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Adult Memories of Mother-Daughter Psychological
Boundary Violation

by

Deborah R. V. Herrewynen ©

A THESIS
SUBMITTEED TO THE FACULTY OF GRADUATE STUDIES AND
AND RESEARCH IN PARTIAL FULFILLMENT OF
THE REQUIREMENTS FOR THE DEGREE OF
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IN

COUNSELLING PSYCHOLOGY

DEPARTMENT OF EDUCATIONAL PSYCHOLOGY

EDMONTON, ALBERTA
FALL 1994

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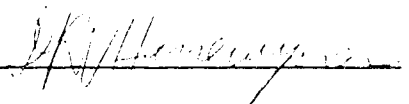|	
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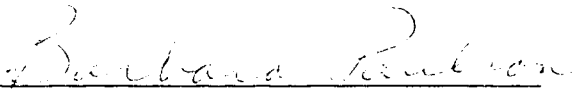Sherwood Park, Alberta
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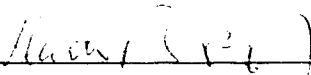
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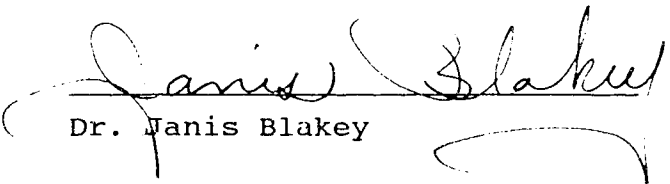
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fulfillment of the requirements for the degree of Master of
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Dr. Dustin T. Shannon-Brady
Supervisor

Dr. Barbara Paulson

Dr. Janis Blakey

Date: Oct 7, 1994

To the source of my strength and
supplier of my hope, and the
one who sent kind people
into my life,
the Lord.

Abstract

The purpose of this study was to describe the phenomenon of mother-daughter psychological boundary violation as remembered in adulthood. The diverse ways that the phenomenon affected each participant's life was also investigated.

The phenomenological method of thematic analysis was chosen as a means of exploring adult memories of mother-daughter psychological boundary violation.

Four female participants were interviewed separately. The four interviews were later transcribed and thematically analyzed. Analysis of the data revealed the following list of twelve dominant themes: 1. child becomes caregiver, 2. child's well-being is violated and neglected, 3. emotional struggles in childhood and adulthood, 4. child as emotional nourishment, 5. coping with fear, 6. interpersonal difficulties, 7. distorted and lowered view of self, 8. child seeks nurturance not received from mother, 9. sepa~ ion from mother and individuation, 10. accepting m ther's limitations and life influence, 11. realization of injustice and 12. kinesthetic response to childhood memories. The women in this study described that their poorly functioning mother-daughter relationship adversely influenced the development of their personal boundaries, left them with deep emotional wounds, and adversely affected their other personal relationships.

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I would like to thank my supervisor, Dr. Dustin Shannon-Brady, for his assistance and patience with me on this project. Thanks also to the other members of my committee, Dr. Barb Paulson and Dr. Jan Blakey, for their considered and constructive critiques which made this thesis a better document.

A s ecial thank-you to my husband, Don, who has supported me throughout my academic endeavors. I also wish to thank my mother, Sharon, for believing in my ability and encouraging me through the difficult times. Finally, I wish to thank my sister, Vivian, for her vitality and zest for life that has always been a source of inspiration for me.

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Chapter I

INTRODUCTION

Recently, the violation of psychological boundaries has become an increasingly prevalent issue in family and individual counselling. Increased concern about parent-child boundary violation is reflected by the large number of professional therapy, popular psychology books and research articles available on this topic (Bartle & Anderson, 1992; Bowen, 1978; Bradshaw, 1988, 1990; Burkett, 1984; Cermak, 1991, 1986; Firestone & Catlett, 1981; Hogg, 1992; Hotaling, Finkelhor, Kirkpatrick & Strauss, 1988; Juergens, 1987; Katherine, 1991; Kinnier, Brigman & Noble, 1990; Kondora, 1993; Leahy, 1991; Libbey & Bybee, 1979; Lyon & Greenburg, 1991; Miller, 1981; Minuchin, Rosman & Baker, 1978). Nichols and Schwartz (1991) define a boundary as a structural concept used "to describe emotional barriers that protect and enhance the integrity of individuals, subsystems (of families), and families" (p.589). A parent-child boundary violation occurs when parents use their children to meet their own needs without regard for the well-being of the children.

Some of the most well researched examples of boundary violation are incest, physical abuse and neglect. Numerous studies have correlated physical forms of parent-child boundary violation, incest for example, with abnormal child behavior and other types of child maladjustment (Ascherman & Safier, 1990; Libbey & Bybee,

1979; Loughead, 1991; Lovett, 1990; Lyon & Greenberg, 1991). More subtle forms of parent-child boundary violation, such as psychological boundary violation, are not as well researched. The studies that have been done have correlated dysfunctional behaviors, such as eating disorders, in children with an operationally defined measure of parent-child psychological boundary violation (Kinnier, Brigman & Noble, 1990; Minuchin, Rosman & Baker, 1978; Simons, Conger & Whitbeck, 1988; Sroufe, 1985).

An example of parent-child psychological boundary violation is when the parent forces the child to reverse roles. The child nurtures and provides guidance for the parent, while the parent relies on the child for emotional support. Another example is the child who becomes a substitute for spousal intimacy. The child's emotional role is that of the parent's spouse. These children, then, do not have enough emotional resources remaining to meet their own needs.

As yet there has not been a study which describes adults' memories of living through a childhood in which their psychological boundaries were violated by a parent. However, the issue of parent-child boundary violations is a very diverse research area. Specifically, this study seeks to explore the memories of women who have lived through a childhood in which their psychological

boundaries were violated by their mothers.

In chapter two, a discussion of the development of healthy boundaries will be provided. An outline of the natural process of separation and individuation from one's parent will be briefly discussed. Second, the different types of parent-child boundary violations and how each violation has been known to affect children will be reviewed. The existing research on a range of different boundary violations from incest and physical abuse to neglect and psychological boundary violation will be discussed. Finally, portraits of mother-daughter psychological boundary violation will be outlined to better demonstrate the phenomenon under investigation.

Chapter three will outline the philosophy and methodology of the phenomenological research used to describe the nature of mother-daughter psychological boundary violation from the child's perspective as an adult. Since a phenomenological approach involves the researcher's subjectivity, I will outline my own presuppositions about the phenomenon.

Chapter four outlines the method of data collection and analysis. This chapter provides a table of common themes found across participants. A narrative explanation of the twelve important clusters of themes which emerged from the four women's descriptions follows the table.

In chapter five, I will discuss the analysis of the data and its implications for those in the therapeutic community. This chapter will synthesize the twelve important clusters of themes into general findings. Suggestions for healthy boundary development based on the data, implications for education and psychotherapy and suggestions for future research conclude this chapter.

Purpose of the Study

This study will explore the mother-daughter subsystem of the greater family system. It seeks to discover what, if any, are the common elements that young females experience and remember as women about having their psychological boundaries violated by their mother and how such an experience has affected their lives.

Chapter II

LITERATURE REVIEW

Preface to Literature Review

The task of preparing a literature review for a phenomenological study of mother-daughter psychological boundary violation was problematic as directly related research was meagre. Pertinent research in related areas was selected to give a representative overview.

Boundary Development

In order to understand what a boundary violation is, it is important to understand what healthy boundaries are and when they begin to form. Katherine (1991) asserts that "boundaries begin to form in infancy" (p. 5). She points out that "in a healthy family a child is helped to individuate, to develop a self-concept separate from other family members (p. 5). "Healthy boundaries are flexible enough that (the person) can choose what to let in and what to keep out" (Katherine, 1991, p. 8). Bradshaw (1990) suggests that "without strong boundaries (a child) cannot know where (he or she) ends and where others begin. (A child) has trouble saying no and knowing what (he or she) wants" (p. 18).

Healthy boundaries develop within healthy families. According to Katherine (1991), a healthy family allows its members to grow and differentiate from each other. She asserts that a healthy family allows its members to

set emotional and psychological boundaries around
themselves and to say "no" to other members without
threat of being abandoned or attacked. Minuchin, Rosman
and Baker (1978) suggest a healthy family does not expect
members from one generation to fulfil duties that belong
to another generation. They state that a healthy family
allows children to play like children, and requires the
parents to exert "executive authority" over family
concerns. They also point out that it allows the
children to begin making their own decisions concerning
their own lives progressively as they become more mature.
These are some of the basic conditions necessary in
families for healthy boundary development to occur.

Developmental Theories of Healthy Boundary Formation

Separation-Individuation

The separation-individuation concept originated with
Mahler (1968, 1975) and resulted from her observation of
parents and infants (Juergens, 1987). Separation
involves the child moving away from fusion with mother;
individuation refers to the development of the child's
own unique characteristics. The four sub-phases of
separation-individuation are: differentiation,
practising, rapprochement and consolidation of
individuality (Juergens, 1987).

According to Mahler (1975) the process of
separation-individuation begins in the fifth month after

birth and results in the beginnings of self-identity formation in the third year after birth. During differentiation the infant begins exploring relationships with adults other than mother. The infant frequently checks back with mother to ensure that she is still available and to compare other relationships to the maternal one. During the practising sub-phase, the infant becomes increasingly aware of inanimate objects and is increasingly interested in exploring his or her surroundings. Rapprochement encompasses inc eased perceptual and cognitive abilities which enable the child to gradually realize that the parents are separate people with their own interests. The child is torn between wanting to resist separation from mother and wanting to explore the external world and develop independence. The two main tasks of the final sub-phase of separation-individuation are to achieve individuality and attain some degree of emotional object constancy (Mahler, 1975). Achievement of emotional object constancy requires that the child internalize an image of mother to facilitate longer and less painful separations from her. Increased time is spent with playmates and adults other than mother. The child is able to differentiate self from mental images of the one he or she loves this distinction between self and other paves the way to self-identity formation (Juergens, 1987).

Throughout the entire separation-individuation process the infant needs to perceive the mother as emotionally available for relationship and reassurance. The strength for the infant to progress through developmental sub-phases is provided by the assurance that the infant's mother is available and dependable (Mahler, 1975).

Second Individuation Process

Blos (1967, 1979) described adolescence as the "second individuation process". According to Blos, the process of individuation is reawakened in adolescence. The developmental tasks in adolescence are shedding of family dependencies and becoming a member of adult society (Blos, 1979). The adolescent demands increasingly more freedom from parents and makes great investments in external peers. Parental consistency is important to the adolescent and the conflicts between parents and adolescents is viewed by Blos to be a normal part of individuation. Healthy parental consistency allows the adolescent to oppose his or her parents without the threat of rejection. The parents need to prove to the adolescent that the are strong enough to withstand his or her opposition yet be accepting (Blos, 1967).

Erikson's Developmental Stages

Erikson (1968) defined eight developmental stages

from infancy to late adulthood. He suggested that failure to resolve developmental "crises" at earlier stages affects later development. Each stage involves the resolution of a specific psychological "crisis" or developmental turning point.

The first stage, *Trust versus Mistrust*, is a crucial basis for the child's future sense of identity. The amount of trust the infant has depends on his or her relationship with the mother.

The child begins exhibiting rapid physical and verbal maturation during *Autonomy versus Shame and Doubt*. The infant begins experiencing his or her own autonomous will, but resolution of this stage can be inhibited by parental overcontrol. If the parents overcontrol, the child develops shame and doubt of his or her abilities. Parents need to enforce clear, definite rules and show that they have autonomous selves.

Erikson's *Initiative versus Guilt* stage occurs towards the end of the child's third year. The child's physical coordination, verbal reasoning abilities and imagination expand his or her awareness of the environment.

Children begin to disengage themselves from their parents during *Industry versus Inferiority*. The child is now school-aged and is eager to learn and participate in peer group activities. The child who has not resolved

previous crises may still want attachment to mother more than knowledge and may compare himself or herself with parents and see himself or herself as inferior. Parents need to encourage their child's new skills, independence and relationships with other competent adults.

During *Identity and Role Diffusion* the adolescent is preoccupied with decisions about future activities and is concerned about making unwise commitments to others. The adolescent often mistrusts and tests others to see if they are worthy of his or her trust. The normal adolescent, according to Erikson (1968), turns away from parents toward peers in order to develop a separate sense of identity. The parents' role is to accept the adolescent and encourage him or her to experiment while maintaining a strong set of values for the adolescent to test (Erikson, 1968).

The individual's development continues beyond the crisis of identity throughout adulthood, but for the sake of brevity only the first five stages, which are most relevant to this investigation, are discussed. However, Erikson writes that these first five stages are re-experienced in later life whether or not development is normal or abnormal.

Summary

According to the above developmental theorists in order for children to develop healthy psychological

boundaries, they need parents who are secure in their own individuality, and who can offer their children emotional nurturance and acceptance throughout the developmental lifecycle. Of particular importance for children's development of their own psychological boundaries is the parents' willingness to allow their children to distance themselves progressively throughout childhood culminating in adolescence. As Erikson (1959) pointed out in order for the next generation to establish itself, the parent generation must be willing to separate from it.

Theoretical Concepts Related to Parent-Child
Psychological Boundary Violation

Enmeshment

Minuchin, Rosman and Baker (1978) emphasize how important it is to understand dysfunctional family systems in order to facilitate healing in psychosomatically ill children. Enmeshment is a dysfunctional family structure that closely resembles psychological parent-child boundary violation. In an enmeshed family, the parents do not respect the generational boundary between themselves and their children. They consistently cross this generational boundary. The child joins in and crosses the generation boundary after the parents have demonstrated that this is how the family functions. The child counterbalances the parent's negative feelings and bears the emotional

burdens of his parents.

Minuchin et al. (1978) observed that many enmeshed families place high value on conflict avoidance. If the parents are uncomfortable with conflict, they will not allow their children to have disputes with one another and consequently retard their children's social development. These children do not learn conflict resolution skills, since their parents did not allow their conflicts to exist. They point out that one common element in all enmeshed families is the parents' unwillingness to allow the children to be just children. Instead, the children are recruited into the spousal system and take on adult emotional burdens that rightfully belong to their parents.

Egotistical Parenting

Miller (1981) notes that parents use their children to fulfil their own egotistical wishes and desires. The type of parenting she describes is very close to the type of parenting that Cermak (1991) suggests produces codependent children and to Minuchin et al. (1978) concept of enmeshment. Miller (1981) describes egotistical parenting as a situation where the child is heavily involved in the parental subsystem and the parents are emotionally dependent on their child.

Miller (1981) describes that there are people who were physically very well cared as children but who now

suffer from depression. Often these people are high achievers and as children helped their parents care for younger siblings. Despite all these positive attributes, these people have a fragile sense of self. They find fault with themselves easily. She suggests that often these people will have no concept of their true needs; they lack emotional understanding and do not consciously experience feelings of their own.

She points out that parents who did not experience unconditional acceptance themselves as children will not know how to give this vital emotional support to their own children. These parents will be looking for the emotional support that they never received as children and will be looking for it in their own children. The children of these parents have an amazing ability to perceive their parent's need for emotional support and respond intuitively to this need. She suggests that a child will take on the role that the parent has unconsciously assigned to him or her. Not only do these children become comforters, advisors, supporters and parents of their own parents, but they also take over responsibility for their siblings. In fact, Miller (1981) suggests that these children develop a keen sensitivity to other people's unconscious signals and often choose a mental health profession.

Parents depend on their child for a substitute of

their own missing emotional structures, and their child
is dependent on them for his or her self role. As
adults, these children will not have a stable sense of
their own true selves. Parents may certainly show
affection and love for their child, although not the
unconditional acceptance their child needs and always on
the condition that he or she presents the self that the
parents need.

Miller (1981) suggests that these children
experience intense loneliness and emptiness in their
lives as adults. They are often depressed, have no sense
that their lives have any meaning, and have difficulty in
their intimate adult relationships. Miller (1981)
observes "to have one's helplessness preyed upon by a
person one loves, leads to the interlinking of feelings
of love and hate. This later becomes a central dynamic
in one's adult object relationships" (p. 160). Miller's
(1981) description of parenting resembles what Minuchin
et al. (1978) referred to as the parentified child and
what Bradshaw (1988) termed a spousified child. The
parents meet their own emotional needs through their
children. The children are never allowed to develop
their own sense of self.

Emotional Hunger as a Motive for Parenting

Firestone & Catlett (1981) describe a parenting
style from the parents' perspective which is similar to

parenting styles discussed by both Minuchin et al. (1978) and Miller (1981). They describe how some parents emotionally feed off their children. They suggest that to the extent that parents are cut off from their own emotions, they will deprive their children of love and sensitivity. Contrary to their good intentions, their personal defense systems will restrict their ability to provide their children with emotional support necessary for development in childhood.

The definition that Firestone and Catlett (1981) give for parental love is behaviour that enhances the well-being and development of a child. Any behaviour that damages a child in any way or retards the child's emotional development is not considered loving.

They suggest that when a child is born his or her parents usually have a strong sense of affection toward the infant, but as he or she develops and is able to respond to them, they begin to withhold their affection until the child meets their emotional needs. They cannot love themselves and cannot give love to their child.

What Firestone and Catlett (1981) suggest that most parents mistake for love of their children is their own driving hunger and need for a child or their need to receive love. Their unfulfilled hunger for love from their own parents causes them to focus this hunger on their child. Strong possessive attachment to one's child

is not love; it is emotional hunger. Firestone and Catlett (1981) suggest that when parents are needy, the child's need for love and security become a threat to the parents' defenses. Their child's needs are discouraged, and he or she is made to feel guilty for wanting love and security. This child eventually adopts an identity which does not ask for the parents' love and security. Neither the parent nor the child want to know that the parent is inadequate. The child's role comes from a kind of unconscious collusion between the parents and the child. Firestone and Catlett's (1981) position suggests that a child whose love and security needs go unmet will develop into a poorly adjusted adult and probably parent his or her children in the same way.

Toxic Parenting

Bradshaw (1990) discusses how toxic parenting, which is similar in many respects to enmeshment, egotistical parenting and emotional hunger as a motive for parenting, influences a child when he or she is an adult. He suggests that the outcome of toxic parenting is a wounded inner child inside the adult which contaminates the adult's life. Bradshaw (1990) explains that each stage of emotional development is a step toward adulthood. If a child's needs are not met at the proper time in the correct sequence, that child will not have the resources necessary to master the next stage of development. The

child's development will be arrested. He suggests that when the child grows up he or she still has an angry, hurt child living inside which contaminates his or her adult life. The results of such a contamination are numerous including addictions, marital problems, sexual dysfunctions, emptiness, depression, distrust and co-dependence.

Bradshaw (1990) suggests that if the parents had to repress their natural sense of wonder as children, they will inhibit their child in the same way. He explains further that the child will then close up and fear exploration. When a child is shamed, his or her openness and trust are deadened. The child loses his or her sense of hope. If a child is shamed for having certain feelings or expressing certain needs, then those feelings and needs will become shameful to him or her. The child can no longer express his or her true self without shame. A child parents himself or herself the way he or she was parented.

Bradshaw's (1990) theory is consistent with Miller's concept of egotistical parenting in that both theorists talk about the child meeting the parents' emotional needs. He states,

if (parents) have a wounded inner child, their neediness will prevent them from meeting their own child's needs. Instead, they may be angry at their

child's neediness or will try to get their own needs

met by making their child an extension of

themselves. (p.34)

In his 1988 book, <u>Bradshaw On: The Family</u>, he explains

the generational aspect of parental mistreatment. He

explains,

All parental mistreatment and abuse stems from the

parents' own needs for completion... parents, in

abusing their children, are struggling to regain the

power they once lost to their parents. All

dysfunctional parents have been cheated out of their

own feelings through their abandonment. (p.67)

Bradshaw (1988, 1990) suggests that whether a child

is loved, cared for and encouraged will affect his or her

adult life, whether or not, he or she is consciously

aware of it. If the adult does not resolve to meet his

or her own wounded inner child's needs, the wounded inner

child will get them met through toxic parenting of his or

her own children.

Bradshaw (1988) also refers to a similar phenomenon

that Minuchin et al. (1978) called the parentified child

and what Miller (1981) described as egotistical

parenting. Some parents, who need the emotional support

of a spouse and who are not receiving it, turn to their

children to meet this need, the child is left without

parental support and guidance (Bradshaw, 1988).

Interconnectedness of the Four Concepts

Minuchin et al. (1978), Miller (1981), Firestone and Catlett (1981), and Bradshaw (1988, 1990) appear to be describing similar parenting styles where the child is used emotionally and psychologically to meet his or her parents' needs. Minuchin et al. (1978) describe enmeshed family systems where the parents do not respect the generational boundary between themselves and their children. Miller (1981), Firestone and Catlett (1981) and Bradshaw (1988, 1990) all describe how parents satisfy their own neediness by assigning a role to their child that meets their needs. These theorists all describe the broad concept of psychological parent-child boundary violation.

Incest

Research on incestuous family dynamics and the effect that incest has on the child in his or her adult life can be used to help understand less obvious types of boundary violation. Incest research helps illuminate the general phenomenon of parent-child boundary violation indirectly casting light on the less researched forms of psychological parent-child boundary violation.

Characteristics of Incestuous Families

Incestuous families have been described as disorganized and dysfunctional, lacking role definition and blurred generational boundaries (Ascherman & Safier,

1990). There is often confusion in the generational hierarchy of the family. Unclear or rigid boundaries are believed to help keep the family isolated and the incest a secret (Carson, Gertz, Donaldson & Wonderlich, 1990; Leahy, 1991). There tends to be a strong boundary around the family system to keep societal influence at a minimum.

Nonparticipating family members collude in facilitating the development and continuance of the incestuous relationship. The triangular nature of the incestuous situation depicts family constellations where the mother may be depressed, cold, ineffectual or unempathetic to the needs of the victimized child. The roles of mother and daughter are reversed, and the needs of the father and daughter enmesh in that both seek a maternal relationship (Panken, 1991). Madonna, Van Scoyk, and Jones (1991) observed overt destructive coalitions between the parents, which allowed and tolerated the sexual abuse of the child and epitomize the extreme deficits of the parental dyad.

Ray, Jackson, and Townsley (1991) found that family characteristics associated with incest were also associated with extrafamilial sexual abuse. They suggest that these family characteristics increase the vulnerability of the child to sexual abuse by people either inside or outside the family. The child is left

with poorly defined boundaries, and he or she becomes a vulnerable target. Their findings indicate that family dysfunction is not merely the presence or absence of a perpetrator in the family environment, since both incestuous families and families with extrafamilial sexual abuse were significantly different from families with nonabused children. They suggest that families that lack cohesion and organization fail to promote personal growth and development of boundaries in their children. These children are unable to resist the authority of an abusive adult, or they may submit to the abuse in order to meet their need for affection.

Madonna et al. (1991) found that incestuous families denied individual family members' actual feelings and were emotionally unavailable to resolve conflict. They suggest that the victimized child is forced to adopt the distorted family belief system at the expense of validating his or her own experiences. The acceptance of this distorted belief system leads to maladaptive defenses, including: dissociative reactions, denial, low self-esteem, anxiety and depression. If the child speaks of his or her own perceptions, they are ridiculed, rejected or ignored.

Mother-Child Incest

According Courtois (1988) a mother may be an accomplice, a co-offender or an independent offender to

mother-child incest. She notes that the same dynamics
that allow for father-child incest are evident in mother-
child incest. When the mother is an accomplice or a co-
offender, her dependency on her spouse is a major
contributing factor. When she is an independent
offender, usually a single parent, her need for
nurturance and control appear dominant. Courtois (1988)
outlines some of the factors contributing to the
evolution of mother-child incest including "sexual
victimization of the mother, when she was a young girl,
the loss of a spouse and the assuming of adult
responsibilities on the part of the child, and a history
of indiscriminate sexual activity on the part of the
mother" (p.66). Courtois (1988) also points out that the
most likely victim of mother-child incest is the oldest
child. If the mother is an independent offender her
victim, most often, is her daughter, whom she sees as an
extension of herself. Courtois (1988) states that the
contact may begin as an extension of the mother's normal
nurturing and caretaking functions, which the daughter
may enjoy because of the caring, tenderness and
dependency demonstrated. In time, the daughter begins to
feel smothered as the contact becomes more intrusive and
insistent. Courtois (1988) suggests that the daughter
stays in the relationship, because she is aware of her
mother's neediness and dependency on her. Throughout the
progression of the sexual contact, the daughter may not
define the contact as incestuous or abusive.

Sibling Incest

When children's boundaries are ill-defined they may become vulnerable to other types of boundary violation. Sibling incest is one such violation. Children without clearly defined boundaries may turn to each other for nurturance and the sibling relationship may become sexualized (Smith & Israel, 1987). Smith and Israel (1987) observed that sibling incest families are very different than families of strictly parental incest in that the subsystem boundaries of the former are loose while those of the latter are more rigid and restrictive. They found that parental role-modelling is either ill-defined or non-existent in sibling incest families. The lack of adult supervision in these families allows ordinary playfulness to result in the sexualization of the sibling relationship (Smith & Israel, 1987). Ascherman and Safier (1990) suggest that "when either or both parents are not available physically or emotionally ... siblings, lacking an object for rivalry, may turn to each other to meet dependency and erotic demands" (p.320). Smith and Israel (1987) suggest that a fragmented family produces children with poorly defined boundaries who may at risk of becoming involved in sibling incest.

Effects of Incest On the Adult

The most widely recognized effect of incest is

depression (Kondora, 1993). Other effects frequently
identified are sexual dysfunction, anxiety and low self-
esteem, and revictimization. Finally, less frequently
identified effects include dissociative reactions,
addictive disorders, eating disorders, somatization and
selective amnesia of childhood events (Kondora, 1993).
Leahy (1991) pointed out that adult victims are more
likely than non-victims to have more disjointed families-
of-procreation, marked by more separations and divorces.
Leahy (1991) also points out that adult incest victims
report their sexual relationships to be less satisfactory
than non-victims.

Kondora (1993) did a phenomenological, hermeneutical
analysis of the nature of being a female adult survivor
of incest. There were two common themes that emerged
from each survivor's description of her experience. The
first common theme was "an opening to experience what has
been" (p. 13). The second common theme was learning to
care for self, "reconstituting a sense of (self),
regaining a reciprocity in caring" (p.14). These two
common themes were areas that these women were currently
resolving.

Summary

From the incest literature, it is clear that incest
damages a child's psychological boundaries. Whether the
incest is father-child, mother-child or sibling, the

familial dynamics that allow for incest are similar. The
parents do not set developmentally appropriate boundaries
in the family. In parent-child incest, the offending
parent is overinvolved with the child and the other
parent is disengaged from the child and not connected
appropriately with the offending parent. In sibling
incest, parental authority and role modelling are
virtually non-existent. Families which are incestuous
have poorly organized generational boundaries and their
children do not develop healthy personal boundaries.

Psychological Boundary Violations in Other Dysfunctional

Families

In families of children with psychosomatic diseases,
the structural concept of enmeshment and other structural
dysfunctional family structures were related to the
presence of the disease. Wood, Watkins, Boyle, Nogueira,
Zimand and Carroll (1989) found that structural
characteristics of the "psychosomatic family" such as
enmeshment, rigidity, poor conflict resolution,
overprotection, triangulation (child's involvement in the
marital system), and marital dysfunction correlated with
one another and with disease activity (i.e. Crohn's
disease, ulcerative colitis, recurrent abdominal pain).

Sroufe (1985) tested the concept that the pattern of
psychological parent-child boundary violation is
established early in infancy and his findings support

this concept. Sroufe (1985) investigated the relationships between seductively enmeshed mothers and their male toddler sons from age 24 to 42 months. The mothers, who were found to be seductively involved with their male infants, did not behave seductively with other male or female siblings. In fact, mothers seductive with their infant sons were hostile toward their daughters.

Enmeshment is known to frequently occur in single-parent families (Zastowny & Lewis, 1989). "In the single-parent family generational boundaries tend to become blurred" (Zastowny & Lewis, 1989, p. 4). After divorce, families have difficulty maintaining generational boundaries. Such difficulty is most evident during stressful times and particularly apparent in the mother and oldest child relationship (Schulman, 1981). Zastowny and Lewis (1989) point out that one year post-divorce appears to be the most stressful time for the family. It was common during this first two years of adaptation to a new family structure for parent-child enmeshment to occur coupled with and lack of parental control (Zastowny & Lewis, 1989). Zastowny and Lewis (1989) note that for most single-parent families, after the two years of post-divorce adaptation, the family system stabilizes; parental control improves and the child separates from the mother. However, a few single-parent families remain enmeshed at five years post-

divorce. Zastowny and Lewis (1989) outlined the characteristics of these families that remain enmeshed. First, these families exhibit poor parental control; second, the child expresses dissatisfaction with the post-divorce family unit; third, the child chronicly worries about the mother's state of mind; fourth, the child feels responsible for the mother's well-being; finally, both mother and child fear changes that affect their overinvolved relationship (Zastowny & Lewis, 1989).

Werner and Broida (1991) state that how well adjusted adults are is highly related to how well their family-of-origin equipped them to function. Dysfunction in the family-of-origin, defined by high family conflict, problems with family cohesion, expressiveness, enmeshment and difficulties with family organization and control predicted lower adult self-esteem. The family-of-origin is where a child learns how to view himself or herself (Werner & Broida, 1991).

Kinnier, Brigman and Noble (1990) suggest that healthy adults need to be individuated from but still emotionally related to their family-of-origin. They found that students who were less individuated were more indecisive about their careers. Individuation was related to family enmeshment. Family enmeshment affects the adult child's work life. Bartle and Anderson (1992) found that an adolescent's individuation from both

parents was more related to the mother's individuation from her mother than from her father, and not at all related to the father's individuation from either parent. This finding supports Bowen's (1976, 1978) ideas where he describes intergenerational theory. Essentially, he suggests that well-individuated people are products of well-individuated parents. Bartle and Anderson (1992) define individuation as the ability to achieve a sense of self that is separate and distinct from parents while simultaneously maintaining a sense of emotional connectedness to the parents. According to Bartle and Anderson's (1992) findings, it appears that mother is more influential than the father in producing highly individuated offspring.

Paris and Guzder (1989) conclude that unless original conflicts between the child and his or her parents are resolved, that individual's marriage will become a repeat of the "poisoned nest" in which he or she grew up. Marital conflicts will be dealt with in the same way the childhood conflicts with his or her parents were approached. Even though a child grows up and moves away from his or her parents, he or she does not leave behind the "poisoned" way of relating that they taught him.

Summary

Enmeshment affects how a child learns to view

himself or herself and has been correlated with the
presence of childhood "psychosomatic" disease (Lovett,
1990; Sroufe, 1985; White, 1992; Wood et al., 1989; &
Zastowny & Lewis, 1989). Enmeshment contaminates a
person's self-perception, self-nurturance and peer
relations in adulthood by "poisoning" the way he or she
cares for himself or herself and relates to others
(Werner & Broida, 1991; Noble, 1990; & Paris & Guzder,
1989).

Codependency

Miller's (1981) egotistical parenting is described
as the type of parenting that produces codependent
adults. Codependents come from families where they have
learned to stifle or deny their true inner self.
Instead, they develop a false or codependent self that is
dependent on others for meaning and substance (Morgan,
1991). Codependency develops as a result of prolonged
exposure to and practising of dysfunctional family rules
that make it difficult to express thoughts and feelings
openly (Lyon & Greenberg, 1991). Common family-of-origin
patterns of codependents include internalization of
feelings, enmeshment with at least one parent,
inappropriate parental power structure and rigid
attitudes (Lougheed, 1991). Children become so
emotionally dependent on the relationship with their
parent that they deny their own expectations, needs, and

even give up their will. They extract their sense of self-worth from the worth that their parents give them (Lyon & Greenberg, 1991).

In support of the idea of emotionally dependent children growing up to prefer adult relationships in which they are emotionally exploited, Lyon and Greenberg (1991) found that college aged daughters of alcoholics offered more assistance to an exploitive experimenter and liked the exploitive experimenter more than daughters from nonalcoholic families. Having learned as children to obtain self-worth by conforming to the abusive and exploitive demands of an alcoholic parent, codependent individuals will be especially interested in and helpful toward those displaying these same characteristics (Lyon & Greenberg, 1991).

Cermak (1991) concurs with this idea that children become dependent on their parents for their sense of self-worth, but he further details how parenting styles tend to oscillate. He asserts that narcissistic parents tend to produce codependent children by rejecting the child's need to have his or her capabilities affirmed and stimulating but not maturing the child's need to be appreciative. The child grows up with an immature need to be appreciative and becomes what is known as codependent. The codependent person is attracted to individuals who need to be continually affirmed and is

most willing to fill this need and derives his or her self-esteem from how well the other person functions (Cermak, 1991). Cermak (1991) asserts that codependent parents produce children who are narcissistic, who continually need to be affirmed. A generational cycle of narcissism-codependence-narcissism is completed and begins again.

Weatherford and Kaufman's (1991) findings support Cermak's assertions. They found that adult children of alcoholics tended to marry spouses whose communication patterns were disconfirming just like their nonalcoholic parent's communication patterns. They also suggest that alcoholic families which are rigid limit the child's opportunities to develop healthy social skills.

At the heart of the codependency issue is the lack of clearly defined ego boundaries in intimate relationships. The codependent person usually possesses the necessary ego strength to maintain stable personal boundaries but "voluntarily dismantles them in an effort to strengthen connections with others" (Cermak, 1986, p. 20). Codependents often do not know where they end and where other begins. Consequently, they live for others, feel responsible for others, and attempt to regulate others' lives (Hogg & Frank, 1992).

Summary

From the literature, it appears that codependent

adults grow up in families where psychological boundaries of the family members are not encouraged to develop. In fact, the child's boundaries are only allowed to develop to a stage with which the parent is comfortable. The child's emotional and psychological boundaries are subtly and consistently violated in such families. Codependent adults appear to be the result of parenting that violates the emotional and psychological boundaries of a child.

Generational Patterns of Dysfunctional Families

How do dysfunctional family patterns pass from generation to generation? According to the intergenerational family theory (Bowen, 1978), patterns developed in the family-of-origin tend to be transmitted to the family-of-procreation. This tendency is called generational interconnectedness and is thought to be continually in operation in families. The family pattern is supported by second generation parents who, influenced by family loyalty, pass on values, traits, and behaviours acquired from their parents to their children. These patterns are generally accepted and family members are often not explicitly aware of them or the process by which they were acquired. The longer the patterns go unrecognized the more powerful they become to following generations.

The family prerequisites for incest to occur are generationally linked (Carson et al, 1990). They found

that the experiences that adult victims of incest had in their families-of-origin contributed to ineffectual parenting and a lack of emotional intimacy with their spouse. Their families-of-procreation tended to be disengaged, lack cohesion and trust, and were highly conflictual. Burkett's (1984) findings concur with those of Carson et al. (1990) that women who were sexually abused as children struggled with depression, and were caught up in a smothering, over-controlling, enmeshed s.yle of parenting. Leahy (1991) points out that women who have been sexually abused have a higher incidence of marrying men who sexually abuse children than non-victims. These survivors of sexual abuse often become mothers of sexually abused children. Carson et al. (1990) suggest that some adult victims do not provide their children with the necessary skills to manage life and that the situation that these children grow up in may set the environment for a third generation of adults who victimize their children.

Physical parent-child boundary violation gets passed in a similar fashion. Steinmetz (1987) concludes on the basis of a variety of studies (Hotaling, Finkelhor, Kirkpatrick & Straus, 1988; Libby & Bybee, 1979; Maccoby & Martin, 1983; Rohner, 1986; Simons, Conger & Whitbeck, 1988; Wolfe, 1987) that the most significant determinant of abusive child rearing is having experienced harsh

punishment as a child. Thus the notion of a "cycle of violence" whereby people who were harshly treated as children grow up and raise their children in a similar fashion is created. Simons, Whitbeck, Conger and Chyi-in (1991) found that repeated exposure to aggressive parenting provides individuals with a model of the parent role that they use with their own children in a reflexive way, with little awareness of alternatives. The mother's harsh parenting style was a more influential role-model than the father's parenting style. They attributed this to the tendency of fathers to have little involvement in parenting. Most of what children observed regarding parenting was derived from the mother; thus, they became like the parent they most often observed and interacted with, their mother (Simons et al., 1991). Juni's (1992) research validates the previous findings that suggest that children imitate their parents, especially imitation of the same sex parent.

Summary

It appears from the literature that emotional and psychological parent-child boundary violations have a serious impact on a child's life as an adult in his or her ability to be decisive, to individuate, and to parent (Bartle & Anderson, 1992; Simons, Whitbeck, Conger & Chyi-in, 1991). These subtle boundary violations, specifically enmeshment and rigidity, have also been tied

to eating disorders in children and the occurrence of allergies, gastrointestinal problems and other medical problems (Wood et al., 1989). The literature also shows that children who have had their psychological boundaries violated may become codependent adults (Cermak, 1991, 1986; Hogg & Frank, 1992). Finally, Carson et al. (1990) and Steinmetz (1987) conclude that the family prerequisites for incest and abusive child rearing are passed from generation to generation.

The Problem of False Memories or Pseudo-Memories

Research (Kintsch, 1977; Ashcraft, 1989) has shown that people's memories are not photocopies of actual events. Memories can partially be a reproduction of events but are also reconstructions that are colored by the unique biases and presuppositions of the people who hold them. Memories are highly prone to distortion.

The memory of eyewitnesses has become suspect in past years. Loftus (1979) showed that by using different descriptors in the question eyewitnesses could be led to give disparate testimonies amongst one another. She suggested that leading questions suggest to the individual what answer is appropriate. Interviewing questions need to be phrased carefully so as not to influence the respondent's reply; questions should not be leading or coercive (Benedek & Schetky, 1987; Wong, 1987).

A topic that has received much attention in the mainstream media is false accusations of childhood abuse. It has recently been acknowledged that recovered memories of childhood abuse may not be authentic, and that it is difficult to determine the authenticity of the recovered memories without physical evidence, which is rarely available (Loftus, 1993).

Yapko (1994) describes several cases of families who have been devastated by adult children who, after participating in psychotherapy, claim to have uncovered repressed memories of physical and sexual abuse. These clients have become convinced that they were victims of parental physical and sexual abuse. Yet, there is no evidence or corroboration that the abuse occurred, and their siblings deny that such events ever took place. Yapko (1994) describes that only after their psychotherapist suggests that their troubles may be due to childhood abuse that these clients begin to relate descriptions of abuse. He distinguishes between memories that people have always held of their childhood, memories that clients uncover without therapist suggestion and pseudo-memories that result after subtle or obvious therapist suggestion. Once again, it is clear that interview statements and questions need to be phrased so that the respondent is not led by the interviewer.

Previous research suggests that people can remember

back to the age of three or four (Loftus, 1993).
Memories prior to age three can be recalled if they were
highly salient like the birth of a sibling, a move, or a
planned hospitalization (Loftus, 1993).

According to Kraft et al. (1985), how well
information is remembered depends upon how meaningful the
material was to the person. He explains that the more
distinct the information is to the person while it is
encoded the easier it is for that person to retrieve with
higher accuracy. Meaningful life events that are
distinct in the individual's mind ought to be remembered
readily.

Summary

According to the literature interview questions need
to be carefully phrased and nondirective to guard against
suggesting specific responses to the participants during
the interview. It is also important to acknowledge the
reconstructive nature of memory, and that meaningful
events throughout the lifespan are more likely to be
remembered readily.

Portraits of Mother-Daughter Psychological Boundary Violation

The following are portraits from literature of
mother-daughter psychological boundary violation. In
each example, the way the mother violates her child's
psychological boundaries is different. In each case, the

child as an adult is faced with how to overcome the
psychological damage inflicted by the mother in
childhood.

In her novel The Joy Luck Club, Amy Tan describes
four separate families. Three of the four families
depict mother-daughter psychological boundary violation.
One of the girls, June, illustrates how her mother lived
through her thereby violating her psychological
boundaries. June explains "my mother's version of
believing in me was believing I could be anything;
anything she wanted" (p.37). Her mother wanted her to be
a famous pianist. One episode is particularly
illuminating, June refuses to play the piano, and her
mother insists that she continue. June's mother tells
her that there is only room for obedient daughters in her
home and no room for daughters who follow their own
minds. She illustrates how her mother lived through her
to meet her own social needs. She states "My mother's
best friend was her arch enemy. Their weapons of choice
were comparing their children" (p. 39). June grows up
feeling that no matter what she does or becomes, she will
not satisfy her mother. She feels inadequate as an
adult. She confronts her mother with her feeling that
she will never measure up to her mother's standards, and
for the first time in her life her mother tells her that
she sees her for the young woman she has become and

accepts her. June is able to draw strength from her mother's validation.

June's friend Waverly also had her psychological boundaries violated by her mother. After Waverly wins the children's national chess championship, her mother parades her and her picture in Time magazine around town announcing to the neighborhood that Waverly, the champion, is her daughter. Waverly protests that she is being embarrassed and tells her mother if she wants to show off to win a chess championship herself. Her mother ignores Waverly when she pours out her heart about how unhappy and angry she is. As an adult Waverly tells her mother how much power she has over her, and how she longs for her mother's validation. Her mother cries when she hears her daughter's honesty and they embrace each other in tears of laughter.

Lena, a friend of June and Waverly, became her mother's caregiver. Her mother was depressed and overwhelmed with guilt over killing her infant son many years before. She was so involved in her own pain that she became listless and offered no support to her daughter. Lena's mother would stare for hours out the window without saying a word or making eye contact with her. Lena was left with the responsibility of cooking and caring for her mother. Lena begged for her mother to answer her or make contact with her, but her mother

simply stared blindly ahead. As an adult Lena did not expect or demand her peers respect. She married a man who treated her without tenderness or respect and expected only civility from him. Her mother's neglect of her when she was young left her without a sense of how valuable she truly was, and she expected to be treated as someone without much value by her husband.

Barbara Corcoran in her novel <u>Face the Music</u> describes Marcie, a girl who struggles to extricate herself from her mother's emotional dependency. Since Marcie's mother and father got divorced, her mother has relied on her for emotional support. Marcie's mother is afraid of letting her grow up and sees her daughter's independence as abandonment. Marcie's desire to grow up and individuate from her mother fights against her sense of obligation to continue being her mother's support. When Marcie travels to her sister's wedding, she stays with her sister's friend and joins a band. However, her mother rents a room in a hotel to be near to her and hopes to convince her to return home with her.

When Marcie manages to tell her mother firmly that she will not be returning with her, her mother tries one last desperate attempt to get her daughter to comply. Her mother overdoses on sleeping pills. Marcie finally realizes the game she has been playing with her mother. She firmly explains to her mother that she is not fragile

and that her mother can manage comfortably without her
help. Just as firmly she assures her mother that she
will not be returning home and exhorts her to return home
to the life she left behind and to the people that need
her. Marcie's ability to confront her mother and
discontinue the game her mother and she were playing is
strengthened by her father's emotional and financial
support of her quest for independence.

Bonnie and Paul Zindel's novel, A Star for the
Latecomer describes Brooke, a girl whose dying mother
wants her to become a famous dancer. Brooke does not
want to be a famous star. Instead, she longs to have a
family and find a special man to love. She tries without
success to become a dancing star and realize her dying
mother's dream. When her mother dies, Brooke realizes
the trap in which she has been living and comes to the
realization that her mother was hoping to satisfy some
empty part of herself through Brooke. When Brooke places
her dancing shoes in her mother's coffin, she determines
to let her mother's dream die and begins her journey to
become the star of her own dreams.

Summary

In each story, each mother uses her child to meet
her own psychological needs. In the Joy Luck Club June's
mother lives her unfulfilled dreams of playing the piano
through her daughter. June felt she was expected to

become whatever her mother wanted. In the same novel, Waverly's mother steals her chess championship by parading her around the neighbourhood against her will, taking Waverly's glory for herself. In Zindels' novel, A Star for the Latecomer, Brooke's mother similarly lived her dream of becoming a dancing and acting star through Brooke. In The Joy Luck Club, Lena acted as her mother's nurturer, while she herself grew up unnurtured. Each portrait paint a slightly different picture of mother-daughter psychological boundary violation, but in each story the child's needs are ignored at times by both mother and child and only the mother's needs matter to both. Other times the child is aware that her needs are going unmet but is helpless motivate her mother to consider and meet her needs.

Rationale

This study seeks to investigate the experience of women who have survived psychological mother-daughter boundary violation. Studying the parent-child relationship is too broad for the scope of this study. There appears to be some consensus in the literature that the child's relationship with the mother is more influential than the father's relationship in carrying on generational parenting patterns and in being sufficiently differentiated from the family-of-origin (Bartle & Anderson, 1992; Simons et al., 1991). Finally, Juni's

(1992) research suggests that children tend to imitate the behavior of their same sex parent; daughters tend to be more influenced by their mothers than sons. Given this research, the present study will be confined to the description of mother-daughter relationships. A thorough description of mother-daughter psychological boundary violation will be investigated from the grown daughter's perspective.

Chapter III

PHILOSOPHY OF METHOD

Approaches to Research

Currently, there are two approaches to psychological research, the natural scientific approach and the human scientific approach. Fernberger (1935) separates them into a "science of behaviour" and a "science of consciousness". He suggests that each of these "sciences" is unique in its perspective and methods and that both can be empirical.

Natural scientific psychological research is identified with the scientific method which concerns itself with prediction, control and explanation. Valle and King (1978) state that the natural scientific approach makes a number of assumptions. The three most crucial assumptions are that the phenomenon under investigation must be observable, measurable (or quantifiable), and it must be possible to get interrater or inter-observer consensus on the phenomenon's existence and characteristics. Giorgi (1970) states that for natural scientific psychology "a phenomenon is to the extent that it is measurable. If it is not measurable then it does not enter the psychological domain. It remains prescientific and therefore psychologically irrelevant" (1970, p.65).

In contrast, human scientific psychology, using the

method of phenomenology, does not try to explain but seeks to understand the underlying nature of the phenomena. Colaizzi (1978) and Polkinghorne (1979) state that phenomenology is concerned with the person's experience of the objects of the natural world rather than those objects themselves. In other words, phenomenology is concerned with how the person's experience of the natural world and how the person and the natural world co-constitute one another. The phenomenon of interest does not exist without the person who experiences or perceives it. The two co-constitute one another. The method of phenomenology focuses on the attending itself. Focusing on our own attending is not our common way of perceiving things. Phenomenology turns the investigation back to consciousness, back to the human experience.

The natural science approach to psychology and the human science approach to psychology come from two different views of the world which result in two different philosophies of science and two very different methodological approaches to science. (Giorgi, 1970; King, Valle & Citrenbaum, 1978).

Philosophy of Human Science

Phenomenology views the mind and body holistically rather than "two distinct and separate entities" (Sahakian, 1968, p.137-138). Phenomenological

researcher, Giorgi, states that "the life-world is the most basic frame of reference from which psychology must take its point of departure" (1970, p.178). The human experience as given by the person is the source of raw data. Human science must dialogue with life-world if it is to remain in touch with its empirical source. Phenomenology pursues life-world phenomena as directly as possible.

Husserl originated the idea of life-world. He described it as "the world as given in direct and immediate experience ... the world as lived by the person" (Valle & King, 1978, p. 9-10). The foundation of existential-phenomenological thought is this life-world.

The life-world is not caused; it is the primal unit. "There is nothing prior to the life-world" (Valle & King, 1978, p.10). However, most phenomenological researchers agree that getting to the primal essence of the life-world is an ideal. Due to the limits that language and culture impose on consciousness, it is improbable that the life-world of someone's experience will emerge untainted by the external world. Realistically, phenomenological research deals with people's life-worlds that are influenced by their various cultural backgrounds, language and its role in perception.

Existential-phenomenology describes an indissolvable unity of the individual and his or her world (Keen, 1978;

Valle & King, 1978; Prescott & Valle, 1978). According to this line of thought, "without a person to reveal its sense and meaning, the world would not exist as it does. Each is, therefore, totally dependent on the other for its existence... being is actually being-in-the-world" (Valle & King, 1978, p.8).

Phenomenological Methodology

Phenomenological researchers must be well disciplined to retain her focus on the life-world, or being-in-the-world. They begin implementing a disciplined, reflective attitude by observing their own experiencing. Polkinghorne (1981) suggests that "the technique for retaining the phenomenological stance is to neglect temporarily the questions that commonly arise as part of the natural stance: `Does the object really exist'" (1979, p. 5).

Reflective awareness emerges from the prereflective life-world, and therefore is the "starting point for all knowledge" (Valle & King, 1978, p.12). In order to understand the nature of a phenomenon, researchers must put aside or "bracket" their preconceptions.

In order to put aside their presuppositions, they must be aware of what their presuppositions are. This process is known as bracketing. "One must layout these assumptions so that they appear in as clear a form as possible to oneself" (Valle & King, 1978, p. 12). When

bracketing one's assumptions, one often becomes aware of more assumptions that were previously unknown to the researcher, and these newly discovered assumptions are also bracketed which could lead to the discovery of other assumptions, which are also bracketed.

Through bracketing and rebracketing "one moves from the `natural attitude' to the `transcendental attitude'" (Valle & King, 1978, p. 12). The "natural attitude" is a person's attitude as they live daily life. This attitude takes for granted such fundamental experiences as breathing and the intricate sights and sounds in the environment. The "natural attitude" is deeply influenced by culture. The "transcendental attitude" is in tune with each and every experience that the person has lived. It explores each experience to its fullest and takes no experience for granted. The "natural attitude" becomes the "transcendental attitude" by setting aside cultural influence so that what remains is the lived-experience of the person.

Realisticly, most phenomenologists agree that bracketing is an ongoing process and that a complete reduction is not possible. Instead of being an exercise completed at the beginning of a phenomenological investigation, it is the sustaining attitude throughout the inquiry.

Validity

Although validity is important in both natural science research and human science research, it is perceived differently and pursued differently in the two approaches to research. The goal of valid phenomenological research is to describe the life-world as truthfully and precisely as possible (Wertz, 1984). Seeking validity is a continual process that a researcher maintains throughout the study, "a constant return to the lived-experience of the subjects" (Sakari, 1982, p.41). It begins with bracketing at the beginning and rebracketing throughout the study as well as returning to the original protocols and excerpts during analysis of data and the discussion section.

During the analysis of the data, validity is affected by how well the original protocols are handled and understood (Wertz, 1984). Results of the analysis must be "internally cohesive and include all constituents of the phenomenon expressed implicitly and explicitly in the descriptive data base" (Wertz, 1984, p.44). If the descriptions of the studied phenomena can be related to psychological theories, then the researcher includes a description of how the findings of the phenomenological investigation might be understood in a given psychological framework (Wertz, 1984). The researcher must present an excellent case for how the findings and the given theory relate and illuminate one another. The validity of the connection between the analysis of the

data and the given theory depends upon researchers' ability to argue their cases.

Participants in the study are asked to verify the researcher's interpretation of their personal experience and descriptions of the phenomena to ensure that the researcher's interpretation is faithful to their experiences. They can help locate omissions and invalid interpretations that have eluded the researchers. Occasionally, a participant may deny that truth of an interpretation when it is valid. The validity of the study then relies upon researchers' ability to build a case, much like lawyers do, for their interpretation of the data (Salner, 1986). This type of validity is called juridical validity, as its strength depends on researchers' ability to argue their cases.

During bracketing, researchers make their presuppositions explicit so that during the data analysis and discussion others can understand how they arrived at the conclusions given in the discussion section. No where is this reflectivity more important than in the discussion section. Researchers need to constantly examine their assumptions and bracket them so they do not taint the data, its analysis or its implications.

This proposed research does not seek statistical generalizability but rather empathic generalizability. Empathic generalizability depends upon how accurately the

phenomenon is described. Most qualitative researchers agree that empathic generalizability has been achieved when the phenomenon is so well described that someone who has had that experience can read the research and feel an empathic shared agreement with the general themes represented there. Empathic generalizability relies upon social consensus. Not everyone in a population who has gone through the experience will be able to empathize with the empirical description. Some people prevent themselves from feeling this empathy, since it may be too threatening for them. The more participants that share a common description of their experience and the more diverse their cultural backgrounds the more empathic generalizability that description has. Social consensus is the ultimate check on validity. The findings and interpretations of the phenomena are validated if they are shared by other people who have had similar experiences.

Reliability

If other researchers follow the original researcher's procedure, it does not mean that those researchers will be able to replicate the original study. To replicate a study, one would have to be able to recreate the lived-experience of the subjects at that specific point in time. Since people and their life-worlds are continually in flux, one can never replicate a

phenomenological study. One can repeat a study and expect to find similar meaning between the two studies, a social consensus between the two. Reliability in phenomenological research is based on replication of meaning rather than replication of facts (Wertz, 1984).

Chapter IV

METHODOLOGY

The Phenomenological Instrument

In phenomenological research the instrument used to obtain and analyze the data is the researcher. It is important for the reader to know wha. led me to do this research and what my background is regarding this topic. My interest in mother-daughter psychological boundary violation started when I did a genogram (generational family history) with my own family and found a repeating pattern of mothers physically moving in with their daughters and sons-in-law. I also noticed that several grown women in my extended family appeared to rely mainly on their daughters for emotional companionship rather than their own peers.

My interest in this topic deepened as I began studying how family therapy is conducted and which patterns of parent-child interactions are problematic. I noticed that children's involvement in parental concerns is an issue that is addressed by many differing family theorists. Structural family therapy enabled me to conceptual this phenomenon best by defining a boundary violation as a situation where a member from one family subsystem (ie. children's sibling subsystem) becomes involved in another family subsystem (ie. marital or parental subsystem). After studying Miller (1981) and

Firestone and Catlett (1981), I decided more generally that a psychological boundary violation occurs whenever a person uses another person for his or her own needs or desires not permitting that person to meet his or her own needs.

Several of the families I have counselled were troubled by parent-child role reversals. I counselled one woman in her late fifties who was beginning to heal the emotional wounds inflicted during her childhood. She had lived her childhood for her mother and never received the opportunity to discover her own uniqueness.

My study of the psychological literature, my own family experience and my experience as a therapist enhanced my understanding of this phenomenon. Yet, I still wanted to understand how women remembered their childhood experience of their mothers' boundary violation. The lived-experience of mother-child psychological boundary violation intrigued me and created the impetus for the present study.

Bracketing

I am not aiming for objectivity in this investigation but, rather, for reflective subjectivity. My own personal reflections, as long as they are explicitly treated as such, can add a dimension of depth and understanding to this investigation, and since understanding is the goal of this research, my

reflections are appropriate.

In order to faithfully describe the participants' lived-experience of the phenomenon, I need to identify and bracket my own presuppositions and preconceptions. The following is a list of my presuppositions about the phenomenon. They come from my observations of my family and from my experience as a psychotherapist.

Researcher's Presuppositions

1. I suspect that adults who have had their psychological boundaries violated as children will be angry at their mother.

2. I suspect that adults who have had their psychological boundaries violated will be unsure of their feelings.

3. I suspect that adults who have had their psychological boundaries violated will have difficulty with romantic relationships, because all their emotional energy will go into their relationship with their mother.

4. I suspect that adults who have had their psychological boundaries violated will lack a distinct feeling of self-identity apart from their mother.

5. I suspect that adults who have had their psychological boundaries violated will not have healthy peer relationships.

6. I suspect that the eldest child in a family would be the most likely target for the mother to involve herself in a relationship that violates the child's psychological

boundaries.

7. I suspect that a child involved in a such a
relationship will view the mother's relationship with the
father as troubled.

8. I suspect that my own experience as the eldest child
in a single-mother family will influence my
interpretation of the data.

Participants

Four participants contributed in this investigation.
Purposive sampling was used to ensure that each of the
participants was capable and willing to describe her
experience with the phenomenon. Potential participants
for this study were obtained by referrals through their
psychotherapists. Initially, six women and one man
people were interviewed, but two of the women and the one
man did not qualify for the study as they did not discuss
mother-child boundary violation as having been part of
their childhood experience. These three people were
interviewed once. When I determined that ti.ay did not
qualify to be in the study, they were not interviewed a
second time. The four remaining women expressed a keen
interest in the topic of psychological mother-daughter
boundary violation and were able to describe their own
experience with it.

All four participants in this study are women. One
woman is in her early twenties, one is in her early

thirties, one is in her forties and the fourth is in her mid-fifties. One woman is a legal secretary; another woman is a teacher; the third woman is a daycare director, and the fourth woman is not currently working but, for most of her life, worked as an office clerk. One woman lives in a small town, the other three live in a large city. All participants have their high school diplomas. Two women are married and have children, one is single and the other is divorced. All participants are Caucasian, born and raised in Canada. Finally, all participants have been through or are currently going through psychotherapy.

Procedure

This study uses a phenomenological thematic analysis of the participants' descriptions of lived-experience. Each of the four participants participated in three one-on-one interviews.

The purpose of the first interview explained the nature of the study, the type of information that was needed for the study and the rights of participants in psychological research. I explained to each participant that phenomenological research requires information about their experiences, not what they think about their experiences, what they have read about the topic, or what they think they should have experienced. When I determined that which participant was capable and willing

to illuminate the phenomenon, I informed them about the confidentiality of the research and the fact that they had the freedom to opt out at any point during the investigation. The main intent of the first interview was to establish rapport with the participant and to determine whether or the person was capable and willing to participate in phenomenological inquiry.

The second interview was audio recorded and later transcribed. I interviewed the participants about their relationships with their mothers.

The third interview was a validity check. After I analyzed the transcripts and extracted the themes, I returned to the participants and asked each one individually if my analysis had been faithful to their experience. Each participant replied that in general my interpretation of their experience was faithful to their experience, although each suggested that a few paraphrases needed rewording. I analyzed their concerns, determined that they were valid and made the minor adjustments that each participant suggested.

Data Analysis

A phenomenological investigation uses hierarchical thematic analysis. During the transcription of the interview and throughout all subsequent stages of data processing, I bracketed my own presuppositions, wrote them down and read through them periodically to ensure

that they were not tainting the data. After transcribing
each interview, I read over each transcript several times
to get a feeling for each interview as a whole. I went
back to each transcript to extract material which could
lead to a deeper understanding of the lived-experience.
This began the first stage of *first order clustering*. I
examined each selected excerpt and extracted from it one
unit of meaning. The excerpt's meaning unit was then
paraphrased. During the second stage of *first order
clustering*, a theme was derived from the meaning of the
both the paraphrase and the excerpt.

In higher order thematic clustering or *second order
clustering*, the themes were listed by themselves with
descriptions which included phrases which captured the
main thrust of the themes. All the excerpts with the
same theme were clustered together.

Third order clustering was complete when the list of
themes was clustered into third or highest order
clusters. These clusters of themes were abstract and
captured a general meaning. This was the final stage in
analyzing a single participant's experience. Since this
study covered the experience of four people, the
participants' experiences were compared and the important
themes shared among them were compiled in tabular form.
This procedure is called a *between persons analysis*.
Some themes were shared by only two participants; others

were shared by all four. The final step was to
narratively synthesize the specific important themes that
emerged from the women's life-experience.

Chapter V

RESULTS

Commonalities Across Individual Descriptions

This chapter presents the *between persons analysis*.
A sample of the process outlined above, which was applied
to each participant's experience, is available in
Appendix A, B and C. Appendix A is a sample of first
order clustering. It contains the selected quotations
from the transcribed interviews, paraphrases of the
quotations, and the first order themes. Appendix B
contains the generalized descriptions of the first order
themes, and Appendix C is the third order clustering of
the participant's themes into higher order clusters. The
following is the final result of the four individual
analyses and abstractions. It details the different
important themes that emerged across participants, the
number of participants who shared it and their experience
of the important themes.

Table 1

Important Themes and the Number of Participants Who

Expressed Each Important Theme

1. Child becomes caregiver

      - Working in hopes of gaining mother's love. 2

      - Child mothers mother. 3

      - Obligated to mother mother. 3

      - Child takes on role of mother. 2

      - Awareness of tendency to assume caregiving

        role. 2

      - Hyperresponsibility. 3

      - Mother recognizes daughter's caregiving

        role. 2

2. Child's well-being is violated and neglected

      - Child's needs are ignored. 4

      - Violation of ownership boundaries. 3

      - Mourning emotional loss in childhood. 4

      - Ignoring her own desires. 2

3. Emotional struggles in childhood and adulthood

      - Feeling alone. 4

      - Feeling sad. 2

      - Emotional suppression. 4

      - Longing for freedom. 3

      - Feeling helpless. 3

      - Feeling burdened. 2

      - Feeling guilty. 3

- Anger towards mother.   3

4. Child as emotional nourishment

    - Mother protests as child meets her own

      needs.   4

    - Emotional depletion.   4

5. Coping with fear

      - Spiritual fear.   3

      - Child fears mother.   3

      - Fears motherhood.   3

6. Interpersonal difficulties

       - Child is shy.   2

       - Unhealthy adult relationships.   3

7. Distorted and lowered view of self

      - Self as inadequate.   2

8. Child seeks nurturance not received from mother

      - Finding other mentors.   3

      - Yearning to be nurtured.   3

      - Child relies on God.   2

9. Separation from mother and individuation

      - Distancing from mother.   2

      - Spouse/men as refuge.   4

      - Protection from mother.   2

      - Desiring to be different from mother.   4

      - Parenting differently.   2

10. Accepting mother's limitations and life influence

      - Emotionally unavailable mother.   4

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- Pity of mother. 2

- Perpetual inequality. 4

11. Realization of injustice

- Realization of injustice. 4

12. Kinesthetic response to childhood memories

- Childhood memories evoke physical tension. 4

Synthesis of Important Themes

The participants' expression of their individual
experiences revealed twelve main of themes. It is
important to note that three of the participants, Jill,
Sharon and Merle, described mother-daughter role
reversals, while Rachel described how her mother lived
through her. Jill, Sharon and Merle shared more minor
themes among each other than with Rachel, but eleven
minor themes were shared by all participants.

The Twelve Important Themes

"Child becomes Caregiver" is the first important
theme that emerged from the data. Jill, Sharon and Merle
all shared the experience of becoming a caregiver to
their mothers and taking over their mothers' role as
caregiver to the family. They took care of their
mothers' emotional and physical needs as children, rather
than their mothers caring for their childhood needs.
Jill explained that she cared for her mother's emotional
needs. She said,

> I felt my role was to do things and help her
> out. I felt at the time it was a nurturing
> role... I see my relationship with her as more
> that she sees me as mother. My mom, at the
> time... needed a lot of support emotionally. I
> see myself as a helper, more than a helper,
> kind of a leader... I feel that she looked to

me then as a leader.

Sharon took care of her mother's emotional needs as well as the physical needs of the rest of the household. She explains,

> When she couldn't cook or clean, then I would
> do that. I took on a lot of responsibility
> inside the home... I took a lot of care for the
> house. I was an immaculate housekeeper. If
> they would come home and mess something up, I
> would go after them and clean it up. It was
> almost like it became my home.

Merle describes how she not only cared for her mother and protected her from her father's violent temper but also assumed her mother's responsibility to care for the younger children.

> My father was very violent... I felt like I had
> to protect everybody from him and anticipate
> him and take care of things so he wouldn't
> injure anyone. My mother seemed to abdicate
> her protection of us... Since I was the big
> girl, I felt that I had to take care of
> everybody. I had to take care of my mother
> first of all, and then I had to take care of
> the children. There were seven children by the
> time I was thirteen. They were all my
> responsibility it seemed.

These three women also had a heightened sense of
responsibility. Jill feels responsible to do and learn
all she can to strengthen her relationship with her
mother and improve her mother's mental well-being.
Sharon feels a general sense of responsibility for the
spiritual well-being of her other family members and for
her mother's mental well-being. Merle's sense of
responsibility for other people's well-being appears to
be the most pronounced of the three women. She states,

> I was always responsible. Responsible is the
>
> best word for it... I was the big girl, both
>
> my father and mother knew that... Merle always
>
> has to take care of it... If you didn't take
>
> care of it you were wrong, bad,
>
> irresponsible... I take care of people, whoever
>
> is around that needs to be taken care of
>
> (laughing).

Both Sharon and Merle's mothers recognized their
caregiving roles. Merle found this recognition
affirming. However, Sharon found her mother's
recognition of her role made it more difficult for her to
change that role.

"Child's well-being is violated and neglected" is
the second important theme which the data suggested. The
women's experience of their needs being ignored differs
in some respects but overall shares fundamental

similarity. For example, Rachel's social needs went unmet. She explained, "I could not go out and play with my friends... I do not remember having my own interests... I never wanted the things I got, and the things I really did want, I never got." Her need to discover her own uniqueness was ignored.

Jill "did not have that parenting relationship; (she) didn't feel nurtured and cared for when (she) was a child". Instead, she found herself providing nurturance and a listening ear to her mother about her mother's adult concerns.

Sharon also desperately wanted her mother to meet her need for affection and nurturance but found herself nurturing her mother instead. She said, "I wanted to have a mother who would come into my room and talk to me when I was upset rather than pretending that nothing was wrong." When Sharon tried to share her feelings with her mother as an adult, her mother ignored her concerns and talked about her own. Her unmet need for nurturance and affection continue to haunt her.

Merle said she believed from a young girl that she "was not supposed to need anything" from her mother. She believed that even as a toddler she did not demand much of her mother's attention. Merle's mother would call her "selfish and lazy" when she asked her for anything. Merle wanted a university education more than anything as

an adolescent and young adult, but her mother said, "that God had created me to look after the family. I had no right to an education or life of my own." Merle's need for affection, nurturance and discovery of her own uniqueness remained unmet.

Rachel, Jill and Merle recalled how their mother violated their ownership boundaries. Rachel's mother took her Easter bunny, that she had been saving, without her permission and gave it to the family to eat. Jill's mother took her special doll and gave it away without her permission, and Merle's mother allowed her sisters to take her socks without consulting her first. Jill remembered how she felt when her mother took her doll away. "I still feel sad about that doll. It was just a doll, but it must have meant something to me... My mother kept lots of our things, but it's the things she threw away or gave away that I remember most."

Both Sharon and Merle learned to ignore their own desires. They learned that their desires were not important, but their mother's wishes were important. Sharon said, "I don't think about what I want. I try to put my desires away and not think about what I want." Merle describes how she used to fool herself about what she really wanted. She believed, as a child, that her mother could read her mind. The safest way to keep her mother from using her desires against her was to keep her

desires from entering her mind. She feared that if she thought about something that she wanted, her mother would know what it was and withhold it from her. S

The third important theme to emerge from the women's descriptions was "Emotional struggles in childhood and adulthood". The women struggled with feeling lonely, sad, helpless, guilty, angry and burdened. They longed for freedom from their desperately unhappy existence but felt trapped and unable to change it. Rachel's loneliness was linked to the fact that she was not allowed to have much contact with her peers. She stated, "I never felt like I was one of them, because I always had to go home". Her time was spent doing things her mother wanted her to do, like dancing lessons. Jill felt alone and "alienated". As the oldest child in the family, she did not have any sibling to confide in who she felt was her peer. Sharon spent a great deal of time in her room and in the house playing by herself. She remembered feeling emotionally alone with no one to share her concerns. Merle believed being the eldest set her apart from her siblings. She felt she had no one to turn to for help or comfort. She said, "I felt like I was the only person on earth". She remembered feelings of loneliness being intermingled with fear.

The participants all remembered suppressing their childhood emotions. Feelings of sadness, anger, guilt,

fear and helplessness suppressed during their childhoods were remembered during the interviews. Rachel, Sharon and Merle all remembered feeling anger toward their mothers and continued to feel that anger. Jill said, "when I heard her talk about her concerns, I felt a hopelessness, and yet, inside, I felt I needed to have hope... I had to separate myself, because I did not want to feel the hopelessness."

"Child as Emotional Nourishment" was the fourth theme to emerge from the data. Each woman described that she felt emotionally depleted by her mother's demands. All the women described that their mothers protested and attacked them when they attempted to meet their own needs. Rachel expressed that "now.... I don't want to be her emotional food anymore... I just want to be". Jill expressed feeling "dumped on" when her mother told her of all her adult concerns. She also remembered carrying the emotional burden of caring for her younger siblings. Sharon's time and energy as a child went to comforting and supporting her mother. Merle's entire youth was dedicated to pleasing her mother's wishes. She spent all her spare time doing her mother's chores caring for the other children and listening to her mother's concerns.

"Coping with Fear" emerged as the sixth important theme. Rachel, Sharon and Merle all expressed that they felt spiritually fearful of God. They feared God like

they feared their mothers. They thought He was demanding
and unpredictable like their mothers and feared that they
were doing something wrong to anger Him. Merle explains,
"I felt so condemned, so wrong. I don't know that God is
there for me anymore. I am afraid that He is going to
zap me, and I don't know what for, so negative (crying)."
These women also feared motherhood. Rachel decided that
to forego motherhood. Sharon feels alone in discovering
how to mother in a healthy way, and Merle wishes that she
had never been a mother.

"Interpersonal Difficulties" was the sixth theme
that the data suggested. Sharon and Merle described that
as children they were shy. They observed their peers
rather than joining in to play with them. Merle
remembers feeling afraid of her peers and having a sense
that she did not belong to her peer group. Rachel,
Sharon and Merle recalled that even as adults they
struggle with their relationships. Rachel told of how
she fears any confrontation with women. Sharon and Merle
explained that their relationships with others a.e based
on codependent principles. Sharon explains,

> My friendships have been very codependent... I
>
> play the nurturing role. I give advice. Let's
>
> deal with your problems so we don't have to
>
> deal with mine, concentrating on their life,
>
> coming along side them... I get stuck a lot,

because I come along side people who are going

through struggles.

The seventh theme that emerged, "Distorted and

Lowered View of Self", was supported by Sharon and

Merle's descriptions. Sharon said she felt immature

compared to other women; she felt beneath them. Merle

also felt immature. In addition, she stated,

I have always felt bad, flawed, right to the

core of me... Somehow there is a flaw in me

that I don't even know about... I think I must

have felt flawed that my mother didn't love me,

that there was something wrong with me.

"Child Seeks Nurturance Not Received from Mother"

was the eighth theme that emerged from the data. Jill,

Sharon and Merle all stated that they found other mentors

who provided the nurturance that they were seeking.

Jill's teacher mentored her; Sharon's older female

friend and God were her mentors; and Merle found

emotional support in her relationship with her

grandmother. These three women repeatedly stated how

they longed to be nurtured by their mothers but realizing

that their mothers were not emotionally available to

nurture them, they turned to other women to meet this

need.

"Separation and Individuation" emerged from the data

as the ninth theme. Rachel and Jill determined that

their mothers tended to be hurtful toward them, so they decided to distance themselves from her and protect themselves from her hurtfulness. Each woman stated that she preferred relating to men, and that significant men in her life have served as a refuge for her. Rachel stated, "My husband is my barrier between me and her... I always bring him with me, when we go to visit her." Jill's husband also acts as buffer. As an adolescent, Sharon spent large amounts of time with her boyfriends to escape from her mother and make her mother jealous of her time commitment to them. Merle said, "I got married so I didn't have to go home... there was no other way."

All of the women related that they did not want to be like their mothers and outlined the careful measures they took to avoid becoming like them. Rachel said she has resolved not to be a mother and tries to stop herself from setting unrealisticly high standards like her mother. Jill was careful to point out that she encourages her children to express their feelings to her, both positive and negative, unlike her mother who never allowed her to express her feelings. Sharon said, "I try to be different than her... I always try to be the opposite of her." She described avoiding feelings of overwhelming sadness and anger, because she does not want to become angry and depressed like her mother. Merle became the opposite of her mother. She became a

caregiver; her mother was a carereceiver. Merle said she made sure her child did not have the adult responsibilities that she had as a child. Their unique parenting style was a source of personal satisfaction for each of them.

The tenth theme to emerge from the women's experience was "Accepting mother's limitations and life influence". All the women in this study came to accept the fact that their mothers were emotionally unavailable to relate to them as children or adults, yet inwardly they still longed to have a deep emotional connection to their mothers. Rachel's mother never openly discussed emotional topics, and Rachel expects that she never will. When Jill confronted her mother with an emotional issue, her mother hung up the telephone. When Sharon confronted her mother with her anger, her mother treated her as if she was mentally unstable. For the most part Sharon's mother was "always involved in her own world". Sharon "could never really talk to her or get her attention". Merle never dared to confront her mother, but her mother was never available to her as an emotional confidant. Rachel and Jill were able to express pity for their mothers' emotionally isolated conditions.

The participants mentioned that they never felt as if they were equal to their mothers in adulthood. Rachel felt that she would never meet her mother's expectations.

Jill and Sharon felt that their mothers would always be in need of their help. Sharon said,

> Its like we are on a ladder, and I am one step above
> her saying `Just take my hand, and I'll help you
> up.' I help her up one step, and she takes two
> steps backward. So, I have to go down to get her up
> again.

Merle likened herself to a drone worker and her mother to a "queen bee".

The eleventh important theme that the data suggested was "Realization of injustice". Although all participants realized the injustice of their childhood, even as children, they felt helpless to change their situation. Rachel realized the injustice of her situation, when she observed how respectfully her mother treated her cousin. When Jill's teacher at school treated her with respect, she began to understand that she was not being treated justly. When Sharon observed her peers' lives she said to herself, "I wish that my life was normal like my other friends." Yet, she did not know how to improve her situation. Merle had a vague sense that something was wrong in her childhood. She could not understand why she was so desperately unhappy, when she had been doing just as she was told. As an adult, Merle realized that she went from being an infant to taking on increasingly more adult responsibilities;

she had no childhood.

The twelveth theme to emerge from the data was "Kinesthetic Response to Childhood Memories". Childhood memories filled with tense emotions affected all four women in their bodies. They all reported feeling tension in their upper chest and neck area as they spoke about their childhood relationship to their mothers. Merle said, "I have sort of an upset feary feeling. The closeness and distance I feel to her are all in one... It's right here in my upper chest... apprehensive." Interestingly, they did not report feeling tense when they spoke about their current relationship with their mothers.

Summary

Twelve significant themes emerging from the data suggest that the participants' experiences in childhood profoundly influenced their adult life by hindering their boundary development. The negative patterns of how they related to others, how they felt about themselves and of how the adverse emotional struggles they experienced childhood were ongoing processes throughout their adult lives. They had hoped that by physically leaving their mothers' home they could leave the difficulties that plagued them there, but they discovered that these difficulties continued to haunt them in their adult lives.

Chapter VI

GENERAL DISCUSSION

At the heart of this investigation is what constitutes a mother-daughter psychological boundary violation and what impact such a violation has on a daughter's later life. It is important to determine how such a violation influenced the participants' development of their personal boundaries.

The general understanding derived from the literature of what constitutes a mother-daughter boundary violation is that it occurs when a mother uses her daughter to meet her own needs without regard for the well-being of the girl. As a researcher, I determined that a mother-daughter boundary violation occurred when a participant described her mother's behavior and immediately related its adverse impact on her. An excellent example of a violation of a daughter's moral principles is described by Rachel. She explained,

> If I had to do something in my youth group or for dancing, she would do it for me then make me take the credit... I felt like a fraud for taking credit for someone else's work. I also felt helpless to do anything about it.

Rachel tells about how her mother violated her ownership boundaries.

> My mother would take my things away without asking.

I was saving this chocolate Easter bunny one year.
I had been saving it and saving it. One day my
mother decided that it was time to eat the chocolate
Easter bunny, so she sent someone to get the
chocolate rabbit (sighing)... It's the stuff that
she threw away or gave away that I really remember.

Jill outlines her experience of having her emotional
boundaries violated.

She looked to me, when my father was away drinking.
She'd tell me things about my father, how he'd take
the money that she'd got from selling ice cream and
use it to buy liquor. She'd tell me if she'd missed
her period and worried if she was pregnant. I was
probably about eight to twelve years old when she'd
tell me these things... I felt kind of dumped upon.

Merle describes how her mother violated her sense of
self-worth.

When I wanted something, she would say that I was so
selfish (crying)... She had other sayings too. I
was lazy. I was selfish. I only thought of myself.
I wouldn't help... One saying she had was, "Oh, you
just want money. You don't care about anything but
money." I wanted an education.

The daughter's well-being is adversely influenced by the
mother's behavior, in the four examples above of mother-
daughter psychological boundary violation.

As children, some of the women appeared to be confused about where their boundaries ended and where their mothers' boundaries began. Merle's description of this confusion is as follows:

> It seemed like in a way, I had a close relationship with my mother, and yet a very distant relationship. I felt very confused... probably... The one instance that I remember is my mother sweeping the floor, my father yelling, and I remember feeling really responsible... I don't know of anything I did other than that I felt responsible.

Merle described this tendency to feel responsible for her mother and to please her mother regardless of any adverse effects on her. Jill and Sharon also described strong feelings of being responsible for their mothers' well-being. Feeling responsible for other people's well-being was part of the theme "Child becomes caregiver".

Minuchin, Rosman and Baker (1978) point out that it is unhealthy for a family to expect members from one generation to fulfil duties which belong to another generation. Rather, children need to play, and adults need to exert executive authority over family concerns (Minuchin, Rosman & Baker, 1978). The theme "Child as Caregiver" violates this healthy arrangement. Jill, Sharon and Merle's descriptions support the writings of Miller (1981) and Minuchin et al (1978). They each

described their relationship with their mother as one in which they had become the caregiver and felt obligated to do so. They reported feeling compelled to take on this executive caring role in hopes of gaining their mother's love. All three of these women mentioned that they did not play with their peers as children. In addition, Merle and Sharon reported that their mothers recognized their caregiving role and assigned it to them.

The structural concept of enmeshment helps to explain the theme "Child becomes Caregiver". A common characteristic of enmeshed families is that the parents do not respect the generational boundary between themselves and their children, as is the case with these three women. As suggested by Minuchin et al. (1978), Jill, Sharon and Merle joined in as children and crossed the generation boundary after their parents demonstrated that this is how their family functions. They found themselves counterbalancing their mothers' negative feelings and bearing the emotional burdens of their mothers. Both Sharon and Merle indicated that they felt burdened, and Jill said she "felt dumped upon".

Part of the theme "Child becomes Caregiver" is that the child becomes an emotional confidant to her mother. Miller (1981) notes, as children, Jill, Sharon and Merle had an amazing ability to perceive their mother's need for emotional support and respond intuitively to this

need. Not only did these three participants become comforters, advisors, supporters and mothers of their own mothers, but they also took over responsibility for their siblings. Bradshaw (1988) asserts that mothers who are in need of the emotional support of a spouse and are not receiving it, turn to their children to meet this need, as is the case with these three women. All of the women related how their mother and father's marriage had either broke up or was dysfunctional. In structural family theory, (Minuchin et al., 1978), the participants' heavy involvement in the parental subsystem and their mothers' emotional dependence on them constitutes a boundary violation. The participants were left without support and guidance.

Cermak's (1991) article suggests that classic alcoholic families and other families who are similarly organized but who may not have an alcoholic present tend to parent in a way which produces codependent children. He suggests that these narcissistic parents rely on their children to nurture them, and the children grow up to know themselves only as nurturers. Interestingly, both Sharon and Merle indicated that most of their adult relationships are based on codependent principles. Sharon explains, "My friendships have been very codependent. OK, I'll take care of you, as long as you provide me with just a little bit of a feeling that you

are there for me." They take care of those in need in return for feeling needed and feeling that their lives have meaning. In addition, Jill, Sharon and Merle mentioned that they were drawn to the helping professions. Assuming their role as caregiver led these women to have codependent interpersonal difficulties. Their responses all reflected a heightened sense of responsibility. Miller (1981) suggests that it is common for these people to be high achievers and to be attracted to the helping professions, since helping people is the activity with which they are most familiar.

Each participant recognized that in their family they were only allowed to develop their psychological boundaries to a stage that was comfortable for their mothers. Rachel describes this control that her mother had on her emotional development. "I think... she had my life planned out even befor I arrived. I was a puppet. She was the puppeteer. She pulled all the strings. I always did as I was told." This control that her mother had over her development illustrates the theme "Child's well-being is violated and neglected". Rachel's description fits Miller's (1981) suggestion that a child takes on the role that her parent has unconsciously assigned her.

As part of the theme "Child's Well-Being Violated and Neglected", the women in this study frequently

mentioned that their needs were ignored during their
cnildhood. In addition, Sharon and Merle reported
ignoring their own desires. Firestone and Catlett (1981)
indicate that when parents are emotionally needy, the
child's need for love and security become a threat to the
parents' defenses. The participants' needs were
discouraged, and they felt guilty for wanting love and
security. Just as Firestone and Catlett (1981) suggest,
neither they nor their mother wanted to know that their
mother was an inadequate parent, so each participant
behaved in a way that did not require their mother's
love. It is possible that, just as Firestone and Catlett
(1981) suggest, the participants' roles as children came
from a kind of unconscious collusion between themselves
and their mothers.

As part of this sa..e theme of "Child's Well-Being is
Violated and Neglected", the participants in this study
stated that they mourn the emotional loss they
experienced during their childhood. They all described
that their mothers were emotionally unavailable to them
as children and continue to be unavailable to them as
adults. Merle declared, "I didn't have a childhood.
still feel cheated. I don't call that a childhood at
all." They all deeply desired to be closely connected
to their mothers.

Rachel and Merle indicated that their mothers

violated their psychological boundaries by shaming them.
According to Bradshaw (1990), these women's openness and
trust would have been deadened by this shame and the
feelings and needs, which they were shamed for
expressing, would become shameful to them. They may no
longer be able to express their true selves without
shame. In support of Bradshaw (1990) assertion, Merle
expressed shame, and Sharon expressed fear over her
current emotional condition. From Bradshaw's (1988,
1990) work, one would expect these women to parent
themselves the way they were parented, with very little
compassion for their own needs.

All of their descriptions support Bradshaw's
(1990) assertion that when a child's needs remain unmet
the emotional energy to progress through each stage of
emotional development is not available, and the child
will not have the resources necessary to master the next
stage of development. All four participants expressed a
deep yearning to be nurtured as children and as adults.
That yearning has not yet been satisfied and is reflected
in the theme "Child Seeks Nurturance Not Received Form
Mother". Merle cried, "Even doing the best I can, I
still can't seem to get it. I feel retarded (crying)...
I do not feel like I am grown up." According to Bradshaw
(1990), the participants' sense of emotional loss may be
a developmental loss due to the lack of emotional support

from their mothers.

Each participant closely followed her description of her intense emotional struggles in childhood with her need to suppress her negative feelings, which illustrates the theme "Emotional Struggles in Childhood and Adulthood". According to Miller (1981) it is common for women who have gone through mother-daughter boundary violation to experience intense loneliness in their lives as children and adults.

Notably, both Merle and Sharon reported having had difficulty in their adult lives with close adult relationships, and all participants reported that relating to older adult women is difficult for them demonstrating the theme "Interpersonal Difficulties". Miller (1981) indicates that people who have gone through such an experience are often depressed, lack a sense of meaning and have difficulty in their intimate adult relationships.

According to Erikson (1968), children need to distance themselves from their parents during the *Industry versus Inferiority* stage of development. Children of school age are eager to learn and participate in peer group activities, but if they have not resolved previous crises, they may still want attachment to mother more than knowledge, or they see themselves as inferior to their peers. As children, Sharon and Merle reported

being shy, and Merle reported being afraid and feeling inferior in social situations. This fear of social situations reflects the theme "Interpersonal Difficulties".

The theme "Emotional Struggles in Childhood and Adulthood" illustrates the emotional turmoil these four women endured. According to Miller (1984) "to have one's helplessness preyed upon by a person one loves, leads to the interlinking of feelings of love and hate" (p. 160). Merle described having a love-hate relationship with her mother. Merle, Rachel and Sharon all reported feeling anger toward their mothers. The women commonly talked about feeling anger toward their mothers just before or after describing how helpless and despondent they felt as children. All of the participants described a strong desire to escape their childhood environment but were unable to leave. Merle and Rachel described feeling trapped and miserable. In addition, all participants said they realized the injustice of their situation during their childhood but were helpless to change it. The combined effect of the realization of being "preyed upon", feeling angry and being helpless to change the situation doubtlessly left these three participants feeling hopeless.

"Distorted and Lowered View of Self" is the theme which describes what Miller (1981) suggests is a fragile

sense of self. Merle provides an excellent example of
Miller's (1981) statement. Miller (1981) suggests that
despite all their positive attributes, these children as
adults tend to have a fragile sense of self and find
fault with themselves easily.

> I guess I just feel so flawed, and I know it's not
> true. It's just the way it is... I just feel so
> bad, so wrong. I have a very hard time believing
> that (God) could care for me... fear (shudder)...
> It is not what you do, it's what you know, and I
> only know bad things about myself.

Miller (1981) asserts that these children as adults
often have no concept of their true needs and do not
consciously experience feelings of their own. Merle's
responses indicated her uncertainty of her feelings; both
she and Sharon remember pushing their needs and desires
from their awareness as children.

Notably, all four participants expressed being
emotionally depleted by their mother. The theme "Child
as Emotional Nourishment", abstracted from their
experience, lends support to the many theorists who have
suggested this idea of the child being the parent's
emotional nourishment. Bradshaw (1990), Firestone and
Catlett (1981), Miller (1981) and Minuchin et al. (1978)
all alluded to this idea. Bradshaw (1990) states that
parents "may be angry at their child's neediness or will
try to get their own needs met by making their child an

extension of themselves" (p.34). Rachel, Sharon and
Merle all described that their mothers protested strongly
when they attempted to meet their own needs. Their
mothers did not respect their individual needs and
desires. Rachel described how her mother wishes were
paramount and hers were irrelevant. "I could do things
that she wanted, even if I did them poorly and got into
trouble, but I could not do something I was interested
in, if she wasn't."

Although Mahler's (1975) separation-individuation
model is helpful in illuminating the transformations that
need to occur for men to separate from fusion with their
mothers and individuate by developing their own unique
characteristics, such a model is not as helpful in
describing women's identity development. Gilligan's
(1982) model of women's identity development provides a
more comprehensive understanding of the transitions that
occur in the development of women.

Gilligan's (1982) research has shown that women
develop a sense of their identity through relationships.
The first stage of women's development begins with an
orientation to individual survival and self-interest.
The transition from the first to the second stage occurs
as women see this earlier orientation as selfish. During
the second stage of development, emphasis is on
connection and interdependence where women view self-

sacrifice as goodness and value others' needs over their own desires. Transition out of this second stage is characterized by an exploration of separation and individuation, which recognizes the importance of self-care. It is important to note that if a woman is hindered from making the transition from the second to the third stage of development, she will not consider her needs as important as the needs of others around her and will neglect her own needs in order to care for those around her. Finally, in the third stage women are able to see their contributions as having equal importance to those of others and strive for an effective balance between self-nurturing and caring for others.

The data fit better with Gilligan's (1982) than with Mahler's (1975) model. It is important to note that in Gilligan's (1982) model, the final stage is a balance between appreciation and care of self and care of others. Jill, Sharon and Merle struggled with this transition from stage two to stage three. As each woman moved away from caring sacrificially for her mother, she sought out other people and sources of help from which to draw strength. Jill, Sharon and Merle all reported finding mentors in their lives who nurtured and loved them. Rachel described her husband as someone from whom she drew strength and someone to whom she turned to protect herself from her mother's biting words. In fact, as part

of the theme "Child Seeks Nurturance Not Received From Mother", all the women described either their husbands or male friends as people to whom they turned for refuge from their mother. Rachel and Jill described their husbands as people who loved and nurtured them. Notably, Sharon and Merle described turning to God to find the encouragement and love that they never received from their mothers. Making the transition from Gilligan's (1982) stage two to stage three for these women required encouragement and love from others. They needed this emotional support from others, in order to find the strength to stop caring only for their mothers and begin to show care toward themselves.

The theme "Separation and Individuation" describes the participants' desire to be different from their mothers. They wanted to go beyond Gilligan's (1982) first stage of self-preservation, and progress to the higher stages of feminine identity. Rachel and Sharon expressed that they needed to protect themselves from their mothers' consuming selfishness by emotionally distancing themselves and keeping their relationship largely social, not discussing their true feelings.

The theme "Coping With Fear" outlines how they feared the power their mothers had over them and how their mothers tended to use this power hurtfully. This distancing is part of the transition from Gilligan's

(1982) stage two to stage three, which involves separation and individuation. For Merle, Rachel and Sharon the process of caring for their own boundaries has been terribly difficult. Merle described feeling emotionally delayed and unable to learn the emotional lessons of childhood. Rachel described feeling angry that she had to rebuild what her mother had depleted for so many years. Sharon said she felt completely alone in life.

The theme "Accepting Mother's Limitations and Life Influence" describes how the participants' adult lives continue to be adversely influenced by their mother's violation of their boundaries. Rachel continues to use her mother's perfectionistic standards to judge herself. Jill feels used when she considers how she continues to care for her mother and how her mother manipulates her. Sharon feels guilty about starting a life of her own and caring for her own needs. Although her mother is deceased, Merle continues t struggle with viewing herself as having low human worth, the same way she felt her mother treated her.

The theme "Separation and Individuation" describes how Jill and Merle worked hard to parent their children differently than their mother had parented them. Merle specifically reported not burdening her son with adult concerns, and Jill reported encouraging emotional

openness with her children and being available to them in their times of anger and sadness as well as joy. Both women described their well-developed ability to care for their children. The description of their parenting efforts supports the assertion that they had progressed to Gilligan's (1982) stage two concept of sacrificial caring of others. These women's identities were connected to how they cared for others.

"Kinesthetic Response to Childhood Memories" was one theme expressed by all participants that Lowen (1971) also talked about. Just as Lowen (1971) suggests, even though Rachel, Jill and Sharon did not show any overt sign of emotion, they all reported feeling tension in their bodies, especially in the upper chest and neck area, when they recounted their painful childhood memories. Interestingly, when discussing their current relationship with their mother, they reported that the tension in their bodies had subsided. Perhaps, the delay between when they began talking about their relationship with their mother in their childhood and their current relationship with her gave them time to relax. Another explanation, and one that is suggested by Lowen's (1971) work, might be that their adult relationship with their mother was not as painful to relate as their childhood relationship with her.

Reflecting on the four women's total experiences it

is clear that although theywanted to go beyond their mother's level of self-preservation, they still desired to be connected to her, even though for some such a connection was not feasible. For example, Jill went for psychotherapy in hopes of somehow reaching out to her mother and continues to care for her mother's physical and emotional needs. Sharon also continues taking care of her mother and feels an obligation to do so. All four participants regretted that they would likely never be emotional equals with their mothers and, therefore, never have the close connection for which they yearned.

Summary

The period of childhood is a crucial time for building psychological boundaries. By violating their boundaries, the participants' mothers hindered them from developing their own psychological boundaries. As children they felt burdened, alone, afraid and trapped. As adults, they continue to struggle to repair and manage the damage they suffered in childhood. The impact that mother-daughter psychological boundary violation had on the women's lives can be summed up by stating that the women in this study had progressed to Gilligan's (1982) stage two. They were sacrificial caregivers but had difficulty making the transition to stage three, a balance between self-nurturing and nurturing others. They found it difficult to care for themselves

differently than their mothers had cared for them.

Hancock (1989) further explains women's development and how it relates to the mother-daughter bond. She states,

> What women want to do in relation to their
> mothers is perhaps best summed up by the many
> dictionary meanings of the word reckoning.
> They want to render the account, settle the
> debts that left them owing. They want to
> loosen the grip of old entitlements to
> calculate the value of the relationship... They
> want to count on the tie, to rely on it,... as
> full participants in a mutual, reciprocal
> attachment... They want to... set their compass
> and find their position from that relationship.

Hancock's (1989) work nicely summarizes the experiences of these four women. What they wanted desperately to do was to change their tie with their mothers so that it was a more mutual reciprocal bond. This was the dilemma that these women faced. The connection that they yearned for was too painful or too emotionally costly for them to endure. Therefore, they faced the disparaging dilemma that they could either continue be emotionally used and abused or emotionally disengage themselves from their mothers.

It is a credit to these four women to note that

despite this unsettling dilemma, each explained parts of
their lives in which they were developing and moving
slowly towards Gilligan's (1982) stage three of women's
development. Rachel had confronted her mother with the
fact that she had been sexually abused by her brother.
Although she was hurt by her mother's refusal to consider
her charge, she did not back down from her declaration.
This action demonstrates her willingness to begin to care
for her own integrity and not just appease her mother by
conforming to her wishes. Jill's decision to parent her
children differently, despite her mother's active
interference, demonstrates her assertion of her
uniqueness. She determined to uphold the integrity of
her parenting decision rather than avoid offending her
mother. Rachel's decision to move away from her mother
despite her mother's protesting that she would have no
one to look after her and would not be able to endure the
separation, shows her willingness to begin to care for
her own need to explore her world as a young woman and
build a life that is uniquely her own. Merle's decision
to parent her son differently than her mother had
parented her was one area in which she took great
satisfaction. This assertion of her unique ability to
care for others also suggests a beginning of a transition
to Gilligan's (1982) stage three. Despite the fact that
these women's mothers were not emotionally available for

them to transform their mother-daughter tie into a study

reciprocal bond, they managed to progress in other areas

of their lives and progress in the development of their

feminine identities.

Personal Reflection

I noticed upon reflection that all of the relevant

presuppositions I held previous to this investigation

were supported by the data.   Since these presuppositions

came from my own observations and family experience, it

is rather confirming that the participants' descriptions

concur with my own presuppositions.   This may reflect the

social consensus that exists regarding this topic.

Another explanation of the agreement between my

presuppositions and the analysis of the data is that my

biases influenced the data resulting in confirmation of

my previously held beliefs.

However, the findings of this study go beyond my

presuppositions.   While it is true that seven of the

presuppositions that I held previous to this

investigation are among the themes that the participants

shared, there are thirty-two other specific themes that

emerged from the data.   Although anger towards mother,

uncertainty of feelings, difficulty in romantic and close

relationships, poor self-image, shyness as a child,

perception of marital instability and being the eldest

sibling were all commonalities that emerged from two or

more of the participants' descriptions, as well as being presuppositions that I held, there are more than four times as many themes that emerged which I did not presuppose.

Despite the fact that my presuppositions were also themes that emerged from the data, the vast majority of the important themes were not part of my presuppositions. In addition, when I returned to each participant with my analyses, not one of them disagreed with the list of themes that emerged from their description. I suspect that another researcher's analysis of the same data may a few reveal different themes, but I am convinced that many would be similar.

Since the goal of this investigation is generalizable reflective subjectivity, the fact my seven presuppositions were supported by the data is encouraging. It suggests that there is a social consensus about the reality of having one's psychological boundaries violated as a child.

Limitations of the Study

There are several limitations to this study. The results of this study represent only women's experience. Although it is possible that some men may relate to these four women's experiences, it is unknown which themes would be most likely to be shared by men. Also, the women in this study are a carefully selected group of

women. They have all been through or are currently in
psychotherapy. This exposure to psychotherapy helps
explain their ability to articulate their experience and
their feelings in ways that may not be common to all
women. The women in this study are all Caucasian, middle
class women. How well people from other racial and
socioeconomic backgrounds relate to their experiences is
unknown. Finally, empathic generalizability is limited
by the fact that they are alike in race and socioeconomic
status.

Suggestions for Healthy Boundary Development

Given the common themes that emerged from this
study, I have some suggestions for parents,
psychotherapists and teachers which may facilitate the
development of healthy psychological boundaries in
children. First of all, the discussion of adult concerns
need to take place between adults and not between an
adult and a child. Jill, Sharon and Merle all mentioned
feeling burdened by their mother's "dumping" adult
concerns on them. Adult concerns include marital
problems, concerns about pregnancy, interpersonal
conflicts with other adults and financial concerns.
Second, according to the descriptions in this study,
children need their own space and their own belongings
over which they have control. Third, they need to have
time to play with their peers and be encouraged in their

socialization efforts. Fourth, they also need to know
what they are responsible for (their chores, their space
and schoolwork) and what they are not responsible for
(their parents' behavior and feelings). Fifth, the women
in this study described their need as children to feel
loved and to be nurtured. More specifically, children
need to be affirmed, to be complimented on their
achievements and strengths. Sixth, they need to have the
assurance that they can come to their mother without
having to fear her unpredictable wrath. Finally, these
four women mentioned the fact that they wished they knew
their mothers as people. Mothers whose psychological
boundaries are strong enough to allow emotional closeness
to their child without becoming dependent on the child
can offer this closeness for which the participants in
this study longed. Children who are emotionally close to
their mothers without having their psychological
boundaries violated will likely develop healthy
psychological boundaries that allow for intimacy in later
life.

Implications for Education and Psychotherapy

It is important for educators to note that often
children will seek out other mentors who give them the
encouragement and nurturance they need. According to
Jill's description, the efforts of her mentoring teachers
became her source of strength and nurturance. Educators

may not have the luxury of seeing the results of their efforts first hand, but, according to the women in this study, the kindness shown to them by adults outside their immediate family provided them with the emotional strength they needed to continue their journey.

Psychotherapists who encounter clients with many of the same concerns that were common to these four women, such as hyperresponsibility, feeling obligated to care for their mothers, memories of having their ownership boundaries violated, childhood memories filled with a sense of loneliness, feeling trapped, burdened and guilty may discover that these clients have had their psychological boundaries violated by their mother. Therapists need to be sensitive to clients who need healing in this area. Also therapists who are counselling families with young children and adolescents need to be sensitive to the possibility that such boundary violation may be present in these families.

Future Research

Since men were not included in this sample, a future study could consider what impact gender has on this phenomenon. Whether or not mother-child psychological boundary violation occurs with more than one sibling in a family may also be considered. Birth order may also be investigated as a potential risk factor of having one's psychological boundaries violated by one's mother, since

three out of four participants were the eldest siblings in their families. Repetition of this study with participants from more diverse racial and socioeconomic backgrounds may increase the empathic generalizability of this study. Age of onset of the psychological boundary violation may have a profound effect on the future of the individual's life. A study which explores whether age of onset influences the consequences in later life would also be helpful for therapeutic endeavors. Finally, one question that arose from doing this research is why are women so emotionally needy that they need to reach out to their daughters to ease their neediness? This question is part of the larger issue of women's psychological development which needs conitinued research.

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Appendix A

The following is a sample of the process that was
applied to each of the participants' descriptions but for
the sake of brevity only a sample will be shown.   This
first table contains *first order clustering*.

Table 2

Thematic Abstraction of Participants' Experiences

**Excerpts from Transcribed   Two levels of Abstraction
Interviews**

Rachel's Quotes	Paraphrases	Themes
1) My mother wanted a girl so badly that she had left the nursery the same, between the three years that she had a stillborn daughter and when I was adopted.	Mother desperately desires a daughter.	Child wanted to meet mother's needs.
2) I think, possibly, that she had my life planned out before I even arrived.	Mother preplans daughter's life.	Child as extension of mother.
3) I was a puppet. She was the puppeteer. She pulled all the strings. I always did as I was told.	Mother controls daughter and daughter accepts her passive role.	Child as extension of mother.
4) I remember that my mother always wanted to be a dancer, so I got to take dance lessons.	Daughter lives a life her mother had wanted to live.	Child as extension of mother.
5) I remember that I could not go out	Daughter's social needs go	Child's needs are

and play with my friends because I had to practise dancing.	unmet, while she obeys her mother's wishes.	ignored.
6) I never got to play with any of my friends. I was always separate from my friends. I never felt like I was one of them, because I always had to go home.	Daughter is socially isolated from her peers.	Feeling alone.
7) She used to pick all my clothes. She never asked me what I wanted to wear. I don't ever remember being asked what I wanted.	Mother makes all daughter's basic life choices for her.	Child's needs are ignored.
8) She even made us matching outfits; we'd go down the street in matching outfits.	Mother matches her daughter's appearance to her own.	Child as extension of mother.
9) She was over involved... She was always there, but she was always, always there. There was no separation.	Daughter remembers mother as ever present in childhood.	Child as extension of mother.
10) I don't remember doing things on my own. I don't remember having my interests.	Daughter as child did not have separate interests apart from mother.	Child's needs are ignored.
11) I could do things that she wanted (like the dancing), even if I did them poorly and got into trouble, but I could not do something I was interested in if she wasn't.	Daughter encouraged to live the life her mother wanted regardless of the quality of her performance.	Child as extension of mother.

12) I (was) suspended from school for three days (and)... also grounded for nine months. However, I was still allowed to attend this youth group that she supported. But that was my social life anyway, so she really hadn't taken anything away from me.	Mother tightens her grip on daughter to ensure conformity to mother's constructed image.	Feeling trapped.
13) It was a really long term grounding. I was in grade 10, so it really minimized my social life.	Mother's control limits daughter socially in adolescence.	Feeling trapped.
14) If I really thought about it I could get angry about it..	Conscious of restrained anger toward mother.	Anger towards mother.
15) ... but I don't think about it a lot.	Pushes away childhood memories of mother's control.	Emotional suppres-sion.
16) I think I just decided that what I had done deserved punishing, so I just accepted it. I accepted the punishment.	Daughter passively accepts her mother's judgement.	Adoption of mother's standards.
17) Let me out.	Desire to escape from mother.	Longing for freedom.
18) I do not remember feeling much of anything as a child.	Remembering her childhood kindles daughter's anger in adulthood.	Emotional suppres-sion.

Appendix B

The following is a sample of *second order clustering*
applied to each of the four participants' descriptions.

Table 3

Second Order Thematic Description of Rachel's Experience

Thematic Clusters	Generalized Descriptions
Child wanted to meet mothers needs: **1,23**	Mother desires a daughter through whom she can live and meet her needs. Mother never affirms daughter's accomplishments but instead uses her daughter's exploits to boost her own social image.
Child as extension of mother: **2-4,8,9,11,20 - 22**	No distinct boundary between mother and child. Child becomes the vessel through which the mother lives out her unfulfilled dreams. Mother controls daughter's life as if it was her own; she matches their appearances. Child has no space that is safe from

mother. Child feels that she never was allowed to have her own childhood and feels angry that she can never get it back.

Feeling alone:

6

Child does not have room left in her life for peer relationships. Child feels like an outsider among peers.

Feeling trapped:

12,13

Mother's hold on child's life is so strong that the child sees no way to escape from mother. Mother's grip tightens if child moves slightly away.

Longing for freedom:

17

Child desires to escape from mother's control.

Emotional suppression:

18

Childhood feelings are put aside to aid survival. Child accepts her mother's treatment. When angry feelings suppressed in childhood are remembered, adult's anger is rekindled.

Anger towards mother:

14

Child feels anger toward mother for her miserable experience in childhood.

Child's needs are ignored:

5,7,10

Mother's wishes are complied with, but child's needs go unmet. Child's own desires are not taken into consideration in any of mother's decisions concerning the child.

Appendix C

The following is a sample of *third order clustering* which was applied to all four participants' descriptions.

Table 3

Third Order Abstraction of Rachel's Clustered Themes

1. Child becomes emotional nourishment which mother uses to meet her needs

    - Child wanted to meet mother's needs.

    - Child as extension of mother.

    - Mother protests as child meets her own needs.

    - Recovering from emotional depletion.

2. Child's well-being is violated and neglected

    - Child bears consequences of mother's actions.

    - Child's needs are ignored.

    - Emotionally unavailable mother.

    - Violation of child's ownership boundaries.

    - No ownership boundaries.

3. Emotional struggles in childhood and adulthood

    - Feeling alone.

    - Emotional suppression.

    - Longing for freedom.

    - Imprisoned.

    - Feeling helpless.

    - Feeling powerless.

- Anger towards mother.

4. Differentiation form mother and developing uniqueness

- Resisting mother by inaction.

- Distancing from mother.

- Spouse as refuge.

- Developing personal boundaries.

- Rebuilding.

5. Accepting mother's limitations and life influence

- Perpetual inequality.

- Pity of mother.

- Adoption of mother's standards.

- Appeaser of adults.

6. Realization of injustice

- Realization of injustice.

7. Coping with fear

- Spiritual fear.

- Fear of mother.

8. Kinesthetic response to childhood memories

-Childhood memories evoke physical tension..

Appendix D

Participants' Information Sheet

Topic: Adult Memories of Mother-Child Relationships

Researcher: Deborah R. V. Herrewynen

I am a masters student at the University of Alberta in the counselling program in the department of Educational Psychology. I have selected this topic of adult memories of mother-child relationships because of personal and professional experience. In my recently completed family counselling practicum, I became particularly interested in mother and child relationships.

Necessary Characteristics for Participants in this study:

If you are eighteen years of age or older, can vividly remember your childhood relationship with your mother and have received or are receiving psychotherapy concerning your relationship with your mother, I am requesting that you consider participating in this research study.

Purpose and Description of the Study:

The purpose of this study is to obtain a vivid description of the child's perspective of the mother-child relationship as an adult. This study's approach is

to describe this mother-child relationship. I am
interested in the your childhood memories of your
relationship with your mother and how your relationship
with her as influenced you as an adult. I am not
interested in what you have read about mother-child
relationships, what you think you ought to have
experienced or other people's opinions of your
experience. I will be asking questions such as:

1. What are the types of images that come to
your mind when you think about your childhood
relationship to your mother?

2. Would you talk about the feelings you
remember experiencing as a child in relating to
your mother?

3. How does your body feel when you talk about
your childhood relationship to your mother?

4. How did your relationship with your mother
affected your view or opinion of yourself as a
child?

5. How did your relationship with your mother affect
your sense of relatedness to your childhood
world?

6. How did your relationship with your mother
affect what your did as a child?

I will be asking similar questions about how your
relationship with your mother has influenced you as an

adult. When I contact you during the next week, you may let me know if you agree to participate in this study. At that time, if you agree to participate in this study, an appointment will be scheduled to meet at the Education Clinic at the University of Alberta. The clinic is located in the north part of the Education building in room 1-135. You are being asked to meet with me at least three times. The first interview will be fifteen to twenty minutes long. The second interview will be approximately one hour long and will be audio recorded and transcribed. The third interview will be fifteen to twenty minutes long. You will be given an opportunity to read a summary of the results and recommend ways to make the analysis more accurately reflect your experience.

You may refuse to answer any of the questions during the interview or choose to withdraw from the study at any time without providing a reason. Although direct quotations from the second interview will be included in the study, I will guarantee your anonymity by using pseudonyms and omitting any identifying information. Transcripts and audiotapes will be held confidentially. Only my thesis supervisor, Dustin T. Shannon-Brady PhD., and I will have access to them. The audiotapes and transcripts will be destroyed when the study is completed. Finally, discussing one's relationship with

one's mother can be psychologically disturbing. If you feel that you require psychotherapy after discussing your relationship with your mother, I will refer you to several local psychotherapists with consideration given to your financial situation. Thank-you for considering to take part in this study.

Appendix E

Consent to Participate in Study

This is a phenomenological inquiry into the nature
of a certain type of mother-child relationship. Both
your memories of your childhood relationship with your
mother and your current relationship with her are of
interest. A phenomenological inquiry requires examples
of people's lived-experience. This type of inquiry is
not interested in a person's knowledge or opinion about
the phenomenon, nor is it interested in what other people
have said about the phenomenon. It is solely concerned
with the person's own lived-experience with the
phenomenon. Or in other words, it is concerned with the
person's experience with the phenomenon as it happened at
the moment it happened, and how that phenomenon affects
the person's experience in the present moment.

The information contained in the study will not
reveal your identity. Pseudonyms will be used. Although
direct quotations will be used, identifying information
will be omitted from the study. The interview will be
audiotaped, but at the end of the study all personal
identifying information about you, including the
audiotape will be destroyed. My thesis supervisor and I
will hold all information that you give confidential.
Also, you have the right to discontinue your
participation in this study at any time without having to

justify your reason for termination.

Discussing one's relationship with one's mother can be difficult. If you find that during the interview that you discover some sensitive material that needs further therapeutic attention, I will refer you for counselling, unless you are already in counselling.

Discussing your relationship with your mother could prove t⸜ be enlightening in a positive way. You may also feel a sense of accomplishment from having discovered something about your mother-child experience.

This study involves three one-on-one interviews. The first interview will be informal and will take fifteen to twenty minutes. I will discuss the nature of the study with you, the type of information required from you, the confidentiality of the information that you give me, your right to opt out of the study at any time. During this interview you will be asked to sign this consent form, if you agree to participate in the study. The second interview will be audio recorded and take approximately one hour. During this interview I will ask you to discuss your current relationship with your mother and your memories of your childhood relationship with your mother and how this currently affects you. During the third interview you will have an opportunity to examine my interpretation of the analysis of the information from the second interview and give your

feedback concerning the validity of my interpretations.
The duration of this third interview will be fifteen to
twenty minutes.

Having read the above information regarding this
study and your participation in it and if agree to
participate, please sign below. Thank-you for your
participation in this study.

X_____   Date

_____

      Print name   Deb Herrewynen

                               (researcher)

Appendix F

Preamble

The following questions serve as guidelines for the research interview. However, in order to follow the uniqueness of each research participant's experience, I may adapt my questions to pursue relevant material emerging during each individual interview.

Interview Questions

1. Would you discuss the nature of your relationship with your mother during your childhood?

    A) What are the types of images that come to your mind when you think about your childhood relationship with your mother?

    B) Could you tell me about the kinds of things that you tell yourself about your childhood relationship with your mother?

    C) Would you talk about the feelings that you remember experiencing as a child in relating to your mother?

    D) Describe how your body feels when you talk about your childhood relationship with your mother.

    E) Can you tell me how your relationship with your mother affected your relatedness to your childhood world?

    F) Would you describe how your relationship with your mother affected your sense of relatedness

to yourself, or your opinion of yourself as a child?

G) How did your relationship with your relationship with your mother affect what you did as a child?

2. Discuss how your relationship with your mother affects you as an adult?

A) What images come to your mind when you think of your adult relationship with your mother?

B) What images do you have of yourself in relation to your mother?

C) What do you find that you say to yourself about your adult relationship with your mother?

D) What feelings are associated with your adult relationship with your mother?

E) What do you experience in your body as you talk about your current relationship with your mother?

F) How has your relationship with your mother affected your sense of relatedness to your adult world?

G) What actions do you find yourself doing now as an adult that you believe are related to your relationship with your mother?