
PATHWAYS FROM INFANT EXPOSURE TO MARITAL CONFLICT TO PARENT–TODDLER ROLE REVERSAL

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ABSTRACT: We know that exposure to marital conflict places infants at risk, but we know less about processes. One process may be role reversal, when a distressed parent looks to the child to meet unmet needs for comfort, intimacy, or companionship. A parent in marital conflict may be particularly prone to role reversal, which in turn adversely affects child development. The current study examined pathways from infants' exposure to marital conflict at 12 months to role reversal at 24 months. We sampled low–middle socioeconomic status (SES) families with their first child ($N = 128$). Independent observers assessed marital conflict (in a problem-solving task) and role reversal (in a story-telling task). We found that each parent's conflict behavior predicted the other parent's role reversal. In a direct pathway, mother's conflict behavior towards father led directly to father's role reversal with the child. In an indirect pathway, father's conflict behavior towards mother led to his withdrawal from her, which in turn led to mother's role reversal with the child. Clinical implications are discussed within a developmental psychopathology framework in terms of preventive interventions to offset the deleterious effect of marital conflict and role reversal on child development.

RESUMEN: Sabemos que el estar expuesto a conflictos maritales coloca a los infantes bajo riesgos, pero sabemos menos acerca de los procesos. Un proceso pudiera ser el de invertir el papel, cuando uno de los padres afectados busca en el niño llenar las necesidades de confort, intimidad o compañía que no están satisfechas. Cuando uno de los padres se encuentra en una situación de conflicto marital, pudiera estar particularmente inclinado a invertir el papel, lo cual, como consecuencia, afecta adversamente el desarrollo del niño. El presente estudio examina trayectorias desde que los infantes fueron expuestos al conflicto marital a los 12 meses hasta la inversión del papel a los 24 meses. Tomamos como muestra familias de condición socioeconómica baja media con sus primogénitos, $N = 128$. Observadores independientes

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evaluaron el conflicto marital (en una tarea orientada a resolver problemas) y la inversión del papel (en una tarea de contar un cuento). Nos dimos cuenta de que la conducta de conflicto de cada uno de los padres predijo la inversión del papel en el otro miembro de la pareja. En una trayectoria directa, la conducta de conflicto de la madre hacia el padre llevó directamente a la inversión del rol del padre con el infante. En una trayectoria indirecta, la conducta de conflicto del padre hacia la madre llevó a éste a su desapego de ella, lo cual como consecuencia llevó a la inversión del papel de la madre con el niño. Se discuten las implicaciones clínicas dentro de un marco de desarrollo de la psicopatología en términos de intervenciones preventivas para contrarrestar el efecto dañino del conflicto marital y la inversión del papel sobre el desarrollo del niño.

RÉSUMÉ: Nous savons que l'exposition au conflit conjugal met les nourrissons à risques, mais nous en savons moins sur les processus. L'un des processus peut être le renversement de rôle, lorsqu'un parent en détresse se tourne vers l'enfant pour remplir des besoins non remplis pour le réconfort, l'intimité ou le compagnonage. Un parent en conflit conjugal peut s'avérer particulièrement sujet au renversement de rôle, ce qui à son tour peut avoir un effet négatif sur le développement de l'enfant. Cette étude a examiné les cheminements de l'exposition du nourrisson au conflit conjugal à l'âge de 12 mois au renversement de rôle à 24 mois. Nous avons étudié des familles de milieu socioéconomique peu élevé-moyen avec leur premier enfant, $N = 128$. Des observateurs indépendants ont évalué le conflit conjugal (durant un exercice de résolution de problème) et le renversement de rôle (durant un exercice où il fallait raconter une histoire). Nous avons trouvé que le comportement de conflit de chaque parent prédisait le renversement de rôle de l'autre parent. Dans un cheminement direct, le comportement de conflit de la mère envers le père menait directement au renversement de rôle du père avec l'enfant. Dans un cheminement indirect, le comportement de conflit du père envers la mère menait à son retrait vis-à-vis d'elle, ce qui à son tour menait au renversement de rôle de la mère avec l'enfant. Les implications cliniques sont discutées au sein d'une structure de psychopathologie du comportement en termes d'interventions de prévention pour compenser l'effet délétère du conflit conjugal et du renversement de rôle sur le développement de l'enfant.

ZUSAMMENFASSUNG: Wir wissen, dass es ein Risiko für das Kind darstellt einem ehelichen Konflikt ausgesetzt zu sein, aber wir wissen weniger über die Prozesse, die dazu führen. Ein Prozess könnte eine Rollenumdrehung sein, wenn ein gestresster Elternteil sich um das Kind kümmert, um nicht befriedigte Bedürfnisse nach Nähe, oder Gesellschaft zu befriedigen. Ein Elternteil in einem ehelichen Konflikt könnte besonders zu einer Rollenumdrehung neigen, der seinerseits die kindliche Entwicklung negativ beeinflusst. Diese Studie untersucht die Wege, die bei einem Kind, das im Alter von 12 Monaten ehelichen Konflikten ausgesetzt war, zur Rollenumdrehung mit 24 Monaten führen. In die Stichprobe nahmen wir Familien aus der unteren Mittelklasse mit ihrem ersten Kind, $N = 128$. Unabhängige Beobachter bestimmten den Ehekonflikt (mittels einer Problemlösungsaufgabe) und Rollenumdrehung (mittels einer Geschichtenerzählungsaufgabe). Wir fanden, dass der Konflikt jedes Elternteils die Rollenumdrehung des anderen Elternteils vorhersagbar machte. Unmittelbar führte das mütterliche Konfliktverhalten gegenüber dem Vater zu einer väterlichen Rollenumdrehung gegenüber dem Kind. Indirekt führte das väterliche Konfliktverhalten gegenüber der Mutter zu einem Rückzug von ihr, der seinerseits zu einer Rollenumdrehung bei der Mutter gegenüber dem Kind führte. Die klinische Bedeutung wird im Kontext der Entwicklungspsychopathologie mit Berücksichtigung präventiver Interventionen besprochen, um den Beginn des schädlichen Effekts ehelicher Konflikte und Rollenumdrehung auf die kindliche Entwicklung hintanzuhalten.

抄録: われわれは夫婦の葛藤にさらされることによって、乳児がリスクの高い状況に置かれることを知っているが、しかしわれわれはその過程についてはあまり知らない。過程の一つは、役割の逆転だろう。それは悩んでいる親が、慰め、親密さ、あるいは交友関係

companionship への満たされないニーズを満たすために、子どもを頼るときに起こる。夫婦の葛藤状況にある親は、特に役割を逆転しやすいだろう。それは、今度は子どもの発達に悪影響を与える。この研究では、乳児が生後 12 か月時に夫婦の葛藤にさらされてから、24 か月時の役割逆転に至る経路を、検証した。われわれは、第 1 子のいる社会経済状況が低から中程度の家族 $N = 128$ を対象とした。独立した観察者が（問題解決課題で）夫婦の葛藤と（物語課題 a story-telling task で）役割逆転を評価した。われわれは、一方の親の葛藤的行動が、他方の親の役割逆転を予測することを見出した。直接経路で、父親に向けられた母親の葛藤的行動が、父親の子どもとの役割逆転に直接的につながった。間接的な経路で、母親に向けられた父親の葛藤的行動は、父親の母親からの引きこもりにつながり、それが今度は母親の子どもとの役割逆転につながった。夫婦の葛藤と役割逆転が子どもの発達に与える悪影響を弱めるための予防的介入に関して、発達精神病理の枠組みの中で、臨床上の意義が考察される。

* * *

How does infant exposure to marital conflict affect the child's relationship with his or her parents? This is an important question because an infant needs sensitive, responsive care (Bakermans-Dranenburg, IJzendoorn, & Juffer, 2003), because marital conflict puts infants at risk (Cox, Paley, Payne, & Burchinal, 1999), and because adults generally assume infancy is the most resilient of developmental periods when in fact it is the most vulnerable (Perry, Pollard, Blakley, Baker, & Vigilante, 1995). Needy parents often seek to have a child to receive rather than to give care (Howes & Cicchetti, 1993), and marital conflict may compound this neediness. In the current study, we examine whether, following marital conflict at 12 months, a parent is more likely to go to the child in a reversal of parent-child roles at 24 months, a relationship disturbance that has damaging consequences for child development.

Family systems theory (Cox & Paley, 1997; Howes & Cicchetti, 1993; P. Minuchin, 1988) provides a framework within which to examine the effect of parental marital conflict on role reversal. A family system adapts to challenges in the existing system (e.g., marital conflict) by reorganizing (Cox & Paley, 1997; Houts, Barnett-Walker, Harter, Paley, & Cox, 2008). Such reorganization may involve a reversal of roles between parent and child.

A family system consists of both horizontal and vertical relationships. Parents and siblings ideally each have horizontal relationships whereas the parent-child relationship is vertical. A strong relationship between parents ensures good boundaries within the family system between parents and children. This strong parental relationship in turn makes it less likely that a parent

will reverse the vertical direction of caregiving in the parent–child relationship or have the parent–child relationship become horizontal (Howes & Cicchetti, 1993).

Because role reversal represents a disturbance in the family system, focusing solely on the mother–child dyad is inadequate. It is vital to include both mothers and fathers. Furthermore, it is important not to average across husbands’ and wives’ individual scores as a proxy for marital conflict but rather assess both spouses separately to examine gender differences. Moreover, marital conflict includes not only conflict but also withdrawn behaviors, both of which need to be identified. In the present study, we examined a single model with pathways from marital conflict and withdrawal in both mother and father when their child was an infant to a role reversal between each parent and his/her child in the toddler period.

ROLE REVERSAL

Ideally, the relationship between parent and young child is one in which the parent is focused on the child’s needs. In role reversal, however, the key quality is that the parent is predominantly focused on his or her own needs instead (Boszormenyi-Nagy & Spark, 1973; Flanzraich & Dunsavage, 1977; Jurkovic, 1998; Morris & Gould, 1963; Sroufe, Jacobvitz, Mangelsdorf, DeAngelo, & Ward, 1985). As a result, the parent is both insensitive and unresponsive to the child’s needs and draws the child into a relationship pattern that is role-inappropriate (Sroufe, Egeland, Carlson, & Collins, 2005). Role reversal is defined as a parent–child relationship in which the parent looks to the child to take in part the role of parent, spouse, or peer (Kerig, 2003). “In each case, the parent is abdicating the parental role and the child is being treated as a partner, agemate, or caregiver” (Sroufe et al., 2005, p. 117). Although each type of role reversal may look different on the surface, there is thought to be underlying heterotypic continuity such that the child is used to meet the needs of the parent rather than the parent used to meet the needs of the child. Moreover, the child may comply with meeting the parent’s needs in an attempt to increase a feeling of emotional security in the parent–child relationship: The more the child is able to meet the parent’s needs, the more predictable and stable the parent becomes (Cummings & Davies, 1994). Although it may be appropriate for an older child to take the role of parent on occasion to care for a sick parent or help with younger siblings, that is only when he or she is mature enough to do so without interfering with his or her own development. This is clearly not the case during the toddler period.

Role reversal may take several forms: child as parent, child as spouse, parent as peer. The child may take control of the relationships as a parent, the parent may take control with the child as a spouse, or neither is in control when the parent takes the role of peer. In all cases, a role-reversed relationship means that the parent is not taking the parental role, and does not provide the “calm, steady, reassuring” presence that the child, especially as a toddler, needs (Sroufe et al., 2005, p. 117).

First, the parent may treat the child as a parental figure, for example, by going to the child for comfort when distressed, letting the child control the situation, or meekly complying as the child bosses the parent around. This type of role reversal has been found in older children classified as disorganized in their attachment in infancy who became controlling of their parents at age 6 in either a caregiving or punitive fashion (Hesse & Main, 2006; Main, Kaplan, & Cassidy, 1985; Moss, Rousseau, Parent, St-Laurent, & Saintonge, 1998). Second, the parent may treat the child as a spousal figure and look for intimacy, for example, by intruding on the child’s play with hushed seductive tones, engaging in provocative teasing, touching or rubbing the child without

any signaled need from the child, or seeking affection and closeness when the child has another agenda. Third, the parent may treat the child as a playmate or contemporary, for example, by playing with child as an equal, laughing at antics rather than redirecting the child and setting limits, or bickering with the child like a sibling.

Role reversal is a subtype of boundary dissolution, a broader category that also comprises intrusiveness, overprotectiveness, and enmeshment (Jacobvitz, Hazen, Curran, & Hitchens, 2004; Jacobvitz, Morgan, Kretchmar, & Morgan, 1991; Kerig, 2003). Intrusiveness is overly controlling and coercive behavior that does not respect the child's right to his or her own thoughts, behaviors, and emotions. Overprotectiveness is the stifling of a child's autonomy by discouraging the child from making his or her own choices, taking risks, voicing feelings, and becoming independent. Enmeshment is an overly close relationship in which there is a lack of recognition of separateness between self and other. None of these dimensions of boundary dissolution was assessed in the current study, which confined itself to role reversal; that is, relationships in which children and/or parents take on inappropriate roles (parent, spouse, peer) vis-à-vis the other.

Negative Effects of Role Reversal

The negative effects of role reversal on child development have been identified in normative, high-risk, and maltreated samples. In a normative sample, role reversal in toddlers assessed in the same way as in the current study predicted attention, social, and externalizing problems assessed by teachers in kindergarten (Macfie, Houts, McElwain, & Cox, 2005). Furthermore, a parental role reversal in the preschool period predicted higher externalizing symptoms when of a punitive nature and higher internalizing symptoms when of a controlling nature 2 years later (Moss, Cyr, & Dubois-Comtois, 2004); these children further displayed poorer academic achievement 2 years after that (Moss, St-Laurent, & Parent, 1999).

In a high-risk sample of first-born children of single, low-income mothers, seductive role reversal in infancy predicted attention problems assessed by teachers in kindergarten (Jacobvitz & Sroufe, 1987) and in the school years (Carlson, Jacobvitz, & Sroufe, 1995). These mothers, for example, sensually stroked the child's hair or face, which was not called for in the context, and often distracted the child from his or her task. These infants went on to have difficulty relating to peers in middle childhood (Sroufe, Bennett, Englund, Urban, & Shulman, 1993; Sroufe & Jacobvitz, 1989).

In maltreated samples, in comparison to nonmaltreated children, maltreated preschoolers (Macfie et al., 1999) and maltreated school-aged children (Dean, Malik, Richards, & Stringer, 1986) told more stories with themes of role reversal; that is, maltreated children told more stories in which children took care of parents than did nonmaltreated children. For example, a story begun by an examiner using family dolls in the context of marital conflict in which Mom blames Dad for losing her car keys frequently elicits role reversal. Maltreated preschool-aged children are more likely than nonmaltreated children to complete the story such that, for example, the child orders the parents to stop fighting, the child finds the keys, gives them back to Mom, and tells her to apologize to Dad (Macfie et al., 1999). Furthermore, in comparison with nonmaltreated boys, maltreated (i.e., physically abused) preschool boys were more likely to engage in role reversal by rushing to help and defend their mother when she was berated by a confederate examiner for supposedly not completing forms in a timely manner (Cummings, Hennessy, Rabideau, & Cicchetti, 1994).

Role reversal with both parents assessed retrospectively by self-report measures is associated with difficulty with identity development in college-age females (Fullinwider-Bush & Jacobvitz, 1993) and with anorexia (Rowa, Kerig, & Geller, 2001), a disorder thought to be linked to identity development (S. Minuchin, Rosman, & Baker, 1978). In sum, role reversal clearly represents a problematic disturbance in the parent–child relationship, with deleterious effects on child development.

Role reversal also has been found to be transmitted intergenerationally (Macfie, McElwain, Houts, & Cox, 2005). In a normative sample, mothers who reported childhood role reversal with their mothers during the Adult Attachment Interview (AAI; George, Kaplan, & Main, 1984) tended to engage in higher levels of role reversal with their toddler-aged daughters assessed in an observational paradigm. When fathers reported childhood role reversal with their mothers during the AAI, their wives tended to engage in higher levels of role reversal with their toddler-aged sons. This suggests that both dyadic and family systems representational models are internalized and carried forward to the next generation. The intergenerational transmission of role reversal thus makes repetition of problems detailed earlier likely in succeeding generations.

Pathways Between Marital Conflict and Role Reversal

Conflict in a marriage is inevitable and is unlikely as a rule to lead to role reversal. It is not the conflict, per se, but how it is managed that makes the difference (Cox & Brooks-Gunn, 1999). As long as couples focus on solving the problem, talk about the issues, and negotiate with each other, the conflict is positive. In the current study, we assess negative conflict behaviors. Such conflict is not only harmful but so also is the accompanying withdrawal (Caughlin & Huston, 2002). Indeed, marital conflict involving a combination of criticism, defensiveness, contempt, and stonewalling have been found to predict divorce (Gottman, 1994).

Role reversal has been identified in the context of marital conflict. In a cross-sectional study of middle-SES children ages 8 to 12 years, when children engaged in role reversal by involving themselves in their parents' marital conflict, they experienced adjustment problems such as aggression and hostility (O'Brien, Margolin, & John, 1995). However, there has been no prospective study of role reversal in the context of marital conflict, and nothing is known of the effect of marital conflict on role reversal in younger children. This is an important omission because of the importance of early intervention: In research reviewed earlier, behavior problems followed role reversal observed as early as infancy and the toddler period. The current prospective study examines role reversal in the toddler period as a consequence of marital conflict during infancy.

Marital conflict may both stem from and result in parents' unmet needs for intimacy and companionship. In the absence of a satisfying relationship with a spouse, a needy parent may look to his or her infant, and may derive comfort and security from an infant's dependence and lack of mobility. However, in the toddler period, the child's task is to begin to develop an autonomous self, and the parent's task is to support this growing independence (Sroufe & Rutter, 1984). The child's increasing autonomy may be threatening to a needy parent (Howes & Cicchetti, 1993). Moreover, the toddler period is challenging for all parents during the so-called "terrible twos" (Ogawa, 2001), particularly for parents whose needs for care and intimacy are not being met by a spouse due to marital conflict. These parents may not support their child's normative separation from them and may seek to keep their child close to meet their needs in a role reversal (Howes & Cicchetti, 1993). Indeed, parents in troubled marriages make seek

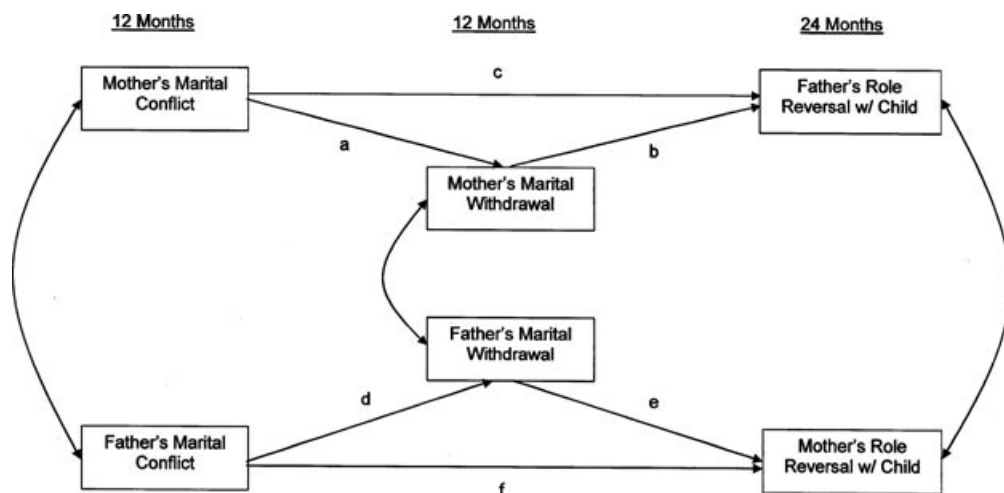


FIGURE 1. Conceptual model testing direct and indirect effects of marital conflict and withdrawal on later role reversal.

fulfillment in the parent–child relationship (Erel & Burman, 1995), and a child may be seen as a potential confidante in a weakened marital system (Cox, Paley, & Harter, 2001).

There is strong empirical evidence that marriages characterized by marital conflict are often characterized by a wife-demand/husband-withdraw pattern (Christensen & Heavey, 1990; Gottman & Levenson, 1999; Heavey, Layne, & Christensen, 1993). How mothers and fathers become vulnerable to role reversal in the context of marital conflict may depend on these gender differences. First, as assessed by physiological measures, husbands tend to react with increased distress in response to their wives' conflict behavior towards them (Gottman, 1994). To soothe this distress, the father may go directly to his child in a role reversal. Second, husbands who engage in conflict behavior with their wives tend to withdraw afterwards (Christensen & Heavey, 1990; Heavey et al., 1993). It is this withdrawal that leads to distress in wives (Gottman, 1994). This may be due to women's theorized greater need than men's for interpersonal relatedness (Chodorow, 1989). To soothe this distress, the mother may go to her child in a role reversal.

Summary and Hypotheses

The goal of the present study is to delineate pathways from exposure to marital conflict in infancy to role reversal in the toddler period. Whereas most of the existing research on the impact of marital conflict on child development focuses on families with older children, this study provides an opportunity to study the relationships among marital conflict and parent–child interactions during the infancy and toddler periods.

Differential pathways for mothers and fathers were predicted [see Figure 1 for the conceptual model (pathways from mother's and father's marital conflict to mother's and father's marital withdrawal to mother's and father's role reversal with their child)]. Specifically, we hypothesized that (a) in a direct effect, mother marital conflict would lead to father's role reversal with their child (Path c in Figure 1); and (b) in an indirect effect, father marital conflict would lead to the

father's withdrawal, which in turn would lead to mother's role reversal with their child (Paths d and e in Figure 1). Although these pathways are supported by what we currently know about differences between husbands and wives in marital conflict, we also tested alternative models to eliminate other possible explanations for the data. First, in addition to the hypothesized differential pathways for fathers and mothers, we also tested similar pathways for each replacing mother with father, and vice versa. Second, we tested a moderation model such that one parent's marital conflict and withdrawal together would predict the other parent's role reversal with their child.

METHOD

Participants

Families were recruited from prenatal classes in a four-county rural area of the Southeastern United States. Couples were approached who were about to become first-time parents and who had no children in a prior relationship. A survey conducted at area hospitals as part of pilot work for the current study found that 85% of first-time parents attend prenatal classes. Couples were told that this was a study of the development of young children and that we were interested in knowing how parents are able to raise healthy children in today's world. Of those approached, 72% agreed to participate. Those who did not want to be in the study did not differ from those who did on parental age or education level. Of 140 families recruited, 128 intact families (i.e., no divorce or separation) through 24 months provided data for the current study. Because not every family provided data at each time point, the maximum sample size for each measure was utilized (see Table 1 for sample sizes).

There were 72 families with a female first-born child and 56 with a male first-born child. Fathers' average age at the prenatal visit was 28 years 4 months (range = 19–41 years), and mothers' average age was 27 years 2 months (range = 18–35 years). The sample spanned a wide range of SES. Fathers reported on average 13 years 11 months of education (range = 9–22 years), and mothers 13 years 10 months (range = 8–18 years). Average family income was \$2,450 per month (range \$652–\$5,002 per month). Couples had been married at the prenatal visit an average of 3 years 5 months (range = 3 months–17 years). This marriage was a first marriage for 88% of the men and 85% of the women. The sample, representative of this area, comprised 97% European American and 3% African American families.

TABLE 1. Intercorrelations Among Variables

Variables	<i>n</i>	<i>M</i>	<i>SD</i>	1	2	3	4	5
12 months								
1. Mother conflict	120	3.32	2.23					
2. Father conflict	119	3.19	2.15	.70**				
3. Mother withdrawal	120	2.62	1.77	.22*	.18			
4. Father withdrawal	120	3.23	2.00	.22*	.32**	.13		
24 months								
5. Mother role reversal	128	2.73	1.82	.11	.10	.07	.20*	
6. Father role reversal	125	2.54	1.46	.20*	.04	.18	.09	.12

* $p < .05$. ** $p < .01$.

Procedures and Measures

Identification of Marital Disagreement. To assess fathers' and mothers' levels of marital conflict and withdrawal, couples were videotaped at home in a problem-solving task at 12 months. First, in the presence of an interviewer, couples identified a mutually agreed upon source of significant disagreement utilizing the Relationship Problem Inventory (Knox, 1971). The interviewer then asked the couple to attempt to come to a mutually satisfying resolution. Couples were left alone for 15 minutes, and their discussion was filmed.

Assessing Marital Conflict and Withdrawal. Each couple's individual marital conflict and marital withdrawal behaviors were rated utilizing the Interactional Dimensions Coding System (IDCS; Julien, Markman, Lindahl, Johnson, & Widenfelt, 1987) by coders trained by one of the authors. Dimensions of the IDCS are based on theoretical models of family distress and empirical findings on factors distinguishing functional and dysfunctional family communication processes (Markman & Notarius, 1987). Couples identified as distressed have more negative interactions with the IDCS than do nondistressed couples (Kline et al., 2004; Prado & Markman, 1999). Significant correlations with the Couples Interaction Scoring System (CISS; Markman, Jamieson, & Bigelow, 1982) provide concurrent validity support (Julien, Markman, & Lindahl, 1989). Moreover, in the current sample, using self-report measures of marital satisfaction, wife satisfaction correlated significantly with observed wife conflict ($r = -.35, p < .001$) and husband satisfaction correlated significantly with observed husband conflict ($r = -.25, p < .001$).

Coders, blind to participants' identity and associated assessment data, rated each individual's verbal and nonverbal behaviors for both marital conflict and marital withdrawal on a global scale of 1 (*minimum*) to 9 (*maximum*). Coders viewed the videotaped interactions with the aid of a written transcript. Coding one interaction takes approximately 1½ hours. To determine a rating, number of cues observed, frequency of behaviors, intensity of affect, and duration of both content and affect are taken into account. Intercoder reliability, utilizing Pearson correlation coefficients, was adequate ($r = .75-.95$).

Marital conflict is defined as the level of tension, hostility, dissension, antagonism, or negative affect in each spouse. The conflict code was designed to capture behavior and affect that provoke conflict or encourage argument. A separate score was derived for father and mother. Examples of a parent's marital conflict towards his or her partner include making critical comments, whining, disagreeing more than agreeing, and using sarcasm.

Marital withdrawal is defined as avoidance of the interaction or of the problem to be discussed. The spouse may evade the issue or may seem to pull him/herself out of the interaction. In the same way as for marital conflict, a separate score was derived for father and mother. Examples of a parent's marital withdrawal include avoiding eye contact, turning away from his or her partner, increasing physical distance from his or her partner, displaying low levels of communicative assertiveness, rarely adding new information, giving up the discussion, and demonstrating low levels of self-disclosure.

Role Reversal. When the child was 24 months old, each parent was videotaped separately in the laboratory during a 7-min story-telling session. In half the families, mother preceded father, and in the other half, father preceded mother. Each parent was given a different textless storybook. The two books used were *A Boy, Dog, a Frog, and a Friend*, by Mercer and Marianne Mayer, or *Frog On His Own* by Mercer Mayer. These books were selected because they are age-appropriate

for toddlers and because it was expected that they would elicit greater variability in child and parent behavior since the parent could not simply read the written text. Parents were instructed to “Read the story in a way that makes sense to you.”

Role reversal was coded utilizing the Qualitative Ratings of Parent/Child Interaction at 24 months (Cox, 1997), which was adapted from scales developed by L. Alan Sroufe et al. (1985) for the Mother–Child Project at the University of Minnesota. Two of Sroufe et al.’s (1985) scales were combined: (a) seductive care and (b) role reversal more generally, which includes child as caretaker and child as peer. The 7-point scale assesses the degree to which the parent and child maintain appropriate role relationships. Role reversal is defined as behavior that is in response to the parent’s needs and unresponsive to the needs of the child. With appropriate role relationships, it is always clear who is the parent and who is the child. In role reversal, the parent abrogates his or her role to get some of the parent’s needs met by the child.

A score of “1” on the scale would be given when it is always clear who is the parent and who is the child. The parent is clearly comfortable in his or her role. The parent provides care for the child, demonstrations of affection are appropriate and not seductive and do not interrupt or distract the child, and the parent lets the child play within appropriate limits. A score of “5” would be given when the parent occasionally treats the child as a parent (e.g., the child orders the parent around and the parent complies), or the parent displays low-level seductive behaviors throughout the session (e.g., intruding on the child’s agenda with touching, rubbing, kissing, or demands for closeness or affection), or the roles of parent and child sometimes appear to be those of playmates (e.g., when the situation calls for direction and limit setting the parent responds by being playful and overstimulating). A score of “7” would be given when it is unclear who is the parent and who is the child throughout the session. In such situations, the child may dictate to the parent what to do, or there is a high amount of seductive behavior present with the parent’s needs always taking precedence over the child’s needs, or a playmate relationship predominates and the parent almost always fails to take charge and set limits when needed.

Interrater reliability was assessed for two coders using intraclass correlation coefficients (Winer, Brown, & Michels, 1991). For role reversal with mother, reliability was assessed on 20% of the sample, $r_i = .85$. For role reversal with father, reliability was assessed on 15% of the sample, $r_i = .84$.

RESULTS

Overview of Analyses

Table 1 shows means, *SDs*, sample sizes, and intercorrelations among the variables in the model. Because mother’s age (prenatal assessment) and father’s occupation level (12 months assessment) were correlated significantly with model variables, both were controlled for when testing the models (discussed later).

First, utilizing structural equation modeling (SEM), we tested Hypothesis 1 that, in a direct effect, mother marital conflict would lead to father’s role reversal with their child, and Hypothesis 2 that, in an indirect effect, father marital conflict would lead to father withdrawal which, in turn, would lead to his mother’s role reversal with their child. Although we hypothesized different pathways for fathers and mothers, we also tested the same models for both to increase support for our models. We therefore tested models with and without the constraints detailed in the next section. Second, utilizing regression analyses, we tested an alternate moderation model

such that one parent's marital conflict and withdrawal together would lead to the other parent's role reversal with their child. Again, although not hypothesized, we wanted to be sure our conceptualization was correct and that we had not omitted other explanations of the findings.

Model Testing

To make full use of the available data and to account for missing data, our hypotheses were tested with SEM utilizing AMOS 5.0 (Arbuckle, 2003). AMOS uses full information maximum likelihood estimation of missing data and utilizes the maximum sample size for each pathway to be estimated without deletion or imputation (Arbuckle, 1996). Thus, analyses with the full sample ($N = 128$) are reported. Because of excessive skew and kurtosis, variables were transformed to natural logarithms of original scores.

In testing hypothesized pathways, we controlled for father occupation and mother age. Moreover, dyadic nonindependence in the family system was controlled for by correlating errors for corresponding values across fathers and mothers (Kenny, 1996). We based our assessment of model fit to the data on several indicators. First, a test with a chi-square distribution was utilized to assess overall model fit, a nonsignificant value indicating good fit. Second, several indices were calculated for which a good fit is indicated by values greater than .90: the Comparative Fit Index (CFI; Bentler, 1990), the Tucker-Lewis Coefficient (TLI; Tucker & Lewis, 1973), and the Incremental Fit Index (IFI; Bollen, 1989). Finally, a Root-Mean Square Error of Approximation (RMSEA) was calculated, which should be less than .05 to indicate good fit (Browne & Cudek, 1993). We tested four models with and without relevant constraints. See the conceptual model, Figure 1 (pathways from mother's and father's marital conflict to mother's and father's marital withdrawal to mother's and father's role reversal with their child), to visualize Models 1 to 4 (detailed next).

Model 1. All parameters were freely estimated. With no constraints, the model fit well, $\chi^2(14, N = 128) = 17.72, p = .22$; CFI = .96; TLI = .91; IFI = .97; and RMSEA = .05, with a confidence interval between .00 and .10.

Model 2. We constrained the path from mother withdrawal to father role reversal (Path b in Figure 1) to be zero because this was not hypothesized to be significant for mothers (although the equivalent pathway, Path e in Figure 1, was hypothesized to be significant for fathers). With this constraint, the model again fit well, $\chi^2(15, N = 128) = 18.83, p = .22$; CFI = .96; TLI = .91; IFI = .97; and RMSEA = .05, with a confidence interval between .00 and .10. The difference test between Model 1 and Model 2, $\chi^2(1, N = 128) = 1.11, p > .05$, was not significant, suggesting that this constraint was appropriate.

Model 3. We constrained the path from father conflict to mother role reversal (Path f in Figure 1) to be zero because this also was not hypothesized to be significant (although the equivalent pathway, Path c in Figure 1, was hypothesized to be significant for mothers). With this constraint, the model again fit well, $\chi^2(15, N = 128) = 18.01, p = .26$; CFI = .97; TLI = .93; IFI = .98; and RMSEA = .04, with a confidence interval between .00 and .10. The difference test between Model 1 and Model 3, $\chi^2(1, N = 128) = 0.29, p > .05$, was not significant, suggesting that this constraint, too, was appropriate.

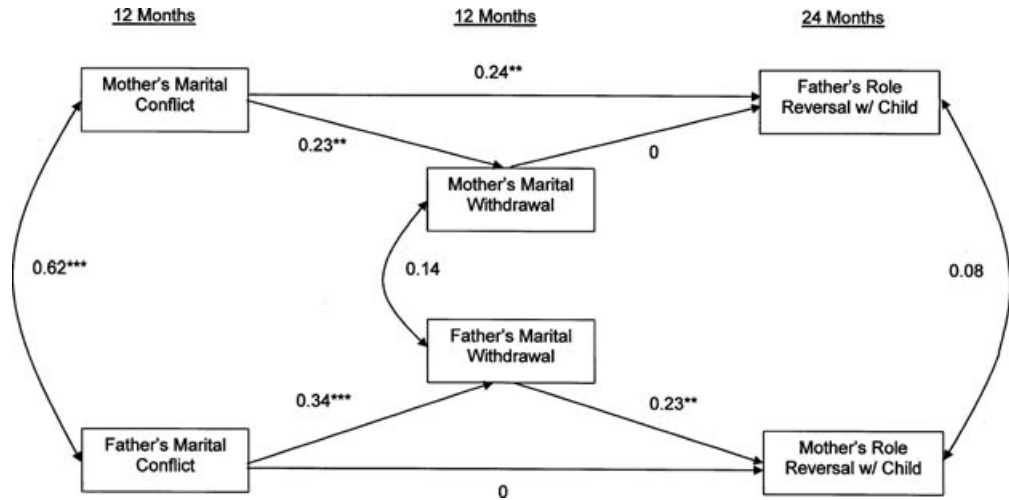


FIGURE 2. Final model testing direct and indirect effects of marital conflict and withdrawal on later role reversal.

Model 4. We were able to eliminate equivalent pathways for fathers and mothers that were not hypothesized to be significant. We were correct about differential pathways for fathers and mothers. We therefore combined constraints from Models 2 and 3 in a final model, with both the path from mother withdrawal to father role reversal (Path b in Figure 1) and from father conflict to mother role reversal (Path f in Figure 1) to be zero. With these constraints, the final model fit very well, $\chi^2(16, N = 128) = 19.14, p = .26$; CFI = .97; TLI = .93; IFI = .98; and RMSEA = .04, with a confidence interval between .00 and .10. The difference test between Model 1 and Model 4, $\chi^2(2, N = 128) = 1.42, p > .05$, also was not significant, suggesting that adding both constraints was correct.

In examining standardized coefficients in the final model, we found that both Hypotheses 1 and 2 were supported. In a direct effect, mother marital conflict predicted father's role reversal with their child (Path c in Figure 1). In an indirect effect, father marital conflict predicted his withdrawal (Path d in Figure 1), which in turn predicted mother's role reversal with their child (Path e in Figure 1) (for standardized coefficients and significance levels, see Figure 2).

Moderation Model. We also tested an alternative moderation model whereby marital conflict and withdrawal jointly determine which families will experience role reversal: That it is the combination of high conflict and high withdrawal that lead to role reversal, and that conflict without withdrawal or withdrawal without conflict does not lead to role reversal. We wanted to rule out the possibility that such a model also could explain the relationship between the variables.

Two regression analyses were conducted: one predicting role reversal with mother from father conflict and withdrawal and the interaction between them, and one predicting role reversal with father from mother conflict and withdrawal and the interaction between them. In both, mother's age and father's occupation were controlled for. All variables were centered prior to running the models to avoid nonessential ill-conditioning (Aitken & West, 1991), and interaction variables were calculated utilizing centered variables.

TABLE 2. Regression Model Testing Moderation Model of Father Marital Conflict and Withdrawal on Later Mother Role Reversal

Independent variables	β	<i>B</i>	<i>t</i>	R^2	<i>F</i>	<i>df</i>
Mother age	-.14	-.07	1.42			
Father occupation	-.14	-.14	1.51			
Father conflict	-.03	-.02	0.27			
Father withdrawal	.17	.16	1.69 [†]			
Father conflict/Father withdrawal	.11	.05	1.12	.09	2.35*	5, 113

[†] $p < .10$. * $p < .05$.

TABLE 3. Regression Model Testing Moderation Model of Mother Marital Conflict and Withdrawal on Later Father Role Reversal

Independent variables	β	<i>B</i>	<i>t</i>	R^2	<i>F</i>	<i>df</i>
Mother age	.01	.01	0.14			
Father occupation	-.07	-.05	0.67			
Mother conflict	.21	.13	2.13*			
Mother withdrawal	.13	.10	1.30			
Mother conflict/Mother withdrawal	-.14	-.04	1.43	.07	1.66	5, 111

[†] $p < .10$. * $p = .05$.

Predicting mother role reversal. Mother age, father occupation, father conflict at 12 months, father withdrawal at 12 months, and the interaction between father conflict and withdrawal were entered together. Although the overall *F* test was significant and father withdrawal was marginally related to increases in mother role reversal, the interaction was not significant (for significance tests and regression coefficients, see Table 2).

Predicting father role reversal. Mother age, father occupation, mother conflict at 12 months, mother withdrawal at 12 months, and the interaction between mother conflict and withdrawal were entered together. The overall *F* test was not significant, making univariate *t* tests of dubious validity. Moreover, although mother conflict was significantly associated with father role reversal, the interaction was not significant (for significance tests and regression coefficients, see Table 3).

Thus, an alternative moderation model such that marital conflict and withdrawal jointly determine role reversal was not supported for either mother or father role reversal. The original hypotheses stand as the best explanation for the current data.

DISCUSSION

Parent-child role reversal describes a relationship disturbance in which a parent's unmet needs are the focus of the relationship at the expense of the child's needs and the child takes the role

of parent or spouse or the parent takes the role of peer. We know that role reversal adversely affects child development, but less is known about pathways to role reversal. In the current study, we examined pathways between infant exposure to marital conflict in the child's first year and role reversal in the toddler period, hypothesizing that needy parents in the context of marital conflict might go to their child in a role reversal. A strength of the study is that we utilized independent observations of marital and child–parent interactions rather than self-report and parent-report measures. As hypothesized, we found support for differential pathways to role reversal for fathers and mothers. Mother's conflict behavior towards father was associated directly with father's role reversal with their child. On the other hand, a father's conflict behavior towards mother was first associated with his withdrawal from her, and this withdrawal in turn was associated with mother's role reversal with their child. These crossover pathways illustrate the importance, within a family-systems framework, of assessing both mothers and fathers in their effect on child development.

To make sure that our hypotheses constituted the best interpretation of the data, we also tested alternative models. First, we tested complementary pathways reversing the gender of spouse: a direct pathway from father's conflict to mother's role reversal, and an indirect pathway from mother's conflict, her withdrawal, and father's role reversal. Neither of these pathways was significant. In addition, we tested a moderation model such that only high conflict in the context of high withdrawal would lead to role reversal in the other parent. This was not significant for either fathers or mothers. Thus, our hypothesized model was the one that best fit the data.

However, it may not be marital conflict, per se, but rather immediate precursors to marital conflict that might determine role reversal. Couples have been assessed prior to conflict discussions, and it has been found that couples who later demonstrate marital conflict display similar ratios of negative to positive affect in nonconflict conversations, which in turn predict subsequent marital conflict. Both spouses contribute to this dysfunctional systemic pattern: For example, bids by one spouse for interest, humor, affection, or excitement in relating events of their day are not responded to positively by the other (Gottman & Levenson, 1999). Because the same ratio of negative to positive affect is evident in both nonconflict and conflict situations, such precursors would not be expected to add anything to the model.

A Developmental Psychopathology Perspective

From a developmental psychopathology perspective, we may ask: Which children are most likely to develop adverse outcomes in the context of a risk factor such as marital conflict? The answer is not all children (Cicchetti, 1993; Cicchetti & Rogosch, 1996), so it is important to move beyond conceptualizing a risk factor as causing adverse outcomes to identify processes involved (Cummings, Davies, & Campbell, 2000; Rutter, 1990; Sameroff & Chandler, 1975). Exposure to marital conflict is associated with child adjustment problems (Cummings & Davies, 1994), but the processes underlying this relationship are not well understood (Grych, Fincham, Jouriles, & McDonald, 2000).

There have been several processes previously posited whereby marital conflict negatively affects parent–child relationships, which in turn adversely affect child development (Cox, Owen, Lewis, & Henderson, 1989; Erel & Burman, 1995). One is the spillover hypothesis, which suggests that negative affect resulting from marital conflict may spill over into the parent–child relationship and thus increase parent–child conflict (Coiro & Emery, 1998; Cox et al., 2001). Another is a preoccupation model, which suggests that marital conflict may lead to disengaged

or distracted parenting as the parent may have fewer psychological resources to devote to their child (Katz & Gottman, 1996).

The current study posits a third process, role reversal, in which marital conflict leads to the parent–child relationship’s focusing less on the child’s needs than on the parent’s needs. That is, in role reversal, the parent seeks to have his or her emotional needs fulfilled by the child or the child seeks to meet those needs to preserve felt security in the relationship in the context of marital conflict (Cummings & Davies, 1994). Current findings suggest that optimal child development is not only a function of a good dyadic mother–child or father–child relationship; the child also needs a harmonious relationship between both parents such that parents meet their adult needs appropriately and not look to their child to do so.

Mastering Stage Salient Issues

Developmental psychopathology posits a stage theory of development whereby each developmental period has a task that is particular to that period, which is termed a stage-salient issue (Sroufe & Rutter, 1984). Failure to negotiate a stage-salient issue of development may lead to cascading disturbances throughout the life cycle (Sroufe, Egeland, & Kreutzer, 1990).

In infancy, the stage-salient issue is the development of a secure attachment, achieved when parents meet the infant’s needs in a sensitive and responsive manner (Ainsworth, Blehar, Waters, & Wall, 1978). Infants in a context of marital conflict are more likely to be disorganized in their attachment to their parents (Owen & Cox, 1997). Moreover, changes in attachment classification from early preschool to 2 years later from secure to disorganized are associated with the low marital satisfaction (Moss, Cyr, Bureau, Tarabulsy, & Dubois-Comtois, 2005). To gain a sense of security, when an infant is afraid and disorganized with a parent, he or she may suppress expression of his or her own needs and feelings and behave in a compulsively compliant manner to placate the parent (Crittenden, 1988; Crittenden & DiLalla, 1988). A child in the context of marital conflict may indeed be afraid in the presence of parents, leading to heightened sensitivity similar to that found in infants exposed to domestic violence (Dejonghe, Bogat, Levendosky, vonEye, & Davidson, 2005). Compulsive compliance in infancy may thus presage role reversal in the toddler period, in which the child more actively focuses on the parent’s needs at the expense of his or her own.

If a toddler is focused on the parent’s needs and feelings and not on his or her own and if the parent seeks to keep the child close to him or her to meet these needs, the child’s autonomy may be compromised. Role reversal may thus hamper the successful resolution of the stage-salient issue of self-development in the toddler period (Mahler, Pine, & Bergman, 1975). Deficits in self-development may in turn affect the development of self-regulation, the stage-salient issue of the preschool period. The child is thought to first learn to regulate emotions and behaviors including frustration, perseverance, and enthusiasm for task completion in dyadic regulation with a parent, prior to self-regulation (Sroufe et al., 2005). The lack of mutual regulation evidenced in the parent’s marital conflict may lead to a lack of mutual regulation in the parent–child relationship. Indeed, we know that role reversal in the toddler period leads to problems with self-regulation in the preschool period (Jacobvitz & Sroufe, 1987; Macfie, Houts et al., 2005). Moreover, 6-year-olds who demonstrate a controlling role reversal with their mothers demonstrated themes of disaster, helplessness, or inhibition (Solomon, George, & DeJong, 1995) and hostility/negativity (Cassidy, 1988) in their narrative representations, suggesting that their attempts at self-regulation are very vulnerable to upset. Thus, from a developmental psychopathology perspective, marital

conflict may potentiate a pathway from compulsive compliance in infancy to role reversal in the toddler period and, in turn, to deficits in self-regulation in the preschool period.

Limitations

Limitations of the present study include the fact that the sample is a normative low–middle SES one, consisting of parents married to each other and living with their first child. It is not possible, therefore, to generalize these results to other, more complex family systems and families in which children face other kinds of risk. Moreover, because only the first-born child in each family was included, we were not able to separate out role reversal by gender of child in the same family. As Sroufe and Ward (1980) found in their work with seductive role reversal between mothers and infant sons, interesting gender differences exist.

Another limitation is that both marital conflict and role reversal only were assessed at one time point, 1 year apart. Preexisting role reversal at Time 1, which was not assessed, may have influenced role reversal at Time 2. Moreover, changing levels of marital conflict over time may have influenced findings. However, additional findings from the current dataset suggest that levels of conflict and withdrawal were relatively stable over time (Houts et al., 2008).

A further limitation is that role reversal was defined to include the child in part taking the role of parent, spouse, or peer, but these three subtypes were not identified separately. It is possible that fathers are more likely to look to the child as a peer in play, and mothers are more likely to look to the child as parent to comfort her distress or tell her what to do. Both mothers and fathers may look to the child of opposite gender for a spousal role. Moreover, other dimensions of boundary dissolution, such as intrusiveness, overprotectiveness, and enmeshment were not assessed (Jacobvitz et al., 2004; Jacobvitz et al., 1991; Kerig, 2003). These also may occur in the context of marital conflict and have deleterious consequences.

We assessed marital conflict with macroanalytic global scales rather than in a more process-oriented, microanalytic time rating which might capture moment-by-moment regulation between the couples. There has been discussion on the advantages and disadvantages of each (Julien et al., 1989; Markman & Notarius, 1987). Because microanalytic coding uses smaller increments of measurement, there is less need for deduction about behavior and less proneness to bias; however, it is extremely time-consuming. Moreover, it may be argued that a macroanalytic coding system helps distinguish each behavior in context. A new method, termed *mesoanalytic* (Lindahl, 2001) may be the best approach for future research. The units of measurement are larger than those for microanalytic coding (1–3 minutes instead of 5–15 seconds) so that researchers can examine context and changes across the interaction. This may strike a balance between the risk of overgeneralizing with a single global score in a macroanalytic approach and losing the significance of the behavior in context if the unit of observation is very small with a microanalytic approach. For example, breaking down marital conflict into distinct components such as confronting the problem, regulating affect, not withdrawing, and coming to resolution may shed more light on the effect of marital conflict on toddler development. Future research might be able to uncover more about the processes involved in the connection between dimensions of marital conflict and role reversal with a mesoanalytic approach.

Another limitation is that not all variables that may contribute to marital conflict or to role reversal were included in this model. For example, neuroticism contributes to marital conflict (Kurdek, 1997). Additional precursors to role reversal include disorganized attachment (Main et al., 1985), which in turn is predicted by a parent's unresolved loss and trauma (Main & Hesse,

1990) and also by marital conflict (Owen & Cox, 1997), as noted previously. Connections between adult attachment assessed with the AAI, infant–parent attachment, and role reversal in the toddler period have been found (Macfie, Rivas, & Fitzpatrick, 2008), as has the intergenerational transmission of role reversal (Macfie, McElwain et al., 2005). Marital conflict, too, may be transmitted intergenerationally via internalized family-systems representational models. It would take a very large sample size, but future research may be in a position to do so, and a possible connection between attachment, marital conflict, role reversal, and intergenerational transmission clarified.

Clinical Implications

This study supports the importance of resolving marital conflict and the importance of parents' meeting their adult needs with their spouses or with other adults and not looking to their children to meet them. By direct observation and by parent interview, clinicians need to be aware of the risk of role reversal where parents are involved in marital conflict and its potential harm to the child. Children who serve as caretakers to their parents in a role reversal may appear to be more mature than their peers, but in fact their own development may suffer. Furthermore, compliance on the part of the child in role reversal may result in the child's feeling more secure in the short run (Cummings & Davies, 1994), but may hamper his or her future development. Ideally, children need adequate support and structuring from both parents to successfully negotiate the stage-salient issue of self-development in the toddler period and to successfully negotiate future developmental tasks.

Bowlby (1988) noted that in the study conducted by Main et al. (1985) noted earlier, children who demonstrated “an inversion, or reversal, of the child and parent roles” (p. 128) also had fragmented conversations with their mothers at age 6 years in which topics abruptly changed. This finding has been replicated, and role reversal in children at age 6 years was associated with desynchronized mother–child relationships in which communication was inconsistent and incongruent (Moss et al., 1998). Bowlby theorized that:

For a relationship between any two individuals to proceed harmoniously each must be aware of the other's point-of-view, his goals, feelings, and intentions. . . . This requires that each should have reasonably accurate models of self and other which are regularly up-dated by free communication between them. (p. 131)

The importance of communication and understanding is the basis for what is now termed *reflective functioning* or *mentalization* (Fonagy, Gergely, Jurist, & Target, 2002; Steele & Steele, 2008). Reflective functioning is the ability to understand and take into account one's own and other's mental states in relationships. A lack of reflective functioning may be the process underlying role reversal and may be related to a lack of reflective functioning in parents, which makes them vulnerable to becoming involved in marital conflict.

When a parent involved in marital conflict is focused on his or her own needs and feelings and not those of the child, and the child also is focused on the parent's needs and not on his or her own, the child may develop a sophisticated sense of others' feelings and needs, but no complementary sense of him- or herself. Rather, he or she may experience disorganization, emptiness, and an inability to regulate affect. This lack of reflective functioning may thus lead to disorganization and disorientation under stress, as detailed earlier (Cassidy, 1988; Solomon

et al., 1995). Role reversal may be one consequence of lack of reflective functioning in the caregiver which underlies deficits in the child's sense of self, and is followed by the deficits in self-regulation and peer relationships that follow (reviewed earlier).

Interventions targeting resolution of marital conflict and success with a child's early stage-salient issues are needed to prevent the development of role reversal and its adverse sequelae. Ideally, this would involve couples therapy for parents to increase individual reflective functioning, learn to resolve differences without recourse to ongoing marital conflict, and to identify and meet each other's needs for comfort, intimacy, and companionship. In addition, dyadic child-parent psychotherapy interventions with infants and toddlers (Fraiberg, Adelson, & Shapiro, 1975; Lieberman, 1992, 2003) also would significantly improve a parent's reflective functioning and thus attachment security in the parent-child relationship (Cicchetti, Toth, & Rogosch, 1999; Fonagy, Steele, Steele, Moran, & Higgitt, 1991; Toth, Maughan, Manly, Spagnola, & Cicchetti, 2002), making the development of role reversal less likely (Main et al., 1985). In the context of child-parent psychotherapy, the therapist would help the parent focus on, be sensitive to, and respond adequately to, the child's needs. Moreover, in a parallel process, the therapist would focus on, be sensitive to, and respond adequately to, the parent's unmet needs. In this way, the parent would begin to look outside the relationship with the child to his or her spouse or another adult to meet his or her needs. Role reversal is a widespread and destructive relationship disturbance. To prevent the intergenerational transmission of role reversal (Macfie, McElwain et al., 2005), early interventions with infants and toddlers are needed to bring development back onto an adaptive pathway.

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