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PARENTIFICATION AND PSYCHOLOGICAL RESILIENCE – THE EXAMPLE OF MATURITY LEVELS OF DEFENSE MECHANISMS

Abstract

In this paper, we would like to discuss the phenomenon of parentification as a specific form of relation inside a family, a dysfunctional relation. The shortest definition of parentification states that it takes place when a child enters the role of a parent and takes responsibility for the living situation and emotional state of the rest of the family (Hooper, 2007). We think that burdening children with the overwhelming responsibility of taking care of their parents or siblings has negative consequences in their adult lives. One of such consequences is the influence on psychological resilience through creating a certain defense structure. Defense mechanisms have an important role in coping with stress or overcoming life crises. Thanks to mature defense mechanisms, it is possible to successfully fulfill the tasks ascribed to particular development stages, achieving high levels of self-actualization at every stage. After analyzing the phenomenon of parentification, we have observed that people who experienced parentification in their childhood are characterized by immature defense mechanisms in their adult lives, which makes them less resistant to stress and causes them not to cope with difficult situations very well. In this article, we would like to share our reflections on the defense systems of people experiencing parentification to various extents and scopes.

Key words: parentification, family system, resilience, defense mechanisms

Parentyfikacja a odporność psychiczna – na przykładzie stopnia dojrzałości
mechanizmów obronnych

Streszczenie

Zjawisko parentyfikacji to specyficzna forma relacji wewnątrzrodzinnej – relacji, która ma charakter dysfunkcyjny. Najkrótsza definicja parentyfikacji mówi, że ma ona miejsce wtedy, gdy dziecko wchodzi w rolę rodzica, przyjmując odpowiedzialność za

sytuację bytową i/lub emocjonalną pozostałych członków rodziny (Hooper, 2007). To odwrócenie ról, obciążanie dziecka nadmierną opieką nad rodzicami i/lub rodzeństwem ma negatywne konsekwencje dla jego rozwoju i funkcjonowania w dorosłym życiu. Jedną z takich konsekwencji jest wpływ na odporność psychiczną poprzez wykształcenie charakterystycznej struktury obronnej. Zarówno obserwacje kliniczne, jak i wyniki badań empirycznych wskazują na to, że osoby parentyfikowane w dzieciństwie w życiu dorosłym charakteryzują się niedojrzałymi mechanizmami obronnymi, przez co są mniej odporne na stres i emocjonalnie gorzej radzą sobie w sytuacjach trudnych.

Słowa kluczowe: parentyfikacja, system rodzinny, resilience, mechanizmy obronne

Definition of Parentification

In the subject literature, there are several definitions of parentification, or the so called “role inversion” in the family. Mahler and Rabinovich (1956), researchers on the subject, noticed that there appears an inversion of roles between children and parents; the child becomes the confidant or a mediator in parents’ conflicts. A great contribution to the understanding of family and processes occurring within it was brought by the systems theory, which also enabled to understand parentification better. From the system perspective, it can be said that parentification helps to maintain the balance within a family distorted by conflicts between spouses or by developmental deficits and emotional problems of one of them. Support given to one or both parents by the child can be perceived as a kind of triangulation. The tension between spouses creates a necessity to form an alliance between one of them and the child, the result of which is reducing the tension created in the family system. This way, the balance in the family is sustained. A substantial contribution into the parentification research was brought by the creator of the structural therapy, Minuchin (1974). While working with impoverished families, he noticed the tendency to burden children with household chores and duties, referring to them as ‘parental children.’ After some time he observed, however, that the phenomenon was not necessarily connected to poverty, as it also occurred in families with better financial status. When describing family systems, Minuchin (1967) focused mainly on the types of boundaries in the families, both those separating them from the outside world as well as those within a given system – the so called boundaries between subsystems. In line with his theory, Minuchin treated parentification as the crossing of boundaries between subsystems. Children are “invited” to the “parents subsystem,” simultaneously losing their place in the “children subsystem.” It leads to a loss of balance in the hierarchy and power in the family, which results in distorting the correct development of children. The abovementioned triangulation is nothing else than crossing boundaries in the parents – children subsystem, taking a child out of a system he or she belongs in may have various consequences. The occurrence of blurred boundaries in the family system causes loading children too much with duties of adults – those

connected with keeping a house, taking care of younger siblings, providing for the family financially, as well as those connected with the emotional support that the parents expect.

Other expressions connected to parentification are also present in the subject literature, for example the term ‘spousification’ introduced by Sroufe and Ward (1980). The child replaces the absent (physically or emotionally) parent. The role of the child is to provide support for the remaining parent, caring for their needs, not only those resulting from an overload of everyday duties, but also unfulfilled emotional needs. In such family systems, the absence of one of the spouses equals the end of childhood. The child psychologist Elkind (1981) described the phenomenon of the so called ‘hurried children.’ Their childhood is not accepted by the family system; they have to grow up quickly to assume the role of a therapist or a confidant in the family. Weiss (1979, qtd in: Jurkovic, 1997), a sociologist, referred to such children as ‘junior partners.’ He also noticed that it is more common for children of single parents to assume this role – not only single mothers, but also fathers. The findings of the researchers described above regard the functioning of the families where a violation of children’s rights occurs in terms of their free development according to their life cycle. Despite using different terms to describe such situation in a child’s life, there is a common ground or them – the inversion of roles – parentification. The authors of the term are believed to be Boszormenyi-Nagy and Spark (1973). These researchers broadened the understanding of the definition of parentification, assuming it does not have to have only negative aspects. They stated that the phenomenon occurs in all family systems and does not necessarily mean children development pathology. On the contrary, it can teach them empathy, caring for others, responsibility, assuming the role of a caregiver. Chase (1999) also differentiated between “healthy” and “pathological” parentification, stressing the importance of the socio-cultural and historical context in which a given family lives, which generates certain expectations and demands from children. The healthy parentification helps to develop positive features, such as: responsibility, resourcefulness, and feeling of competence. The pathological parentification, on the other hand, is connected with focusing on the family’s needs while neglecting the child’s needs. However, the majority of researchers, including the contemporary researcher of the subject, Hooper (2012), refer to parentification as something negative, emphasizing in her definition the aspects of crossing boundaries and distorting the family hierarchy – the children are loaded with excessive responsibility for their parents; they are not supported or rewarded. The most exhaustive description of parentification so far has been created by Jurkovic (1997). He noticed the destructiveness of parents’ demands expecting from children to fulfill only parents’ needs, referring to those needs as possessive, dependent and sexual. The destructiveness of this parentification model is visible in the distortion of the proper bond between a parent and a child, where the process of giving and fulfilling needs works only one way. Parentification described this way indicates child abuse in the emotional, physical and

psychological sphere. Hooper's opinion is similar; she claims that the idea of parentification is to sacrifice all one's developmental needs typical for a given age to fulfill emotional and instrumental needs of the family (Hooper, 2009).

Types and Consequences of Parentification

Based on the abovementioned definitions, various types of parentification can be described. Jurkovic (1997) divides it into two categories: emotional and instrumental. Instrumental (existential) parentification is when a child takes care of the proper functioning of the parents (family) by taking responsibility for various household duties, preparing meals, taking care of younger (or older!) siblings, or sometimes taking care of family finances. Emotional parentification is expressed through fulfilling the emotional needs of parents, which can be manifested in taking the role of a family therapist, crisis intervener, or mediator. It is connected with the need to pay attention to the parent's moods, focusing on how they feel. To make the differentiation between healthy socialization and teaching the child empathy and the destructive parentification more visible, Jurkovic introduced nine dimensions based on which pathological parentification can be recognized. Let us shortly characterize those dimensions; they include overtness, type of role assignments, extent of responsibility, object of caretaking, age appropriateness, internalization, family boundaries, social legitimacy and ethicality. In each of the dimensions, Jurkovic pays attention to the scope of responsibility that the child has and who the child is responsible for (parent, parents, siblings). Other significant elements are: the age of the child at which the process began is also significant, the sex of the parent and whether or not it is the same sex as the child's. The socio-historical context is also an important aspect, which indicates how typical the expectations for the children are for the time and place they live in and how different they are from their peers.'

Another type of parentification differentiated by Jurkovic is adaptive parentification, which leaves some extent of freedom to the child. The child is not left without support in this situation, and the parentification itself can be connected with temporary difficulties occurring in the family system. Overall lack of parentification occurs when the child is not burdened with duties and tasks exceeding his or her developmental skills. Jurkovic also mentions the opposite of the destructive parentification, which he refers to as infantilization. Parents cause their children to regress by demanding from them too little for their age, they are overprotective and help them out with fulfilling their needs. Thus, we can observe parentification on the behavioral level (instrumental parentification), emotional level or both – emotional-behavioral.

Having defined and categorized the phenomenon of parentification, we can consider the consequences of it in terms of a child's development. Research led in this field indicates in vast majority that parentification has negative consequences

on the correct functioning of an individual in adult life. The most serious effects include those connected with solving development crises and occurrences of mental disorder symptoms (Barnett, Parker, 1998; Earley, Cushway, 2002; Garbarino, 1977; Jurkovic, 2001). Destructiveness of the parentification mechanism above all impedes the ability to create a satisfactory relationship with partners and causes the risk of transferring the model on one's children. Hence, there is a risk of transmitting the phenomenon on next generations and duplicating certain relation patterns, repeating anachronistic attitudes, demands and expectations. It occurs quite often, especially in family systems that experienced severe traumas in the past (Wasilewska, 2012). Chase's research has shown that groups with the greatest risk of parentification are the children of alcoholics, children raised by a single parent, by a mentally ill parent or living in a family with a permanent conflict between parents (Chase, 1999).

That is why we think that the most harmful form of parentification is the one reinforced in a bigger family system, based on dysfunctional legends and myths present in the family for generations (it makes sense to analyze the phenomenon from three generations back). Serious disorders occur then in the process of correct development of a child, both in the dysfunctional patterns of attachment as well as, in the later stages, the inability to complete the tasks from the adolescence period (shaping mature identity) and early adulthood (creating an intimate bond with another person). It happens because parentification disrupts the correct separation and individuation process. Observations and researches conducted by the authors allow to say that the most severe effects of parentification are visible from adolescence, transforming with time into bigger and bigger dysfunction, up to the occurrence of mental/emotional symptoms. World research shows that parentification is tightly connected with low self-esteem in adolescents (Wells, Glickauf-Hughes, Jones, 1999), worse social functioning, low school achievements (Jurkovic, 1997), personality and attachment disorders (Jones, Wells, 1996), dissociative disorders (Wells, Jones, 1998). Other research (Burton, 2007) confirms that children burdened with the role of a caregiver mature too quickly, achieving illusory independence. The effect of the premature adulthood is mental immaturity, often followed by the use of psychoactive substances, or early sexual initiation (Galambos, Tilton-Weaver, 2000). When entering adulthood, the 'parentified child' will have difficulties with creating a correct relation with the partner, because of the anomalous matrix of relation with the parent. By continuing these behavioral patterns, the parentified adult will show the so called parentification-style caregiving. Bourass's (2010) research has shown that such people did not develop secure attachment to their partner – the more care and attention they gave their partner, the lower was their relationship satisfaction; high level of compulsive caring for the partner equaled major depression. Jurkovic (1997) in his work also mentions the influence of parentification on certain personality attributes, which can be referred to as co-dependency. According to some researchers (Olson, Gariti, 1993), it is the effect of the parentification process. Cermak (1989) differentiated features of

co-dependent traits from co-dependent personality disorders; the latter ones have the following characteristics:

- “1. Self-esteem related to ongoing efforts to control oneself and others despite adverse consequences.
2. Taking responsibility for others’ needs at the expense of one’s own.
3. Boundary problems and anxiety associated with intimacy and separation.
4. Enmeshment with substance-dependent, impulse-disordered, and personality-disordered persons.
5. ... Excessive use of denial, emotional constriction, depression, hypervigilance, compulsions, anxiety, substance abuse, ... stress-related medical illness” (Jurkovic, 1997, p. 63).

Psychological Resilience as Effect of Parentification

However, some of the researchers think that the process of parentification can bring positive effects for children in their future life. Competencies developed thanks to parentification include i.a.: problem-solving skills (McMahon, Luthar, 2007, in: Hooper, 2012), coping in everyday life (Stein et al., 2007, in: Hooper, 2012), personal growth and social skills development (Champion et al., 2009; Kuperminc et al., 2009, qtd in: Hooper, 2012). Hooper’s research (2008/2010) has shown visible relation between the type of parentification and its possible effects. Namely, emotional parentification involves the occurrence of negative consequences much more often than the instrumental type. The latter one can help to develop interpersonal competence (Thirkield, 2002).

As we mentioned before, parentification helps maintaining family homeostasis, joins the family system together, sometimes bringing benefits to the underage caregiver – the feeling of being important, competent, resourceful (Boszormenyi-Nagy, Spark, 1973). In recent years, more and more research is conducted where attempts are made to prove that parentification’s effects can be twofold; apart from bringing the negative ones, parentification may develop some social skills among children (Gladstone, 2006; Hooper, 2007; Tompkins, 2007).

What is more, some researchers (DiCaccavo, 2006; Marotta, 2003) state that “when children provide parents’ and family members’ care, these experiences might promote resilience to adversity, leading to positive coping and healthy individuation or attachments” (Tompkins, 2007, p. 694).

Tompkins (2007) proved in his research that children living in families where one of the parents was severely ill had significant benefits from parentification. Similarly, Thirkild’s research (2002) has shown a positive correlation between instrumental parentification during childhood and interpersonal competence in adulthood. However, Andrews and Marotta (2005) claim that parentified children’s development can occur as a result of finding other persons, e.g. from extended family, at school or local society, with whom they manage to develop secure

attachment. The authors call such persons “secondary attachment figures” and claim that thanks to such people, the child can develop his or her competencies and resilience.

Research on resilience constitutes a separate big group of research, where resilience is defined as “an acquired, gradually internalized set of attributes that enable a person to adapt to life’s difficult circumstances” (Alvord, Grados, 2005, p. 244). Summarizing long-term research on resilience, Luthar (2006, p. 780) has proved that the most important factors on which resilience is based are relationship and secure attachment. It is the secure attachment that provides the basis for the development of proper self-esteem, the feeling of self-efficiency, but most of all, it gives the child a sense of security, which enables coping with developmental tasks that the child faces. The researchers prove that positive or negative consequences of parentification depend on the type of attachment between the parent and the child or on whether or not the child has developed secure attachment with another person outside the parents system. The questionnaire researching resilience differentiates several skills connected with resilience, including: self-awareness, social awareness, self-management, goal-directed behavior, interpersonal skills, personal responsibility, decision making, and optimistic thinking (Sikorska, 2014, p. 96). After analyzing these skills in terms of parentification, one can agree that some of them can be part of the parentified child – and in this context parentification can contribute to the development of psychological resilience. However, we think that it is the case mostly with instrumental parentification, which does not burden the child emotionally. Emotional parentification is much more threatening, although its negative consequences may depend to some extent from the parents’ reaction to the child’s commitment. If children are appreciated and rewarded for their efforts, they will see positive effects of the emotional support they give to their parents, their feeling of satisfaction and competence will grow. It does not mean that in case of too much commitment, they will not have enough resources to take care of their own needs connected with separation and individuation.

In reference to Bowen’s concept, one can quote the following:

Individuation or self-differentiation might be a result when a parentified child recognizes and builds on her or his own autonomy and competence while managing the role reversals imposed by parents. Individuation is the ability to maintain emotional objectivity during high levels of anxiety in a system, while concurrently relating to key people in the system (Bowen, 1978, p. 485).

The results of the research conducted by Hooper have shown that

... parentification might best be measured as a multifactorial variable, especially to determine whether instrumental parentification has some protective factor, while emotional parentification might be associated with increased risk... instrumental parentification

was not associated with distress, but emotional parentification was related to distress and growth (Hooper, 2009, p. 703).

Finally, it is necessary to continue the research in order to precisely specify the factors which help children grow and develop in the families where parentification is present, and those which inhibit and disrupt the correct functioning in adult life. Among those factors are defense structures shaped under the influence of both personal experiences and observing the behavior of the closest caregivers.

Defense Mechanisms and their Classification

Defense mechanisms are sometimes considered to be “the automatic psychological responses that individuals use in response to anxiety and internal or external stress and conflict” (Perry, 2014, p. 407). This military concept of defense and defense mechanisms was introduced permanently into psychological thought by Sigmund Freud to describe psychological strategies and techniques used by the ego to fight painful or difficult thoughts or ideas. In his work *The Neuro-Psychoses of Defense* from 1894, he wrote about the unconscious ways of coping with the anxiety arising from unaccepted or forbidden experiences and the urge to “protect the ego from instinctive desires” (qtd in: A. Freud, 2007, p. 50). Continuing Freud’s thoughts on impulsive threats, his daughter Anna in her book *The Ego and the Mechanisms of Defense*, published for the first time in 1936, presented various reasons why the instincts may be threatening, and thus, various reasons to defend oneself from them, including fear of the superego, fear of a real threat, and fear of the power of instincts.

The fear of the superego refers to the situation when instinctive desire attempts to reach the conscious and reach satisfaction through ego, which meets vivid protests from the superego, which considers it dangerous and does not agree to fulfill the needs connected with it. What is worth noticing, the ego does not consider the impulse to be dangerous, but in the face of imminent conflict, it submits to the higher instance of superego and begins the fight against the impulse of a drive by starting using defenses – “the ego fears the instincts, because it fears the superego” (A. Freud, 2007, p. 47).

The fear of a real threat refers to the situation when people avoid their sexual and aggressive desires from the fear of the society’s reaction. They behave like little children who, in order to avoid conflict, try not to trespass the rules imposed on them by their parents and thus avoid their anger. A child’s ego does not fight the instincts by its own will and does not use defenses or its own feelings’ sake, but for the sake of significant people – the urge of the instinct is followed by a real punishment or a threat of one – “the ego fears the instincts, because it fears the outside world” (A. Freud, 2007, p. 49).

The fear of the power of instincts results from the development of ego. As A. Freud writes, “Ego is friendly to the instincts only so long as it is itself but

little differentiated from the id” (2007, p. 50). After transferring from the primary processes to the secondary ones, from the pleasure principle to the reality principle, the ego becomes suspicious of the desires of the id, and if they become too big (with the additional pressure from the superego and outside world), the hostility for the instinct intensifies enough to create anxiety, which S. Freud described as the “fear of being overwhelmed or annihilated” (qtd in: A. Freud, 2007, p. 50). The fear of the disorganizing of ego under the influence of instincts, which occur when a sudden influx of impulse energy appears (together with the accompanying physiological changes), brings a risk of disrupting the psychological balance in the developmental crises of adolescence and menopause or andropause. It also seems to be typical for other crisis situations (potential traumas), when under the pressure of various external factors, the protective barrier of the ego can be broken.

Other causes for using defense mechanisms, according to A. Freud, may stem from the ego’s need to synthesize experiences and preserve harmony between different tendencies or to avoid conflict between opposite tendencies. The question is also about the decision on which of the impulses will be realized and which rejected as well as about a choice of a possible compromise between them. Another reason can be trying to avoid secondary problems caused by satisfying impulses, apart from guilt and punishment imposed by the outside world.

As the author adds, ego using defenses against impulses is obligated to remove the accompanying feeling, but the kind of feeling does not matter, because the ego cannot experience it fully if the feeling (regardless if pleasant or painful) accompanies the forbidden impulse (A. Freud, p. 51). However, it can happen, as it is at the early stage of development, that the ego, having nothing against the specific instinctive process, according to the pleasure principle “will welcome pleasurable affects and defend itself against painful ones” (A. Freud, 2007, p. 51). Even in the case of clearly forbidden sexual impulses and aggression, the ego is more likely to remove the feelings that create difficulties and pain, and resist the prohibitions if they are connected with positive feelings. The defense from primarily painful feelings relates to the defense from similar stimuli from the outside world. Avoiding pain is a rather primitive form of defense used by children, who have to learn to tolerate more and more unpleasant experiences resulting from frustrations connected with various needs (following the reality principle, not pleasure principle), without using defense mechanisms. Using this kind of coping strategy in adult life shows maturity of the personality structure.

So far, it has been agreed among the clinicians that some defense mechanisms are more primitive than others. Defense mechanisms referred to as immature, primary or lower-level are those which (1) show two features connected with the preverbal development phase – not achieving reality principle (which has already been mentioned) and lack of understanding of the separateness and constancy of what exists outside the self; (2) work in a global, undifferentiated way, bringing together the cognitive, affective, and behavioral aspects, and (3) refer to the ‘self – external world’ boundary. Defense mechanisms referred to as more

mature, secondary or higher-level, (1) base on the reality principle and secondary processes, (2) evoke specific transformations of thoughts, feelings, and sensory impressions, behavior or a combination of these, and (3) refer to the boundaries inside the self, i.e. the boundaries between id, ego and superego or between observant and experiencing parts of ego (McWilliams, 2009, p. 117).

According to McWilliams (2009), some defense mechanisms are ascribed with two forms – primitive (archaic) and more developed, while it is not the occurrence of the primitive forms, but lack of the more developed ones that is significant in this case. The primary defense mechanisms are not a problem on their own; the problem appears when an individual lacks secondary defense mechanisms or when those more primitive ones dominate in the adult life. Following Anna Freud's thought on dependency – the 'bridge' between the norm and pathology in the functioning of the ego – many authors assume that although defense mechanisms start functioning as healthy creative adaptive processes, at the later development stages they may become even dysfunctional. Despite the fact that classic psychoanalysis assumes that the function of defense mechanisms is to prevent bringing to the conscious unconscious desires connected with sexual drive and aggressive drive, the later psychodynamic concepts stemming from it emphasize the importance of two tasks: (1) defense from fear and strong threatening feelings or disorganizing emotions and (2) maintaining self-esteem, consistent and positive notion of the self (McWilliams, 2009). As Gabbard says:

Today, the psychodynamic evaluator would view defenses as preserving a sense of self-esteem in the face of shame and narcissistic vulnerability, ensuring a sense of safety when one feels dangerously threatened by abandonment or other perils, and insulating oneself from external danger (through denial, for example, or minimization) (Gabbard, 2011, p. 32).

Defense mechanisms influence the relations between the self and the object (Vaillant, Vaillant, 1998, qtd in: Gabbard, 2011), fulfilling an important role in managing unresolved conflicts, both with real, significant others in current situations, as well as with internal objects from the past. They are – as Gabbard (2011) emphasizes – almost always embedded in relations (interpersonal and intrapsychological) and related to specific personality types. They become an integral part of an individual coping style or even living style, and the unconscious "choice" – preference and automatic use of certain defense mechanism or a whole group of defense mechanisms depends on the interaction of factors, for example: (1) temperament, (2) types of stress experienced in early childhood, (3) defense mechanisms of the parents and other significant persons which the individual acquires through modeling and conscious teaching from their side, (4) experiencing consequences of using given defense mechanisms (McWilliams, 2009, p. 116).

Acknowledging the multifactorial character of an individual's defense system, many authors attempted to create their own classification of mechanisms included in the system. The first one to do it was Anna Freud, who collected and

organized defense mechanisms mentioned in various publications by Sigmund Freud and added two new mechanisms to the list of ten (repression, reaction formation, projection, introjection, regression, sublimation, emotional isolation, undoing, reversal, and turning against the self): identifying with the oppressor and altruistic renunciation. (The two last mechanisms seem to have an important role in the case of parentification, which will be discussed later on). Gabbard, on the other hand, isolated 26 different defense mechanisms and claimed that they form a hierarchically-constructed group – from the most immature to the most mature ones (see Gabbard, 2011, table pp. 33–35). Among the primitive defense mechanisms, the authors includes: splitting, projective identification, projection, denial, dissociation, idealization, acting out, somatization, regression, and schizoid fantasy. The higher-level defense mechanisms, or neurotic defense mechanisms, include: introjection, identification, displacement, intellectualization, isolation of affect, rationalization, sexualization, reaction formation, repression, undoing. Finally, the group of mature defense mechanisms consists of the following: humor, suppression, asceticism, altruism, anticipation, and sublimation.

This division for immature, neurotic, and mature mechanisms – despite numerous classifications using them, differences in terms of typology of defense mechanisms and lack of general agreement as to their quantity – seems to be quite a useful approach in the analysis of the functioning of people who experienced some obstacles on the way of their development and impact on their health as the effect of disrupting their development, as, for example, in the case of victims of parentification. Longitudinal research, in which it has been observed that together with the ageing of the examined persons, the immaturity and neuroticism levels of their defense mechanisms decreased while the maturity level increased. The research confirmed the thesis that the type of defense mechanisms used is connected with the age and development level (see Vaillant, 1977, 1993).

Thus, a question arises: what defense mechanisms are used by adults who experienced parentification in their childhood? Are they mechanisms equally immature as those that were available at that time or as those that their parents probably had, seeking support from their children? Or maybe surprisingly mature, since the adults closest to them expected maturity from them?

Parentification and Defense Mechanisms

The child has to take care of an adult parent, at the same time, for some reason, not being able to take care of him- or herself or their children. Based on the subject literature and results of empirical studies, it can be said that the parents who parentify their children are people who experienced some serious deprivation or trauma in their lives and because of that they are needy and are unable to fulfill their children's needs. They do not have a sense of security and cannot give it to their children; they cannot regulate their own emotions, so

they cannot help their children with learning mature strategies for coping with feelings (Schier, 2014). What is more, according to Schier, these parents often unconsciously use the mechanism of identifying with the oppressor – the cause of their trauma, wanting to avoid the pain from their own childhood. That is why they may act toward their children just like they themselves were treated, without any compassion for the real or inner child (they feel sympathy only for the child part of the oppressor) (2014, p. 75). The loyalty for one's own often idealized parents is, according to the author, an indispensable element describing people who direct their own unsatisfied needs from early childhood toward their children. In Schier's opinion, parents who parentify their children in a destructive way suffer from personality disorders in between neurosis and psychosis – borderline disorders.

It is worth mentioning that other authors, e.g. Harrus Revidi (qtd in: Schier, 2014, p. 84) point to the mental immaturity of the caregivers requiring to be taken care of. They are divided into two categories: (1) people unable to fulfill parental roles (e.g. alcoholics, drug addicts), who remain under the supervision of social care, and (2) people seemingly well-adjusted – focused on themselves, narcissistic, unable to create emotional bonds. Such parents are unable to give their children elementary sense of security or hope, confidence and trust for others (secure attachment). “Children who do not experience mother's unconditional love because she was too absorbed with her own mental states remain internally vulnerable for the rest of their lives” (Schier, 2014, p. 88). The child living in the state of chronic anxiety tension – without any real solution for the situation – will be forced to use various defense mechanisms.

One of such mechanisms, often mentioned in the literature as being closely related to parentification is dissociation. Dissociation – typical for victims of various traumas – refers to autobiographical memory disturbances (verbal, overt), but not procedural memory (non-verbal, covert). In other words, a child's mind does not remember traumatic experiences which cause intensive painful feelings, but they may survive on the somatic level and manifest as disease symptoms, also at the later stages of life. Mental suffering becomes disconnected or replaced with the “easier” to handle physical suffering. This way, the positive image of the harmful parent can be preserved, and the child's rage and the will of revenge for the lack of love, frustration of their needs, neglecting or other forms of violence – the “demonic part” – is separated and hidden in the unconscious. It allows the child to keep the position of someone who sacrifices their own good for the good of their parents and empathically fulfill others' needs, regardless of their own, altruistically renounced needs (Schier, 2014).

According to Wells and Jones (1998), as shown in their research, it is not dissociation, but splitting that is the mechanism closely connected with being parentified during childhood, used as a form of defense against the anxiety experienced in case of separation or disappointment in interpersonal relations. The split self enables an “escape” from the painful feelings related to abandonment

and disappointment when a child experiences deprivation, frustration, or insufficient reciprocation of their feelings from the parents. The fragmentation of the representation of self and others connected with it as well as the instability of the sense of self and inability to form a stable relationship are features characteristic for emotionally unstable people, often with narcissistic and masochistic personality traits (qtd in: Hooper, 2007). Avoiding confrontation with painful experiences and feelings (e.g. anger, sadness, anxiety, guilt, and shame for the experienced hurts) as well as denying them can contribute to forming a false self – a self that is free from mental suffering. Masochistic and narcissistic styles, at the base of which there is the splitting mechanism, form as ways of solving the conflict when experiencing hurt from the “good” parent (Schier, 2014).

The masochistic style is “the reaction of a child to the contact with a sadistic caregiver” (Loeb, 2004, qtd in: Schier, 2014, p. 92) and is connected with the compulsive need to take care, and at the same time inability to receive care from others. Children cope with the anger caused by the experienced frustration by directing it against themselves, claiming that it is “bad,” while the caregiver frustrating their needs is “good.” Still hoping for the parent’s love, children try hard to deserve attention and care through hard work for others and in case of lack of effects, they drown in guilt, shame, and fear, against which they will unconsciously defend themselves by the use of the mechanism referred to by A. Freud (2007) as altruistic renunciation. Parentified children have learned to have “no problems” and not to ask for help, focusing on satisfying their parents instead, because such attitude gives them close relation with them. West and Keller (1991, qtd in: Barnett, Parker, 1998) point to the fear of abandonment, which motivates the caring behavior of children for their parents. If the parents do not satisfy the needs for love, care, and warmth, or even ignore and neglect them, children learn to suppress the needs inside them and will attempt to satisfy the need of support and help by satisfying their parents’ needs.

When this compulsively caring attachment pattern (Bowlby, 1977, qtd in: Barnett, Parker, 1988) becomes transferred to the relation in the adult life (marriage, friendship, professional relations) and results in dysfunctional relationships, in which the person still does not accept (does not want, or even is unable to accept) the care he or she needs (West, Keller, 1991). Because of the fact that these persons are unable to create a partnership based on mutual exchange of goods, they choose skewed relations, in which they are the “giving” side, as it was in their childhood. One should note that if children did not experience adequate kind care and attention from their early caregivers, but were delegated to take care of others, they will not be able to take of themselves later in life. As adults, such people will not only be unable to “take” in a relation (in the sense of being self-sufficient, which already involves significant self-limitation and personality impoverishment), but sacrificing themselves for others, will be dependent on others in terms of satisfying their own needs. The addressees of their needs will most probably be – based on the vicious wheel of family pathology – their own

children, who more or less overtly will be delegated to take care of their parents, including the most basic aspects like mental and physical health.

The narcissistic style means that a child builds a false self in defense from the feelings of shame, humiliation and rage. The false self does not get hurt, identifying itself with the illusion about its own greatness, evoking admiration in the parents. Aside of the size form of narcissism involving distancing, contempt, and demanding attitude toward others, there is another type – oversensitive (reversed), which is characterized by the conviction of one's smallness, negative image of oneself, excessive self-criticism and excessive reaction to all signs of criticism from others. Oversensitive narcissism, according to Schier (2014), may occur together with the masochistic style. In both narcissistic styles (Wells, Jones, 1999, qtd in: Schier, 2014, p. 94) children fool themselves and others, sacrifice their true self to maintain the relation with the caregiver (both in the interpersonal reality and the intrapsychological world).

The impostor phenomenon is when people do not believe themselves, their abilities or skills, and are constantly afraid that they will not meet their own and others' expectations. They are not able to internalize their achievements and feel that they do not deserve recognition or success. Not only are they unable to appreciate their own achievements, but they are also afraid that other will know the "truth." Psychologists state that parentified children assuming the role of an adult do not feel competent – so they have to pretend they are "bigger" than they actually are to cope with the fear of failure and face the challenges of the situation. They feel unauthentic at the same time, or even "dishonest" (acting in their parents' clothes), so they develop low self-esteem in the adult life and a tendency to devaluate themselves. It often causes the intensification of fear of abandonment and ways of dealing with it which led either to withdrawal from social contacts or to forming them in such a way that the traumatic experiences from the situations of being used are repeated.

In both narcissism types, one can discuss the mechanism of identifying with the oppressor (A. Freud, 2007) and following the oppressor in treating oneself through a child. That is why helplessness and passiveness can be transformed into empowerment and active participation in the lives of others (similarly as in altruistic renunciation of satisfying one's own needs). What is more, children identified with features of their parents may later, in their relations with children, demonstrate immature defense structures characteristic for parentifying adults. The fact that emotional immaturity of the caregivers may be the cause of children's 'accumulated trauma' (Schier, 2014) has been confirmed in numerous researches. A question remains what chance for maturity do persons parentified during childhood have what resilience will they demonstrate in the face of challenges and dangers of adult life, or, in other words – how adaptive will their defense system turn out.

The connection between parentification and maturity of defense mechanisms has been also confirmed in the results of researches by Cebo (2012) and Gniatkowska (2014), in which the subject of the research was the relation between parentification

(intensity and type) and the maturity level of the defense mechanisms used by adults parentified in their childhood. In both empirical analyses conducted as part of M.A. theses under the supervision of Wasilewska, the results have shown that:

- The bigger the parental parentification, the bigger the intensification of immature defense mechanisms;
- Emotional parentification shows a closer relation with immature defense mechanisms than instrumental parentification;
- Parentification done by the mother shows a closer relation with immature defense mechanisms than parentification done by the father – it happens for both emotional and instrumental parentification;
- Parentification (especially emotional) shows a closer relation with immature defense mechanisms for women than men.

Moreover, a positive correlation has been discovered, statistically significant but weak, between the sense of hurt in parentified persons and the intensification of using immature defense mechanisms by them.

In conclusion, based on literature overview, clinical observations and research, it can be agreed that every type of parentification experienced during childhood, either from one or from both parents, may have adverse effects on the functioning of an individual in the adult life. It concerns especially emotional parentification done by mothers to their daughters, which is significantly connected with immature defense mechanisms in psychological structure of both the parentifying adults and the parentified children. Whether the negative effects of parentification occur or not and if so, how intense, depends probably on the constellation of multiple factors, i.a. the child's age, to what extent parentification took place, its causes, its duration, socio-cultural context, the meaning for the family life and the individual's life, subjective sense of hurt or appreciation, and experiencing abandonment or humiliation from the caregiver. One should remember that both dissociation and splitting mechanisms allow to preserve a good inner representation of the parent and to cope with the negative feelings toward the parent – most often by placing them inside oneself, directing them against one's self, body, or by projecting them on other people (see Schier, 2014). This way, even if they are badly treated, children preserve the love for their caregivers and the hope for improving relations. To endure the situation of role inversion, they put on an 'adult mask' and try to be brave through some kind of numbness or becoming similar to the parent who causes the hurt (Schier, 2014). Moreover, by taking up adult's tasks, the child often has to show mental, and often also physical, strength. Taking this into consideration and including it the narration that the parentification victims create about them and their lives helps to notice signs of personal power in the traumatic experiences, which can be used in triggering their development potential. Further research should allow to deepen the understanding of the mechanisms leading to the occurrence of parentification in a family and its health-threatening consequences, but above all, help to develop successful therapeutic methods for restructuring of defense systems for more mature ones, resilient for internal pressures and external stressors.

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