

Too Close for Comfort: Inadequate Boundaries With Parents and Individuation in Late Adolescent Girls

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This longitudinal study examined the ramifications of psychological control–guilt induction, parentification, triangulation, and blurring in parent–adolescent relationships for girls’ individuation and adjustment. The study followed 120 girls in their transition from high school to military service. Results from the variable-centered and person-centered analyses merged in underscoring the somewhat different developmental path of two groups of inadequate boundary constellations. The group with high guilt induction and psychological control, which involves rejection and invalidation of the child’s autonomous self, evinced the worst coping and adjustment to the transition and the lowest level of individuation with a combination of angry entanglement and strivings for overindependence. The blurred–parentified group resembled the adequate boundaries group regarding some indicators (e.g., low levels of engulfment anxiety and high conflictual independence), but further revealed overdependence and immaturity (e.g., high nurturance seeking, low emotional independence, and the lowest functional independence). Implications for preventive work with adolescents and their families are suggested.

Keywords: psychological control, individuation, adolescence, role-reversal, parent-adolescent relationship

Clear and flexible parent–child hierarchical boundaries that represent the expected generational hierarchy are considered important for healthy child development (Jacobvitz, Riggs, & Johnson, 1999; Minuchin, 1974). Such boundaries reflect the parents’ status as authority figures and caregivers and allow continuous connectedness between parents and children and the promotion of children’s development and individuation. Parents are expected to provide protection, comfort, and guidance and to promote their children’s separateness. This is not to say that children do not reciprocate by caring, but the usual and expected balance is that parents provide most of the caring. Within a family environment that sustains such relationships and boundaries, children may learn to identify with adult roles and can obtain a sense of self-competence and develop individuation (Boszormenyi-Nagy & Spark, 1973). Not all families enjoy such clear boundaries and roles. Several profiles of inadequate boundaries have been noted in the clinical and developmental literature (Barber, 2002); we examined five of them in this study: role reversal, triangulation, blurring of boundaries, psychological control, and guilt induction. These boundary disturbances, especially when pervasive, can impair healthy development (Chase, 1999).

We focused on the period of late adolescence and emerging adulthood, when separation and individuation are considered a central developmental task (Blos, 1962; Scharf & Mayselless, 2007). This developmental task includes forging a sense of differentiation from immature dependencies and achieving nonconflic-

tual independence from internalized childhood parental images (Blos, 1979). Youngsters are further expected to develop higher capacity to rely on themselves, rather than excessively on parents, for support and guidance and higher capacity to make independent decisions and follow them through (Arnett, 2001; Blos, 1962).

Girls and boys who experience inadequate boundaries may meet these challenges quite differently. First, girls are more likely than boys to experience inadequate boundaries (Mayselless, Bartholomew, Henderson, & Trinke, 2004). Gender-related expectations that encourage nurturance and responsibility for maintaining relationships may be a central causal factor (Brody, 1996). Second, the process of differentiating from one’s family of origin is postulated to be different for boys and girls (Chodorow, 1978). Whereas for boys socialization has been described as focusing on the development of individuation and separation, girls’ socialization has been described as focusing on connectedness (Josselson, 1996). We focused on girls, examining the ramifications of the various forms of inadequate boundaries in a longitudinal research design that followed their transition from high school. This is a normative transition in most Western countries, which presents adolescents with the need to manage new demands for independent functioning en route to further developing their individuation (Pallas, 1993). Consequently, it presents a difficult challenge in the context of these parent–adolescent constellations of inadequate boundaries.

Constellations of Boundary Violations and Their Developmental Outcomes

In this study, we examined five major forms of inadequate boundaries that are frequently described in the clinical literature. *Role reversal* or *parentification* includes functional and/or emotional role reversal in which children forfeit their own need for

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comfort, protection, and guidance to fulfill the parents' needs (Chase, 1999) to an extent that exceeds the developmental norms of their culture (Boszormenyi-Nagy & Spark, 1973; Minuchin, 1974). The child's responsibilities can range from instrumental duties to emotional help such as giving advice, providing reassurance, and serving as a parental figure (Chase, 1999). From an attachment perspective (Bowlby, 1980), the parents are seen as unable or unwilling to give the child the required protection and care, presumably because they themselves need reassurance and protection. In an attempt to maintain some level of proximity and closeness within the relationship, the child adopts a caregiving stance toward the parent. This strategy partially satisfies the child's attachment needs for proximity and closeness, although the child's needs for parental protection and guidance are not met in a satisfactory manner (Bowlby, 1988; Mayseless, 1996; West & Keller, 1991).

If responsibilities do not exceed the child's ability, parentification does not have to entail adverse developmental outcomes (Chase, 1999; Minuchin, 1974). In fact, some positive outcomes, such as learning social skills and acquiring a sense of efficacy, may ensue from the children's capacity to contribute successfully to their family. But when role reversal is excessive and children sense unfairness in shouldering the family burden, their sense of self and capacity to individuate are expected to be hampered (Jurkovic, 1977; Jurkovic, Thirkield, & Morrell, 2001).

Triangulation is a situation in which the child serves as go-between and mediator between parents or sides with one against the other. Each parent becomes linked to the other through the child, who in turn becomes a distance regulator to help parents sustain their marital relationship. In such a constellation, the child "carries" the parents' anxiety to relieve them both of the burdens of their own undifferentiated anxiety (Bowen, 1978; Chase, 1999). The coalition between one of the parents and the child undermines that parent's caregiving role for the child and at the same time distances the child from the caregiving of the other parent (Byng-Hall, 1995). Such a situation may at times also involve parental engagement of the child in a seductive relationship, sometimes termed *spousification* (Boszormenyi-Nagy & Spark, 1973; Minuchin, 1974; Sroufe & Ward, 1980). This behavior is expected to result in higher levels of distress and difficulty separating from the family.

Several studies identified negative developmental consequences of parentification and triangulation, although previous research has not always differentiated between these two different constellations. For example, Jacobvitz, Hazen, Curran, and Hitchens (2004) found that enmeshment in the relationships of toddlers with their mothers of mostly a parentified and triangulated nature was associated with children exhibiting higher levels of depressive symptoms in middle childhood. Sons with a history of parentification and spousification were less popular with peers during preadolescence and tended to violate sexual boundaries in the playground (Chase, 1999). With adolescents, Godsall, Jurkovic, Emshoff, Anderson, and Stanwyck (2004) found parentification to be negatively associated with self-concept. In college samples, retrospective accounts of role reversal were associated with codependency and masochistic and narcissistic personality styles (Jones & Wells, 1996; Wells & Jones, 2000). In women who had experienced mostly parentification and triangulation, these disturbances were associated with depression, anxiety, and lower levels of identity

exploration and commitment (Fullinwider-Bush & Jacobvitz, 1993; Jacobvitz & Bush, 1996).

Yet childhood role reversal was not always associated with negative developmental outcomes. In a community sample of adults, parentification was not associated with adverse developmental outcomes, such as insecure attachment or higher level of symptoms (Mayseless et al., 2004). In a community sample of adolescents, role reversal, as assessed concurrently, was associated with some positive outcomes, such as higher empathy, and was not associated with adjustment problems at school (Herer & Mayseless, 2000). Finally, retrospective accounts of role reversal proved to be associated with choice of a helping profession, such as social work, and in general with behaving as a caretaker in relationships with adults, although it is not clear whether such outcomes should be considered positive or negative (Lackie, 1983; Sessions, 1987; Valteau, Bergner, & Horton, 1995; Wells, Glickauf-Hughes, & Jones, 1999).

The *blurring of boundaries* takes place when the psychological boundaries between parent and child are blurred and the child is perceived as an extension of the parent (Green & Werner, 1996; Werner, Green, Greenberg, Browne, & McKenna, 2001). In such cases, children's development of individuation, especially in the functional and emotional domains, is expected to be hampered. Only a few studies have examined blurring of psychological boundaries. In one study, blurring (termed *enmeshment*) was defined as dependency and lack of separateness in the family. It was associated with identity threat, anxiety, and depression in high school seniors in one country (United Kingdom) but not in another (Italy; Manzi, Vignoles, Regalia, & Scabini, 2006). The authors suggested that cultural values regarding enmeshment in the family may moderate its negative effect.

Psychological control involves intrusive parenting practices, which are used to deny the child's autonomous conduct, feeling, and thought so that the parent may maintain the power position (Barber, 1996). The parent inhibits individuation by using covert strategies, such as instilling anxiety and withdrawing love, to control the child's activities and behaviors in a way that impedes his or her ability to develop a separate self-identity. Psychological control may render the child resentful, vulnerable, and helpless. It hampers his or her capacity for emotion regulation and interferes with the development of individuation (Barber, 1996, 2002).

The findings with regard to psychological control are quite straightforward. In contrast to the modest number of studies with the other constellations of inadequate boundaries, psychological control, which in most cases was assessed concurrently, has been examined in a large number of empirical studies. Psychological control was strongly associated with many adverse outcomes, mostly externalizing problems (i.e., delinquency and antisocial behavior) and internalizing problems (i.e., depression, anxiety, and lower self-confidence; Barber, Stolz, & Olsen, 2005; Barber, Olsen, & Shagle, 1994; Doyle & Markiewicz, 2005; Pettit, Laird, Dodge, Bates, & Criss, 2001).

Guilt induction is sometimes seen as one tactic of psychological control. It denies the children's free expression of desires and activities and coerces them to comply with the parents' desires and expectations by inducing guilt. Children develop close awareness of the parents' wishes, but the inability to please them, and to express their own wishes and individuality, may result in lower self-confidence and difficulty in disengaging from trying to please

the parents and comply with their wishes despite strong resentment (Minuchin, Montalvo, Guerney, Rosman, & Schumer, 1967). In a community sample of adults, guilt induction, in particular the unending need to please the parent, was associated with higher levels of anxiety and depression (Mayseless et al., 2004). Furthermore, among adolescents feeling guilty for wanting to spend time alone was associated with aggression, anxiety, depression, and withdrawn behavior (Barber & Buehler, 1996).

It appears that inadequate boundaries, which directly involve invalidation of the child's autonomous self and a rejecting attitude toward the child (i.e., psychological control and guilt induction) tend to co-occur. Similarly, parentification, blurring, and to some extent also triangulation, all reflecting different forms of enmeshment in the family, tend to co-occur and have not always been assessed individually. Research on psychological control and guilt induction showed clear negative consequences in terms of affect regulation, with both internalizing and externalizing problems. In contrast, with parentification, triangulation, and blurring the empirical picture is less clear, although in general they too are associated with negative outcomes. In all these constellations of inadequate boundaries, research is still sparse on the normative processes of individuation during late adolescence and emerging adulthood. One of the few studies that examined this developmental period showed that psychological control was associated with difficulty in coping with the transition to college, reflected in higher levels of social and emotional problems and lower grades during the 1st year there (Soucy & Larose, 2000). Looking again at college undergraduates, Fullinwider-Bush and Jacobvitz (1993) found that women who retrospectively reported experiencing role reversal, enmeshment, and overinvolvement were less advanced in their identity exploration, particularly in dating relationships. This study extended these initial findings in several ways.

The Present Study

In this study, we used concurrent reports of various forms of inadequate boundaries and not retrospective accounts, which tend to be colored by the current quality of the relationships. We focused on different aspects of one of the most important normative developmental tasks of late adolescence—separation and individuation—and used a longitudinal design that allowed examination of changes in achieving these developmental goals.

We further set out to investigate the possibility of a somewhat diverse profile of developmental outcomes for the different constellations of inadequate boundaries. In line with most previous research (Barber, 2002), we examined the different constellations of inadequate boundaries as continuous dimensions and not as dichotomous clinical categories. We expected each constellation of inadequate boundaries to be associated with problems in separation–individuation and with deficient levels of functioning and adjustment to the transition from high school during late adolescence. For example, we expected all the constellations to be associated with separation anxiety. However, we also expected different constellations of inadequate boundaries to be associated with somewhat different outcome profiles. Guilt induction and psychological control that directly invalidate the child's autonomous self and leave the child vulnerable and with poor emotion regulation capacities were expected to be strongly associated with overt difficulties throughout the transition and in particular with

difficulties in coping and adjustment to the new environment. Furthermore, these constellations, which leave the child angrily entangled, were expected to be strongly associated with conflicting internal processes—on the one hand conflictual dependence and on the other hand strivings for overindependence (high levels of dependency denial and engulfment anxiety).

We expected inadequate boundaries, in which enmeshed parent–adolescent relationships are promoted, such as blurring, role reversal, and triangulation, to be associated with overdependence (i.e., high nurturance seeking) and with problems in forging autonomous and independent functioning (e.g., low functional and emotional independence). In addition, we expected blurring to be associated with immaturity, apparent, for example, in higher levels of self-centeredness.

In this study, we also examined for the first time changes in internal indicators of separation and individuation throughout the high school transition. The study was conducted in the Israeli context, in which the normative transition of Jewish girls after high school graduation is to 22 months of compulsory military service. Military service may be characterized as a demanding and rigid ecology that requires the mobilization of special coping efforts to adjust to its challenges.

We included three assessment times in our study. In the first assessment time, during the second semester of the adolescents' senior year in high school, we assessed the girls' concurrent reports of inadequate boundaries with their parents and appraised the girls' level of individuation. This assessment served to identify the girls' profile of inadequate boundaries established while at home and to evaluate concurrent levels of individuation. The second assessment took place about 6 months after the first, 6 to 10 weeks after conscription. At that time, we examined the girls' coping and adjustment to the new environment when they had just finished their basic training and had not yet been assigned to their regular military base, enabling us to examine coping with the relatively acute stress of the separation and the recent change in environment. The third assessment took place 6 to 9 months later when the girls were already residing in their permanent military base. In this assessment, we looked at the girls' long-term adjustment and reassessed their level of individuation to compare it to pretransition levels and to observe possible changes in the processes of separation and individuation.

The study was conducted with a high-functioning community sample and not in a clinical context, thus allowing examination of the developmental outcomes of the various constellations of inadequate boundaries without possible confounding by other risk factors such as psychiatric illness, poverty, or divorce. Because the sample of girls was a low-risk sample, we generally expected them to advance in their individuation processes. Yet, we expected girls who experienced high levels of inadequate boundaries, especially of the kind that invalidate the self, such as guilt induction and psychological control, to show less progress than others in the processes of separation and individuation.

Finally, we used a combination of variable-centered and person-centered approaches that offer distinct points of view (Bergman, Magnusson, & El-Khoury, 2003). The variable-centered approach allows examination of processes expected to be present to a similar degree in all members of the sample. Here it allowed us to examine outcomes assumed to reflect the effect of each constellation separately. In contrast, the person-centered approach looks at groups

of individuals who share particular attributes. Because of comorbidity, individuals might have experienced some of the different constellations in tandem. Using the person-centered approach, we identified groups of individuals with distinct combinations of experiences of inadequate boundaries and examined their developmental outcomes. These complementary analyses afforded a more complete look at the ramifications of distinct constellations of inadequate boundaries.

Method

Participants

One hundred twenty late adolescent girls in Israel who were planning to start compulsory military service away from home were recruited during the spring semester of their senior year in high school. The families were from middle-class neighborhoods and were largely well educated (74% of the fathers and 73% of the mothers had at least a college education). At the time of the first assessment, adolescents' ages ranged from 17 to 18 years. Mothers' mean age was 46.40 years ($SD = 4.40$) and fathers' was 48.99 years ($SD = 5.33$). The number of children in these families varied between one and five, with a mean of 2.87 ($SD = 0.70$).

Procedure

Identification and selection of prospective participants in the study was through published lists of high school students. Families were contacted by mail and then by phone, informed about the research, and asked for their cooperation. In the phone conversation, we screened families to make sure that they met our research requirements (i.e., intact families). The consent of all three family members was required for a family to participate. A monetary compensation of \$40 was offered to each family and was paid at the end of the first assessment (T1). The girls and the family also received small gifts. Because the study required the investment of several hours by each family member, most families who declined did so because of time pressure. The final sample reflects consent by 55% of eligible families. T1 assessment took place during the second semester of the girls' senior year. The girls filled out questionnaires on inadequate boundaries and individuation (Separation–Individuation Test of Adolescence [SITA; Levine, Green, & Millon, 1986] and Psychological Separation Inventory [PSI; Hoffman, 1984]). Time 2 (T2) assessment took place 6 to 10 weeks after conscription, about 3 to 8 months after the first assessment. Of the original 120 adolescent girls, 110 participated and filled out questionnaires regarding their stress appraisal and coping. Reasons for nonparticipation in this assessment included difficulty locating girls who came home for very short furloughs, for most of which the family had only short notice, and the short time available to contact the participants. The third assessment (T3) took place 6 to 9 months later, when 115 of our sample of adolescent girls participated. They filled out questionnaires regarding their adjustment and individuation. At T3, the girls provided us with names of their close friends and contact information, and these friends reported on the girls' adjustment. There were no differences in any of the research variables between the subsamples of girls who participated in all assessments and those who participated in only some of them. Similarly, timing of assess-

ments was not associated with any of the variables assessed in this study.

Measures

T1 Assessment

Relationships with parents. Girls completed the Inadequate Boundaries Questionnaire (IBQ; Mayseless & Scharf, 2000), which assesses different types of inadequate boundaries within the family on a Likert-type scale ranging from 1 to 5, with higher ratings indicating higher levels of inadequate boundaries: guilt induction (eight items, $\alpha = .85$ for mothers, $.79$ for fathers; "It is very important for the parent that I thank him/her for everything he or she has done for me"), blurring of psychological boundaries (five items, $\alpha = .74$ for mothers and $.76$ for fathers; one item was excluded because it lowered internal reliability; "The parent relates to my problems as if they were his or her own"), parentification (eight items, $\alpha = .80$ for mothers and $.76$ for fathers; "Sometimes I felt that I was the only person to whom the parent could turn"), triangulation (five items, $\alpha = .67$ for mothers and $.73$ for fathers; "When disagreements developed between the parents I restored peace"), and the use of psychological control (eight items, $\alpha = .80$ for mothers and $.83$ for fathers; "The parent tries all the time to change what I feel or think about things"). Parents' reports regarding inadequate boundaries using the same questionnaire revealed similarity in the way in which family members perceived it: the associations between girls' and parents' perceptions regarding guilt induction were $.48$ and $.41$ (mothers and father, respectively); blurring, $.34$ and $.28$; parentification, $.27$ and $.17$; triangulation, $.40$ and $.37$; and psychological control, $.29$ and $.30$ (for all values except $.17$, at least $p < .05$ for mothers and fathers, respectively).

Individuation–separation. Adolescents completed the SITA, which contains seven scales tapping different dimensions of the separation–individuation process in adolescence that are based on Mahler's (1972) conceptualizations: Engulfment Anxiety ($\alpha = .77$), Dependency Denial ($\alpha = .80$), Separation Anxiety ($\alpha = .71$), Nurturance Seeking ($\alpha = .69$), Peer Enmeshment ($\alpha = .81$), Self-Centeredness–Practicing Mirroring ($\alpha = .81$), and Healthy Separation ($\alpha = .60$). Engulfment Anxiety and Dependency Denial reflect strivings for overdependence, whereas Separation Anxiety, Nurturance Seeking, Peer Enmeshment, and Self-Centeredness–Practicing Mirroring reflect a tendency toward overdependence and immaturity. On all scales besides Healthy Separation, higher scores denote problems in separation and individuation. These scales have previously been used in several studies in the United States and Israel and generally have good psychometric properties and construct validity (Kroger & Green, 1994; Levine & Saintonge, 1993).

The PSI assesses an individual's perceptions of psychological separation from parents. Here we used three of the four original scales: Functional Independence reflects the perceived ability to manage personal affairs without the assistance of parents ($\alpha = .85$ and $.86$ for mother and father, respectively); Emotional Independence measures the freedom from excessive need for emotional support, approval, and closeness ($\alpha = .87$ and $.88$ for mother and father, respectively); and Conflictual Independence refers to freedom from guilt, anxiety, mistrust, and resentment toward parents ($\alpha = .83$ and $.86$, respectively). Higher scores reflect greater

psychological separation. In this study, because of high correlations between mothers' and fathers' scales (r_s ranged from .68 to .99), we created scales averaging across them. The measure showed high reliability and validity (Hoffman & Weiss, 1987).

T2 Assessment

Stress appraisal and coping. We created a Subjective Difficulty scale for this study to measure the extent of the difficulties that girls experienced after the transition to military service. It included 10 items describing situations that might cause difficulties. The girls were asked to indicate on a Likert scale ranging from 1 to 4 the extent to which they experienced each of the situations (e.g., separation from family and friends, sleeping arrangements, and uncertainty regarding the future) as a difficulty. Higher scores reflect higher levels of difficulty ($\alpha = .85$).

The Responses to Stress Questionnaire (RSQ; Connor-Smith, Compas, Wadsworth, Thomsen, & Salzman, 2000) was developed on the basis of a multidimensional model of responses to stress (Compas, Connor, Osowiecki, & Welch, 1997). The girls responded to 57 items on a 4-point scale ranging from 1 (*not at all*) to 4 (*a lot*), referring to the time since they started their military service. The voluntary coping component included primary control engagement coping, directed at changing the situation or changing one's emotions (problem solving, emotional expression, and emotional regulation; $\alpha = .77$); secondary control engagement coping, directed at adapting to the situation (distraction, acceptance, positive thinking, and cognitive restructuring; $\alpha = .80$); and disengagement coping, which is oriented away from the stressor or one's reactions (avoidance, denial, and wishful thinking; $\alpha = .75$). The involuntary component included involuntary engagement (rumination, intrusive thoughts, physiological arousal, emotional arousal, and impulsive action; $\alpha = .94$) and involuntary disengagement (emotional numbing, cognitive interference, inaction, and escape; $\alpha = .88$). In general, primary and secondary control engagement are related to better adjustment in response to most stressors, whereas the other scales are related to poorer adjustment (Connor-Smith et al., 2000).

T3 Assessment

Adjustment. Adjustment to military service was assessed by two informants. Friends of the girls participating in the study were asked to report on the girl's distress and functioning (e.g., "My friend has been feeling tense or nervous lately"; $\alpha = .91$). Additionally, the girls reported on their own adjustment using the Student Adaptation to College Questionnaire (SACQ; Baker & Siryk, 1984), which was adapted to the military context (67 items; Wintre & Ben Knaz, 2000). The questionnaire, the validity of which has been established in many studies (e.g., Beyers & Goossens, 2002), includes four scales: General Adjustment to Military Environment ($\alpha = .94$), Social Adjustment ($\alpha = .92$), Personal-Emotional Adjustment ($\alpha = .86$), and Institutional Commitment ($\alpha = .90$). Higher scores reflect better adjustment. Friends' reports regarding adjustment and the adolescent girls' reports were highly correlated, with correlations ranging between .48 to .60, demonstrating convergent validity of the two measures and cross-reporter agreement.

Individuation-separation. The adolescent girls filled out the same measures of individuation and separation that they had

completed at T1. This included the SITA: Separation Anxiety ($\alpha = .75$), Engulfment Anxiety ($\alpha = .76$), Dependency Denial ($\alpha = .77$), Nurturance Seeking ($\alpha = .70$), Peer Enmeshment ($\alpha = .75$), Self-Centeredness ($\alpha = .87$), and Healthy Separation ($\alpha = .62$). They also filled out the PSI again: Functional Independence ($\alpha_s = .86$ and $.85$ for mother and fathers, respectively), Emotional Independence ($\alpha_s = .86$ and $.87$), and Conflictual Independence ($\alpha_s = .90$ and $.88$). Again, because of high correlations between mothers' and fathers' PSI scales ($r_s = .71-.86$), we created scales averaging across mothers' and fathers' scales.

Results

Variable-Centered Approach

The various constellations of inadequate boundaries with mothers and with fathers—for example, psychological control by father and psychological control by mother—were highly correlated (Pearson's r ranged from .73 to .87). The profile of correlations with outcomes was highly similar for mothers' and fathers' scales, so for data reduction purposes we created a general scale for each constellation, averaging across mothers' and fathers' scales. In addition, psychological control and guilt induction were highly correlated (.80), so we constructed a Guilt-Psychological Control scale by averaging across the two scales.

As seen in Table 1, Guilt-Psychological Control was positively associated with T1 Dependency Denial, Engulfment Anxiety, and Separation Anxiety and negatively associated with Conflictual Independence. At T2, it was associated with Subjective Difficulty, Involuntary Engagement, and Involuntary Disengagement. At T3, as at T1, Guilt-Psychological Control was positively associated with Dependency Denial, Engulfment Anxiety, Separation Anxiety, and Nurturance Seeking and negatively associated with Conflictual Independence. Guilt-Psychological Control was further negatively associated with general adjustment to the military and institutional commitment to the military, as reported by the girls, and with adjustment problems, as reported by their friends.

The three other scales of inadequate boundaries—blurring, parentification, and triangulation—had similar profiles of correlations, although each presented unique associations as well. With regard to individuation indicators at T1, all three scales were positively associated with Nurturance Seeking and Separation Anxiety and negatively associated with Conflictual Independence. Parentification and triangulation were associated with Dependency Denial, whereas blurring and parentification were negatively associated with Functional Independence and Emotional Independence. Blurring was also associated with self-centeredness. At T2, all three scales were associated with Subjective Difficulties and Disengagement Coping, and triangulation was positively associated with the positive coping strategy of Primary Control Engagement. At T3, the three scales were negatively associated with all indicators of separation: Emotional Independence, Functional Independence, and Conflictual Independence. All three scales were associated with two individuation scales: Nurturance Seeking and Separation Anxiety. Blurring and parentification were associated with self-centeredness. With regard to Adjustment to the Military Environment at T3, only triangulation was negatively associated with Emotional Adjustment.

Table 1
Associations of Inadequate Boundaries Scales and Girls' Separation-Individuation, Autonomy, Coping, and Adjustment

Developmental outcomes	Guilt-psychological control	Blurring	Parentification	Triangulation
Time 1				
Separation-Individuation Test of Adolescence				
Dependency denial	.30***	.14	.25**	.29***
Engulfment anxiety	.49***	.10	.06	.09
Separation anxiety	.35***	.30***	.25**	.18*
Peer enmeshment	.05	.17 [†]	-.05	-.08
Nurturance seeking	.12	.57***	.45***	.23**
Self-centeredness	.11	.30***	.17	.00
Healthy separation	.00	.02	-.16	-.14
Psychological Separation Inventory				
Conflictual Independence	-.70***	-.23**	-.24**	-.28**
Functional Independence	.09	-.45***	-.41***	-.14
Emotional Independence	-.04	-.63***	-.55***	-.17
Time 2				
Subjective Difficulty	.22*	.20*	.24**	.20*
Responses to Stress Questionnaire				
Primary control engagement	.09	.10	.07	.19*
Secondary control engagement	-.06	.17	.16	.15
Disengagement coping	.17 [†]	.23*	.28**	.21*
Involuntary engagement	.27**	.17	.16	.13
Involuntary disengagement	.19*	.15	.16	.05
Time 3				
Student Adaptation to College Questionnaire				
General Adjustment to Military Environment	-.17 [†]	.15	.07	-.05
Social Adjustment	-.13	.14	.11	-.09
Emotional Adjustment	-.35***	-.06	-.08	-.18*
Institutional Commitment	-.19*	.15	.13	-.04
Friends' reports: Adjustment problems	.20*	-.11	-.08	-.06
Separation-Individuation Test of Adolescence				
Dependency Denial	.20*	.05	.10	.16
Engulfment Anxiety	.39***	.14	.16	.17
Separation Anxiety	.32***	.18*	.21*	.19*
Peer Enmeshment	.01	.04	-.06	-.03
Nurturance Seeking	.18*	.49***	.44***	.31***
Self-Centeredness	.08	.31***	.30***	.16
Healthy Separation	.03	-.05	-.13	-.17
Psychological Separation Inventory				
Conflictual Independence	-.57***	-.21*	-.21*	-.30***
Functional Independence	.07	-.36***	-.37***	-.22*
Emotional Independence	-.07	-.53***	-.49***	-.26**

[†] $p < .10$. * $p < .05$. ** $p < .01$. *** $p < .001$.

Person-Centered Approach

To identify groups of adolescents with similar profiles of inadequate boundaries, we subjected the scores on the inadequate boundaries scales administered at T1 to cluster analysis (first to hierarchical cluster analysis by Ward's method and then to the K-MEANS Cluster procedure of the SPSS statistical package). Several clustering solutions (for three, four, and five clusters) were examined. We chose the three-cluster solution for several reasons: (a) the theoretical interpretability of the clusters, (b) a reasonable minimum number of participants in each cluster, and (c) a drop in the Amalgamation index, which has been suggested as a heuristic way to determine the "right" number-of-clusters solution (Aldenderfer & Blashfield, 1984). On the basis of these analyses, we constructed the three clusters of adolescents with distinct profiles of intergenerational boundaries in the family: an adequate boundaries group, a guilt-psychological control group, and a blurred-parentified group. The adequate boundaries group reported the lowest levels

of the various kinds of inadequate boundaries among the three groups. The guilt-psychological control group reported the highest levels of guilt induction, psychological control, and triangulation, whereas the blurred-parentified group (together with the guilt-psychological control group) showed higher levels of blurring of boundaries and parentification than did the adequate boundaries group and a midway level of triangulation between the adequate boundaries and the guilt-psychological control groups. Thus, the comparison of the guilt-psychological control group with the blurred-parentified group allowed examination of a profile of high blurring and parentification without guilt induction and psychological control. We conducted a series of multivariate analyses of variance (MANOVAs) with these clusters (see Table 2).

T1 Assessment

The MANOVA conducted to examine adolescents' separation-individuation (SITA variables) during the first assessment revealed

Table 2
Results of Analysis of Variance With Clusters of Inadequate Boundaries on Outcome Variables

Developmental outcomes	Adequate (group 1; n = 49)		Guilt induction–psychological control (group 2; n = 29)		Blurred–parentified (group 3; n = 40)		F ^a	Contrasts
	M	SD	M	SD	M	SD		
Time 1								
Separation–Individuation Test of Adolescence								
Dependency Denial	17.35	4.16	20.18	6.01	17.87	3.94	3.60	
Engulfment Anxiety	24.95	6.50	29.75	6.05	24.52	5.72	7.30***	1,3 < 2
Separation Anxiety	24.13	4.40	29.14	4.81	25.96	4.73	10.74***	1,3 < 2
Peer Enmeshment	40.02	6.69	40.92	6.66	40.74	4.44	0.26	
Nurturance Seeking	23.14	5.00	28.84	7.39	29.30	5.56	14.95***	1 < 2,3
Self-Centeredness	30.17	5.00	29.83	5.69	31.66	5.84	1.19	
Healthy Separation	43.40	5.23	42.47	5.36	41.88	4.39	1.06	
Psychological Separation Inventory								
Conflictual Independence	74.64	13.20	54.98	17.15	74.75	11.52	22.44***	2 < 1,3
Functional Independence	30.55	8.50	28.82	10.74	24.28	7.54	5.76**	3 < 1,2
Emotional Independence	44.09	9.51	36.93	12.29	33.31	9.90	12.41***	2,3 < 1
Time 2								
Subjective Difficulty	2.11	.59	2.56	.46	2.38	.55	5.66**	1 < 2
Responses to Stress Questionnaire								
Primary control engagement	3.00	.48	3.14	.49	3.08	.49	0.76	
Secondary control engagement	2.53	.51	2.50	.62	2.60	.57	0.27	
Secondary control disengagement	1.94	.46	2.34	.58	2.28	.48	7.05***	1 < 2,3
Involuntary engagement	1.88	.60	2.35	.68	2.20	.73	4.71**	1 < 2,3
Involuntary disengagement	1.42	.45	1.68	.47	1.66	.53	3.44*	1 < 2,3
Time 3								
Student Adaptation to College Questionnaire								
General Adjustment to Military								
Environment	6.52	1.66	6.21	1.51	6.83	1.24	1.40	
Social Adjustment	6.77	1.55	6.59	1.51	7.04	1.20	0.82	
Emotional Adjustment	6.22	1.32	5.28	1.68	6.25	1.15	5.04**	2 < 1,3
Institutional Commitment	6.69	1.73	6.41	1.79	7.35	1.30	3.01	
Friends' reports: Adjustment problems	2.73	1.46	3.32	1.86	2.29	1.44	3.34*	3 < 2
Separation–Individuation Test of Adolescence								
Dependency Denial	16.70	4.11	17.21	3.86	17.08	3.94	0.17	
Engulfment Anxiety	21.91	5.52	27.14	6.26	23.20	6.03	6.92***	1,3 < 2
Separation Anxiety	21.68	5.24	26.26	6.43	23.30	3.80	6.85**	1,3 < 2
Peer Enmeshment	40.91	5.61	41.02	5.18	40.26	4.39	0.23	
Nurturance Seeking	22.21	5.19	27.55	8.03	27.70	5.56	10.79***	1 < 2,3
Self-Centeredness	28.84	5.20	29.43	6.71	29.58	4.88	0.21	
Healthy Separation	41.70	3.39	41.64	3.58	40.56	4.34	1.09	
Psychological Separation Inventory								
Conflictual Independence	82.06	8.23	67.08	13.40	80.16	9.21	20.80***	2 < 1,3
Functional Independence	30.05	8.95	30.77	10.57	25.24	6.32	4.42*	3 < 1,2
Emotional Independence	43.13	9.63	35.88	11.44	34.22	9.56	9.30***	2,3 < 1

^a Time 1 $F(1, 116)$; Time 2 $F(1, 105)$; Time 3 $F(1, 110)$.
* $p < .05$. ** $p < .01$. *** $p < .001$.

a significant main effect of clusters of inadequate boundaries, $F(7, 110) = 3.16, p < .01, \eta^2 = .17$, power = 0.94. Post hoc tests revealed that the guilt–psychological control group reported more separation anxiety and engulfment anxiety than did the other groups, whereas the adequate boundaries group reported the lowest levels of nurturance seeking. The MANOVA conducted with the PSI during the first assessment revealed a significant main effect of inadequate boundaries clusters, $F(3, 114) = 16.30, p < .001, \eta^2 = .30$, power = 1.00. Post hoc tests revealed that the guilt–psychological control group showed the lowest levels of conflictual independence of all, the blurred–parentified group showed the lowest levels of functional independence, and the adequate boundaries group showed the highest levels of emotional independence.

T2 Assessment

The analysis of variance (ANOVA) conducted to examine adolescents' appraisal of their difficulties (subjective difficulty) revealed a significant main effect of clusters, $F(2, 104) = 5.66, p < .01, \eta^2 = .10$, power = 0.85. Post hoc tests revealed that the guilt–psychological control group reported higher levels of subjective difficulty than did the adequate boundaries group. The MANOVA conducted to examine adolescents' coping (reactions to stress variables) revealed a significant main effect of clusters, $F(5, 102) = 3.41, p < .01, \eta^2 = .14$, power = 0.89. Post hoc tests revealed that the adequate boundaries group reported lower levels of secondary control disengagement, involuntary engagement, and involuntary disengagement than did the other groups.

T3 Assessment

The MANOVA conducted to examine adolescents' adjustment to the military service (SACQ variables) revealed a significant main effect of clusters, $F(4, 107) = 2.56, p < .05, \eta^2 = .09$, power = 0.71. Post hoc tests revealed that the guilt–psychological control group demonstrated the lowest levels of emotional adjustment of all the groups. The MANOVA conducted to examine adolescents' separation–individuation (SITA variables) at the third assessment revealed a significant main effect of clusters, $F(7, 104) = 4.64, p < .001, \eta^2 = .24$ power = 0.99. Post hoc tests revealed, as in T1, that the guilt–psychological control group reported more separation anxiety and engulfment anxiety than did the other groups, whereas the adequate boundaries group reported the lowest levels of nurturance seeking. The MANOVA that examined the PSI during the third assessment revealed a significant main effect of clusters, $F(3, 108) = 18.95, p < .001, \eta^2 = .35$, power = 1.00. Post hoc tests revealed, as in T1, that the guilt–psychological control group showed the lowest levels of conflictual independence, the blurred–parentified group showed the lowest levels of functional independence, and the adequate boundaries group showed the highest levels of emotional independence. The ANOVA conducted with friends' report was significant. The guilt–psychological control group revealed more adjustment problems than did the blurred–parentified group.

Time Effects

To examine changes over time in the individuation process, we conducted a MANOVA with clusters as a between-participants variable and time as a repeated measure with regard to the SITA and PSI questionnaires. The MANOVA with the SITA showed, as expected (reflecting previous analyses), a significant main effect for clusters, $F(7, 104) = 7.08, p < .001, \eta^2 = .32$, power = 1.00. A significant time effect, $F(7, 103) = 11.44, p < .001, \eta^2 = .44$, power = 1.00, was revealed, but the interaction was not significant. Post hoc tests ($p < .05$) showed that over time, there were advancements in the separation–individuation process on all indicators except peer enmeshment.

The PSI scales produced a similar picture. A significant clusters effect, $F(3, 108) = 26.93, p < .001, \eta^2 = .43$, power = 1.00, and a significant time effect, $F(3, 107) = 16.64, p < .001, \eta^2 = .32$, power = 1.00, but also a significant interaction effect, $F(3, 108) = 2.98, p < .05, \eta^2 = .08$, power = .69, appeared. Post hoc tests of the time effect showed significant progress in the conflictual independence of all the girls. The ANOVA for the interaction between clusters and time with conflictual independence approached significance ($p < .06$), with the guilt–psychological control group showing the largest progress, although still showing the lowest levels of conflictual independence at both times.

Discussion

Variable-Centered Approach

As expected, all the constellations of inadequate boundaries were associated with problems in the normative process of separation–individuation during late adolescence and emerging adulthood. These included problems in individuation and in adjusting to the high school transition, which in our sample involved

moving to the new environment of military service. All constellations were associated with higher levels of separation anxiety and lower levels of conflictual independence, exposing the internal conflictual nature of the dilemma faced by girls who experience inadequate boundaries in their families. They were preoccupied with conflict with their parents but at the same time unable to free themselves because of feeling anxious and afraid of separation.

Besides this internal dynamic, which characterized all the constellations, each presented a somewhat unique profile of outcomes. For example, as expected our study demonstrated the adverse outcomes of parental guilt induction and psychological control. These constellations were associated with higher perceived difficulties during the transition, less optimal coping strategies to deal with these perceived stressors, and lower levels of long-term adjustment to the new environment. The poorer long-term adjustment was also discerned by the girls' friends. Interestingly, guilt induction and psychological control were associated with conflictual coping strategies of an involuntary nature during the first few weeks after the transition. They were associated with involuntary engagement, such as rumination and physiological arousal, and with involuntary disengagement, such as emotional numbing, inaction, and escape. This profile of inadequate emotion regulation capacities, demonstrated here for the first time, probably reflects the lower levels of ego strength and self-efficacy that are expected to ensue from such experiences within the parent–child relationship. Parental guilt induction and psychological control were further associated, as expected, with problems in separation and individuation of the overdependent type (e.g., higher dependency denial and engulfment anxiety). Interestingly, these two constellations were not associated with problems in functional or emotional independence, which involve poorer capacity to manage personal affairs without parents' assistance and excessive need for emotional support. The experience of rejection by their parents may lead the girls to denounce possible reliance on them, both functionally and emotionally, and to exhibit independence as a way to escape the parents' intrusiveness and criticism.

As expected and in line with the mixed picture of previous findings on blurring, parentification, and triangulation, these less harsh strategies of inadequate boundaries were associated with fewer maladaptive behaviors and exhibited a somewhat different profile of problems. Parentification, triangulation, and blurring seem to reflect difficulties in forging a separation (as reflected in lower functional and emotional autonomy) and a strong tendency to remain connected with the parental system in an immature way (as reflected in high nurturance seeking), even during emerging adulthood when the developmental task calls for separation.

Blurring was further associated, as expected, with self-centeredness at both assessment times, and unlike parentification and triangulation, was not associated with dependency denial at T1. This pattern of associations demonstrated, as expected, a more immature stance of emotional and functional dependency for blurring than for triangulation and parentification. Interestingly, unlike blurring and parentification, and contrary to expectation, triangulation presented a somewhat better picture of functioning in some indicators. It was not associated with problems in functional and emotional independence at T1, and despite being associated with more emotional problems in military service at T3, at T2 it was positively associated with primary control engagement—an adaptive mode of coping that involves problem solving and emotion

modulation. In our low-risk sample, which included only intact families, it is possible that practicing mediation between parents contributed at least partially to better coping skills.

Person-Centered Approach

We especially discerned the distinct profile of the constellations when using the person-centered approach, which accentuated the general picture that emerged from the variable-centered approach. For one group of girls, the various constellations of inadequate boundaries all went together. This group, the guilt–psychological control group, evinced the lowest level of individuation and separation and the lowest level of coping and adjustment to the high school transition. Clearly, even in a low-risk sample, experiencing such family constellations is a risk factor for developmental problems of individuation. It appears that these girls simultaneously want to merge with parental figures and to move away from them and are therefore unable to do either. These conflictual needs might result from their deprivation of real experiences of closeness and approval, which contribute to their longing for such experiences, as well as to their unsuccessful striving for individuation that can presumably be attained only when some level of security has been satisfied (Sroufe, 1979). Still, even this group advanced like others in the normative processes of separation and individuation. Furthermore, on one indicator, conflictual independence, this group even progressed more than on others, although still showing the lowest levels of individuation. For them, physical separation and the transition to the new environment contributed only partially to processes of healing and repair, perhaps because of the use of less adequate strategies to deal with stress (e.g., simultaneously using higher levels of involuntary engagement and disengagement), which made their adaptation to the new environment highly problematic.

The second group included girls who evinced mostly a blurred and parentified dynamic, and to a lesser extent a triangulated dynamic without a high level of psychological control and guilt induction. For this blurred–parentified group, an interesting profile of functioning emerged. In some cases, it resembled the adequate boundaries group (e.g., low separation anxiety, low engulfment anxiety, high conflictual independence, and high reported emotional adjustment), yet in others it evinced the highest level of difficulties, together with the guilt–psychological control group (e.g., highest inadequate coping strategies—involuntary engagement and disengagement, highest nurturance seeking, and lowest level of emotional independence). Still, the blurred–parentified group demonstrated the lowest level of functional independence. As expected, because of the enmeshed profile of relationships with their parents, for these girls difficulties in functional independence stood out as characterizing these constellations and point to issues of overdependency as their core concerns. Interestingly, in our sample these girls were able to deal with the physical separation in a rather normative manner. This may have to do with the moderately adequate emotion regulation capacities that they had internalized and may also be related to the Israeli culture, in which overinvolvement and high levels of family cohesiveness are quite normative (Scharf & Mayseless, 2005). This profile of functioning and the results of the variable-centered approach support our expectations and previous suggestions that parentification and

blurring, although problematic, may not be as overwhelming as guilt induction and psychological control.

Together, the results from the variable-centered and the person-centered analyses coalesce in underscoring the somewhat different developmental path of two groups of constellations of inadequate boundaries. A harsh cluster involving rejection and invalidation of the child's autonomous self evinced a combination of angry entanglement and strivings for overindependence, and an enmeshed cluster involving blurring of boundaries and engaging the child in role reversal or triangulation demonstrated a moderately normal level of coping together with overdependence and immaturity.

These findings demonstrate that parents who bind their children to them or whose children are delegated to serve parental needs (Scharf & Shulman, 2006; Stierlin, 1981) hamper the child's individuation. The developmental tasks of separating from one's parents, establishing an independent living arrangement, and disentangling from internalized parental figures might prove difficult for youth who have experienced boundary dissolution in their family of origin.

As expected, over time there was a progress in the separation–individuation process, reflected in more individuation (i.e., lower separation anxiety, lower engulfment anxiety, and lower dependency denial) and lower levels of conflictual independence for the entire sample. These normative changes may reflect maturity effects but may also be related to the specific context of military service with its challenges and experiences away from the parental nest. An environment in which girls are required to stand for themselves and cope with new challenges could promote their separation and individuation. Still, although with time the levels of individuation increased, girls who experienced higher levels of inadequate boundaries of the harsh type (psychological control and guilt induction) remained less psychologically individuated than others.

Strengths and Limitations

Previous research that examined this period found that psychological control was associated with problems in coping with the transition to college (Soucy & Larose, 2000) and that experiencing role reversal, enmeshment, and overinvolvement in childhood (retrospectively recalled) was associated with less progress in identity exploration (Fullinwider-Bush & Jacobvitz, 1993). This study extended previous research in several important respects. First, we examined several constellations of inadequate boundaries, including constellations that are not often studied, such as blurring, and found a somewhat distinct profile of developmental outcomes for some of them. Second, we examined high school transition in Israel, which is a different culture than North America, and looked at the transition into an environment other than college (i.e., military service), thus demonstrating the general risk of inadequate boundaries for normative development of separation and individuation across cultures and contexts.

Third, the longitudinal design of our study enabled us to examine changes in the individuation process. The study showed that despite experiencing inadequate boundaries, the girls in this non-risk sample showed progress in obtaining higher levels of separation and individuation across the high school transition. Focusing on a nonrisk sample made it possible to disentangle the derivatives of risk conditions from the developmental correlates of the inad-

equate boundaries. Finally, the variable-centered and person-centered perspectives complemented each other and helped us learn more intimately about different types of inadequate boundaries, as well as understand the composition of different types that tend to appear together.

Our study included only girls. Although this enabled us to delineate a clearer picture regarding girls' individuation processes, future studies should include boys as well and explore the distinctive effects of inadequate boundaries on both genders. Although we gathered data regarding relationships with mothers and fathers to examine their separate effects more closely, we ended up combining scales of fathers and mothers because of high correlations between them. This problem has already been discussed in previous studies, but to overcome this limitation future research would benefit from using other measures such as observations (Scharf & Mayseless, 2007). This study relied heavily on self-report, except for friends' reports on adaptation. These reports were highly correlated, demonstrating convergent validity across reporters. Still, although children's subjective perception is probably the best indicator of their future adaptation, future research could achieve a more complete understanding by using other perspectives.

The study was conducted in the Israeli culture, and the transition was into military service. Several specific aspects of these contexts may restrict the ability to generalize from the study's findings. In more individualistic contexts, more severe implications might have been observed, especially for the less harsh inadequate boundaries. For example, in a previous study blurring showed adverse effects in an individualistic culture (United Kingdom), although it did not have negative implications in Italy, a more collectivistic society (Manzi et al., 2006). The authors suggested that given the normative high involvement in the Italian familial context, blurring, or enmeshment, may not be perceived as violating one's individuation needs. Although the communal and collectivistic familial context of Israel (e.g., Salomon & Mayseless, 2003) resembles the Italian context more closely than the Anglo-Saxon, in our study blurring was still related to maladaptive outcomes. Even in a relatively collectivistic culture, being too close might be an obstacle on the way to maturity. Still, blurring might incur even harsher outcomes in a context that does not favor strong familial involvement. Furthermore, the transition from high school to college may have a different effect on the processes of individuation. College provides more freedom and choice than military service and may be a better environment to practice and develop one's separation and individuation.

Implications for Research

In this study, we assessed the constellations of inadequate boundaries only at T1 because we were interested in how these boundaries' disturbances—established while the adolescent was at home—predicted the adolescent's adjustment after leaving home. The current data do not address whether and in what way these boundary dynamics undergo change over time as the adolescents leave home. This is an important question because change of environment and physical separation are expected to provide possibilities for change in these dynamics. Similarly, in this study we did not examine antecedents of the boundaries' disturbances. For example, we did not look at the contribution of parents' person-

alities, their marital relationship, or child effects, such as the child's personality or temperament, to such constellations. Future research may need to examine the contribution of both partners to these boundary problems, as well as to disentangle the adjustment problems that are related to inadequate boundaries from those that are more clearly related to individuals' preexisting difficulties. This calls for longitudinal research that follows families during different developmental stages to more deeply understand the processes involved in the development of these problematic constellations and their preservation. Studies in other cultural contexts (e.g., less familial), as well as in other socioeconomic contexts (e.g., at-risk families), could shed more light on the risk and protective factors implicated in this phenomena.

In this study, as in most previous studies (Barber, 2002), we examined the different constellations as continuous dimensions and did not address the possibility of clinical cutoff points. Unlike other areas in which clinical cutoff points have been identified (e.g., depression and externalizing symptoms), current research that measures inadequate boundaries has not yet addressed this question. The examination of this possibility is strongly needed to allow for valid and reliable diagnosis (if cutoff points are to be identified) and to examine the possibility that some forms of inadequate boundaries that are experienced at moderate levels, such as parentification, might actually have positive ramifications for the child's development. Future research needs to be open to the possibility of processes of resiliency and growth even in such adverse familial situations.

Implications for Practice and Interventions

The results of our study have practical implications as well. The study pointed to psychological control and guilt induction as harsher constellations than parentification and blurring of psychological boundaries. Moreover, it highlighted the internal conflictual dynamics of the first group of constellations as compared with the more dependent and immature nature of the second group. Clinicians may use these insights to set the aims of the therapy and direct the focus of the intervention.

This study reveals that some of the constellations tended to co-occur. It seems important for clinicians to look carefully at the various constellations and to adapt their interventions accordingly. Clinicians who encounter triangulation dynamics in the family may need to be alert to the different meanings of such constellations in the context of enmeshment or psychological control in the family.

Our study also underscored the importance of this period in terms of the potential it offers all girls to develop more independent functioning. Consequently, clinicians should look into these constellations of inadequate boundaries more closely, even in moderately high-functioning families, by identifying problematic families and offering preventive intervention. This could maximize the abilities of these youngsters in dealing with the separation and individuation developmental task, as well as helping parents who engender inadequate boundaries with their children to let go (Stierlin, 1981). Similarly, although this work focused on adolescence, it has implications for early developmental periods as well. Interventions during the first separation-individuation phase (Mahler, 1972) could help families and children to cope more successfully with later developmental tasks. In the same way, intervening

during the later developmental phases, termed by Colarusso (2000) as the third, fourth, and fifth stages of individuation, might prove successful as well.

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