

“I AM ALSO ALLOWED TO BE TIRED”: A CASE STUDY OF THE PERSON-CENTERED APPROACH IN THE FIRST DAUGHTER WHO FEELS BURDENED BY HER PARENTS' EXPECTATIONS

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Abstract

This study aims to describe the psychological dynamics and changes in emotion regulation of a first-born adolescent girl who feels burdened by parental expectations through a Person-Centered approach. The research employed a qualitative single case study design. The participant was an eighth-grade female student experiencing pressure to remain strong and serve as a role model for her siblings. Data were collected through four individual counseling sessions using semi-structured counseling, observation, and anecdotal records, and analyzed using Miles and Huberman's interactive model. Findings indicate that initially the participant suppressed her emotions to maintain a strong self-image. Throughout the counseling process, she gradually developed awareness of her emotional needs and shifted toward more open self-acceptance. The changes occurred gradually and remained influenced by ongoing family dynamics.

Keywords: Person-Centered Counseling, Emotional Regulation, Adolescent Mental Health.

Abstrak

Penelitian ini bertujuan mendeskripsikan dinamika psikologis dan perubahan regulasi emosi pada anak pertama perempuan yang merasa terbebani ekspektasi orang tua melalui pendekatan Person-Centered. Penelitian menggunakan metode kualitatif dengan desain studi kasus tunggal. Subjek adalah siswi kelas VIII yang mengalami tekanan untuk selalu kuat dan menjadi contoh bagi adik-adiknya. Data dikumpulkan melalui empat sesi konseling individual dengan teknik wawancara semi-terstruktur, observasi, dan catatan anekdot, kemudian dianalisis menggunakan model interaktif Miles dan Huberman. Hasil menunjukkan bahwa pada tahap awal subjek cenderung menekan emosinya demi mempertahankan citra diri sebagai anak yang kuat. Seiring proses konseling, subjek mulai menyadari kebutuhan emosionalnya dan menunjukkan pergeseran menuju penerimaan diri yang lebih terbuka. Perubahan berlangsung secara bertahap dan tetap dipengaruhi oleh dinamika keluarga yang masih berlangsung.

Kata kunci: Konseling Berpusat pada Klien, Regulasi Emosi, Kesehatan Mental Remaja.

INTRODUCTION

The characteristics and traits of a child can be influenced by their birth order in the family. Even though two children are raised by the same parents, differences in birth order can still lead to different psychological dynamics (Untariana & Sugito, 2022). The first child or eldest child often has the initial experience of being the only child before the arrival of

a sibling, so they receive attention, demands, and expectations from their parents earlier. As the family grows, this role can change to one of being a role model, more independent, and more responsible than their siblings. This condition often leads to psychological pressure, especially when the responsibilities given are felt to exceed the child's emotional readiness (Budi & Hasibuan, 2025; Sengkey et al., 2025).

The pressure arising from parental expectations can affect the emotional well-being of adolescents. The perception of high expectations is known to be associated with increased stress and decreased self-esteem when basic psychological needs are not met (Zhou et al., 2025). In addition, parental academic expectations can also affect adolescent happiness through the role of self-efficacy and a sense of connection with their social environment (Zhang & Yang, 2025). In the family context, parents' emotional responses and parenting styles also play a role in shaping adolescents' emotional regulation (Guo et al., 2024; Meuronen et al., 2024). Warm and supportive relationships tend to help adolescents develop more adaptive emotion regulation strategies, while less empathetic or overly controlling relationships can increase vulnerability to internalization problems (Tian & Zhang, 2025; Wilson et al., 2024).

Adolescents who are under constant role pressure may experience confusion in understanding and expressing their emotions. One response that arises is the tendency to suppress or hide feelings as a form of self-adjustment to environmental demands. Qualitative research shows that emotional distress in adolescents is often related to relational experiences within the family and the lack of a safe space to express feelings openly (O'Neill et al., 2023). This condition highlights the importance of interventions that provide opportunities for adolescents to explore their subjective experiences safely and without judgment. This shows that individuals need a safe relational space to understand, accept, and process their emotional experiences without fear of judgment. A supportive space is important so that the role pressures that have been suppressed can be understood more consciously and integrated into the individual's self-concept. The Person-Centered approach proposed by Rogers (1957) views individuals as having a tendency toward self-actualization that can develop when they are in empathetic, unconditionally accepting, and authentic relationships. In the context of counseling, a safe and non-judgmental relationship allows the client to explore previously suppressed emotional experiences.

Thus, this approach is relevant for understanding the process of self-awareness and emotional regulation in individuals experiencing role pressure within the family. Although various studies have discussed parental expectations, adolescent emotional regulation, and parenting dynamics in general, studies that specifically focus on the experiences of first-born daughters in facing family expectations are still relatively limited, especially in the context of in-depth exploration of the dynamics of their emotional regulation. Furthermore, there are not many studies that describe in depth how the dynamics of emotional regulation in firstborn daughters change through the Person-Centered process in a case study design. Therefore, this study focuses on describing

the psychological dynamics and changes in emotional regulation mechanisms in firstborn daughters who experience family expectation pressure through a Person-Centered approach in a case study framework.

METHOD

This study uses a qualitative method that focuses on a single case study. The researcher aims to focus on exploring the emotional experiences of the counselee who feels burdened by her parents' expectations that she become a role model for her younger siblings as the first child in the family. A single case study is a research method that can realize practice in accordance with theory, as well as delve into the psychological changes that occur in the counselee during counseling sessions from the beginning to the end of the meeting (Râbu & Binder, 2025). The qualitative single case study method was chosen as the research method for this study so that the researcher could observe the emotions, thoughts, and processes experienced by the subject in depth, and not only observe the final results but also explore the emotional experiences of the counselee during the counseling sessions. The use of the Person-Centered Therapy approach in case studies is also recommended in research (Febrianti et al., 2025), which emphasizes that deepening the process of emotional regulation is more effective through individual counseling techniques that allow the relationship between the counselor and the client to develop naturally and empathetically.

The client or subject in this study was an eighth-grade student who was the first daughter of three siblings. The subject was selected purposively, as she was considered to meet the criteria for the study, namely experiencing emotional pressure caused by the demands and responsibilities of being the first child of her parents. This study was conducted in the guidance counseling room, specifically the counseling room, which was quiet and comfortable without interference from other people, so that the subject or client could feel comfortable and free to express her emotions. The data collection technique used in this study was a semi-structured interview. The questions were flexible and developed according to the client's responses at each meeting, while adhering to the Person Centered approach, which focuses on the client and builds an atmosphere of empathy, unconditional acceptance, and freedom for the client. Research data was collected through counseling sessions, observations, and anecdotal notes made by the counselor. The counseling sessions were conducted over four meetings, each lasting 45-60 minutes, with the aim of exploring the experiences of the counseling subjects within their family environment.

Observations were used to note changes in facial expressions, body language, and mood during counseling sessions. Anecdotal notes contained anything that happened during the counseling sessions regarding the dynamics that occurred in each session, including when the subject began to recognize their emotions and accept the emotions they had been feeling all along. The data collection techniques in the study (Cooper et al., 2025; Fadholi & Mauliddia, 2023; Râbu & Binder, 2025) also used the same data collection methods as this study. In their studies, they proved that multiple counseling sessions and repeated observations could achieve the goal of deeply understanding the client's emotions.

Before the counseling sessions began, the researcher first obtained verbal consent from the guidance counselor who handled the counselee while at school. The counselee was also given an explanation regarding the purpose of this counseling and asked verbally to participate in the counseling process. The identity of the counselee was kept confidential by using initials.

The name of the school and the location of the research were not mentioned in order to maintain the confidentiality of those involved. The data analysis technique used in this study was Miles & Huberman's interactive analysis, which consists of three stages, namely data reduction, data presentation, and conclusion drawing (Sofwatillah, Risnita, M. Syahrani Jailani, 2024). Data reduction was carried out by rewriting the results of the counseling sessions verbatim. After that, the results of the counseling sessions were read repeatedly and the clients' statements related to the research focus were examined. Statements such as "must be strong," "must not be weak," "must be an example for younger siblings," "hold back tears," "don't want to appear weak," and "this is my first time living" were included in the research focus, namely the experience of being the first child who feels burdened by parental expectations.

Then, the reduced or simplified data was written in the form of thematic narrative descriptions. The presentation was carried out by grouping several verbatim quotes from the counseling sessions into several meetings, so that the relationship between the raw data and the analysis could be seen. The final stage carried out by the researcher was to analyze and interpret several groupings or data found from the counseling sessions. From the counseling quotes or observations during counseling, there were certain meanings that could be interpreted. With this, the researcher grouped these things and interpreted them.

The counseling stages used in this study were based on Carl Rogers' Person-Centered Therapy theory, which believes that emotional change in the client can occur if the client is in a safe, comfortable, and empathetic environment and is accepted unconditionally by the counselor. Research (Kurniawati, 2024) shows that counseling stages based on empathy and unconditional acceptance enable the counselee to accept themselves and improve emotional communication. This approach provides a safe and comfortable place for the counselee to express their emotions, accept themselves, and find meaning in their life experiences, which they themselves discover and realize. The validity of the data in this study was maintained through triangulation techniques by comparing verbal and nonverbal data. The researchers also conducted re-clarification, paraphrasing, and re-recalling discussions from previous meetings to ensure consistency with the meanings obtained.

RESULTS AND DISCUSSION

From the beginning, SH has shown that she is the first child, which is deeply ingrained in her identity. She does not just hold this role as a label or *title*, but she feels that being the first child is a role full of responsibility and an obligation that she must accept and live

with every day. In one session, SH said, “I am the first child, ma'am, so I have to be strong and set an example for my younger siblings. I can't cry; my father says crying is useless.” This statement illustrates how SH's family has created a rigid standard for a “first child.” As a result, SH formed an image of herself as a person who must always be strong according to the standards set by her family, and her space to feel and express her emotions was limited.

The role she held made her judge herself as good or bad based on whether she could meet her family's expectations or not. When she felt sad or angry, she felt guilty because those emotions did not conform to the rigid standards set by her family. The pressure SH felt came not only from external demands (family, society) but also from internal conflict (within herself). This internal conflict arose because of the feelings she actually had, namely, the exhaustion of always having to conform to her family's standards of always being strong.

The internal conflict that SH feels gives rise to psychological pressures such as the fear of being considered weak, anxiety when unable to meet family expectations, and constant mental fatigue. In this condition, counseling at the initial stage is only an exploration phase and no changes are yet apparent, but SH is beginning to be encouraged to recognize the source of the pressure she has been feeling. The role pressure experienced by SH formed a pattern of emotional regulation that tended to be repressive or suppressing and bottling up her feelings. SH was accustomed to holding back her tears and saying “it's okay” even though she actually felt mentally upset and tired. SH's statements such as “I can't cry, I'm fine, Mom, but I'm upset that my parents gave me this responsibility, when I also need someone to look up to, because this is my first time living on my own,” reveal unfulfilled emotional needs.

SH maintains her image as a strong child by always saying “it's okay” for every emotion she feels. There is an emotion that is not acknowledged, but suppressed so as not to step out of the role of the first child that she has played for a long time. The emotions that SH suppresses do not just disappear. This can be seen from nonverbal responses such as hitting pillows/feet or rejecting touch from the counselor. These responses show that the suppressed emotions remain and are looking for an outlet.

At this stage, SH's emotion regulation mechanism is still defensive or there is still rejection as a form of self-protection. SH still maintains her role as a strong person by suppressing the emotions she feels. It has not directly changed this pattern, but it has begun to open up a space for reflection or an opportunity for SH to realize the habits she has been doing all this time to suppress her emotions. With the opportunity to feel safe and comfortable to talk, SH slowly began to realize that feelings of tiredness and anger were part of her personal feelings and needs that she had suppressed in order to maintain her role.

As the counseling process progressed, changes in SH's psychological dynamics began to appear. The environment that made her feel safe and comfortable to express her feelings made SH slowly feel safe to reveal her experiences and feelings. She also began to

acknowledge that she was not always strong and had emotional needs like other people. These feelings were expressed in SH's statement, "I am upset that my parents gave me this responsibility, when I also need someone to look up to, because this is my first time living on my own." At one of the meetings, SH said, "It's okay for me to cry, ma'am. It's okay to cry and be angry. I accept myself the way I am." This statement shows a change in the way SH interprets the emotions she feels. Previously, she saw crying as a weakness that she should not feel, but now she begins to understand that the feelings she experiences are normal for her to feel, just like other humans.

However, the change did not happen instantly and did not completely eliminate the role she felt she had to play. In several meetings, SH still showed her habit of holding back her emotions when she was outside. This shows that SH's psychological change did not happen immediately and was still influenced by her social relationships and family situation. Overall, SH's psychological dynamics show a gradual process of transformation. Emotional regulation, which was initially dominated by suppression, slowly shifted towards open acceptance of her emotional experiences. SH began to allow herself to feel her feelings without having to fully fulfill the role she had as the first child in her family. The changes that occurred appear to be related to the experience of being in a safe counseling space, but this is still influenced by ongoing family dynamics. Thus, it can be interpreted that SH changed not solely because of the counseling sessions, but because the counseling interacted with her life experiences, family relationships, and the situations she still faces on a daily basis.

CONCLUSION

Based on the analysis results, SH showed changes in her psychological dynamics and emotional regulation mechanisms in response to the pressure of expectations she felt as the first child. In the early stages, emotional regulation was dominated by suppression and efforts to maintain her self-image as the first child who must always be strong. As the counseling process progressed, SH began to show acceptance of her emotional experiences and was able to give herself space to feel without completely erasing the role she played. These changes took place gradually and remained influenced by the ongoing family dynamics. Thus, the person-centered approach in this study appears to provide a supportive space for self-exploration and acceptance in the context of the pressure of being the eldest child, even though the changes that occurred were neither instantaneous nor comprehensive.

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