focused couple's therapy	Control
1	Solution-focused couple's therapy	128.37		* (0.0001p=)
2	Control	180.13		

According to table 3, there is a significant difference between the mean post- test scores of inefficiency of family function among couples in the experiment and control group ($p = 0.0001$). Therefore, the hypothesis is confirmed. In other words, solution-focused couple's therapy due to the mean score of inefficiency of family function of the couples in the experimental group compared to the mean of the control group, it showed reduction in the inefficiency of family function of the experimental group.

IV. Conclusion

The study results reveals that the level of family function of the experimental group compared to the control group has increased compared to the pre-test and in general show the success of solution-focused couple's therapy in well-being and function of couples. It is consistent with the studies carried by Krabi, Farjamfar, Mortazavi, Nazari, Goli, (2019) with the aim of determining the effect of solution-focused couple's therapy on pregnant women's concerns and the results show that in variance analysis with repeated measurements have shown that pregnant women 's concerns about childbirth and fetal health, maternal health and family relationships, after the intervention and two months after, in the experiment group decreased significantly compared to the control, but in the field of economic issues and social counseling has not helped much. So, the findings show that solution-focused couple's therapy is an effective method to reduce the concerns of pregnant women about the health of the fetus and mother and family relationships and childbirth and can be used in addition to pregnancy care.

So, in this study participants' training sessions on function to have a pleasurable life, the role of focus on goal, focus on problem, focus on solution, focus on exception, choice or spontaneity, each solution is unique and making small changes to big changes was emphasized and on the other hand with the problems of life in the group and with similar people and receiving support and encouragement from each other in the process of coping with life problems and receiving encouragement from each other brought positive effects for the participants. In fact, being in the group and receiving attention and empathy from members who are sympathetic and similar to each other and the safe environment of the group because the person feel that he has been noticed and understood. Moreover, the safe environment of the group provided the conditions for individuals to function, and at the same time, the therapist was able to observe objectively and concretely how the participants were functioning and, if necessary, therapist provide proper feedback to them.

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