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CONTRIBUTING FACTORS OF CHILDHOOD PARENTIFICATION: AN EXAMINATION OF FAMILIAL CHARACTERISTICS

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A Project

Presented to the

Faculty of

California State University,

San Bernardino

In Partial Fulfillment

of the Requirements for the Degree

Master of Social Work

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by

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ABSTRACT

This study provides more insight into childhood parentification's contributing factors, focusing on familial characteristics. The research sought to identify common components present in the family structures of parentified children. The researcher conducted a qualitative study utilizing purposive and snowball methods to recruit ten participants who were social work professionals and/or students working with parentified youth (one of whom also identified as a parentified child themself). The researcher used open-ended questions to determine common factors that parentified clients and their families demonstrate while working with social workers. This study identified four contributing factors to the parentification in youth. The study's findings suggest that the socioeconomic status of a child's family, the presence of varying types of abuse in the home (including abuse of substances and various of child abuse), a lack of parental support for children, and the presence of familial trauma all contribute to the development of parental behaviors and responsibilities in youth. Limitations of the study include the small sample size, non-probability sampling method, and low level of generalizability of findings. Implications for social work practice include the development of more informed service offerings for adolescent clients that incorporate dual services for their parents as well.

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CHAPTER ONE:

INTRODUCTION TO CONTRIBUTING FACTORS OF CHILDHOOD PARENTIFICATION

Introduction

This chapter will introduce possible contributing factors of childhood parentification to expand awareness and establish a basis for this study. In addition, this section will offer an introduction and explanation of parentification, the purpose of the present study, and the significance of the research for Social Work Practice.

Problem Formulation

Western society views adolescence and its associated childhood as a time when youth should not be burdened with adult stressors, concerns, or responsibilities. Parentification represents the opposite of the standard mentioned above and results from a child's acquisition of adult-like roles and obligations. In contrast to traditional situations, some adolescents assume adult roles of less "benefit" to their childhood and more advantageous to the needs of their families (Burton, 2007). This assumption of adult responsibility is called Parentification. Most parentification cases show greater prominence within families where there have been disruptions of boundaries and assumed roles established between parent and child.

Parentification can occur in family structures with both healthy and unhealthy boundary structures (Jurkovic, 1997). With parentification developing by various means, Jurkovic (1997) suggests that boundary distortions play a significant role in developing the issue. In distorted family settings, flawed self-other and subsystem boundaries exist at the transactional level and contribute to excessive levels of adult responsibility placed on the child(ren) (Chase, 1999). Parentified youth often assume the role of caregiver to other children in the home, with no supervision or shared responsibility with other family members (Jurkovic, 1997); they occasionally also assume the care for a parent (Barnett & Parker, 1998).

Two types of parentification exist, instrumental and emotional (Chase, 1999; Hooper L. M., 2007; Jurkovic, 1997). Some parentified children exhibit one or both types of role-reversal within their family settings. Emotional parentification happens when the child tries to validate emotional or psychological vacancies for the parent (Hooper L. M., 2007). This role is often detrimental to the child's development and impacts their functioning as an adult (Hooper L. M., 2007). Instrumental parentification results when children try to relieve parents' anxiety and functioning by taking on the roles typically maintained by one or two parents. These tasks are usually of an "instrumental" capacity and include cooking, cleaning, caregiving, and shopping (Hooper L. M., 2007).

Parentification has various consequences when adults fail to effectively occupy their parental roles (Mijl & Vingerhoets, 2017). In cases where parental deficits include addiction, disability, or abuse, some youth are confined to an

exceedingly burdened state of obligation and forced to assume the role of the parent while forgoing their childhood experience (Boszormenyi-Nagy & Spark, 1973). Whether done explicitly or implicitly, parents of parentified children create environments where needs arise for the child to help maintain balance within the home in an emotionally supportive capacity (Hooper, 2008). This type of role reversal can include triangulation and enmeshment with parental figures, resulting in cross-generational coalitions that force children's disengagement from one specific parent figure (Jurkovic, 1997).

The phenomenon of parentification causes adverse effects on youths' developmental capacities, causing unintended changes in childhood experiences (Coll et al., as cited in Nebbitt & Lombe, 2010). Many of these unintentional changes result from children shouldering the responsibilities of adults in multiple capacities. Parentified children are more likely to suffer from physical issues such as headaches and abdominal disruptions, with additional research confirming the presence of internalized symptoms of depression and anxiety (Engelhardt, 2012). The stress associated with adult roles' assumption impacts children's developing competencies and compromises their ongoing developmental needs (Shaffer & Sroufe, 2005).

Purpose of the Study and Research Question

This study advances the following research question: What family characteristics are associated with childhood parentification development?

The study provides more insight into childhood parentification's contributing factors, focusing on familial characteristics, and identifies common components present in the family structures of parentified children. The researcher conducted a qualitative study utilizing purposive and snowball methods to interview participants. The researcher used open-ended questions to determine common factors that parentified clients and their families present while working with social workers. This researcher developed interview questions to identify similarities in family traits, traditions, and potential deficits in family structures.

This study's research examines the contributing factors to youth's positive and negative parentification. The resulting data provide further information on this phenomenon and offer insight into the development and continuity of this specific form of psychological and emotional abuse within families. In addition, the data highlight select interactions with clients who are parentified children through the perspective of social workers currently employed and working with parentified children. Finally, study results identify possible solutions and interventions to reduce the occurrence of parentification amongst youth.

Significance of the Project for Social Work Practice

Implications from this study for social work practice include the need to provide relevant knowledge to frontline service providers related to parentification in youth. In addition, there is a lack of appropriate and immediate service interventions to highlight issues specific to childhood parentification concerns.

Social Work practitioners are also unable to interpret children's behaviors appropriately and determine when these behaviors are, in fact, the result of childhood parentification (Burton, 2007). This inability to properly assess children's adverse behaviors leads to potential misdiagnosis, faulty treatment planning, and failed interventions. This study's results will contribute to better clinical and social service practices, program design and service delivery for parentified youth and their families.

Research from this study provides more insight into the development and outcomes of childhood parentification in youth. Social work practitioners may develop a better understanding of the concept of parentification in households and have empirical data on which to design appropriate intervention services for this demographic. The study's findings may be beneficial to agencies and organizations operating in Child Welfare Services, as they are more likely to encounter parentified youth and recommend intervention services. The study also provides value to clinical practitioners working with families impacted by parentification. There could also be benefits for those parents suffering from emotional disturbances that lead to parentification within their homes. This research enables Social Work practitioners to identify the contributors to parentification and make better case plans for families to address risk factors and barriers to successful departures from the issue. In addition, more precise childhood behavior diagnoses could be developed due to this study's data, allowing for acknowledging and highlighting positive skills existent in youth resulting from parentification (Burton, 2007).

Summary

This chapter identified the problem and purpose of this study. The chapter defines parentification in youth and highlights the need for this research. Within this section, the research question is established, guiding the objective for this works. The method and type of study are defined. The chapter also discussed the significance of the study for social work practice, including indications of shortcomings and room for improvement in relation to parentified youth.

CHAPTER TWO:

LITERATURE REVIEW

Introduction

Parentification, synonymous with the term "adultification," describes a child that has been exposed to and forced to assume adult responsibilities. For this study, the researcher will use the term parentification. This type of responsibility causes youth to abandon their childhood or adolescence and often disrupts their functioning and developmental processes (Chojnacka, 2020). This chapter will explore possible contributing factors of childhood parentification relative to familial characteristics to expand awareness and establish a basis for this study. Contributing factors that will be covered include attachment issues and generational transmission issues. One of the main theories supporting this research and consistent with the study is the Family Systems Theory. Family Systems Theory conceptualizes the composition of the parentified family structure and highlights the dissolution of boundaries within subsystems.

Attachment

Bowlby (1988) theorized that interpersonal bonds developed early in life were predictors of future well-being. Through his work, Bowlby developed attachment theory, which was ultimately expanded upon by Ainsworth et al. (1978). Three attachment styles were developed from Ainsworth and her team's observations and classified in infant behavior (Ainsworth, Blehar, Waters, & Wall, 1978). The first attachment type is insecure-avoidant attachment, characterized

by children who seem independent too early and avoid direct contact with their caregiver (Engelhardt, 2012). This attachment style often develops when caregivers are emotionally unavailable and unresponsive to a child's needs. The second attachment type is insecure-resistant attachment, identified by a child's attitude of uncertainty when dealing with the caregiver (Engelhardt, 2012). This attachment style results from a caregivers' instability in interacting with the child and the caregivers' inconsistent availability. The final attachment type is secure, reflecting comfort in the caregiver-child relationship, and implies a reliable, trustworthy attachment to the caregiver (Engelhardt, 2012). Engelhardt (2012) states that a child's sense of identity, security, and well-being are highly influenced by the connection established during the infant attachment period. Relation to others becomes dependent upon the internal working models developed due to the secure or insecure attachment between caregiver and child during the attachment phase (Engelhardt, 2012).

Current research implies that attachment theory provides a foundation for an infants' subsequent relationships throughout their life (Hooper L., 2008). Bowlby (1988) suggests that attachment styles developed between the child and caregiver carry over into later relationships in that child's future. Early experiences of connection with caregivers define an internal working model that remains with infants throughout childhood and adolescence, thus setting the tone for all future interactions and relationships (Hooper L. M., 2007). Internal Working Models are mechanisms developed during the attachment phase that contribute to different parentification outcomes (Hooper L. M., 2007). The construction of

these internal working models is a critical task of childhood development and frequently has lasting effects in various areas within an individual's life (Engelhardt, 2012).

Hooper (2007) suggests that these working models define and create the boundaries for connection and attachment within a person and influence the rules and limitations by which individuals identify themselves. In addition to identity development and differentiations, individual aspects of personality, including temperament, self-esteem, and interpersonal relationship skills, are impacted by internal working models (Engelhardt, 2012). How others are viewed, behaviors, feelings, and perceptions directly result from internal working models formed due to childhood experiences and their corresponding interpretations (Ainsworth, Blehar, Waters, & Wall, 1978; Byng-Hall, 2002; Hooper L. M., 2007). If left unaddressed, unhealthy models could potentially carry into adulthood and contribute to generational parentification transmissions (Hooper L. M., 2007).

Current research on parentification and attachment theory only identifies the presence of either secure or insecure attachment between parents and children (Engelhardt, 2012). Further research is necessary to identify specific attachment patterns present with the parentified population. Current literature that focuses on the association between parentification and attachment also emphasizes the development of internal working models as a core determinant. These working models can determine whether an individual carries out the parentification process or not (Byng-Hall, 2002).

Generational Transmission

In parentified families, boundaries are often distorted or nonexistent (Hooper L., 2008). These families include possible enmeshments in which one family member is over-involved or takes advantage of other family system members (Hooper L., 2008). Parent-child enmeshments are often the result of intergenerational boundary breakdowns and unhealthy intrafamilial constructs (Garber, 2011). Assuming that a child's parentification plays a significant role in the development and attachment of future relationships, it is ubiquitous that the lack of boundaries becomes transmitted across generations as a normal part of the family structure (Engelhardt, 2012).

When attachment issues arise in childhood and carry into adulthood, generational transmission is more likely. With a leading indicator of parentification being the caregiver's role, many children, when entering maturity, retain their position as caregivers in their relationships (Engelhardt, 2012). These individuals are also more likely to compensate for their missed developmental needs by seeking emotional support and nurturance from their own children (Earley & Cushway, 2002). In an investigation of the transmission of role-reversal across generations, Jacobvitz et al. (1996) determined that grandmothers' recollections of child sheltering were relative to the presence of boundary distortions between mothers and children. Peris & Emery (2005) emphasize that prior research has indicated that mothers are more commonly parentified than fathers, and daughters are often more parentified than sons (Jacobvitz & Bush, 1996).

In households with maternal parentification history, there is an increased risk of disrupted parenting cognitions and behaviors (Nuttall, Zhang, Valentino, & Borkowski, 2019). Examples of these disrupted cognitions include a lack of infant care knowledge, increased emotional distress levels in response to a mothers' infant's discomfort, and a decreased presentation of care and instinctual receptiveness from mother to infant (Nuttall, Zhang, Valentino, & Borkowski, 2019). Nuttall et al. (2019) describe the generational transmissions that occur due to the presence of some maternal parentification history, citing the development of adverse expressed behaviors in toddlers and children.

Role-reversal is a primary indicator of parentified households in the abandonment of generational hierarchy. On occasion, single parents unconsciously create an environment where the child is pressured to assume the absent parent's role (Glenwick & Mowrey, 1986). This type of conflict creates parent-child tension that leaves the child in a conflicted position, for which they are treated harshly when they respond in the manner of the absent parent (Glenwick & Mowrey, 1986). This maltreatment can lead to the child's poor functioning as an adult and potentially to the transmission of parentification in that now-adult’s generation (Hooper L., 2008).

Theories Guiding Conceptualization

In Family Systems theory, a person's place within their family (system) influences their functioning. The approach provides context for identifying specific relationships within a family structure and the boundaries that accompany them

(Shaffer & Sroufe, 2005). Minuchin (1974) theorized that the family system functions through subsystems. These subsystems are made up of individuals and dyads such as husband-wife or mother-child. Each subsystem can be established by varying factors such as generation, sex, or function, and each individual is a member of a different subsystem (Minuchin, Families & Family Therapy, 1974). Within these hubs, individuals retain different levels of power, and thus a hierarchy is established for each role.

Boundaries define families' organizational structure within the subsystems (Shaffer & Sroufe, 2005), and these represent the relationships between its members. Boundary dissolutions, such as role reversals, exist within families where the hierarchical connection between the parent and child subsystem is lost, resulting in children assuming the role of a peer, caregiver, or the acquisition of a leadership role (Shaffer & Sroufe, 2005). These dissolutions include child-as-mate reversals, where the child acts as a confidant, peer, or decision-maker to the parent. Parental role reversal exists when the child may defend or nurse the parent and act as a parent to siblings (Earley & Cushway, 2002).

Parentification disregards the familial subsystems implied through Family Systems Theory by placing children in inappropriate hubs and imposing responsibilities intended for adults. Boszormenyi-Nagy & Spark (1973) explain parentification as a subjective distortion of the relationship between parent and child. These distortions create an expectation of role reversal, and children are forced to comply as a survival tactic. Some parentified children assume the role of caretaker, sometimes caring for multiple siblings in a family unit. Minuchin

(1974) explains that while this type of arrangement can work well for a family system, there are risks for difficulties to arise when the parent abdicates their role. The parentified child is left to make all decisions and assume control for those in their care.

Two patterns of interaction are often identified in the family structures of parentified families; cross-generational alliances and triangulation. These interaction patterns highlight the correlation between parents' marital relationship and the parent-child connection (Jacobvitz & Bush, 1996). In cross-generational alliances, parents seek emotional fulfillment and affection from their opposite-sex children when lacking in the spousal relationship. Conversely, triangulation presents strong parent-child partnerships due to marital discord (Jacobvitz & Bush, 1996). Indicative of these patterns of interaction, adolescents transitioning to adulthood often face the challenge of developing support networks outside of their cross-generational or triangulated alliance, resulting in the continued transmission of unhealthy patterns of interactions (Engelhardt, 2012) and disrupted familial subsystems.

Summary

This chapter identified past and current literature that focuses on the association between parentification and various theoretical frameworks. The chapter provides a review of the literature in preparation for the study. This section also reviewed attachment issues and generational transmission issues as contributing factors to the development of parentification in youth. Family Systems Theory was identified as one of the main theories supporting this

research. Family Systems Theory was identified as conceptualizing the composition of the parentified family structure while highlighting the dissolution of boundaries within familial subsystems.

CHAPTER THREE:

METHODS

Introduction

This chapter will introduce the research methods utilized for this study. Approaches include highlighting the study's design, sampling methods, data collection and interview instruments, procedures, human subjects protection, data analysis procedures, and a summary.

Study Design

This exploratory study is aimed to examine the family characteristics that contribute to childhood parentification in youth. To determine the specific attributes of adultified childrens' families, qualitative interviews will be administered to social workers working with youth and families within San Bernardino and Riverside Counties. Due to time limitations and restricted access to youth subjects, an exploratory qualitative research design method has been selected to acquire comparative data within a reasonable amount of time. Additionally, using a survey method allows contact with professionals that are more likely to engage with adultified youth and their families. Still, it limits data collection from the adultified youth and families directly.

Sampling

A purposive, non-probability sampling method will be utilized to collect data for this study. Specific measures have been developed to establish eligibility for the sample. The criteria included social work students, professional social workers with a Master's of Social Work (MSW) degree, Associate Clinical Social Worker (ASW) status, or Licensed Clinical Social Workers (LCSW) in the State of California. In addition, identified professionals must work within a child welfare agency, social services agency, foster care agency, or any other organization that provides services to children and families. Utilizing a purposive, non-probability sampling method allows for access to professional social workers who specialize in family services. These professionals may also have insight into essential factors contributing to parentification in children. An open-ended interview questionnaire design will be utilized to query a target of no more than 25 participants.

Data Collection and Instruments

To perform this study, the researcher conducted live interviews via video conferencing platforms and phone conversations with social workers who are currently employed and interacting with parentified children and their families. As it turned out, some of the social workers also identified as parentified children themselves, and thus were able to respond to interview questions on their own behalf in addition to responding with regard to a client who was a parentified child. The interview consisted of sixteen questions (see Appendix B), of which

included those specific to gathering demographic information and eight open-ended questions regarding the social workers' parentified client. Demographic data included questions designed for the participant, soliciting the name of the social worker's agency, their identified gender, ethnic background, and years of experience in the social work field. The remaining questions sought information about their clients. These demographic questions gathered the age of the relevant client, ethnic group, gender, the highest level of education completed, household size, parent(s)/guardian(s) employment status, and parent(s)/guardian(s) highest level of education.

The opened-ended questions were selected to gather information specific to the social workers' parentified client. Information such as housing stability, family dynamic, and familial trauma will provide data on factors that are common for parentified clients and their families. The open-ended questions were developed by reviewing questions from Jurkovics' Parentification Questionnaire (PQ). The Family Environment Scale was also reviewed in the development of the open-ended questions. Both questionnaires guided the development of the questions used to gather information about the parentified behaviors and familial characteristics.

Procedures

The researcher recruited currently employed social workers within San Bernardino and Riverside Counties. Recruitment was conducted by contacting personally known social workers, with the remaining participants referred by

other participants. Research participants were interviewed during daylight business hours (9:00 a.m. until 5:00 p.m.), Monday through Saturday. Interviews commenced January of 2021 until twenty-five participants were questioned or saturation occured. Before interview initiation, participants were solicited, selected, and notified via email or phone. Participants were provided with a copy of the study's informed consent document and informed of the study's voluntary nature. Each interview was conducted at the participants' convenience and completed within fifteen to thirty minutes.

Protection of Human Subjects

All data remained confidential, and no participant names have been associated with any data resulting from this study. No data has been presented in a format that would allow a participant's identity to be discovered. The researcher has reported data without identifiers. Data in digital form has been maintained and stored on Google Drive through a secure CSUSB account, protected from potential data theft or accidental erasure. Interviews were conducted via video recordings through digital video recording platforms (i.e., Zoom, Google Meets, WebEx, Microsoft Teams, etc.). Interview data was transcribed utilizing Sonix transcription software. All interview and video data will be deleted three years after the research project ends. There is little risk associated with participation in this study; however, if participants felt uncomfortable with a question, they were allowed to skip it. Likewise, if they experienced fatigue, they were encouraged to take a short break. While there

were no benefits to the participants in this study, results may have helped practitioners better understand the familial factors contributing to parentification amongst children.

Data Analysis

This study used a qualitative methodology by interviewing multiple individuals via video conference. The recorded sessions were transcribed using secured approved transcription software upon completing the conversations. The interviews were transcribed word for word to identify themes, patterns, and repetitive connections between interviewees' responses. The transcriptions were reviewed multiple times to ensure accuracy and establish first-level coding. First level coding identified similarities in responses from social workers working with parentified children. From the categories of the first-level coding, broader themes were developed into which the first-level types fit.

The qualitative approach allowed the researcher to get more personal and direct insight into the varying factors contributing to youth parentification development. The data analyzed through this research was based on the interactions between social workers and their minor clients. The researcher utilized the data from these interviewees to develop some insight into the shared and universal factors in parentified youth and their family's lives.

Summary

This chapter identified this study's design, sampling data collection & instruments, procedures, data analysis, and human subjects protections. The research will utilize an exploratory qualitative methodology, using purposive and snowball sampling methods. All participant interviews will be conducted via video conferencing or telephone methods due to COVID-19, in-person pandemic limitations. Live interviews will yield varied outcomes and responses due to the different perspectives of study participants.

CHAPTER FOUR:

FINDINGS

Introduction

Ten social work students and professionals provided valuable feedback regarding contributing factors of parentification in current and previous clients that they have encountered, as well as – in one instance – about themselves (when they personally identified as having been parentified as a child).

The participants consisted of ten individuals comprised of both social work students and professionals. Of the ten participants, five are both social work students and professionals, four are professionals only, with the remaining participant only being a social work student. One of the ten participants identified as a parentified youth themselves, with the remaining nine discussing a previous client that was parentitifed. 100% of the participants were female, two identified as white, six identified as Hispanic or Latino, one as black, one as Asian. The reference clients included both female and male youth, ranging in age from ten years old to 24 years old. Of the ten clients discussed, four were identified as White, four as Hispanic or Latino, and two as Black.

Themes

A review of participant responses revealed four major themes, each representing a significant contributor to the parentification of youth. Included in the analysis below are direct quotes from research participants. The researcher

has omitted any identifying information to protect the identity of research participants and their clients; participants were given pseudonyms, as were the parentified clients that they discussed, and all are referred to in this analysis by those pseudonyms.

Theme 1: Lower Socio-Economic Status is a Risk Factor for Parentification

Lower socioeconomic status' present many barriers for families. During the interview process, participants answered various demographic questions related to the family's socioeconomic status. For example, one research participant, Angela, a social worker who identified herself as a parentified child, discussed how the low socioeconomic status of her family impacted her and her siblings. "We were able to maintain a stable residence, but we were very low income, so it was often a presence of anxiety and the fear of losing our home affecting us." Angela continued by stating, "there was times where I had to work out a deal with my schools; my elementary schools and junior highs that I went to so that I could bring home a large portion of our meals from the campus, meals that they provided from the leftover meals and whatnot."

Loretta, a social worker with a community Office of Education, described the socioeconomic status of her client Elizabeth's family. "Mom was not employed… the family's socioeconomic status, like, it all correlated with mom's employment and her inability to obtain a job due to her criminal history background". Loretta explains that due to Elizabeth's mother being unable to maintain employment, the family often went without the necessities of most households, and her client was often left with the burden of securing meals,

clothing, and other needs. Like other parentified children, Loretta identified Elizabeth's need to care for herself and her siblings – a role that most children do not choose for themselves but often have forced upon them.

Financial limitations and reduced access to resources can tremendously impact the effectiveness of a parent's role. Natalie, a Social Worker tasked with serving children involved in foster care, reported this when asked about the role socioeconomic status plays in parents' abilities and their parentified youth:

> *Not having some of those financials available, whether it was for food or for the rent or for the bills, increased mom's stress, which then meant the house was dirtier... She was having a hard time following through. And so obviously the client being aware of like, hey, even if you're choosing to neglect this, all of it is still happening. And so, she would be the one to try to step in.*

Natalie reports that her clients' mother was so stressed and overwhelmed that it impaired her ability to parent appropriately. This inability caused her minor child to assume the role of parent and step in to ensure efforts were made towards their care. Again, a representation of parentification being imposed on a child unwillingly.

Theme 2: A Lack of Parenting is a Risk Factor for Parentification

Angela recalls her experience as a parentified youth. When asked how active her parent(s) were in her home as a child, she responded,

> *I raised my little brother. We are five years apart. And by the time he was about two months old, I was the sole caretaker. My parents were in the home, but they were preoccupied doing their own thing. So I changed, I bathed, I cared for. That was my son to the point that when he was about six or seven when he finally stopped calling me mommy because, at that age, he kind of was starting to realize that I was not his mother when he thought that I was… I wasn't making the money, but I was responsible for*

> *making sure the bills were paid with what money we did have. I was making those phone calls, writing those checks.*

Angela elaborated on her parents' lack of parenting and support during her upbringing by stating that her parents were more concerned with their substance use than raising her and her brother. Angela said, "my parents, both of my parents, are significant addicts, so I was presented a child who needed caring for, and I was kind of the only one responsible in the household." Angela adds that she was also responsible for providing emotional support to her mother, "I was her confidant, I guess. Like I was the person that she would go to for basically any type of support."

Individuals involved with the care and placement of children via social services programs also reiterated similar childhood experiences with their underage clients. For example, Wanda, a social worker responsible for visitations and placement services, advised that most of her clients were parentified due to the lack of parental involvement within the home.

> *At certain times it would seem like the child, well the client knew more than the parent did… she was responsible for, you know, making sure they ate whatever it was in the house, making sure that they ate. She had become their parent, pretty much getting them dressed, whatever clothes that they had. Watching them, not watching them, so she was 10 years old and she had pretty much become the parent because mom was always kind of absent from the house… A neighbor called foster care on the biological parents because the kids were just outside at all times a night.*

Through further discussion, Wanda identified childcare as a common responsibility for her parentified clients. Wanda continues by reporting that many of her parentified clients are detained due to inadequate supervision by parents,

and this case was no different, "Nobody was home a lot. And I think for that reason, the kids got detained."

Theme 3: Trauma is a Risk Factor for Parentification

Another theme that presented itself throughout the research responses was the experience of inherited trauma within the homes of parentified clients. Jordan, a paralegal assistant working with foster care children represented by her employers' firm, talks about the behaviors and exposure of some of the firms' clients:

> *I think there was like generational trauma from what I gathered. The mom didn't have any boundaries at all. She just assaulted the father of one of her children in court, while walking out of court. She had very little self-awareness… Mom was in and out of jail.*

Jordan confirms that the children often witnessed moms' outbursts and physical aggressions. She describes the effects of the trauma on the children as "a fight or flight situation that forced them to take care of themselves." When describing the parentified responsibilities of the oldest child in the family, Jordan reports,

> *She was cleaning, cooking. She was getting her siblings ready for school. She was making sure that they, you know, were like, crossing the street safely. She was very good about making sure they looked both ways. She was teaching them how to tie their shoes. She was pretty much the mom, and her actual mom thought of her as her spouse and partner. And so she got to do things with her mom. Go drinking, you know, think of things that were not age-appropriate, but she got to engage in adult-like activities because her mom would let her.*

Dana, who works with transitional-aged youth (TAY), recounts her conversation with one of her male clients about his experience with trauma:

> *I think the client's incarceration at a young age… he shared with me that that was a traumatizing experience and that he hasn't ever been officially diagnosed. But he says he feels like he does have PTSD symptoms and*

> *being involved in a shooting and things like that. So that affected the family as well, because then, you know, he was removed from the home to be placed in a probation group home and then was released, and then was brought back after his term was completed with that program.*

For Dana's client, she explains how his incarceration forced his single mom to work more outside of the home to support her children. The client then became the primary caregiver for his sister due to his mom's responsibility outside of the house. "This young man is responsible for, you know, making sure she gets on the bus, making sure his younger sister is fed, and, you know, the main support while mom is at work."

Anna works with grandparents raising their grandchildren. She has encountered multiple children exposed to various forms of trauma throughout her work. Regarding one of her older clients, Anna reports,

> *…trauma that I know about was his abandonment from his mom abandoning him with his grandma and leaving him. She left the country when he was younger and left him under the care of the grandmother. He was traumatized from the abandonment and being the only male in the household, and being under the care of an elderly grandmother. So being somewhat the head of the household because grandma's elderly and can't work, and he's the only one that's physically able to work.*

Theme 4: Various Abuse is a Risk Factor for Parentification

A common occurrence in the responses of interview participants is the influence of abuse in the homes of parentified clients. Several respondents attribute parental substance abuse (excessive use of drugs and alcohol), verbal, physical, and emotional abuse as a contributing factors for parentified youth. For respondents like Kimberly, abuse of substances is a typical issue in her clients' homes:

> *There was definitely some substance use on both the mom and dad. Mom was a heavy smoker and dad was an alcoholic… Mom had an issue with substance abuse. So typically, if she was stressed, what she would just do, she would go outside, close a door, leave the kids in there, and she would be outside smoking something. And it didn't matter what was happening inside. It would be like my client's fine; she's in there.*

Kimberly also reports the instability in her clients' mothers' temper. "I know there was some physical aggression on mum's part. I don't think it was ever physically hitting dad, but it was definitely like popping his tires or messing up something in the car. The dad was like infatuated with his trucks, and mom's way of like being hateful or taking out her anger would be through damaging his car."

For Social Worker Natalie, various forms of abuse were a constant in her clients' homes.

> *So mom had a long history of drug use... mom was in relationships that she says were perpetually involved with domestic violence. Mom was always the victim, she said, and with the father of her three-year-old… there were some sexual abuse with mom, and not towards the kids… Mom would meet her boyfriends' in rehab groups, and so there were some allegations of different types of abuse with these strange men that mom would bring into the home. They would only be there for a couple of months and then leave. So there was kind of all aspects of abuse that this child let us let us know about. So when we started interviewing her, she would do things when mom would drink too much. And she knew that mom needed to be in the bathroom, and she knew that mom needed water because she'd be throwing up. So she knew mom's behaviors when she would drink too much.*

Abuse impacting families included current abuse resulting in the involvement of social service agencies and past generational abuse that continues to impact parents of parentified youth. The trauma impairs these adults and renders them vulnerable and unprepared to parent their own children. Paula, a social services

practitioner, working with children discusses the presence of generational abuse impacting her client's mother.

> *You know, at the time that her (the client's) father had passed, mom also had significant trauma. She was sexually abused by an uncle and she had substance abuse issues. And she did have criminal involvement with law enforcement. Sexual abuse by the uncle as it pertains to mom and then the physical abuse toward the children by mother's boyfriends toward the end of them being removed and placed with the brother. And then also, like just her mental health and substance abuse, correlating symptoms of her, you know, actively using and not being able to sustain employment.*

Through the diverse experiences of the children referenced throughout this interview, it is clear that there are varying contributors to youth parentification. Many of the factors include issues that are specific to the parents own adolescent experiences, personal traumas or struggles. Some controllable, some not. Based on the responses of this study's ten participants, familial problems such as abuse, trauma, socioeconomic status, and parental support appear to play an influential role in developing parentified children.

Summary

This chapter identified the diverse experiences of parentified children, as described by the social work professionals working with these youth, or the parentified individual themselves. Four themes were identified based on participant responses. Study participants provided descriptive examples, which included information about the family dynamics and characteristics of the referenced clients and their families. Participants also identified what they felt were contributing factors towards the clients parentification. Participant

statements were highlighted to focus on what they felt were the most influential factors to their client's situation.

CHAPTER FIVE:

DISCUSSION

Introduction

This study sought to identify common components present in the family structures of parentified children. This chapter discusses the findings of the study. This area discusses whether the study results successfully identify contributing factors to parentification in youth. The chapter also reviews the results of the study in comparison to the literature while also identifying limitations of the study. Unanticipated results of this study are also identified in this section with suggestions for further research. A conclusion of the study results and implications for social work practice relating to parentified youth is also discussed.

Discussion

This study's findings suggest that the socioeconomic status of a child's family, the presence of varying types of abuse in the home (including abuse of substances and various of child abuse), a lack of parental support for children, and the presence of familial trauma all contribute to the development of parental behaviors and responsibilities in youth. Diaz et al. (2007) identified that up to 1.4 million youth have been parentified and sustain roles and responsibilities traditionally reserved for parents. Compared with the responses from this study, it is clear that many children encounter the need to parentify due to circumstantial

situations outside of their control. While no respondents identified the development of a parentified child out of voluntary conditions, some of the instances were less obligatory than others. Cases of single-parent, one-income households required an all-hands-on-deck approach which reduces the involuntary, survivalist suggestion of parentification.

The results of this study partially support prior research into the familial characteristics that are associated with childhood parentification development. The partial support is based on the minimal data gathered via the study participants and the limitations present in the study process. The study identified associations between specific low socioeconomic households, familial trauma, substance, physical, and emotional abuse, and absentee parents or those with minimal parenting skills. Further research is needed to further verify these findings.

Earley & Cushway (2002) examined circumstances in which parents combated their own disruptions in life by seeking support from their children. These supports represent a disruption of normal generational boundaries (Earley & Cushway, 2002) and are repeatedly present in the families represented in this study. Responses from participants identify the presence of abuse, trauma, and a lack of parenting within homes which all translated to the necessity for children to behave in co-dependent fashions with significant parentified responsibilities (Earley & Cushway, 2002). These responsibilities included role-reversals in which the referenced children assumed roles of caregivers and emotional confidants of their parents. The results of this study support the presence of

certain precursors to parentification (e.g., risks) and further validate the dissolution of boundaries within these families.

Generational transmissions of boundary dissolutions also were validated throughout the study. The referenced children in this study endorse the theory of parent-child enmeshments resulting from familial traumas, histories of substance use, and other forms of abuse. These are often the result of intergenerational boundary breakdowns and unhealthy intrafamilial constructs (Garber, 2011). In considering the histories of the parents of the referenced families, identifying the presence of their own parentification plays a significant role in the development and attachment of future relationships, even with those of their children. It is clear that a lack of historical, familial boundaries becomes transmitted across generations as a normal part of the family structure (Engelhardt, 2012).

Considering the inability to interview parentified children directly (with one exception), the results of this study should be reviewed with caution in consideration of this significant restriction. Although the recruitment of participants for this study brought forth social work professionals and students working directly with parentified youth and their families, there was an apparent disproportion between the reference of female children versus male youth as clients. The majority of the responses collected were relative to female youth who were clients of these professionals. When identifying parentified youth, female adolescents are more often presumed to assume the role of caregivers, whereas males may be less likely to admit to caregiving responsibilities due to societal

expectations. Although two male clients are referenced in this study, the data does not reflect a representative sample of parentified male youth.

The sample was also limited to Riverside and San Bernardino County social work professionals. These professionals likely engage with client demographics that may differ from other counties due to environmental, geographic, political, and other factors. In addition, familial dynamics can vary between social environments, so significant influencers for parentification may vary when considering various regional settings. This study did not include social work professionals from other counties, thus not providing a robust sample of experiences with parentified youth in multiple locations. Extending the sample location would give insight into the societal and environmental factors contributing to the need for and development of parentified youth within families.

Recommendations for Social Work Practice, Policy, and Research

In reviewing the various responses and specific contributors to parentification identified by our participants, one common factor is present throughout each interview. The identified youth have experienced adultification due to the absence of a parent, whether mentally, physically, or emotionally. The children referenced in the study have assumed parental roles due to a combination of insufficient economic resources, substance use in their homes, absentee or incarcerated parents, or trauma and abuse. These circumstances have left their parents incapable of caring for these youth and assuming their responsible role. As a result, these adolescents have developed coping skills and behaviors that mimic those appropriate for adults but necessary for their survival.

In combination with the information obtained from respondents, the review of this study recognizes that the youth referenced all seem to have specific familial characteristics in common. Most of the youth have been involved with Children's Services, warranting their connections to the study participants. The youths' involvement in social services also represents potential deficits within the parental capacities of the youths' parents or guardians. These inabilities have warranted some form of intervention from social services and community agencies. All the children referenced in this study have parents that have displayed deficits in their parenting capabilities.

Implications for social work practice include the development of more informed service offerings for adolescent clients and inclusive of their parents. Not only should social service programming address the needs of adultified children, but services should also seek to meet the needs of parents to help reduce contributing factors of parentification in homes. With standard services primarily consisting of parenting education, substance use rehabilitation, and other resources designed to influence reunification of families, it is crucial for social service agencies to incorporate programming specifically for factors of adultified homes. Integrating services that assist in eliminating parental stressors such as limited incomes, abuse in the home, and generational trauma, would all be beneficial to supporting parentified families. The use of flexible, innovative, and tailored services would allow families to receive the help and support that is specific to their needs.

Providing more diversity in the type of services offered to families will enable social service agencies to help address adultification in families' homes while empowering those same families to develop healthier boundaries and fine-tune role reversals within the home. Better programming may help social service agencies scale their caseloads and reduce instances of burnout amongst social workers. Addressing the causes of parentification in youth will contribute to a culture of empowerment and encourage more trust with child service agencies.

Summary

This chapter identified the findings of the study. This area identified four contributing factors to the parentification in youth. The chapter also identified that the study's findings suggest that the socioeconomic status of a child's family, the presence of varying types of abuse in the home (including abuse of substances and various of child abuse), a lack of parental support for children, and the presence of familial trauma all contribute to the development of parental behaviors and responsibilities in youth. Implications for social work practice were presented and include the development of more informed service offerings for adolescent clients and inclusive of their parents.

APPENDIX A

INFORMED CONSENT

The study in which you are asked to participate is designed to identify factors contributing to adultification in youth residing in San Bernardino County. The study is being conducted by Tameka Brandon-Ferguson, a graduate student, under the supervision of Dr. Gretchen Heidemann-Whitt, Adjunct Professor in the School of Social Work at California State University, San Bernardino (CSUSB). The study has been approved by the Institutional Review Board at CSUSB.

PURPOSE: The purpose of the study is to identify what family characteristics are associated with the development of childhood adultification.

DESCRIPTION: Participants will be asked of a few questions on the family composition, responsibilities, common factors and challenges of their child & family clients, in addition to some demographics.

PARTICIPATION: Your participation in the study is totally voluntary. You can refuse to participate in the study or discontinue your participation at any time without any consequences.

CONFIDENTIALITY: Your responses will remain confidential and data will be reported in group form only.

DURATION: It will take 15 to 30 minutes to complete the survey and interview.

RISKS: Although not anticipated, there may be some fatigue involved in participating in the interview process. You are not required to answer all questions if they don't apply and can skip to the next question or end your participation.

BENEFITS: There will not be any direct benefits to the participants.

CONTACT: If you have any questions about this study, please feel free to contact Dr. Heidemann-Whitt at (909) 537-5501.

RESULTS: Results of the study can be obtained from the Pfau Library ScholarWorks database (http://scholarworks.lib.csusb.edu/) at California State University, San Bernardino after July 2022.

APPENDIX B

INTERVIEW QUESTIONS

Interviewees will be asked to have a client in mind when answering all demographic interview questions.

1. What agency do you work for?
2. Age of Client
3. Ethnic Group for Client
4. Gender
5. Current Grade Level
6. Household Size
7. Parents' Employment Status

8. What are the presenting issues that brought you in contact with your adultified client and their family?

9. How would you describe your client(s) current living situation (single-parent household, raised by a relative guardian, foster-parents, etc.)?

10. Describe the clients' and family's stability. Has the family maintained a stable residence for longer than three years? If not, how often does the family relocate?

11. What are the clients' parentified behaviors and/or responsibilities? To what extent is are the following included:

    a. Adultlike Relationships/Roles (emotional/physical support, etc.)
    b. Childcare
    c. Meal Preparation
    d. Housework (beyond normal chores)

12. Describe the dynamic for your clients' family (i.e., meals shared, household chores shared, open communication, etc.)?

13. Describe the history of abuse within the family (physical, substance, sexual, emotional)?

14. What is the history of trauma experienced within the family (tragic losses, involvement with the law, etc.)?

15. What do you think has led to the parentification of your client? To what extent do the following influence the clients' level of parentification:

a. Disabled Parent(s)
b. Socio-Economic Status of the Family
c. Education Level of Parent(s)
d. Parent(s) Substance Abuse
e. Parent(s) Employment Outside of Home/Unavailability
f. Poor Parenting/Lack of Boundaries

APPENDIX C

INSTITUTIONAL REVIEW BOARD LETTER

CALIFORNIA STATE UNIVERSITY
SAN BERNARDINO

CSUSB INSTITUTIONAL REVIEW BOARD
Administrative/Exempt Review Determination
Status: Determined Exempt
IRB-FY2021-164

Gretchen Heidemann Tameka Brandon-Ferguson
CSBS - Social Work, Users loaded with unmatched Organization affiliation.
California State University, San Bernardino
5500 University Parkway
San Bernardino, California 92407

Dear Gretchen Heidemann Tameka Brandon-Ferguson:

Your application to use human subjects, titled "Factors Contributing to the Parentification of Youth" has been reviewed and determined exempt by the Chair of the Institutional Review Board (IRB) of CSU, San Bernardino. An exempt determination means your study had met the federal requirements for exempt status under 45 CFR 46.104. The CSUSB IRB has not evaluated your proposal for scientific merit, except to weigh the risk and benefits of the study to ensure the protection of human participants. Important Note: This approval notice does not replace any departmental or additional campus approvals which may be required including access to CSUSB campus facilities and affiliate campuses due to the COVID-19 pandemic. Visit the Office of Academic Research website for more information at https://www.csusb.edu/academic-research.

You are required to notify the IRB of the following as mandated by the Office of Human Research Protections (OHRP) federal regulations 45 CFR 46 and CSUSB IRB policy. The forms (modification, renewal, unanticipated/adverse event, study closure) are located in the Cayuse IRB System with instructions provided on the IRB Applications, Forms, and Submission webpage. Failure to notify the IRB of the following requirements may result in disciplinary action. The Cayuse IRB system will notify you when your protocol is due for renewal. Ensure you file your protocol renewal and continuing review form through the Cayuse IRB system to keep your protocol current and active unless you have completed your study.

Important Notice: For all in-person research following IRB approval all research activites must be approved through the Office of Academic Research by filling out the Project Restart and Continuity Plan.

- **Ensure your CITI Human Subjects Training is kept up-to-date and current throughout the study.**
- **Submit a protocol modification (change) if any changes (no matter how minor) are proposed in your study for review and approval by the IRB before being implemented in your study.**
- **Notify the IRB within 5 days of any unanticipated or adverse events are experienced by subjects during your research.**
- **Submit a study closure through the Cayuse IRB submission system once your study has ended.**

If you have any questions regarding the IRB decision, please contact Michael Gillespie, the Research Compliance Officer. Mr. Michael Gillespie can be reached by phone at (909) 537-7588, by fax at (909) 537-7028, or by email at mgillesp@csusb.edu. Please include your application approval number IRB-FY2021-164 in all correspondence. Any complaints you receive from participants and/or others related to your research may be directed to Mr. Gillespie.

Best of luck with your research.

Sincerely,

Nicole Dabbs

Nicole Dabbs, Ph.D., IRB Chair
CSUSB Institutional Review Board

ND/MG

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