The Developmental Implications of Parentification: Effects on Childhood Attachment

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Parentification refers to the process through which children are assigned the role of an adult, taking on both emotional and functional responsibilities that typically are performed by the parent. The parent, in turn, takes the dependent position of the child in the parent-child relationship. Although a small degree of parentification can be beneficial to child development, this process can become pathological when the tasks become too burdensome or when the child feels obligated to take on the role of adult. The purpose of this review is to examine the current literature concerning the effects of parentification on child attachment and the implications this may have for the present and future well-being of a child. Methodological issues in current research as well as suggestions for future research are also discussed. Research indicates that, due to the emotional unavailability of the caregiver, emotional parentification disrupts the development of secure attachment. The consequent formation of insecure attachments to primary caregivers, particularly the mother, results in interpersonal deficits in the child that can carry on into adulthood.

The term “parentification” was first utilized in depth by Boszormenyi-Nagy and Spark (1973) to describe a common component of relationships whereby parental characteristics are projected onto an individual. Within the parent-child relationship, this process is often seen when the child performs chores or occasionally offers emotional support for a parent, and is believed to be healthy for the child as he or she begins to see the potential for him or herself in an adult role (Boszormenyi-Nagy & Spark, 1973). However, when the responsibilities become too burdensome, or when the child feels obligated to take on the adult position in order to maintain a balance in the family system, parentification can become pathological (Hooper, 2007a, 2007b). This dysfunctional aspect of parentification is most commonly addressed in the literature, and is described as:

- a disturbance in the generational boundaries, such that evidence indicates a functional and/or emotional role reversal in which the child sacrifices his or her own needs for attention, comfort, and guidance in order to accommodate and care for the logistical and emotional needs of a parent and/or sibling. (Hooper, 2007b, p. 323)

In simpler terms, the adult essentially adopts the dependent position in the parent-child relationship, and in turn the child is expected to fulfill what are typically considered to be adult responsibilities.

Given the importance of childhood as a period rife with developmental tasks that will influence an individual throughout the lifespan, it is surprising to note that little research has been performed on how parentification directly affects the developmental processes of the children who experience it. The formation of attachment to a primary caregiver is considered to be one of many key tasks in child development (Bowlby, 1958), and any process which can negatively influence attachment, such as parentification, warrants investigation. In actuality, the majority of research on parentification has examined a vast array of potential outcomes in adulthood (Earley & Cushway, 2002; Hooper 2007a, 2007b, 2008; Hooper, Marotta, & Lanthier, 2008; Jones & Wells, 1996; Katz, Petracca, & Rabinowitz, 2009; Macfie, McElwain, Houts, & Cox, 2005; Mayseless, Bartholomew, Henderson, & Trinke, 2004), or the effects of parentification on the mental and behavioral well-being of children (Earley & Cushway, 2002; Jacobvitz, Hazen, Curran, & Hitchens, 2004; Macfie, Houts, McElwain, & Cox, 2005).

In response to this lack of focus on the topic, the purpose of this review is to discuss the literature that addresses how parentification affects childhood development in particular. Specifically, the scope of this review is limited to the influence of parentification on the process of attachment formation and its implications for the parentified individual’s well-being, particularly with regard to interpersonal relationships. Attachment affects a variety of outcomes in areas such as identity development and differentiation, temperament, self-esteem, and, most strongly, interpersonal relationships through the development of internal working models and the corresponding interpretations of experiences (Ainsworth, Blehar, Waters, & Wall, 1978; Byng-Hall, 2002). An understanding of how parentification affects attachment formation not only assists researchers and clinicians in understanding, preventing, and treating the problem, but also depicts the possible pathways through which many of the observed negative childhood and adult outcomes occur.
This review begins with an overview of the concept of parentification, including an explanation of the process of parentification itself as well as a summary of associated risk factors and commonly observed outcomes. This is followed by a description of attachment paradigms, incorporating parentification research to formulate an understanding of how these two processes are related to and influenced by one another. Following a discussion of the existing literature, methodological and conceptual weaknesses of the empirical studies performed, as well as suggestions for future research, are provided.

Although parentification is classified as a type of role reversal, an analysis of research on parentification reveals that researchers often utilize the terms “parentification” and “role reversal” interchangeably, with those who do use the term “role reversal” conceptualizing it in their research as similar to the process of parentification. In consideration of this, for the sake of this review these two words will be used here interchangeably, in accordance with the terminology utilized in the studies being discussed.

**Parentification**

When occurring to a pathological degree, parentification is considered by some a form of child neglect as it impedes development through the denial of basic childhood necessities and experiences (Boszormenyi-Nagy & Spark, 1973; Hooper, 2007a, 2007b). In a relationship characterized by parentification, the parent is typically unwilling or unable to uphold his or her emotional and/or physical responsibilities as caregiver (Barnett & Parker, 1998). The parentifying adult may delegate these duties to the child, or the child may take up these responsibilities voluntarily, despite the incongruence between the developmental requirements of these tasks and the developmental maturity of the child (Aldridge, 2006; Mechling, 2011). Nevertheless, the child recognizes that by providing the physical care and emotional support that he or she would normally elicit from the parent, he or she can develop closeness with the parent and avoid feelings of loss and anxiety (Barnett & Parker, 1998). The child therefore interprets these undertakings as necessary and sees the needs of the parent and family as taking precedence over all other needs, including their own personal needs. As a result, the parentified child misses out on the developmentally appropriate and essential activities that typically characterize childhood, such as the formation of healthy interpersonal relationships, the development of secure attachment to caregivers, and the differentiation of self (Boszormenyi-Nagy & Spark, 1973; Bowlby, 1958, 1969; Hooper, 2007a, 2007b).

The latest report published by the Children’s Bureau of the United States Department of Health and Human Services (2011) estimates that 9.2 per 1,000 children experienced maltreatment in the year 2010, totaling approximately 695,000 children. Of these cases, an overwhelming 78.3% involved neglect, in which a parent or guardian failed to provide appropriate care for the child, resulting in negative consequences. While data on the national prevalence rate of parentification specifically is lacking in the literature, researchers have attempted to estimate the pervasiveness of this problem in other countries, particularly in the United Kingdom. For example, Aldridge (2006) estimates that approximately 175,000 children serve in a caregiving role for a parent with an illness or disability each year in the United Kingdom. A related study performed by Doran, Drever, and Whitehead (2003) found that 114,000 children, or 1.4% of children in the UK, were providing some form of care that was characterized as burdensome for at least one member of their family. The health of a significant number of these children was rated as “not good,” indicating that their own needs were being neglected in their attempts to meet the needs of their family. Furthermore, the researchers reported that caregiving by these children ranged in depth from a few hours per week to more than fifty hours per week (Doran et al., 2003), illustrating that this problem can vary considerably in severity for children who experience it.

Parentification is most commonly found within dysfunctional family systems in which there is a need for the establishment of homeostasis in order for the family to function adequately. The family system characterized by parentification is thought to be deficient in some way (Hooper et al., 2008) so that a lack of boundaries exists and parental versus childhood roles and behaviors are not properly delineated (Hooper, 2007a). Most often, one or both parents are incapacitated, commonly for physical, social, emotional, or economic reasons, and they come to depend upon the child to meet their needs and the needs of the family. Specific parental risk factors found to be associated with the parentification of one or more child within the family system include maternal sexual abuse history, low maternal socio-economic status, physical and mental illness, addiction, divorce, single-parent households, intrusive parenting styles, and adult attachment issues (Barnett & Parker, 1998; Earley & Cushway, 2002; Maefie, McElwain, et al., 2005). In each of these cases, the child is more likely to take on the parental role, voluntarily or involuntarily and to varying degrees, in order to compensate for parental deficits and to allow the family to function as a whole.

**Instrumental versus Emotional Parentification**

When discussing parentification, it is important to note that there are two subtypes of the phenomenon, each of which may be associated with differing consequences for child development and, ultimately, adult outcomes (Aldridge, 2006; Hooper, 2007a; Hooper et al., 2008; Katz et al., 2009). The first subtype, instrumental parentification, refers to the parentification of children through the assignment of functional responsibilities, such as shopping, paying bills, cooking meals for the family, and taking care of the general logistics of running a household. This subtype, when occurring in isolation, is commonly observed in family systems in which one or both parents are incapacitated in such a way that they require daily care or are unable to fulfill these logistical responsibilities due to illness or other factors, such as having to work in order to keep the family financially.
afloat (Hooper, 2007a). Instrumental parentification is believed to be the less deleterious of the two subtypes for child development, as it can foster in the child a sense of accomplishment and competence when regular parental support and acknowledgement is available (Aldridge, 2006; Hooper, 2007a).

In contrast, emotional parentification requires the child to fulfill specific emotional and/or psychological needs of a parent and is more often destructive for child development than instrumental parentification (Hooper, 2007a). For example, the emotionally parentified child may be expected to gauge and respond to the emotional needs of the parent, serve as confidante and an unwavering source of support, and provide crisis intervention during times of psychological distress (Aldridge, 2006; Hooper, 2007b; Katz et al., 2009). This subtype, which often occurs in concert with instrumental parentification, is most often found within family systems in which a parent suffers from mental illness or adult attachment issues (Aldridge, 2006). In order to deal with his or her own deficits, which likely arose in childhood, the parent expects emotional or psychological support from the child without reciprocation (Hooper, 2007b). As a result of the incongruence between these parental expectations and the child’s developmental age, level of maturity, and degree of understanding, emotional parentification is more strongly associated with a number of negative consequences for the parentified individual (Hooper, 2007a).

Outcomes of Parentification

With regard to potential outcomes, research that has examined the experiences of parentified children during childhood reveals that these individuals report a vast array of adverse effects in response to adopting the parentified role. These children are more likely to report internalizing problems such as depressive symptoms and anxiety, as well as somatic symptoms like headaches and stomachaches (Earley & Cushway, 2002; Mechling, 2011). Parentified children are also more likely to exhibit externalizing behaviors such as aggressiveness and disruptive behavior (MacFie, Houts, et al., 2005), substance use, self-harm, and attention-deficit/hyperactivity disorder (Jacobvitz et al., 2004; Mechling, 2011). Furthermore, parentification is also linked to social difficulties, particularly lower competency in interpersonal relationships (Hooper, 2007a; MacFie, Houts, et al., 2005), as well as academic problems such as high absenteeism and poor grades (Mechling, 2011). If left unresolved, these symptoms of maladjustment can continue into adulthood, causing further dysfunction throughout the parentified individual’s lifespan.

Despite the fact that there are known effects of parentification on individuals during childhood, such as those listed above, currently there has been limited research in this area. Instead, the majority of research conducted has focused solely on the effects of childhood parentification on individual characteristics in adulthood. Specifically, parentification has been shown to impede identity development and personality formation and to affect interpersonal relationships, including those with one’s own children. It has also been found to be associated with later attachment issues, mental illness, psychological distress, masochistic and narcissistic personality disorders, substance abuse, and one’s academic and career choices (Earley & Cushway, 2002; Hooper, 2007a, 2008; Hooper et al., 2008; Jones & Wells, 1996; Katz et al., 2009; MacFie, McElwain, et al., 2005). However, researchers have speculated that in some instances, emotional and instrumental parentification may prove beneficial for individuals in adulthood. Specifically, parentification can lead to greater interpersonal competence and stronger family cohesion, as well as higher levels of individuation, differentiation from family, and self-mastery and autonomy when the child experiences a low level of parentification and when the efforts of the child are recognized and rewarded by adult figures (Hooper, 2007b, 2008).

Attachment

Attachment theory was developed through the work of Bowlby (1958, 1969), who emphasized the importance of interpersonal bonds early in life – particularly with primary caregivers – as predictors of future well-being. The theory was expanded upon by Ainsworth et al. (1978) who, through observation of parent-child interactions, classified infant behavior according to one of three attachment styles. The first of these types, insecure-avoidant attachment, is typically observed in children whose caregivers are emotionally unavailable and unresponsive to the child’s needs. These children often appear prematurely independent and consistently avoid contact with the caregiver. The second attachment type, known as insecure-resistant attachment, is observed in children whose caregivers are inconsistently available and whose behavior toward their child is unpredictable. These children display ambivalence in their interactions with the caregiver, both seeking and resisting contact, as the caregiver is seen as unreliable. Secure attachment is observed in children whose parents are consistently emotionally available and responsive to the child’s needs. Children who demonstrate secure attachment find comfort in the parent-child relationship, viewing the caregiver as trustworthy and therefore feeling safe enough to confidently explore the world. A fourth attachment style, disorganized attachment, was later introduced by Main and Solomon (1986) and was used to describe children who defied classification under Ainsworth’s rubric. This attachment style is commonly seen in children whose parents are abusive or neglectful. These children often exhibit disoriented behavior that lacks a coherent stance toward the caregiver, and typically represents significant interpersonal deficits.

Although the four subtypes of attachment are described here, current research on the effects of parentification on attachment does so only in terms of secure versus insecure attachment and does not differentiate between the various subtypes. In consideration of this, the discussion on the
effects of parentification on attachment will do so only in terms of secure versus insecure attachment in line with current research. This lack of differentiation between the subtypes of attachment is discussed in the next section as a methodological weakness of current research.

The development of secure attachments to significant caregivers such as parents, and the resulting construction of internal working models which will serve as prototypes for an individual’s future relationships, is a key task of childhood (Bowlby, 1958). Oftentimes the attachment patterns formed during childhood, particularly with the mother, have long-lasting effects in a variety of areas of an individual’s life, most importantly in the formation and maintenance of relationships throughout the lifespan (Bowlby, 1969). The vast array of research on attachment has demonstrated that a child’s sense of security, overall well-being, and especially connections to others are dependent upon the early mother-child relationship and the internal working models created from this relationship (Hooper, 2007b). Given the fact that the process of parentification directly affects the parent-child relationship by blurring the lines that typically delineate parental versus childhood roles, it is logical to consider that parentification would have a negative impact on the child’s attachment pattern.

Attachment and Parentification

The current literature focusing on the association between parentification and childhood and adult attachment demonstrates mixed results regarding the effects of this pathological process on the attachment patterns of parentified individuals. Some research demonstrates no subsequent effect of parentification on the development of secure or insecure attachment. For example, Mayseless et al. (2004) found no relationship between parentification and adult attachment, although these researchers examined current adult attachment styles as a function of childhood role reversal in its broadest form and did not differentiate between parentification and other forms of role reversal such as spousification, in which the parent looks to the child to fulfill needs for companionship. In contrast, however, a large amount of literature in this area indicates that parentification leads to significant attachment issues during childhood, which often carry forth into adulthood (Boszormenyi-Nagy & Spark, 1973; Earley & Cushway, 2002; Hooper, 2007a, 2007b; Katz et al., 2009; Macfie, Houts, et al., 2005; Macfie, McElwain, et al., 2005).

This body of literature indicates that the parent-child relationship characterized by the parentification of the child also tends to be characterized by insecure attachment patterns between the child and the parentifying adult. Whether and how this relationship comes to exist is often contingent upon the type of parentification that is experienced by the child. As stated above, instrumental parentification occurs when a parent looks to a child to handle the functional responsibilities of running a household, such as housekeeping and physically caring for family members (Hooper et al., 2008). This type of parentification, when occurring in isolation, is speculated to be the less harmful of the two types, particularly in the presence of a healthy and supportive relationship with the parent (Aldridge, 2006). In the absence of emotional parentification, secure attachment can be formed if the instrumentally parentifying adult maintains emotional regularity and continuous availability for the child, provides consistent emotional and psychological support, and recognizes the child’s caregiving efforts (Aldridge, 2006; Hooper, 2007a, 2007b). In emotional parentification, however, the child is expected to attend to the caregiver’s emotional and/or psychological needs while sacrificing his or her own needs for emotional support and attention as they are not reciprocated by the parent (Hooper, 2007a, 2007b). In these instances, the development of secure attachment is severely disrupted since the child attempts to create some form of bond with the parent by providing emotional support without reciprocation (Hooper, 2007a; Katz et al., 2009). This disturbance of the parent-child relationship is further exacerbated by the fact that the child may experience feelings of guilt if unable to meet the parent’s expectations, and may develop a sense of obligation toward the parent without the parent feeling a corresponding sense of obligation toward the child (Boszormenyi-Nagy & Spark, 1973). Due to the emotional unavailability and irregularity of the parent, insecure attachment is typically formed (Ainsworth et al., 1978; Hooper, 2007a).

This relationship, as it appears to the child through the process of parentification, is internalized, fostering future attachment issues throughout childhood and into adulthood (Earley & Cushway, 2002). Specifically, these early perceptions of the self as caregiver to a dependent other may continue into adulthood. For example, many individuals who were parentified as children report finding themselves in similar relationships as adults in which they take on the caregiving role (Earley & Cushway, 2002). These individuals often experience anxiety over abandonment and loss, and demonstrate difficulty handling rejection and disappointment within interpersonal relationships (Katz et al., 2009). This research is supported by findings that early attachment styles, particularly with the mother, remain relatively stable over time and predict attachment toward romantic partners and peers later in life (Zayas, Mischel, Shoda, & Aber, 2011).

Mediating and Moderating Effects of Gender

Current research points to the overarching influence of the mother-child (as opposed to father-child) relationship on attachment, as evidenced by the moderating effect of parent gender on parentification (Macfie, Houts, et al., 2005; Mayseless et al., 2004). The mother’s role is commonly seen as vital in the development of a child’s interpersonal skills (Zayas et al., 2011). Due to the fact that emotional parentification causes particular dysfunction in the mother-child relationship and thereby hinders the development of a secure attachment, the child is typically unable to form healthy peer relationships (Macfie, Houts, et al., 2005). For example, daughters’ emotional role reversal with mothers, but not with fathers, has been found to be associated with later
deficits in well-being, expressed specifically through depressive symptoms (Katz et al., 2009). This relationship between maternal role reversal and depressive symptoms in adulthood was found to be fully mediated by daughters’ attachment anxiety, a tendency to seek constant reassurance, and a fear of abandonment in interpersonal relationships that typically characterizes insecure attachment (Katz et al., 2009). In other words, due to the insecure attachment formed within the mother-child (but not the father-child) relationship, the emotionally parentified girls tended to exhibit anxiety about abandonment in interpersonal relationships, leading them to experience depressive symptoms in adulthood. This conclusion is further supported by the finding that mother-toddler emotional role reversal, but not father-child role reversal, is associated with social problems during kindergarten regardless of child gender (Macfie, Houts, et al., 2005). This finding illustrates how the pathological attachment formed with the mother through parentification can influence social relationships, even in early childhood. These differential effects observed for parent gender suggest that the mother-child relationship may be particularly influential on child attachment and social relationships in the face of parentification, perhaps due to the role of the mother as the primary model for young children’s socialization and formation of relationships.

Child gender has also been found to play a role in the development of interpersonal deficits as a result of parentification and consequent attachment issues. As stated above, maternal role reversal has been found to be associated with social problems during kindergarten, regardless of the child’s gender (Macfie, Houts, et al., 2005). Interestingly, the researchers found that child gender moderated the relationship between role reversal and interpersonal deficits. Specifically, it was determined that father-child role reversal also predicted social problems, but only for male children. Furthermore, the relationship between maternal role-reversal and social problems was found to be stronger for mother-daughter role reversal than for mother-son role reversal. Macfie, Houts, et al. (2005) speculate that same-sex role reversal may particularly disrupt the development of interpersonal skills with same-sex peers, as children learn appropriate ways to interact with others through their relationships with their own parents. While research suggests that the mother serves as a more influential force in the development of social skills regardless of child gender, fathers may serve a more specified role in that they assist in the socialization of their sons with regard to same-sex interactions.

**Intergenerational Transmission**

Given that the parentification of children plays a substantial role in the development of attachment patterns and future relationships, it is not surprising that parentification is often transmitted across generations, in part due to issues with attachment arising in childhood and carrying forward into adulthood. Despite the fact that individuals who were parentified as children often maintain their positions as caregivers in adult relationships, these individuals tend to compensate for their childhood losses by turning to their own children for nurturance and emotional needs (Earley & Cushway, 2002). Specifically, parents who exhibit emotional role reversal with their own mothers also tend to participate in role reversal with their children, with gender specific outcomes (Macfie, McElwain, et al., 2005). Mother-daughter role reversal has been found to be predicted by the mother’s role reversal with her own mother and insecure attachment to her. Interestingly, however, a father who was involved in role reversal with his own mother does not himself typically participate in role reversal. Instead, it was found that his wife is more likely to engage in mother-son role reversal, even if she herself did not experience parentification, in reaction to her husband’s experience of parentification (Macfie, McElwain, et al., 2005).

These findings further support the assumption that dysfunction in the mother-child relationship tends to be more common and influential in the process of parentification, due to the pervasive role of the mother during young childhood as a model for future social relationships (Hooper, 2008; Mayseless et al., 2004; Zayas et al., 2011). Furthermore, parentified mothers are themselves more likely to emotionally parentify their own children in accordance with the working model of the mother-child relationship that they themselves internalized as children (Hooper, 2007b). Fathers, however, are less likely to do so because they tend to participate less in the social aspects of childrearing, such as teaching interpersonal skills, until their children are older (Macfie, Houts, et al., 2005). Therefore, the transmission of attachment issues and parentification across generations appears to be moderated by parent gender, with mothers demonstrating a greater effect on child attachment development in the face of parentification.

**Summary**

Although there are mixed results with regard to the association between parentification and attachment, the majority of existing research suggests a cyclical relationship between the two. Parental history of attachment issues often leads to the parentification of the individual’s own children, which in turn leads to attachment issues in the child that are potentially carried over into his or her own adulthood (Boszormenyi-Nagy & Spark, 1973; Earley & Cushway, 2002; Hooper, 2007a, 2007b; Katz et al., 2009; Macfie, Houts, et al., 2005; Macfie, McElwain, et al., 2005). In many cases, this leads to the replication of the parent-child relationship when the child becomes a parent him or herself, resulting in the intergenerational transmission of this pathological pattern of parent-child interactions (Macfie, McElwain, et al., 2005). This is most likely to occur between mother and child, as opposed to father and child (Katz et al., 2009), due to the pervasive role of the mother as a model in the orientation of young children toward social relationships (Zayas et al., 2011). The child looks to the relationship with his or her mother as a prototype of all relationships. When this relationship is dysfunctional it is internalized as such,
leading to problems with socialization throughout life including with his or her own children.

Methodological Issues and Future Research

While the literature on the association between parentification and attachment has contributed greatly to an understanding of this phenomenon and its effects on childhood development, conceptual and methodological issues exist. A careful review of the existing literature reveals that the conceptualization of parentification commonly poses methodological challenges. Parentification is considered to be a type of role reversal, which refers to the broader category of relational disturbances in which an adult looks to the child to fulfill unmet needs for intimacy, parenting, or socialization by expecting the child to take on the role of partner, parent, or peer (Macfie, Houts, et al., 2005). Other types of role reversals include triangulation, in which the child is assigned the role of intermediary between two parents (Chase, 1999) and spousification, in which the adult looks to the child to fulfill intimacy needs. There is an inconsistency in the terms utilized to denote the occurrence of parentification, with some researchers referring to the process directly as “parentification” (Barnett & Parker, 1998; Boszormenyi-Nagy & Spark, 1973; Earley & Cushway, 2002; Hooper, 2007a, 2007b, 2008; Hooper et al., 2008; Jones & Wells, 1996) and others speaking of the problem in terms of “role reversal” (Katz et al., 2009; Macfie, Houts, et al., 2005; Macfie, McElwain, et al., 2005; Mayselless et al., 2004). Indeed, the terms are often used interchangeably. Despite these differences in terminology, each of these authors is referring to essentially the same process in their research, in which a child adopts the parental role, and each author describes it as such when defining their terms. Future research would benefit from a clarification of the similarities and differences between these terms and from increased uniformity of the terms and definitions employed across empirical studies and critical reviews of parentification.

As stated above, the two subtypes of parentification—emotional and instrumental—have the potential to create vastly different outcomes in the parentified individual. While instrumental parentification is less destructive and can instill in the child a sense of maturity and competence, emotional parentification is rarely adaptive for the family and almost always is detrimental to child development (Hooper 2007a; Hooper et al., 2008). Despite this knowledge, few studies on the effects of parentification distinguish between the two subtypes, instead grouping them into one overarching category of “parentification” (Jacobvitz et al., 2004; Jones & Wells, 1996; Katz et al., 2009; Macfie, Houts, et al., 2005; Macfie, McElwain, et al., 2005; Mayselless et al., 2004). This simplification of a complex and multifaceted process severely limits the potential to uncover associations between parentification and outcomes. Therefore, a second suggestion for future researchers is to distinguish between emotional and instrumental parentification and to examine how each affects child developmental tasks (such as attachment) and adult outcomes.

In addition to issues regarding the conceptualization of parentification, accurate measurement of parentification poses its own challenges. A substantial proportion of studies examining the effects of parentification are retrospective in nature (Hooper et al., 2008; Jones & Wells, 1996; Katz et al., 2009; Macfie, McElwain, et al., 2005; Mayselless et al., 2004). The most common type of instrument used to measure parentification, such as the Parentification Questionnaire (Jurkovic & Thirkeld, 1998), requires participants to reflect on memories of past experiences. These memories may have been distorted over time, particularly if they contain negative content, and are therefore potentially inaccurate. Some researchers, however, have attempted to study current parentification, utilizing both video recordings of parent-child interactions (Macfie, Houts, et al., 2005) as well as parent and teacher reports (Jacobvitz et al., 2004). Researchers wishing to examine the direct effects of parentification on children, particularly on childhood development, would benefit from continuing to utilize observational studies and multi-source ratings of current child functioning in order to understand parentification and its effects within the context of the family as a system, as opposed to relying on the memories of one individual.

Moreover, despite the fact that there are multiple forms of attachment (Ainsworth et al., 1978; Main & Solomon, 1986), currently researchers typically discuss the effects of parentification only in terms of secure versus insecure attachment styles (Boszormenyi-Nagy & Spark, 1973; Earley & Cushway, 2002; Hooper, 2007a, 2007b; Katz et al., 2009), and do not take into consideration the subtypes of insecure attachment. Research that does consider the varying forms of insecure attachment only speculates briefly about their possible linkages to parentification, and does not directly test these relationships statistically (Macfie, Houts, et al., 2005; Macfie, McElwain, et al., 2005). Therefore, a fourth recommendation is for researchers to examine the association between parentification and the various forms of insecure attachment. More detailed knowledge about how parentification affects attachment styles in children would facilitate prevention and treatment, as these different patterns of attachment have varying influences on child and adult outcomes.

A final suggestion concerns the implementation of current research findings to develop prevention and intervention strategies that address parentification, alongside the emergence of new research that tests the outcomes of such strategies. Research to date has primarily focused on the impact of parentification on the parentified individual, and little has been done to explore the ways in which families might be helped to address this issue collectively (Earley & Cushway, 2002). However, researchers and clinicians have begun exploring ways in which family systems theory (Bowen, 1966) can be applied to the problem of parentification within the context of family therapy (Byng-Hall, 2002; Hooper, 2007a). Within this form of therapy the
dysfunctional working models which characterize the parentified relationship are dismantled (Byng-Hall, 2002) as both parents and children come to understand how they function as a connected system of individuals. Family systems therapy may aim to assist parents in reducing their reliance on their children (Byng-Hall, 2002) as well as in helping parentified children understand how their attachment to their parents has been affected by this reliance. A strategy at the level of secondary prevention which may prove effective is the development of treatment plans through identification of protective factors which mitigate the harmful effects of this process (Earley & Cushway, 2002). Lastly, it has been noted that in cases where parentification constitutes severe neglect or maltreatment, temporary removal of the child or the provision of assistance to the parent through community programs may be necessary to protect the parentified child (Earley & Cushway, 2002).

Research has demonstrated that parentification can potentially lead to insecure attachment (Boszormenyi-Nagy & Spark, 1973; Earley & Cushway, 2002; Hooper, 2007a, 2007b; Katz et al., 2009; Macfie, Houts, et al., 2005; Macfie, McElwain, et al., 2005). Given that attachment has been shown to exert an influence on a broad array of areas in both childhood and adulthood (Ainsworth et al., 1978; Byng-Hall, 2002), it is imperative that strategies such as those listed above be further developed in order to target the process of parentification at both the level of the child and the parent. Moreover, successful interventions would have multiplicative effects by leading to intergenerational prevention. By addressing the internal working models which promote the intergenerational transmission of parentification, intervention strategies would serve to prevent further parentification by breaking the cycle whereby the parentified child becomes the parentifying adult (Barnett & Parker, 1998).

## Conclusion

First utilized by Boszormenyi-Nagy and Spark (1973) to describe a ubiquitous aspect of social relationships, the term “parentification” has come to refer most commonly to the process through which a child adopts the responsibilities of an adult, with the adult, in turn, adopting the position of the child in the parent-child relationship. While much of the literature has focused primarily on the effects of parentification on adult outcomes (Earley & Cushway, 2002; Hooper 2007a, 2007b, 2008; Hooper et al., 2008; Jones & Wells, 1996; Katz et al., 2009; Macfie, McElwain, et al., 2005; Mayeless et al., 2004), researchers are beginning to explore the direct and contemporaneous effects of this pathological interaction pattern on child development (Earley & Cushway, 2002; Hooper, 2007a, 2008; Jacobvitz et al., 2004; Macfie, Houts, et al., 2005; Macfie, McElwain, et al., 2005). In particular, researchers have demonstrated growing interest in the implications of parentification for the development of attachment patterns among children.

Current literature on the influence of parentification on child development has repeatedly concluded that parentified children experience insecure attachments with the parentifying adult which tend to carry forth into adulthood, affecting future relationships with others and even potentially the parentified individual’s own children (Earley & Cushway, 2002; Hooper, 2007a, 2008; Katz et al., 2009; Macfie, McElwain, et al., 2005). Although parentification is a relatively new area of research, these findings have important implications for future areas of investigation and for the clinical understanding of parentification. Most importantly, findings on attachment issues arising from the experience of parentification may illuminate potential pathways through which other outcomes, such as mental illness and social problems, arise.

Continued research in this area would therefore enhance comprehension of the developmental implications of parentification and would increase knowledge of the ways in which parentification can lead to a variety of other outcomes throughout the lifespan. Efforts to develop such an understanding would assist in mitigating the impact of parentification on the lives of those who experience it through the development of prevention and treatment programs. Importantly, future undertakings in this area have the potential to address directly the pervasive social problem of child neglect.

## References


