

Parentification: when the roles are reversed...

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Following her doctoral research on parentification, Stéphanie Haxhe, a psychotherapist and lecturer at ULg, has published ***L'enfant parentifié et sa famille*** (1). This book examines the process of role reversal between parents and children in the family system, and is based on an import observation. Though professionals evoke the concept of parentification quite frequently, it is not well understood and is often applied either too hastily or too restrictively. In both cases, an inaccurate diagnosis is made and proper treatment is not provided. With the publication of this book, the researcher hopes to provide keys to understanding this psychopathology and suggests new avenues for better detection, as it is poorly identified all too often.

L'ENFANT PARENTIFIÉ ET SA FAMILLE

Stéphanie Haxhe



From the minute a child is born, their parents provide them with attention, tenderness, and love. Children absorb all these displays of affection like a sponge, but they also feel a very strong need to give and to return the affection. When they sense that a parent is unwell, children will do everything they can to help them. This mutual support is completely normal and serves as a balance point that contributes to family harmony. But in some cases the help that the parent unconsciously asks of their child exceeds reasonable limits and can take much more dangerous forms. The parent may tacitly emit distress signals so that their child will help and comfort them. The child feels obligated to put aside childhood activities, to hide their own suffering, and to suppress their own needs in order to respond to and take care of the parent's needs. In order to deal with this situation and assume responsibilities that shouldn't belong to them, the child grows up way too soon and becomes a parent to their own parent. The term parentification is used to describe this complex relationship of role reversals.

Better understanding for better identification

In *L'enfant parentifié et sa famille*, **Stéphanie Haxhe**, a lecturer at the University of Liège (Department of Systemic Clinical Medicine and Relational Psychopathology) and psychotherapist (ULg's **CPLU**- Psychological and Speech Therapy Consultation Centre and SVAG - Verviers Support and Counselling Centre), doesn't claim to provide an exhaustive definition of parentification. The context in which this complex organisational process appears cannot be established and defined with certainty, and then used as a framework applicable to all the family structures affected by this psychopathology. On the contrary, parentification appears in a specific context and as result of a combination of multiple factors. *"The first and most important factor is the parent's need. The second relates to the child's sensitivity,"* explains Stéphanie Haxhe. Indeed, when the parent has unmet expectations, deep emotional deficiencies, a need for recognition that has gone unmet since childhood (particularly following the premature death of a parent), or has faced physical or emotional abuse or even neglect within a large family, they will transfer the weight of this trauma onto their child in the hope the child will fill their emotional void.

The researcher has redefined this slippery term that is still too often confused with other similar concepts such as parentalisation. As opposed to the parentified child, the parentalised child doesn't take the parent's place but rather plays an auxiliary role in the family dynamic. For example, the oldest child in a large family may have to take care of their brothers and sisters. They take on specific parental responsibilities in a given context, but don't constantly have to give up their own individual needs to devote themselves entirely to their parent, as parentified children do.

The book also describes the most important criteria for identification so that anyone who might encounter or need to deal with this family psychopathology (such as educators, social workers, psychologists, etc.) will have a better understanding of the problem. As the intended goal is to relieve the child's burden without brutally tearing them away from the role their father or mother assigned to them, the transition must be gradual. Yet if social services find out that a child is being parentified, they might immediately seek to remove the child from their family. But instead of helping the child, removal could have even more disastrous consequences. If the child knows that no other alternative measures have been taken, they will constantly be worried and their anxiety will increase tenfold. They will only feel better once they are sure that someone is taking care of their parent, that someone has taken over their responsibility. According to the young researcher, it is therefore essential to work with other family members and set up a network of caregivers.

Stéphanie Haxhe's research is original in that it then focuses on observations of both clinical cases where there was a request for therapy, and non-clinical cases in which the family didn't exhibit any problems and never sought out therapy. The researcher was therefore able to study families in which the process of parentification was already present and recognized (even going back several generations), as well as families that were a "blank slate," in order to understand the factors that determine whether or not the pathology appears, and when it is reproduced.

The situations she observed also allowed her to qualify certain frequently espoused claims, such as the idea that only one child is parentified, and always the eldest. *"The literature generally states that only one child is parentified, but that's not the case,"* says the researcher. *"When the parents have extensive needs, they spread them out amongst their children. Each child offers something to their parent in their own way and according to their level of sensitivity."* Such is the case for a mother who was neglected by her own parents, as her two daughters will react in diametrically opposed ways. One strives to succeed so that her mother can obtain the approval that she never received as a child. The other becomes a "problem child" to give her mother the opportunity to show that she is competent and will fight to help her daughter overcome her difficulties.

Several forms of parentification



If parentification is not detected and treated as quickly as possible, it can take deep roots in the family and perpetuate itself for several generations. However, recognising parentification is not easy since it takes a variety of different forms. Some are easier to identify since they are more obvious. Stéphanie Haxhe provides several examples in her book based on her clinical experience, while being careful to reframe and redefine some models that haven't often been addressed in the scientific literature. The "caregiver" child who gives up their studies to stay home with an alcoholic or depressed parent is one example. They are often identified by educators or teachers, who then notify the school's health and welfare centre.



Other manifestations of the pathology are more latent and thus harder to detect. This is often the case for the "perfect child," who tries to be as admirable as possible to feed their parent's narcissism and their own sense of self-denigration. The "perfect child" generally goes unnoticed because they don't seem to have any problems, even though they are inwardly quite anxious and suffer from extreme nervousness. The child as "scapegoat" is another form of parentification. According to Stéphanie Haxhe, *"we never talk about this type, even though family therapists see these kinds of kids quite often in the clinic. The scapegoat generally has a parent who has suffered serious trauma such as sexual, physical, or emotional abuse. The parent will unconsciously expect their child to repair their vision of the world, give them a reason to live again, and erase all the horrors they went through."* This relationship is extremely psychologically destructive, since the child will be overwhelmed with guilt. They will try everything to restore their parent's sense of hope, but this is an arduous if not impossible task, no matter what they do.

Negative outcomes in adulthood

Suppressing their desires and putting themselves aside in order to satisfy their parent can impact the child's psychological development. This is generally manifested in adolescence or adulthood through obsessive-

compulsive disorders, depression, profound anxiety, doubts about one's identity, and even suicide in extreme cases. Stéphanie Haxhe also claims that there is a risk of developing an incestuous relationship: *"If a child plays a parental role, they will unconsciously be seen as a parent. The risk is then that they will be seen as an adult, with a level of maturity and abilities far greater than those of a child."* Indeed, if the parent is not able to establish clear boundaries since they were never established in their own childhood, and their partner is either not present or not paying attention, then the affection the parent seeks from the child can take a sexualised form such as seduction or even a sexual act.

Preventing parentification

The presence of a partner upon which the "parentifying" parent can lean on and confide in could be beneficial to the child and help protect them from parentification. The affection, attention, and support that the adult receives from their partner can help prevent them from focusing all their needs on the child. Unfortunately, Stéphanie Haxhe has noticed that the "parentifying" parent often unconsciously repeats the pattern they are caught up in, and chooses a partner who also suffered from a lack of affection as a child. Despite the support they provide each other, they won't be able to compensate for all their deficiencies and an emotional chasm will always come between them. In this case, there is a strong chance that this emptiness will be transferred onto their child.

In addition to family therapy, which the researcher recommends for young children and/or adolescents, she also suggests sibling therapy to improve treatment of parentification when there are several children involved, rather than individual therapy focused on each of them. Brothers and sisters who have been through the same thing could share their experiences in sibling therapy, in order to express their feelings and compare their points of view. This could put an end to their isolation and help them overcome feelings of loneliness. Stéphanie Haxhe believes that this kind of therapy is a good means of preventing children from reproducing the same process as adults and becoming "parentifying" parents themselves.

(1) Stéphanie Haxhe, L'enfant parentifié et sa famille, Toulouse, coll.« Relations », Erès, 2013.