

An Enmeshed Parent-Child Relationship: Question and Answer Format

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What is enmeshment?

Enmeshment is a construct identified by family systems therapy, primarily Structural Family Systems therapy whose primary theorist is Salvador Minuchin, that describes the loss of psychological boundaries between two people, typically a parent and a child. The parent and child are described as have a fused psychological state. The family systems theorist, Bowen, referred to psychological enmeshment as an “undifferentiated ego mass.”

More recently, the underlying neuro-biological processes responsible for the development of this shared psychological state have been identified, described in the scientific literature as an “intersubjective field,” or what Ed Tronic at Harvard calls a “dyadic state of consciousness”.

The development of a shared psychological state, or an “intersubjective field,” – what I refer to in my practice as a “psychological connection” when talking with clients and parents – is a normal human process that is mediated by a set of brain cells called mirror neurons. There is a wonderful PBS Nova program on the Internet regarding mirror neurons, if you google “mirror neurons” and “nova” it will show up.

The mirror neuron system allows us to feel what other people feel as if we where having the experience ourselves. It is this “psychological connection” system that allows us to feel what the actors feel when we watch a movie. We feel their sadness, their joy, their terror, as if we were having the experience ourselves, using our own emotional system to feel the experience of the actors.

The intersubjective system is scientifically recognized as the second of two primary relationship systems, the other being the attachment system, that are neuro-biologically embedded in the brain. There is some suggestive scientific evidence that the failure of the intersubjective system might be responsible for some forms of autism, where the child is no longer psychologically connected within the social field.

Psychological enmeshment involves the hyper-activation, an over-inflammation, of the intersubjective system, where the psychological boundaries of what the other person experiences are not sufficiently differentiated from one’s own self-experience, so that the person, such as the child, not only feels what the parent feels AS IF it was the child’s experience, but actually begins to believe that the parent’s experience IS the child’s experience.

Returning to the example of the intersubjective system relative to our experience of actors in the movie, when we’re watching a movie we never become confused as to what the actor experiences and what we experience, we never feel as if we are truly the actor and that we authentically have the experiences of the actor in the movies. We can differentiate between

ourselves and the actor, even though our own emotional system is serving double duty of feeling our own personal experience and that of the actor's. It would represent a massive failure of interpersonal psychological boundaries if we actually came to believe we WERE the actor in the movie, that the actor's experience WAS actually our own personal experience.

However, that's what happens within a psychologically enmeshed relationship. Because of interpersonal processes that maintain a hyper-activation of the intersubjective field between the parent and child, interpersonal processes that don't allow for sufficient psychological separation between the two distinct psychological experiences of the parent and the child as psychologically separate persons, there is a massive failure of psychological separation so that the child becomes confused as to what is the parent's psychological experience and what belongs to the child's experience. Remember, the mirror neuron system uses our own emotional system in double-duty, both for our own experience and also to absorb the experiences of others, such as the actors in the movie.

So if there is insufficient psychological separation, what Minuchin describes as psychological boundary violations, then the child loses the ability to differentiate his or her own authentic experience from that of the parent. So the child enters and maintains a chronic state of psychological state-sharing with the parent, the "dyadic state of consciousness" described by Tronick, or the "undifferentiated ego mass" discussed by Bowen.

So an enmeshed psychological relationship refers to the chronic sharing of psychological states between two people, mediated by an unrelenting hyper-activation of the mirror neuron network in which there is the loss of the psychological boundaries between two distinctly separate psychological experiences, so that the participants enter a chronic and psychologically unhealthy state of shared psychological experience.

[How is enmeshment created?](#)

There are two ways to look at the creation of an enmeshed psychological relationship, from a neuro-biological perspective and from a relationship-communication perspective.

From a neuro-biological perspective, the enmeshed relationship involves chronic over-activation/inflammation of the intersubjective system, which is mediated by the mirror neuron network. Because the neurons involved in this process have been identified (i.e., the mirror neuron network), neuroscientists are able to examine this system in brain scans to study what features of the interpersonal relationship the mirror neuron system is designed to register.¹ The results are that the mirror neuron system is designed to register the intent of other people, what is motivating their actions.

Now to do this, to understand the intent or motivation of other people, we also need to understand what the other person is feeling, so this is the source of our ability to feel what

¹ This brain scan process with mirror neurons is shown in the NOVA video segment discussed earlier.

other people are feeling as if we were having the feeling ourselves, but the fundamental function of the mirror neuron system is to register the intent, or motivation, of the other person, in which the feeling state of the other person is just one part of the information involved.

So as the child is in relationship with a parent, the child's mirror neuron system is registering complex information regarding the emotional state and meaning constructions of the parent. The child's brain registers this information through the mirror neuron network by adopting a similar, "as-if," brain state organization as that of the parent, creating a state as if the child was the parent. When watching a movie, we feel what the actor in the movie feels by adopting a similar brain state to that displayed by the actor. We feel the actor's feelings, but what is more, we feel and understand the actor's intentions and motivations.

This capacity to adopt the psychological brain state organization of another person is the psychological process that underlies language acquisition in early infancy, where the child enters a resonant brain state with the parent so that when the parent uses a word, such as "dog," the child, being in a resonant brain state, recognizes the referent to which the parent is referring as that small moving furry thing over there. Mirror neurons and the intersubjective field are central and essential components of language acquisition.

The formation of an intersubjective field can be fostered by the parent whenever the parent is responsive to the child's own inner psychological state, what we refer to as being "attuned" to the child's inner experience. When the parent attunes to the child's inner experience, then the shared psychological brain state the parent shares with the child serves to amplify the child's own authentic experience. On the other hand, whenever the parent adopts a brain state contrary to the child's own inner experience, what we call misattunement to the child, this parental brain state serves to dampen the child's inner psychological experience.

Through a process of differentially attuning to one type of child inner experience, i.e., the desired meaning that is consistent with the parent's own meaning constructions, while selectively misattuning to the child's self-experiences that are contrary to the desired meaning constructions, i.e., that are contrary to the meaning constructions of the parent, the parent is able to gradually amplify through parental attunement the child's psychological agreement with the parent's psychological meaning constructions and dampen through misattunement the child's own authentic self-experience that differs from the parent's.

[Is this healthy parenting for the child?](#)

No. This parenting process is diametrically opposite of what represents developmentally healthy parenting. What we want from healthy parenting is for the parent to attune to the child's own authentic experience, thereby amplifying the child's authentic self-experience while selectively misattuning to socially undesirable behavioral expressions, such as defiance and aggression, thereby dampening these overt expressions of the child's inner

experience. Then, through guidance and communication approaches the parent helps the child express the child's authentic self-experience in more socially appropriate ways, primarily through language, socially appropriate emotional communication, and social negotiation of mutual needs.

In a psychologically enmeshed relationship, however, the parent obliterates the child's authentic self-experience in favor of the child merely adopting a resonant experience with the parent. This fundamentally disrupts and distorts the child's healthy psychological development. Although the child may display positive pro-social behaviors, primarily through an absorbed hyper-maturity originating from a fused psychological state with an adult's mature nervous system, the child's positive behavior is developmentally problematic because it is not originating in the child's own authentic self-experience. So, developmentally, the child is being robbed of important immaturity experiences that are vital to the healthy emotional and psychological development of an authentic nervous system. Developmentally, we would like the child to be a little less good, a little less wonderful, and a lot more authentic kid. Our goal as parents is not merely to obtain an obedient child, our goal as parents is to foster the development of a psychologically healthy child, who grows up to become a psychologically healthy adult.

[From a relationship-communication perspective, how is an enmeshed relationship created?](#)

From a relationship-communication framework, an enmeshed relationship forms through a repetitive series of what are called, "relational moves." These are relationship and communication interaction sequences that together communicate meaning. Remember, the mirror neuron system is trying to recognize the intent, the motivation, of the parent. So through a series of behavioral and emotional communications the parent can communicate the meaning constructions, the inner psychological state, of the parent to the child.

An enmeshed relationship develops when the parent uses relational move sequences to continually invalidate the child's own meaning constructions through the parent's misattunement to the child's own inner experience, while the parent simultaneously attunes with the child when the child adopts the meaning constructions of the parent, thereby forming the joint psychological relationship of the intersubjective field whenever the child agrees with the parental meaning constructions.

The intersubjective field produces a very positive emotional-psychological experience of being understood at a very deep level; somebody "gets it" about me.² The intersubjective field feels really good. It feels good to belong; to be understood at a deep level. Conversely, breeches in the intersubjective field are painful, and can create feelings of deep psychological loneliness and alienation.³

² The very positive feeling associated with the formation of an intersubjective field is likely mediated by the brain chemical serotonin, which is the same brain chemical targeted by some of the most effective anti-depressant medications, the SSRI class of medications such as Prozac.

³ The reason for these very positive and very painful feelings associated with the formation and breach of the shared intersubjective state is that intersubjectivity confers significant survival advantage to humans. It goes

Through a series of relational moves whereby the parent forms an intersubjective field with the child when the child is in a resonant brain state with the adult, and breeches the intersubjective field when the child expresses a different, authentic self-experience, the parent can induce both very positive and rewarding psychological experiences and also very painful experiences of deep psychological rejection. In this way, the parent can punish expressions of the child's own authentic self-experience and reward the child's adoption of the parent's experience.

Can you give an example of this type of relational move sequence?

For example, say the child returns from a visitation with the other parent and is asked about the visit by the enmeshed parent. If the child responds with a positive report, such as "I had a great time," the enmeshed parent responds with a sad-dejected state involving a loss of emotional vitality. This parental state of sadness and dejection represents a misattunement to the child's elevated state of pleasure and happiness, and this parental misattunement will dampen the child's inner experience of pleasure and happiness. The parental misattunement also breeches the intersubjective field of psychological union with the child, so that very painful feelings of psychological loneliness, rejection, and isolation are induced in the child.

In the case of misattunement, we would say that the child's inner psychological experience does not receive a "supportive resonance" from the parent.

Conversely, if the child reports a negative experience with the other parent, which would be consistent with what the enmeshed parent desires, such as "it was awful, I didn't like it," the enmeshed parent responds with nurturing support, "Oh, I'm so sorry sweetie. I know how hard the other parent can be to get along with. You poor thing." In this case, when the child expresses displeasure with the other parent, the nurturing parental response from the enmeshed parent is responsive and attuned to the child's expression of sadness and displeasure, thereby amplifying this child experience. The attuned response of the enmeshed parent forms a joint psychological experience with the child, an intersubjective field, of mutual understanding, support, and belongingness that results in a burst of positive brain chemicals that feel good, "I belong, I'm accepted, I'm understood."

In this case, we would say that the child's criticism of the other parent receives a response of "supportive resonance" from the parent, thereby amplifying this self-experience for the child.

Eventually, in response to continual relational moves of selective parental attunement and misattunement, the authentic self-experience of the child is invalidated and nullified, replaced by a child-parent shared dyadic mind-state in which the child's inner experience is simply a reflection of the adult's, which represents the enmeshed psychological

beyond the scope of this answer to discuss the importance of intersubjectivity for human survival, but the psychological capacity for intersubjectivity is a key feature of human survival success.

relationship that lacks healthy psychological boundaries. Instead of two separate and coordinated people, the enmeshed parent and child become one fused self-experience.

Why is an enmeshed relationship so bad – what does it do to the family system?

There are two significantly problematic issues associated with the development of an enmeshed psychological relationship between a parent and child. The first is that it severely undermines and truncates the child's development of authentic and independent self-structure. The second problem is created when the enmeshed parent-child relationship is also part of another family systems process, called a parent-child "alliance," that targets the other parent.

Why is an enmeshed psychological relationship a problem for the child's development of self-structure?

The child's enmeshed psychological state with the parent prevents the child from having independent, self-authentic experiences, which severely undermines the child's healthy development of self-identity, referred to in the scientific literature as "self-structure." Because of the child's psychologically enmeshed fusion with the adult parent, the child may present as slightly hyper-mature. However, the child's presentation of hyper-maturity is the result of the child's accessing the shared psychological self-structure of the more mature nervous system of the parent. The child's nervous system is in resonant synchrony, mediated by the mirror neuron network, with the more mature nervous system of the adult parent. The child's presentation of maturity is not authentic to the child's own nervous system maturation but is merely an outgrowth of the enmeshed psychological relationship the child shares with the adult's mature nervous system.

However, despite the potential of a hyper-mature presentation, the child is actually being deprived of authentic and independent self-experience, and of the important developmental immaturity associated with a less-developed immature nervous system. It is not a developmentally good thing for a child to be inappropriately hyper-mature. While it may appear cute and delightful to be with a child who presents as slightly hyper-mature (precociously adult-like) there are important neuro-biological reasons why emotional and psychological immaturity is important for development.⁴ Psychologically and emotionally, kids need to be kids, not mini-adults.

⁴ **Why is developmental immaturity important?** The importance of biological immaturity is a consequence of the brain's reliance on "use-dependent" development, whereby brain networks that are used in association with each other wire up their interconnections together ("use-dependent"). Because of this neuro-biological process, the brain brings on systems in a phased sequencing, so that the less-developed components of each system are used together and wire up together, while the more-advanced components of each system are kept dormant, or off-line, so as not to compete for wiring integration with the more basic components of each system. Then, once adequate time has passed to allow the basic elements to wire up together, the next more advanced level of each system is brought online so that these components can be used together and so wire up together, and wire up on top of the more basic levels that have already been integrated in the previous developmental period. This entire process is called immaturity and maturation. The brain wants immaturity. Immaturity is an important and critical part of development. Bjorklund, D.F. (1997). The role of immaturity in human development. *Psychological Bulletin*, 122, 153-169

The developmental problem with an enmeshed psychological relationship between a parent and child is that it robs the child of important, developmentally appropriate, self-experiences, so that the child's authentic self-structure remains in a more rudimentary and less-developed organizational state. While this may not present as an overt problem while the child is a child, because the child will be expressing the hyper-maturity of the shared psychological state with the adult parent, the truncated development of authentic self-structure will emerge as a much more significant problem when the developmental challenges faced by the child depend upon and require a more mature self-structure development, which occurs during the developmental period of early adulthood, around the ages of 22 to 32.

What type of problems would you expect to emerge in early adulthood?

During this developmental period of early adulthood, the child, now young adult, will leave home and so becomes psychologically separated from the parent, thereby losing the psychological support of, and reliance on, the enmeshed relationship and psychological self-structure of the parent. Yet the child's own authentic self-structure development will have atrophied within the psychological enmeshment with the parent. This hole in the maturation of authentic self-structure organization can potentially lead to a collapse in self-organization upon the child's separation from the psychological fusion with the enmeshed adult parent, resulting in the potential emergence of depression or possible alcohol or substance abuse problems as the child feels psychologically empty inside and seeks relief from the inner feelings of loneliness and alienation.

The child-as-adult may also experience spousal relationship problems as the child, now an adult, tries to cope with the inner emptiness caused by the loss of the psychologically enmeshed relationship by trying to recreate an enmeshed psychological relationship with the spouse. However, normal-range relationships involve a dance of forming, breeching, and reforming intersubjective fields between two separate individuals, whose psychological separateness increases the complexity of their shared intersubjectivity. When the spouse fails to maintain an enmeshed intersubjective state, a failure that is normal, expectable, and healthy, the child-now-adult will view the breach as a fundamental relationship failure on the part of the spouse, leading to anger and recriminations directed toward the spouse's failure to remain in an enmeshed, shared dyadic state of psychological fusion.

The inability of the child, now adult, to form psychologically separate relationships will also negatively impact the parenting behavior of this now child-as-adult with his or her own children. Research has amply demonstrated the trans-generational transmission of relationship patterns, so that the child-as-adult will most likely replicate the formation of enmeshed relationships with his or her own children, replicating the nullification of the children's authentic self-experience in order to replace the children's authentic individuation with a mere reflection of the adult-parent's experience.

Faced with the challenges of young adult individuation, the child-as-young-adult may also simply withdraw from the challenge of individuating a separate self-structure by choosing to remain living at home with the parent, not marrying, and not forming an independent life, thereby maintaining the continued enmeshed intersubjective state with the parent.

What is the second type of difficulty caused by an enmeshed parent child relationship?

The second difficulty associated with enmeshed relationships in the family emerges when the enmeshed relationship is also part of another common family system dynamic in which the child is induced by a parent to form an alliance against the other parent.

Typically, an enmeshed parent-child relationship in isolation does not present for therapy. Despite being a very unhealthy relationship psychologically, both the parent and child in an enmeshed relationship like the state of psychological fusion and they will resist separating from this fused psychological state. So seldom, if ever, does an enmeshed relationship present for therapy in isolation.

What typically presents for therapy is when marital discord erupts in the family, and the child is induced to form an alliance with the enmeshed parent that targets the other parent. This is referred to as “triangulating” the child into the marital conflict, because what should be a two-person spousal conflict becomes a three-person “triangulated” conflict that includes the child’s participation. When the child becomes triangulated into the spousal conflict, the allied/enmeshed parent uses the child as a weapon to inflict suffering on the other parent, the targeted parent.

Is the child told to inflict suffering on the other parent?

No, the child does not need to be instructed by the enmeshed/allied parent to become angry, hostile, rejecting, and defiant toward the other parent.

First, the child is enticed to form the alliance with the enmeshed parent the same way the enmeshed psychological relationship is induced, through a series of relational moves orchestrated by the selective differential attunement and misattunement of the enmeshed/allied parent. Since the mirror neuron system of the child is designed to register the intent, the motivational set, of the other person, when an alliance is formed with the enmeshed parent the child registers the motivational agenda of the enmeshed parent, AS-IF it was the child’s motivational agenda.

Then, through a series of relational moves the support of the enmeshed parent for the child’s hostile-defiance directed toward the other parent is communicated in the relational move set, not necessarily in language. But, the child clearly understands that the allied-enmeshed parent supports and approves of the child’s expressed hostility toward the other parent.

What are the series of relational moves that communicate the enmeshed parent's support for the child's hostile-defiance with the other parent?

In this set of relational moves, the child is the first actor. The child acts to initiate the hostile defiance toward the targeted parent, which seemingly conveys that the targeted parent is somehow a bad parent. The child then reports to the enmeshed parent on the hostile-defiant exchange with the targeted parent, typically distorting the events to portray the parent as bad and the child as an innocent victim. The enmeshed responds to the child's report with an attuned response of compassionate understanding to the child's aggrieved presentation of victimization.

Can you give an example?

For example, the targeted parent may ask the child to complete a standard common household chore, such as emptying the dishwasher. The child balks and argues about the task, displaying an attitude of contemptuous disregard for the parental authority of the targeted parent. The targeted parent then takes away a privilege as discipline for the child's rude and defiant attitude. When the child returns to the enmeshed/allied parent, the child reports the incident as the targeted parent being overly demanding, strict, and excessively punishing. The enmeshed parent sides with the child and offers an attuned response to the child's presentation of aggrieved victimization by the other parent. Something like, "Oh, that's just like your father. He's always been so demanding and harsh. He's just impossible to get along with." This type of response by the enmeshed/allied parent sets the narrative for the child that the targeted parent is "overly harsh" and "impossible to get along with." This pattern of relational moves supporting the agreed upon narrative will be repeated over-and-over, each time the child returns from visitations with the other parent.

But it is always the child who initiates the complaint, so that the enmeshed/allied parent can then merely adopt the complementary role, the role desired by the enmeshed/allied parent, of the kind, supportive, understanding parent. Through the resonance of the mirror neuron network, the child clearly understands that the enmeshed/allied parent enjoys the child's criticism of the other parent, and enjoys the role of the kind, supportive, understanding parent in contrast to the bad parenting of the other parent.

How would the enmeshed/allied parent respond if questioned that they are somehow supporting or inducing the child's hostile-defiance with the other parent?

If challenged, the enmeshed/allied parent will typically adopt the refrain of "I wish people would simply listen to the child. Just listen to what the child wants." This is because it is the child who carries the criticism, allowing the enmeshed/allied parent to simply adopt a supporting role. Through the well-practiced series of relational moves, it is the child who carries the criticism so that the enmeshed/allied parent is confident in the child's critical report regarding the other parent if questioned by other people. The relational move sequence of criticizing the other parent is a highly practiced ritual for the child.

So the enmeshed/allied parent doesn't actually have to overtly say bad things about the other parent?

No. In the relational move sequence, it is the child who initiates the criticism of the other parent, typically by distorting some incident in which the child provoked a conflict with the other parent through overt misbehavior, defiance, or a hostile contemptuous attitude displayed toward the targeted parent. The child then distorts the events in the re-telling of them to portray the child as an innocent victim of the other parent's bad parenting.

That's why it becomes essential that the child's reporting not be accepted at face value. The child's report typically involves offering of general descriptions of events, such as "my dad is always yelling at me," or my "mom is too strict," which represent the distortions of what actually occurs. When the specific relationship and communication exchanges are examined, however, what are called "behavioral sequences" or "behavioral chains," in order to determine exactly how the conflict arose, what becomes apparent is that the child actively provoked the conflict and that the parenting response was entirely appropriate and normal-range to the child's active provocation.

This pattern would strongly suggest the triangulation of the child into the spousal conflict through an alliance with one of the parents, the non-targeted parent.

When speaking with the allied/enmeshed parent, what type of characteristics do they display?

Interviews with the allied/enmeshed parent will usually reveal the same narrative of aggrieved victimization relative to the other parent, but in terms of the spousal-marital relationship rather than the parent-child relationship. The allied/enmeshed parent will describe how the other parent was a horrible person as a spouse, and will link the spousal failure to the current problems the child is reportedly having with this parent, so that the child's difficulties with the other parent are totally understandable to the allied/enmeshed parent because that's just the type of problems he or she had with the other parent as a spouse.

This reflects the boundary violations inherent to the enmeshed relationship. The conflict isn't authentic to the true parent-child relationship, but is a reflection of the spousal conflict and the grievances of the allied/enmeshed parent toward the other parent that are then carried forth by the child's triangulation into the spousal conflict. With the child's triangulation into the spousal conflict, the child's hostile defiance toward the other parent represents a weapon of retaliation used by the enmeshed/allied parent for the perceived spousal inadequacy of the other parent during the marriage.

How can we recognize when the parent-child conflict is the result of the child's triangulation into the marital conflict?

There are a variety of ways to recognize the process. Primarily, through the child's symptom display.

The child's triangulation into the spousal conflict and alliance with one parent against the other becomes evident through a careful analysis of the "behavioral sequences" associated with the conflict between the child and targeted parent, in which it becomes apparent that the child is not responding to poor parenting practices but is instead the active initiator and perpetrator of the conflict, and that the parenting responses of the targeted parent are entirely normal-range and reasonable parental responses to the child's active provocation. The child will tend to present general criticisms, "my dad is too mean" – "my mom is always yelling at me" – But a specific analysis of the behavioral sequences, the "behavior chains," of the relationship conflict reveals that the targeted parent engages in fully normal-range, acceptable, and reasonable parenting practices, and many times may display exemplary parenting in the face of overt child provocations, and that the child's hostile-defiance is unwarranted and out of proportion to the parenting behavior. The child is initiating and perpetuating the conflict, yet the child is falsely framing the conflict as if the parent is the perpetrator and the child is the victim.

Another approach to assessment involves what's called a "response-to-intervention" approach. If the child's angry-hostile-defiance is truly a response to the targeted parent's problematic parenting behavior, then if we alter the parenting response of the targeted parent then we should witness a corresponding reduction in the child's angry-hostile-defiance. If, however, the child's behavior is under the "stimulus control" of the enmeshed parent-child alliance, then changes to the responses provided to the child by the targeted parent will have no effect on the child's behavior.

There are other features of the child's symptom presentation that can also serve as indicators that the child's conflict with the targeted parent is not authentic to that relationship.

[What would be some of these other features of the child's symptoms?](#)

An inauthentic presentation of the child's attachment system is one of the primary indicators, especially in association with personality disorder symptoms in the child's symptom display. (see handout on Attachment System questions and answers)

[What is the treatment for the child's triangulation into the parental conflict?](#)

The first step is to bring this clinical assessment of the family relationship dynamics to the awareness of the enmeshed/allied parent, to seek their cooperation in ending the relational move sequences, cooperation in supporting the other parent's relationship with the child, and cooperation in supporting the other parent's ability to effectively discipline and parent the child. Typically, this involves cooperation in establishing clear and firm communication and relationship boundaries that separate the two households, so that relationship events that occur in one household are not discussed with the parent in the other household. This will end the relational move sequences and the child's triangulation into the spousal conflict.

If events occur that need resolution, this resolution should be sought through the therapy, not through the involvement of the other parent. The therapeutic setting becomes the appropriate place to address any remaining parent-child conflict issues that occur in either household to avoid engaging the involvement of the other parent which would re-engage the triangulation of the child into the spousal conflict.

[Will this be successful?](#)

With the active cooperation of the allied parent, yes. Without the active cooperation of the allied parent, no.

[Does treatment become more difficult when there is an enmeshed psychological relationship between the parent and child in addition to an alliance?](#)

Most definitely. Treatment of an enmeshed psychological relationship without separating the child from the enmeshed parent is almost impossible.

[Why is this?](#)

Because the psychological enmeshment with the child is motivated by the parent's own psychological needs that typically involve a high degree of psychological dysfunction. The enmeshed parent is highly motivated to maintain the enmeshment to meet their own psychological needs, and so they are highly resistant to efforts to separate the child from the enmeshed relationship.

Extricating the child from the chronically hyper-activated intersubjective field of an enmeshed relationship with a parent can be difficult for two related reasons. First, the allied parent will actively resist any efforts at separating the child from the enmeshed relationship. Second, since the child is in a fused psychological experience with the enmeshed parent, the child will likewise initially resist separation from the enmeshed relationship with the allied parent, because the child will register the anxious-dread that such a separation creates for the enmeshed parent, so the child will register that the enmeshed parent is absolutely opposed to their psychological separation.

The enmeshed parent creates the fused relationship with the child out of the parent's own psychological needs involving the inability to tolerate separateness in close relationships. Effort to separate the child from the enmeshed psychological fusion with the enmeshed parent will provoke for the enmeshed parent intense feelings of anxious-dread, a sense of deep psychological loneliness and inner emptiness, and an experience of abandonment, all serving to strongly motivate the enmeshed parent to actively resist treatment efforts at separating the child, and to induce a commensurate level of resistance in the child, who also shares the psychological state with the enmeshed parent.

The enmeshed parent fears, dreads, separateness.

Is this parental fear of psychological separateness problematic for the child?

Yes. In healthy parenting, the parent resonates, and therefore amplifies, the child's authentic inner state. However, in an enmeshed relationship this healthy resonance with the child is turned on its head, so that it becomes the child who is resonating with the parent's inner psychological state, it is the child who is parenting the parent. The child is not adopting a shared state with the parent because this benefits the child's development, it doesn't. The child is being induced into the enmeshed psychological fusion because it serves the parent's psychological needs. The child is taking care of the parent's psychological needs instead of the parenting taking care of the child's psychological needs. This inversion of healthy parent-child relationship dynamics is a consequence of the enmeshed parent's own psychological disturbances.

Therefore, psychologically separating the child from the enmeshed relationship with the parent will be actively resisted by the enmeshed parent who will experience elevated anxious-dread regarding the potential for perceived psychological abandonment by the child, and it will be resisted initially by the child in response to the enmeshed parent's elevated psychological distress and the child's existing role to take care of the enmeshed parent's psychological needs.

Why will the child resist separation from the enmeshed relationship?

At least during initial phases of psychological separation, the child will resist treatment as a result of the relational move dynamics with the enmeshed parent that have had the child carrying the burden of making the initial critical accusations toward the targeted parent. Because of this repetitive and supported pattern of relational moves with the enmeshed parent, the child has come to believe the false narrative that was co-constructed with the enmeshed/allied parent, that the other parent is bad and that the child is a victim of the other parent's bad parenting.

In turn, the relational move sequence that has been established between the child and the enmeshed/allied parent has the enmeshed parent adopting the role of the understanding, compassionate, supportive parent, in contrast to the mean abusive other parent. The child has likewise come to accept this false narrative co-construction since the nature of the enmeshed relationship is the formation of a single psychological state, a single shared meaning construction, shared between the child and the enmeshed parent.

The child authentically believes the accusations toward the other parent, because these accusations have drawn the resonant support of the enmeshed/allied parent over many repeated relational move sequences. And the child believes that the enmeshed parent represents the only relationship resource for kind, compassionate, understanding parenting, because this is the persistent meaning construction co-created with the enmeshed-allied parent across many repetitions of the relational move sequence.

The child's reality orientation has been distorted by the chronic and persistent pathogenic parenting of the enmeshed/allied parent.⁵

In the enmeshed relationship, the child's authentic psychological experience has been systematically obliterated by the continual repetition of relational move sequences with the enmeshed parent involving the differential attunement and misattunement by the enmeshed parent relative to the desired and non-desired meaning constructions of the parent, so that the child's authentic experience instead becomes a shared psychological experience emanating from the enmeshed parent's own beliefs and motivational agendas. Psychologically, the child and enmeshed parent share the same psychological experience, what Bowen referred to as the "undifferentiated ego mass."

Is it possible to restore the child's authentic self-experience?

Yes, but only if the child is separated from the ongoing pathogenic influence of the enmeshed parent.

When the child is separated from the ongoing pathogenic influence of the enmeshed parent, the therapist can provide the child with alternate relational move sequences that challenge the distorted meaning constructions and that provide the child with a more balanced and normal-range construction of meaning that will support the development of the child's own authentic self-experience. As the child's own self-authenticity is restored, the child can achieve psychological independence from the chronic over-activation of the intersubjective field that had been established with the enmeshed parent, thereby de-triangulating the child from the spousal conflict and allowing the child to respond with self-authenticity to the actual parenting behaviors of each parent.

How does therapy restore the child's self-authentic experience?

The treatment for an enmeshed parent-child relationship is to achieve a degree of psychological separation for the child from the experience of the enmeshed parent. If we return to the example of the movie, in an enmeshed relationship the child actually feels he or she is really the actor onscreen, i.e, the parent. The child feels that what the actor in the movie, or in this case, the parent, experiences is actually authentic to the child. There is no psychological boundary between what the other experiences and what is authentic to the child's own self-experience. Our treatment goal is to help the child psychologically differentiate what the actor feels, i.e., what the parent feels, from what the child authentically feels.

We do this through providing the child with the healthy parenting experiences that are absent with the enmeshed parent; we psychologically resonate with, attune to, the child's authentic self-experience and we misattune to the inauthentic self-experience that is being imported through the mirror neuron network from the psychological processes of the

⁵ Pathogenic: "patho"=pathological, "genic"=genesis, creation; "pathogenic parenting"=parenting behavior that is so distorted as to produce a psychopathology in the child.

enmeshed parent. Just as the enmeshed parent used a process of attunement and misattunement to induce the enmeshed relationship, in therapy we use a similar process of attunement and misattunement, but in reverse, to restore the child's own authentic self-experience. Through resonating with the child's authentic inner experience we amplify this experience. Through misattuning to the child's inauthentic experience we dampen this inauthentic self-experience.

Our goal is to return the child to the audience in the movie theater, where the child can experience the feelings and motivational states of others, but does not misinterpret these shared experiences as necessarily being the child's own self-experience. The goal of therapy is to provide the child with the psychological separateness necessary to restore healthy development of normal self-structure individuation.

[What if the child is not separated from the ongoing pathogenic influence of the enmeshed parent, can treatment of the enmeshed relationship be successful?](#)

No. Without separation, the enmeshed parent will actively resist the treatment efforts to psychologically separate the child from the enmeshed relationship. Efforts to provide the child with alternate meaning constructions that are balanced and normal-range will simply make the child a psychological battleground for conflicting meaning constructions; the distorted meaning constructions of the enmeshed, pathogenic, parent and the balanced normal-range meaning constructions provided by therapy. As a clinical psychologist, I would be very reluctant to make the child a psychological battlefield.

The child will naturally respond to the enmeshed parent's elevated anxious-dread and hostile-active resistance to therapy, so that the child will be strongly motivated to take care of the enmeshed parent. The child's role within the enmeshed relationship is to take care of, to resonate with, the parent's psychological needs. So the child will actively resist adopting the balanced normal-range meaning constructions offered in therapy. The more pressure is applied in therapy relative to the child adopting balanced and normal-range meaning construction, the more anxious-dread will be activated in the enmeshed parent, and the more the child will feel compelled to take care of the enmeshed parent's psychological distress. This places the child in a very difficult psychological position.

[Are there ways for the enmeshed parent to even more actively prevent therapy from being effective?](#)

Yes. The enmeshed parent can induce, through relational move sequences, child symptoms directed toward the therapy. The child might begin to report angry hostility toward therapy, and overtly refuse to attend therapy. When the child expresses this supposed hostility toward therapy to the enmeshed parent, the enmeshed parent can then provide a supportive and attuned resonant response of compassion and understanding. This is simply a variant replication of their standard relational move sequence in which the child expresses criticism that allows the enmeshed/allied parent to adopt the stance of the supportive and understanding parent. In this role as the supportive-caring parent, the enmeshed parent will then actively seek alternate ineffective therapy that "listens to the

child,” since listening to the child will allow the child to simply replicate the relational move sequence of the child carrying the criticism of the other parent

Alternatively, the pathogenic parenting of the enmeshed parent can induce the child to report anxious symptoms relative to therapy, which will serve the similar function to angry symptoms of allowing the enmeshed parent to become the supportive understanding parent and seek termination of the “abusive” therapy that is supposedly producing the anxious symptoms.

[Are there ways to prevent this undermining of therapy by the enmeshed/allied parent?](#)

Yes. By allowing the targeted parent sole authority for selecting the therapist. The targeted parent authentically cares for the child’s well being and will not place the child in any jeopardy. Allowing the targeted parent sole authority to select the therapist will prevent the enmeshed parent from using induced child symptoms, induced through the same relational move sequences that the child’s symptoms toward the targeted parent are induced, to undermine and prevent therapeutic recovery of the child’s authenticity.

[What happens with the child’s resistance to treatment if the child is separated from the ongoing pathogenic influence of the enmeshed parent?](#)

Initially, the child’s symptoms toward the targeted parent may exacerbate. But they will soon diminish and plateau into a passive resistance. This is the active phase of therapy when the therapist begins providing the child with alternate, balanced, and normal-range meaning constructions regarding the targeted parent, which conflict with the meaning constructions previously provided by the enmeshed parent.

In the absence of ongoing influence by the enmeshed parent’s distorted meaning constructions about the targeted parent, the therapist can begin to draw on the child’s own authentic experience and judgment. As the therapist resonates, attunes to, the child’s own authentic experience and judgment relative to the targeted parent, the self-authenticity of the child can be restored.

And this can be accomplished without making the child any more of a psychological battlefield than is necessary for the restoration of self-authenticity.

Once the self-authenticity of the child is restored, the child can be re-introduced to the pathogenic parenting influence of the enmeshed parent. The therapeutic challenge during this re-introduction phase of treatment will be to stabilize the child’s treatment gains of self-authenticity under the resumed pressure of the enmeshed parent to restore the enmeshed relationship and alliance.