Compulsive Caregiving:
Emotional Parentification in Childhood and Its Association With
Romantic Relationships in Late Adolescence and Early Adulthood

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Abstract

Parentification, a process where children take on parent-like roles in the child-parent relationship, has often been discussed in the context of family systems therapy, but rarely studied empirically. In the present study, 219 undergraduates in a romantic relationship and 39 of their romantic partners were given measures for parentification in childhood and a variety of outcome and attachment scales. A newly created self-report measure of caregiving behavior in a romantic relationship was also given and analyzed, showing adequate internal reliability, test-retest reliability, and construct validity. The data showed a significant association between emotional parentification of children with their mothers and fathers with parentification-style caregiving in a romantic relationship. Participants’ parentification in childhood was also significantly associated with insecure attachment to their romantic partners, as well as higher levels of depressive symptoms with mixed support for lowered levels of romantic relationship satisfaction. The findings suggest that behaviors learned from the child-parent relationship have an association with behaviors in later romantic relationships and that this can be conceptualized as a product of attachment transfer from parents to romantic partners in late adolescence.
Compulsive Caregiving: Emotional Parentification in Childhood and Its Association With Romantic Relationships in Late Adolescence and Early Adulthood

The development of children occurs over a long period of years and is fraught with possible hurdles to normative development. This is particularly true when children are forced to assume roles beyond their developmental level. This can affect the development of individuals in ways that profoundly impact their future behaviors, especially their interpersonal relationships. Interpersonal, and particularly romantic relationships, serve as a major factor contributing to successful adult life and possible impacts on adult relationships have long-term effects on a wide variety of adult behaviors. It is possible that developmental roles in childhood could form a model for later role-adoption, causing long-term effects on later behavior.

Parentification and Its Types

A long established process called parentification has been used in family-systems theory to describe a distinct pattern of behaviors when children younger than 18 (typically ages 8-14) assume parent-like roles in the parent-child relationship (Earley & Cushway, 2002). There exist two distinct types of this behavior, emotional parentification and instrumental parentification (Jurkovic, Jessee, & Goglia, 1991). Instrumental parentification occurs when a child cares for those in his or her family’s household tasks as if he or she was an adult. Common examples include behaviors such as washing the clothes of parents or younger siblings, cooking dinner for the family, or performing essential household chores such as cleaning. These behaviors are not simply a child taking responsibility, but being forced to take responsibility. Such parentification
typically occurs when a child’s parent cannot perform such function, due to illness (mental or physical), marital strife, or drug abuse (Earley & Cushway, 2002).

Emotional parentification involves a more subtle process in which a child begins to feel responsible for their parents’ emotional well-being. This typically occurs in divorced families, especially those in which parents treat their children as judges, deciding fault in the marriage’s failure (Barnett & Parker, 1998). Children involved in these behaviors begin to feel like referees in arguments between parents (divorced or not) and feel responsible for “choosing” one parent over another. Children will also sometimes feel they are responsible for their mother or father’s happiness or well-being, a responsibility few 8-14 year olds are developmentally equipped to handle (Jurovic et al., 2001). An example could be a child who tries to console their mother after a bad day at work, suppressing their own desire to talk about their own problems to keep their mother happier. Such behaviors create a situation where a child learns emotional regulation that could have long-term impacts on their interpersonal relationships later in life, such as hiding their own feelings in an attempt to protect their partner (Earley & Cushway, 2002). Instead of allowing their partner to support them emotionally, they have been taught through their childhood that they should hide their emotions in order to support those they love. In this way, their own suppressed emotions are only dealt with internally, without the support of those around them.

Parentification’s Outcomes

Research on these two processes has consistently found that emotional parentification causes more long-term interpersonal problems for parentified children.
than instrumental parentification (Jurkovic et al., 1991). Such research suggests that instrumental caregiving, while certainly not ideal, is not only a learning opportunity for the child and mainly gives children a feeling of responsibility. Emotional caregiving, however, creates a family dynamic where the child assumes an emotional role far beyond their developmental level to the point where they feel guilty for failures in family system. The traditional process where a child can gain emotional maturity through their parent’s support is lost, and instead a child is given the responsibility for a likely emotionally vulnerable mother or father. The protective nature of a good parent–child relationship instead becomes a relationship that is a constant source of stress and emotional distress to the child, because the demands placed on a child are beyond their developmental capabilities (Earley & Cushway, 2002). Unlike instrumental parentification, emotional parentification likely alters the child’s self-image and understanding of close relationships in a way that can cause long-term changes.

As previously stated, both types of parentification typically occur in situations when a parent has stressors independent from the parent-child dynamic. Common examples include parents that are divorced, drug-dependent, depressed (especially mothers), and of low socio-economic means (Earley & Cushway, 2002). In each of these examples, there exists a major stressor on the parent that prevents them from fulfilling their role in the child-parent dyad. As a result, the child either chooses to, or is forced out of necessity to assume the responsibilities of a parent. The family system they are a part of is stressed, and the child is forced to deal with the stressor instead of the parent, likely feeling guilty if unsuccessful.

*Attachment Theory’s Possible Pathway for Parentification Induced Behaviors*
In the context of the process of parentification, traditional attachment theory presents a possible avenue for the modeling of caregiving behaviors present in parentification for caregiving in late adolescence and early adulthood. In this period, the learned model for attachment transfers from the traditional attachment figures of childhood, the parents, to romantic partners (Carnelly, Pietromonaco, & Jaffe, 1996). The theory broadly encompasses relationships that show behaviors such as caregiving, and relates to the way partners and parents care for those in their lives. A romantic partner assumes a role that, while different from the child-parent attachment, becomes the primary source of emotional support similar to the parent-child relationship. Partners in a traditional romantic attachment care for each other equally, taking turns providing emotional support their partner (Allen & Land, 1999).

Studies have shown that this transfer of attachment also contains elements of the previous relationships. Carnelly et al. (1996) found that attachment styles from childhood transfer into later life. It seems possible that attachment style would not be the only type of behavior that would transfer between attachments. Parentification and its effects on behavior could be one example of negative learned behavioral style that could remain present from relationships in childhood to adulthood. In this way, the effects of parentification can be conceptualized from an attachment perspective. The disruption of the attachment system in childhood could affect later romantic relationships.

Another powerful way parentification in childhood could impact future behavior is in the way emotionally parentified children are forced to assume the role of caregiver to their parents (Earley & Cushway, 2002). The need to care for parent-figures has been shown to make parentified children expect that those they care for need them to act in this
caregiver role (Valleau, Bergner, & Horton, 1995). In this way, parentified children who become attached to their romantic partner in late adolescence could believe that they are expected to assume this same caretaker role they took on in childhood. Little research has been undertaken focusing specifically on the behaviors of parentification directly relating to outcomes in later life. This information is key to the creation and testing of new intervention techniques, as well as methods of therapy and confirming that the conceptualization of the theory can be examined empirically.

It is likely that not all types of parentification have negative outcomes on relationships overall. Instrumental parentification does not have comparatively as detrimental effects on children likely because instrumental caregiving presents children with a type of caregiving that is explicit and important in later life. Emotional parentification, however, is less explicit and forces a child into a role that is almost impossible for a child to succeed in. Jurkovic, Jessee, and Goglia (1991) suggested that the age an individual takes on caretaking roles as well as the difficulty of what he or she is asked to do affects the impact of the parentification on his or her behavior.

Instrumental parentification could be more age appropriate than emotional parentification, as it is not necessarily difficult for a 12-year-old child to wash clothes, but how could a 12-year-old child make a depressed thirty-year-old mother happy? This type of responsibility is difficult even for fully developed individuals to deal with, whereas washing clothes can be done by an individual 12 years old or 40 years old. While the ways a partner needs to care for their romantic partner are not necessarily the same as what a divorced mother needs, it teaches the child to feel responsible for others’ happiness, especially their parents and possibly their romantic partners.
Based on these processes, my hypothesis surrounding the connection between parentification and caregiving behaviors is that those who are parentified in childhood are more likely to assume caregiver responsibilities in their later romantic relationships. The roles they assumed as children would reassert themselves later in life as learned appropriate behavior towards those they love. Also, those who were parentified in childhood will be more likely to form insecure romantic attachments to their partners. The pattern of parentification behavior with their parents would outline a style of attachment that would deviate from the norm in the responsibility the child takes on and create a situation where the individual would later react to their partner in a less secure way. Those who were parentified in childhood are also more likely to have higher levels of depression and lower levels of relationship satisfaction.

These hypotheses were studied using a survey design in order to determine the possible correlation between emotional parentification and later caregiving in romantic relationships. This was combined with other measures in order to test a large amount of variables, giving the researcher the ability to determine the possible relationships between childhood behaviors and later outcomes, such as attachment styles in later romantic relationships. Outcome variables including depressive symptoms and relationship satisfaction were included to correlate parentification’s relationship with these results.

Method

Overview

The study used a survey method of eight measures and demographic information through an online survey web site. Responses to the measures were used to analyze the participant’s romantic relationships, well-being, and parentification in childhood. The
primary sample was drawn from an undergraduate university and the majority of later analyses were drawn from this group. A subsample was collected of 39 romantic partner pairs, with one partner completing the survey approximately two months after the initial survey. This allowed pair analyses to be computed to verify later findings from the original sample as well as capture features of the dyads that self-reports from only one partner may not be able to provide.

Participants.

The first sample used consisted of 248 undergraduate students who stated in a pretest they were in a romantic relationship. 63 were men, 156 were women, and 29 responded that they were no longer in a relationship and were not used in the sample as a result. The mean age of the 219 participants in a relationship was 18.94 years old and they ranged from undergraduate freshmen to seniors, with the majority (165) being in their first two years of college. Each participant was involved in the study in order to receive participation credit for a psychology class. Prior to any participation they all viewed an informed consent form, and gave their consent to participate in the study.

Of the participants in the first sample, 99 gave permission for the researcher to contact their romantic partners to ask for their participation and of these 99, 42 completed the study. 21 were men, 18 were women, and three participant’s responses could not be used for various reasons. The mean age of the usable participants was 19.84 and their student status varied from high school students to college graduates and graduate students. Participants who completed the study were entered into a drawing for three prizes. Prior to participation they viewed an informed consent form and gave their consent to participate.
Procedure

Participants were recruited to the study through an undergraduate psychology participation pool. The participants were able to choose the study from a list of studies offered for participation from the university’s psychology website. The surveys were administered electronically and accessed by the participants through an internet browser of their choosing. The study was posted on an online survey-hosting site and once accessed, could be completed by the participants at their leisure. They were instructed in the informed consent that they were allowed to exit the study at any time and could skip any response except for their name and agreement to the informed consent. Once the participants closed their browser or completed the surveys, their participation was over.

Measures

Responses to seven preexisting measures, demographic information, and a newly developed measure were used to assess a variety of variables. Demographic information was collected on participant’s age, school status, parent’s marital status, number of siblings, and relationship length.

Relationship Assessment Scale (Hendrick, Dicke, & Hendrick, 1998). The Relationship Assessment Scale was used to measure participants’ relationship satisfaction. It is a seven item self-report measure using a 5-point Likert scale indicating their endorsement of items ranging from 1 (Not at all) to 5 (Extremely well). Two items are reverse coded, and all items measure the quality of a romantic relationship (e.g. “How well does your partner meet your needs”). The RAS possesses sound psychometric properties across ages and ethnicities, including high test-retest reliability among undergraduate students (.85), and a strong alpha level (.93) (Hendrick, et al., 1998).
Construct validity was established comparing it with previous studies, including the Dyadic Assessment Scale (Hendrick et al., 1998).

Behavioral Systems Questionnaire (Furman, Simon, Shaffer, & Bouchey, 2002). The Behavioral Systems Questionnaire was used to determine participant’s endorsement of items that measured their attachment styles. It describes levels of secure attachment and insecure attachment, with levels of insecure attachment split into the dismissing and preoccupied subtypes. There also exist subscales measuring attachment style for attachment, caregiving, and affiliation. There was a section on physical intimacy that was not used. Three 15 item questionnaires were used each with five questions endorsing secure, dismissing, and preoccupied attachment styles. Questions were 5-point Likert scales ranging from 1 (Strongly disagree) to 5 (Strongly agree). All three sub-types had an acceptable alpha level (> .85) and were moderately to highly correlated with existing romantic relationship measures, demonstrating sound psychometrics (Furman et al., 2002).

Experiences in Close Relationships (Brennan, Clark, & Shaver, 1998). The Experiences in Close Relationships scale was used to measure participants’ attachment style in their relationship. 36 seven-point Likert scale questions were used, 10 were reverse coded, and they specifically measured anxiety and avoidance in a relationship. These two variables seemed to group with the traditional styles of secure and insecure attachment. The scale has high internal consistency and the researchers used a large pool of items to choose those with the most validity (Brennan et al., 1998).

Beck Depression Inventory (Beck, & Steer, 1987). The Beck Depression Inventory was used to measure participant’s endorsement of behavioral and cognitive
symptoms of depression. 21 items are included and participants are told to endorse as many of the four responses for each item as they feel describes them. The highest score response is used for each item and the responses are added to give a rating of depressive symptoms. Examples of items include both physical symptoms of depression (e.g. dealing with levels of tiredness and sleeping habits) and the more traditional psychological measures of depression (e.g. questioning about feelings of guilt and sadness) (Beck, & Steer, 1987). As a commonly used measure, extensive psychometric data has been studied in respect to its reliability and validity. A meta-analysis of the years from 1961 to 1986 calculated an alpha coefficient of 0.81 for non-psychiatric patients. The BDI correlated with clinical ratings of depression at a level of 0.60 and at a level of 0.74 with Hamilton Psychiatric Rating Scale for Depression.

*Emotional Parentification Questionnaire (Martin, 1996).* The Emotional Parentification Questionnaire is an 18-item self-report measure with a 5-point Likert scale ranging from 1 (*Strongly disagree*) to 5 (*Strongly agree*) used to retrospectively measure participant’s emotional parentification in childhood in relationship to both their fathers and mothers. Participants complete two separate measures for their mothers and fathers and the items are averaged for each parent. Examples of items include, “My mother/father really needs my support to manage things in her life,” and “My mother/father depends on me much more than most mothers/fathers depend on their children.” The EPQ possesses sound psychometric properties including strong alpha levels, (.89 = mothers, .90 = fathers) (Mika, Bergner, & Baum, 1987).

*Revised Caregiving Scale (Kunce, 1994).* The Revised Caregiving Scale was used to measure participant’s proximity to their partner in caregiving, sensitivity to their...
partner in caregiving, cooperation with their partner in caregiving, and level of feelings of compulsive caregiving for their partner. 60 items were divided into these subscales. Half of the questions are reverse-coded. The original researcher did not provide the exact list of subscale, so an approximation of each group was used, as its delineation was able to be approximated. The subscales showed acceptable alpha levels (all were greater than 0.80) as well as acceptable levels of test-retest reliability (all were greater than 0.77) (Kunce, 1994). Multiple types of construct validity, including observed behaviors and comparison to other existing measures, showed acceptable levels of correlation to the scale (Kunce, 1994). These studies demonstrated the strong psychometric reliability and validity of the Revised Caregiving Scale.

*Emotional Parentification Questionnaire Revised for Romantic Partners.* This newly developed measure was an adapted form of the EPQ adjusted to reflect “parentification” in a romantic relationship. Items on the EPQ such as “My mother/father really needs my support to manage things in his/her life” were changed to “My romantic partner really needs my support to manage things in his/her life.” Certain items that did not make sense in a relationship context, such as “I grew up too fast and didn’t get a chance to be a kid,” were replaced with items more suitable to compulsive caregiving. The internal reliability of the items was high with an alpha level of .848, and the test-retest reliability was acceptably high, $r = .68$. Both the test-retest and internal reliability were improved by excluding two items, making the measure 22 items long. This raised the alpha level to .851 and a test-retest reliability of $r = .70$. The construct validity of the measure was studied by comparing it to a similar measure, the subscale of the Revised Caregiving Scale relating to compulsive caregiving. The two measures correlated at a
level of -.442, which was improved to -.453 when excluding the aforementioned two items. The negative correlation was expected because the measures’ Likert scales were reverse coded from each other, with the EPQ-RP using higher scores to demonstrate higher levels of compulsive caregiving with the compulsive caregiving scale using lower scores. This strong negative correlation was an ideal level, showing that the two measures were capturing similar constructs, but were independently useful. While compulsive caregiving is meant to measure the level a partner cares for their partner and ignores their own needs, the EPQ-RP is designed to measure both this and feelings of responsibility for a partner’s happiness. The two measures’ correlations with other variables were also similar, providing further evidence for construct validity.

Results

A correlation analysis was conducted of the caregiving and parentification measures at an alpha level of .05. The findings supported the hypothesis of a statistically significant correlation with both the Revised Caregiving Measure’s compulsive caregiving subscale as well as Emotional Parentification Questionnaire for Romantic Partners for both parentification in childhood with a father, but only with the EPQ-RP with mothers as measured by the Emotional Parentification Questionnaire.

The Revised Caregiving Measure’s compulsive caregiving subscale correlation with parentification in child with a father was statistically significant $r = -.196$, $p = .004$ ($N = 214$). The correlation between compulsive caregiving and parentification with a mother was not significantly significant but approached significance $r = -.127$, $p = .062$ ($N = 216$). The Emotional Parentification Questionnaire for Romantic Partners correlation with both mothers and fathers was statistically significant at a level of $r =$
.150, p = .028 (N = 217) and r = .148, p = .030 (N = 216) respectively. The correlations are outlined in Table 1. These correlations were stronger when analyzed excluding the two items that did not seem to fit conceptually and statistically in the EPQ-RP, becoming r = .154 and r = .160 for mothers and father respectively. This suggests that parentification as reported by participants with their father had a stronger relationship than with mothers as measured by the compulsive caregiving subscale. It is possible this was the result of the measure itself. While the EPQ-RP was designed specifically to identify non-normative caregiving behaviors in the same vein as emotional parentification, the compulsive caregiving subscale was not specifically designed for this purpose. So while its focus was the closest of any available, it is possible this lack of significance was the result of the focus of the measure being slightly different than what was desired. It is possible, however, that the influence of parentification with fathers did have a stronger relationship with later caregiving behaviors.

Analysis of the partner subsample provided additional support for the conceptualization of caregiving and its relationship to parentification. A correlation between the EPQ-RP and EPQ for mother and fathers showed a correlation of .290 and .367 respectively, leaving both significant. This supports the original findings and provides additional support for the relationship between parentification in childhood and parentification-type caregiving in later romantic relationships.

A correlation between adult romantic attachment styles and parentification in childhood with fathers and mothers as measured by the Emotional Parentification Questionnaire was conducted at an alpha level of .05. A significant correlation was discovered between both types of insecure attachment, in line with the researcher’s
hypothesis. The Dismissing-insecure type correlated with both mothers and fathers and was statistically significant at a level of $r = -.280$, $p < .001$ ($N = 217$) and $r = -.340$, $p < .001$ ($N = 215$) respectively. The Preoccupied-insecure type correlated with both mothers and fathers was statistically significant at a level of $r = -.176$, $p = .009$ ($N = 217$) and $r = -.243$, $p < .001$ ($N = 215$) respectively. Secure attachment styles, on the other hand, did not correlate significantly with either mothers and fathers $r = -.011$, $p = .872$ and $r = -.024$, $p = .729$ ($N = 215$) respectively. These correlations are summarized in Table 2.

The insignificant correlation between secure attachment and parentification was unexpected in light of the significant correlation between the insignificant attachment types. Analysis of the partner subsample, however, suggests that there does exist some kind of negative correlation between secure relationships and parentification in childhood. Correlations between secure relationships and parentification with mothers and fathers were significant in the partner sample ($r = -.231$, $p = .050$ for fathers, and $r = -.251$, $p = 0.32$ for mothers), unlike in the primary sample.

Correlations between depression and romantic relationships satisfaction with parentification were also conducted at an alpha level of .05. Depression levels, as measured by the Beck Depression Inventory, were significantly correlated with levels of parentification in childhood for the mothers and fathers of participants, $r = .148$, $p = .029$, and $r = .174$, $p = .011$ respectively. Levels of relationship satisfaction, as measured by the Relationship Assessment Scale, were not significantly correlated with levels of parentification in childhood for the mothers and fathers of participants, $r = -.084$, $p = .219$, and $r = -.100$, $p = .146$ respectively. These results are summarized in Table 3.
Relationship satisfaction when analyzed in the partner subsample, however, provides different results. A significant correlation existed between parentification in childhood with mothers and fathers for the subsample ($r = -.398, p < .001$ and $r = -.349, p < .001$ respectively). Significant correlations between parentification and depressive symptoms did not exist, although this was likely due to the sample size. The correlations for mothers and fathers ($r = .210, p = .075$, and $r = .206, p = .080$ respectively) were only calculated with 73 participants. These correlations were stronger comparatively than in the primary sample, but with a smaller sample size. More participants would be needed to fully explore this relationship.

Analyses splitting the data by gender did not produce significantly different correlation or regression results. Controlling for a variety of external variables such as relationship length, number of siblings, and age also did not produce significantly different results. While it is likely some differences exist, further analysis must be done to determine the appropriateness of splitting by gender or controlling for various variables.

Discussion

In this study, a diverse group of measures were given to adolescents in romantic relationships to discover possible relationships between parentification in childhood and later outcomes in romantic relationships. As predicted, parentification in childhood was correlated with higher levels of compulsive caregiving. Parentification in childhood with a father was associated with higher levels of compulsive caregiving as measured by two distinct measures. The same association existed with parentification with mothers, although the relationship was not significant as measured by one of the two measures.
These findings suggest that there is some connection between assuming caregiving roles in childhood and assuming similar caregiving roles later in life. This early period of development could have presented parentified children with a model for interaction with loved ones that was salient through the shift of attachment from a parent to a romantic partner in late adolescence. It seems logical that children who learned they needed to emotionally support their parents would assume this was a normative way to interact with all loved ones. By doing so, they may feel they are being an attentive romantic partner while not seeing the emotional damage they are doing to themselves and their relationship. Compulsive caregiving is highly negatively correlated with relationship satisfaction and highly correlated with depressive symptoms. The relationship with these two variables suggests that the increased compulsive caregiving as related to parentification in childhood could have an impact on both the quality of romantic relationships in later years as well as the emotional well-being of the individual. It is not clear if this is a causal relationship, as the study was correlation in nature however, as parentification alone was also correlated (albeit at a lower level) with depressive symptoms. Regardless, this relationship suggests there is a possible link that should be further explored.

The connection between emotional parentification and later caregiving role-adoption by parentified individuals supports the theories of attachment that suggest attachment “transfers” from parents to romantic partners in adolescence (Carnelly et al., 1996). The behaviors learned in childhood become the norm for later relationships and a pathway for the original behaviors is created from childhood to early adulthood. This supports the previous research that found attachment styles in childhood would generally
predict someone’s attachment style later in life. This study suggests that even learned
behaviors such as caregiving would follow a similar pathway, becoming salient from
childhood into later years of development. The importance of this pathway is not simply
confined to this one type of relationship behavior. It is possible that further research
could find support for the modeling of different behaviors, both positive and negative in
outcome.

The next finding was support for the second central hypothesis, that
parentification in childhood would correlate with insecure romantic attachment behavior
types. For both the dismissing and preoccupied styles of romantic attachment, the data
showed a significant relationship with emotional parentification in childhood with both
mothers and fathers. While it may at first seem strange that parentification correlates with
both dismissing and preoccupied styles, these two types are not distinct categories, but
behavior types and are often correlated with each other in other studies (Bartholomew &
Horowitz, 1991). People do not necessarily exclusively endorse one style at all times and
can show evidence for both types in different situations (although generally people fall
into one category overall). It is possible, however, that individuals could be classified as
more dismissing or preoccupied based on two possible different outcomes for individuals
parentified in childhood. A child who is successful in emotionally caring for their parent,
or who believes they were successful, regardless of outside influences, will likely come
to think of their caregiving as normal and in fact central to their relationships with others.
This need to constantly support and seek out a partner maps clearly onto the preoccupied
style of attachment. Preoccupied partners are conceptualized as constantly seeking out
unnecessary ways to interact with and reassurance from their partners (Bartholomew &
Horowitz, 1991). In this way, children who believe they were successful in their emotional duties would reinforce their own behavior and find themselves in more and more compulsive caregiving roles. Preoccupied attachment style in this study was highly associated with lower romantic relationship satisfaction and higher depressive symptoms, suggesting that those who would fall into this category of insecure attachment do not have as successful relationships or emotional well-being as those who do not endorse this type of attachment style.

A second type of outcome also seems possible. If a child is given emotional roles they cannot fulfill and blame themselves for their parent’s difficulties, whether it is depression or alcoholism, they may remember the hurt they felt trying to care for their parents and try to avoid becoming intimately attached to romantic partners. They could see themselves as damaged or unable to help those they care about and choose to avoid failing others by not becoming close to them. This could create a dismissing style of attachment later in life that would affect their style of relating to romantic partners. Dismissing-insecurely attached partners see deep emotional intimacy as too clingy and possibly dangerous (Bartholomew, & Horowitz, 1991). This leads to a romantic partner who does not want to commit emotionally and as a result, the relationship suffers (Bartholomew & Horowitz, 1991). The dismissing style was associated with lower levels of relationship satisfaction and higher levels of depressive symptoms in this study. An individual’s desire to push away their partner likely affects the intimacy of their relationship and makes them appear aloof or unconcerned with their partner. Such behaviors’ association with depressive symptoms also suggests that their well-being is more negative if individuals endorse this type of attachment style. It is possible the two
are related to each other independent of the style as well, as lower romantic relationship satisfaction was correlated with higher levels of depressive symptoms.

There was mixed support for the hypothesis that emotional parentification in childhood would be associated with lower levels of relationship satisfaction. In the primary sample, individuals did not show a significant correlation between romantic relationship satisfaction and emotional parentification. This finding must be considered in the light of the method used to find it. Individuals could have believed they were happy in their relationship and that it is successful if they are able to assume the role of caregiver. If their partner desires this kind of attention from their partner, it could create a situation where romantic relationship satisfaction is not necessarily reflected by caregiving behaviors, but instead by the desires of the other partner.

When analyzing the partner subsample, however, romantic relationships satisfaction was strongly negatively correlated with emotional parentification in childhood, in contrast to the primary sample. This suggests that the relationship between parentification and lower romantic relationship satisfaction could in fact exist, but is only captured when analyzing responses from both partners. By using both partners, the full dynamic of the relationship (and its satisfaction) could be better represented. Future analysis could find a possible interaction between those who desire caregiving from their partner and the parentification of an individual in childhood could exist depending on the desired support each dyad would seek.

There was support for the hypothesis that individuals who were parentified in childhood would show more depressive symptoms in the present. While interesting, this finding cannot be thought of as causal, but instead a general indicator that the process of
Parentification (or its causes) has negative impacts on individuals who experience it. A variety of other factors could have been responsible for this, such as emotional distress experienced by the parentified children due to parental divorce, something much more common among parentified individuals than non-parentified individuals.

In discussing these findings it is important to note the limitations of the present study. First, self-report measures at a single time were the basis for the findings in this study. Future analyses should make use of longitudinal data that could provide an interesting window into the way relationship dynamics could change over time in regards to caregiving behaviors. Also, the study used correlation survey measures, making it difficult to determine the causality of the relationships among variables. A children-of-twins study could be used to better determine the causality of the findings and help ascertain the importance of genetics and gene-environment correlations on the development of parentified individuals. A hierarchical linear regression could also provide more insight on the direction and interaction of the variables’ relationships.

Another limitation was that the participants were not randomly selected from a representative population, as the primary sample participants used were all students at a large university. This could have resulted in a skewed sample that did not have members of low-income or high-risk groups that could have more accurately represented the population as a whole. Also, the measures used to determine levels of emotional parentification were also retrospective in nature, which could have provided an inaccurate measure of parentification in childhood. A longitudinal design would assist in eliminating this confound.
Despite the presence of these weaknesses, this study makes an important contribution to the study of both attachment and parentification. It identifies the possibility of more than attachment styles transferring from childhood to early adulthood and conceptualizes the link between emotional parentification and later romantic behaviors from an attachment perspective. In the area of family dynamics it provides further empirical evidence for the importance of understanding parentification as a process more fully. Its consistent use in family systems therapy means it is essential to fully understand the process of parentification and its outcomes empirically. More research must be done to determine the possibility of interventions or therapy techniques that could allow parentified individuals a better chance for successful romantic relationships. While prior work has generally found negative outcomes to be the result of parentification, this study provides important specific information that helps describe the specific outcomes of parentification. The findings regarding relationship satisfaction also suggest more research must be done to determine if partner preference could decide the quality of a relationship in which one partner shows signs of compulsive caregiving. With the incredible number of unsuccessful romantic relationships today, understanding the reasons why relationships are not successful is essential to promote psychological well being, and this study addresses one specific, but important, area in that attempt.
References


Table 1

Bivariate Correlations Between Parentification and Caregiving in Romantic Relationships - Primary Sample

<table>
<thead>
<tr>
<th>Variable</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
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<td>1. Compulsive Caregiving</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. EPQ_RP</td>
<td>-.44**</td>
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<td></td>
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<tr>
<td>3. Mom EPQ</td>
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<td>.15*</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>4. Dad EPQ</td>
<td>-.20**</td>
<td>.15*</td>
<td>.65**</td>
<td>1</td>
</tr>
</tbody>
</table>

Note: N = 215. Compulsive Caregiving is a subscale of the Revised Caregiving Scale; EPQ_RP = Emotional Parentification Questionnaire Revised for Romantic Partners; EPQ = Emotional Parentification Questionnaire.
* p < .05. ** p < .01.
### Table 2

*Bivariate Correlations Between Parentification and Attachment Style - Primary Sample*

<table>
<thead>
<tr>
<th>Variable</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Dismissing Attachment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Secure Attachment</td>
<td>-24**</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Preoccupied Attachment</td>
<td>.60**</td>
<td>-27**</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Mom EPQ</td>
<td>.28**</td>
<td>-01</td>
<td>.18**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Dad EPQ</td>
<td>.34**</td>
<td>-02</td>
<td>.24**</td>
<td>.65**</td>
<td></td>
</tr>
</tbody>
</table>

*Note: N = 215. Dismissing, Secure, and Preoccupied attachment styles calculated using Behavior Systems Questionnaire subscales; EPQ = Emotional Parentification Questionnaire.

* p < .05. ** p < .01.*
Table 3

*Bivariate Correlations Between Parentification, Depressive Symptoms, and Romantic Relationship Satisfaction - Primary Sample*

<table>
<thead>
<tr>
<th>Variable</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Depressive Symptoms</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Relationship Satisfaction</td>
<td>-0.42**</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Mom EPQ</td>
<td>0.15*</td>
<td>-0.08</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>4. Dad EPQ</td>
<td>0.17*</td>
<td>-0.10</td>
<td>0.65**</td>
<td>1</td>
</tr>
</tbody>
</table>

*Note: N = 215. Depressive Symptoms measured using Beck Depression Inventory; Relationship Satisfaction measured using Relationship Assessment Scale; EPQ = Emotional Parentification Questionnaire.  
* p < .05, ** p < .01.*