INTRODUCTION:

The enuresis cases are the most prevailed cases of children disturbance this is become it appears with those who have emotional problem. It also appears with others who have physical disturbances.

Many people think that the problem of children enuresis are mostly related to physical reasons. These cases are just 5% of the whole enuresis and the other 95% of the cases are caused by psychological reason.

The psychological reasons of enuresis are:

- * A child may hate his parents.
- * Parents may neglect the control of bed-wetting.
- * The child's development.
- * Parental problems.
- * Children's fears.

Accordingly the methods of therapy are also many the enuresis synptoms can lead to a sense of enferiority, lack of self confidence lack of safety, which in turn appear in being unsociable, and school retardation the treatment of this phenomenon needsr a study of factors, family environment, attitudes and parental action concerning the control of bed-wetting.

Study significance:

The study deals with the field of applied psychotherapy to show how effective is the shaping therapy in children enuresis cases. It also uses clinical tools to diagnose illness and know the reasons behinde. So it concentrates on family environment as responsible for this problem.

Previous studies:

The studies that deals with children enuresis can be classified into three types:

- 1- Studies dealing with psychotherapy of enursis and some related psychological and socialogical aspects.
- 2- Studies dealing with behavior therapy of enuresis.
- 3- Studies dealing with shaping therapy of enuresis.

Study sample:

The study used a sample of 6-12 years old children. They are all first stage-elementary education pupils the researcher examined (10) children (6 females and 4 males) with the hep of the school social supervisor.

The sample of mathers were contacted with (10 mothers) to apply the research tools of pre-and post therapy. The sample subjects were divided into two groups:

- 1- Experimental group: 5 children (3 females, and 2 males).
- 2- Control group: 5 children (3 females and 2 males).

Study tools:

- 1- Interview checklist.
- 2- Case study list.
- 3- Parenting stress scale.
- 4- C.A.T. test.
- 5- Shaping therapy program.

Study results:

There is significant difference between the mean scores of experimental group of Mothers, according to the parenting stress scale after treatment in favour of the experimental group.

- 2- There is significant difference between the mean scores of experimental group of Mothers and those of the control group after two months (follow-up) in favour of the experimental group.
- 3- There is significant difference between the mean scores of the experimental group of children and those of the controle group in the number of enuresis after treatment, in favour of the experimental group.
- 4- There is significant difference between the mean scores of experimental group of children and those of the control group in the number in favour of the experimental group.

The researcher interpreted the results in the light of the theroitical fram work and accordingly, she suggested some recommendation.