

Université de Montréal

**Mother-son interactions predictive
of high parentification self-reported by adolescent sons**

par
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Département de psychologie
Faculté des arts et des sciences

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of high participation self-reported by adolescent sons

Thèse
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Département de psychologie
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of high parentification self-reported by adolescent sons**

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Abstract

The present study defined parentification as a child's enmeshment with and overresponsibility for a parent. Sibling and household responsibilities, often considered in the literature to be components of parentification, were judged by the author to better translate a parental than a parentified role. Although informally identified in clinical settings as a problematic parent-child dynamic, parentification has remained empirically vague. The present study represented the first effort to use observations of mother-son interactions in early- and mid-adolescence to predict high parentification near the end of adolescence. Subjects were 82 mothers and their sons who had participated in two laboratory learning tasks in the context of the Montréal Longitudinal Study. Videotapes of mothers helping their sons complete a computer task, which occurred when sons were 13-14 years old and again when they were 15-16 years old, were studied for parentifying and parentified behaviours in mother and son respectively. The Parentification Scale (Mika, Bergner & Baum, 1987), translated into French for the present study, was administered to the sons when they were 18-19 years old. The main hypothesis of this study held that high frequencies of behaviours thought to be congruent with parentification would be predictive of high parentification scores. A second hypothesis predicted the stability of observational ratings of high parentification, and a third predicted that highly-parentified sons would more frequently be only children living with single mothers.

Four of the mother-son behaviours observed in the lab setting were found to be stable across time, offering support for the second hypothesis. Two behaviours initiated by sons towards their mothers were found to discriminate between the High Parentification ($n = 18$) and Low Parentification ($n = 64$) groups, thus offering support for the main hypothesis: higher-than-average frequencies of eye contact, significant both times ($\chi^2 = 8.17, p < .01$), and peer-like teasing and flirting behaviours, significant only when the sons were younger, $\chi^2 = 7.90, p < .01$. High and Low Parentification groups did not differ significantly on a series of demographic variables and earlier behavioural ratings of the sons. One further discriminator was "only child" status; a greater proportion of sons who were only children were in the High Parentification group, $\chi^2 =$

6.66, $p < .01$, although numbers were quite low. Living with a single parent was not found to be associated with higher parentification, and the amount and quality of social and emotional support available to the parent was hypothesized to be a potentially more valid determinant of parentification than would be living in a single-parent or a two-parent family.

Finally, in order to explore the relative contribution of each of the three significant discriminators of parentification, they were entered as predictors into a logistic regression equation. The resulting model had a chi-square statistic of 18.6, $p < .001$, and a McFadden's- R^2 of .27. Odds ratios indicated that sons having peer-like interactions with their mothers at T_1 were six times more likely, and that sons who initiated higher-than-average amounts of eye contact with their mothers over the course of both tasks were over three times more likely to be in the High Parentification group. "Only child" status predicted an almost seven times greater chance of high parentification. One limitation of the study was a sample size which was too small to permit a validation of the translated Parentification Scale and which contained few examples of what might be considered pathogenic parentification. Methodological limitations included the failure to administer a parallel measure of parentification to the mother and the retrospective nature of mother-son observations. Several possible methodological improvements were discussed and recommendations for future research were suggested.

Résumé

La présente étude emprunte les paramètres de l'approche systémique familiale. Minuchin (1974) a proposé le concept de *frontières intergénérationnelles*, lignes invisibles dans la famille qui servent à délimiter les responsabilités et rôles différents des enfants et des parents, protégeant ainsi les enfants d'un poids de responsabilité qui soit trop lourd pour eux. Minuchin et ses collègues ont étudié le phénomène de *l'enfant parental*, celui à qui les parents délèguent la responsabilité de jouer un rôle parental auprès de ses frères et ses sœurs et de se charger de tâches ménagères lourdes. Boszormenyi-Nagy & Spark (1973) ont discuté un phénomène parallèle, celui de *l'enfant parentifié*, un construit qui englobe à la fois la situation de l'enfant parental et celle de l'enfant qui prend soin d'au moins un de ses propres parents, avec qui il assume soit le rôle de conjoint soit le rôle de parent. D'après la littérature, cette deuxième manifestation de responsabilité extrême semble être la plus problématique pour l'enfant; le fait de s'occuper d'un parent s'avère être plus exigeant émotionnellement que de jouer le rôle plus instrumental de gardien(ne) ou d'exécutant de tâches ménagères. Dans la littérature, pourtant, les deux construits sont souvent mêlés et ces niveaux de responsabilisation très différents ne sont pas différenciés. La parentification extrême se caractérise par la dissolution des frontières intergénérationnelles, par un *enchevêtrement* entre le parent et l'enfant, et par un renversement de rôles où le parent dépend de l'enfant et l'enfant assume un rôle parental complémentaire. Elle se révèle un phénomène clinique significatif, et une douzaine d'études cliniques faites depuis vingt ans proposent un lien entre cette dynamique parent-enfant et des symptômes cliniques aussi divers que l'inceste, la co-dépendance, la toxicomanie, et des difficultés d'ordre relationnel pour l'adolescent qui cherche son autonomie; et enfin d'ordre personnel et interpersonnel pour l'adulte qui fut parentifié et qui gardera peut-être une tendance à se rendre sur-responsable pour le bien-être des autres. Malgré l'importance clinique de ce phénomène, la mesure de la parentification est toujours préliminairement positionnée; il y a deux instruments valides et fiables qui ont été utilisés pour évaluer le niveau de parentification d'un adulte ou d'un adolescent : le *Parentification Questionnaire* (Sessions & Jurkovic, 1986) et le *Parentification Scale* (Mika, Bergner & Baum, 1987). Le deuxième

instrument nous semblait plus approprié pour la présente recherche, dont le but principal était d'approfondir l'état de connaissance au niveau de la mesure de la parentification avec une nouvelle population, des fils adolescents qui avec leur mère faisaient partie de l'étude longitudinale de Montréal depuis l'âge de six ans. Plus spécifiquement, le but de la présente recherche était de voir si des comportements observés en laboratoire, que l'on pensait représenter la parentification entre mère et fils à deux moments, soit quand le fils aura 13-14 ans et quand il aura 15-16 ans, pourraient prédire de façon significative la parentification chez le fils quelques années plus tard lors de l'administration du Parentification Scale à l'adolescent, soit quand il aura 18-19 ans. Ceci nécessitait la traduction de l'instrument en français, ce qui fut accompli à partir des suggestions indispensables de Vallerand (1989), pour créer l'*Échelle de parentification (EP)*. L'instrument fut traduit en français, et traduit de nouveau en anglais pour comparer la compréhension des questions et la validité de la traduction. Un comité de traducteurs ont trouvé un niveau acceptable de fiabilité et de validité par comparaison avec les résultats de la version originale.

Les 82 adolescents qui avec leur mère participèrent à l'étude avaient un âge moyen de 18,5 ans; ils ont participé à deux séances de laboratoire, soit à l'âge moyen de 13,5 ans et 14,5 ans. Les mère et fils furent filmés en train de travailler sur une tâche d'apprentissage ou le fils a reçu la directive claire de compléter la tâche aussi vite que possible et où la mère a joué le rôle d'aide et de soutien auprès de son fils dans ses démarches. L'hypothèse principale de la présente étude postulait qu'il y aurait une relation significative entre quelques-unes de ces interactions et le résultat de parentification; autrement dit, que des comportements mère-fils en contexte d'une tâche d'apprentissage partagée, dont la fiabilité interjuge était acceptable, pourrait servir comme prédicteurs d'un niveau élevé de parentification rapporté par le fils lors de l'administration de l'EP quelques années plus tard. Une deuxième hypothèse voulait que ces comportements que l'on observait demeureraient stables dans le temps, ce qui indiquerait que la dynamique de parentification était persistante et qu'elle caractérise ainsi certaines relations mère-fils. Troisièmement, on prétendait que les fils les plus parentifiés seraient soit l'enfant unique, soit le premier-né de la famille, et qu'ils

habiteraient plus souvent dans une famille monoparentale dirigée par la mère que dans une famille à deux parents.

Le résultat de parentification, issu des 13 items de l'EP, fut dichotomisé en deux groupes : le groupe «parentification élevée» ($n = 18$), qui englobait les adolescents ayant un score de parentification supérieur à la marge d'un écart-type de la moyenne (c'est-à-dire, plus que 20), et le groupe «parentification basse» ($n = 64$) qui englobait les adolescents ayant un score en bas de 20. Des analyses préliminaires ont confirmé que ces deux groupes se ressemblaient à d'autres niveaux, c'est-à-dire au niveau de l'intelligence du fils dans sa tâche, de l'âge de la mère, de l'âge du fils, de la scolarité de la mère, et des caractéristiques personnelles des fils qui ont été évaluées dans le contexte de l'étude longitudinale alors qu'ils étaient plus jeunes.

La première hypothèse fut confirmée dans un premier temps à l'aide d'une série d'analyses chi-carré sur les comportements observés et le résultat de parentification, toutes deux des variables dichotomes : deux des comportements interactifs mère-fils qui furent la cible des observations se sont révélés des prédicteurs significatifs, reliés à un niveau élevé de parentification. Le premier de ces comportements fut «fils cherche à établir un contact visuel avec sa mère», à savoir un niveau du regard dirigé par le fils vers sa mère au-dessus de la moyenne. Un niveau élevé du regard au moment des deux tâches (quand il avait 13-14 ans et ensuite quand il avait 15-16 ans) a su discriminer entre les groupes de parentification, $\chi^2 = 8.17 (1)$, $p < .01$. Le deuxième de ces comportements fut «fils joue avec sa mère comme dans une relation entre pairs», des interactions de chatouillage, de blagues et de taquinage initiées par le fils qui donnaient indice à une relation plutôt d'égaux que de parent-enfant. La présence de ces comportements initiés par le fils a su discriminer la condition de parentification uniquement dans la première tâche quand le fils était plus jeune, $\chi^2 = 7.90 (1)$, $p < .01$. Étant donné la concentration nécessitée par la tâche d'apprentissage et la directive claire donnée aux fils d'accomplir la tâche au plus vite, ces deux comportements nous apparaissaient inappropriés. En effet, ceux-ci fournissaient un indice de diffusion de frontières intergénérationnelles ou d'enchevêtrement mère-fils. Un troisième comportement, identifié à la prise en charge

par la mère de la tâche sur ordinateur de son fils, se voulait traduire le renversement des rôles parent-enfant qui implique aussi dans la littérature un niveau élevé de parentification. Ce comportement s'approchait un niveau alpha de .05 mais n'a toutefois pas servi comme facteur discriminant des groupes de parentification. En plus, la direction de la relation entre la prise en charge par la mère et le niveau de parentification était contraire à ce qui a été posée comme hypothèse, c'est à dire, qu'une mère excessivement impliquée prédirait un fils parentifié à un niveau élevé. En ce qui concerne la deuxième hypothèse, des deux variables discriminantes, seule le comportement «fils initie le contact visuel avec sa mère» fut stable dans le temps avec une corrélation Pearson significative entre T₁ et T₂, $r = .64$, $p < .001$. Une des variables contrôles, le statut de l'enfant unique, fut aussi un facteur discriminant du niveau de parentification, même si les nombres ont été restreints; des neuf adolescents dans l'étude qui furent des enfants uniques, cinq se trouvaient dans le groupe de parentification élevée, $\chi^2 = 6.66$ (1), $p < .01$. Vivre dans une famille monoparentale dirigée par une mère ne fut pas, par ailleurs, associé de façon significative au niveau de parentification; il y avait autant d'adolescents parentifiés à un haut niveau dans des familles à deux parents que dans des familles monoparentales.

Dans un deuxième temps, les trois variables qui se sont avérées significatives furent entrées dans une analyse de régression logistique afin de comparer la capacité de chacune des trois de prédire l'appartenance au groupe de parentification élevée. Les deux prédicteurs comportementaux furent les plus efficaces pour prédire le résultat de parentification élevée et ils avaient un indice McFadden's-R² de .18; les adolescents qui ont le plus fréquemment essayé d'établir un contact visuel avec leur mère aux deux tâches et ceux qui se sont comportés avec leur mère comme s'ils étaient des pairs au moment de la première tâche avaient au-dessus de quatre fois plus de chances d'être dans le groupe des plus parentifiés. Quand le statut d'enfant unique fut ajouté à l'équation de régression, ce nouveau modèle avait un indice McFadden's-R² de .27 et un enfant unique avait sept fois plus de chances d'être dans le groupe à niveau élevé de parentification.

Ces résultats suggèrent qu'il est peut-être possible d'utiliser des interactions mère-fils, même dans un contexte contrôlé et restreint et lors d'une tâche qui ne dure que 20 minutes, pour prédire un haut niveau de parentification rapporté par le fils même quelques années plus tard. De plus, la faible corrélation entre les sous-échelles utilisées dans la présente étude et la sous-échelle de l'EP, qui porte sur les responsabilités prises par un jeune adolescent auprès de ses frères et sœurs, démontre que l'on devrait désormais différencier entre le rôle de s'occuper de la fratrie et peut-être des tâches ménagères, et la responsabilité de s'occuper du bien-être de son parent ou de ses parents. Ce dernier semble dans la littérature traduire de façon plus efficace l'aspect problématique de la parentification; la présente étude utilisa une définition plus restreinte, considérant l'autre genre de responsabilité comme étant plutôt une description de l'enfant parental. La discussion porta sur cette différence et sur la possibilité que les deux comportements prédictifs significatifs, le "flirting" du fils avec sa mère et un niveau élevé de contact visuel initié par lui vers elle, ont pu révéler le même processus à deux moments différents dans le temps : lorsque le fils avait 13-14 ans et ensuite lorsqu'il avait 15-16 ans. Étant donné que la présence d'un ou des deux parents à la maison n'a pu discriminer le niveau de parentification, la présente étude a soulevé la question de savoir si la présence de soutien social et émotionnel pour la mère est un prédictif plus fiable du niveau de parentification du fils que le statut de la famille. Les limites de l'étude ont été discutées et, finalement, des recommandations concernant les recherches futures par rapport à la mesure et l'évaluation de la parentification ont été présentées.

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Dedication

To Karen—the love of my life, my friend, my wife
. . . and here's to a lifetime of “mutual parentification”!

Play is the serious business of childhood,
just as joy is the serious business of heaven.

~ C.S. Lewis

INTRODUCTION

Valuing childhood does not mean seeing it as a happy, innocent period, but rather as an important period of life to which children are entitled. It is children's right to be children, to enjoy the pleasures and to not suffer the pains of a childhood that is infringed by hurrying. In the end, a childhood is the most basic human right of children. (Elkind, 1988, p. 202)

“Play is the serious business of childhood”, wrote C.S. Lewis. Childhood is ideally a time for play, for self-exploration and discovery, for experiencing a wide range of feelings and for developing deep reserves of security and trust. Adolescence is similarly a time for self-exploration and self-discovery on a different level, as the child begins to move away from the world of his parents and towards the world of his peers. The invisible lines differentiating parent and child, referred to as *intergenerational boundaries* in the family systems perspective, play a protective function and allow family members to clearly understand the distinct roles and responsibilities of each generation. While children and adolescents are supposed to be learning and growing up, parents are supposed to be teaching them and taking care of them. Some children and adolescents, however, do not experience the full freedom of this period of life, because when they are still young their parents consciously or unconsciously assign them responsibilities far above their developmental level. These responsibilities may involve extensive household chores, the care and parenting of younger siblings, and—in extreme cases—the care and ‘parenting’ of one or both of their own parents. In this last case, the protective boundaries between the generations have clearly become blurred and diffuse, and children may become overly close—*enmeshed*—with one or both of their parents. Children and adolescents who are burdened with such responsibilities have been referred to as *parental* or *parentified* children by family clinicians and researchers over the past two decades. When the degree of childhood parentification is high, a child may experience what is, in effect, the very loss of his or her childhood (Jurkovic, 1997). Clinical experience as well as recent empirical studies (Valleau, Bergner & Horton, 1995) appear to indicate that highly parentified children and adolescents may become overresponsible adults who have an exaggerated caretaking orientation and who may be only minimally aware of their own needs and feelings; indeed, an adult who grew up as a highly parentified child may have a very limited awareness of his own true self because in his mind and according to his earliest interpersonal experiences, he “exists to serve”.

Although parentification has long been recognized as a significant and enduring clinical phenomenon with possible negative long-term consequences, the observation and measurement of parentification in nonclinical populations has only in the past twenty years become the subject of research. Family clinicians recognize parentification when they meet up with it in a family, but specific behaviours in parent-child interaction which may indicate or predict a parentified relationship have not been empirically identified. The present study had the goal of advancing the assessment of parentification by focusing on two elements: the observation of mother-son interactions within a controlled lab setting, and the administration of a self-report measure called the Parentification Scale (Mika. Bergner & Baum, 1987) to the adolescent sons several years later. Parentification was defined as the child taking care of his parent or parents and the focus of the study was the mother-son dyad. Mother-son behaviours hypothesized to be consistent with high parentification in a child were rated when the 82 sons were 13-14 years old and then again when they were 15-16 years old. The Parentification Scale was administered when they were 18-19 years old. The observations made in early and mid adolescence were studied as potential predictors of parentification self-reported by the adolescent near the end of adolescence. Other research questions in the present study involved the stability across time of the proposed observational predictors and the birth order and family demographics of adolescents who self-reported high parentification.

CHAPTER I

REVIEW OF THE LITERATURE

Theoretical Context

The terms *parentification* and *intergenerational boundary dissolution* have been used synonymously in the literature. According to Minuchin (1974), a family therapist and researcher, *intergenerational boundaries* are essential in the family system in order to differentiate the parental subsystem from the sibling subsystem. Minuchin (1974) suggested that many family and individual problems are due in part to violations of these protective and functional limits. *Parentification* is a key clinical concept in family therapy. It may be described as a process of role reversal through which a ‘chosen’ child comes to play a parent-like caretaking role. This role may lead the child into carrying emotional burdens for which he or she is developmentally unprepared. It may also allow the child’s appropriate childhood needs for structure and security to be left unfulfilled. According to the literature, parentification is manifested by the child in one or both of two ways: caring for siblings and caring for parents. In their earlier studies of poor, inner-city families, Minuchin, Montalvo, Guerney, Rosman and Schumer (1967) observed what they were to call the phenomenon of the *parental child*: a breakdown in the generational hierarchy which resulted in children being burdened with adult responsibilities such as the extensive care of siblings and household chores which may have been beyond their age-appropriate coping skills. Boszormenyi-Nagy and Spark (1973) referred to a similar form of generational boundary dissolution as *parentification* but included in their definition children who played a parental role with one or both parents as well as with their siblings. These two clinicians believed that parentification is, in a general sense, a common and important aspect of most human relations, “a component of the regressive core of even balanced, sufficiently reciprocal relationships” (p. 151). They defined marriage, for example, as “mutual parentification”, a relationship in which each partner takes a turn playing the role of parent to the other in a symmetrical process of mutual caregiving. They did not perceive parentification as being intrinsically pathological, and they saw the temporary parentification of a child as being a normal part of family life and in fact a way in which a child learns responsibility. In fact, they believed that every child, male or female, must be parentified by his or her parents to some degree in order to be able to identify with the parental role and to internalize it as

part of his or her own identity and emotional configuration. There seems to be general agreement among clinicians, however, that while a limited degree of parent-child role-reversal is normal and even adaptive, this process becomes dysfunctional when the caretaking function provided by the child is not supported, diffused or reciprocated by parental figures (Boszormenyi-Nagy, 1973; Goglia, Jurkovic, Burt & Burge-Callaway, 1992; Minuchin, 1974). This extreme and potentially pathological level of parentification was referred to by Goglia et al. (1992) as the “subjective distortion of a relationship as if one’s partner or even one’s child were his parent” (p. 15). Although the terms “parental child” and “parentified child” have often been used synonymously, a careful study of the literature reveals a distinction between them. The former appears to describe a primarily *instrumental* role assignment, in which the child fulfils certain chores or tasks usually thought of as parental in nature, while the latter appears to describe an emotional or *expressive* role assignment in which the child may actually serve as a substitute parent or even a spouse to his own parent or parents (Goglia et al., 1992; Goglia, 1982; Jurkovic, Jessee & Goglia, 1991; Jurkovic, Goglia & Jessee, 1980; Karpel, 1976; Wolkin, 1984). This second dynamic may be more potentially destructive insofar as the child’s own needs go unmet and the child is called upon to play a role for which he or she may not be developmentally ready.

There appear to be several factors which seem to distinguish normal from pathological parentification and which may be summed up from the literature: the *reciprocity* of caregiving between parent and child, the *duration* of the parentified role, and the *extent* of the responsibilities assigned to the child. The first of these factors, *reciprocity*, refers to whether or not the child’s own needs for guidance, support, nurturing and autonomy are compromised by his focus upon his parent’s needs (Fullinwider-Bush & Jacobvitz, 1993). In her clinical study, Goglia (1982) found that reciprocity (defined as the balance between the child’s parental responsibilities and the parent’s responsiveness to the child’s needs) appeared to be an essential element in understanding the long-term impact of parentification. Wolkin (1984), another clinical researcher, defined pathological parentification as the prolonged and non-reciprocal assignment to children of emotional and instrumental parental responsibilities for other

family members. Mika, Bergner and Baum (1987) also made reference to the problematic nature of children and adolescents being assigned roles and responsibilities which their parents had essentially abdicated. The second factor, *duration*, refers to whether parentification is a temporary state or an enduring trait characterizing long-term parent-child interactions. Following a family crisis or transition, it appears to be normal for the family to re-organize its hierarchy and roles. A family must establish a new equilibrium following such transitions as birth, death, separation or divorce, the arrival of a new partner or the blending of two families into one, and this may involve provisional parentified roles for one or several of the children. In these cases, parentification may be a transitory and functional phenomenon. In contrast, Jurkovic et al. (1991) emphasized the pervasiveness and longevity of the parentified role in certain family therapy cases they were following. Sessions (1986) also wrote of transient versus chronic parentification, and the results of his research study suggested that parentified children may often carry into adulthood and into subsequent relationships their earlier familial role of meeting the needs of others at the expense of their own needs. The third factor which appears to distinguish between normalcy and pathology is the *extent* of the assigned responsibilities, characterized above as the difference between parental child and parentified child. Boszormenyi-Nagy and Spark (1973) noted from their clinical experience with families that the possible scope of parentification is very wide, ranging from a parent's wishful fantasy of having a child take on more responsibilities to a parent's actual physical and emotional dependence on and enmeshment with a child. These authors differentiate between the potential impact on the child's development of instrumental role tasks such as having to do household chores and take care of siblings, and that of expressive or emotional role tasks such as having to take care of parents and serve as parental confidant or advisor. In their opinion, the latter form of parentification, with its elements of parent-child enmeshment, role reversal and generational boundary dissolution, may have a deeper and more pervasive impact on the child's personal identity and relationship style. Jurkovic et al. (1980) hypothesized that more subtle expressive tasks such as providing emotional support to a parent or serving as a parental confidant or conflict-mediator may ultimately prove to be more detrimental to the child's

development and individuation than would be more-visible instrumental tasks such as housekeeping and caring for siblings.

When parentification is unilateral, long-lasting and intergenerational, it may potentially contribute to a broad range of child and adult symptomatology. Children who have been parentified, even when grown up, may carry a burden of “guilt-laden obligation” for the well-being of others even while they allow their own needs to go unacknowledged (Cotroneo, 1987). In extreme cases one might even say that the parentified child has suffered the loss of childhood; he or she has learned from a young age to subjugate personal needs to the needs of a parent, and may come to hold as sacred in every future relationship the credo that “others are more important than self” (Olson & Gariti, 1993). A highly parentified adolescent might experience problems with self-definition and individuation (Goglia et al., 1992; Karpel, 1976), have an excessively caretaking personal orientation, and be prone to seek out relationships in which he or she would be exploited (Mica et al., 1987). When such an adolescent becomes an adult and begins a family, parenting might well prove to be a daunting task as there is some evidence that the parentification dynamic may often be repeated in the next generation (Sroufe, Jacobvitz, Mangelsdorf, DeAngela & Ward, 1985).

In terms of more serious and pervasive individual symptomatology, different research studies have correlated different aspects of generational boundary dissolution with schizophrenia (Walsh, 1979), with alcohol and substance abuse (Evans, 1987; Goglia et al., 1992; Stanton & Todd, 1979), with incest and sexual abuse (Burkett, 1991; Evans, 1987; Fullinwider-Bush & Jacobvitz, 1993; Hyde, 1986; Sroufe & Ward, 1980), with eating disorders (Fullinwider-Bush & Jacobvitz, 1993), and with hyperactivity and impulse control problems (Sroufe et al., 1985). One family therapist went so far as to label parentification the “emotional incest syndrome” (Love, 1990), a pervasive parent-child dynamic which might well be considered a form of child abuse because it obliges a child to deny his own emotional needs in order to meet the emotional needs of a parent. Although these pathological correlates of parentification lie beyond the scope of this

study, they help to illustrate why parentification in its extreme forms is almost universally considered by family clinicians to be a significant clinical indicator.

In summary, the three factors which appear to distinguish a normal and functional type of parentification from a potentially pathological manifestation of parentification are reciprocity (whether or not the child's needs are also being met by the parent), duration (whether the generational boundary dissolution is a temporary state following a family transition or a persistent trait characterizing the parent-child relationship), and extent (whether the adult responsibilities and roles taken on by the child tend to be more instrumental or more emotional in nature).

Empirical Context

From their review of the literature, Gurman and Kniskern (1978) concluded that one of the most serious deficiencies in the field of family research was the absence of useful and valid measures of most of the core theoretical constructs that have been reified by clinicians. More recently, Fish, Belsky and Youngblade (1991) agreed that the empirical evaluation of popular constructs such as generational boundary violation is lacking in the clinical literature, although much use is made of them in terms of theory and explanation. Only over the last twenty years have clinical researchers begun to systematically and empirically study parentification and intergenerational boundary dissolution (Abelsohn & Saayman, 1991; Bell & Bell, 1982; Burkett, 1991; Burt, 1992; Dawson, 1980; Fish et al., 1991; Flemons, 1991; Fullinwider-Bush & Jacobvitz, 1993; Goglia, 1982; Goglia et al., 1992; Kleiman, 1981; Madanes, Dukes & Harbin, 1980; Mika et al., 1987; Protinsky, Kelley & Gilky, 1989; Sessions & Jurkovic, 1986; Sroufe et al., 1985; Sroufe & Ward, 1980; Wolkin, 1984).

Despite this increase in activity, an examination of what has been done to study this phenomenon over the past twenty years reveals a somewhat scattered approach and clear methodological shortcomings. Some twenty four research studies have assessed parentification, describing it in a great many ways, using such terms as "generational

boundary dissolution” or “distortion” or “violation”, “hierarchy reversals”, “cross-generational attachments” or “coalitions” or “companionship”, and “enmeshment with a needy parent”. A review of these studies revealed that eight different instruments were used to operationalize parentification, most of them designed by the author of the study and used in that study alone. There were two notable exceptions to this rule, two instruments which have been used in several studies and will later be discussed at some length: the *Parentification Scale* of Mika, Bergner and Baum (1987), and the *Parentification Questionnaire* of Sessions and Jurkovic (1986). (These instruments may be consulted in Appendixes A and D). Several of the parentification research studies had limited generalizability to a normal population, having as their target population mothers who had been sexually abused (Burkett, 1991), families of heroin addicts or schizophrenics (Madanes et al., 1980), or adult children of alcoholics (Goglia et al., 1992). Only half of the studies involved more than 50 participants (Burkett, 1991; Fish et al., 1991; Flemons, 1991; Goglia et al., 1992; Goglia, 1982; Mika et al., 1987; Protinsky et al., 1989; Sessions, 1986; Sessions et al., 1983; Valteau et al., 1995; Wolkin, 1984). Burkett (1991) did not take the precaution of using single- or double-blind techniques; she assessed parentification in videotapes and then herself interviewed the mothers for evidence of parentification. Only one of the studies included a longitudinal assessment of the persistence of parentification across time (Sroufe & Ward, 1980; Sroufe et al., 1985). Finally, and perhaps most critically, only four of the studies used some form of observation of parent-child interaction in their assessment of parentification (Burkett, 1991; Fish et al., 1991; Sroufe & Ward, 1980; Sroufe et al., 1985), and none of them used these observations in conjunction with a self-report instrument or some other convergent measure. The study by Mika et al. (1987) was the only one which provided an external validation of the results obtained by a self-report instrument; in their study, this external validation took the form of a tape-recorded clinical interview. Since the present study includes as predictors a series of observed behaviours thought to be indicative of a parentified parent-child relationship, it will be pertinent to examine in greater detail the four studies which have incorporated observational assessments of parentification. The study by Mika et al. (1987) also merits a closer examination since it introduced and provided external validation for the Parentification Scale, the questionnaire from which

was refined the criterion for this present study. The question to be asked of the authors of each of these studies will be which specific parent-child interactions they chose to observe in order to operationalize the construct of parentification.

First of all, Burkett (1991) observed the family interactions of 40 families in their own homes, half which had mothers who had been sexually abused in their family of origin and half which formed a non-clinical control group. (Children ranged in age from 5 to 10 years old). Burkett videotaped family members doing verbal tasks together and coded and analyzed the 12-minute videotapes according to the Structural Analysis of Social Behaviour model (Benjamin, 1974). Burkett's observation of the family in action was followed by a semi-structured interview with the mother which lasted from one to two hours. She looked for evidence in the videotape that the mother focused on herself rather than on her child's needs and in the interview that the mother relied on her child for friendship, companionship or emotional support. Burkett compared the two groups and found significant differences between them: mothers who had been sexually abused as children were more self-focused than were control-group mothers, and they relied more on their children for emotional support than did control-group mothers.

Secondly, Fish, Belsky and Youngblade (1991) observed mothers and fathers with their four-year old children (and, in some cases, with the child's younger siblings) over an hour-long play session in a lab setting. They used an ingenious approach to assess parentification; while the child was engaged in free play, they informed the parents that they wished to observe the child interacting individually with each parent. Fish et al. deliberately left up to the parents the choice of which parent would leave the room first. They assessed parentification when the child was included by parents in the decision-making process; that is, if the child was asked for his or her input as to which parent should remain with the child and which one should have to leave first. The researchers considered this to be an inappropriate, anxiety-laden choice to give a four-year old, a choice which violated the integrity of intergenerational boundaries and could thus serve as a valid determinant of parentification. Out of their sample of 82 families and children, they assessed 15 children (18.3%) as being parentified.

Finally, Sroufe and his colleagues (1980, 1985) performed the two studies which most directly focused on the observation of parent-child interactions in a controlled setting as indicators of parentification. These clinical researchers took their subjects from a longitudinal study of low socioeconomic status mothers and their children. Certain mother-initiated behaviours were assessed as being “seductive” because “in addition to being insensitive and unresponsive to the needs of the child, they [drew] the child into patterns of interaction that [were] overly stimulating and role inappropriate” (Sroufe & Ward, 1980, p. 1223). These “seductive” behaviours took the form of sensual touching, laughing at the antics of their young children, or teasing and “flirting” with them rather than providing needed structure and direction. Any occurrence of one of these behaviours was sufficient for inclusion in the “seductiveness” group. Out of a total sample of 176 mothers and their first-born children (102 males, 74 females), 16 (11%) of the mothers were found to be “seductive” with their children when observed in the context of a 6-minute toy clean-up situation when the child was 24 months old (T_1). Interestingly, 15 out of these 16 cases involved a son. Sroufe and his colleagues (1985) developed three observational scales in order to assess the continuity of the seductive pattern a year and a half later (T_2), when the sons reached 42 months of age; the scale most pertinent to the present study, “Generational Boundary Dissolution”, included such items as “mother and child behave as peers”, “mother defers to child for direction (role reversal)” and “mother is amused at the child at the expense of providing needed direction”. Sroufe and his colleagues found that the pattern of “seductiveness” was stable, though transformed, from 24 to 42 months of age. Of the mothers who had been rated at T_1 as “seductive”, 72% scored high on the Generational Boundary Dissolution scale as opposed to 39% of matched controls. Sroufe et al. used the term “spousification” to describe the relationship these mothers appeared to be developing with their infant male sons; in a context in which the son needed firmness, reassurance and direction, the mother’s own emotional needs dominated and she seemed to interact with her four-year-old son as if he were a peer.

These four studies observed behaviours thought to be consistent with high parentification within the context of parent-child interaction, in three cases in a lab setting

(Fish et al., 1991; Sroufe et al., 1980, 1985) and in one case in the child's own home (Burkett, 1991). They used as subjects boys and girls who were from two to ten years old, and based their assessment of parentification on a fairly small sample of parent-child interactions: in the case of Burkett (1991), this meant a 12-minute videotape of the family doing verbal tasks together, and in the case of Sroufe (1980), it meant a 6-minute videotape of a toy clean-up situation.

Prior to Dawson (1980), who adapted Bryson's (1976) Division of Responsibility Scale in order to explore different types of responsibilities assumed in childhood, no attempts had been made to quantify parentification. To our best knowledge, only two questionnaires have been specifically developed to assess parentification, the *Parentification Scale* (Mika, Bergner and Baum, 1987), and the *Parentification Questionnaire* (Sessions and Jurkovic, 1986). The Parentification Scale has been used in four studies to date which have assessed 365 subjects (Jarvis, 1991; Jarvis, Harper & Bergner, 1992; Mika, Bergner & Baum, 1987; Valteau, Bergner & Horton, 1995). The Parentification Questionnaire has been used in eight studies of which six made use of the most recent version to assess over 600 subjects (Burt, 1992; Godsall, 1988; Goglia et al., 1992; Goglia, 1982; Sessions, 1986; Wolkin, 1984).

The *Parentification Scale* (PS) was derived by Mika, Bergner and Baum (1987) from a theoretical analysis of the construct of parentification, a consideration of previous empirical studies, the observation of parentified clients in family therapy, and clinical intuition. It is a 30-item multiple-choice self-report measure which takes approximately 10 minutes to complete. It was designed to assess an adult's or adolescent's overall degree of parentification by asking questions about which roles and responsibilities the individual might have assumed during two different periods in childhood. Test items were divided into four subscales which touched upon four different dimensions of parentification: the child in the role of 1) spouse to his parents; 2) parent to his parents; 3) parent to his siblings; and 4) performer of extensive household tasks. The PS was first administered by Mika and her colleagues (1987) to 100 undergraduate females, each the eldest daughter in her family with at least one younger sibling. Subjects were then

assigned to five “quintiles” based on their overall parentification scores, and ten representative subjects, two from each quintile, were formed into two groups and brought back for blindly-conducted interviews. PS scores were then correlated with the assessments of parentification which had been made by two teams of six raters from the tape-recorded clinical interviews, resulting in a Spearman correlation of .98, $p < .01$, suggesting a high degree of construct validity for this scale. In a later study, Jarvis, Harper and Bergner (1992) subjected the Parentification Scale to two reliability checks using a test-retest method. In the first of these checks, the PS was administered to 28 female undergraduates. After a four-month interval, test-retest reliability for the total score was found to be $r = .88$, $p < .0001$ and scores for the four individual subscales were almost as high. In the second reliability check, the scale was administered twice to 29 Grade Nine students, again over a four-month interval. The observed reliability for these younger subjects was $r = .63$, $p < .002$.

The second parentification measure, the *Parentification Questionnaire* (PQ), was developed by Sessions, Jurkovic, Goglia and Wolkin in 1983 and was revised into its present form in 1986. It is a refinement of Goglia’s (1982) earlier attempt to develop a measure of parentification in adults by asking them to remember the responsibilities they had assumed as children in their family of origin. The PQ is a 42-item, true-false self-report measure derived from clinical experience and family structure theory; it is easy to administer and score and takes only 10 minutes to complete. It was designed to assess caretaking responsibilities, particularly those of an expressive or emotional nature, and to determine the degree of reciprocity of these responsibilities between parent and child in the family of origin. Burt (1992), working with a sample of 43 undergraduate students, found the PQ to have a two-week interval test-retest reliability of $r = .86$, $p < .01$. The PQ has been administered concurrently with six other personality measures: six different scales of the California Personality Inventory (see Godsall, 1988; Goglia et al., 1992; and Sessions, Jurkovic, Goglia & Wolkin, 1983), the L’Abate Likeness Questionnaire and the Ego Identity Scales (see Sessions et al., 1983), the Depression and Dependency scales of the MMPI (see Wolkin, 1984), the Rorschach (see Wolkin, 1984), and two different coding systems of the TAT (see Goglia et al., 1992, and Sessions, 1986).

In each of the six empirical studies in which it has been used, the PQ was administered to an adult in order to assess his or her memories of responsibilities and role assignments in the family of origin. Despite its status as the instrument the most frequently used to date for the assessment of parentification, the PQ does not adequately discriminate between instrumental and expressive factors. In fact, the instrument appears to most strongly tap into Minuchin's (1967) parental child construct which focuses on housekeeping and taking care of siblings, roles still more generally assumed by females in this culture. Perhaps as a result of this, male subjects have consistently received lower parentification scores than females in studies employing the PQ (Goglia, 1982; Goglia et al., 1992; Sessions, 1986; Wolkin, 1984).

Methodological and Conceptual Considerations

In the light of the above studies, we would propose the following research considerations with the goal of advancing the observational assessment of parentification. First of all, research must proceed from a clear conceptualization of parentification, one which will differentiate between instrumental and expressive responsibilities assigned to the child. This is important because, as has been mentioned, the emotional consequences attached to caring for siblings and doing household chores may be very different than those attached to caring for one's own parents. Secondly, the instrument used for the assessment of high parentification must be a valid instrument which will permit this differentiation. Thirdly, subjects should be drawn from a non-clinical population which will allow for a wider generalization of the findings. Fourthly, there must be a sufficient number of subjects to allow for a valid statistical analysis of the outcome. Fifthly, there must be a longitudinal aspect to the research in order to explore the duration of the parentified role, another indicator of clinical significance. Finally, observations must be made of parent and child together if these observations are to capture the dynamic of parentification, the simultaneous parentifying and parentified behaviours which produce and sustain it as a stable pattern of parent-child interaction.

Choice of focus: parental role versus parentified role

One of the three factors distinguishing normal from extreme parentification is the extent of the parentified role, discussed above as the difference between caring for siblings and caring for parents. Although the responsibilities inherent in these two roles clearly overlap, the literature is unanimous that the *expressive* or *emotional* aspects of the parentified role—taking on a caretaking role with a parent—are more potentially problematic for the child than are the *functional* aspects—caring for siblings or doing household chores. Parentification was defined in the present study as a parent-child dynamic in which a child on occasion assumes such roles as consoler, confidant, advisor or mediator with one or both parents. This dynamic includes elements of role reversal, enmeshment, and the blurring of generational boundaries. The parentifying parent and the parentified child, according to this definition, may relate to each other as peers, with the child occasionally taking on the parental role and the parent depending on the child rather than encouraging the child’s individuation and age-appropriate independence.

Choice of instrument: Parentification Questionnaire versus Parentification Scale

Of the two instruments discussed above—the Parentification Questionnaire (PQ) and the Parentification Scale (PS)—the PS appeared to be the more useful instrument for a research study on the assessment of parentification. Four distinctions between the two instruments help to justify this choice. First of all, the PS introduces four *a priori* subscales which differentiate four dimensions of parentification. This enables the researcher employing the PS to make a finer and more specific correlation of observational with psychometric ratings than may make the researcher employing the PQ. The “Parent to Sibling(s)” and “Performer of Household Tasks” subscales tap into the instrumental aspect of parentification (17 out of 30 items), while the “Parent to Parent(s)” and “Spouse to Parent(s)” subscales tap into the expressive aspect (the remaining 13 items), permitting a clear-cut distinction between the parental child and parentified child constructs. As stated above, this difference is considered in the literature to be an important indicator to discriminate normal and pathological parentification. Secondly, instead of the true-false format of the PQ, the PS allows for five possible responses, from “very often” to “never or does not apply to me”. This more descriptive range of possible

responses permits a more precise assessment of the extent of parentification. Thirdly, PS questions are more specific and more clear than are PQ questions. Where the PQ makes reference to “family members”, “people” or “someone in my family”, the PS refers to “younger siblings” or “my mother” or “my parents”. Two questions with similar content from the two questionnaires may serve to illustrate this: “It seemed like family members were always bringing me their problems” (PQ), is more ambiguous than “I consoled one or both of my parents when they were distressed” (PS). The straightforward wording of PS questions also leaves them less open to differences of interpretation than does the somewhat vaguer wording of PQ questions, which make subtle references to pride, shame, resentment, guilt and alienation. This clarity was of benefit to the present study because the instrument had to be translated into French before it could be administered. Fourthly, the PS asks the participant for a response for two different time periods—“before age 14” and “from age 14 to 16”—thus giving a clue as to the duration of the parentified role. This dividing line was chosen by Mika, Bergner and Baum (1987) because it represented a time of transition from childhood to adulthood. It was to the advantage of this present study that these were approximately the same ages at which were made observations of the mother-son interactions thought to be potential predictors of high parentification.

The PS has been used in only four previous studies, but it contains, in a paraphrased form, 25 of the 42 questions of the PQ, the instrument which has been used the most frequently for the assessment of parentification. The PS has also proven, as reported above, to have acceptable construct validity for the assessment of parentification (Spearman’s $r = .98$, $p < .01$ between scores and interview ratings of 100 female subjects, Mika et al., 1987) and also acceptable test-retest reliability (Pearson’s $r = .88$, $p < .0001$ and $r = .63$, $p < .002$ over a four-month interval, with 28 undergraduate females and 29 Grade Nine students respectively, in a study by Jarvis, 1991). Jarvis (1992) urged further exploration of the psychometric properties of the PS by administering it to younger age groups. Research recommendations by Mika and her colleagues (1987) included the further validation and refinement of the PS in order to determine the degree to which self-reports of parentification on the scale would correspond with observed parentification.

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Choice of population: female versus male adolescents

Although the Parentification Questionnaire has been used with both male and female college students, a common finding of most studies was higher scores for female subjects. This led Sessions and Jurkovic (1986), the authors of that measure, to speculate that high parentification might be more naturally characteristic of females than males or that highly parentified males might manifest it through behaviours which were not being assessed by the PQ. All four studies employing the Parentification Scale chose to assess females alone because the authors of the PS hypothesized that females would have significantly higher rates of parentification, more frequently “falling into” the parentified roles of caring for siblings and doing household chores. Although this may be true for such role assignments, one could assume that the parentified roles of parental confidant, advisor and mediator would not be limited to one gender to the same extent. While a daughter may be more likely to take over household chores and the child caretaking role, clinical experience suggests that, particularly in a mother-led family, a son may often be called upon to take his father’s place, to take over the role of “man of the house”. As previously discussed, in the Sroufe and Ward (1980) study of mother-child parentification involving two-year-old children of both genders, 15 of the 16 children found to be highly parentified (“spousified”) were males. Based on this information, it seemed reasonable to assume that the “spouse to parent” role might occur more often with the opposite-sex parent than with the same-sex parent. If it is true that daughters fall more frequently into the parental child role, it might also be true that sons fall more frequently into the parentified role and are “spousified” by their mothers.

Since parentification is a complex systemic dynamic, a mother’s behaviours towards and in relationship with her son could serve as equally valid predictors of parentification as could the son’s own behaviours. In fact, the mother’s parentifying behaviours alone were observed in all four of the previously discussed studies (Burkett, 1991; Fish et al., 1991; Sroufe & Ward, 1980; Sroufe et al., 1985). While attempting to identify potential predictors of parentification, it seemed reasonable to focus on task- and relationship-related behaviours of both mother and son as they were in interaction, rather than on the son’s or the mother’s behaviours alone.

The present study had as a goal the assessment of parentification as a parent-child dynamic in a non-clinical group of adolescent males. (Adolescence is a critical period for individuation, which is considered to be a particularly difficult process for highly parentified children). Self-report scores on a parentification instrument administered to the adolescent sons provided the criterion for this study. Mother-son interactions judged to be consistent with parentification were observed in a controlled setting on two separate occasions and were examined for their potential usefulness as predictors of high parentification. Inspired by the findings of Sroufe's longitudinal study (1980, 1985), we believed that parentification would be manifested as blurred generational boundaries between mother and son. We considered a structured lab learning task to be an appropriate context in which to observe both parentifying and parentified behaviours; the son was engaged in a developmentally appropriate learning activity on a computer, which was thought to secure his interest and attention, and his mother was instructed to help him as needed, to play an appropriate parental role. Although the first part of the present study consisted of a re-analysis of existing videotapes from the Montréal Longitudinal Study, the lab task appeared to be an appropriate setting in which to observe behaviours consistent with parentification. We expected to observe mothers and sons who were in a highly parentified relationship to interact as peers, with an interchange of teasing or even flirtatious behaviours. We also expected to observe the sons who would later self-report higher levels of parentification to be overly involved with or overly distracted by their mothers. Finally, as a manifestation of parent-child role reversal in cases which would later report high parentification, we expected to see mother taking over the role of performer of the task and son taking on the complementary parental role of advisor and guide. Also based on the findings of Sroufe et al. (1985), we expected to find a consistency across time of certain of the observational predictors. We also expected to find the sons in our sample who were the most highly parentified to more frequently fit a certain demographic profile. Based on the clinical literature and previous empirical studies, we expected them to be firstborn or only children living with their mothers in a single-parent household. The firstborn child is traditionally given more responsibility and expected to live up to higher standards than are later-born children. Even though caretaking of siblings was not included in the definition of parentification used by the

present study, it was thought that a mother who leaned on her son to help out with his younger brothers and sisters would also be more likely to lean on him for emotional support and companionship. It was thought that a son living with a single mother would be more likely to report higher levels of parentification because of the greater likelihood that the mother would lack social support and have higher needs for companionship and nurturance. Single parents have been found to assign to a child roles that would normally be the domain of the absent spouse. If the child were elevated to the position of co-parent or equal partner, there would be a greater risk of high parentification.

Research Hypotheses

1. Certain task- and relationship-related mother-son interactions observed in the context of a laboratory learning task when the son was 13-14 and 15-16 would predict high parentification self-report scores when the son was 18-19. More specifically, the following behaviours would be observed in the case of highly parentified sons:

a) *generational boundary dissolution*

(mother and son would treat each other as peers).

b) *enmeshment*

(son would be overly preoccupied with his mother's presence/
mother would not allow or encourage her son to work independently).

c) *role reversal*

(mother would be overly intrusive in her son's learning task).

2. Behaviours predicting high parentification at T₁ (when the son was 14) would be stable across time.

3. The adolescent sons who were the most highly parentified would tend to be

a) only children

b) living with a single mother

CHAPTER II

METHODOLOGY

Participants

The 82 adolescent boys and their mothers who participated in this study came from a subgroup of 147 white, French-speaking families of low socioeconomic status in east-end Montréal. They were chosen in 1983-1984 (when the boys were six years old) to be part of the Montréal Longitudinal Study (Tremblay, Charlebois, Gagnon & Larivée, 1987). That study was designed to identify boys at risk for delinquency in adolescence. Participants in the longitudinal study were divided into two groups based on high and low scores reported at age six on the Preschool Behavioural Questionnaire (Behar & Stringfield, 1974). One group, designated “disruptive”, was made up of those boys who scored above the 70th percentile on the PBQ, a score more than one standard deviation above the study population mean and more than two standard deviations above the normative group’s mean on the “Inadaptation” scale, which was the combined total of aggressiveness, hyperactivity and distractibility scores. The group designated “nondisruptive” (or more accurately, “hyperadapted”) obtained a score of zero on the same scale. Out of these 147 adolescents (approximately half from each designated group), 125 took part in videotaped mother-son laboratory sessions both at age 14 and at age 16 and were thus candidates for the present study. Of these 125 adolescents, 26 (20.8%) could not be located or contacted at age 18, and 17 (13.6%) were contacted but refused to participate. The remaining 82 adolescents (65.6%) agreed to participate in the study. Their participation involved a half-hour of their time and included a brief interview about their family as well as the administration of the Parentification Scale, which took about 10 minutes to complete and was introduced as a questionnaire on “family responsibilities”.

The mean age of these 82 participants at the time of the interview was 18.6 years old. The first lab learning session (T₁) had occurred when the boys were on the average 13.5 years old, and the second (T₂) when they were approximately 15.5 years old. Table 1 presents these data.

Table 1

Mean Age in Years of Subjects at T₁, T₂ and T₃ (N = 82)

<u>Time</u>	<u>M</u>	<u>SD</u>	<u>Minimum</u>	<u>Maximum</u>
T ₁	13.5	.60	12.3	14.5
T ₂	15.5	.60	14.3	16.5
T ₃	18.6	.30	17.9	19.3

Note. T₁ = Time of first lab learning task. T₂ = Time of second lab learning task. T₃ = Time of interview and test administration

In terms of group status, 39 (47.6%) of the adolescents were from the “disruptive” group and 43 (52.4%) were from the “nondisruptive” group as defined above. In terms of birth order, 9 (11%) were only children, 37 (45.1%) were the first-born of several siblings, 26 (31.7%) were second-born, and 10 (12.2%) were third-born or later. In terms of family situation, at the time of the interview 40 (48.7%) of these adolescents lived with both parents, 28 (34.1%) lived with mother alone, 7 (8.5%) lived with father alone, and 7 (8.5%) lived with neither parent—that is, with a roommate, with another family member, or with a girlfriend. The family situation of these adolescents had changed only slightly since their most recent videotaped session at age 16; at that time, 44 (53.6%) of the boys had been living with both parents, 30 (36.6%) had been with mother alone, 6 (7.3%) with father alone, and 2 (2.4%) had been living with neither parent.

Procedures

The present study made use of videotapes of mother-son interaction which had been recorded in the context of the Montréal Longitudinal Study. As such, we were limited to male subjects and observational data for a computer learning task which had been completed on two occasions: when the boys were entering adolescence and then two years later. We believed that this mother-son learning task, however, was an ecologically valid situation paralleling that of a mother helping her son with his homework. As was mentioned in Chapter I, parentification includes elements of role reversal, enmeshment, and the dissolution of generational boundaries. Based on this, we held that parentification would be manifested as a child-parent role reversal in which the

mother would take over the role of performer of the task and the son would take on the complementary parental role of advisor and guide. We also believed that intergenerational boundaries would be violated and that mother and son would relate to each other on a peer-like level. This would be observed as teasing, “flirting” behaviours between mother and son and as a high degree of involvement or enmeshment between them as evidenced by high levels of son-initiated eye contact with his mother.

Videotaping the mother-son learning task

Mother-son interactions during a computer task were videotaped when the adolescents were 13-14 years old and then again when they were 15-16 years old. This was done in order to explore the predictive validity of behaviours thought to be indicative of high parentification. These two sessions consisting of one 10-minute easy task and one 10-minute difficult task were videotaped in the learning lab of the École de psychoéducation of the Université de Montréal. On each occasion, the task consisted of figures to be drawn by the son on the computer using the Logo program (Papert, 1972). Tasks were modified for maturation from T_1 to T_2 . The easy task was designed to be completed by the son without needing his mother’s help. The difficult task was designed to be slightly beyond the competence of both mother and son. The experimenter separated mothers and sons and provided each of them with a 30-minute training session on the basic procedure of Logo. When they were reunited, the son was invited to sit down in the one available chair in front of the computer monitor while his mother stood beside him or slightly behind him. The experimenter directed the son to complete the task and to ask his mother for any needed help. The mother was told to help her son if he needed help. The experimenter then left the room, returning only when the ten minutes allowed for each task was up. Mother-son interactions were videotaped through a one-way mirror in order to minimize the intrusiveness of the observation process. Mothers and sons signed a consent form and were made aware that observers were present but they rapidly adapted to the situation and appeared able to focus without undue distraction on the task at hand.

Interviewing the son and administering the Parentification Scale

Adolescents who met the criteria for this study were contacted two to three years after their second videotaped lab task, either by telephone, by letter or by a message left with a neighbour or relative, and were asked to participate. A time was set up to meet each adolescent in his home in order to interview him and to administer the French version of the Parentification Scale. The interviews were done at home in order to maximize participation and to allow for some limited observation of mother-son interaction. Of the 82 adolescents who agreed to participate in the study, 75 (91.5%) were interviewed in person (71 in their own homes and 4 elsewhere); 7 (8.5%), who no longer lived in or near Montréal, were interviewed by telephone and were then mailed the questionnaire along with an explanatory letter and a self-addressed, stamped envelope (in order to maximize returns). The author personally interviewed 65 of the participants; the other 17 were interviewed by one of two colleagues. The structured interview lasted about 15 minutes and included the collection of demographic information and the taking of a brief family history. Family of origin questions included which persons the adolescent had lived with from birth to present (parents, siblings, other adults and peers) and how many years, if any, he had spent living with one parent alone or with a stepparent or other partner of his custodial parent. (See Appendix J, “Interview Form”.) Following this brief interview, he was administered the 30-item translated Parentification Scale (see Appendix B, “Échelle de parentification—translated French version”). The interviewer remained in the room to briefly answer any questions and to record any comments made or feedback given by the adolescents. Most of them found the questionnaire to be simple and clear, and their only confusion had to do with complications arising from living in a blended family or from the presence of step-parents or step-siblings (e.g., “in this question, do you mean my real mother or my stepmother?”) In each case, the adolescent was simply instructed to answer the questions with reference to his birth parents and to the siblings, half-siblings and step-siblings with whom he had been living during the time periods addressed by the questionnaire—that is, “before age 14” and “from age 14 to 16”. The interviewer immediately checked the questionnaires for skipped questions and asked participants to complete them on the spot; the result of this verification was that virtually no data was missing for subsequent

analyses. Completing the questionnaire generally took the adolescents 10 to 15 minutes. For each question mentioning “one of my parents” which was answered in the affirmative, a space was provided in which the adolescent could specify to which parent he was referring—mother, father, or both. When he had completed the questionnaire, the interviewer collected it and debriefed him as to the nature of the study. He was informed that it concerned his responsibilities in his family of origin and the possible role reversals that he may have experienced which may have resulted in him providing physical or emotional care to one or both of his parents. Each adolescent was then given the author’s telephone number and was invited to call with any further questions. Each adolescent was given \$5.00 and thanked for participating in the study.

Assessment of parentification

Controlling for demographic variables

In the interview we collected information about birth order, the parental subsystem, the sibling subsystem, and any family transitions which may have occurred during the adolescent’s life. Since all participants had been part of a longitudinal study, we had additional access to previously-collected data.

Personal characteristics of the son. French translations of the Preschool Behaviour Questionnaire and the Elementary School Behaviour Questionnaire (Behar & Stringfield, 1974) had been used in the longitudinal study to assess social and emotional characteristics of the son at several points while he was growing up. Ten items of the Prosocial Behaviour Questionnaire (Weir & Duveen, 1981) had also been included in order to assess the degree of prosocial behaviour exhibited by the son. Scores for “aggressiveness”, “anxiety”, and “prosociability” were available for almost all subjects, as was the “inadaptation” total which had been used in the longitudinal study to differentiate disruptive and nondisruptive boys at age six. Since the participants in this study were taken from these two groups defined by extreme scores on the Preschool Behaviour Questionnaire, the “disruptive/ nondisruptive status” variable was used as a covariate in analysis in order to see what role, if any, it may have played in

discriminating high parentification. It seemed a likely possibility that this dichotomous variable would discriminate between High and Low Parentification, and although the direction of the relationship was not formally hypothesized, it seemed likely that the nondisruptive, “good” son would more naturally take upon himself the role of overresponsible advisor and confidant to one or both of his parents than would the disruptive, acting-out son.

Family characteristics. All of the boys in the present study were from white, French-speaking families. When they were chosen at age six to participate in the longitudinal study, all participants were living in low socioeconomic districts of the Montréal Catholic school board. Information concerning mother’s age and level of schooling was obtained through a telephone interview in 1984 and socioeconomic status was determined by parental scores on the Occupational Prestige Index of Blishen and McRoberts (1976).

Dummy variables were created from the interview data and these variables were juxtaposed with the parentification status of participants who, at age 16, had been living with both parents, with mother only or with father only. Variables found to have a significant relationship with high parentification were used in subsequent analyses. The continuous variable “total number of siblings living with at age 16” was transformed into dummy variables which differentiated the presence of younger and older brothers and sisters. The birth order variable was also transformed into dummy variables which included “eldest”, “first born of several” and “only child” status. The continuous variable “number of years living with another partner of mother”, was transformed into a binary variable which indicated whether or not the boy had lived with any other partners of his mother for more than nine years (i.e., for over half of his lifetime).

Determining the criterion

The dependent variable of this study, the Parentification Score, was obtained from the translated version of the Parentification Scale (Mika, Bergner & Baum, 1987). The following paragraphs will describe the process by which the Parentification Scale was

translated from English into French. After that will be discussed the further refinement of the criterion into the Parentification Score, followed by the determination of the High and Low Parentification groups which constituted the Parentification outcome.

Translation of the Parentification Scale (PS). The Parentification Scale used as the dependent measure was translated into French by five bilingual undergraduate psychology students. After some 25 hours of instruction and study on the concept of parentification, the students completed the translation of the instrument using five steps of the transcultural validation model proposed by Vallerand (1989). First of all, the original committee of five translators translated the Parentification Scale into French creating a preliminary first draft that was a rough word-for-word translation. Next, a second committee made up of three bilingual female students and one professional translator re-translated the 30 questions of the French translation back into English. Following the completion of this parallel back-translation, the members of the first committee carefully compared the four new English versions with the PS in order to verify the degree of accuracy with which their translation had captured the original meanings. Questions which had not been accurately translated were re-translated by the original committee using more precise Québécois idioms. This resulted in the experimental French version of the PS, which was called the *Échelle de parentification (EP)*. Thirdly, each individual French question was evaluated for clarity. As recommended by Vallerand (1989), a third committee of five female students rated each of the 30 questions on a seven-point coherency scale, from “very unclear” to “very clear” (see Appendix E, “Coherency Scale”). This evaluation revealed that several of the translated questions were still unclear. Items receiving a rating of four or less on the Coherency Scale were reworked by the original committee of translators. Fourthly, the English version and immediately afterwards the finalized French version were administered to ten female students enrolled in a psychology course, a similar population to those tested in previous PS research. The order of questions in the French version was randomly altered from that in the English version and it was handed out to each participant only after she had completed the PS. (This ensured that she would not refer back to the Parentification Scale while completing the *Échelle de parentification*). In

order to determine the degree of bilingualism of the participants, as recommended by Vallerand (1989), the French version was accompanied by a Bilingualism Scale (see Appendix F, “Bilingualism Scale”). After this, the translators compared the degree of similarity between English version and French version outcome results for each participant. In order for the translation of a question to be reconsidered, it was determined that there should be a difference of at least two points—(the possible answers for each question ranging from 0 to 4)—between a participant’s answers to the English and French versions of that question. This difference was obtained several times, but only for a very small number of questions and in each case for never more than two or three participants. For most of the women, the Échelle de parentification (EP) appeared to be clear and easy to understand, an accurate parallel version of the Parentification Scale (PS). After comparing Bilingualism Scale results with PS and EP results it was additionally discovered by the translators that most of the participants whose test protocols revealed differences had greater than average difficulties with English. After reflecting upon and reviewing the questions under consideration, the committee decided to preserve their original translations. As a final pre-test, the original and translated versions of the Parentification Scale were administered to 18 female undergraduate psychology students (mean age: 21.4 years, SD = 4.3, range = 19 – 38 years) according to procedures specified by Mika, Bergner and Baum (1987) in order to assess test-retest reliability. Participants were first administered the original version followed by the translated version. The use of university codes or a made-up name assured confidentiality. The Bilingualism Scale was also administered in order to verify the ability of the participants to clearly understand the questions in both languages. The mean Bilingualism Score for this group was 16 with a SD of 2.2 and a range of 11 – 20 (out of a possible range of 5 – 20). A retest of the translated version alone was conducted one week later. Results showed a significant Pearson correlation of $r = .85$, $p < .01$, the critical value for an N of 18 ($df = 16$) = .54. A reliability test with the English version had been conducted by Jarvis (1991) with 28 female undergraduate psychology students. Jarvis used a test-retest interval of four months and obtained similar results ($r = .89$, $p < .0001$).

Results of a test for internal consistency of the new questionnaire were also good (Cronbach's alpha = .91), and an evaluation of construct validity showed a significant and positive correlation between PS and EP results ($r = .85, p < .01$), the critical point for an N of 18 ($df = 16$) = .54. This showed that the interlinguistic reliability was strong. Construct validity of the PS to assess parentification had been established by Mika et al. (1987) through the convergent use of clinical interviews recorded on audiotape. Independent raters trained in family therapy listened to five audiotaped interviews and ranked the participants in terms of their degree of parentification. These rankings were then correlated with the PS results of the participants producing an inter-observer agreement of $r = .98, p < .01$. The PS thus appears to be a valid measure of the degree of parentification of an individual. Since the results of this pretest validated the EP with a population similar to those tested by previous PS studies, we were justified in using this translated instrument to explore the construct validity of parentification in a new culture and with a new population

Refinement of the Parentification Score. Overall, participant answers for the two Parentification Scale periods of "before age 14" and "from age 14 to 16" were found to be very similar across all 82 participants ($r = .81, p < .001$), which may have reflected a tendency to reply in the same way rather than the persistence of the parentified role.¹ The decision was made to use the "from age 14 to 16" scores alone rather than totalling the scores from both time periods which, we surmised, might artificially increase inter-subject differences. These later scores were used in analysis rather than those from the younger age period because frequencies were higher. While some of the sibling caretaking responsibilities or household responsibilities mentioned by the PS questions would be quite age-appropriate for an older child, we considered even the occasional occurrence of certain of the parent-child behaviours to be indicative of high parentification, even for an older adolescent.

¹ It is likely that similar responses would have been obtained had the adolescents been asked to respond according to their present family responsibilities, since they were only two to three years older than the "from age 14 to 16" period. However, this would have implied the creation of a new instrument.

The focus of the present study was the parent-child dimension of parentification. We thus excluded from the criterion all questions of the Parentification Scale which did not relate to the parent-child relationship: those of Subscale 3, “Child as Parent to Sibling(s)” (12 questions) and also those of Subscale 4, “Child Performs Household Tasks” (4 questions). We also excluded one question from Subscale 1 (#7) because it was worded in such a way as to presume the presence of younger siblings. In other words, the final criterion measure, hereinafter referred to as the Parentification Score, consisted of the totalled “from age 14 to 16” item scores of the 13 questions of the EP which focussed upon the parent-child relationship: questions #8, #11, #15, #20, #23, #27 and #30 (Subscale 1, “Child as Spouse to Parents”) and #4, #5, #10, #14, #22, #26 (Subscale 2, “Child as Parent to Parents”). The scoring of each of these items was as follows: “never or does not apply to me” = 0, “rarely” = 1, “occasionally” = 2, “often” = 3 and “very often” = 4. No prior factor analysis had been done on the 30-item Parentification Scale. A factor analysis performed on the 13 parent-child items used in this study confirmed the theoretical validity of different subtypes of parentification. Table 2 presents the rotated results of this factor analysis which identified four factors explaining 61.9% of the total variance.

The first factor, which by itself explained 32.6% of the variance, was comprised of four questions, three of which presented the son as *mediator* between his parents. A subsequent factor analysis forcing the items into five factors also included question #8 in this strongest factor. These five questions served as the best discriminators of high parentification. The second factor contained three questions which presented the son as *confidant and comforter* to his parents, and especially to his mother. The third factor presented the son as *advisor* to his parents. (Question #10 seemed to fit better conceptually in this factor and it correlated almost as highly with this factor as it did with Factor 2). The fourth factor contained the remaining two questions which appeared to have the least relevance to the Parentification Score. Three of the questions—“my parent(s) told me secrets” (#20), “my father shared problems with me” (#27) and “my parent asked me for advice vs. asking the other parent” (#30)—had no correlation coefficients greater than .40 with any of the other questions, and were the least important

discriminators of high parentification of the 13 parent-child questions. When these questions were excluded from the factor analysis, the composition of the three strongest factors remained as above.

Differentiation of the Low and High Parentification groups. The mean Parentification Score for the 82 adolescents was 14.48 with a standard deviation of 7.95 and a range of scores from 1 to 37. The criterion used by this present study was the Parentification outcome: a dichotomizing of the adolescents into two groups, designated Low and High Parentification. Although using a continuous measure might have seemed to be the more logical choice (given the normal distribution of the Parentification Scores), the central goal of the study was to explore which observational variables would be most predictive of an extreme degree of parentification in the adolescent participants rather than to correlate the observational variables with a continuum of scores. It is for this reason that the Parentification Scores were dichotomized rather than considered as a continuum. The High Parentification group was made up of those cases scoring approximately one standard deviation above the mean Parentification Score ($n = 18$). Mika (1987), in her initial assessment of 100 college-aged females using all four subscales of the Parentification Scale, noted after having correlated clinical interviews with Parentification Scale scores that a score representing approximately one standard deviation above the mean appeared to demarcate a “clinically significant” degree of parentification within the sample she was testing. Although the sample tested in the present study may not share the same characteristics, it was decided that this would be an acceptable cut-off point for the High Parentification group. A score one standard deviation above the mean is generally accepted as the cut-off point for a significant condition (see Kasdin, 1985). In the present study this represented a score of 20 or higher, and included the top 17% of cases. A score of 20 meant that the adolescent had most frequently responded “rarely” or “occasionally” to the 13 parent-child questions. This may not seem to be a high frequency for the adolescent to be considered highly parentified, but for most of the questions in the Child-Parent subscale it could be argued that even one occurrence of the behaviours referred to would provide evidence for a diffusion of intergenerational boundaries. For example, # 20 reads, “I restored peace if

Table 2

Principal Component Analysis of Child-Parent Subscale (Varimax Rotation with Kaiser Normalization) (N = 82)

Subscale Items ^a	Factors			
	1	2	3	4
Child as mediator				
Made peace between parents (4)	.77	.28	-.05	.07
Sided with one parent (11)	.73	-.16	.36	-.02
Mediated between parents (22)	.65	.42	.24	-.16
Cared for sick parents (5)	.55	.17	.02	.37
Child as confidant				
Mother shared problems (23)	-.01	.86	.24	.14
Parents told secrets (20)	.20	.64	-.07	.09
Consoled parents (26)	.30	.59	.25	.24
Parents asked adult advice (10)	.26	.36	.34	.33
Child as advisor				
Parents gave much influence (14)	.22	-.03	.75	.10
Parents discussed \$ problems (15)	-.13	.40	.74	-.08
One parent discussed the other (8)	.39	.15	.53	.18
Other				
Father shared problems (27)	.02	.17	-.01	.86
Parent asked advice vs. asking other parent (30)	.05	.08	.52	.60
% of variance explained	32.6	11.0	9.8	8.5

Note. ^aNumbers in parentheses refer to Parentification Scale questions (French version)

conflicts developed between my parents”, and # 4 reads, “My parent(s) shared intimate secrets (e.g., concerning relationships and/ or sexual issues) with me.” Even if Parentification Scores were not extremely high, the High Parentification group clearly included the most highly parentified members of this particular sample of adolescents. The group referred to, for the sake of clarity, as the Low Parentification group was actually made up of those cases scoring low or medium Parentification Scores ($n = 64$).

Determining the observational predictors

Predictor variables for this study consisted of behaviours observed in the context of mother-son interaction on the two occasions when the mothers and sons came to the learning lab to be videotaped doing a computer task together. A learning task was

considered to be an ecologically valid situation in which to observe normative parent-child behaviour. Learning is the most important activity in adolescence, and a learning task on a computer was assumed to increase the adolescent's motivation to focus on the task. The choice of observational variables was inspired by the research of Sroufe et al. (1980, 1985); the present study adapted their target behaviours for the assessment of parentification to an adolescent population and to the specific learning task under observation. Both mother's parentifying behaviours and son's parentified behaviours were included as potential predictors of high parentification. Table 3 provides a list of possible parentified and parentifying behaviours based loosely upon the Parentification Scale (Mika et al., 1987) and the work of Sroufe (1980, 1985), and indicates which of these behaviours were looked for in the videotaped mother-son interactions of the present study. More clinically significant parent-child relationship dynamics such as incest or co-dependency could also be added to this list.

Each of the twelve mother-son interactions observed and coded was thought to give evidence either for or against a highly parentified relationship between mother and son insofar as it would be observable within the context of the laboratory learning task. In this controlled setting, the son's clearly defined and age-appropriate role was to learn and perform the task, and the mother's role and clearly stated directive was to support her son as he was performing his task. In particular, raters watched for evidence of task role reversal between mother and son and also for evidence of a peer-like relationship rather than one in which the mother provided appropriate support and structure for her son. Specific behaviours were operationalized as "task" observation items and "relationship" observation items for both mother and son.

"Task" items hypothesized to predict high parentification. The first two task items were hypothesized to predict non-membership in the High Parentification group, and the other four items were hypothesized to predict membership in this group. Mother task items were "mother provides adequate direction and support" (gives encouragement to her son or calls him back on task); "mother touches the computer screen" (points out possibilities and offers suggestions to her son); "mother takes over the keyboard" (types

Table 3

Parentified/ Parentifying Behaviours Observable in Child-Parent Interaction

Type of Interaction	Child <u>Parentified behaviours</u>	Parent <u>Parentifying behaviours</u>
Relationship-related	ENMESHMENT	
	<ul style="list-style-type: none"> • "enmeshed" with parent (high frequency of eye contact) 	<ul style="list-style-type: none"> • "enmeshed" with child • does not encourage individuation
	GENERATIONAL BOUNDARY DIFFUSION (PEER-LIKE RELATIONSHIP)	
	<i>Spouse-like relationship . . .</i>	
	<ul style="list-style-type: none"> • relates to parent as a peer (teases/ "flirts" with parent) • listens to parent's personal problems • consoles, "counsels", gives advice 	<ul style="list-style-type: none"> • relates to child as a peer (teases/ "flirts" with child) • shares personal problems with child • "uses" child as confidant, counselor, advisor • "triangulates" child = chooses child over spouse
	<i>Parent-like relationship . . .</i>	<i>Child-like relationship . . .</i>
	<ul style="list-style-type: none"> • mediates between parents • "takes care of" sick parent 	<ul style="list-style-type: none"> • depends on child to serve as a mediator, "go-between" with spouse • depends on child for care when sick
Task-related	ROLE REVERSAL	
	<ul style="list-style-type: none"> • hyper-attentive to parent's needs (allows parent to take over keyboard) 	<ul style="list-style-type: none"> • neglectful of child's needs (does not offer needed structure/ support) (takes over child's learning role)

Note. Behaviours observed within the lab learning task are shown in parentheses.

three or more keystrokes in a row, in effect taking over her son's assigned task); "mother continues doing the task" (remains on the keyboard for 30 seconds); "mother sits down in her son's place" (takes over her son's chair); and "mother preens" (looks at herself in the mirror rather than paying attention to what her son is doing). "Son protests mother's

unwanted help” was hypothesized to predict non-membership in the High Parentification group, and “son accepts mother’s help without protesting” and “son offers the keyboard/ his chair to his mother” were hypothesized to predict a High-Parentification outcome.

“Relationship” items hypothesized to predict high parentification. The one mother relationship item was “mother teases/ flirts with son”, which included mother-initiated tickling, teasing or flirtatious behaviours, used to operationalize a peer-like relationship between mother and son. The first relationship item for the son was “son initiates eye contact with mother”; a high frequency of son-initiated eye contact was hypothesized to indicate an over-preoccupation with his mother’s presence, since the son had been directed to work as autonomously as possible on his task. The second relationship item was “son teases/ flirts with mother”, with tickling, teasing or flirtatious behaviours also taken to illustrate the peer-like or spouse-like relationship between child and parent found by Sroufe et al. (1980, 1985) in their work with younger children to be an indicator of high parentification.

Codification of the mother-son videotapes. Two raters trained to code the mother-son videotapes by observing videotapes of non-subjects. They spent approximately 20 hours refining their technique as well as the rating protocol, watching some 20 practice videotapes together until desired overall reliability levels of .70 (Cronbach’s alpha) were achieved. Following this, the 164 videotapes (two per adolescent participant) were observed independently by the raters and each occurrence of the target behaviours was recorded by hand on a form created for this purpose, a time grid which covered both 10-minute tasks (see Appendix G, “Mother-son interactions observed in laboratory setting” and Appendix H, “Mother-son interactions recording form”). A complete record sampling method (Altman, 1974) was used, with each occurrence of the mother’s behaviours recorded in a first viewing and each occurrence of the adolescent son’s behaviours recorded in a second viewing. Each rater coded the videotapes for 54 mother-son dyads: 27 which were coded by the other rater as well and 27 which were coded by him alone. In other words, final reliability checks were based on interrater reliabilities for one third of the total group of subjects at T₁ and again at T₂,

with each rater observing a total of 108 videotapes. Raters were blind to disruptive/nondisruptive status and to the Parentification Scores of the adolescents.

Refinement of the predictor variables. In an effort to increase the power of analysis, item counts for easy and difficult tasks were totalled in order to create one combined score for each observational variable. During the preliminary analysis it was found that 5 of the 12 observational items had acceptable interrater reliabilities at T₁, when the participants were 13-14 years old, and that 4 items had acceptable reliabilities at T₂, two years later. Table 4 presents the alphas for these observational predictors which were used in subsequent analyses.

Table 4

Interrater Reliabilities for Observational Predictors (n = 27)

Predictor	Cronbach's alpha		
	T ₁	T ₂	<u>M</u>
Mother "preens"	.75	.83	.79
Mother touches screen	.96	.97	.96
Mother takes over	.83	.98	.90
Son initiates eye contact	.83	.87	.85
Son teases/ "flirts" ^a	.94	--	.94
<u>M</u>	.86	.91	.88

Note. Tasks took place in the Learning Lab and involved both mother and son. At T₁ the average age of the 27 subjects was 13.3 years, SD = .53. At T₂, the average age of subjects was 15.3 years, SD = .53. ^aLow frequencies coded by one rater at T₂

The five T₁ observation items were "mother preens", "mother touches screen", "mother takes over keyboard", "son initiates eye contact", and "son teases/ flirts with mother". For T₂, the four acceptable observation items were "mother preens", "mother touches screen", "mother takes over", and "son initiates eye contact". "Son teases/ flirts with mother" was observed in extremely low frequencies at T₂, only twice by one rater and eight times by the other, and this could explain the low interrater reliability for this item. Following the combination of easy and difficult task frequencies into one observational score, the scores of the two raters were combined in order to create one complete set of

observational item ratings for all 82 subjects with no missing data. The acceptable observational predictors, five from T₁ and four from T₂, were then entered into a factor analysis (with varimax rotation) which identified four factors explaining 69.5% of the total variance; the highest loading factor, which explained 23% of the variance, included “son initiates eye contact” (at T₁ and T₂), and “son teases/ flirts” (at T₁). The three other factors were “mother preens” (T₁ and T₂), “mother takes over” (T₁ and T₂), and “mother touches screen” (T₁ and T₂). Table 5 presents the descriptive statistics for the predictor variables which were found to have acceptable reliabilities and were used in subsequent analyses. Interrater reliabilities and descriptive statistics for the remaining eight variables which were not included in the univariate analysis are presented in Appendix L (see Table 1-A).

Table 5

Descriptive Statistics of Continuous Predictor and Demographic Variables (N = 82)

Variables	Frequencies		<u>M</u>	<u>SD</u>	Skewness	Kurtosis
	Minimum	Maximum				
<u>T₁ Predictors</u>						
Mother "preens"	0	13	.82	1.94	4.00	19.97
Mother touches screen	0	20	5.12	4.54	1.14	1.01
Mother takes over	0	22	1.50	3.30	3.75	18.48
Son initiates eye contact	0	74	16.55	12.96	1.61	4.21
Son teases/ "flirts"	0	5	.39	.99	3.36	12.10
<u>T₂ Predictors</u>						
Mother "preens"	0	8	.76	1.45	2.66	8.26
Mother touches screen	0	11	2.84	2.82	1.08	.49
Mother takes over	0	10	.59	1.70	3.56	13.70
Son initiates eye contact	0	63	10.54	11.12	1.94	5.59

Sroufe & Ward (1980) decided to include a mother-child dyad in their high parentification group following even one occurrence of any of the target behaviours thought to indicate “seductiveness”. Fish et al. (1991) made the same decision due to the relatively low frequency of certain observed behaviours in their study. They also considered the occurrence of these behaviours to be sufficient for inclusion in the

parentified group. Such was the course also followed by this present study. Three of the five T_1 observational predictors presented low mean frequencies and two out of four T_2 predictors did as well, resulting in unacceptably high kurtosis and skewness scores. These variables—“mother preens”, “mother takes over” and “son teases/ flirts with mother”—were dichotomized in order to differentiate occurrence from non-occurrence of the target behaviour for each participant. Given the brevity of the observational period in the present task and the clear direction that had been given to the son to concentrate on his task, it was admissible to allow even one occurrence of a target behaviour to serve as a clue to a highly parentified relationship between mother and son. Even one instance of “mother taking over”, for example, was thought to indicate an inappropriate degree of involvement by the mother in her son’s task, and even one instance of “son teasing and flirting” was thought to give evidence of a peer-like relationship between mother and son rather than one demarcated by clear intergenerational boundaries. The two variables “mother touches screen” and “son initiates eye contact with mother” were found to have higher overall frequencies and normal distributions. These two variables were also transformed into dichotomous variables, differentiating not presence from absence but rather higher from lower frequencies of the behaviours, as defined by the median split of the scores.

Finally, since the T_1 - T_2 correlations for four of the observational predictors were found to be highly significant, the decision was made to add T_1 and T_2 scores together in order to produce binary variables which reflected this age trend. In other words, for “mother takes over”, a positive score for this new variable indicated that the behaviour was observed both in the task performed when the son was 13-14 and also in the task performed when he was 15-16. This was also the case for “mother preens”. For “son initiates eye contact”, a positive score indicated that a high frequency of son-initiated eye contact towards his mother was observed in both tasks, as was also the case for “mother touches screen”. As a result, the four new predictors were more-stringent, and they were tested along with “son teases/flirts” (T_1) in terms of their ability to discriminate between Low and High Parentification groups.

CHAPTER III

RESULTS

Statistical analysis of the data

All statistical analyses on the data were performed on all 82 cases, with no missing data to contend with. An alpha level of .05 was used for all statistical tests.

The results are presented in three sections. First to be presented are the Parentification Score results and intercorrelations of the continuous observational predictors. Next presented are the univariate analyses which were used to evaluate the relationship between the criterion and each of the dichotomous predictor variables. The criterion in this study was Parentification outcome (the High Parentification group versus the Low Parentification group). Third to be presented are the logistic regression results which identified the best predictors of high parentification.

As mentioned above, the High Parentification group included those adolescents who had obtained Parentification Scores approximately one standard deviation above the mean score. The Low Parentification group contained the rest of the adolescents who had scores in the low and moderate ranges. Differences between the High Parentification group ($n = 18$) and the Low Parentification group ($n = 64$) were investigated through the use of univariate statistics. First of all, t -test statistics were used to check for significant group differences for several control variables and for personality traits of the son which had been assessed by the longitudinal study. Secondly, chi-square analyses were used to test relationships between the variables in the present study, since the outcome variable was discrete as were the transformed observational predictor variables. Predictor and control variables which passed this univariate screening were included in the regression analysis.

The purpose of the regression analysis was to determine which variables would best predict membership in the High Parentification group. The decision was made to use the logistic regression procedure to analyze the relationship between the control and observational predictor variables and the High/Low Parentification outcome. Logistic regression has the advantage of being robust when used with a dichotomous criterion and

it yields the probability (“odds ratio”) that a certain predictor will produce a positive response while simultaneously considering the contribution of each of the other predictors. A stepwise logistic regression assessed the relative contribution of the strongest predictor and control variables to the High/Low Parentification outcome. Entered in the first block of the initial analysis were the control variables. The second block included those predictor variables which had been found through univariate analysis to have a relationship with the Parentification outcome not likely due to chance. The third block included significant interaction effects between the predictor variables. Entry of the variables in the regression equation (forward solution) was determined on the basis of an ordering of importance. The item which was the strongest univariate discriminator of the criterion was entered first in the regression equation. The next step included the variable which caused the greatest incremental increase in the -2 Log Likelihood after having accounted for the first item entered. The level of entry was progressive and incremental. A subsequent stepwise logistic regression analysis was performed using the three variables which had proven to be the best predictors of High Parentification.

Table 6 presents definitions of the Parentification Score and the Parentification outcome and provides brief descriptions of each of the observational predictors and control variables used in the univariate and logistic regression analyses.

Table 6

Descriptions of Criterion and Dichotomous Predictor and Control Variables Used in Analysis

Name of variable	Description of variable
<u>Criterion</u>	
Parentification Score	Combined total of "age 14 to 16" scores for the 13 Child-Parent items of the Parentification Scale (French version)
Parentification Outcome	High Parentification group: cases ($n = 18$) with a Parentification Score ≥ 20 (approximately one <u>SD</u> above the mean score) Low Parentification group: the rest of the cases ($n = 64$)
<u>Predictors</u>	
Mother "preens"	Mother glances at herself in the two-way mirror/ focuses on herself and not on what her son is doing (0 = non-occurrence/ 1 = occurrence)
Mother touches screen	Mother touches the screen while offering her son suggestions on how to do his computer task (0 = low frequency/ 1 = high frequency)
Mother takes over	Mother types three or more consecutive keystrokes while working on her son's computer task (0 = non-occurrence/ 1 = occurrence)
Son initiates eye contact	Son glances up at his mother in an attempt to establish eye contact with her (0 = low frequency/ 1 = high frequency)
Son teases/ "flirts"	Son acts in a familiar, peer-like way with his mother during the task, teasing or tickling her or joking with her (0 = non-occurrence/ 1 = occurrence)
<u>Controls</u>	
Group status	Son's "disruptive"/ "nondisruptive" group assignment at age 6 based on his PBQ score (0 = disruptive/ 1 = nondisruptive)
"Only child" status	Son is an only child (0 = no/ 1 = yes)
Living with mother alone	Son is living with his mother alone at age 16 (i.e., not with both parents or with father alone) (0 = no/ 1 = yes)

Parentification Score results

The Parentification Score was the total of “age 14 to 16” item scores for the Child-Parent subscale, which was comprised of the 13 questions of Subscales 1 and 2 of the Parentification Scale (French version). These two subscales evaluated the child’s role as “spouse” or “parent” to one or both of his parents, and produced Cronbach’s alphas of .67 and .75, respectively. A validity analysis of the items comprising the Parentification Score produced an alpha of .82, indicating an acceptable level of internal consistency for this subscale. Parentification Scores had a mean of 14.5 and a standard deviation of 7.95, with skewness of .61 and kurtosis of .23. Table 7 presents the correlation matrix for the four a priori subscales proposed by the authors of the Parentification Scale (Mika et al., 1987) and also for the Child-Parent subscale central to the present study. (In order to compare the other subscale scores with that of Subscale 3, “Child as Parent to Siblings”, this correlation matrix was limited to those 46 adolescents who were living with at least one younger sibling at age 16.) The Parentification Score was highly significant and positively correlated with three of the four subscales, and was also significantly and positively correlated with the results of Subscale 3 which evaluates the child’s role as “parent” to his younger siblings. The only low and nonsignificant correlation was between Subscale 1, “Child as Spouse to Parent(s)”, and Subscale 3, “Child as Parent to Sibling(s)”.

Table 7

Intercorrelations Between Parentification Scale Subscales and Child-Parent Subscale (n = 46)

Subscale	1	2	3	4	5
1. Child as "Spouse" to Parent(s)	--	.70**	.19	.30*	.93**
2. Child as "Parent" to Parent(s)		--	.46**	.46**	.90**
3. Child as "Parent" to Sibling(s)			--	.50**	.33*
4. Child Performs Household Tasks				--	.42**
5. Child-Parent subscale ^b					--

Note. Age 14-16 scores used in analysis. ^aOnly subjects living with younger siblings at age 16 were included in this analysis. ^bTotal score on this subscale is called the Parentification Score.

*p < .05. **p < .01.

Table 8 presents the frequency with which each response, from “very often” to “never or does not apply”, occurred for each of the 13 questions making up the Parentification Score. This information would generally not be presented, but in this case it was considered necessary since the present study introduced for the first time the translated version of the PS as well as the Child-Parent subscale. The average scores obtained by the participants on individual subscale items help to describe what high parentification looked like in this population.

The two Parentification Scale items which stood out for having the highest frequencies of “very often” or “often” responses were #15 and #23: at least one parent discussed financial problems with 26 (31.7%) of the 82 adolescent participants when they were between 14 and 16 years of age, and mothers shared personal problems or cares with 23 (28.1%) of their sons within this same time period. Interestingly, these two items were among those five questions with the highest mean scores for the entire Parentification Scale, the other three questions being task-related (“I did dishes”, “I cleaned house” and “I made dinner”). The three questions which had the fewest “very often” or “often” responses were #22, #27 and #30: only 4 (4.9%) of the adolescents reported having to frequently mediate between their parents or listen to their father’s personal problems, and only 5 (6.1%) reported a parent’s having frequently asked them for advice rather than asking the other parent. An average of 11.1 cases (13.6%) presented a “very often” or an “often” response for each of the 13 questions. In contrast to this, “never or does not apply” was a much more frequent response for this sample, with an average of 33.5 cases (40.9%) choosing this response for each of the 13 questions. In answering questions #22 and #30, 54 (65.9%) of the 82 participants reported that they had never mediated between their parents, and 54 also reported that they had never been asked for advice by a parent who chose not to ask the other parent. The least frequent “never” response was for question #23; only 14 adolescent sons (17.1%) reported that their mothers had *never* shared personal problems or concerns with them as if they were adults.

Table 8

Frequency of Responses for Child-Parent Subscale Items (N = 82)

Parentification Scale Items ^a	"Very often"		"Often"		"Occasionally"		"Rarely"		"Never/NA"	
	n	%	n	%	n	%	n	%	n	%
Made peace between parents (4)	1	(1.2)	7	(8.5)	17	(20.7)	23	(28.0)	34	(41.5)
Cared for sick parents (5)	2	(2.4)	12	(14.6)	20	(24.4)	22	(26.8)	26	(31.7)
One parent discussed the other (8)	2	(2.4)	9	(11.0)	16	(19.5)	15	(18.3)	40	(48.8)
Parents asked adult advice (10)	2	(2.4)	11	(13.4)	28	(34.1)	18	(22.0)	23	(28.0)
Sided with one parent (11)	1	(1.2)	7	(8.5)	10	(12.2)	17	(20.7)	47	(57.3)
Parents gave much influence (14)	2	(2.4)	11	(13.4)	23	(28.0)	22	(26.8)	24	(29.3)
Parents discussed \$ problems (15)	6	(7.3)	20	(24.4)	18	(22.0)	16	(19.5)	22	(26.8)
Parents told secrets (20)	2	(2.4)	5	(6.1)	23	(28.0)	17	(20.7)	35	(42.7)
Mediated between parents (22)	2	(2.4)	2	(2.4)	7	(8.5)	17	(20.7)	54	(65.9)
Mother shared problems (23)	4	(4.9)	19	(23.2)	26	(31.7)	19	(23.2)	14	(17.1)
Consoled parents (26)	4	(4.9)	5	(6.1)	25	(30.5)	29	(35.4)	19	(23.2)
Father shared problems (27)	--	--	4	(4.9)	15	(18.3)	19	(23.2)	44	(53.7)
Parent asked advice vs. asking other parent (30)	1	(1.2)	4	(4.9)	10	(12.2)	13	(15.9)	54	(65.9)

Note. ^aNumbers in parentheses refer to Parentification Scale questions (French version)

Following nine of the 13 Child-Parent questions, the adolescent was asked to specify which parent had entrusted him with adult responsibilities. For the 18 adolescents in the High Parentification group, “mother”, which was chosen 65 times (42.8%), was the most frequent response, followed by “both parents” which was chosen 59 times (38.8%), “neither parent” which was chosen 17 times (11.2%), and last of all, “father” which was chosen 11 times (7.2%). Nine of the highly-parentified adolescents said that they sided with their mothers after an argument (# 11) versus five who sided with both parents on different occasions and one who sided with his father. Eight took care of a sick mother alone (# 5) while eight said they took care of both parents when they were sick and none took care of a sick father alone. Eight said that their mothers came to them to discuss their fathers (# 8) while six said that both parents did this and one said that his father came to him to discuss his mother.

As was mentioned in Chapter II during the discussion of a factor analysis of these 13 items (see Table 2), the lowest item correlations with the total Parentification Score were for “father shared his personal problems with me” (# 27) and “my parent(s) told me intimate secrets” (# 20). The two items with the highest correlation coefficients with the Parentification Score were “I consoled my parent(s) when they were distressed” (# 26) and “I mediated between my parents”(# 22). The four items which appeared to be the best discriminators of high parentification were “mediated between parents” (# 22) (although this was one of the three items occurring the least frequently), “restored peace between parents” (# 4), “sided with one parent against the other” (# 11) and “one parent would discuss the other parent with me” (# 8).

Intercorrelations between continuous observational predictors

Before the five continuous observational predictors were transformed into dichotomous variables, they were correlated from T_1 to T_2 in order to determine whether or not they had remained stable across time. Table 9 presents the intercorrelations between these predictors (which were obviously non-multicollinear) and indicates in bold type the highly significant stability across time demonstrated by four of the five

variables—“mother preens”, “mother touches screen”, “mother takes over” and “son initiates eye contact”. In effect, these repeated measures provided the equivalent of test-retest correlations for the observational predictors over a period of two years, from when the adolescent was 13-14 years old until when he was 15-16 years old.

Table 9

Intercorrelations Between Observational Predictors (T₁ and T₂) (N = 82)

Predictors	1	2	3	4	5	6	7	8	9
T ₁									
1. Mother "preens"	--	-.23*	-.08	.04	.14	.56***	-.09	-.04	-.15
2. Mother touches screen		--	-.03	.08	-.22*	-.08	.31**	-.05	-.04
3. Mother takes over			--	.17	.08	.08	.10	.41***	.35**
4. Son initiates eye contact				--	.14	-.05	.13	.08	.64***
5. Son teases/ "flirts" ^a					--	.10	-.07	-.04	.15
T ₂									
6. Mother "preens"						--	-.02	-.01	-.11
7. Mother touches screen							--	.09	.12
8. Mother takes over								--	.26*
9. Son initiates eye contact									--

Note. T₁ - T₂ correlations are shown in bold type. ^aThis item did not show interrater reliability at T₂. *p < .05. **p < .01. ***p < .001.

Univariate analysis of observational predictors and control variables

Students' *t*-tests were used to check for significant differences between the High and Low Parentification groups for variables from the longitudinal study such as mother's age, mother's education, and son's performance IQ in the lab learning situation (operationalized as the number of errors he scored on the computer task). Also compared were the means for sons' scores on aggressiveness, anxiety, inadaptation, and prosociability for the two groups. Results of these analyses are presented in Table 10. No significant differences were found between High and Low Parentification groups based on any of these variables.

Table 10

T-Tests Comparing Parentification Group Means for Selected Control Variables and for Elementary School Behaviour Questionnaire Scores for Sons on Aggressiveness, Anxiety, Inadaptation and Prosociality

Variables	High Parentification			Low Parentification			Student's T-Test Results		
	n	M	SD	n	M	SD	t	(df)	p
Control variables									
Age of son at T3	18	18.6	(0.3)	64	18.6	(0.3)	-0.00	(80)	1.00
Age of mother at T3	18	43.5	(2.7)	63	42.9	(4.8)	.54	(79)	.59
Mother's years of schooling	18	11.3	(1.4)	64	10.6	(2.1)	1.22	(80)	.22
Son's total errors on computer task	18	445.7	(310.7)	60	383.0	(268.9)	.84	(76)	.41
Sons' QECP and QECEL Scores¹									
Aggressiveness									
(age 6) (1984)	18	7.4	(7.4)	64	7.8	(7.7)	-2.0	(80)	.84
(age 10)(1988)- at school	17	5.4	(6.1)	64	8.1	(6.9)	-1.46	(79)	.15
Anxiety									
(age 6) (1984)	18	2.7	(3.4)	64	2.5	(2.7)	.33	(80)	.74
(age 10)(1988) - at school	17	3.6	(2.7)	64	3.9	(2.4)	-.32	(79)	.75
Total inadaptation²									
(age 6) (1984)	18	12.8	(12.1)	64	13.4	(11.6)	-.21	(80)	.83
(age 10)(1988) - at school	17	13.2	(10.6)	64	16.8	(10.7)	-1.22	(79)	.23
Prosociality									
(age 6) (1984)	18	8.9	(5.2)	64	8.0	(5.7)	.64	(80)	.52
(age 10)(1988) - at school	17	7.1	(5.4)	64	7.2	(4.6)	-.11	(79)	.91

¹"Questionnaire : évaluation du comportement préscolaire" and "Questionnaire : évaluation du comportement à l'école élémentaire", French translations of the Preschool Behavioral Questionnaire and Elementary School Behavioral Questionnaire (Behar & Stringfield, 1974)

²combined aggressiveness/ hyperactivity/ distractibility scores

Next, chi-square analysis was used to explore the relationship between each of the dichotomous predictor and demographic control variables and the Parentification outcome. The purpose of this analysis was to discover which variables best discriminated between the adolescent sons who were most highly parentified and those who were not. Table 11 presents the chi-square findings along with the frequencies of these variables in the High and Low Parentification groups.

At this stage of the analysis, the predictors were tested individually for their ability to discriminate the Parentification outcome. “Son initiates eye contact with mother” (T1 + T2) proved to be the most important discriminator in this study between those adolescents who were the most highly parentified and those who were not. A total of 31 (37.8%) of the adolescent sons initiated high frequencies of eye contact with their mothers during both lab tasks, when they were 13-14 and when they were 15-16; of these 31 sons, 12 were in the High Parentification group ($n = 18$) and 19 were in the Low Parentification group ($n = 64$). This means that 66.7% of the highly-parentified adolescents demonstrated this behaviour over the course of both tasks as compared with 29.7% of the Low Parentification group members, $\chi^2 = 8.17 (1), p < .01$. “Son teases/flirts with mother” (T₁) was the second most important discriminator in our study. Teasing and ‘flirting’ behaviour was observed in 17 (20.7%) of the 82 adolescent sons, 8 of whom were members of the High Parentification group and 9 of whom were in the Low Parentification group, the other 83% of the cases. This means that over 44% of the most highly parentified sons were observed in peer-like interaction with their mothers while teasing and flirting behaviours were observed in only 14% of the rest of the sons, $\chi^2 = 7.90 (1), p < .01$. A significant relationship was found between these two dichotomous variables when “son teases/flirts with mother” at T₁ was compared with “son initiates eye contact with mother” at T₂; 82.3% of adolescent sons who were observed having a peer-like relationship with their mothers when they were 13-14 years old initiated a high frequency of eye contact with their mothers when they were 15-16, as opposed to 43.1% of sons who had not been observed teasing and flirting with their mothers when they were 13-14, $\chi^2 = 8.32 (1), p < .01$.

Table 11

Observed Frequencies of Dichotomous Predictor and Control Variables and Chi-Square Analyses with the Parentification Outcome (N = 82)

Variables	Parentification Outcome				Total		χ^2
	High (n = 18)		Low (n = 64)		(N = 82)		
	n	%	n	%	n	%	
T₁ Predictors							
Mother "preens"	7	(38.9)	19	(29.7)	26	(31.7)	.55
Mother touches screen ^a	5	(27.8)	32	(50.0)	37	(45.1)	2.80
Mother takes over	3	(16.7)	26	(40.6)	29	(35.4)	3.53
Son initiates eye contact ^b	13	(72.2)	31	(48.4)	44	(53.7)	3.20
Son teases/ "flirts"	8	(44.4)	9	(14.1)	17	(20.7)	7.90**
T₂ Predictors							
Mother "preens"	3	(16.7)	25	(39.1)	28	(34.1)	3.13
Mother touches screen ^c	9	(50.0)	29	(45.3)	38	(46.3)	.12
Mother takes over	3	(16.7)	11	(17.2)	14	(17.1)	.00
Son initiates eye contact ^d	14	(77.8)	28	(43.8)	42	(51.2)	6.51*
T₁ + T₂ Predictors							
Mother "preens" ^e	3	(16.7)	11	(17.2)	14	(17.1)	.00
Mother touches screen ^f	4	(22.2)	19	(29.7)	23	(28.0)	.39
Mother takes over ^c	0	(0.0)	9	(14.1)	9	(11.0)	2.84
Son initiates eye contact ^f	12	(66.7)	31	(29.7)	31	(37.8)	8.17**
Control Variables							
Group status ^g	9	(50.0)	34	(53.1)	43	(52.7)	.06
"Only child" status	5	(27.8)	4	(6.3)	9	(11.0)	6.66*
Living with mother alone	6	(33.3)	26	(40.6)	32	(39.0)	.31

Note. For all χ^2 analyses, df = 1. ^amedian split = 5. ^bmedian split = 14. ^cmedian split = 3. ^dmedian split = 7. ^eFor these two variables, 1 = occurrence of behaviour at both T₁ and T₂. ^fFor these two variables, 1 = high frequency of observed behaviour at both T₁ and T₂. ^g1 = nondisruptive status. *p < .05. **p < .01.

One other T₁ + T₂ predictor variable tended towards significance in its ability to discriminate between these two groups: "mother takes over", $\chi^2 = 2.84$ (1), p < .10. None of the 9 adolescents whose mothers took over their computer task both at T₁ and T₂ were

in the High Parentification group. This was the opposite result of what had been expected; task role-reversal had been hypothesized to characterize sons in the High Parentification group. When T_1 and T_2 predictors were considered separately, only “son teases/ flirts with mother” (T_1) and “son initiates eye contact with mother” (T_2) were significant in univariate analysis. Four other predictors tended towards significance: “mother takes over” (T_1), “son initiates eye contact with mother” (T_1), “mother preens” (T_2) and “mother touches screen” (T_1); the levels of significance of these variables were .06, .07, .08 and .09, respectively. Since a goal of the present study was to explore the comparative contributions of the observational variables best able to predict high parentification, only “son teases/ flirts with mother” (T_1) and “son initiates eye contact” ($T_1 + T_2$) were considered robust enough to include in the logistic regression analysis.

The control variable which appeared to have the strongest univariate relationship with High Parentification group membership was “only child” status. Nine out of the 82 adolescents (11%) were only children; five of these nine “onlies” were members of the High Parentification group. Of the most highly parentified sons, 27.8% were only children, compared with 6.3% of the Low group, $\chi^2 = 6.66 (1)$, $p < .01$. It is important to note, however, that in the chi-square analysis one cell contained only four subjects due to the small number of only sons in the study. A comparable interval variable, “total number of siblings living with at age 16”, showed a similar trend; the adolescents in this study were living with between zero and five siblings at age 16, and an Independent Samples t -test relating this variable to Parentification outcome showed that members of the Low Parentification group lived with a higher average number of siblings than did members of the High Parentification group, $t = 2.07 (80)$, $p < .05$. This finding was mirrored by a Pearson product moment correlation which showed a significant inverse relationship between the total number of siblings the adolescent was living with at age 16 and his total Parentification Score, $r = -.23$, $p < .05$.

Disruptive/ nondisruptive status was included in univariate analysis in order to see if adolescents who had been identified as “disruptive” or those who had been identified as “nondisruptive” at age six would have a greater likelihood to belong to the High

Parentification group. This variable did not discriminate, as adolescents identified as disruptive or nondisruptive were found in equal proportions in the High and Low Parentification groups. A chi-square analysis performed on the relationship between group status at age six and the Parentification outcome resulted in a nonsignificant chi-square statistic of .06 (1), $p = .81$

The birth order variable was not found to discriminate between adolescents in the High Parentification and Low Parentification groups. Of the 82 adolescent sons in this study, 9 were “only children”, 37 were the firstborn child in the family, and 18 were later-born but the firstborn male. This means that a total of 64 (78%) of the participants were actually “firstborn males”.

The family demographics variable—transformed into dummy variables to differentiate between adolescents who had been living with both parents, with mother alone, with father alone, or with neither parent at age 16—was also not found to discriminate between adolescents in the High Parentification and Low Parentification groups.

Since the goal of this study was to understand which variables most convincingly predicted a higher self-reported level of parentification, the logistic regression results presented here included only the two predictors and the one control variable which had been found to be significant in the chi-square analyses.

Logistic Regression analysis

Logistic regression results are presented in Table 12. The logistic regression procedure was used in order to explore the relative contributions of the control and observational variables discussed above to the High Parentification outcome. For each of the two models presented, the criterion was membership in the High Parentification

group. Parentification Scores had been dichotomized in order to explore which behaviours would most reliably predict the highest degree of parentification.²

According to the block chi-square statistic, Model 1 is superior to Model 2 in terms of overall model fit, and it represents the most parsimonious solution. The block chi-square statistic is significant at the .01 level, and the coefficients for “son teases/ flirts with mother” (T_1) and “son initiates eye contact with mother” ($T_1 + T_2$) are statistically significant at the .01 level. “Son initiates eye contact” was the observational predictor identifying sons who initiated above-average frequencies of eye contact with their mothers both when they were 13-14 and when they were 15-16 years old, while “son teases/ flirts” identified a peer-like relationship between mother and son at age 13-14. These two predictors were almost equally powerful in their predictive ability. In fact, when entered together without the control variables, they had almost identical logit coefficients and odds ratios, predicting in Model 1 with a high degree of significance that sons who teased and flirted with their mothers and who made frequent attempts at eye contact with them were four times more likely to be in the High Parentification group than were adolescents who did not demonstrate these behaviours.

In Model 2, “only child” status, the most reliable of the two control variables, was added to the regression equation, and the model chi-square statistic increased in significance to the .001 level. The McFadden’s- R^2 (a pseudo- R^2 statistic) for this model was .27. In other words, these three variables accounted for 27% of the variance in Model 2, which predicted 80.5% of the responses correctly. When all of the reliable predictor and control variables were entered into a stepwise regression model with inclusion conditional upon an alpha level of .05, these were the three variables which remained in the equation. “Only child” status was highly significant, with an odds ratio of 6.90 and with lower and upper values for the 95% confidence interval of 1.33 and

² For purposes of comparison, a multiple regression making use of the entire continuum of Parentification Scores was also performed on the data using the same three dichotomous predictors. When entered together, “son teases/ flirts” (T_1) had a Beta value of .22 ($p < .05$) and an R^2 of .04; “only child” status had a Beta of .19 ($p > .05$) and an R^2 of .04, and “son initiates eye contact” ($T_1 + T_2$) had a Beta of .20 ($p > .05$) and an R^2 of .06. The Model Summary had an adjusted R^2 of .11, $F(78) = 4.41$, $p < .01$.

Table 12

Logistic Regression Analyses Predicting High Parentification Outcome from Observational and Control Variables (N = 82)

Predictors	B ^a	Wald ^b	ROR ^c	CI ^d	Model chi-square [df]	Block chi-square [df]	% Correct Predictions	McFadden's-R ^{2e}
<u>Model 1</u>								
Constant	-2.36***	23.14	--	--	13.31** [2]	13.31** [2]	81.7	.18
Son teases/ "flirts" (T ₁)	1.46**	5.38	4.30	1.25 - 14.73				
Son initiates eye contact (T ₁ + T ₂)	1.45**	6.00	4.27	1.34 - 13.63				
<u>Model 2</u>								
Constant	-2.65***	23.93	--	--	18.61*** [2]	5.30* [1]	80.5	.27
Son teases/ "flirts" (T ₁)	1.79**	7.05	6.01	1.60 - 22.57				
Son initiates eye contact (T ₁ + T ₂)	1.22*	3.86	3.38	1.00 - 11.38				
"Only child" status	1.93**	5.28	6.90	1.33 - 35.82				

Note. ^aBeta: estimated logit coefficient. ^bsquare of the (asymptotic) t-statistic. ^cRelative Odds Ratio ^d95% Confidence Interval for the Odds Ratio (lower and upper values) ^eLikelihood ratio index (LRI) *p < .05. **p < .01. ***p < .001.

35.82 respectively. This odds ratio indicated that adolescents who had no siblings were almost seven times more likely to belong to the High Parentification group than were adolescents who had siblings. In Model 2, “son teases/ flirts” and “son initiates eye contact” remained significant as predictors, with odds ratios indicating that sons who had a peer-like relationship with their mothers were six times more likely and sons who initiated high frequencies of eye contact with them during the lab tasks were over three times more likely to be highly parentified than were the adolescents who had not been observed behaving in these ways.

One other finding is worth noting in the context of the logistic regression analyses. A significant interaction effect was found for the two observational predictors. The model chi-square for the interaction was 9.6 (1), $p < .01$, with an estimated logit coefficient of 2.32, a Wald statistic of 8.97 and an odds ratio of 10.16. When this interaction was entered in a subsequent regression equation, it was not found to improve the model chi-square or predictive ability. Its addition to the regression equation caused both “son teases/ flirts” and “son initiates eye contact” to become insignificant.

CHAPTER IV

SUMMARY AND DISCUSSION

A review of the literature revealed that high parentification has been informally identified in clinical settings as a problematic parent-child dynamic which may serve as a pathway to many serious personal and relational problems later in life. The goal of the present study was to assess the predictive validity of mother-adolescent son interactions observed in at the beginning of and in mid-adolescence of the sons' self-reported high parentification at the end of adolescence. Videotapes of mother-son interaction while doing a learning task in a structured lab setting had been recorded on two separate occasions, as part of an ongoing longitudinal study, when the adolescents were 13-14 and then when they were 15-16 years old; these tapes were studied in order to assess the stability of parentified behaviour. It was hypothesized that observational assessments of high parentification would be predictive of correspondingly high parentification scores on the self-report measure, the Parentification Scale, administered to the sons when they were 18-19 years old. Boys participating in the longitudinal study had been classified as "disruptive" or "nondisruptive" at the age of six, and as well as exploring the validity of observational predictors, this study also examined whether disruptive or nondisruptive status at age six was reflected in self-reports of high parentification. Additionally, several demographic variables such as birth order, the presence of siblings and living in a single-parent versus a dual-parent household were examined as potential covariates of high parentification.

The results of this study confirmed that two of the behaviours thought to be consistent with high parentification observed in early and middle adolescence did indeed predict membership in the High Parentification group near the end of adolescence. One of the two most important predictors of high parentification was evidence of a peer-like relationship between mother and son, manifested in teasing and 'flirting' behaviours by the son towards his mother. This was observed at T₁ only, when the sons were 13-14 years old. A second predictor of high parentification, a high frequency of eye contact initiated by the son towards his mother, was valid only at T₂ when the sons were 15-16 years old and also when T₁ and T₂ scores were combined. In addition to these results, the study also found that certain task- and relationship-related behaviours thought to be consistent with high parentification were indeed stable across a two-year period. Four of

the observed behaviours, “mother preens”, “mother touches screen”, “mother takes over” and “son initiates eye contact”, were positively and significantly correlated from T₁ to T₂, although the first three did not serve to discriminate between high and low/moderate levels of parentification. In terms of demographic factors, almost 40% of the most highly parentified sons were found to be “only children” (and over half of the “only children” in the study were in the high parentified group) and there was a significant and inverse relationship between Parentification Scores and the number of siblings with whom the adolescents were living at age 16. Contrary to expectation, sons living with their mothers alone did not have higher Parentification Scores than did sons living with both parents. The present study did not find disruptive or nondisruptive status at age six to discriminate low and high parentification.

Hypothesis 1: Observations of mother-son interaction will predict high parentification

The first research hypothesis proposed the validity of the observation of mother-son interactions in early- and mid-adolescence to predict self-reported high parentification near the end of adolescence. It was hypothesized that the observation of behaviours indicative of enmeshment, generational boundary diffusion, or role reversal—several dynamics involved in parentification—would predict a high parentification outcome. These three dynamics were operationalized respectively as mother and son teasing and “flirting” with each other as if they were peers, son initiating a high level of eye contact with his mother during the task, and mother taking over her son’s task on the computer.

Results of this study confirmed that two out of the five behaviours observed during mother-son interaction did appear to predict high parentification self-reported by sons up to five years after the time when the interactions were videotaped.

Enmeshment

The lab task event which, when observed, predicted the most reliably a son’s self-report of High Parentification at age 18 was a high frequency of eye contact initiated by

the son towards his mother. This was especially true during the lab task at T₂, when the sons were 15-16 years old, although when T₁ and T₂ scores were combined the resulting dichotomous variable proved to be a significant discriminator of high and low parentification. In the present study, a high frequency of eye contact initiated by the son towards his mother was the operationalization of a high degree of mother-son enmeshment, another way of describing a highly parentified relationship. Instead of focusing exclusively on his assigned task, the son appeared to be frequently checking out his mother's reaction to what he was doing or saying. Of the adolescents in the highly parentified group, 72 % initiated higher frequencies of eye contact with their mothers, in contrast with 41% of the low group.

Initiated eye contact, or "directed gaze", has been found in the literature to serve as an indication of the level of intimacy in dyadic interactions. Argyle & Cook (1976) found that directed gaze was an "approach behaviour" which signified attentiveness and, when it occurred in higher-than-average frequencies, evidenced a high degree of interpersonal involvement. Rutter, Pennington, Dewey & Swain (1984) suggested from their research that "looking" (in other words, directing one's gaze towards the face of the other person) and not duration of eye contact should serve as the basis for measuring visual interaction. They found initiated eye contact to be a behaviour which indicated that the looker was seeking cues from the other person, and they concluded from their results that in general, the fewer the attempts to establish eye contact, the greater the psychological distance between the two people in the communication dyad and the more task-oriented the interaction. In the present study, a fairly low frequency of initiated eye contact was considered normal, because the son had been given clear directions on how to complete his computer learning task. The son was sacrificing the limited time he had available to complete the task each time he glanced up at his mother. Although the son's motives for frequently attempting to establish eye contact with his mother was not clearly established, it seemed reasonable that a high frequency of this behaviour might indicate that the son was overly preoccupied with his mother's presence. Whether that relationship was based upon the son's over-dependence on his mother's approval or attention or upon his over-concern for her emotional well-being was not clear, and further

research will be needed to better interpret this finding. According to Minuchin et al. (1973), parent-child enmeshment occurs when the boundaries between parent and child as separate entities are blurred; the parent comes to depend on the child as an alternate self, and the child becomes finely attuned to the parent's emotional state and overly sensitive to parental needs. The finding that a high level of son-initiated eye contact with mother was associated with High Parentification and correlated positively with son-initiated peer-like behaviour directed towards mother may offer a tentative confirmation of the theoretical perception that parent-child enmeshment is a component of high parentification.

Generational boundary diffusion

The behaviour observed in this study which was the second strongest predictor of high parentification was the occurrence of teasing, 'flirting' behaviours on the part of the son towards his mother during the first lab task when the sons were 13-14 years old. A peer-like relationship between parent and child has generally been perceived by clinicians and researchers to be evidence for a blurring of generational boundaries and a characteristic of highly parentified children. Sons in the present study who demonstrated at least one instance of this kind of behaviour towards their mothers were four to almost seven times more likely (depending upon the covariates included in the logistic regression equation) to find themselves in the High Parentification group five years later than were sons who did not demonstrate this behaviour.

This finding appears to support previous empirical evidence that generational boundary diffusion is a central factor in parentification, and it may illustrate that sons in early adolescence who act towards their mothers as if they were peers are more likely to be highly parentified. As these sons are drawn into the role of advisor and confidant to at least one parent and mediator between their parents, they are given adult privileges as well as responsibilities. Sroufe et al. (1980, 1985) referred to the mother-instigated peer-like relationship as "seductiveness" when the children in their study were 24 months old and as "generational boundary diffusion" a year and a half later. When the children were younger, Sroufe et al. observed more physical touching of the children by their mothers;

when the children were older, the behaviours they observed as manifestations of a peer-like relationship were more covert.³ Burkett (1991) did not expect to see overt seductive behaviours in her study because her subjects were school-age children and the study took place in the context of a structured verbal task versus an unstructured play setting. As in the present study, Burkett chose to focus on behaviours congruent with boundary diffusion, enmeshment and role reversal. She assessed a peer-like relationship between mother and child when the mothers spoke during the semi-structured interview of their reliance on their children for friendship, companionship and emotional support. These verbal statements of dependence by the mothers were taken as evidence for a highly parentified relationship between mother and child. Similarly, the joking and teasing behaviours noticed in the lab task between the mother and her young adolescent son were considered in the present study to give evidence of a peer-like relationship. These behaviours were not considered to be appropriate, given the limited execution time allowed for the learning task. This easy familiarity between parent and child has been used as a clinical indicator of parentification. The author remembers a family therapy case involving a mother and her 11-year old son named Jimmy. When Jimmy was an infant, his father had died in an accident and his mother had subsequently idealized what she remembered of her late husband. She had never since allowed another man into her life, and Jimmy had become her best friend and confidant. In our therapy sessions, mother and son would interact more like a married couple than like parent and child. Jimmy found it difficult to relate with other children his age, whom he found to be “babyish”, and he was beginning to experience problems at school because he treated teachers and principals as if they were no different from peers. Jimmy’s mother was concerned about the difficulties he was having at school and found it challenging to be a mother to him because so often she needed him and depended on him for companionship and for help in making her own decisions. Mother and son, when asked questions about their relationship, would sneak conspiratorial glances at each other, whisper to each other

³ It is interesting to note that “teasing and flirting behaviour” appears to be a consistent predictor of high parentification at age 24 months, 48 months, and (in the present study), 13-14 years. One might assume that the child learned these behaviours from his mother. Although not the purpose of the present study, watching videotapes of mother-son interaction from ages 6 to 12 could permit the verification of this hypothesis.

and burst into giggles of complicity. Based on our recommendation, Jimmy's mother allowed him to attend a summer camp but she felt lost without him and made few efforts to make friends with other adults. The incidents of joking and teasing observed between mothers and sons during the lab learning tasks central to the present study were reminiscent of the peer-like behaviours we had observed in family therapy sessions with Jimmy and his mother.

Role reversal

Although a mother taking over her son's task on the computer (i.e., typing at least three consecutive keystrokes while her son watched) was judged to be an extreme measure and was used to operationalize role reversal, higher levels of maternal involvement in the task were negatively associated with the Parentification Score and not, as predicted, positively correlated with it. "Mother takes over" leaned towards significance at T₁ but contrary to expectation, fewer mothers of sons in the High Parentification group took over their son's task than did mothers of sons in the Low Parentification group. A mother's efforts to help her son turned out to be either appropriate parental behaviour or evidence of infantilization rather than evidence of parentification. It may, after all, have been appropriate for mothers to help their sons even to the point of taking over the computer keyboard if sons were unable to complete the task alone, and the relationship-related variables discussed above appeared to be better discriminators of the Parentification outcome than was this task-related variable.

Hypothesis 2: Observational predictors will be consistent across time

The second hypothesis predicted that the observed mother-son interactions would demonstrate a consistency across time, thus supporting the clinical position that parentification can be an enduring as well as a transitory parent-child dynamic. Consistency across time was operationalized as a significant T₁ - T₂ correlation for the observational predictors. The present study found that four of the mother-son interactions captured in a 20-minute structured lab task were indeed stable over a two-year period. These four observed behaviours, "mother preens", "mother touches screen",

“mother takes over” and “son initiates eye contact”, were positively and significantly correlated from T_1 to T_2 , with low to moderate Pearson r correlation coefficients, which offered evidence for an age trend. Unfortunately, only one of these four interactions, “son initiates eye contact”, was significant as a discriminator of high parentification, which limited support for the hypothesis that behaviours predictive of high parentification are stable across time. The present discussion will centre around this one variable and the possibility of an age trend involving “son teases/ flirts” and “son initiates eye contact” as alternate measures of the same phenomenon at different ages of the son.

The possibility of an age trend

As was mentioned earlier, Sroufe et al. (1985) found that observations made when the child was 24 months old and observations made a year and a half later revealed “seductiveness” to be a stable though transformed relationship pattern between mothers and their sons. These researchers designed the “generational boundary dissolution” scale to capture this age-related transformation of mother’s seductive touching and talking to her son as a peer, deferring to him for direction and allowing herself to be “charmed and amused” by him at the expense of providing needed structure and limits. Sroufe et al. found that 72% of their 18 “seductive” cases at T_1 scored high on this scale compared with 39% of 18 control subjects. A similar age trend may have been evidenced in the present study. Adolescent sons were observed teasing and “flirting” with their mothers when they were 13-14 years old. The occurrence or non-occurrence of this behaviour was a significant discriminator of the Parentification outcome, but when the adolescents and their mothers were observed again at age 15-16, the behaviour did not occur in enough mother-son dyads to be used as a predictor. On the other hand, son-initiated eye contact proved to be a better discriminator of high and low parentification when the sons were 15-16 than it had been at the time of the earlier task. Neither a high rate of son-initiated eye contact nor the presence of teasing and flirting behaviours were significant discriminators of the Parentification outcome at both T_1 and T_2 . As was mentioned in Chapter III, a significant relationship was found to exist between these two dichotomous predictors. This led us to speculate that “son initiates eye contact” at T_2 may have served as a proxy for “son teases/ flirts” at T_1 ; the intense son-mother involvement characterized

by “flirting” at age 13-14 may have been transformed into a more subtle peer-like relationship characterized by a high level of son-initiated eye contact as the adolescent matured. Both behaviours served as significant discriminators of High and Low Parentification outcomes at T₃ when the son was 18-19 years old. While the observational consistency (stability of the behaviour in time) of these two predictors may point to an age trend, the observational frequency (decreases in frequency of the behaviour across time) may point to this transformation, a shift from external to internal indicators of parentification. In other words, when the adolescent is younger, researchers or clinicians might look for teasing or flirting behaviour—overt and physical manifestations of a peer-like relationship between mother and son—as a predictor of high parentification; when he is 16, they might look for higher-than-average frequencies of son-initiated eye contact indicative of enmeshment, an extreme degree of closeness between mother and adolescent son.

Childhood and adolescent parentification as a relationship template

The search for stable observational predictors of high parentification is important because there is increasing clinical evidence of significant long-term consequences of childhood and adolescent parentification. It is an axiom of therapy that relationships in the family of origin during childhood and adolescence may serve as a template for subsequent relationships. A number of clinical observers (Bergner, 1990; Controneo, 1987; Hyde, 1986; Lackie, 1983) have contended that the interpersonal style first learned when children experience parentification carries over into their adult life as a relationship pattern of overresponsibility, referred to by Valleau et al. (1995) as an “excessively caretaking orientation”. These authors studied this relationship pattern exclusively in female subjects, but it is likely present in males as well. The author of the present study remembers conducting a therapy session with a 45-year old man, married and a father of three, whose first words in therapy were, “I want a divorce from my parents!” He recounted that when he was eight years old his mother had fled from the family home after his father had badly beaten her, and as the only child he had been delegated the responsibility of convincing his mother to return home. Although he, a grown man, was now responsible for the well-being of his own children, he still felt obliged to step in and

mediate his parents' conflicts as well. Quite often his father or mother would call him for help and he would typically drop everything to go "counsel" them on their marriage, feeling especially responsible for the physical and emotional welfare of his mother. He came into therapy because he was torn between how to adequately care for his own children and what to do about his parents, and he was quite unaware of the extent of his own fatigue and emotional depletion. The study of Valteau et al. (1995) investigated the clinical impression of many family therapists that when individuals are excessively parentified as children, they may tend to become overresponsible adults, "compulsively overfunctioning and caregiving in their relationships with others" (Valteau, 1995, p. 157). The term "caretaker syndrome", borrowed from Peek & Trezona (1984), was used by Valteau et al. to refer to this enduring and pervasive pattern of behaviour in which an individual habitually assumes roles of a heavily caretaking nature—such as fixer, rescuer, advisor, advocate or "therapist"—in relationships with others, while at the same time neglecting his or her own needs and problems and only reluctantly seeking or accepting help from others.

In a previous study, Sessions (1986) had explored a similar idea: that highly parentified individuals would as adults seek out professional roles isomorphic to the roles they had filled as children and adolescents in their families of origin. Using the Parentification Questionnaire (Sessions & Jurkovic, 1986), he compared a group of 40 graduate students in clinical psychology with a group of 40 graduate students in engineering (both groups comprised of 20 men and 20 women). As predicted, psychology students, both men and women, demonstrated significantly higher levels of parentification than did non-psychology students, although females were found to have higher scores than males across both groups. (The Parentification Questionnaire, as discussed in Chapter I, taps heavily into the construct of the parental child, and females in the North American culture are in general still delegated more household chores and more child-care responsibilities than are males.)

Clinicians from many different theoretical perspectives agree that childhood relationship patterns have a clear impact upon adult relationship functioning. Searles

(1973), in the context of his psychoanalytic work with schizophrenic patients and their children, wrote of the child as “symbiotic therapist” to his or her own parents. According to Searles, the child actively howbeit unconsciously participates in his own parentification with the goal of ensuring his own psychological survival; in ‘curing’ his own troubled parent, he will provide himself with a healthier role model for the sake of his own identity formation and maturation (Searles, 1973, p. 249). Speaking from the same perspective, clinicians West & Keller (1991) suggested that parentification is a mode of adaptation that offers the parentified child what is perhaps the best possibility for achieving proximity to and attachment with a needy parent. This functional structure of parent-child interaction, according to West and Keller, is carried forward into adulthood and serves as a template for the negotiation of adult relationships. The child, who has learned so well how to be attentive to his parent’s unspoken needs, continues to play a similar role in the lives of other people. Alice Miller, also from a psychodynamic perspective, explored the intriguing link between growing up as a parentified child with a highly-developed sensitivity to parental needs and practicing psychotherapy:

This ability [of responding intuitively to parental needs] is then extended and perfected. Later, these children not only become ‘mothers’ (confidantes, comforters, advisors, supporters) of their own mothers, but also take over the responsibility for their siblings and eventually develop a special sensitivity to unconscious signals manifesting the needs of others. No wonder they often choose the psychoanalytic profession later on. Who else, without their previous history, would muster sufficient interest to spend the whole day trying to discover what is happening in the other person’s subconscious? (Miller, 1981, pp. 8-9)

Hypothesis 3: The most highly parentified adolescent sons will be

a) only children

b) living with a single mother

The third hypothesis in this study, which concerned the probable demographics of sons who would be found to be the most highly parentified, was derived from clinical intuition and from previous research. It was predicted that highly parentified sons would most typically be only children living alone with a single mother. The first prediction was offered tentative confirmation; despite the fairly low number of only children in our

sample, being an only child appeared to discriminate high parentification, and Parentification scores were significantly and inversely correlated with the number of siblings with whom the adolescent was living when he was 16 years old. The second prediction, that adolescents identified as highly parentified would more often be living with a single mother, was not confirmed.

“Only child” status

The only demographic variable assessed in this study which proved to be a significant predictor of high parentification turned out to be the status of “only child”, which distinguished firstborn sons with no younger siblings from sons with younger siblings and later-born sons; out of the nine adolescents in the study who were the “only child” (11% of the 82 adolescent sons), five were in the High Parentification group. While 27.8% of highly parentified sons were only children, only 6.2% of sons in the other group had no siblings. An adolescent in this study who was an only child was between six and seven times more likely to be a member of the High Parentification group than was an adolescent who was later-born or who had younger siblings.

An only child demonstrates many of the qualities of a child who is the firstborn of several siblings, although he does not have the reference point of age peers in early childhood. First-borns, by very nature of their position in the sibling structure, are traditionally given more responsibility than are later-born children. In an extensive review of findings from earlier studies concerning the birth order variable, Green (1978) reported that only children and firstborn children tend to be overrepresented in “parent surrogate occupations” such as teaching, nursing, social work and psychology. Lackie (1984) performed a comprehensive study of “learned responsibility and order of birth” in a sample of 1,577 social workers. His hypothesis was that earlier-born children would tend to experience and report more direct parentification and that later-borns would report having been given less responsibility as children and adolescents. His study included 96 men, of whom 12 (13%) were only children, 34 (35%) were the first-born male, 17 (18%) were the first male, and 33 (34%) were later-born males. The only children and first-born males reported a greater sense of having been delegated too much responsibility in their

families of origin, and they were found to have a greater likelihood of being parentified. The later-born males reported a stronger association with the role of infantilized child and were less likely to report feeling overresponsible. They also reported having little or no caretaking experience with siblings.

Along with the challenges and responsibilities of being the firstborn child, the literature also discusses the only child's particular challenge of not living with siblings, who are often the first peers with whom a child enters into relationship. According to Burkett (1991), siblings may serve as a considerably more reliable source of security and support for the younger child than would a dependent and unpredictable parent. Burkett went on to state that the mutual reliance that siblings have upon each other may in fact protect them from such a parent's neediness, and that an only child may thus be more vulnerable to parentification than would be a firstborn child with younger siblings. Tolman (1961) agreed that while an only child is spared the obligation to serve as a surrogate parent to younger siblings, he may often find himself in a simultaneously powerful and vulnerable go-between position with his parents. An interesting finding of the present study was that the only child appeared to have a greater chance of being highly parentified than did the child who was the firstborn of several siblings. Predictably, as the number of siblings the adolescent was living with at age 16 increased, Parentification Scores showed a slight significant decrease (see Chapter III). Although the number of participants in different sibling structures in the present study was insufficient to permit any definitive conclusions, our results hinted at the possibility that brothers or sisters living with the adolescent may have served as a kind of buffer, "protecting" or "shielding" him from parentification.

The distinction between parental child and parentified child. The finding that there may be a relationship between "only child" status and high parentification helped to confirm our clinical intuition that there is a distinction between the parental role (caring for siblings) and the parentified role (caring for parents). Since the majority of the adolescents in this study were first-born children (46 out of 82), and since 78% of them (64 out of 82) filled the family role of firstborn male, it was impossible to adequately

control for first-born versus later-born status. No significant difference was found between these two groups in terms of Parentification outcome. Despite the frequent characterization in the literature of parentification as a dynamic involving caring for siblings as well as caring for parents, there appeared to be a dichotomy between these two manifestations of adolescent overresponsibility: the overall scores for the “Child as Parent to Sibling(s)” subscale in the present study were not significantly correlated with “Child as Spouse to Parent(s)” subscale scores, although they were significantly correlated with the “Child as Parent to Parent(s)” subscale. There appeared to be a difference between the roles of partner and parent, whether the parenting be directed towards a sibling or a parent. Perhaps the term “spousification” used by Sroufe et al. (1980) would be a more accurate one to describe this mother-son partnership. It may be the case that an only child is more susceptible to “spousification” while an eldest child is more likely to take on the parental role of caring for younger siblings.

The mother-son dyad. The mother-son relationship was the focus of the present study. Several previous studies, especially those making use of the Parentification Questionnaire (Sessions & Jurkovic, 1986), found that females tended to obtain higher parentification scores than did males. On the other hand, Sroufe and Ward (1980) found that in 15 out of 16 cases of “seductive” behaviour by mothers towards their infant children, the target child was a son. (These behaviours included sensual physical contact, sensual teasing, promises of affection and maternal requests for affection.) These 16 cases represented 9% of the 173 mothers in their nonclinical sample. Kaufman (1986), while studying the families of male alcoholics, found that the family role and responsibilities of the male parent were more typically transferred to the eldest son than to the eldest daughter. Jurkovic (1997), based on his research and clinical work, surmised that parentification by the opposite-sex parent would most likely produce more spouse-like than parent-like functioning when compared to parentification by the same-sex parent. In the present study, parentification appeared to be primarily a son-mother dynamic. As was mentioned in Chapter III, “father shared his personal problems” was one of the three behaviours occurring the least frequently, while “mother shared her personal problems” was the question having the greatest frequency of “often” or “very

often” answers. Although the present study did not control for sex of the child since only sons were observed, it did produce evidence that the parentification of sons is a phenomenon as worthy of research as is the parentification of daughters.

To summarize, it appeared from the findings of this study that an “only child” may be more at risk for high parentification than would be a firstborn child with younger siblings, at least when parentification is defined as taking on a spouse-like or parent-like relationship with one’s parent or parents. Although the number of participants in the present study was inadequate to permit the drawing of clear conclusions, the literature suggests that children who are the firstborn of several siblings may be more at risk for taking on the parental roles of caring for siblings and performing instrumental household responsibilities. The presence of other siblings in the household may serve as a protective factor for high parentification, reducing the likelihood of the eldest child being either enmeshed with a parent or triangulated between his two parents. More research is needed in order to verify this hypothesis.

Living with a single mother

When they were 16 years old, 43 of the adolescents were living with both parents and 31 were living with their mothers alone. Contrary to expectation, living with a single mother at age 16 did not discriminate Parentification outcome; sons living with a single mother did not appear to be more highly parentified than did sons living with both parents. The literature speaks of the greater likelihood of high parentification occurring in a single-parent family as opposed to a dual-parent family. Wallerstein (1983), in her longitudinal study of 60 divorced families, found that a small subset of these families demonstrated an extreme level of enmeshment between parent and firstborn child following the divorce. Although this was not a normative occurrence in her sample, she did note that generational boundaries tended more frequently to become blurred in the single-parent family, particularly during times of stress, and that this was especially evident in the mother-firstborn child relationship (Wallerstein & Kelly, 1980). Weltner (1982) also noted that generational boundaries often tended to blur in the single-parent family, particularly following a separation or a divorce. Significantly, Beal (1979)

attributed the formation of a parentified mother-firstborn child relationship to a lack of external social supports. Maun et al. (1990) similarly stated that if the parent did not have access to adequate social support, there was more likelihood that the child would be parentified—and in the case of a son living with a single mother, more likelihood that he would be made into a surrogate partner in the absence of adult support and partnership. Zastowny & Lewis (1989) agreed that a child who was highly parentified had most likely stepped into the role left vacant by a departing parent in order to restore equilibrium to the family system.

A possible explanation for our lack of findings may have been suggested by Dawson (1980), who enumerated three specific circumstances which she hypothesized might increase the likelihood of high parentification in childhood or adolescence: 1) the physical absence of one or both parents; 2) abdication of parental responsibilities by one or both parents; and 3) marital conflict or breakdown. In her study of 44 families (22 dual-parent and 22 single-parent), she found that mean scores on Bryson's (1976) Division of Responsibilities Scale (an early measure of parentification) were significantly higher for children of single-parent families. She found this to be mainly the case for domestic roles, however, which led her to reflect on what we have characterized as the difference between the parental role and the parentified role: instrumental duties versus emotional role assignments. Children in single-parent households were being given more responsibility for siblings and chores but were not necessarily involved in more parent-child role reversals than were children from dual-parent families. The second two circumstances named by Dawson (1980), abdication of parenting responsibilities and marital conflict or breakdown, could occur in a dual-parent family just as well as they could in a single-parent family. In either of these circumstances, where one or both parents have abdicated parental responsibilities or where the relationship of the couple has become distant or unsatisfying, a child could be conscripted by one parent to take the place of the emotionally, although not physically, absent spouse. In other words, what sets the stage for high parentification might not be living in a single-parent rather than a dual-parent family but living in a non-functional family rather than a functional family—more specifically, a family in which the relationship between the parents is inadequate

and unsatisfying rather than emotionally fulfilling. Sroufe & Ward (1985) found that only 9% of the mothers who had scored high on the “generational boundary dissolution” scale had maintained a stable relationship with an adult partner over the four years covered by the study, as opposed to 25% of the mothers in the control group. Sroufe (1980) had earlier hypothesized that if a mother rated as “seductive” in his first study was successful in achieving an adult relationship in which her emotional needs were being fulfilled, observers in the second study a year and a half later would notice a diminution of her seductive behaviour towards her child. Although the present study did not gather findings which would support this assumption, we would propose that the parentification of a child might likewise decrease if the relationship between the mother and her partner improved to the extent that the companionship and emotional support she had been seeking from her child could be found with another adult. It is possible that the practice of mothers depending on their sons for emotional support is not entirely rare; in the present study, it was surprising and somewhat disturbing that one of the two highest-scoring items on the Parentification Scale was, “My mother shared personal problems or concerns with me as if I were another adult”.

Disruptive versus nondisruptive status at age six

Although not formulated as an hypothesis, the discriminatory power of the son’s disruptive or nondisruptive group assignment at age six was a matter of interest in the present study. Disruptiveness is not the same as delinquency, but it has been identified as one possible forerunner of delinquency (Charlebois, LeBlanc, Gagnon, Larivée & Tremblay, 1993). Tolan & Mitchell (1989), in their summary of the extensive research conducted on the families of delinquents since the work of Minuchin (1967), emphasized the common finding of these studies of poorly defined intergenerational boundaries and mother-child enmeshment. Based on the definition of parentification used in this study, however, it seemed to us that a nondisruptive child would prove a more likely candidate for the parentified role in adolescence than would a disruptive child. It seemed reasonable to us that the “good boy” who listened, obeyed and cooperated with adults and peers in preschool would have a greater chance when he was an adolescent of becoming a

consoler, confidant or advisor to a parent than would the “bad boy” who was constantly getting in trouble. Contrary to expectation, neither disruptive nor nondisruptive status at age six was found to discriminate the high parentification outcome.

The first and most obvious explanation of this finding is that the disruptive boys, although rated as such at age six, did not remain disruptive. Early disruptiveness or aggressive behaviour, according to most research on the prediction of delinquency, explains only 10% to 25% of the total variance; most children assessed as aggressive will grow out of their aggressive behaviour and not become delinquent (Charlebois, Tremblay, Gagnon, Larivée, Laurent, 1989). A study by Dobkin, Charlebois and Tremblay (1997) of 42 boys taken from the same population as the present study found that approximately 15% of boys who were rated as disruptive during the preschool assessment were still disruptive at age 13. Another study of 65 boys found that aggressiveness as rated by the mother was highly stable from age 6 to age 11, but had low predictive power for self-reported antisocial behaviours at age 12 (Charlebois et al., 1993).

Representative cases of high parentification

Although not formulated as an hypothesis, one of the author’s personal goals in accomplishing the present study was to gain a better understanding of the nature of parentification and to try to learn by means of the interview whether or not the highly parentified adolescent sons shared certain personal characteristics or family situations. In fact, the differences between the 18 individuals who were in the high parentified group appeared to outweigh the similarities. In certain family contexts, high parentification was more intuitively understandable—for example, in the case of one mother who reported needing emotional support and a confidant following a conflictual parental separation, or in the case of another mother who had a physical handicap which obliged her to depend upon her son to a greater degree than she would have otherwise—but in other cases, high parentification was found in contexts in which it was not expected to occur. The highly parentified son was not, in every case, the only child or even the oldest sibling, and he lived with both parents just as often as he lived with his mother alone. One shared

characteristic of many of the adolescents who were in the High Parentification group was that they seemed to have a greater than average degree of social sensitivity and the ability to pick up on subtle cues in their environment—leading various ones, for example, to offer the interviewer a drink, to turn on a light when he appeared to be having difficulty reading, to introduce him to other family members who were present, and in one case, to switch the interview to his language in order to make him feel more at home. Most of these adolescents were friendly and polite. Most described their relationship with their mothers as good, and several made statements which hinted at an unusual degree of closeness: “we quarrel because we’re so similar”; “we have the same sign—that explains it”; “she’s like a good friend”; and “we are a bit *complice*” [in cahoots, in collusion]. Few complained of having been given too many responsibilities in early adolescence or of having been obliged on occasion to care for their parents. While considering the family situations of the adolescent sons who comprised the High Parentification group, it soon became clear that basic questions about birth order or number of siblings would prove to be an inadequate source of family information because of the complex transitions that many of the adolescents had lived through. Many of them had seen older siblings move out, leaving them to take over the role of “only child”. New parental figures had come into the picture for some of them, which had in some cases had pushed them away from and in others had drawn them closer to their own parent. New half-siblings or step-siblings had come into the lives of some of them and had become a new part of their responsibilities. Interview details and the author’s subjective impressions concerning eight individual cases of high parentification are presented in Appendix K.

Parentification Scale findings compared with those obtained by earlier studies

Finally we compared the results of our study with those obtained by four other studies which have made use of the Parentification Scale: Mika et al. (1987), Jarvis et al. (1992, two studies) and Valteau et al. (1997). Table 2-A (see Appendix L) presents the vital statistics of these studies, including mean scores (weighted), standard deviations, and maximum and minimum scores on the Parentification Scale, along with other significant findings collected by the authors. Table 3-A (see Appendix L) presents

subscale results for subgroups of subjects from the present study and also subscale results from the study done by Jarvis in 1992 ($N = 28$).

The 34 adolescent participants from the present study who were firstborn and were living with at least one younger sibling (a similar population to that assessed by previous studies) obtained a lower Parentification Scale mean score than did female subjects from previous studies, but this score was less pertinent for our purposes than would have been the subscale breakdowns which would have permitted a differentiation of parental role and parentified role scores. These subscale scores were provided only by Jarvis et al. (1992); comparing the present findings with those of Jarvis (see Appendix L), we found that adolescents in the present study scored slightly lower than did the female undergraduates on the “Child as Spouse to Parent(s)” subscale, and that they also scored lower on the “Child as Parent to Parent(s)” subscale. Our male adolescent subjects obtained mean scores comparable with those of the female undergraduates on the “Child as Parent to Sibling(s)” subscale, this last finding somewhat surprising since females are still traditionally given more child-care responsibilities than are males in this society. The adolescents also obtained higher mean scores on the “Child Performs Household Tasks” subscale than did the female undergraduates. These findings are not likely to be significant, however, because Jarvis et al. assessed only 28 subjects and the present study included only 34 subjects who could be compared with those of Jarvis in terms of birth order and the presence of younger siblings.

CONCLUSIONS

This section will summarize the findings of the present study and the conclusions which may be drawn from them.

First of all, the first research hypothesis—that mother-son interactions during a lab task when the sons were 13-14 and 15-16 years old would predict Parentification outcome when they were 18-19 years old—was supported by our findings. Two behaviours observed on these occasions proved to be significant discriminators of the Parentification outcome. These two best predictors of high parentification were the occurrence of teasing, flirtatious behaviours on the part of the son towards his mother when the sons were 13-14 years old, and high frequencies of eye contact initiated by the son towards his mother across the two lab tasks. Sons who showed a peer-like familiarity with their mothers were six times more likely to self-report High Parentification than were sons who did not, and sons who initiated high frequencies of eye contact were three times more likely to do so than were sons who did not. These behaviours were operationalizations of the generational boundary dissolution and enmeshment which characterize the relationship between highly parentified children and parents. We concluded that relationship-related behaviours, at least given the nature of the present lab task, were better able to discriminate high parentification than were than task-related behaviours. The only task-related behaviour which approached significance was mother taking over the computer keyboard in order to work on her son's task, but this behaviour was a counter-indicator of high parentification and did not appear to have translated a true parent-child role reversal of the type which would characterize high parentification.

The second hypothesis, that observed behaviours predicting high parentification would be stable across time, was given only limited support by our findings. Four of the observed behaviours did indeed evidence stability across time to a significant degree, but only one of these behaviours—son initiating high frequencies of eye contact with his mother during the task—was predictive of high parentification. Even this behaviour was not a significant discriminator of Parentification outcome during the first lab task, although the T_1 and T_2 results combined into a significant predictor. Occurrences of the son teasing and flirting with his mother were not observed in enough mother-son dyads in

the second task to be a reliable discriminator, and we speculated on the possibility of an age trend: that an overly-familiar and intimate relationship between mother and son in early adolescence may have transformed by mid-adolescence into a more subtle and covert pattern of interaction, characterized by high frequencies of eye contact but no longer by overt peer-like teasing and ‘flirting’.

The third hypothesis predicted that the most highly-parentified adolescents would be only children living with a single mother. Although numbers were quite low, “only child” status did serve as a valid predictor of high parentification; out of nine “only children” in the study, five were members of the High Parentification group. Living with a single mother did not, however, characterize the most highly parentified adolescents in the present study, despite evidence presented by the literature that points in this direction. We speculated that the factor determining whether or not a son was more likely to be drawn into a spouse-like or parent-like relationship with his mother might be the amount and kind of adult support available to her and her degree of satisfaction with it, rather than the absence or presence of the second parent.

Implications of the findings for research and clinical practice

One of the findings of the present study was that the parental and parentified roles may represent two closely-related but distinct phenomena. Of the four subscales that make up the Parentification Scale, the first two—“Child as Spouse to Parent(s)” and “Child as Parent to Parent(s)” —assess what this study has defined as the “parentified child” role, and their questions tap into the more emotional and potentially more troubling responsibilities involved in taking care of parents; the last two subscales, “Child as Parent to Sibling(s)” and “Child Performs Household Tasks”, deal with the “parental child” role, and their questions probe the more physical and instrumental role assignments involved in caring for siblings and taking on extensive household responsibilities. Although the parentified and parental child scores were significantly correlated in this study, demonstrating a positive relationship between high levels of responsibility in both role assignments, they did not show multicollinearity and did not

therefore appear to be assessing the exact same phenomenon. The correlation between “Child as Spouse to Parent(s)” and “Child as Parent to Sibling(s)” subscale scores was low and nonsignificant, and in this study, the mean Child-Parent subscale score (the combination of “parentified child” subscales 1 and 2) was actually higher when the adolescent had no siblings. Two slightly-different responsibility dynamics appear to be at play, and it will be important for future research to take this distinction into consideration. Within the Child-Parent subscale, it was reported in Chapter III that the four items which best discriminated a high Parentification Score all presented the child in the role of parental mediator or arbiter, required either to carefully balance his loyalties in order to play a go-between role with his parents or to choose sides with one parent against the other. It will be important to further explore the incidence and consequences of this parentified mediator role in future studies.

Another finding of this study is that mother-son interactions in a controlled lab setting may be used as predictors of high parentification in adolescent sons. Several earlier studies had used a similar approach with much younger children. Sroufe et al. (1980, 1985) assessed children and their mothers in a lab setting when the children were two years old and again when they were three and a half. Fish et al. (1991) observed four-year old children in a controlled lab setting, and Burkett (1991) assessed parentification in the homes of children aged five to ten years, mainly through the use of interviews with the parents. In each case, the focus of the study was on the parentifying behaviours of the parents and not on the parentified behaviours of the child himself. In the present study, both mother and son behaviours were observed as potential predictors of parentification. Similarly, future research should look for indicators of high parentification in the context of parent-child interaction, where it will likely be detected in its “purest” form. Several suggestions of other potential behavioural indicators will be given in the section on recommendations.

Since the scope of this study was confined to the observation and assessment of parentification, it did not extend knowledge in terms of the clinical significance or long-term consequences of childhood or adolescent parentification. The significance of

parentification as a clinical phenomenon is well documented elsewhere, however, and an ongoing refinement of the observation and measurement of parentification will have clinical usefulness both for assessment and for treatment of children and families. The Parentification Scale has proven to be a conceptually valid and reliable instrument for the measurement of parentification. Translated into French according to the stringent guidelines recommended by Vallerand (1989), it should prove to be a useful instrument for parentification research in Québec and in other French-speaking cultures. It is the hope of the author that further refinement of this instrument will lead to the development of a clinical tool which will be used in family or individual therapy sessions to assess the extent and duration of parentification and to evaluate the amount of support and parenting reciprocated to the parentified child or adolescent. Several more specific comments will be made in the section on recommendations.

Limitations

The objective of this study was to further the assessment of mother-son parentification and not to explore its antecedents or consequences. This fundamental limitation was justified by the need for refinement in the measure of parentification for research and clinical purposes. As Jurkovic recently wrote,

Clearly, the measurement of parentification and related processes is in an early stage. Continued work in the design of standardized and clinically relevant indices of both parentifying and parentified behaviours in parent-child relationships promises to contribute to our ability to identify and to evaluate parentification in its various forms. (Jurkovic, 1997, p. 97).

Jurkovic also criticized the haphazard way in which parentification has been conceptualized and called upon family systems researchers to make use of the differing but complementary insights of other disciplines which describe similar constructs. According to Zahn-Waxler, Radke-Yarrow, Wagner & Chapman (1992), developmental researchers who have been studying the origins of responsibility and altruism, a child's capacity for prosocial responses to the needs of others develops as early as the second year of life. The biologically based propensity of a child to empathize and his growing capacity to care for others may place him at greater risk for exploitative parentification,

and the construct of parentification should be explored within the broader context of the origins of responsibility and sociocognitive maturity. Although there may be some conceptual overlap between parentification, empathy, and prosocial behaviour, however, they are not merely different names for the same phenomenon. Zahn-Waxler et al. (1992) found only a modest association between a child's sociocognitive capacities and his prosocial actions, suggesting that more work will be needed in order to assess the motives underlying the development of prosocial behaviour. The sociocognitive capacity for empathy and prosocial behaviour may indeed be found to serve as a precondition for parentification, but a child who takes care of a parent and fulfills parental needs at the expense of his own developmental needs is not merely manifesting a high level of empathy. In the present study, scores of the child at age 6 and age 10 in prosociability were not found to be associated with the child's Parentification Score near the end of adolescence. Further study is needed in order to discover the nature of the relationship between sociocognitive maturity, empathy, prosocial behaviour and parentification.

The rest of this section will discuss specific methodological shortcomings of the present study concerning the sample of adolescents assessed, the instrument used to measure parentification, the structured lab task which was observed for mother-son interactions predictive of parentification, and the administration of the parentification measure.

The sample of adolescents

Limitations concerning sampling centred around three factors: the number of adolescent participants in the study, demographic variables which we were not able to control, and the low incidence of high parentification represented in the sample.

The number of subjects in the study presented one difficulty. Although few previous studies had assessed and retained as many as 82 subjects, this number was still not sufficient to permit a validation of the translated Parentification Scale; to do a valid factor analysis on this questionnaire comprised of 30 questions and answered for two different time periods would have required between 300 and 600 subjects. The factor

analysis performed on the Child-Parent subscale, which was itself comprised of thirteen questions answered for one time period, required a minimum of 65 subjects, although 130 subjects would have been preferable.

Demographic factors also presented certain limitations. The study looked exclusively at mother-son interaction, which limited generalization of the findings to other contexts. In addition to gender, family socioeconomic status and culture were constants in the present study, but the composition of the sibling subsystem was not. Many of the 82 adolescents lived with older and younger siblings of both genders, and composition of the sibling subsystem may well prove to be one factor which helps to predict the likelihood of a son's high parentification. We acknowledged and identified these potentially important demographic variables but did not control for them. Larger numbers of participants would be needed in each group in order for this to be accomplished. Birth order has also been hypothesized to be a determinant of high parentification, but most of the 82 participants in this study were firstborn males and a comparison of the relative parentification status of firstborn versus later-born adolescents was not possible to a significant degree.

Finally, and most importantly, the sample did not include many cases of what might be considered serious or pathogenic parentification. High Parentification was defined as having a score of at least 20 on the Child-Parent subscale of the Parentification Scale, which meant answering "rarely" or "occasionally" to all 13 questions. Responding "often" or "very often" to all questions (which would have resulted in scores ranging from 39 to 52) would more convincingly have translated a clinically high level of emotional involvement with and responsibility for one's parents. The highest score in the present study was 37 and only seven adolescents scored at least 26. This score, which meant responding "occasionally" to all questions, may have represented the clinical threshold of parentification. According to this criterion, there were seven adolescents in the present study who may have been parentified to an extreme degree, although the dimension of reciprocity would need to be assessed before clear conclusions could be drawn in terms of pathology.

The instrument used to assess parentification

A second area of limitation involved the Parentification Scale, the parentification measure chosen for the present study and translated into French. Although it was in our opinion the best instrument available, the Parentification Scale appeared to have been designed more specifically for individuals who lived with younger siblings while they were growing up. We were able to control for this limited flexibility by excluding questions which discussed caring for younger siblings in order to focus on the more clinically important parent-child dynamic.

A more serious drawback of the instrument was that it did not provide a measure of reciprocity, the amount and quality of parenting given to the child. Reciprocity was found in the literature to be one of the three factors, along with extent and duration, which may determine the seriousness of childhood parentification. According to Goglia (1982), knowing about the child's responsibilities alone would not permit one to determine the potential impact of parentification; she suggested that weighing both the child's and the parent's responsibilities in the family of origin would provide a more clinically significant measure of parentification. Even a high score on the Parentification Scale may represent pathogenic parentification only when parents do not reciprocate caregiving or meet their child's developmental needs. Mika et al. (1987) conceded that while the Parentification Scale assessed patterns of parent-child behaviour, it did not assess important contextual elements such as whether the assignment of parental roles was exploitative or legitimate and whether or not overly-responsible children received help and parenting as well as providing it. Jurkovic (1997), a co-developer of the Parentification Questionnaire, criticized the Parentification Scale for not including questions which tapped into this dimension of reciprocity. He wrote, "a major shortcoming of this measure is that it does not include items pertaining to socio-familial and ethical contexts of the various role patterns assessed" (Jurkovic, 1997, p. 92).

The observational lab task

Thirdly, the *a priori* lab learning task presented certain limitations to this study. The task was quite brief, and behaviours thought to discriminate high and low parentification were observed in low frequencies. The rather audacious goal of the study was to find evidence of a highly-parentified relationship through observing a 20-minute structured learning task involving mother and son, and to use observations made during two such tasks two years apart to predict parentification scores obtained two to three years after the second lab task. A longer period of observation would have presented a larger window of opportunity through which to observe particular mother-son interactions. Also, the presence of only one parent impeded investigation of the son's relationship to both parents, and a son playing the role of "mediator" between his parents was revealed in a factor analysis to be an important component of parentification.

The administration of the parentification measure

Finally, although observations of behaviours indicative of parentification were made of both mother and son, a self-report questionnaire on parentification was administered to sons only. Since observations were made of interactions between mother and son as potential predictors of high parentification in the son, it would perhaps have been useful to have the mother complete a self-report questionnaire in order to assess parentifying behaviours. This matter will also be discussed further under recommendations for future research.

Recommendations for future research

Discussed in the section on limitations were some of the demographic factors which should be controlled for in future research studies. Due to changing family patterns, family researchers must no longer assume that the child or adolescent participating in their study is living with or has always lived with both parents. Similarly, researchers cannot assume that the child is living with or has always lived with his siblings, or that the child is not living with or has never lived with other adults (step-parents or other partners of parents) or children (step-siblings). These questions must be

routinely asked in order to control for demographic factors. With reconstituted families increasing in number, both parents and children may have to deal with confusion concerning which child in the family is the “firstborn” and which is the “baby”. According to Lackie, “sorting out this part of family identity may become a routine part of adolescent identity formation and a significant factor in how step-siblings adapt to each other” (Lackie, 1984, p. 136). Parentification is a systemic dynamic, and the way in which the family is evolving is one of the many factors which may increase or decrease the likelihood of its occurrence.

In the rest of this section will be suggested six methodological improvements which would enable future researchers to further extend knowledge in the area of parentification assessment. Also proposed are several pertinent research questions.

Validate, improve and update the Parentification Scale

The French translation of the Parentification Scale has shown promise as an instrument for assessing parentification in the Québec culture. The next step in exploring its properties would be to use it to assess at least 300 adolescents in order to perform a valid factor analysis. Another valuable goal would be to establish its construct validity by comparing Parentification Scale results with concurrent measures of parentification or other aspects of family functioning. The Parentification Questionnaire of Sessions & Jurkovic (1986) has many similarities to the Parentification Scale; administering the two instruments concurrently to the same group of adolescents would provide information concerning their comparative usefulness as measures of parentification. The translated version of the Parentification Scale could also be administered concurrently with other measures of family functioning. FACES III (Olson, Porter & Lavee, 1985), for example, is an instrument used frequently in family research to determine a family’s degree of enmeshment. It was translated into French by Cloutier (R. Cloutier, personal communication, March 7, 1996) as the *Échelle sur le fonctionnement familial* and was subsequently validated using a Québec population. Using it concurrently with the Parentification Scale would permit the comparison of levels of enmeshment in families with or without a highly parentified child.

Although this questionnaire was judged the best instrument available for the assessment of parentification, there may be several ways in which it could be improved. As was mentioned above, the Parentification Scale does not contain questions which assess whether caregiving is reciprocal or whether the highly parentified child is almost exclusively taking care of the parent. It is recommended that new items be added to the questionnaire in order to assess whether or not the child's own needs are being met by parents or parental figures. As reciprocity appears to be an important factor in determining whether or not parentification is pathological, this would permit the measurement not only of the extent and duration of parentification but also of its potential clinical significance. In addition to adding items in order to assess the reciprocity of parenting, there may be occasion for revising the wording of some of the questions which might be open to different interpretations and which might betoken appropriate parenting rather than parental dependence upon a child. For example, a positive response to "My parent(s) discussed their financial issues and problems with me" could be taken to mean that a parent was helping the adolescent learn about money by giving him increasing responsibility in managing his own budget and not necessarily that the parent was burdening the adolescent with his or her own financial difficulties. A formulation better able to discriminate parentification would be "*My parent(s) asked me for help or advice when they were unable to resolve their own financial issues and problems*". Another question, "My parent(s) at times became physically ill, and I was responsible for taking care of them", might tell a researcher more about the state of health of the parent than about the parentification of the child. A better formulation would specify that the child "*was the only one*" or "*was the main person*" responsible for caring for parents. A positive response to two further questions, "My parent(s) sought my advice on adult matters" and "My parent(s) let me have a lot of influence when they were making important adult decisions", might or might not indicate an extreme level of responsibility for the child, depending on whether the "adult matters" the parent was discussing were of direct concern to the child—for example, buying his own clothes or deciding which school to attend or which summer job to accept—and whether the parent was asking for the child's input in order to teach him responsibility. It is important to note that reworded

questions should maintain the neutral, non-judgmental tone of the present items while assessing whether the child is being given an inappropriate level of responsibility for someone his age and whether or not this delegated responsibility concerns personal or adult issues which would more appropriately be handled by another adult.

Finally, as has already been mentioned, there may be a further need to update the Parentification Scale in order to more accurately assess parentification in a new generation of children and adolescents. Children now have many more dealings with stepparents and stepsiblings, and present questions do not reflect the reality of the child's relationship with live-in adults who may not be biological parents. One further suggestion of Mika et al. (1987) was that their instrument be used to assess parentification in younger subjects. Studies making use of the two instruments designed to assess parentification have routinely assessed college students. This study chose to target adolescents since adolescence is a critical period for individuation. The Parentification Scale questionnaire could easily be adapted for use with even younger children, and a future study might involve the administration of an adapted version to children as young as 10 or 11 years old. At that young age, the inappropriateness of certain delegated responsibilities would be even more obvious; as the child approaches adulthood, increased responsibilities as well as a more peer-like relationship with parents become more prevalent and more age-appropriate, and high parentification may be harder to discriminate. The present version of the Parentification Scale asks the respondent to reflect on his or her family of origin responsibilities in childhood and early adolescence; an adapted version could question a younger child about his or her present responsibilities at home.

Collect multiple perceptions of parentification

In the past research on parentification which made use of self-report measures, only one family member's perception of boundary dissolution was obtained in all but two studies, those of Madanes et al.(1980) and Protinsky et al. (1989). Differing perceptions are an integral facet of family life, and there are as many different points of view as there are family members. As Larson (1974) put it, "there is no necessary reason for assuming

that differential perception is not an aspect of family reality. . . perceptions of reality *are* reality to the perceiver” (p. 124). To further our understanding of the accurate assessment of parentification, it would be valuable to study parentification from the perspective of the parent as well as from the perspective of the child. Perhaps the Parentification Scale could be modified in such a way that it could be administered to parent and child simultaneously, and the two sets of answers could be examined and compared for each individual question. These results could be correlated in turn with an observational assessment of parentification made in the context of parent-child interaction in order to compare parent and child perceptions with the perceptions of outside observers. The present study was to our best knowledge the first to make use of observations of parentified behaviours of the child as well as parentifying behaviours of the parent, both of which provide information about the parentification dynamic. Jurkovic (1997) recommended the identification of parentification from multiple sources, including the children and adolescents themselves, their parents, and their siblings. Once parentification has been assessed within the family with some degree of confidence, it might also be useful to explore manifestations of this phenomenon in the parentified child’s social world outside of the family of origin by interviewing teachers and peers.

Assess the degree and kind of support available to parents

Given the hypothesis that inadequate social and emotional support for one or both parents might well be associated with high levels of parentification in children, we would recommend assessing the parents’ support network in addition to assessing parentification. As previously discussed, the social isolation of one of the parents could be a possible predictor of high parentification in children (Dawson, 1980). Zastowny & Lewis (1989) suggested that along with assessing the absence or presence of social and emotional support, clinicians and researchers should also assess the specific kinds of social support that are available to the parent as well as the parent’s degree of satisfaction with that support. McLanahan, Wedemeyer & Adelberg (1981) discussed the different kinds of support that were typically needed by a single parent, including support provided by the community network (social services, opportunities for social integration and friendship), support provided by the network of family and friends (help for specific needs and

emotional support), and support found only within the conjugal network, in which a “spousal equivalent”, a partner or close friend of either sex, could provide for intimacy needs not met by more casual friends or by the family of origin. The *Social Support Questionnaire* (Sarason, Levine, Basham, & Sarason, 1983) is one measure which taps into the amount and type of support available to the parent from the community, from friendships and from intimate relationships. A French translation of this measure, the *Échelle de soutien social*, could be useful within the Québec context. In this questionnaire, the parent names specific individuals he or she would approach with particular physical, social, or emotional needs. The questionnaire includes a six-point scale with which parents indicate their degree of satisfaction with the social support available to them, from “very satisfied” to “very unsatisfied”. Sample questions include “Who can you really count on to listen to you when you need to talk?”, “Who can you really count on to help you relax when you feel stressed?”, “Who can give you a hug when you need to be comforted?”, “Who can you count on to take care of you no matter what happens?”, and “Who can you really count on to support you when you are making important decisions?” Obviously if a parent were to name a child as a main source of social or emotional support, this would be a potentially significant correlate of high parentification. Simultaneously administering the Parentification Scale (Child-Parent subscale) to the child and comparing the results yielded by these two instruments would enable researchers to compare the level and sources of social support available to the parent and the degree of parentification of the child.

Develop a structured lab task better able to assess parentification

The present study made use of pre-existing videotapes of mother-son interaction in a lab learning task on the computer. The shortcomings of this lab task for the observational assessment of parentification have already been discussed. A task which took at least a half-hour to complete would allow for more time in which to observe parent-child interaction. Along with peer-like interactions such as teasing and ‘flirting’ behaviours between parent and child and high levels of child-initiated eye contact, other parent-child interactions might be found to be associated with high parentification. The presence of both father and mother in the lab setting would present a clear improvement

over the design of the present study, permitting observation of the child's reaction to and involvement in disagreements or differences of opinion between his parents. Mediating between parents and playing the role of family peacemaker was found by the present study to be a central component of the Parentification Score, and the assessment of this role would become possible if two parents were present to help the child with the task. (It would be essential that the parents be well trained in the computer task and that they possess information which their child would need in order to complete the task).

Consider the effects of gender differences on parental and parentified scores

The difference between parental and parentified role assignments has been explored in this present study, which exclusively examined mother-son interaction. Future research should compare different manifestations of parentified and parental behaviour by sons and daughters, both children and adolescents, as well as different styles of parentifying behaviour produced by mothers and fathers. In fact, we would recommend that future research control for gender by comparing mother-son, mother-daughter, father-son and father-daughter dyads, both on the observational measures and on Parentification outcome, which would require a much larger number of subjects. It would also be interesting to compare the results for these different dyadic configurations both for the parentified role (using the Child-Parent subscale score) and for the parental role (using the combined Subscale 3 and 4 score) in order to determine if parental child and parentified child roles are more generally held by males or females in a given population. In the case of single-parent families, it would be revealing to see if these findings were associated with the gender of the parent with whom the children or adolescents were living. Jurkovic (1997) proposed that parentification by the same-sex parent may more frequently take the form of "spousification" while parentification by the opposite-sex parent may involve more of a "child as parent" role, both in caring for siblings and in taking on a parental role with parents. More research is needed in order to determine whether or not females and males have equally high parentification scores if the definition of parentification is limited to the physical and emotional caretaking of parents and does not include child-care responsibilities or household chores.

Explore parentification in different societal and familial contexts

Although the present study has taken a small step towards a clearer understanding of the nature of parentification and has helped to advance its assessment, much work remains to be done. There is still a need for standardized and clinically relevant measures of both parentifying and parentified behaviours in parent-child relationships. There is also a need to continue to explore the antecedents and consequences of parentification, and to weigh different treatment options for the individual as well as for the family. Since the serious study of parentification began twenty years ago, this parent-child dynamic has received attention because of its possible links to many individual and family problems. These problems may include clinical concerns as diverse as incest, co-dependency, personal identity problems, an adult relationship pattern of “chronic caregiving” (Valleau et al., 1995) and “lifelong feelings of deprivation” (Love & Robinson, 1990, p. 29). Unresolved parent-child issues appear to resonate throughout life, and early detection and preventive intervention in cases of pathological parentification could prove to be the turning point in a child or an adolescent’s life. Future research should examine different social and familial contexts in which high parentification may occur in children. One precondition of a parentified parent-child relationship appears to be an unfulfilled social or emotional need in at least one of the parents; this need might be due to social isolation and loneliness, to alcoholism or substance abuse, or to an emotional distance between the parents. On the other hand, high parentification might be the result of a specific physical handicap in the parent such as deafness, blindness or a loss of mobility which obliges him or her to depend on a child to an extreme degree, or it might result from an absence of appropriate adult companionship and support, whether physical or emotional. High parentification might occasionally be a consequence of a special situation or need within the family, such as mental illness in one family member or the presence of a developmentally delayed child who demands so much of his parents’ time and energy that the “well sibling” realizes that he must not express too many needs of his own, which would overwhelm his exhausted parents, and that he must take care of his own parenting needs and occasionally his parents’ needs as well. There appears to be a culturally accepted and even expected form of parentification in some immigrant families in which parents are obliged to depend on their children who, at a young age, are more familiar with the language and culture of

their new home than are the adults. It is important to remember that even in this culture, in some domains—computer skills being one clear example—adolescents may be increasingly more at ease and indeed more competent than their parents.⁴ An additional and related area of study would examine the personal characteristics of adults who remain highly parentified and enmeshed with their parents. Certain cultural groups endorse the norm of extensive enmeshment with parents even after the establishment of a family of procreation; such an intense involvement may cause strain on a marriage, particularly if support and parenting are not reciprocated or if the spouse is from a different cultural group and feels threatened or neglected. This adult parentification may take the form of an unspoken obligation to frequently visit and take care of parents even to the point of intervening in their relationship difficulties, or of an ongoing dependence by one or both parents on their adult child for physical, financial, social or emotional support. A similar phenomenon may be that of grown children who appear to be unable to psychologically differentiate from their parents, who never successfully move away from home or establish a family of procreation. The emerging phenomenon of “eldercare”, adult children taking on increasing responsibility for their aging parents, may be a more benign form of parentification because multiple resources and supports are available to the adult child and because he or she was likely able in the course of childhood and adolescence to achieve individuation and develop an intact personal identity. Still, it is a phenomenon which promises to receive much attention in the coming years as more and more adults struggle to meet the challenge of simultaneously parenting their children and their aging parents.

These and other contexts of parentification remain to be explored. The main preoccupation of clinical research, in the opinion of this author, should be the emotional well-being of the child who has been obliged to deny his own needs in order to meet the needs of a needy parent. As the assessment of parentification is further refined, early detection of pathological levels of enmeshment, generational boundary dissolution and role reversal will permit early intervention on the level of family structure and

⁴ This should be taken into consideration when formulating a parent-child task which would allow for the observation of parentified and parentifying behaviours. Computer literacy may be one area in which many parents depend on their children in a culturally-accepted way, and a computer task would not provide an ecologically valid context in which to observe a non-computer literate parent helping a child.

functioning. In the case of the adult who was highly parentified as a child, prevention is no longer possible but therapeutic intervention may yet prove helpful. Such an adult may have indeed suffered the loss of his childhood as he took on a parental role far beyond his capabilities with a parent who was unable to give him the parenting he so deeply needed. One family therapist wrote concerning adults who had grown up as the “chosen child”,

Their parents’ need for intimacy and companionship had taken precedence over their [own] need for nurturing and independence. Paradoxically, their parents’ excessive interest in them had created lifelong feelings of deprivation: “No one is taking care of me!” (Love & Robinson, 1990, p. 29)

Alice Miller, a psychoanalyst, wrote movingly of the plight of one woman who had grown up as a parentified child. As a child she wanted, as do all children, to be loved and respected by her parents for who she was and not just for what she was able to give them. When she did not receive this unconditional love, she spent the rest of her life seeking someone who would be able to provide it to her and take over the role of the absent parent. As an adult, she turned to her own son for the fulfillment of this unmet need, thus perpetuating the cycle of parentification; the young boy, dependent upon his mother’s attention and willing to do anything not to lose it, mustered all of his resources to the end of meeting her deepest needs, “like a small plant that turns toward the sun in order to survive” (Miller, 1981, p. 8). As has been said, however, where there is life, there is hope. Through the substitute parenting which can be at the very core of therapy, the self of the adult who was a highly parentified child can begin to grow and his long-repressed needs and hurts can at last be allowed to come to the surface. Although his childhood may have been lost, it can be mourned—and, to some extent, regained. It may never be entirely too late to experience a happy childhood. Joy, which is indeed “the serious business of childhood”, can at last in adulthood find its place in the life of the grown up parentified child, and he may at last learn to feel at home with himself and with his own needs and emotions. But let it be said that, for such an adult child, “this is not a homecoming, since this home had never before existed. It is the discovery of home” (Miller, 1981, p. 21).

REFERENCES

- Abelsohn, D. & Soayman, G. (1991). Adolescent adjustment to parental divorce: An investigation from the perspective of basic dimensions of structural family therapy theory. *Family Process*, 30 (2), 177-191.
- Altman. (1974). Observational study of behavior: Sampling methods. *Behaviour*, 49, 227-265.
- Argyle, M. & Cook, M. (1976). *Gaze and mutual gaze*. New York: Cambridge University Press.
- Beal, E. (1979). Children of divorce: A family system perspective. *Journal of Social Issues*, 35, 140-154.
- Behar, L.B. & Stringfield, S. (1974). A behaviour rating score for the pre-school child. *Developmental Psychology*, 10, 601-610.
- Bell, L. & Bell, D. (1982). Family climate and the role of the female adolescent: Determinants of adolescent functioning. *Family Relations*, 31, 519-527.
- Benjamin, L.S. (1974). Structural analysis of social behavior. *Psychological Review*, 81, 392-425.
- Bergner, R. (1990). Incest, degradation and recovery from degradation. In T. Putman & K. Davis (Eds.). *Advances in descriptive psychology (Vol. 2)*. Greenwich, Connecticut: JAI Press.
- Blishin, B. & McRoberts, M. (1976). A revised socio-economic index for occupation in Canada. *Canadian Review of Sociology and Anthropology*, 13, 71-79.
- Boszormenyi-Nagy, I., Grunebaum, J. & Ulrich, D. (1991). Contextual therapy. In Gurman, A. & Kniskern, D. *Handbook of family therapy, Volume II*. New York: Brunner/Masel, Inc.
- Boszormenyi-Nagy, I. & Spark, G. (1973). *Invisible loyalties: Reciprocity in intergenerational family therapy*. Hagerstown, MD: Harper & Row.
- Bryson (1976). Division of responsibility scale. *American Psychologist*, January 1996.
- Burkett, L. (1991). Parenting behaviors of women who were sexually abused as children in their families of origin. *Family Process*, 30 (4), 421-434.
- Burt, A. (1992). Generational boundary distortion: Implications for object relations development. *Dissertation Abstracts International*, 53, 4389 (University Microfilms # 92.35327)
- Charlebois, P., LeBlanc, M., Gagnon, C., Larivée, S., & Tremblay, R. (1993). Age trends in early behavioral predictors of serious antisocial behaviors. *Journal of Psychopathology & Behavioral Assessment*, 15 (1), 23-41.

- Charlebois, P., Tremblay, R., Gagnon, C., Larivée, S., & Laurent, D. (1989). Situational consistency in behavioral patterns of aggressive boys: Methodological considerations on observational measures. *Journal of Psychopathology & Behavioral Assessment*, 11 (1), 15-27.
- Cotroneo, M. (1987). Women and abuse in the context of the family. *Journal of Psychotherapy and the Family*, 3 (4), 81-96.
- Dawson, F. (1980). The parental child in single and dual-parent families. Unpublished master's thesis, Georgia State University, Atlanta.
- Dishion, T., Gardner, K., Patterson, G., Reid, J., Spyrou, S. & Thibodeaux, S. (1984). *The Family Process Code: A multidimensional system for observing family interactions* (technical report). Eugene, OR: Social Learning Center.
- Dobkin, P., Charlebois, P., & Tremblay, R. (1997). Mother-son interactions in disruptive and nondisruptive adolescent sons of male alcoholics and controls. *Journal of Studies on Alcohol*, 58 (5), 546-553.
- Elkind, D. (1988). *The hurried child: Growing up too fast too soon*. New York: Addison-Wesley Publishing Company, Inc.
- Evans, S. (1987). Shame, boundaries and dissociation in chemically dependent, abusive and incestuous families. *Alcoholism Treatment Quarterly*, 4 (2), 157-179.
- Fish, M., Belsky, J. & Youngblade, L. (1991). Developmental antecedents and measurement of intergenerational boundary violation in a nonclinic sample. *Journal of Family Psychology*, 4 (3), 278-297.
- Flemons, D. (1991). Cross-generational triadic relationships and family health. *Family Therapy*, 18 (3), 231-240.
- Fullinwider-Bush, N. & Jacobvitz, D. (1993). The transition to young adulthood: Generational boundary dissolution and female identity development. *Family Process*, 32, 87-103.
- Godsall (1988). Why do some kids do well in bad situations: The effects of parentification and Parental impairment on childhood self-esteem. *Dissertation Abstracts International*, 56 (6-B), 3444 (Published in 1995)
- Goglia, L., Jurkovic, G., Burt, A. & Burge-Callaway, K. (1992). Generational boundary distortions by adult children of alcoholics: Child-as-parent and child-as-mate. *American Journal of Family Therapy*, 20 (4), 291-299.
- Goglia, L. (1982). An exploration of the long term effects of parentification. Published in *Dissertation Abstracts International*, 47 (4-B), Oct. 1986, 1774, Georgia State University, Atlanta.

- Green, E. (1978). *Birth order, parental interest and academic achievement*. San Francisco: R. & E. Research Associates, Inc.
- Gurman, A. & Kniskern, D. (1978). Research on marital and family therapy: Progress, perspective, and prospect, in Bergin, A. & Garfield, S. (Eds.), *A Handbook of Psychotherapy and Behavioral Change*. New York: John Wiley.
- Hyde, N. (1986). Covert incest in women's lives: Dynamics and directions for healing. *Canadian Journal of Community Mental Health*, 5 (2), 73-83.
- Jacobvitz, D. & Sroufe, L. (1987). The early caregiver-child relationship and Attention-Deficit Disorder with Hyperactivity in kindergarten: A prospective study. *Child Development*, 58, 1496-1504.
- Jarvis, P., Harper, M., & Bergner, R. (1992). An assessment of the test-retest reliability of the Parentification Scale. Unpublished manuscript, Illinois State University.
- Jarvis (1991). Unpublished study, reported in 1992.
- Jurkovic, G. (1997). *Lost childhoods: The plight of the parentified child*. New York: Brunner/Mazel.
- Jurkovic, G., Jessee, E. & Goglia, L. (1991). Treatment of parental children and their families: Conceptual and technical issues. *American Journal of Family Therapy*, 19 (4), 302-314.
- Jurkovic, G., Goglia, L. & Jessee, E. (1980). The juvenile delinquent as a moral philosopher: A structural-developmental perspective. *Psychological Bulletin*, 88, (3), 709-727.
- Karpel, M. (1976). Intrapsychic and interpersonal processes in the parentification of children. *Dissertation Abstracts International*, 38, 365-368. (University Microfilms # 77-15,090).
- Kasdin, A. (1985). *Treatment of antisocial behavior in children and adolescents*. Homewood, Illinois: The Dorsey Press.
- Kaufman, E. (1986). The family of the alcoholic patient. *Psychosomatics*, 27 (5), 347-360.
- Kleiman, J. (1981). Optimal and normal family functioning. *American Journal of Family Therapy*, 9 (1), 37-44.
- Lackie, B. (1983). The families of origin of social workers. *Clinical Social Workers Journal*, 11, 309-322.
- Lackie, B. (1984). Learned responsibility and order of birth: A study of 1,577 social workers. *Smith College Studies in Social Work*, 54 (2) 117-138.

- Larson, L. (1974). System and subsystem perception of family roles. *Journal of Marriage & the Family*, 36, 123-138.
- Loeber, R. (1990). Development and risk factors of juvenile antisocial behaviour and delinquency. *Clinical Psychology Review*, 10, 1-14.
- Love, P., & Robinson, J. (1990). *The emotional incest syndrome*. New York: Bantam.
- Mackensen, G. & Cottove, R. (1992). Family structural issues and chemical dependency: A review of the literature from 1985 to 1991. *American Journal of Family Therapy*, 20 (3), 227-241.
- Madanes, C., Dukes, J. & Harbin, H. (1980). Family ties of heroin addicts: A study of high-achieving, normal, and schizophrenic black male adolescents. *Archives of General Psychiatry*, 37, 889-894.
- Maun, B., Borduin, C., Heuggeler, S. & Blaske, D. (1990). An investigation of systemic conceptualizations of parent-child coalitions and symptom change. *Journal of Consulting and Clinical Psychology*, 58 (3), 336-344.
- McLanahan, S., Wedemeyer, N. & Adelberg, T. (1981). Network structure, social support and psychological well-being in the single-parent family. *Journal of Marriage & the Family*, 43, 601-612.
- Mika, P., Bergner, R. & Baum, M. (1987). The development of a scale for the assessment of parentification. *Family Therapy*, 14 (3), 229-235.
- Miller, A. (1981). *The drama of the gifted child*. (R. Ward, Trans.). New York: Basic Books. (Original work published 1979)
- Minuchin, S. (1974). *Families and family therapy*. Cambridge, MA: Harvard University Press.
- Minuchin, S., Montalvo, B., Guerney, B., Rosman, B. & Schumer, F. (1967). *Families of the slums: An exploration of their structure and treatment*. New York: Basic Books.
- Olson, D., Portner, J., & Lavee, Y. (1985). FACES-III: Family Adaptability and Cohesion Scale. In D. Olson, H. McCubbin, H. Barnes, A. Larsen, M. Muxen & M. Wilson (Eds.). *Family inventories (revised edition)*. St. Paul, MN: Family Social Service, University of Minnesota.
- Olson, M. & Gariti, P. (1993). Symbolic loss in horizontal relating: Defining the role of parentification in addictive/ destructive relationships. *Contemporary Family Therapy*, 15 (3), 197-208.
- Papert, K. (1972). Teaching children thinking. *Programmed learning and educational technology*, 9, 245-255.

- Peek, C. & Trezona, P. (1984, September). *The caretaker syndrome: A matter of status and eligibility*. Paper presented at the Sixth Annual Conference of the Society for Descriptive Psychology, Boulder, CO.
- Preli, R., Protinsky, H. & Cross, L. (1990). Alcoholism and family structure. *Family Therapy*, 27 (1), 1-8.
- Protinsky, H., Keller, J. & Gilkey, J. (1989). Hierarchy reversals in clinical and nonclinical families. *Family Therapy*, 16 (3), 289-291.
- Rutter, D. (1984). Looking and seeing: The role of visual communication in social interactions. New York: John Wiley & Sons.
- Rutter, D., Pennington, D., Dewey, M. & Swain, J. (1984). Eye contact as a chance product of individual looking: Implications for the intimacy model of Argyle and Dean. *Journal of Nonverbal Behavior*, 8, 251-258.
- Sarason, I., Levine, H., Basham, R. & Sarason, B. (1983). Assessing social support: The Social Support Questionnaire. *The Journal of Personality & Social Psychology*, 44 (1), 127-139.
- Searles, H. (1973). Concerning therapeutic symbiosis. *The Annual of Psychoanalysis: A publication of the Chicago Institute for Psychoanalysis*, 1, 247-262.
- Sessions, M. (1986). Influence of parentification on professional role choice and interpersonal style. *Dissertation Abstracts International*, 47, 5066. (University Microfilms # 87-06815).
- Sessions, M. & Jurkovic, G. (1986). *The Parentification Questionnaire*. Georgia State University, Atlanta.
- Sroufe, L., Jacobvitz, D., Mangelsdorf, S., DeAngela, E. & Ward, M. (1985). Generational boundary dissolution between mothers and their pre-school children: A relationship systems approach. *Child Development*, 56 (2), 317-325.
- Sroufe, L. & Ward, J. (1980). Seductive behavior of mothers of toddlers: Occurrence, correlates, and family origins. *Child Development*, 51, 1222-1229.
- Stanton, M. & Todd, T. (1979). Structured family therapy with drug addicts. In E. Kaufman & P. Kaufman (Eds.), *Family therapy of drug and alcohol abuse*, 55-69. New York: Gardner.
- Tolan, P. & Mitchell, M. (1989). Families and the therapy of antisocial and delinquent behaviour. *Journal of Psychotherapy & the Family*, 6, 29-48.
- Tolman, W. (1961). *Family constellation*. New York: Springer Publishing Co., Inc.

- Tremblay, R., Charlebois, P., Gagnon, C. & Larivée, S. (1987). *Les garçons agressifs à l'école maternelle: Étude longitudinale, descriptive, prédictive et explicative*. Montréal: Groupe de Recherche Inter-Universitaire sur la Prévention de l'Inadaptation Psycho-Sociale.
- Valleau, M., Bergner, R. & Horton, C. (1995). Parentification and caretaker syndrome: An empirical investigation. *Family Therapy, 22*, 157-164.
- Vallerand, R. (1989). Vers une méthodologie de validation trans-culturelle de questionnaires psychologiques: Implications pour la recherche en langue française. *Psychologie Canadienne, 30* (4), 662-680.
- Wallerstein, J. & Kelly, J. (1980). *Surviving the breakup*. New York: Basic Books.
- Wallerstein, J. (1983). Children of divorce: The psychological tasks of the child. *American Journal of Orthopsychiatry, 53*, 230-243.
- Walsh, F. (1979). Breaching of family generational boundaries by schizophrenics, disturbed, and normals. *International Journal of Family Therapy, 1*, 254-275.
- Weltner, J. (1982). A structural approach to the single-parent family. *Family Process, 21*, 203-210.
- West, M. & Keller, A. (1991). Parentification of the child. *American Journal of Psychotherapy, 45*, 425-431.
- Weir, K. & Duveen, G. (1981). Further development and validation of the prosocial behavior questionnaire for use by teachers. *Journal of Child Psychology and Psychiatry, 22*, 357-374.
- Wolkin, J. (1984). Childhood parentification: An exploration of long-term effects. *Dissertation Abstracts International, 45*, 2707. (University Microfilms # 84-24601)
- Wood, B. & Talmon, M. (1983). Family boundaries in transition: A search for alternatives. *Family Process, 22*, 347-357.
- Wood, B. (1985). Proximity and hierarchy: Orthogonal dimensions of family interconnectedness. *Family Process, 24*, 487-507.
- Zahn-Waxler, C., Radke-Yarrow, M., Wagner, E., & Chapman, M. (1992). Development of concern for others. *Developmental Psychology, 28* (1), 126-136.
- Zastowny, T. & Lewis, J. (1989). Family interactional patterns and social support systems in single-parent families. *Journal of Divorce, 13* (2), 1-40.

APPENDIX A

Parentification Scale (original English version)

PARENTIFICATION SCALE

Patricia Mika, Raymond M. Bergner and Michael C. Baum

Each item in this survey asks about a slightly different adult responsibility. For each of these, please circle the frequencies which best describe how often you took on this responsibility: (a) before the age of 14, and (b) from ages 14 through 16.

1. I babysat for my younger sibling(s).

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

2. My parents were away for more than 24 hours, and I was the main person who assumed responsibility for my sibling(s).

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

3. I cleaned house for my family.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

4. I restored peace if conflicts developed between my parents.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

5. My parent(s) at times became physically ill, and I was responsible for taking care of them.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

6. I was the mediator or “go-between” when a conflict arose between my siblings.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

7. My parent(s) asked for my advice when making a decision about my sibling’s misbehavior.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

8. One parent would come to me to discuss the other parent.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

9. I was responsible for deciding what action to take if one of my sibling(s) misbehaved, even when my parent(s) were present.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

10. My parent(s) sought my advice on adult matters.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

11. My parents would argue, and I would wind up on the side of one of them.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

12. I provided emotional support and/or comfort for my sibling(s).

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

13. I was responsible for dressing my sibling(s) or insuring that he/she or they got dressed.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

14. My parent(s) let me have a lot of influence when they were making important adult decisions.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

15. My parent(s) discussed their financial issues and problems with me.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

16. I did the dishes for members of my family.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

17. When my sibling(s) had problems I took a lot of responsibility for solving them.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

18. I made dinner for members of my family.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

19. I made rules, spoken or unspoken for my sibling(s).

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

20. My parent(s) shared intimate secrets (e.g., concerning relationships and/or sexual issues) with me.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

21. When one of my sibling(s) had a personal concern, they came to me for advice.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

22. I was the mediator or “go-between” when a conflict arose between my parents.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

23. My mother shared personal problems or concerns with me as if I were another adult.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

24. I did the laundry for members of my family.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

25. I was responsible for bathing my sibling(s).

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

26. I consoled one or both of my parents when they were distressed.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

27. My father shared personal problems or concerns with me as if I were another adult.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

28. My sibling(s) came to me when they were having difficulties with our parent(s).

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

29. I would decide what time my sibling(s) went to bed for the evening, even when my parent(s) were home.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

30. One (or both) of my parents asked for my input (rather than my other parent's input) when making an important decision.

Before age 14

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

From ages 14 thru 16

- a. very often
- b. often
- c. occasionally
- d. rarely
- e. never or does not apply to me

APPENDIX B

Parentification Scale (translated French version)

QUESTIONNAIRE SUR LA PRISE DE RESPONSABILITÉS ADULTES

Patricia Mika, Raymond M. Bergner et Michael C. Baum

Traduit par Dominique Leman, Michelle Masse, Marilyn Stefanoski, Ann Marie Duncan et Caroline Léger

Chaque item de ce questionnaire porte sur des responsabilités adultes qui sont légèrement différentes les unes des autres. Pour chacun de ces items, veuillez encercler la fréquence qui représente le mieux votre degré de responsabilité: (a) avant l'âge de 14 ans, et (b) de 14 à 16 ans.

N.B.: Le terme "mes frères et soeurs" peut aussi désigner "mon frère" ou "ma soeur", et le terme "mes parents" peut aussi désigner "mon père" ou "ma mère".

1. J'ai gardé mes frères et soeurs plus jeunes.

Avant l'âge de 14 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

2. Quand mes parents s'absentaient pour plus de 24 heures, j'étais la principale personne qui assumait la responsabilité de mes frères et soeurs.

Avant l'âge de 14 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

3. J'effectuais des tâches ménagères pour ma famille.

Avant l'âge de 14 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

4. Je rétablissais la paix lorsque des conflits survenaient entre mes parents.

Avant l'âge de 14 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

5. J'étais responsable de prendre soin de mes parents lorsqu'ils étaient malades. Quel parent?

mon père
ma mère
les deux

Avant l'âge de 14 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

6. J'étais le médiateur ou "l'intervenant" lorsqu'un conflit surgissait entre mes frères et soeurs.

Avant l'âge de 14 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

7. Mes parents me demandaient conseil lorsqu'ils devaient prendre une décision à propos des mauvaises conduites de mes frères et soeurs.

Quel parent? mon père
ma mère
les deux

Avant l'âge de 14 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

8. Un de mes parents venait me voir pour discuter de l'autre parent. Quel parent?

mon père
ma mère
les deux

Avant l'âge de 14 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

9. Si mes frères et soeurs avaient de mauvaises conduites, je décidais comment mettre fin à cette conduite même lorsque mes parents étaient présents.

Avant l'âge de 14 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

10. Mes parents me demandaient conseils à propos de sujets adultes. Quel parent? mon père
ma mère
les deux

Avant l'âge de 14 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

11. Lorsque mes parents se disputaient, je finissais par prendre parti pour l'un d'eux.

Quel parent? mon père
ma mère
les deux

Avant l'âge de 14 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

12. J'étais un support émotif et/ou une source de réconfort pour mes frères et soeurs.

Avant l'âge de 14 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

13. J'avais la responsabilité d'habiller mes frères et soeurs ou bien je m'assurais qu'ils le faisaient d'eux-mêmes.

Avant l'âge de 14 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

14. Mes parents me laissaient avoir beaucoup d'influence lorsqu'ils prenaient des décisions importantes.

Quel parent? mon père
 ma mère
 les deux

Avant l'âge de 14 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

15. Mes parents discutaient avec moi de leurs finances et de leurs problèmes financiers.

Quel parent? mon père
 ma mère
 les deux

Avant l'âge de 14 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

16. Je faisais la vaisselle pour ma famille.

Avant l'âge de 14 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

17. Je prenais une grande part des responsabilités afin de résoudre les problèmes de mes frères et soeurs.

Avant l'âge de 14 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
b. souvent
c. à l'occasion
d. rarement
e. jamais ou ne s'applique pas à moi

18. Je faisais le souper pour les membres de ma famille.

Avant l'âge de 14 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

19. J'établissais des règlements explicites ou sous-entendus pour mes frères et soeurs.

Avant l'âge de 14 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

20. Mes parents partageaient des secrets intimes (ex: à propos de rapports interpersonnels et/ou de questions sexuelles) avec moi.

Quel parent? mon père
 ma mère
 les deux

Avant l'âge de 14 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

21. Lorsqu'un de mes frères et soeurs avait un problème personnel, il venait à moi pour me demander conseil.

Avant l'âge de 14 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

22. J'étais le médiateur ou "l'intervenant" lorsqu'un conflit surgissait entre mes parents.

Avant l'âge de 14 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

23. Ma mère partageait ses problèmes personnels ou ses soucis avec moi, comme si j'étais un autre adulte.

Avant l'âge de 14 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

24. Je faisais le lavage pour des membres de ma famille.

Avant l'âge de 14 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

25. J'étais responsable pour donner le bain à mes frères et soeurs.

Avant l'âge de 14 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

26. Je consolais mes parents quand ils étaient en détresse.

Quel parent?

mon père
ma mère
les deux

Avant l'âge de 14 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

27. Mon père partageait ses problèmes personnels ou ses soucis avec moi, comme si j'étais un autre adulte.

Avant l'âge de 14 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

28. Mes frères et soeurs venaient me voir lorsqu'ils avaient des difficultés avec nos parents

Avant l'âge de 14 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

29. Même lorsque mes parents étaient à la maison, je décidais de l'heure à laquelle mes frères et soeurs se couchaient.

Avant l'âge de 14 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

30. Lorsqu'une importante décision devait être prise, l'un de mes parents me demandait mon avis, plutôt que de demander l'avis de l'autre parent.

Avant l'âge de 14 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

de 14 à 16 ans

- a. très souvent
- b. souvent
- c. à l'occasion
- d. rarement
- e. jamais ou ne s'applique pas à moi

Quel parent? mon père
 ma mère
 les deux

APPENDIX C

**Subscale items in the Parentification Scale
(English and French versions)**

PARENTIFICATION SCALE ITEMS

SUBSCALE 1: "CHILD AS SPOUSE TO PARENT(S)" ITEMS

7. My parent(s) asked for my advice when making a decision about my sibling's misbehavior.
8. One parent would come to me to discuss the other parent.
11. My parents would argue, and I would wind up on the side of one of them.
15. My parent(s) discussed their financial issues and problems with me.
20. My parent(s) shared intimate secrets (e.g., concerning relationships and/or sexual issues) with me.
23. My mother shared personal problems or concerns with me as if I were another adult.
27. My father shared personal problems or concerns with me as if I were another adult.
30. One (or both) of my parents asked for my input (rather than my other parent's input) when making an important decision.

SUBSCALE 2: "CHILD AS PARENT TO PARENT(S)" ITEMS

4. I restored peace if conflicts developed between my parents.
5. My parent(s) at times became physically ill, and I was responsible for taking care of them.
10. My parent(s) sought my advice on adult matters.
14. My parent(s) let me have a lot of influence when they were making important adult decisions.
22. I was the mediator or "go-between" when a conflict arose between my parents.
26. I consoled one or both of my parents when they were distressed.

SUBSCALE 3: "CHILD AS PARENT TO SIBLING(S)" ITEMS

1. I babysat for my younger sibling(s).
2. My parents were away for more than 24 hours, and I was the main person who assumed responsibility for my sibling(s).
6. I was the mediator or "go-between" when a conflict arose between my siblings.
9. I was responsible for deciding what action to take if one of my sibling(s) misbehaved, even when my parent(s) were present.
12. I provided emotional support and/or comfort for my sibling(s).
13. I was responsible for dressing my sibling(s) or insuring that he or she (they) got dressed.
17. When my sibling(s) had problems I took a lot of responsibility for solving them.
19. I made rules, spoken or unspoken, for my sibling(s).
21. When one of my sibling(s) had a personal concern, they came to me for advice.
25. I was responsible for bathing my sibling(s).
28. My sibling(s) came to me when they were having difficulties with our parent(s).
29. I would decide what time my sibling(s) went to bed for the evening, even when my parent(s) were home.

SUBSCALE 4: "CHILD PERFORMS HOUSEHOLD TASKS" ITEMS

3. I cleaned house for my family.
16. I did the dishes for members of my family.
18. I made dinner for members of my family.
24. I did the laundry for members of my family.

ITEMS DANS L'ÉCHELLE DE PARENTIFICATION

1. ITEMS CONCERNANT LE RÔLE D'ÉPOUX VIS À VIS LES PARENTS

- 7. Mes parents me demandaient conseil lorsqu'ils devaient prendre une décision à propos des mauvaises conduites de mes frères et soeurs.
- 8. Un de mes parents venait me voir pour discuter de l'autre parent.
- 11. Lorsque mes parents se disputaient, je finissais par prendre parti pour l'un d'eux.
- 15. Mes parents discutaient avec moi de leurs finances et de leurs problèmes financiers.
- 20. Mes parents partageaient des secrets intimes (ex: à propos de rapports interpersonnels et/ou de questions sexuelles) avec moi.
- 23. Ma mère partageait ses problèmes personnels ou ses soucis avec moi, comme si j'étais un autre adulte.
- 27. Mon père partageait ses problèmes personnels ou ses soucis avec moi comme si j'étais un autre adulte.
- 30. Lorsqu'une importante décision devait être prise, l'un de mes parents me demandait mon avis, plutôt que de demander l'avis de l'autre parent.

2. ITEMS CONCERNANT LE RÔLE DE PARENT VIS À VIS LES PARENTS

- 4. Je rétablissais la paix lorsque des conflits survenaient entre mes parents.
- 5. J'étais responsable de prendre soin de mes parents lorsqu'ils étaient malades.
- 10. Mes parents me demandaient conseils à propos de sujets adultes.
- 14. Mes parents me laissaient avoir beaucoup d'influence lorsqu'ils prenaient des décisions importantes.
- 22. J'étais le médiateur ou "l'intervenant" lorsqu'un conflit surgissait entre mes parents.
- 26. Je consolais mes parents quand ils étaient en détresse.

3. ITEMS CONCERNANT LE RÔLE DE PARENT VIS À VIS LES FRÈRES ET SOEURS

- 1. J'ai gardé mes frères et soeurs plus jeunes.
- 2. Quand mes parents s'absentaient pour plus de 24 heures, j'étais la principale personne qui assumait la responsabilité de mes frères et soeurs.
- 6. J'étais le médiateur ou "l'intervenant" lorsqu'un conflit surgissait entre mes frères et soeurs.
- 9. Si mes frères et soeurs avaient de mauvaises conduites, je décidais comment mettre fin à cette conduite même lorsque mes parents étaient présents.
- 12. J'étais un support émotif et/ou une source de réconfort pour mes frères et soeurs.
- 13. J'avais la responsabilité d'habiller mes frères et soeurs ou bien je m'assurais qu'ils le faisaient d'eux-mêmes.
- 17. Je prenais une grande part des responsabilités afin de résoudre les problèmes de mes frères et soeurs.
- 19. J'établissais des règlements explicites ou sous-entendus pour mes frères et soeurs.
- 21. Lorsqu'un de mes frères et soeurs avait un problème personnel, il venait à moi pour me demander conseil.
- 25. J'étais responsable pour donner le bain à mes frères et soeurs.
- 28. Mes frères et soeurs venaient me voir lorsqu'ils avaient des difficultés avec nos parents.
- 29. Même lorsque mes parents étaient à la maison, je décidais de l'heure à laquelle mes frères et soeurs se couchaient.

4. ITEMS CONCERNANT LA PRISE DU RÔLE D'ADULTE

- 3. J'effectuais des tâches ménagères pour ma famille.
- 16. Je faisais la vaisselle pour ma famille.
- 18. Je faisais le souper pour les membres de ma famille.
- 24. Je faisais le lavage pour des membres de ma famille.

APPENDIX D

Parentification Questionnaire

PARENTIFICATION QUESTIONNAIRE-ADULT (PQ-A)

Michael W. Sessions, Ph.D. and Gregory J. Jurkovic, Ph.D.¹

The following statements are possible descriptions of experiences you may have had while growing up. If a statement accurately describes some portion of your childhood experience, that is, the time during which you lived at home with your family (including your teenage years), mark the statement as true on your answer sheet. If the statement does not accurately describe your experience, mark it false.

1. I rarely found it necessary for me to do other family members chores.
2. At times I felt I was the only one my mother/father could turn to.
3. My family members hardly ever looked to me for advice.
4. In my family I often felt called upon to do more than my share.
5. I often felt like an outsider in my family.
6. I felt most valuable in my family when someone confided in me.
7. It seemed like there were enough problems at home without my causing more.
8. In my family I thought it best to let people work out their problems on their own.
9. I often resented being asked to do certain kinds of jobs.
10. In my family it seemed that I was usually the one who ended up being responsible for most of what happened.
11. In my mind, the welfare of my family was my first priority.
12. If someone in my family had a problem, I was rarely the one they could turn to for help.
13. I was frequently responsible for the physical care of some member of my family, i.e., washing, feeding, dressing, etc.
14. My family was not the kind in which people took sides.
15. It often seemed that my feelings weren't taken into account in my family.
16. I often found myself feeling down for no particular reason that I could think of.
17. In my family there were certain family members I could handle better than anyone else.
18. I often preferred the company of people older than me.
19. I hardly ever felt let down by members of my family.
20. I hardly ever got involved in conflicts between my parents.
21. I usually felt comfortable telling family members how I felt.
22. I rarely worried about people in my family.
23. As a child I was often described as mature for my age.
24. In my family I often felt like a referee.
25. In my family I initiated most recreational activities.
26. It seemed like family members were always bringing me their problems.
27. My parents had enough to do without worrying about housework as well.
28. In my family I often made sacrifices that went unnoticed by other family members.
29. My parents were very helpful when I had a problem.
30. If a member of my family were upset, I would almost always become involved in some way.
31. I could usually manage to avoid doing housework.

32. I believe that most people understood me pretty well, particularly members of my family.
33. As a child, I wanted to make everyone in my family happy.
34. My parents rarely disagreed on anything important.
35. I often felt more like an adult than a child in my family.
36. I was more likely to spend time with friends than with family members.
37. Other members of my family rarely needed me to take care of them.
38. I was very uncomfortable when things weren't going well at home.
39. All things considered, responsibilities were shared equally in my family.
40. In my house I hardly ever did the cooking.
41. I was very active in the management of my family's financial affairs.
42. I was at my best in times of crisis.

Scoring Key and Interpretation

True items: 2, 4, 5, 6, 7, 10, 13, 15, 16, 17, 18, 23, 24, 25, 26, 27, 28, 30, 33, 35, 38, 41, 42
False items: 1, 3, 8, 9, 12, 14, 19, 20, 21, 22, 29, 31, 34, 36, 37, 39, 40

The higher the score, the greater the degree of parentification.

¹ For more information on this questionnaire, contact Gregory J. Jurkovic, Ph.D., at the Department of Psychology, Georgia State University, University Plaza, Atlanta, GA 30303 USA (telephone #: 404-651-3271).

APPENDIX E
Coherency Scale

COHERENCY SCALE

[here translated into English]

In order to validate our questionnaire on adult responsibilities assumed by children and adolescents, it is very important for us to be aware of the clarity and coherency of each of the items. Please indicate the degree of clarity of each item according to the following scale:

1	2	3	4	5	6	7
very unclear	unclear	quite unclear	slightly clear	quite clear	clear	very clear

APPENDIX F

Bilingualism Scale

BILINGUALISM SCALE*[here translated into English]*

In order for us to determine your level of bilingualism,
please answer the following questions:

- | | | | | |
|---|------------------|---------------|-----------------|----------------|
| 1. I can read in English: | 1
very little | 2
a little | 3
quite well | 4
very well |
| 2. I can write in English: . . . | 1
very little | 2
a little | 3
quite well | 4
very well |
| 3. I can understand a conversation in English: . . . | 1
very little | 2
a little | 3
quite well | 4
very well |
| 4. I can express myself in English: . . . | 1
very little | 2
a little | 3
quite well | 4
very well |
| 5. I believe that I have understood the statements in this questionnaire: . . . | 1
very little | 2
a little | 3
quite well | 4
very well |

APPENDIX G

**Mother-son interactions observed in
laboratory task setting**

MOTHER	SON
<p>Giving support or structure</p> <p>11 . . . gives support¹ to son</p> <p>12 . . . calls son back on task / reprimands him</p>	<p>.</p> <p>51 . . . gives support¹ to mother</p> <p>52 . . . calls mother back on task / reprimands her</p>
<p>Expressing boredom / distraction</p> <p>21 . . . looks at herself in mirror / “preens”</p>	<p>.</p>
<p>Task role-reversal</p> <p>31 . . . touches screen</p> <p>33 . . . touches keys once or twice</p> <p>34 . . . takes over keyboard (total # of keystrokes recorded in shaded area)</p> <p>35 . . . works on keyboard uninterrupted for 30 seconds</p> <p>36 . . . sits down in son’s chair to continue working on keyboard</p>	<p>.</p> <p>71 . . . protests unrequested help, verbally or nonverbally</p> <p>72 . . . accepts² mother’s help³ without protesting</p> <p>74 . . . offers keyboard to mother, verbally or nonverbally</p> <p>76 . . . offers chair to mother, verbally or nonverbally</p>
<p>Peer-like complicity</p> <p>42 . . . laughs</p> <p>43 . . . teases, flirts / tickles son or engages in playful, peer-like touch</p>	<p>.</p> <p>81 . . . initiates or attempts to initiate eye contact with mother</p> <p>82 . . . laughs</p> <p>83 . . . teases, flirts / tickles mother, engages in playful, peer-like touch</p>

¹ approval, encouragement or comfort (verbal or non-verbal)

² gives clear sign of accepting: “OK”, “thanks”, reformulates.

³ mother touches screen / attempts to take over keyboard / take his place

APPENDIX H

Mother-son interactions recording form

File #: _____ Year: _____ d / m / y / _____ Rater: _____ d / m / y _____ Date: _____

	MOTHER					SON														
	11	12	21	31	33	34	35	36	42	43	51	52	71	72	74	76	81	82	83	
Task 1																				
0-1 min.																				
-2																				
-3																				
-4																				
-5																				
-6																				
-7																				
-8																				
-9																				
-10																				
Task 2																				
-11																				
-12																				
-13																				
-14																				
-15																				
-16																				
-17																				
-18																				
-19																				
-20																				
Total 1																				
Total 2																				
TOTAL																				

PARENTIFICATION: HIGH / LOW
(circle when obvious)

MOTHER responsibility relationship 0 1 2 3 4
 SON responsibility relationship 0 1 2 3 4
 XXX

Observations/ explanations:

APPENDIX I

Procedural instructions given to interviewers on

- 1. Contacting participants**
- 2. Administering questionnaires**
- 3. Filling out Interview Form**

1. Prise de responsabilités adultes: Faire le contact (140 sujets potentiels)

A) À partir de la liste, trouver les numéros de téléphone actuels (= travail de détective!)

B) Contacter sujets par téléphone

- 1) Demander d'abord l'adolescent lui-même
- 2) S'il n'est pas là, demander à quel moment on pourrait le rejoindre
- 3) Si le numéro n'est plus bon, chercher à le contacter à travers parents, numéros secondaires (ie, numéro de travail de la mère), demander si la personne à la ligne serait au courant, etc.

C) S'identifier:

Bonjour, je m'appelle _____ et je travaille pour un étudiant à l'école de psycho-éducation. Il y a quelques années, t'es venu au laboratoire pour faire du travail sur un ordinateur en présence de ta mère. Est-ce que tu t'en souviens? Je fais partie de cette équipe-là. . .

(S'il s'en souvient, continuer. Sinon, essayer de lui rappeler l'experimentation avec ordinateurs au labo de l'école de psycho-éd; mentionner Louise Bineau, qui a peut-être gardé un contact avec lui, ou Pierre Charlebois, qui lui a écrit une lettre pour expliquer l'experimentation)

D) Expliquer le but de ton appel:

Hé bien, on fait actuellement une recherche sur les responsabilités adultes prises par les jeunes hommes qui faisaient partie de l'étude. Nous sommes en train de recontacter tous les jeunes qui sont venus au laboratoire. Il s'agit de remplir chez toi un questionnaire qui parle du rôle que tu as joué dans ta famille avant et après l'âge de 14 ans. Pour remplir ce questionnaire ne devrait pas te prendre plus qu'une demie-heure, et il n'y a pas de suivi après. Suite à ça, on aimerait te donner un cinq dollars pour ta gentillesse de répondre à ce questionnaire.

E) Prendre rendez-vous:

En plus, on va se rendre chez toi ou à l'extérieur, selon tes disponibilités, pour te rencontrer avec le questionnaire. (Parler de nos disponibilités)

Est-ce que tu seras disponible à un de ces moments?

Quelle est ton adresse? . . .peux-tu me donner des directions spécifiques? . . .quelles sont les rues principales dans ton coin?

(important! il y a beaucoup de rues qui portent le même nom)

Est-ce qu'il y a d'autres numéros de téléphone où je pourrais te rejoindre au cas où j'aurai un empêchement?

As-tu d'autres questions? (Répondre ou donner numéro de Darrell)

S'il te plait, appelle-moi si jamais tu as un empêchement, où laisse-moi un message dans ma boîte vocale. Donc, on va se rencontrer _____ à _____ chez toi.

2. Prise de responsabilités adultes: Faire remplir des questionnaires

- A) Accueillir l'adolescent et lui remercier de sa participation.
- B) Trouver une place tranquille pour s'asseoir ensemble, essayer de réduire distractions (ie, demander si on peut fermer le système de son, la télévision, s'éloigner des autres membres de la famille. . .)
- C) Poser à l'adolescent des questions sur sa famille pour établir le rapport (remplir la feuille sommaire)
- D) Expliquer le questionnaire:
A travers cette étude, nous essayons de répondre à la question suivante: Jusqu'à quel point les jeunes hommes québécois sont-ils appelés, en tant qu'enfant ou adolescent, à entreprendre des tâches ou des responsabilités adultes? La réponse à cette question a d'importantes implications pour notre compréhension des jeunes hommes qui ont eu à adopter ces rôles dans leurs familles.
Comme tu peux voir, ce questionnaire est court: il ne contient que 30 questions. Je te demande donc de bien lire chaque question et de répondre attentivement à chacune des questions
- (Prendre avec lui la première question comme exemple. Il est important de souligner deux choses: qu'il doit répondre pour deux moments différents—avant 14 ans et entre 14 et 16 ans—et que lorsque le questionnaire dit “mes frères et soeurs” ou “mes parents”, il peut répondre dans l'affirmatif même s'il s'agit d'un frère ou d'une soeur seulement ou de sa mère ou de son père seulement.)
- E) Donner “Questionnaire sur la prise de responsabilités adultes” / stylo (s'il en a besoin)
Avant de commencer, as-tu des questions? . . . Si jamais tu as des questions pendant que tu remplis le questionnaire, n'hésite pas à me les poser.
- (Essayer de répondre à ses questions et les prendre en note. Pendant qu'il travaille, lire qqch où écrire sur la feuille sommaire pour ne pas avoir l'air de le surveiller)
- F) Reprendre l'échelle. Voir si l'adolescent a des questions, des réactions spontanées ou des commentaires à faire par rapport au questionnaire, et les écrire sur la feuille sommaire.
- G) Remercier l'adolescent, lui donner le 5\$, lui dire qu'il n'y a pas de suivi et qu'il pourrait appeler à Darrell Johnson s'il a des questions ou s'il aimerait en savoir plus. S'il a le goût de parler plus de sa situation familiale, il pourrait aussi le dire à DJ qui pourrait lui offrir des références.
- H) Écrire date, numéro de dossier, tes initiaux sur la feuille et le questionnaire.
- I) Donner à DJ

3. Prise de responsabilités adultes: Remplir la feuille sommaire

A) Âge:

Quelle est ta date de naissance?

B) Fraterie:

As-tu des frères ou des soeurs? Si oui,

Peux-tu me donner leurs prénoms et leurs âges, en commençant par le plus vieux?

Ensuite, Où est-ce qu'ils habitent?

(Prendre seulement les noms qu'il donne spontanément; si plus tard il ajoute d'autres noms [eg, demi-frère, fils d'un beau-parent], écrire les noms mais entre paranthèses)

(Spécifier s'il s'agit d'un demi-frère ou soeur, de l'enfant d'un beau-parent ou d'un "chum" ou d'une "blonde" en mettant le symbole et la lettre pertinents—

eg., * Jean 16 avec père (p) veut dire que Jean est le demi-frère du sujet;

+ Luc 2 √ (c) veut dire que Luc est le fils du chum de la mère)

(Indiquer où habite chaque membre de la famille en ce moment; eg, "√" (= avec sujet), "en appartement seul", "avec père", "en residence", "à Chicoutimi", etc.)

C) Parents:

Comment s'appellent tes parents? Ils ont à peu près quel âge?

Est-ce qu'ils sont toujours ensemble? Sinon,

Est-ce que ton père ou ta mère habite avec un autre partenaire?

Donc, si je comprends bien, en ce moment t'habites avec _____?

D) Relation avec mère:

Comment est-ce que tu décrirais ta relation avec ta mère?

(Pas besoin de poser la même question p/r au père; focus est sur la relation mère-fils)

E) Commentaires spontanées faites par l'adolescent:

(Pas besoin de poser des questions--il s'agit des commentaires faites spontanément par l'adolescent; eg, "je ne m'entends pas très bien avec mon père")

F) Impressions du chercheur de son degré de parentification:

("0" = pas du tout parentifié, ne démontre pas de prise de responsabilité, semble être centré sur ses propres besoins; "5" = bien équilibré, responsable mais pas à l'extrême, joue le rôle d'un fils et non celui d'un parent; "10" = très parentifié, démontre une responsabilité extrême pour les besoins d'autrui, prend soin d'un parent ou des deux)

G) Remarques / observations:

(Prendre en note les comportements de l'adolescent qui suggèrent un degré bas ou élevé de parentification; eg, "il s'occupe de notre bien être—'voulez-vous qqch à boire?'— "très poli, manière très adulte" ou bien, "s'est pas présenté la première fois").

H) Changements dans sa situation familiale

Maintenant j'aimerais savoir avec qui t'as déjà vécu pendant toute ta vie. En ce moment, t'habites avec _____, n'est-ce pas? Quand tu es né, t'habitais avec qui? Et _____ est né(e) quand t'avais quel âge? . . .

(Donner l'explication des circonstances qui ont amené des changements en utilisant les lettres indiquées; s'il n'habite plus avec un de ses parents, donner la fréquence des contacts et comment ça a changé depuis son départ de la demeure familiale)

(Indiquer un commencement ou une fin par un point sur la ligne; un point sur la ligne en-dessous du chiffre indique l'année; un point au milieu d'un carré indique la demie-année)

I) Ses commentaires / questions / réactions p/r aux questionnaires:

As-tu des questions?

Comment as-tu trouvé ces questionnaires? (ie, facile, pas pertinent, pas assez de choix, question spécifique qui était difficile à répondre etc.)

En quoi est-ce qu'ils étaient différents que les autres que t'as déjà remplis?

APPENDIX J

Interview Form

CHANGEMENTS DE SITUATION FAMILIALE:

Âge du sujet: Personnes avec qui il habitait: Explication des changements:* Si pas avec père / mère, les voyait:**

	mère	père							père:	mère:
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										

*Explication des changements: X = séparation des parents; N = naissance d'un frère ou d'une soeur;
R = réconciliation des parents; P = nouveau partenaire; E = enfant(s) de ce partenaire; D = départ d'un enfant;
DS = déménagement du sujet; M = mort

**1=quotidiennement; 2=plusieurs x / sem.; 3=une x toutes les 1-2 sem.; 4=une x / mois; 5=moins souvent; 6=jamais

Ses commentaires / questions / réactions p/r aux questionnaires:

APPENDIX K

Selected individual cases of high parentification

Selected individual cases of high parentification

Jean-François (aged 18 years, 9 months) lived with both parents and with one younger sister who was 12 years old at the time of the interview. He greeted the interviewer with an apology—he was crying, he said, because he had been watching a sad movie. In the interview, J-F presented as very socially appropriate and responsible; he initiated speaking English with the interviewer (one of only two participants who did this) “because I thought that was your best language”. He also turned on the light so the interviewer could see better. J-F apologized that the house was in a mess, offered the interviewer a drink and introduced his sister who was in another room. As we were talking together, he began making dinner for the family. He spoke easily and openly about his job, his studies and his girlfriend. He gave the impression of a young man who was articulate and mature as well as positive and enthusiastic about his life. He was planning to study history and geography at university and had been working as equipment manager for his school’s football team.

J-F described his relationship with his mother as good and claimed that they sometimes experienced problems “because we are the same sign”—they had a lot in common, and they also had a lot of differences between them. “When we argue, it bothers the family”, J-F said, because mother and son screamed at each other. He responded yes to the question (asked after he had completed the questionnaire) of whether he had ever “taken care of” one or both of his parents. He said that his father “doesn’t talk much or rule the house much” and that consequently he was the one who helped his mother with such tasks as dishes, laundry, cooking, and doing other chores around the house. He also said that he helped her “psychologically” when she was experiencing difficulties with his father or his sister; “she talks to me, I give her advice”. This had been going on for the previous two years: “now I have more [responsibility] than I did three or four years ago; my father and mother are working and I want to help them. They’re counting on me a lot!” He did not think that this meant too much responsibility for him; “it’s easy for me—I listen to a lot of people’s problems”. J-F spontaneously described himself as generous, a good friend and a good listener who was indeed involved in helping a lot of people around him. His Parentification Score was 37, the highest one obtained in this study.

Francis (aged 18 years, 4 months) was an only child living with both of his parents. When asked about his relationship with his mother, he responded, “It’s hard to say; she asks a lot of wrong questions just at the wrong moment—that gets on my nerves!” He was attending school and doing some part-time work as a model. It surprised me that Francis ended up in the High-Parentification group because he did not present as extremely responsible, although he was friendly and cooperative. The interview took place in the stairwell of a friend’s home because Francis had forgotten about our meeting, and he smoked during the interview. He had very good eye contact and said at the end of the interview, “call me back if you have any more questions”. F. had a Parentification Score of 33, the second highest obtained in this study.

Nicolas (aged 18 years, 11 months) lived with both parents, with one older brother (aged 19 years) and with two younger brothers (aged 10 and 14 years). He was very polite, apologized for not being able to meet with me sooner due to his work schedule, and offered me a drink. He was quite interested in the goals of my research and asked how I had come to choose him as a participant. He said he enjoyed a good relationship with his mother whom he described as a friend. N. was working and going to school but did not plan to attend university. He felt that he had been given too much responsibility when he was younger in terms of taking care of the house, “but not in other things”. He did say that he had taken care of his parents “in the sense of

taking care of the house, but not telling my father what he should be doing”. In the questionnaire, N. indicated that he had “very often” acted as a mediator between his parents, that they had both “very often” discussed financial matters with him and shared intimate material with him, from before he was 14 years old. His mother, but not his father, had “very often” shared her own problems and concerns with him, and he had “very often” consoled her when she was in distress. N. had a Parentification Score of 31.

Frédéric (aged 18 years, 3 months) lived with his mother and one younger sister, aged 16. He had been living with his mother since his parents divorced when he was six years old; he didn’t see his father at all for the next three years, and after that he has been in contact once every couple of weeks. F. described his relationship with his mother as very good and did not feel that he had been given too much responsibility, although he had taken care of her two years ago (he did not explain in which way). He was going to school as well as working for a dry cleaning company. F. scored 31 on the PS (Child-Parent items).

Benoit (aged 18 years, 11 months) was living in an apartment with the former girlfriend of his eldest brother. Before leaving home he had been living with both parents. Benoit had two older brothers, now 26 and 20 years old, but the eldest had moved out when he was 12 years old and the second brother had left for Cegep when he was 14, leaving him from that point on as the “only child” living with his parents. Benoit described his relationship with his mother as good: “we get along, we understand each other—we’re *un peu complice* [kind of like accomplices]!”. He was neither attending school nor working but intended to begin Cegep in two months in order to study parapsychology. He was very polite, offering me a glass of juice and talking very openly about his beliefs and his philosophy of life: “I’m still looking!” Benoit did not consider himself to have taken on too much responsibility at home when he was younger, and thought it appropriate that the older he became, the more responsibility he had been given. He answered yes to the question of having cared for one of his parents; when his parents quarrelled once and his father left home for a month and a half, Benoit had taken over his father’s manual chores (such as chopping wood) and had also taken upon himself the responsibility of cheering up his mother and helping her feel better. Benoit had a Parentification Score of 25.

André (aged 18 years, 3 months) was living with his mother alone at the time of the interview, but had a long history of moving in and out of the family home. His parents divorced when he was two years old and he first had spent three years with his father before voluntarily entering a group home for two and a half years. He didn’t see his father much after that point until he turned eight, and since then he has been seeing his father once every couple of weeks. André was also living with his older brother (age 19) and his younger sister (age 10). He told me that he got along well with his mother but added that they frequently quarrelled. André presented as friendly and likeable and made a lot of jokes. He was not attending school or work, having only recently left another group home where he had been living. (The circumstances of his stay there were unclear). André scored 20 on the Child-Parent subscale; from age 14 to 16, he reported that his mother “very often” discussed financial problems with him and “occasionally” shared her secrets with him. During this period of time he “occasionally” served as a mediator between his parents and his mother “often” shared her personal problems and concerns with him as if he were another adult.

High scores, but not in the High Parentification group

Pascal (age 18 years, 7 months) was living with his mother when I interviewed him. His parents had separated when he was a baby and he had lived with his father until age 10, seeing his mother every week or so. Then he came to Montréal to attend school (his father lived out in the country) and moved in with his mother where he has lived ever since. From age 13 or 14 he has also lived with two younger brothers (now four and five years old), children from his mother's new relationship. His mother, who was present during part of the interview, uses a wheelchair to get around, and she expressed that while he did not "take care of her", Pascal did help her out a lot, doing household chores and picking his half-brothers up from kindergarten. Pascal presented as quiet and timid and both mother and son seemed to be in a somewhat depressed mood. He had a Parentification Score of 19 and wrote in the questionnaire that both parents asked his advice about adult subjects from before when he was 14 years old, and that from this young age they both "occasionally" discussed finances and financial problems with him. During this same time period, his mother "often" and his father "occasionally" shared their personal problems with him.

Luc (aged 18 years, 6 months) appeared older than his age. He lived alone with his father at the time of the interview; his older sister, aged 21 years, had moved out when he was 15 and his parents had separated when he was 12 years old. Since the separation he has lived with his father but he still sees his mother on a daily basis. Father's new spouse and her 20 year-old son moved in when Luc was 14. While answering the questions in the Parentification Scale he was somewhat confused as to who constituted his family: "Who is it? My father, my mother, my sister, or her too?" (indicating his stepmother who was working in the kitchen). While he almost never speaks to his stepmother, he described his relationship with his mother as very good. He said that he "takes care of" his mother quite a bit; she works as janitor of an apartment building, and Luc often does chores for her there. On another level, he said he also provided her with moral support and talked to her a lot about her difficulties. In the PS he indicated that both parents asked his advice "occasionally", that he "occasionally" acted as a mediator for his parents and that both parents "occasionally" shared their personal problems and concerns with him and he had to console them (from before age 14). From age 14 to 16 his father "occasionally" shared secrets with him. Luc's score on the PS (Child-Parent items) was 19.

APPENDIX L

Tables not included in the text

Table 1-A

Interrater Reliabilities for Observational Predictors Not Used in Analysis (n = 27)

Predictor	Cronbach's alpha		<u>M</u>
	T ₁	T ₂	
Mother gives son support	.60	.44	.52
Mother continues doing son's task (> 30 s) ^a	.91	--	.91
Mother's total number of keystrokes ^a	.90	.41	.65
Mother sits down in son's chair ^a	.82	--	.82
Mother teases/ "flirts" with son	.70	.16	.43
Son protests mother's help	--	--	--
Son accepts mother's help	.72	--	.72
Son offers keyboard/ his chair to mother	--	--	--
<u>M</u>	.77	.33	.67

Note. Tasks took place in the Learning Lab and involved both mother and son. At T₁ the average age of the 27 subjects was 13.3 years, SD = .53. At T₂, the average age of subjects was 15.3 years, SD = .53. Items without an alpha were not observed by one of the two raters during the task.

^aThese items were multicollinear with "mother takes over".

Table 2-A

Outcomes of Previous Studies Using the Parentification Scale

Authors	N	Population	Parentification Scale Results ^a			Other Significant Findings
			M	SD	Min Max	
Mika, Bergner & Baum (1987)	100	Female undergraduates (eldest, $f_1 \geq 1$ younger sib)	59.0	29.0	8.5 134.0	<ul style="list-style-type: none"> • Construct validation, Spearman $r = .98, p < .01$ • "Clinically significant" degree of parentification: score of 85-90 (> 1 SD above test mean)
Jarvis, Harper & Bergner (1992)	28	Female undergraduates	54.3	27.1	? ?	<ul style="list-style-type: none"> • $T_1 - T_2: r = .88, p < .0001$ (interval: 4 months)
...	29	Grade 9 students	? ?	? ?	? ?	<ul style="list-style-type: none"> • $T_1 - T_2: r = .63, p < .002$ (interval: 4 months)
Valleau, Bergner & Horton (1995)	208	Female undergraduates	48.9	29.7	0.5 144.0	<ul style="list-style-type: none"> • Cut-off for highest 1/3 of scores: 56.5
Johnson et al. (pre-test) (1997)	18	Female undergraduates (eldest, $f_1 \geq 1$ younger sib)	63.2	27.9	27.5 117.5	<ul style="list-style-type: none"> • $T_1 - T_2: r = .85, p < .01$ (interval: 1 week) • Cut-off for highest 1/3 of scores: 77.1
Johnson (1999)	82	Male adolescents (18-19) (various sib situations)	39.8	22.3	1.0 113.0	<ul style="list-style-type: none"> • Cut-off for highest 1/3 of scores: 46.7
...	34	male adolescents (18-19) (eldest, living with ≥ 1 younger sib)	46.0	25.1	8.0 113.0	<ul style="list-style-type: none"> • Cut-off for highest 1/3 of scores: 51.2

Note. Possible range of PS scores: 0 - 185 (weighted), 0 - 240 (unweighted). ^aWeighted scores

Table 3-A

Parentification Scale Subscale Outcomes for Jarvis Study, Subgroups of Adolescents in the Present Study

Subscale	<u>"Before age 14"</u>		<u>"Age 14-16"</u>		<u>Total scores</u>	
	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>
1. Child as "Spouse" to Parent(s)						
Jarvis et al. (<u>N</u> = 28)	7.9	5.2	6.9	4.0	--	--
Johnson (<u>N</u> = 82) ^a	6.2	5.2	5.0	3.5	11.1	8.3
Johnson (<u>n</u> = 34) ^b	6.8	5.7	5.3	4.0	12.1	9.3
Johnson et al. (<u>N</u> = 18) ^c	--	--	--	--	15.6	8.9
2. Child as "Parent" to Parent(s)						
Jarvis et al. (<u>N</u> = 28)	9.3	4.5	7.6	3.9	--	--
Johnson (<u>N</u> = 82)	6.3	4.5	4.4	3.4	10.7	7.6
Johnson (<u>n</u> = 34)	6.3	4.4	4.2	3.3	10.5	7.2
Johnson et al. (<u>N</u> = 18)	--	--	--	--	12.1	7.6
3. Child as "Parent" to Sibling(s)						
Jarvis et al. (<u>N</u> = 28)	11.1	6.9	8.4	5.5	--	--
Johnson (<u>N</u> = 82) ^d	8.2	6.6	5.2	4.5	13.3	10.6
Johnson (<u>n</u> = 34)	11.3	6.5	7.2	4.7	18.5	10.6
Johnson et al. (<u>N</u> = 18)	--	--	--	--	27.2	13.8
4. Child Performs Household Tasks						
Jarvis et al. (<u>N</u> = 28)	1.5	1.2	0.8	0.8	--	--
Johnson (<u>N</u> = 82)	3.1	2.1	1.5	1.1	4.6	3.0
Johnson (<u>n</u> = 34)	3.2	2.1	1.6	1.2	4.8	3.1
Johnson et al. (<u>n</u> = 18)	--	--	--	--	8.4	4.6

Note. ^aAll subjects. ^beldest, living with ≥ 1 younger sib. ^cPretest. ^dNot valid for comparison purposes because many subjects (n = 36) were not living with younger siblings at age 16.

