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Anne Shaffer BA & L. Alan Sroufe PhD

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BOUNDARY DISSOLUTION IN THE FAMILY SYSTEM

The Developmental and Adaptational Implications of Generational Boundary Dissolution: Findings from a Prospective, Longitudinal Study

Anne Shaffer
L. Alan Sroufe

SUMMARY. Generational boundary dissolution is a form of parent-child relationship disturbance in which the typical parent and child roles become distorted or even reversed. While recognized as a pathological family process among clinicians, generational boundary dissolution has

Address correspondence to: Anne Shaffer, BA, or L. Alan Sroufe, PhD, Institute of Child Development, University of Minnesota, 51 East River Road, Minneapolis, MN 55455 (E-mail: shaf0088@umn.edu or srouf001@umn.edu).

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also become the subject of empirical study. The current paper presents the theoretical background supporting the construct of boundary dissolution, with particular emphasis on family systems theory and developmental psychopathology. We also review the empirical studies of the occurrence and developmental outcomes of boundary dissolution that have been conducted within the Minnesota Longitudinal Study of Parents and Children, extending from early childhood through adolescence and into adulthood, with data related to multiple realms of social and emotional development, including questions of intergenerational continuity. [Article copies available for a fee from The Haworth Document Delivery Service: 1-800-HAWORTH. E-mail address: <docdelivery@haworthpress.com> Website: <<http://www.HaworthPress.com>> © 2005 by The Haworth Press, Inc. All rights reserved.]

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Generational boundary dissolution in parent-child relationships is a construct that has been variously defined; descriptors include parentification, spousification, filial responsibility, role reversal, and role equalization (see also Kerig, this volume). These terms are not all interchangeable, but what they have in common is their shared characterization of a type of relationship disturbance in which the typical parent and child roles become distorted or even reversed. For example, generational boundary dissolution in the form of parentification can characterize families in which the parent assumes a child-like role and/or the child is drafted into an adult-like role, becoming the parent's partner or caregiver. Long recognized by clinicians as a potentially pathological family process, these forms of relationship disturbance have also become the focus of empirical attention, and studies have shown links between boundary dissolution and psychosocial maladaptation (e.g., Carlson, Jacobvitz, & Sroufe, 1995; Fullinwider-Bush & Jacobvitz, 1993). For example, boundary dissolution is often related to other risks to child psychosocial development, including maltreatment (particularly sexual abuse) and inconsistent care, parental substance abuse, illness, and divorce. It is generally understood that the premature assumption of adult responsibilities by a child that often characterizes boundary dissolution is a stressor which taxes developing competencies and may compromise meeting the child's own developmental needs. Furthermore, growing evidence of the intergenerational transmission of boundary dissolution (e.g., Fullinwider-Bush & Jacobvitz, 1993)

points to potentially pervasive and long-lasting effects of parent-child relationship disturbance, contributing to the motivation for continued study in this area.

In addition, research on generational boundary dissolution within families is an exemplar of a shift in developmental psychology from a focus on the individual toward the study of relationships as units of analysis (Hartup & Laursen, 1999; Reis, Collins, & Berscheid, 2000). Such research has the potential to yield powerful predictors of later development, likely over and above the exclusive reliance on individual measures (Sroufe, 1989). While generational boundary dissolution is challenging to operationalize and identify (in the “real world”), the literature that is available suggests that boundary dissolution is a viable, albeit multi-faceted, construct that is predictive of later functioning. The purpose of this review, therefore, is to present the theoretical origins of the study of boundary dissolution, and in particular to emphasize how the construct has been studied within the context of a prospective, longitudinal study of development and adaptation from infancy to adulthood.

The study of generational boundary dissolution has been particularly informed and supported by family systems theory and developmental psychopathology. Family systems theory provides a framework for defining and understanding relationships and the boundaries among them, and through its systemic emphasis gives consideration to families as holistic units of study. Developmental psychopathology complements family systems theory by providing a perspective on how disturbances in these boundaries and relationships can compromise negotiation of salient developmental issues, thereby contributing to particular kinds of later problems. Both of these perspectives, and their implications for the study of boundary dissolution, are described in greater detail below.

Three principles of family systems theory are especially relevant to the construct of generational boundary dissolution: that families are wholes, that they are divided into subsystems according to specific boundaries, and that they are organized hierarchically (e.g., Boszormenyi-Nagy & Spark, 1973; Minuchin, 1974). First, the holistic view of family systems allows for all parts, or subsystems, to affect each other. Furthermore, it emphasizes that some pathology occurs (i.e., originates or is maintained, and is most clearly manifest) at the level of the family, rather than the individual, and thus supports the need to investigate disturbances such as boundary dissolution at the relationship level (Sroufe, 1989). Second, models of family systems include subsystems (i.e., parental, sibling), and the generational and relational boundaries among the subsystems define the organizational structure of families. Thus, boundaries specify the re-

relationships among members of the family and may be conceived as the operating rules by which a family functions, which either permit or prohibit certain interactions among the subsystems (Minuchin, 1974). For example, in families where generational boundaries are maintained, physical or sexual intimacy is permitted within the spousal subsystem, but not between parents and children. Third, clear generational boundaries are characterized by a hierarchy in which parents nurture their children and assume executive roles within the family. In families with dissolved generational boundaries, the hierarchical relation between the parent and child subsystems is lost: the child may either assume an equalized and peer-like or spousal relation to the parent, or take on a leadership or caregiving role with respect to the parent.

It is important to note that families are “open systems” (Fogel, 1993) and thus mutable in the context of changing circumstances. Specifically, generational boundaries are not static divisions among subsystems but may change in response to internal or external changes. For example, a child may be temporarily drafted into a caregiving role if a parent becomes ill. There are also likely to be more normative changes in hierarchical relationships across the child’s development; the increasing autonomy of adolescence and early adulthood is an example of a time during which the parent and child subsystems become more equalized. Thus, it is clear that consequences of boundary dissolution are virtually guaranteed to be context-dependent, and in particular to depend on developmental factors such as timing, duration, and interference with salient developmental tasks. This conceptualization of the development of boundary-dissolved relationships also argues against a stricter social-learning perspective through which boundary-dissolved behaviors are modeled by children. As discussed later via empirical examples, the occurrence and preservation of parent-child boundary dissolution is more often specific to the relationship and relational history involved and is therefore influenced by the multifactorial and multilayered family system.

While the family systems theory explains how boundary-dissolved parent-child relationships can arise within a family, developmental psychopathology is called upon to explain how these relationship patterns can affect current and subsequent functioning by examining how the relationship disturbance interacts with, and potentially compromises, the negotiation of salient developmental issues (for example, the capacity to coordinate peer group and friendship functioning in middle childhood). Adopting a developmental perspective on the study of boundary dissolution also emphasizes that the developmental phase may be rele-

vant to the form that the relationship disturbance takes, as well as the adaptational consequences (e.g., Jacobvitz & Sroufe, 1987; Sroufe, Jacobvitz, Mangelsdorf, DeAngelo, & Ward, 1985; Sroufe & Ward, 1980). Developmental psychopathology utilizes concepts of pathways and multi-and equifinality to describe a non-linear process of emerging disturbance. Conditions (such as boundary dissolution) may initiate a pathway that over time is probabilistically related to a pathological outcome. Thus, child issues which may derive from such parenting, such as difficulties with arousal modulation or compromised peer relationships, are not necessarily viewed as frankly pathological in themselves but as foundations for a variety of related disturbances that may evolve over time.

Perhaps the clearest example of the contribution of a developmental perspective involves relationship disturbances in which the parent depends upon the child for caregiving and support, which represents a reversal of the more normative caregiving roles within a family. From a developmental perspective, boundary dissolution is associated with at least two problems: first, providing emotional or instrumental caregiving represents an energy-draining challenge to a child and second, concurrent abdication of the parental role may deprive the child of the necessary scaffolding and support to cope with these challenges. In optimal development, children learn nurturance by being nurtured, and to call upon children to provide such caregiving for adults is beyond their developmental capacity, both cognitively and emotionally (Sroufe & Fleeson, 1988). This taxation of a child's abilities is exacerbated if it occurs at the expense of his or her own care. In these instances, the likelihood increases that the child's social development and eventual capacity for adult intimacy and the ability to nurture his or her own children will be compromised, thus carrying forward the legacy of early experience into later development, possibly even into subsequent generations.

Also from a developmental perspective, attachment theory stands as one of the most well articulated theories regarding the legacy of early experience and has also included descriptions of patterns of parent-child role reversal (see also Bellow, Boris, Larrieu, Lewis, & Elliot, this volume). For example, early observations by Bowlby (1973) included descriptions of mothers with unmet nurturance needs, such as anxious and ambivalent relationships with their own caregivers in childhood, who encourage their own children to provide them with emotional care. While purely descriptive at the time, later empirical work (e.g., Fullinwider-Bush & Jacobvitz, 1993) has supported this ex-

planation of how parent-child role reversals may be transmitted across generations.

The traditional A/B/C attachment classifications, which distinguish among infants with secure and insecure (either anxious-avoidant or anxious-resistant) attachment relationships, have not been differentially related to patterns of role reversal or boundary dissolutions among mothers and children. However, aspects of role reversal have been noted among children with disorganized/disoriented (D) attachment histories (Main & Cassidy, 1988). Current theories posit that disorganized attachment develops in response to frightened or frightening caregiving, either of which is incomprehensible to an infant (Main & Hesse, 1990). Frightened caregiving includes parents who are timid in interactions with their infants or may plead with their infants for direction or affection. In contrast, frightening caregiving may include unpredictable intrusions and threatening postures or vocal tones directed at the infant. In the case of either frightened or frightening caregiving, according to Main and Hesse (1990), the infant's response is fear. It is therefore speculated that the role reversals observed among children with disorganized attachment histories, which may include both controlling/punitive and caregiving behavior patterns, may be attempts at fear mastery and self-protection (e.g., Lyons Ruth & Jacobvitz, 1999).

As noted in the foregoing discussion, generational boundary dissolution has been noted primarily by clinicians, and boundary dissolution is often associated with problems in socioemotional adaptation. However, empirical studies of boundary dissolution are scarce, especially those with a longitudinal perspective, although it is clear that such studies would do much to inform clinical understanding of both the origins and outcomes of this form of relationship disturbance. This paucity of research is likely related to the inherent difficulties in defining relational boundaries, as well as boundary dissolution (see also Kerig, this volume). While relationships are not as tangibly assessed as individuals, the heightened recognition that relationships are highly predictive of later adaptation and competence points to the continued need for advancement in measuring these constructs.

At this point, a limited but growing empirical literature has addressed the issue of boundary dissolution from multiple perspectives. The Minnesota Longitudinal Study of Parents and Children, which includes prospective data on a sample of high-risk families from the birth of a first child and continues for over 28 years, provides a unique opportunity to study the development and adaptational outcomes of parent-child relationship disturbances. The remainder of this review will focus on the

studies of generational boundary dissolution, which have taken place in the context of this research project, and will also describe remaining questions and future directions to be pursued.

THE MINNESOTA LONGITUDINAL STUDY OF PARENTS AND CHILDREN

The Minnesota Longitudinal Study of Parents and Children (MLS) began in 1975 as a prospective study of children who were at risk for poor developmental adaptation due to economic disadvantage. A sample of more than 200 primiparous women, many of who were earning incomes below the poverty level and receiving public assistance, were recruited from the public health clinics where they were receiving prenatal care. Overall, the sample was identified as “at risk” due to high life stress, low stability of living situations, and low social support (Egeland & Brunnuquell, 1979). At the time of their children’s births, the mothers were generally young ($M = 20$, ranging from 12 to 34 years), mostly single (62%), and with low education (40% did not complete high school). Eighty-eight percent of the mothers were White, 13% were African American, and 7% were Latino or Native American.

The participating children were seen at least annually with their mothers for the first eight years of their lives. Subsequently, information on the participants has been periodically obtained, via individual interviews, the collection of school data, and administration of standardized instruments to the participants, as well as their parents and teachers. In terms of observational data, assessments have included mother-child interactions at 24 and 42 months, social interactions within a summer camp context during middle childhood, and parent-child interactions again at 13 years. In adulthood, we have observed the participants with their romantic partners and also with their own children in interactions that parallel those completed with their parents.

The depth and breadth of these assessments, and particularly of the observational data, have lent themselves to the continued study of the development and outcomes of relationship disturbances. Relatively early in the course of the MLS, mothers were identified who engaged in “seductive” behavior with their 24-month-olds during an observed structured toy-cleanup interaction task (Sroufe & Ward, 1980). In these instances, the term “seductive” was not used to imply the occurrence or likelihood of frank sexual contact between the mothers and their children, but rather described behavioral patterns of control achieved

through using intimate physical contact or sensual manipulation, such as rubbing the child's buttocks, stroking the stomach, breathy whispering, or promises of physical affection in exchange for behavioral compliance. Sroufe and Ward (1980) distinguished this pattern of seductive behavior, which may be considered appropriate between adult partners but not among parents and children, from affectionate parental behavior in response to a child's successful efforts in the task or signaled needs for comfort or reassurance. In fact, mothers who were characterized as seductive with their toddlers (16 out of 176 cases who were available to be videotaped) were not warmer or more affectionate with their children, but instead were more likely to use physical punishment or threats. This contrast of intimacy and hostility suggests an ambivalent mother-child relationship, similar to that discussed previously as a possible childhood origin of role reversal (e.g., Bowlby, 1973). This type of disturbance was found to be relationship-specific—of the 16 mothers observed by Sroufe and Ward to engage in seductive behavior, in 15 of these cases the behavior was directed toward their sons but not their daughters. This finding was particularly notable in the context of the mothers' relationship histories with their own parents: based on retrospective interviews with the mothers conducted prior to the 24-month assessment, Sroufe and Ward (1980) noted significantly more instances in which mothers who engaged in seductive behaviors with their own sons reported having been placed in positions of providing physical or emotional intimacy to their own fathers or stepfathers.

The mothers and children participating in the MLS were subsequently observed at 42 months in teaching tasks that required the mothers' instruction. As a follow-up to the initial identification of the seductive pattern, Sroufe et al. (1985) documented two patterns of child-directed maternal behavior that were conceptualized as developmental transformations of the seductive behavior at 24 months. The first, "nonresponsive physical intimacy," was behaviorally most closely related to the previously identified seductive pattern of maternal behavior. The second, "generational boundary dissolution," was a construct developed to capture a more qualitative aspect of the diffusion of boundaries between parents and their toddlers. Noted examples of generational boundary dissolution included an equalization of roles such that mothers and their children behaved as childlike peers, as well as role reversal, where the mothers deferred to their children rather than providing structure and direction in the tasks. Observations of these behavior patterns across toddlerhood revealed moderate stability of boundary dissolution over time; nonresponsive physical intimacy at 24

months was significantly correlated with boundary dissolution at 42 months ($r = .41, p < .05$) and with nonresponsive physical intimacy at 42 months ($r = .34, p < .05$).

Not only did the Sroufe et al. (1985) study demonstrate temporal stability of mother-child generational boundary dissolution, but it also placed the disturbances in a relationship-specific context by simultaneously examining maternal behavior with the siblings of 17 children whose mothers were identified as seductive at the 24 months assessment. In contrast to an alternative hypothesis that boundary dissolution is a maternal trait (and thus equally likely to be exhibited with all children), in this study the dissolution of generational boundaries was child-specific within the identified families. For example, mothers who showed high levels of non-responsive physical intimacy and generational boundary dissolution with their sons at 42 months did not show similar levels of boundary dissolution with their daughters. Instead, as was predicted in these cases, their interactions with their daughters included significantly more derision, such as derogation or belittling comments.

This differential treatment of the siblings is characterized by the authors of the study as complementary behaviors which, taken as a whole, seem to reflect the ambivalence of these mothers toward their children. While the authors note that these maternal behaviors are by no means typical, they do support the predictions generated from a family systems theoretical perspective regarding the predicted outcomes of maternal relationship histories that included spousification, incest, and unmet emotional needs, and they demonstrate "lawful relations across relationships [a mother] has with her children" (Sroufe et al., 1985, p. 323). For example, maternal history of sexual exploitation has emerged as a significant predictor of boundary dissolution at 42 months within the MLS sample (Hiester, 1993).

Having begun to identify patterns and age-related transformations of generational boundary dissolution within the MLS sample, attention turned toward the potential outcomes of these relationship disturbances on later adjustment. While anecdotal evidence from the observation of particular cases revealed suggestions of disturbed sexual development (see Sroufe et al., 1985), a more age-salient question during the school years focused on the development of hyperactivity and impulse-control problems. As hypothesized by Jacobvitz and Sroufe (1987), these difficulties with regulation may arise not only from endogenous or organic factors, but also from experiential factors, such as intrusive or overly arousing maternal behavior as observed with the breakdown of par-

ent-child boundaries. This maternal behavior is presumed to be taxing for a child with still-developing arousal-modulation capacities, and this early taxation may interfere with the development of later control. These behaviors often occur at precisely such times as when the child is already experiencing arousal and is on the edge of disorganization; because the mother and child tend to be tense at the same time (i.e., when confronted with difficult tasks), the mother's intrusive behavior serves to push the child beyond his or her capacity for emotional or behavioral regulation. In fact, in their study, Jacobvitz and Sroufe (1987) found that early patterns of boundary-dissolved caregiving, as characterized by maternal behaviors that were interfering (at 6 months) or overstimulating (at 42 months), were significantly related to teacher ratings of hyperactivity at age six. The findings demonstrated that at least one pathway to hyperactivity in childhood may be traced from maternal intrusive behaviors such as those which may characterize boundary-dissolved parent-child relationships. This pattern of findings has been extended to early adolescence within the MLS sample, where significant longitudinal relations have been found between boundary dissolution at 42 months and reports of attention deficit-hyperactivity disorder, other externalizing behavior problems, and emotional health up through sixth grade (Carlson, Jacobvitz, & Sroufe, 1995; Hiester, 1993).

Data from middle childhood and pre-adolescence supports the notion that the effects of generational boundary dissolution extend into the extrafamilial environment as well. As part of the MLS, a subsample ($n = 47$) of participants attended a series of summer day camps. During these camps, participants were repeatedly observed in peer interaction settings. Child interviews were also completed during this time. From the observations, a pattern of gender boundary violations were coded (Sroufe, Bennett, Englund, Urban, & Shulman, 1993). Typically, in public settings elementary school-age children do not associate as individuals with members of the opposite gender, unless accompanied by a partner, when made to do so by an adult, or for another compelling reason. Violating these rules is what is meant by "gender boundary violations."

We found that intergenerational boundary dissolution in early childhood was related to gender boundary violations, or excessive and non-normative associations with peers of the opposite gender (Sroufe et al., 1993). Whereas gender boundary maintenance in this age period was significantly related to other measures of positive peer competence, the participants who were observed to frequently violate gender boundaries were more often judged via peer interviews as unpopular. More-

over, those who violated gender boundaries at this age were *less* competent in relations with the opposite gender during adolescence (Sroufe, Egeland, & Carlson, 1999).

As the child participants in the MLS approached adolescence, an observed family interaction assessment was carried out at age 13. In this assessment, the child participated with either one or both parents or caregivers. The interactions involved a series of structured tasks (adapted from Gjerde, 1986) that involved various activities such as brainstorming, problem solving, and puzzle completion, as well as a Q-sort task that required the participants to sort trait cards into categories to describe their ideas of the ideal person. The interactions were scored according to 7-point rating scales designed to capture aspects of the parent-child relationship, including forms of boundary dissolution which were expected to be exhibited during early adolescence (Sroufe, 1991). These four scales included (1) child-like parent, in which the parent appears to abdicate her adult role and behaves more like a child (either by appearing immature and silly or overly dependent); in this situation the parent and child may act like peers, or the child may demonstrate role reversal and take over the parental behaviors; (2) adult-like child, which describes the extent to which the child engages in parental or overly mature behaviors, such as taking on an authoritative tone, providing support to the parent, or controlling the interactions; (3) physical/seductive boundary dissolution, which is similar to the construct identified at earlier ages; however, in adolescence the child may be a more active participant in these interactions; and (4) an overall boundary dissolution scale. Also, a role reversal scale was created by summing scores on the child-like parent and adult-like child scales.

Descriptively, the generational boundary dissolution identified at age 13 followed similar patterns to those described in the MLS during early childhood, although more cases were identified (e.g., 35 dyads classified as "high" on the physical/seductive scale). Consistent with previous reports, significant gender differences were found. However, whereas at 42 months mother-son dyads were more likely to be characterized by boundary dissolution, the picture was more mixed at age 13: in analyses including only the mothers, mother-son dyads were significantly higher on physical/seductive boundary dissolution, but mother-daughter dyads received higher scores on child-like parent (Hiester, 1993). In addition, correlations with scales of affective engagement showed the boundary-dissolved relationships, specifically those described as peer-like, to be characterized by greater emotional negativity. These findings recall those obtained in early childhood,

which showed that mothers who tend to disregard generational boundaries in interacting with their children are not simply more “warm” than other mothers, but in fact show more conflict or hostility. It is important to note, however, that because the 13-year scales are dyadic in nature it is not possible to determine from this data whether the source of negative affectivity in these interactions is the parent, the child, or both.

Given the initial demonstrations of boundary dissolution continuity from 24 to 42 months, a primary research question involved examining further temporal continuity from early childhood to adolescence. Correlational analyses (Hiester, 1993) revealed moderate overall continuity from childhood to adolescence, particularly between total boundary dissolution at 42 months and physical/sexuctive and total boundary dissolution at age 13 ($r = .45, p < .01$). However, the associations were found to vary by gender. For boys, total boundary dissolution at 42 months showed a substantial association with physical/sexuctive boundary dissolution at age 13 ($r = .50, p < .01$); no other correlations with 13-year boundary dissolution were significant. In contrast, within the mother-daughter dyads, total boundary dissolution at 42 months was specifically correlated with the child-like parent ($r = .29, p < .05$) and role reversal scales ($r = .24, p < .05$). Therefore, early boundary dissolution was most likely to show gender-specific manifestations in adolescence through physically intimate or “spousified” interactions for mothers and sons, and through peer-like interactions for mothers and daughters.

As also noted previously, a major concern within the study of boundary dissolution involves the psychological and adaptational outcomes of such relationship disturbances. With a major developmental task of adolescence being the establishment of autonomy from the parents, boundary-dissolved relationships during this period may present a particular obstacle to positive socioemotional adaptation. Analyses of boundary dissolution observed at age 13 with respect to concurrent adaptation (as assessed via teacher report in sixth grade; Hiester, 1993) extended previous findings (i.e., Jacobvitz & Sroufe, 1987) by demonstrating a link between physical/sexuctive boundary dissolution and problems of inattention and impulsivity, although no other significant relations from age 13 boundary dissolution to concurrent adaptation were noted. Furthermore, Hiester (1993) did not find that the participants with continuous observed boundary dissolution from early childhood to adolescence had significantly poorer adaptation than those with a more unstable presence of boundary dissolution.

Furthering the developmental question of adaptational outcomes of generational boundary dissolution, the observational scales from age 13 were related to subsequent measures of behavior problems (self, parent, and teacher report) at age 16. While there was notable continuity of child behavior problems from age 13 to age 16, a composite measure of boundary dissolution in adolescence was found to predict behavior problems in later adolescence over and above behavior problems at age 13, and this finding held for self, mother, and teacher reports (Nelson, 1994). Furthermore, these results were specific to boundary dissolution; the same analyses yielded nonsignificant results with other measures of family disturbance (i.e., overall family functioning and negative interactions). In separate analyses within the same study, age 13 boundary dissolution remained a significant predictor of behavior problems after controlling for socioeconomic status and contextual life stress (measured at age 13).

ONGOING RESEARCH WITHIN THE MINNESOTA LONGITUDINAL STUDY

Currently, as the participants in the MLS reach their late twenties, we are pursuing several research questions related to the long-term outcomes of parent-child boundary dissolution. The age-salient developmental tasks of adulthood most likely to be affected by early relationship disturbances include parenting and the formation and maintenance of romantic relationships. The MLS dataset includes observations and extensive interviews with the participants who are involved in long-term romantic relationships, as well as their partners. Possible outcomes of generational boundary dissolution to be examined include relational symmetry between romantic partners, including child-like adult and caregiving aspects of relationship observations. The Minnesota Longitudinal Study of Parents and Children is also in a unique position to address an important and captivating question not only in the area of boundary dissolution, but for parenting in general, regarding the intergenerational continuity of parental behaviors and interaction patterns as the MLS participants begin to raise their own children. Preliminary results are available on a subsample of MLS participants who have completed parenting assessments with their children which are identical to the assessments in which they participated at 24 and 42 months, as described earlier. Of the current sample on which such assessments have been conducted ($n = 34$), the data suggest moderate intergenerational continuity of boundary dissolution at the 24-month assessments from the first generation to the second ($r = .37, p <$

.05). In addition, boundary dissolution in the first generation is significantly related to non-responsive physical intimacy in the second generation ($r = .48, p < .01$) and relatedly, non-responsive physical intimacy in the first generation is related to boundary dissolution in the second generation ($r = .35, p < .05$).

Recently, we have had the opportunity to revisit existing data and to re-consider the adolescent measures of boundary dissolution from an alternative perspective. As noted in the discussion of previous studies (e.g., Hiester, 1993), the degree to which the boundary-dissolved relationship has been internalized or adopted by the child is not clear from the existing dyadic analyses conducted during adolescence. Therefore, we have begun to re-code the parent-child observed interactions from the individual perspective of the adolescent participant in an effort to identify psychopathological functioning that may be the outcome of early disturbances, or the antecedent of later maladaptation. As with other measures of boundary dissolution developed within this study, the scales include developmentally salient transformations that may be seen among adolescents, including caregiving behaviors, parent-like or directive behaviors, peer-like role equalization, spouse-like role equalization, and sexualized behaviors. These data will allow us to address a key developmental question: is a phenomenon that is first manifest in parental behavior ultimately apparent in the behavior of the child? Few if any studies have examined the extent to which early childhood boundary dissolution is related to the adolescent's own role-reversal behavior in later development, and even less research has explored qualitative differences in adolescent role reversal, which may reflect a normative re-negotiation of parent-child roles or, alternatively, pre-age later maladaptation. Preliminary data linking earlier measures of boundary dissolution to the adolescent measures of role reversal (including role equalization and sexualized behavior) suggest that parent-initiated boundary dissolution in early childhood instantiates a pattern of relationship disturbance in the child. Role reversal is apparent by early adolescence and the available data suggest links to psychopathology in later adolescence, particularly as a result of sexualized behavior observed at age 13. As before, these early results appear to differ according to gender; the strongest temporal linkages have been detected from early childhood boundary dissolution to adolescent sexualized behavior particularly for boys, and boys' sexualized behavior shows the strongest relation to psychosocial problems at age 16. However, it must be reiterated that these data are preliminary and further analyses are needed to replicate these findings within the entire MLS dataset.

Finally, in upcoming assessments, retrospective self-reports (i.e., Jurkovic & Thirkield, 1999) of role reversal experiences will be collected; such information will hopefully yield the opportunity to conduct more fine-grained discriminations between pathogenic or maladaptive forms of boundary dissolution and what may be more normative instances of role reversal in childhood and adolescence. For example, some researchers have speculated that, in the context of intrafamilial adversity, role reversals or premature assumptions of family responsibility may be considered normative or adaptive at the time, and children may continue to show competent adaptation in salient development tasks despite the adversity (Flanagan, 1990; Luthar, 1999). However, such experiences, and the attendant psychological costs and benefits, are likely to vary widely among individuals, and the potential outcomes are certainly influenced by a number of factors (Barnett & Parker, 1998). These factors might include the child's history of early adaptation (i.e., is adolescent role reversal preceded by a history of relationship disturbance?), the time limitation and intensity of the experience (i.e., is the parent temporarily incapacitated due to an acute illness, for example, or does this relationship pattern represent an ongoing abdication of the parental role?), and situational context (i.e., if the role reversal is in response to a recent adversity, is the situation confounded with the parent's competence or outside the parent's control?).

Clearly, many questions remain unanswered regarding the development and adaptational outcomes of generational boundary dissolution. The Minnesota Longitudinal Study of Parents and Children has certainly generated as many questions on this topic as it has attempted to answer; however, particular findings have emerged from multiple studies and bear repeating here. First, the study of generational boundary dissolution has provided further demonstration that *relationships* are viable targets of analysis with significant implications for later development. Further, boundary dissolution has been shown to be a construct that can be identified across different ages and which has specific and theoretically supported implications for socioemotional adaptation. Finally, questions remain as to the long-term developmental outcomes of boundary dissolution, as well as contextual factors that may either mitigate or exacerbate subsequent maladaptation. As our research sample reaches early and middle adulthood, a period of romantic relationships and parenthood for many participants, we will continue to pursue these questions. While limited by the nonexperimental nature of such research, our data benefit from the use of multiple methodologies, including observations and self-reports, as well as the length of time covered

by this longitudinal project. However, the findings from this project should be compared to those obtained from more demographically diverse populations, as there are likely to be cultural and socioeconomic differences in the ways in which boundary dissolution is conceptualized. As with any process of adaptational risk, the effects of parent-child boundary dissolution will depend on any number of contextual and intervening factors, and these variables continue to be identified through the work of diverse researchers.

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