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Human Service Professionals' Perceptions of Parentification

Monica Christa Whitson
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Walden University

College of Social and Behavioral Sciences

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Monica Christa Whitson

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Walden University
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Abstract

Human Service Professionals' Perceptions of Parentification

by

Monica Christa Whitson

MS, Walden University, 2019

BS, University of Phoenix, 2015

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

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Human Services

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Abstract

Social researchers coined the term *parentification* to describe parent–child role reversal and inappropriate familial roles such as adult-like tasks children are held accountable to complete. Previous researchers have not addressed two issues: (a) whether human service professionals [HSPs] adopt the destructive/maladaptive viewpoint or adaptive/resilient viewpoint surrounding parentification and (b) whether HSPs' preconceived views and attitudes impact service delivery to parentified persons. Obtaining the perceptions of HSPs may allow more insight into what interventional methods need exploring when working with those individuals. The purpose of this generic, qualitative inquiry was to explore the perceptions of male HSPs regarding parentification and how these perceptions affect human service delivery. Data were collected through semi structured interviews with eight HSPs and analyzed by the use of in vivo coding, to search for themes and patterns. Six themes emerged from the analyzed data: Parentification Involves a Learned Understanding of Roles, Responsibilities, Instrumental Tasks, and Parenting Styles, (2) Parentification can be Positive and Negative, (3) Parentification is Often an Outcome of Changes in Mental Health, (4) There May be a Lack of General Interventions, (5) Interventions need to be individualized to meet specific needs, and (6) Human Service Delivery Process Needs to Consider Adding Potential Standard Trainings and Interventions. This research may contribute to the HSPs' knowledge base, enable them to recognize and identify parentified persons and individual needs, and create policy and practice recommendations for interventions to promote healthy development.

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Dedication

I dedicate this dissertation to my children, DeAngelo, Taijai, and Isaiah, who have inspired me to be the best version of myself. I love you beyond measure. I would also like to dedicate my work to my grandchildren, Jaylin and Jacoby, whose smile gives me reason and keeps me grounded, my favorite aunt, Cynthia Wright, who has held my hand through all of my storms, my best friends, Georgeanna Logan, and Genevieve Vance, who have always believed in my ability to achieve and conquer, my lifelong mentor, Holly Broadwater, who has shown me nothing short of love and kindness, and my parents, Michael Whitson and Angela Wright, for instilling in me morals, compassion, and wisdom.

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Chapter 1: Introduction to Study

Parentification is the term used to describe parent–child role reversal, which describes when children are held accountable for adult-like tasks (Cho & Lee, 2018; Van Parys et al., 2015). There is a lack of qualitative studies and research that explored whether human service professionals [HSPs] adopt the destructive/maladaptive viewpoint or adaptive/resilient viewpoint surrounding parentification and whether this preconceived viewpoint impacts service delivery to parentified persons. Thus, I explored role reversal among parents and children and how this was interpreted by professionals as either abusive, typical, and/or expected in some cultural settings. This research may expand awareness of potential destructive and adaptive features parentified persons face. This research may also enhance larger-scale social change by promoting intentional, individualized services for special populations. HSPs may also gain in-depth insight of parentification service delivery for those affected. Further, the study may affect future parentification studies by advocating awareness of the destructive and adaptive features. In Chapter 1, I discuss the study and its relevance and social change implications, the research problem, the gap in current research, the purpose of the study, justify the chosen theoretical framework, and the nature of the study.

Background

Parentification consists of children assuming adult-like responsibilities by creating a subjective perspective of boundary dissolution and an apparent role-reversal (Cho & Lee, 2018; Madden & Shaffer, 2016; Saha, 2016). Parentification falls under two categories: instrumental and emotional. Instrumental parentification consists of taking on

adult roles and performing household tasks, such as paying bills, cooking, cleaning, and supervising younger siblings. The second type is emotional parentification, which includes companionship for the parent or siblings, acting as a mediator for presented household issues, and the act of parents or guardians confiding in a child in a therapeutic manner (Sullivan et al., 2018; Tsai et al., 2016; Yew et al., 2017). Parentification is a single construct because of the various accompanying elements justifying its existence, which includes single-parent households, mental health issues of parental figures, addictions, divorce, and customariness (Tsai et al., 2016; Van Loon et al., 2017).

In addition to two categories of parentification, researchers have also identified two viewpoints: destructive and adaptive (Arellano et al., 2018; Borchet et al., 2016; Cho & Lee, 2018; Madden & Shaffer, 2016). Adaptive viewpoint speaks to the possible resilience and competence in the individual in question (Sullivan et al., 2018; Tsai et al., 2016; Van der Mijl & Vingerhoets, 2017). However, the destructive perspective expresses the potential for poor interpersonal and intrapersonal skills as well as missing milestones and possible mental health implications in the future (Baggett et al., 2015; Tsai et al., 2016; Sullivan et al., 2018).

Based on the literature, the person's microsystem must be considered when determining whether the construct fosters adaptive or destructive responses to the role reversal (Nuttall, 2015; Tsai et al., 2016). The cultural aspect of the family dynamic should also be a deciding factor (Hooper et al., 2015; Tsai et al., 2016). Additionally, there is a need for HSPs to pay closer attention to the developmental stages of the parentified person and any affects the phenomena has rendered since the onset of

parentification takes place in the earlier stages of life (Borchet et al., 2016; Burton et al., 2018). Because the literature has shown various points of view, the perspectives of the HSPs will be a great additive to the literature, making the study a needed one for social impact.

I identified three gaps while evaluating the literature: (a) a lack of qualitative studies on parentification, (b) no reviewed studies that included HSPs as study participants, and (c) no reviewed studies that applied the humanistic theoretical perspective. I also found no studies involving the perspectives of male human service practitioners or professionals as it relates to parentification and human service delivery. However, knowing and understanding the perspectives of HSPs may have a huge impact on human service delivery. The results of this study may enhance social change by promoting intentional, individualized services for special populations, and HSPs may gain in-depth insight of parentification regarding service delivery. This study may also impact future parentification studies by advocating awareness of destructive and adaptive features.

Problem Statement

Previous studies have not addressed whether HSPs adopt the destructive/maladaptive viewpoint or adaptive/resilient viewpoint and how those preconceived views and attitudes impact service delivery. There is also a lack of qualitative studies completed on parentification. Further examination of parentification from the perspective of HSPs may provide other HSPs insight as to why parentified adults and children may require interventional methods and modified approaches.

Practitioners may use professional abilities to foster uniformity and implement human service delivery efforts that are more person-centered, individualized, with a lens of sociocultural competence concerning parentification (Khafi et al., 2014; Patel, 2015).

Purpose

The purpose of this generic, qualitative inquiry was to explore the perceptions of male human service practitioners regarding parentification and how these perceptions affect human service delivery. Previous studies have included topics such as developmental significance of parentification, language brokering, the effects on childhood attachment, expectations about children's family obligations, and the young adults' reflections on growing up. But more qualitative research is needed with HSPs as study participants. This research may contribute to the HSPs' knowledge base, enable them to recognize and identify parentified persons and individual needs, and create policy and practice recommendations for interventions to promote healthy development and a sense of self for clients. This study may fill a national and international research gap regarding cultural competence and setting standards for effective human service delivery.

Research Questions

Research Question (RQ) 1: What are the practitioners' perceptions of parentification?

RQ 2: How do the practitioners' interpretation of parentification impact human service delivery?

Theoretical Foundation

In this study, I applied humanistic theory, which Rogers (1946) developed as a

person-centered approach as opposed to an expert-directed approach because it yields better outcomes for clients, and there is less resistance to the desire of change (Miller & Moyers, 2017). Humanistic theory fits this study because this person-centered approach affords parentified persons the ability to express need for change, which affords the HSP the ability to assist them as clients. Motivational interviewing is a therapeutic tradition that was pioneered by Rogers in the belief that clients have the ability and desire to make life changes and modifications; however, the client is the expert of his or her own life (Miller & Moyers, 2017). Rogers posited that constructive personality changes could be fostered by the assistance of a second party through positive regard (i.e., HSPs; see Miller & Moyers, 2017). This person-centered approach allows the client to have full autonomy without judgment.

Nature of the Study

Generic qualitative inquiry was the most appropriate for this study for several reasons. First, generic qualitative research involves understanding the socially constructed and circumstantial context of humans and those accompanying experiences and aims to describe the actual phenomena (Percy et al., 2015). Second, generic qualitative research allows for the subjective exploration of a participant's perspective, and it is not guided by any pre-established assumptions, charging the researcher with the task of verifying themes and patterns that may emerge from the data (Anyaka, 2017; Winston, 2017). Next, the generic qualitative approach aligned with the RQ by opening dialogue through interviews with the study participants, HSPs. Finally, generic qualitative inquiry accommodates the researcher who may have some knowledge of the

research interest, does not require the researcher to generate an abundance of new knowledge about the subject at hand, and guides the ability to understand how research subjects view the world around them (Kennedy, 2016; Percy et al., 2015; Winston, 2017).

Eight HSPs were interviewed to discuss perspectives on parentification and the effect on human service delivery. Participants were recruited by posting flyers on community boards, online and in public, in public parks, social media sites, public bus stops, and given out to community patrons passing by. Purposive sampling was also used in this study because it focused on the participants meeting a specific criterion for qualification (see Ravitch & Carl, 2016). A FreeConferenceCall was used to record and transcribe the interviews. Transcripts were presented in Microsoft Word, affording me the ability to search for codes and establish common themes that emerge from the interviews.

Definitions

Standard terms used in scholarly writing of parentification are *carers*, *role-reversal*, *emotional parentification*, *boundary dissolution*, *instrumental parentification*, and *Human Service Practitioners*. These terms are used consistently throughout the 25 sources reviewed.

Boundary dissolution: The seemingly diluted boundaries in the parent–child relationship where there is confusion as to what social roles the child and parent play within the household (Abir et al., 2017).

Carers: Minors who play a significant role and significant responsibilities within the family dynamic (Leu et al., 2018).

Emotional parentification: The emotional support the child provides to the parent, such as an active confidant (Khafi et al., 2014; Patel, 2015).

Human service practitioner: Defined as persons who deliver and promote needed services for those within their communities (“What is Human Services?,” n.d).

Instrumental parentification: tasks parentified children complete, such as cleaning, cooking, and taking care of their younger siblings (Arellano, Mier-Chairez, Tomek, & Hooper, 2018).

Parentified/Parentification: The act of adultifying a child (Nichols, 2016; Láng, 2016).

Role reversal: The child assuming adult-like tasks and parental roles and responsibilities in lieu of the demands within the household (Saha, 2016).

Assumptions

In this study, I made a couple assumptions. I assumed that participants of the study have adequate experience to speak to the topic and have been honest about meeting the criteria for the study. I also assumed that provided responses to my interview questions are as accurate and truthful as possible and align with work-related experience and perceptions.

Scope and Delimitations

I developed this study to explore the perceptions of male human service practitioners regarding parentification and how these perceptions affect human service delivery. Previous research has indicated a need for more qualitative studies. This generic qualitative study consisted strictly of male HSPs. I also only included service

professionals who have worked in human services for at least 3 years and have experience working with various populations; however, they were not required to have specific certifications. This study was a supervised, qualitative research project on a limited scale, and the transferability of the findings is to be determined by future researchers. The results of the study may also have implications for other helping professional disciplines.

Limitations

This study has several limitations. First, the findings may not be transferrable to other settings. Second, there was a potential for social desirability influencing the participants' answers during the interviews, and self-reported information may include subjective opinions and ideas (Anyaka, 2017; Winston, 2017). Third, purposive sampling has a specific criterion, as it minimizes and excludes other participants, and may foster potential bias (Palinkas et al., 2015). Fourth, a generic qualitative inquiry has few restrictions, and its validity may be questionable (Anyaka, 2017). Finally, HSPs may present parentified features as well, in return, present bias.

Significance

The literature I reviewed illustrated how parentification may have significant effects on those involved (Petrowski & Stein, 2016; Saha, 2016; Van Parys et al., 2015). This study may address future mental health studies, personal motivation studies, and child and family studies. The study may impact future parentification studies by advocating awareness of destructive and adaptive features. The study may also contribute to the literature by expanding the awareness of potential issues parentified persons are

faced with. This research study works to fill the gaps previously discussed by adding the HSP perspective. The results of this study may also enhance social change by promoting intentional, individualized services for special populations, and HSPs may gain in-depth insight into parentification regarding service delivery.

Summary and Conclusion

In this study, I explored the perspectives of HSPs concerning parentification and human service delivery. This study may significantly affect social change in the communities by promoting intentional, individualized services for special populations, and HSPs may gain in-depth insight of parentification regarding service delivery. The RQs addressed what the HSPs' perspectives are and how those perspectives impact human service delivery. In this chapter, I addressed the problem and purpose of the study, nature, theoretical framework, assumptions, scope, limitations, and the significance of the study. The next chapter of this study provides an exhaustive review of the literature. In Chapter 3, the data collection and analyses processes are outlined.

Chapter 2: Literature Review

The purpose of this generic qualitative inquiry was to explore the perceptions of HSPs regarding parentification and how these perceptions affect human service delivery. Currently, qualitative studies are scarce, and I found no literature examining HSP perspectives and the impact on human service delivery. The literature examined focused on various aspects associated with parentification, such as mental health and early interventions, negatives and positives during practice and research, and how the adaptive values of parentification is dependent on the closeness of the guardian/parental figure (Burton et al., 2018; Hooper et al., 2015; Petrowski & Stein, 2016). Many of the studies examined were cross-cultural and provided insight as to how other cultures view parentification. Earlier research also focused on identity development and parent-child relationships. For example, Jones and Wells (1996) found that parentification is a predictor of learned defense and coping mechanisms, mastered behaviors, and personality styles, and masochism, narcissism, and compulsiveness are related to boundary dissolution. Co-dependency and care-taker tactics are also features of parentification (Valleau et al., 1995; Wells et al., 1999). Parentification can also stem from workaholism, a compulsive trait (Carroll & Robinson, 2000), and students with low academic functioning are more connected to parentified tasks (Chase et al., 1998). Additionally, parentified females are less likely to explore meaningful friendships and dating because they are more in tune with the desires and needs of their parents or guardian (Fullinwider-Bush & Jacobvitz, 1993).

After an exhaustive review of the literature, I did not find any literature specific to

the perspectives of male human service practitioners and human service delivery. The literature reviewed contained both adaptive and destructive features of parentification. But none of them applied humanistic theory as a framework, and none utilized a generic qualitative methodology. The focus of this chapter is to further describe the problem as reflected in the areas of the literature and to elaborate on the purpose of the study, setting it within the context of the relevant past and current research. In this chapter, I further discuss the theoretical framework and the need for further research in this area.

Literature Search Strategy

The databases I utilized within the Walden Library included Ebscohost, ProQuest Dissertation Thesis Global, PsychInfo, and Science Direct. In this search, I used the keywords *human service professionals, social workers, counselors, mental health, human service delivery, parentification, carers, community worker, parent-child role reversal, role-confusion, parent-child boundaries and parentification, child carers, role-reversal, emotional parentification, instrumental parentification, boundary dissolution/violations, adaptive, and destructive*. I examined a total of 24 articles with publication dates primarily ranging from 2015 until 2020. After an exhaustive review of the literature, I did not find any articles or literature specific to the perspectives of male human service practitioners and human service delivery. The literature reviewed contained both adaptive and destructive features of parentification; however, none of them applied generic qualitative as a methodology or humanistic theory as a framework.

Theoretical Foundation

In this study, I applied humanistic theory, originated by Rogers as a person-

centered approach (Miller & Moyers, 2017; Moreira & Souza, 2017; Rogers, 1946).

Person-centered approaches yield better outcomes for clients, and there is less resistance to the desire of change. The person-centered approach is operational under the belief that the individual may be more susceptible to change if they are provided facilitated guidance (Ivie, 2018; Miller & Moyers, 2017; Moreira & Souza, 2017). For example, motivational interviewing is a therapeutic tradition that acknowledges that clients are the experts of their own lives, and they have the ability and desire to make life changes and modifications (Miller & Moyers, 2017).

Using a nonjudgmental approach, this framework capitalizes on the HSP's ability to help the client with recognizing options for change, potential improvements to their lives, promote self-determination, and connects the client's worldview with their future success (Gold, 2016; Miller & Moyers, 2017; Winston, 2016). It is imperative for the client to be viewed with unconditional positive regard, as a self-determining agent, and to have the autonomy to make life choices, only using the HSP as a guide or facilitator (Ivie, 2018; Joseph, 2019; Miller & Moyers, 2017; Rogers, 1992). This person-centered approach can allow parentified clients to have full autonomy without judgment and permits the HSPs application of empathic understanding. This theory also embraces a holistic viewpoint and assumes people are genuinely motivated to reach self-actualization or intrinsic growth (Gold, 2016; Winston, 2016). Personal gratification may be the intended result of the client; however, it may be too assumptive to believe that clients can meet all personal needs independently and may require guidance with recognizing and optimizing life choices (Gold, 2016). Rogers theorized that all persons have an innate

motivation or thrive to exist and function acceptably among peers (Moreira & Souza, 2017).

Early works on humanistic theory generally focused on the science of behavior of individuals; however, now it appears to be more focused on the individual's personal understanding, perspective, and experiences of the world (Elkins, 2009; Gold, 2016). The idea behind the humanistic approach is the notion of adjustments and personal development (Elkins, 2009). In the general literature on parentification, there is a wide array of frameworks and theories commonly used including object relations theory, emotional security theory, cultural-ecological framework, social constructivist, psychotherapy theory, Kuperminic theory, Boszormenyi-Nagi model, family systems theory, singular-interpersonal hypersensitivity model, and life course perspective. Because traditionally the humanistic approach focuses on the client's ability to find personal fulfillment through self-reflection, I chose it as the framework for my study. Humanistic theory as a person-centered approach can assist with guiding individuals towards success and increase their autonomy to make personal choices (Purswell, 2019). The theory relates to the RQ in that the questions are about human service delivery and how the perspectives of those persons providing services impact the overall delivery. This theory fits my study by providing a theoretical lens for HSPs to view parentified persons through and to grasp a deeper understanding of how positive interventions may assist clients in need of assistance with change. Adhering to one theoretical approach will aid in structure when assisting clients in need (Nover, 2018).

Literature Review Related to Key Concepts

Perceptions of the HSP who provide services to parentified persons are missing from the current literature. In this literature review, I cover literature on parentification, the potential for adaptation, destructive viewpoint, the types of parentification, and why the study may be pertinent for social change. Moreover, there are many strengths and weaknesses found throughout the literature. I employed the use of a field-tested, pre-approved interview guide to conduct the interviews. Previous literature revealed that related studies have used surveys, face-to-face interviews, web-based interviews, scales, self-reported questionnaires, case studies, direct observations, and inventories. Recorded interviews appear to be the best option for this study.

Parentification

Parentification is the distortion or dissolution of child–parent boundaries and may take instrumental or emotional forms (Arellano et al., 2018; Borchet et al., 2016; Cho & Lee, 2018; Madden & Shaffer, 2016). Emotional parentification pertains to the psychological comforts for the family, including siblings, guardians, and immediate parents (Sullivan et al., 2018; Tsai et al., 2016). An example of emotional parentification would be the act of the parentified child taking on the position of the household’s mediator and the emotional support person for the household. Emotional parentification may also yield adaptive or maladaptive features for different individuals. For example, Láng (2016) reported that providing emotional care as a parentified person was equal to the high levels of Machiavellianism in Hungarian men, but they did not find the same association in Hungarian women.

Early Work

Early work on parentification focused on family dynamics, mental health, addictions, psychosocial adjustments, relationship development, impostor feelings, and care-taking syndrome (Baggett et al., 2015; Shifren & Kachorek, 2003; Tsai et al., 2016). For example, Peris et al. (2008) found that marital conflict is highly and positively associated with poor outcomes such as friendship and relationship development. However, some parentified persons do not experience the negative effects of parentification; moreover, small amounts of parentification may benefit the parentified child (Hooper, 2007, Walker & Lee, 1998). Parentification may be beneficial as it fosters a sense of responsibility, resilience, accountability (Boszormenyi-Nagy & Spark, 1973). On the other hand, parentified persons may also experience adverse effects. For example, impostor syndrome is defined as the feeling that one has been successful in life due to pure coincidence and not solely on talent and personal abilities (Castro et al., 2004). Parentified persons with such impostor feelings often believe they are inadequate and inferior as compared to their counterparts; they are outwardly confident and do not believe that they are authentic beings (Castro et al., 2004). The feelings of authenticity may develop further and trigger potential mental health issues and addictions later in life. Yet seemingly dysfunctional behaviors may build on the resilience of a person (Walker & Lee, 1998).

Instrumental Parenting

Instrumental parentification refers to behavioral tasks, such as cleaning, cooking, and paying bills in order to effectively support the family (Sullivan et al., 2018; Tsai et

al., 2016; Yew et al., 2017). For example, if a child appears to be the disciplinarian to his/her siblings in the household although the adult caretaker is present, this child is providing support that the parent or guardian should be providing. This is a form of instrumental parentification. Studies have found that not all persons view parentification as destructive or adaptive; moreover, it is solely determined by the perception of the family member's perspective (Lansford et al., 2016). For instance, Petrowski and Stein (2016) interviewed mother-daughter dyads and found destructive and adaptive values of parentification appearing to be dependent upon the quality and closeness of the mother-daughter relationship. Borchet et al., (2016) explored the cohesion of Polish families and posited family cohesion and closeness is the determinant and predictor of the parentification effects. If the family appeared to be cohesive, the view on parentification appeared to be more positive.

Single-parent homes, homes with alcohol and drug abuse backgrounds, kinship care, and military families who move frequently are amongst the many households that can be affected by parentification (Napura, 2016; Sullivan et al., 2018; Van Loon et al., 2017). Napura (2016), conducted a study involving single mother households in Poland, where parentification is a factor and was better maintained with the assistance of a grandparent's support (kinship support); moreover, assisted with the overall quality of life for the youths in mention.

Sullivan et al (2018) assessed secondary data to illustrate instrumental parentification of military youths can be beneficial by making them more responsible and able to effectively cope with stressful situations. In a previous study, Van der Mijl and

Vingerhoets (2017) concurred by reporting that Dutch youths whose families expose them to hardships and stressors at an early age are benefiting personal growth and development. On the contrary, the phenomena may present in adaptive or destructive form.

Adaptive and Destructive Outcomes of Parentification

Parentification can yield destructive and adaptive features, making this topic worthy of exploration. The perception of the level of parentification can also contribute to the positive or negative outcome of the construct, such as mental illness. Parental figures with mental health indications may unintentionally create a distortion of parental boundaries, fostering parentification. According to Arellano et al., (2018) and Cho and Lee (2018), have completed studies linking a positive association between parentification and the development of depressive symptoms. Vanwoerden et al. (2017) also concluded dissolution of parent-child boundaries may be connected to mental illness and boundary dissolutions are strictly related to the fear of abandonment and influence the further development of borderline personality disorder.

Destructive Health Outcomes

Early work on the outcomes of parentification has focused on parentified children living with illness and disease, parenting attitudes, adaptive skills, psychological distress, and interpersonal skills (Stein et al., 2007). For instance, Stein et al. (2007), reported parentified children with parents diagnosed with HIV are more at at-risk for personal, developmental outcomes. Other studies have also identified links to mental health outcomes, including addictions and substance abuse (Castro et al., 2004; Godsall et. al.,

2004; Stein et al.,1999). In a study completed by Godssall et. al., (2004), results illustrated that there is a high correlation between alcoholic parents and parentification). Stein et al. (1999), conducted a study and found that the parentified girls of the study experienced more of the adult-role taking and the associated depression. Yet not all outcomes are with negative impacts. Saakvitne and Tennen (2010) implied that trauma includes the hardship and the resilience to overcome the hardship; therefore, the trauma may present benefits.

Destructive Later Life Challenges

More recently, researchers have focused on ideas around how parentified children will grow to be parentified adults; moreover, having to take on and conquer challenges at a young age may have effects on a person's mental health. For example, Parentified children who are raised by parents with mental health issues may lack emotional support needed to assist with shaping their own identities (Arellano et al., 2018; Van Loon et al., 2017). Although mental illness may be an important contributing factor in maladaptive outcomes, there have been conducted studies that are not in agreement. For example, Petrowski and Stein (2016), completed a study involving 10 mother-daughter dyads, the mothers were previously diagnosed with mental illness. The results yielded that half of the daughters viewed parentification in negative terms as it relates to their upbringing and the other half reports positivity. It appears that the results of the study are a great indication of how the parentified person views the level of parentification and the tasks that are attached. According to Lansford et al. (2016), concordance among family expectations and parenting behaviors are strongly associated with the interpretation of

parentification attributes; moreover, some persons may not view themselves as parentified although the subjective term may appear to suit their personal situation.

In addition, parentified children often carry the burden of growing up faster as compared to their peers because they have adopted the parental and caretaker role in the household, which feeds the boundary dissolution, interferes with self-development, self-esteem, and can contribute to the potential defiance of authoritative figures when entering the workforce (Goldner et al., 2017; Nichols, 2016; Saha, 2016). For example, due to personal environmental factors, parentified children often can control their personal environments; however, may find difficulties with maintaining the same control when entering other environments, such as school and the workforce (Nichols, 2016; Smith & Smith, 2010).

Destructive Social Impacts

Similarly, children who have been impacted psychologically may be subjected to unfortunate life facets, such as lower incomes, decreased chances in sustainable marriages, and potential for alcohol and drug abuse (Smith & Smith, 2010). Such actions can affect the way a child may form rapport and relationships with peers, missing essential milestones that are pertinent for growth and personal development such as interpersonal skills.

Another outcome may be that education may not become a priority or difficult factor in parentified child's life. Cross-sectional studies have indicated ineffectiveness of academia may be scarred by the mandatory tasks in which parentified children are charged with completing, both instrumental and emotional (Arellano et al., 2018; Chase

et al., 1998).Therefore, they may become more concerned with gaining employment sooner as compared to partaking in or extending their education, which may lead to poverty.

In a study conducted by Tsai et al. (2016), the authors found a positive association of high levels of stressors and economic strain with high levels of emotional parentification in Mexican American adolescents. Without educational needs being met, parentified persons may become more suited as a target for an impoverished background.

Adaptive Coping and Resilience

On the contrary, there are many adaptive features of parentification. Researchers have identified the beneficial components of parentification including the development of coping skills and resilience (Sullivan et al., 2018; Tsai et al., 2016; Van der Mijl & Vingerhoets, 2017). According to Sullivan et al. (2018), research suggests that parentified youths reported great adaptations to parentification, such as the ability to contribute to their family structures. For instance, parentified persons may be able to acclimate and adapt to stressful situations more effectively as compared to his or her counterparts (Nichols, 2016).

For example, Goldner et al. (2017) provided evidence rejection sensitivity is the gateway for the dissolution of boundaries regarding parentification; moreover, Israeli youths create a false persona to protect themselves from experiencing trauma or stress related to parentification. Van Parys et al. (2015) also reported in a study exploring Belgium youths that youths demonstrated the inability to focus on personal needs because of the main focus on the family's well-being, not being in touch with their feelings, and

experiencing the inability to ‘find themselves.’

Increased levels of maturity, resilience, and coping skills are also adaptive features (see Saha,2016; Sullivan et al., 2018; Tsai et al., 2016; Van der Mijl & Vingerhoets, 2017). Exploring this topic will provide more insight into what type of interventions are needed to increase the likelihood of self-sufficiency among the persons that have been affected. Tomeny et al. (2017) identified parentified persons might require more extensive social support as an intervention for the reduction of distress.

Weighing the Pros and Cons of Parentification

It is likely and not uncommon for persons to internalize issues and personal problems. Van Loon et al. (2017) examined the relationship between parentification, internalization, and externalization of difficulties, specifically for adolescents who live with a mental health problem and found internalization of problems an issue amongst the study participants: therefore, concluded interventions are ‘conducive to the prevention of internalizing problems.’ Negatives and positives of parentification must be considered during practice application and research (Hooper et al. ,2015).

Furthermore, customariness should be considered regarding parentification, customariness is a component of parentification which needs to be considered. Parentification is a subjective term for some and it appears to be a distortion or dissolution of parent-child boundaries; however, it is of clear routine for others and an ordinary part of development (Sullivan et al., 2018; Tsai et al., 2016;). For example, many cultures practice parentification as a lifestyle. Collectivism and cultural norms may defend against parentification being claimed as a distortion of parent-child boundaries

because it is a practice for specific populations due to family obligations (Tsai et al., 2016). For instance, immigrant children often are charged with providing an abundance of instrumental support to their households, such as language brokering which may also unintentionally involve children when age-inappropriate decisions regarding the household (Arellano et al., 2018; Tsai et al., 2016). This is not uncommon.

Language brokering is an instrumental task in which immigrant children are often charged with assisting the adults of the household with communication, such as reading materials, writing letters, and paying bills. Language brokering for an extended time frame may present as negative; however, Madden and Shaffer (2016) reported childhood emotional parentification is negatively associated with effective communication.

HSP Roles in Parentification

According to the National Organization for Human Service (n.d), the primary purpose of the human services professional is to assist clients receive proper and enough services within their communities to foster adequate living in all areas of their livelihood. HSP's work throughout various organizations and agencies, such as correctional institutions, mental health organizations, child and family services, and community health centers. The role of a HSP will vary based on the needs of a client; however, ways to better assist clients would be to establish and maintain a rapport with the correct interventional methods (Gold, 2016).

For example, motivational interviewing is an interventional method often used to assist clients with making changes to behaviors and lifestyles. Motivational Interviewing is a person-centered therapeutic approach that allows for the client to make their own

choices with the guidance and support of a HSP; moreover, MI affords the client the ability to play the expert of their own lives (Miller & Moyers, 2017). MI is a person-centered approach orchestrated by Rogers, the nondirective approach was created over time and tested through clinical experience and application by Roger's himself (Miller & Moyers, 2017). MI is an approach whose principles may apply to various disciplines, such as healthcare, human services, and academia. HSPs may also assist clients by providing additional resources that are within their economic reach, such as self-help groups and personal informal supports as well.

Human service workers help support both adaptive and destructive outcomes. Some of those destructive outcomes are childhood trauma, eating disorders, psychopathology, poor interpersonal skills, and substance abuse. Diaz et al. (2007) reported there are over one million parentified children ranging from age eight to eighteen in the United States of America. Therefore, human service workers and social workers are beneficial to parentified clients by completing the appropriate client assessments, working with the client to choose appropriate interventions, and to also create goals that will foster future, personal success (Diaz et al., 2007).

HSPs may also support parentified persons by assisting with the further development of adaptive outcomes, such as resiliency, flexibility, individuation, and the development of personal autonomy (Hooper et al. 2007; Shifren, & Kachorek, 2003). Those attributes may positively affect the livelihood of parentified persons decision-making as it pertains to their future decisions, such as their education and career choices. For example, caregiving at an early age may prepare parentified persons for career

choices in various fields, such as nursing and social and human services (Levine et al., 2005).

Summary and Conclusion

Major themes in the literature demonstrate that there are adaptive and destructive features regarding parentification, there is a need for interventions, participants need to be more culturally, and gender represented. The current literature also illustrates the need for more qualitative studies. This research study works to fill the gaps previously discussed by adding the HSP perspective and its effects on human service delivery. Currently, the HSP's perspective on parentification and its effects are unknown. Chapter 2 contained information on present studies and the application of the theoretical approach. Chapter 3 consist of further discussion about the research design and the rationale for choosing a generic qualitative approach.

Chapter 3: Research Method

The purpose of this generic qualitative inquiry was to explore the perceptions of male human service practitioners regarding parentification and how these perceptions affect human service delivery. From a review of current scholarly studies, more qualitative research is needed for studies on parentification, and more research is needed that uses HSPs as study participants. This research may contribute to the HSPs' knowledge base, enable them to recognize and identify parentified persons and their individual needs, and create policy and practice recommendations for interventions to promote healthy development and a sense of self for clients. This study may address cultural influences and norms, thus promoting cultural competence in human service practice.

Research Design and Rationale

In this study, I addressed two RQs.

- RQ 1: What are the practitioner's perceptions of parentification?
- RQ 2: How does the practitioners' interpretation of parentification impact human service delivery?

The generic qualitative inquiry was the best choice based on the RQs and the gaps in the literature. Generic qualitative allowed the ability to capture the participants' subjective opinions (Percy et al., 2015). Generic qualitative inquiry operates on the descriptive responses of the study participants, allowing the participants' perspectives and viewpoint to act as the basis of the study. This tradition allowed me the ability to obtain the perspectives of the participants regarding parentification and how their

perspectives impact human service delivery.

Role of the Researcher

The role of the researcher may vary due to various circumstances, such as the tradition used to conduct the research and the type of research conducted; however, my role as the researcher was the data collection instrument, interviewer, and the analyst of data collected (Sorsa et al., 2015). All data were collected and analyzed by me. I did not have a personal or professional relationship with any of the participants to avoid any ethical issues. However, I acknowledge that I work in a human service organization. To eliminate power disparity and conflict of interest, family members, colleagues, and coworkers were not participants in this study. No study participants or HSPs came from the organization I am employed with. I also controlled personal bias through triangulation, reflexive journaling, and member checking, which allowed for the reservation of any previous knowledge, personal feelings, or assumptions to interfere with the research process.

Additionally, I employed the process of bracketing in the beginning phases of the literature search and in my approach to designing this study. The process of bracketing required me to not only acknowledge any previous biases and beliefs but to also have noted that the potential for those biases or beliefs exist by employing reflexivity (Amankwaa, 2016; Mohammed, 2017; Sorsa et al., 2015). Reflexivity is a way of inner self-awareness and is a vital part of bracketing and can be obtained through maintaining a reflexive journal or dialogue prior to collection of data (Amankwaa, 2016; Mohammed, 2017). Although the information from this study had previously been bracketed,

bracketing can be used throughout the entire research process; moreover, the researcher is in charge of various components of the research process, such as time of interviews and location; therefore, researchers may unintentionally sway results and the data's quality (Sorsa et al., 2015).

Methodology

This study included a generic qualitative approach, purposive sampling strategy, and interview instrument to gather data. Generic qualitative inquiry was the most appropriate for this study because it involves understanding the socially constructed and circumstantial context of humans and their experiences and allows for the subjective exploration of a participant's perspective excluding preestablished assumptions (Anyaka, 2017; Kennedy, 2016; Percy et al., 2015; Winston, 2017). This approach also allowed for dialogue through interviews.

Participant Selection Logic

Purposive sampling was used in this study because it focused on the participants meeting a specific criterion for qualification (see Etikan et al., 2016; Ravitch & Carl, 2016). Participants were selected and interviewed about their perspectives on parentification and human service delivery. Previous research participants were noted to be female; therefore, my study participant pool consisted of male HSPs who reside in the state of Georgia with at least 3 years of direct client services. They were recruited by posting flyers in public areas throughout the community and social media sites.

In this study, I anticipated sample size of 12 (but possibly up to 15) HSPs (see Onwuegbuzie et al., 2010; Smith, 2019). But my final sample size depended on data

saturation. Saturation occurs when no new data are introduced, and if saturation is not considered or reached, the study's validity and results can be negatively impacted (Fusch & Ness, 2015). As I mentioned, twelve study participants were the initial anticipated goal for this study (see Smith, 2019), but I anticipated needing up to fifteen participants to reach saturation (Onwuegbuzie et al., 2010). However, I reached saturation after eight participants.

Instrumentation

A field-tested interview guide was the instrument for this study. A field test was used to ensure validity and reliability. Field testing allowed for the interview guide to be adequately tested to determine if the instrument can be used for standardized use; moreover, it also allowed me make improvements as needed (see Howie & Bagnall, 2017). During the field test, the proposed questions were evaluated by qualified professionals for its effectiveness and ability to obtain the information sought after in the purpose and RQs. The open-ended interview questions were field-tested by two master's level HSPs who have knowledge and expertise on parentification.

Due to the restrictions of COVID-19, for this study, I collected data via recorded phone interviews. To conduct and record these interviews, I used a conference call service (FreeConferenceCall.com) for recording, transcribing, and playback of interviews. The eight HSPs were recruited from frequented public areas throughout the community and on social media sites. I used an interview guide containing the field-tested interview questions and created a parallel field note journal for analysis. Using different data collection methods can assist with closing the gap in the study because it

denounces the potential limitations of one another (Saldaña, 2016), such as my use of an interview guide and a conference call service for recording service.

Interview Questions

1. In your own mind and experience, what is parentification? What does that mean?
2. What is your experience with parentification and the parentification process?
3. What are your overall perceptions and experiences regarding how well this process works?
4. What types of tools or training does your workplace provide to you to assist in the parentification process or provide support after the process?
5. Tell me about whether and how well this works in practice. Can you provide some examples of tools or training and how they have helped or not?
6. What are some specialized interventions you may use to assist this specific population?
7. How do you think your perception of parentification might affect how you interact with clients and the support you provide them?
8. What are your recommendations for human service agencies with regard to addressing parentification?
9. Is there anything else that you would like to add here that I have not asked you about with respect to your perceptions of parentification and the potential impact on the human service profession?

Procedures for Recruitment, Participation, and Data Collection

Planning the interview process and rapport-building techniques are essential, as it is the researcher's job to ensure participants feel safe and comfortable with the process (Dempsey et al., 2016; Ravitch & Carl, 2016). Study participants, HSPs were recruited from frequented public places throughout the community and from social media sites. After approval for participation in the study and informed consent signature are obtained, study participants were allotted 45 minutes for the actual interview and 15minutes for additional questions and/or feedback. I used a pre-approved, field-tested interview guide to interview participants of the study. This assisted with ensuring alignment and the avoidance of unnecessary information and omittance of bias.

As I described, I recorded the interviews. Data were transcribed for analysis using the transcript provided from FreeConferenceCall. The recordings were played multiple times to ensure accuracy. In conducting data analysis and reporting the findings, the participants were assigned pseudonyms/unique identifiers to ensure confidentiality. Interviews ended with a debriefing, completed at the end of each interview. The debriefing included the purpose of the study, my contact information, and the confidentiality reminder. Finally, I engaged in member checking, allowing participants to review a summary of data and add to or clarify any responses (Amankwaa, 2016; see Birt et al., 2016; Kornbluh, 2015).

Data Analysis Plan

The interviews were recorded and transcribed using FreeConferenceCall. I evaluated the data for emergent codes, themes, categories, and patterns. Codes are single

words or phrases that assist with describing the studied phenomenon; moreover, in qualitative inquiry is most often a word or short phrase that assigns a summative attribute for a portion of language-based or visual data (Saldaña, 2016).

After transcripts were created from the information received from the recorded interview, data were analyzed for codes and themes. I started by reading the transcripts and then begin the process of precoding, such as marking and highlighting areas of interest, which can be completed throughout the entire process of data collection (Saldaña, 2016). I applied in vivo coding as my selected coding process, which consisted of extracting the study participant's actual words from the recorded interviews and creating a summative of what the participant reported in effort to describe presenting themes (Kennedy, 2016; Saldaña, 2016). I coded within the MS Word document and tracked the codes in Microsoft Word.

Following the first cycle of coding, pattern coding was employed as the second-cycle coding method. Second-cycle coding methods are used for reorganizing and re-examining data reviewed in the first cycle of coding and was employed before data was placed into categories (Saldaña, 2016). The method of pattern coding is not only used to assist with condensing large amounts of data, but it is appropriate for the use of this study because it is used to examine relationships and networks (Saldaña, 2016). I connected the categories and looked for emerging themes in the data. Patterns in the data suggested saturation (Saldaña, 2016). Saturation occurs when no new data presents itself during the collection of data and throughout the coding process (Fusch & Ness, 2015; Saldaña, 2016).

Issues of Trustworthiness

Research that illustrates trustworthiness can be described as sound research which demonstrates rigor and precision (Amankwaa, 2016). Credibility, transferability, dependability, and confirmability are said ways to effectively establish trustworthiness in research (Amankwaa, 2016).

Credibility

Credibility refers to truthfulness and accuracy of the data. The study should be able to essentially illustrate reliability (Amankawaa, 2016). There are techniques within qualitative research to assist with establishing credibility, such as member checking. Member checking was used to establish credibility. Member checking is used to validate the worthiness of a qualitative study (Amankwaa, 2016; Birt et al., 2016; Kornbluh, 2015). Data were analyzed and checked for codes and themes. The study included eight participants; however, if new information presented itself during the interviews, more participants would have been interviewed to ensure data saturation. I applied a referral model known as snowballing, a means of recruiting by the use of established contacts (Geddes et al., 2018). I used two data collection sources for triangulation, a field journal for notes, and the recorded interviews.

Dependability

Dependability is important in order to demonstrate that findings of a study are consistent enough to be duplicated in the future (Amankwaa, 2016). One way to illustrate dependability is through the maintenance of an audit trail. Dependability was established by maintaining an audit trail. An audit trail describes the process of the study

from start to finish, and it consists of all raw data collected, notes for observations, and findings (Amankwaa, 2016; Mohammed, 2017). The audit trail assists other researchers as well by allowing them to pick up where one researcher's study ends (Mohammed, 2017).

Transferability

Transferability of a research study refers to the study's ability or inability of the findings to be relatable in other contexts and/or situations (Amankwaa, 2016). Relating to the audience, the specifics of the study will aid in a better understanding of how the results of the study are transferrable and how other areas of research may benefit from the findings (Levitt et al., 2017). Thick description was used for transferability. Thick description consists of ensuring the audience is well informed by providing an unbiased interpretation of the findings (Amankwaa, 2016; Kornbluh, 2015; Mohammed, 2017). Responses from the participants fostered thick descriptions and provided insight as to whether the study results may be used in other contexts and disciplines. Ultimately, the transferability of the results to other contexts and settings will be determined by future researchers.

Confirmability

Confirmability can be described as the extent to how the findings of the research study's results are corroborated with the perspective of others and is free of bias and subjectivity (Amankwaa, 2016). To ensure confirmability, triangulation, and employing the use of a reflexive journal demonstrated that I have maintained good notes for every step of the research process. In the reflexive journal, researchers manage decisions,

biases, rationale for choices, and assumptions (Amankwaa, 2016; Mohammed, 2017).

Ethical Procedures

All documents were submitted to the Walden University's Institutional Review Board for approval (approval no. 02-19-21-0304009). Purposive sampling was used; therefore, participants were recruited through social media sites and within various communities throughout Georgia. Flyers were distributed that included the study title, the purpose of the study, the protocol summary, basic eligibility criteria, and contact information. The flyers were numbered and placed in areas that are often frequented, such as public places with community boards, and on social media sites. Recruitment did not take place at my place of employment or community organizations that I may have a relationship with, to prevent conflict of interest and dual relationships.

The study was explained to the participant and other components, such as informed consent/implied consent, confidentiality agreements, and voluntariness. Participants were informed of the ability to quit participation in the study at any time. Collected data will be stored for 5 years with a password-protected, digitally locked repository from the conference call provider, which will only be accessible by me. The use of pseudonyms names will mean that I omit the actual participant names from the study document materials and any resulting publications or reports that are shared. Their real names will only exist on the recordings and permission documents.

Summary

Chapter 3 focused on the research design, methodology, data analysis plan, and the ethical procedures about the study. I explained how I collected and analyzed data.

Chapter 4 will focus on the results/findings of the study.

Chapter 4: Results

The purpose of this generic, qualitative inquiry was to (a) explore the perceptions of human service practitioners regarding parentification and (b) to obtain how these perceptions affect human service delivery by employing the humanistic theory, originated by Rogers (1946). In this chapter the pilot study, demographic data, the interview setting, data collection, data analysis, results by the themes found in the data, and the summary of the findings are discussed.

Field Test

A field test was used to ensure credibility and dependability. The open-ended interview questions were field-tested and evaluated by two master's level HSPs, with expertise in parentification, prior to the participant recruitment period. The field-tested interview guide provided usefulness in obtaining the sought-out information for answering the RQ. The HSPs reported that the interview questions were direct, easy to understand, and were relatable to the RQs. Field tests allow for researchers to make improvements where they are needed (Howie & Bagnall, 2017); however, no issues with the instrument were found and no changes were made to the interview questions based on this test.

Setting

Due to restrictions of COVID-19, seven out of eight HSPs agreed to be interviewed via FreeConferenceCall.com. The other HSP desired to have the interview questions and consent form provided via email. Interviews were scheduled and coordinated via email and statements of informed consent were also provided via email.

Participants were charged with responding to consent to participate by responding, ‘I consent to participate in this study’ prior to scheduling.

Demographics

A total of eight male HSPs were interviewed. All interviewees met the criteria of the study: reside in Georgia, over 3 years of providing direct services to clients in a human service setting, and over the age of 18. The study participants’ years of experience range from 10 years to 40 years (see Table 1). The HSPs all reported to reside in the metro Atlanta area of Georgia.

Table 1

Human Service Professional Demographics

Participant	Educational level	Years of experience	Professional position
P1	AS	10 years	Youth Engagement Specialist
P2	PhD	25 years	Director of Reentry Services at Georgia Department of Juvenile Justice, former Case Manager for Family and Children Services
P3	MS	15 years	Councilman, Community advocate for Youth and Family
P4	PhD	25 years	Social Worker
P5	BS	40 years	Community Pastor, Outreach worker, Homeless services
P6	MS	25 years	Career Services Job Coach
P7	MS	30 years	Chaplain for South Fulton, GA and Chief Administrator of the Community Service Program for the Magistrate Court of Fulton County
P8	MS	20 years	Director of Children’s Village Residential Program and the Crossroads Foster Care & Adoption Program, former Family and Children Social Worker

Data Collection

The recruiting period started February 20th, 2021 and ended October 8th, 2021.

The recruitment efforts were made by posting flyers on community boards, online public

forums, public parks, social media sites, and public bus stops; they were also given out to community patrons passing by and at community events. Twelve potential participants replied, and eight met the specified criteria. Those who were not eligible were informed their ineligibility for the study via email. Eligible persons were provided consent forms via email.

After consent forms were returned via email from the eight HSPs, interviews were scheduled and conducted via FreeConferenceCall.com. Seven of the interviews were individually recorded via FreeConferenceCall.com and transcribed using Microsoft Word. One of the interviews was completed via email and transcribed using Microsoft word. The study participant stated that he did not want to be recorded but would like to participate in the study. The seven recorded interviews have been stored and saved as a MP3 file and all eight transcribed interviews have been saved as a Microsoft Word documents. The participants were assigned identifiers to ensure confidentiality; moreover, recorded interviews and transcribed interviews have been saved with the same assigned identifier.

Data Analysis

This study included a generic qualitative approach with a field-tested interview guide to gather data. My current career field is in human services; to avoid any ethical dilemmas or issues, I ensured that none of the participants were connected to me personally or professionally. I used FreeConferenceCall.com to record the interviews and transcripts were also provided. Transcripts were rechecked for accuracy, and I proceeded with coding the data retrieved from the interviews in search of themes and patterns. In

vivo coding was applied as the first cycle method of coding and pattern coding was used as the second method. Participants were offered the ability to review transcripts for accuracy. Six themes emerged from the analyzed data (see Table 2).

Table 2*Coded Data*

Code	Definition	Frequency	Category	Example	Theme
ADDResponsibility	Some additional responsibilities of the parentified subjects	P1:3 P2:3 P6:2 P8:4 Total: 12	Sense of responsibility to family	'Some clients have had to have the responsibility of taking care of their siblings when the parents are not around'	Theme 1
PurposesForPhen	Potential purposes for the phenomenon, alcoholism, family dynamics, etc.	P1:3 P2:1 P5:1 P6:1 P8:1 Total: 7	Reasons behind role reversal	'Drug use, alcohol, and absentee parents are some of the causes'	Theme 1
instrumentalparentification1	Instrumental tasks regarding parentification: cooking, cleaning, etc..	P1:2 P7:1 Total: 3	Instrumental tasks	'Children being forced to work'	Theme 1
POS1	Positive effects of parentification	P1:13 P2:2 P6:1 Total: 16	Mention of positives of parentification	'independent' 'higher maturity levels'	Theme 2
NEG1	Negative effects of parentification	P1:2 P2:3 P4:1 P6:1 P7: 4 Total: 11	Mention of negatives of parentification	'missing out on a childhood life' 'acts in an aggressive manner when communicating'	Theme 2
NegMentalHealth1	Mentions of poor/negative outlook of mental health regarding parentified persons	P1:3 P6:2 P7: 2 Total: 7	Mental health outcomes	'stress' 'inability to focus from potential stress' 'low-self-esteem and depression'	Theme 3
NoInterventions	No interventions mentioned or provided, such as specialized training or awareness	P4:1 Total: 1	Lack of general tools/Interventional methods	'this process is not incorporated into professional development trainings through my employer'	Theme 4
Interventional*methods	Various methods used to assist with human service delivery	P1:11 P2:5 P3:3 P5:1 P6:1 P7:2 P8: 1 Total: 24	General interventional methods and tools mentioned	'motivational interviewing' 'restorative practices' 'Trust base relational intervention training'	Theme 4
Individuality*	Terms of care with human service delivery	P1:2 P3:1 P6:1 P7: 1 P8:3 Total: 8	Delivery/Care used specifically for the individual	'There can't be a cookie-cutter approach when working with clients'	Theme 5

(table continues)

Code	Definition	Frequency	Category	Example	Theme
HumanServDel	Personal approach to human service delivery regarding client concerns/needs	P1:3 P3:1 P4:2 P5:1 P7:2 P8: 3 Total: 12	Professional approaches to human service delivery	'awareness of implicit biases' 'empathetic approach'	Theme 5
RecForPhen	Recommendation for human service agencies, organizations, and professionals	P1:2 P2:4 P3:1 P6:1 P8:2 Total: 11	Professional Recommendations for HS delivery	'more needed awareness of the subject'	Theme 6
Rolereversals	Parent-child familial role reversal	P2:2 P4:1 P8: 3 Total: 6	Mention of parent-child role reversal	'Child has taken on the role of the caregiver'	Theme 1
ParentingStyles	Familial dynamics/parenting styles	P3:1 P6:1 P8:1 Total: 3	Mention of Parenting/Family styles	'Parents held some children to high expectations'	Theme 1
Commonplace*	How often the phenomenon has appeared throughout the interviewee's profession	P4:1 P5:1 P6:1 Total: 3	Professional Awareness of Phenom	'It is a commonplace phenomenon in child welfare'	Theme 5
GenerationalChange1	Previous years upbringing	P7:2 Total: 2	Generational Changes	'children were once told to be children without trying to raise and provide for the family'	Theme 1

Results

The purpose of the generic qualitative study was to interview male HSPs to gather the perceptions regarding parentification and how those perceptions affect human service delivery. Six themes derived from the interviews after the data were thoroughly analyzed. The terms *HSPs* and *study participants* are being used interchangeably during the reporting of findings.

Theme 1: Parentification Involves a Learned Understanding of Roles, Responsibilities, Instrumental Tasks, and Parenting Styles

Sense of Responsibility

During the interviews, the participants mentioned a sense of responsibility as it relates to parentified persons (12 mentions). Participant 1 mentioned some of the added responsibilities included having to care for younger siblings when parental figures and/or adults of the household are not present and are often forced to share the financial responsibility of the household. Participant 2 stated parentified children often take on the lead role requiring them to do things that traditionally the offspring would not do which can affect their maturation level. Participant 8 reported that parentified persons are often encouraged to act as an authority figure due to the additional expectations. Participant 1 also agreed by stating that the parentified person is often left without a choice and are made to take on a leadership role whether they would like to or not. Participant 8 disclosed to have some personal experience with parentification and has reported to identify as parentified. Participant 4 reported to have a personal stance on the matter, “I

don't think that minor children should have to assume the role of an adult due parental absence or incompetence." Potential reasons behind the responsibilities were also presented as a theme after data was analyzed.

Parent-Child Role Reversal and Potential Reasons Behind the Role Reversals

HSPs reported to understand what the parent-child role reversal appeared to be and the potential reasoning/s behind the role reversal (13 mentions). Potential reasons behind parent-child role reversal included single parent households, drugs and/or alcohol, familial/parental expectations, generational patterns, and potential mental health outcomes. During the interview, Participant 1 stated, "There does not have to always have to be a drug or criminal element to what's going on in that person's life as to why they're in a situation where the roles have been flipped, it's not always a situation of drugs, alcohol, or something negative. It could happen for a multitude of reasons." According to Participant 8, parenting styles should be considered regarding parentification because some parents provide the child with the expectation that they are equals and/or leaders of the household; moreover, Participant 3 agreed, "some parents are often raising their children the best they way that they know how." After reviewing previous literature written regarding parentification, the reasons reported by the HSPs align with those studies; however, none of the HSPs mentioned cultural expectations.

Instrumental Parentification

HSPs mentioned instrumental parentification a total of 3 times. Participant 7 reported, "based upon your upbringing, you may be the person at the age of 13, 14, or 15 that may have to become the bread winner of the house or the person who brings in the

income to help out around the house.” Participant 6 added, “Parentified children often cook and clean when the parents are not available, they also take care of the other siblings.” Participant 4 reported that this is a commonplace phenomenon in child welfare. Although parentification falls under two categories, instrumental and emotional, the HSPs only mentioned tasks associated with instrumental parentification (cooking, cleaning, paying bills, etc).

Generational Changes and Parenting Styles

Participant 7 of the study mentioned the need for generational change (2 mentions) other HSPs mentioned that parentification may also be the outcome of different parenting styles and part of the familial dynamic (3 mentions). Participant 4 reported that parentification can also be a direct effect of government systems, such as Section 8, a housing assistance program for low-income families which helps to sustain adequate housing. Participant 4 continued explaining from his perspective that those systems have created a drift in many families; as a result, introduced children to leadership roles in the family before they have fully matured and developed effectively. As previously mentioned, none of the study participants mentioned parentification in a cultural context. Previous literature has mentioned that culture must be taken in account when determining whether parentification fosters maladaptive or adaptive features (Tsai, Gonzales, and Fuligni, 2016).

Theme 2: Parentification can be Positive and Negative

Mentions of Negative Features

The negative features of parentification were mentioned throughout the interview

process (16 mentions). Participant 1 reported were the lack of focus and/or concentration to complete tasks, signs of depression, and limited conversation and emotionally closed-off with peers their age. Participant 1 also reported observations of overly aggressive communication with peers and adult-figures at times. Participant 2 reported developmental milestones are missed and parentified children seem to “grow up faster” as compared to their peers. Participant 2 also stated that parentified children have been in a leadership role for a long time so they may be resistant to redirection from authoritative figures. Participant 7 reported that parentified persons often resist redirection and sometimes are unable to identify when they are being shown compassion. HSPs also reported that other negative features often originate from the parental figures having high expectations of maintaining the family’s wellbeing and having to juggle personal growth at the same time. After transcribing the interviews, it was concluded that more negative features of parentification were mentioned as compared to the positive features.

Mentions of Positive Features

The positives of parentification were mentioned a total of 11 times. For example, Participant 2 reported that parentified persons often have a higher maturity level as compared to their peers; moreover, could seemingly be a positive or negative regarding this phenomenon. Participant 2 also mentioned that parentified children may also have a positive impact on their parental figures and peers, such as demonstrating the ability to take on a leadership role, being able to handle additional responsibilities and may be more academically sound and focused.

Theme 3: Parentification is Often an Outcome of Changes in Mental Health

Two of the eight study participants spoke of potential mental health outcomes regarding parentification (Participant 1 and Participant 7). Potential mental health outcomes were mentioned a total of 7 times. Previous literature made many mentions of mental health- related obstacles regarding parentification and the parentified person. For example, Participant 1 mentioned misdirected anger possibly resulting in mental health issues concerns in the future. Participant 7 concurred, using the term “anger” to describe the potential for mental health implications in the future. Possible stress was mentioned as a potential outcome of parentification. Participant 7 also reported extreme stress parentified persons undergo may lead to “giving up” and possibly committing suicide. Putting interventions in place may assist with alleviating some of the reported findings and incidents reported by the HSPs.

Theme 4: There May be a Lack of General Interventions

Many of the HSPs were unable to provide comments regarding the use of interventions; however, there were specific interventions mentioned.

Lack of Tools and Interventional Methods

Participant 4 reported that he had no knowledge or awareness of any specific interventions or trainings offered at his place of employment (1 mention). However, all other HSPs spoke of various, specific interventions used to assist with all special populations. None of the interventions and trainings were specific to parentified persons. Remaining study participants spoke of various personalized plans, generalized interventions, and methods/tools used to assist their clients with making necessary

changes in their lives; however, did not provide specifics regarding any definite training or specific interventions used for the sole purposes to assist parentified persons.

General Interventional Methods/Tools

Three of the eight study participants stated that they have used specific interventions (24 mentions) when providing individualized human services to parentified clients and their families. Participant 1 mentioned goal setting and consistent encouragement motivates his clients to stay on track the desired changes they are looking to make in their lives. During the interview, Participant 2 mentioned mentorship, family programming, family engagement, restorative practices, and motivational interviewing as interventions and methods that have been used with current and past clients. Participant 3's views were in correlation with Participant 2's view. Participant 3 reported that providing the entire family with services, keeping the family engaged with one another's agenda, and providing constructive feedback as needed are ways of assisting his clients in need. Participant 5's workplace offers Parenting Courses to assist the parents with challenges their family have been faced with, such as mental health, addictions, low income solutions, and emotional support so the children of the household are not taking ownership of any leading roles in the families. Participant 6 made mention quarterly trainings for all kinds of specialized populations, but none were specific to parentified persons. He reported motivational interviewing, mental health first aid training, that assist with keeping him current in the human services field. Participant 6 also reported the use of worksheets with writing prompts for goal setting and encourages the client to be more active in the initial planning and the development of his/her program. Trust-Based

Relational Intervention was introduced into the conversation by Participant 8. He reported to use TBR as an interventional method in his workplace for assisting children who have dealt with some type of trauma in their lives. According to Stipp and Kilpatrick (2021), TBR originated to assist potential foster or adoptive families recognize how early trauma may adversely impact the lives of the children they are looking to bring into their homes. HSPs reported services need to be individualized to meet the specific needs of clients.

Theme 5: Interventions need to be individualized to meet specific needs.

Study participants reported during the interview that there is a need for more individualized services for specialized populations, more effective and professional approaches to human service delivery, and establishing professional awareness.

Human Service Delivery, Professional Approach, and Individualized Services

It is the assumed responsibility that HSPs will provide individualized human services to persons in need. HSPs reported it is wrong to assume that each child/person who presents as parentified requires the same type or amount of services as others. Participant 1 shared that persons should be viewed as individuals and not from what has been solely learned in textbooks; moreover, there is no one-size-fits all approach. The individual's family background and personal environments should also be considered when providing individualized services to clients. Participant 8 reported recognizing the signs that a person may present as parentified, establishing a great rapport and setting healthy boundaries are also important for effective human service delivery. Participant 1 and Participant 8 reported being aware of personal, implicit biases take precedence over

the actual delivery of services. Implicit bias refers to stereotyping, prejudices and pre-judgments of individuals related to group of persons (FitzGerald et al., 2019). Participant 4 reported the impact of any human service delivery relies on the way it is delivered and the perceived attitude of the HSP; therefore, the professionalism is a must. Participant 6's view was similar to Participant 4's view. Participant 6 stated he will provide individualized services and continue referring clients to appropriate resources, offer continuous encouragement, and maintain a trusting rapport with boundaries, which will aid in effectively assist the client with personal accomplishments.

Theme 6: Human Service Delivery Process Needs to Consider Adding Potential Standard Trainings and Interventions

The final theme emerging from the data are the various recommendations provided by the research study participants. Participant 1 and Participant 5 reported the desire to bring awareness of the phenomenon to all HSPs and practitioners. Participants 2, 6, and 7 recommended HSPs meeting their clients where they are in life and providing them constant encouragement so that they make necessary changes and/or adjustments in their lives. Participants 2, 3,5,6, 7, and 8 stated more empathy and effective communication will likely assist HSPs understand the needs of their clients from the client's perspective; as a result, foster effective communication between the two parties. Participant 8 also reported that more restorative practices in place can provide the correct tools for clients to make desired changes to their lives.

Summary

In Chapter 4 the field test, research setting, demographics, data collection, data

analysis, and themes that emerged from data were discussed. The purpose of this study was to explore the perceptions of male human service practitioners regarding parentification and how these perceptions affect human service delivery. The RQs were provided in the form of interviews; as a result, provided plentiful data needed to determine what themes would emerge. In Chapter 5, I will discuss the interpretation of findings, limitations of the study, recommendations, and implications for positive social change.

Chapter 5: Discussion, Conclusions, and Recommendations

The purpose of the generic qualitative study was to explore the perceptions of the male HSPs through interview by answering the questions: What are the practitioners' perceptions of parentification? and How do the practitioners' interpretation of parentification impact human service delivery? By conducting personal interviews with the HSPs, I was able to effectively capture personal perceptions; moreover, through data analysis, six themes emerged.

Interpretation of Findings

After reviewing the collected data, the results indicated that all study participants understood what the parentification process entailed. The interviews confirmed the findings in the peer-reviewed literature. For example, HSPs' interview answers coincided with the literature referring to the adaptive and maladaptive features. The HSPs reported on the various components of parentification per their perspective; moreover, the study revealed how the perceptions of parentification and their interpretation of parentification impacts the delivery of services to clients. The findings of this study extend the knowledge of the previous studies by adding the perceptions and viewpoint of male HSPs and their perceptions.

The theoretical framework chosen for the study also aligned with the findings of the study. Humanistic theory is a person-centered approach, which allows for the HSP the ability to assist clients in need while providing the client with the encouragement to understand the changes and/or needs the client desires (Purswell, 2019). Many of the HSPs reported various interventions, tools, and methods used to assist their clients in

need, such as motivational interviewing, continuous encouragement, personal social adjustment training, and referrals to community resources that may assist with other needs.

Limitations of the Study

There were several limitations that may have directly impacted the results and findings of the study. The first limitation is that the study is of a limited scale and the results may not be transferrable to other settings. The anticipated sample size was 12–15 HSPs. However, I reached saturation after the eighth interview.

Another limitation was the data collection method through interviewing over the phone. I was unable to capture body language and facial expressions of the study participants; therefore, my observations were limited to the voices and the answers to the questions from the HSPs during the interview. There was no way of accurately knowing if the individual was expressing himself truthfully; therefore, I was charged with being in tune with any emotional aspects behind the answers. At times people may differ from in-person, face-to-face interactions versus over the phone or online encounters (Davies et al., 2020).

Additionally, it is not uncommon for study participants to provide subjective opinions when answering interview questions (Anyaka, 2017; Winston, 2017); therefore, there was potential for social desirability and personal bias to be present in the data collected. Study participants reported to have knowledge of the phenomenon, and one participant reported to have personal experience with the parentification process himself. He explained to have personal features of a parentified child but also reported to have

work-related experience as well. Thus, bias may have played a part in the presentation of information because of their personal perspectives on the matter and/or personal experience as identifying as parentified.

Purposive sampling also posed a limitation because it limits the criteria of the study population, generalizability to a larger population, and may also cause researcher bias because the researcher oversees the selection of study participants because the participants are selected based on expertise of a phenomenon (Palinkas et al., 2015). Purposive sampling does not require a specific number of participants, nor does the sampling method rely on a specific theoretical standpoint (Etikan, 2016), which makes it more prone to researcher bias because it relies on the point of saturation.

Using a generic qualitative inquiry as the choice of methodology aligned with the current study because it allowed for the study participants to speak freely regarding their knowledge of parentification and how they view the process. But the validity of the generic qualitative inquiry can be questionable because the data collected from the study participants may have included both, subjective and objective viewpoints; therefore, their claims may not be solid (Anyaka, 2017; Percy et al., 2015).

Recommendations for Future Studies

HSPs did not provide any special recommendations for future studies. However, based on the data collected from the current study, it is suggested a future study could include parentified HSPs and their perspectives relating to the delivery of services. The current study provided detailed information from a work-related experience; however, Participant 8 reported possess features of a parentified person. Additionally, conducting

studies on types of interventions and tools may assist workers in the school system, human service agencies/organizations, mental health organizations, and other community service facilities understand the commonalities of the phenomenon and the potential needs of the person who identifies as parentified.

Implications for Positive Social Change

Human services are present in all types of settings, and the practitioners and professionals in those settings are charged with providing appropriate care and services to those in need (Luiselli et al., 2022). The current study may provide positive social change at various levels of human service practice. For example, at the macro level, federal and government entities may place more monies into programs for specialized populations that may be underserved. Monetary funding could be used for mental health services, counseling, restorative practices, specialized training for government employees.

At the meso level, generating a greater capacity of understanding for HSPs, clinicians, educators, and future researchers regarding parentification in the community could promote positive social change. As a result of greater awareness, there can be a larger need to advocate for more intentional, individualized human service delivery to specialized populations within the community. To effectively integrate practice and research into this level of human services, there must be a level of interest for further development from the practitioners and workers (Luiselli et al., 2022). Making the community aware of what the parentification process may conjure levels of empathy and unity.

Micro level understanding of parentification involves the interpersonal effects of

parentification. This is the level of self-awareness, change, and when personal needs take effect. Assisting the parentified person with navigating their personal needs and allowing them to be the expert of their own lives will likely enhance their understanding of what they are wanting to achieve and what services are needed to achieve such things.

Conclusion

Although it may not be the intentions of HSPs to use their subjective views when providing services for persons in need, it comes with the territory because HSPs are forced to use their better judgment when in need (Luiselli et al., 2022). Therefore, this current study was pertinent to gathering a better understanding of HSPs' perceptions regarding human service delivery to specialized populations, specifically parentified persons. In sum, eight male HSPs were interviewed independently to gain the perceptions of male human service practitioners regarding parentification and how these perceptions affect human service delivery. At the time of research, I found no literature using male HSPs as the study participant for an interview regarding parentification. After data analysis, it appeared that all HSPs reaffirmed the peer-reviewed literature by offering some of the same ideas regarding the parentification process. This study expands on the current literature and knowledge base of the researchers, human service practitioners and additional clinicians who serve the community and persons identifying as parentified. The study will also assist in the fight for continued positive social change impact.

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