Maternal Enmeshment: The Chosen Child

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Abstract
This contribution will undertake a discussion of emotionally incestuous mother–son relationships. After a brief, but general discussion that defines such concepts as enmeshment, differentiation and individuation, the discussion will focus on how family system breaches adversely affect children’s social and emotional development. Then specific attention will be given to the long-term adverse impacts of unhealthy mother–son relationships.

Keywords
enmeshment, emotional incest

Introduction
Kerr (1988) described family systems theory as assuming the existence of two opposing but instinctually rooted life forces. One pole of this force, according to Kerr, dictates a natural emergence of individuality and emotional separateness, whereas the other keeps family members operating in reaction to one another. The birth of a child is typically seen as the latter of the two opposing forces, as it exemplifies intense and intimate physical and emotional involvement by the mother to ensure the very survival of the infant. This seems to be an important evolutionary process and is universally obvious in mammalian relationships (Kerr, 1988).

In the study of family relationships, however, it is vital to consider the interaction of these forces and to recognize that the mother–child connectedness is not only symbiotic but also represents the beginnings of the reciprocity that is a characteristic of familial interactions (Parker, 1995). According to Love (1990), the mother as well as the child thrives on the physical contact, intimacy, and unconditional love that is reminiscent of parent–infant interactions. Love further described the mother–infant relationship as an emotional attachment that often requires offsetting forces to keep it within healthy bounds. It is precisely this emotional fusion, or at least the potential for it, that parents are charged with resolving by engaging in behaviors that are designed to promote and permit the emergence of individuality and healthy emotional development (Kerr, 1988). In other words, it is the responsibility of the parent to provide the child the “secure base from which the child can venture forth into the wider world and return to as a safe haven of reassurance” (Schwartzman, 2006, p. 226).

It is not the goal of this contribution to promote total emotional separateness from one’s family of origin as a mental health standard. Disengagement, according to Williams and Hiebert (2001), is the polar opposite of the subject of this contribution. While enmeshment can pose debilitating challenges to a child’s emotional and social development, disengagement, too, it seems, can be just as devastating. For family systems, as well as other mental health practitioners, it is common knowledge that either extreme (disengagement or enmeshment) would be counterproductive to adaptive emotional functioning (Barbarin & Tirado, 1985; Gavazzi, 1993; Minuchin, 1974; Williams & Hiebert, 2001). Rather, family systems researchers, theorists, writers, and practitioners generally view interdependence and reciprocity within family systems to be a healthy mechanism for promoting personal growth (Bradshaw, 1989; Forward, 1989; Hann-Morrison, 2006; Love, 1990; Minuchin, 1974). An important task of parenting, then, is one of striking a healthy balance between attachment to the child and separating in a way that encourages and supports the child’s development of autonomy.

Within each of the three subsystems of the family introduced by Minuchin (1974), healthy interactions are marked by interdependence and mutual give and take. Although the spousal-, parental-, and sibling subsystems operate as distinct units within the system, Minuchin also purported that healthy interactions and boundaries between and among subsystems contribute to adaptive development of the family unit. The spousal subsystem, for example, is a unit contained within itself, but yet that functions also as a parental subsystem. Strength in one subsystem may be related to strength in other subsystems within the family. Conversely, it seems, breaches in one subsystem are intimately related to boundary violations in other subsystems. The emotionally

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unavailable spouse, for example, may provide the opening for discord in parenting, and even in sibling relationships, it seems (Minuchin, 1974).

Although healthy “give and take” may be the standard, and therefore easily observable in the spousal unit, we will focus our attention on the interactions between parent and child. Most practitioners, theorists, and instructors of family systems theory concur that healthy interactions between parents and their children can be defined in fairly broad terms. No definition, however, can reasonably preclude parents’ basic responsibility for the provision of food, clothing, and shelter. Even then, the responsibility of parents for their children’s emotional development extends broadly to such areas as parental assignment of age-appropriate privileges and responsibilities, encouragement of children’s independence, establishment of clear guidelines and rules, and the appropriate exchange of physical affection (Barber & Tirado, 1985; Barber & Buehler, 1996).

Bowen (1978) introduced the concept of self-differentiation as a vital component in children’s emotional and social growth and in their development of independence. Differentiation, in Bowen’s conceptualization, is an evolving process that requires effort on the part of the child. More importantly, according to Bowen, self-differentiation of the child is mostly a product of the parent’s active efforts to promote the development of an autonomous identity. Bowen termed this process individuation, and charges parents with being the primary catalysts for its development. The parent, according to Bowenian notion, is charged with the development of the child’s differentiation by not only supporting the child’s effort but also by actively creating and encouraging opportunities for increasing degrees of emotional separation. The well-differentiated person, according to Knudson-Martin (1994), is inner directed, autonomous, and can function separately within relationships. Knudson-Martin (1994) described this person as “a solid self . . . made up of firmly held convictions and beliefs which are formed slowly and can be changed only from within the self” (p. 38). The aforementioned polar forces of attachment and separateness, as proposed by Kerr (1988), seem to be the catalyst for the evolution of differentiation in the family system (Theriault, 1997). Theorists propose that at least one characteristic of differentiation is the person who can successfully separate from his parents while still maintaining attachment bonds with them (Anderson & Sabatelli, 1992; Theriault, 1997). Barber and Buehler (1996) described the experience of differentiated people as an inherent freedom to think and feel independently of their families without feeling a sense of betrayal.

Differentiation levels in families are often manifested in the family members’ interactional patterns. How and to what degree family members engage with one another provide clues to the provision and maintenance of interpersonal space within the family unit? Interpersonal space, in turn, serves as indication of the family’s level of tolerance for individuality (Anderson & Sabatelli, 1992; Manzi, Vignoles, Regalia, & Scabini, 2006).

Enmeshment

Barber and Buehler (1996) defined enmeshment as “family patterns that facilitate psychological and emotional fusion among family members, potentially inhibiting the individuation process and the development and maintenance of psychosocial maturity” (p. 433). Barber and Buehler contended, further, that enmeshment is a culprit in children’s stifled development of skills to deal adequately with common social stressors. Enmeshed families are characterized by levels of emotional closeness that are often seen as constraining. These families use manipulation, usually in the form of overly excessive, but superficial expressions of love and unity to demand loyalty from their members. Conflicts are blanketed under the guise of solidarity and great effort is expended in maintaining the status quo. Members of enmeshed families typically describe their families as conflict free, while at the same time, these very units are characterized by high demands for conformity (Barbarin & Tirado, 1985; Williams & Hiebert, 2001). Enmeshed families depend on each other excessively. Paradoxically, members of these families tend to have a limited sense of their own identity, and therefore make decisions based on emotions, and as a reaction to the perceived wishes of other members of the system (Kinnier, Brignam, & Noble, 1990).

So profound is the impact of enmeshment on families that researchers have determined there to be relationships between these unhealthy familial interactions and physiological functioning. Mengel, Davis, Abell, and Baker (1991) noted previous findings of an increased probability of low birth weight among infants born into families who fit the characterization of being enmeshed. This same team of researchers also discovered a positive correlation between maternal blood pressure and family enmeshment. According to Mengel et al. (1991), the stress produced by the intensive stifling of autonomy in enmeshed family systems serves to exact adverse physiological consequences on expectant mothers. These women tend to have elevated blood pressure during the gestational period. With controlled health factors, pregnant women from enmeshed systems tend to show at least an average increase of 3 mmHg in systolic blood pressure, as compared with a control group. Other physiological implications of family enmeshment include findings of the effectiveness of structural therapy as a tool in facilitating greater management of diabetes in adolescents. These kinds of physiological responses, as said by Mengel et al. (1991), are likely the products of delayed conflict resolution and poor or maladaptive family coping options.

It is only prudent that a word of caution be interjected here. Some may argue, and reasonably so, that family support and togetherness is associated with positive outcomes in times of distress. Moreover, family support seems crucial in propelling people forward in their personal and professional lives. More than a decade ago, Barber and Buehler (1996) sought to clarify those family factors that support
Hann-Morrison

individual from those that stifle emotional development. Cohesion and enmeshment, the researchers assert, are not linear, but, more importantly, are conceptually different notions. Barber and Buehler clearly deciphered between enmeshment and its relative cohesion. Although enmeshment is rooted in manipulation and control, they say, cohesion is a positive trait that is an example of supportive family interactions. Cohesion, according to Barber and Buehler (1996), is defined as “shared affection, support, helpfulness, and caring among family members” (p. 433). Manzi et al. (2006) added to this definition the notion of tolerance of intimacy as a vital component in understanding cohesion, as opposed to enmeshment. Like their fellow researchers 10 years earlier, Manzi et al. confirmed that family cohesion and family enmeshment are two separate and distinct constructs. Like Barber and Buehler, Manzi et al. found that cohesion was related to positive behavioral outcomes and psychological well-being among adolescents. Furthermore, Manzi et al. were able to consistently demonstrate the existence of a positive correlation between family cohesion and positive adolescent behavioral outcomes across cultural lines. Both research teams found an inverse relationship between enmeshment and positive behavioral outcomes and psychological well-being. The enmeshed system may be summarized, then, as having both internal and external boundary management problems. In enmeshed systems, internal boundaries that define interpersonal familial relationships are weak, whereas boundaries to the world outside of the system are rigid (Manzi et al., 2006).

Maternal Enmeshment

Although we have given discussion to enmeshed systems, we will now consider the issue of the enmeshed relationship between a parent and a particular child. We will refer to the victim of maternal enmeshment as the “chosen child,” to borrow a concept provided by Love (1990, p. 8). Parental enmeshment not only hinders but also prevents differentiation of the child, resulting in a dance of circular immaturity and reactivity between the parent and child (Minuchin, 1974). Bevcar and Bevcar (1996) described the enmeshed parent as one who blurs familial boundaries and engages in hovering behaviors. These parents, they contend, are overly accessible to their children and they simply “do too much” (Bevcar & Bevcar, 1996, p. 193) for their children. The end result, they add, is a loss of autonomy by the child.

These children, then, according to Bevcar and Bevcar (1996), tend to rely on their parents instead of on their own capabilities. They develop a fear of experimentation, a fear of failure, and a fear of success. Groezvant and Cooper (1986) provided evidence that diffusion of family boundaries was highly correlated with lowered tendency toward exploratory behaviors by adolescents, whereas Gavazzi (1993) showed that adolescents from systems where mothers are deemed to be enmeshed not only show difficulties in formatting identity but they also have difficulties in participating in interdependent peer relationships. Gavazzi (1993) contended, further, that these children tend to view themselves as forever in need of other people’s assistance and will continue to call on family members for help in decision making.

As indicated in previous sections of this contribution, parenting offers some rewards that are not only gratifying for the child but for the mother as well. Some of the parental benefits require the presence of offsetting forces if adaptive boundaries between parent and child are to develop and be maintained (Love, 1990). In this author’s more than 10 years of clinical experience, often is the case when, despite the existence of other relationship obligations, a mother may stretch the limits of parenting far beyond what is healthy. In such cases, these relationships are laden with boundary violations and breaches of familial subsystems. A case synopsis might serve to illustrate the nature of maternal enmeshment:

While delivering Multi-Systemic Therapy (MST) in the home of a former client, the case of maternal enmeshment was blaringly evident. The 8-week intensive in-home service delivery model afforded this provider an in-depth look at the true workings of this particular family system. While the entire system presented with overt characteristics of enmeshment (seven of nine adult male children between the ages of 34 and 49 had never been married, and paid daily visits to the family matriarch; the mother prepared daily meals and provided laundry services for the seven unmarried adult males), the relationship between the 74-year old mother and one son (then age 39) was particularly disturbing. Clearly this son had been designated the “chosen child.” Other members of the family were clear in their description of this son as the mother’s favorite. While this son was now an adult, his history revealed more than 20 years of adulthood with at least nine consecutive romantic relationships of short duration. The “chosen child” in this case, along with the mother in this system, described their relationship as one of “friends.” This family expressed no disease in volunteering that the mother took the liberty of interceding on her son’s behalf to secure a date for her 37-year-old son. The target of the son’s affection denied the man a date, so the mother called to find out why the woman had not wanted to go out with her son. Neither the son, nor the mother found anything inappropriate about this, or other similar incidents. Interestingly, or rather, expectedly, the relationship between the father and mother in this family was severely compromised. The father presented as a powerful figure, answering questions for the wife and other family members. In the father’s presence the mother was quiet and conceding. Whenever the
“chosen child” son would enter the room, however, the father would exit. This was a noticeable pattern over the course of the therapy. In her son’s presence the mother clearly became more comfortable. Her facial expressions changed, as did her demeanor and her willingness to engage. In the son’s presence, the mother smiled frequently, responded to questions, and even volunteered information.

Although this particular case seems to be an “over-the-top” illustration of maternal enmeshment, it clearly demonstrates the magnitude of the ill effects of emotionally incestuous relationships. Love (1990) defined emotional incest between a mother and son as maternal enmeshment with a child to the degree that the child’s sense of self is so limited and his need for connection with his mother is so great that the child is powerless over the relationship. In such a relationship, according to Love, the mother keeps her son dependent on her while paradoxically, using him to fulfill her own emotional needs. Bradshaw (1989) termed this unhealthy bond spousification of the child, and characterized it as a blatant violation of the intimacy taboo between parent and child. The mother, in this and related cases, is preying on the child’s admiration and unconditional love to meet a need for which children are inadequately equipped—marital partnership. Adult partnering requires and is contingent on partners’ readiness to actively engage in processes such as intimacy formation, companionship, problem solving, ego fulfillment, and ego release. These are all tasks, according to Forward (1989), that require at least adult levels of emotional and psychological development.

Much like the case summary noted above, the “chosen child” only notices the exclusivity of his relationship with and his access to his mother. He enjoys the attention he receives in the form of shared confidences, extra privileges, praise, and affection. The emotionally incestuous relationship results in its victim “mama’s boy” (Love, 1990, p. 8) having limited age-appropriate interactions with his siblings or other peers. Consequently, he also has limited opportunities to practice being a child. This gross lack of appropriate peer group experiences perpetuates the child’s already arrested social development. Ultimately, this child will stagnate in his emotional, as well as his social, development and will tend to function primarily in reaction to others.

Although we recognize that the challenges inherent in the emotional incest victim’s adult life affects his ability to engage on an emotional level, there is yet another component of this person’s adult relationship that may also suffer. Adams’s (2011) insights into the depths of such a pathological bond speak to the emotional availability of emotional incest victims in their adult sexual relationships. One may be inclined to ask, in all sincerity, how it is that emotional incest gets in the way of its victim’s adulthood sexual expressions. Because victims of emotional incest carry their intense needs into their adult relationships, according to Adams, it is not uncommon that they marry their emotionally abusive parents. It stands to reason, then, that these adults (both the victim and his like-minded spouse) are ill equipped for healthy adult relationships in several life domains. Their emotional intimacy with their spouses will be compromised, as will be their ability for healthy sexual expression.

According to Adams (2011), the emotional incest victim’s adult sexual relationship is commonly marked by lack of passion at one end of the spectrum or volatility at the other. Ultimately, what is notably consistent in the sexual expression of the maternally enmeshed adult male is the need for escape, rather than connection (Adams & Morgan, 2007). Adams and Morgan (2007) explained that the maternally enmeshed adult male struggles to remain loyal to the role to which he has been assigned by his mother. This role, mind you, is not one of a fully individuated adult who is aware of, and can fully express a range of feelings. This definition ascribed by the abuser is one whereby the victim is constantly in need of someone else’s opinion to determine his own worth. Erotic engagement for this person, then, lacks the depth of give-and-take reminiscent of healthy exchange, and is, rather, more like a performance for which he is to be rated.

**Maternal Factors That Contribute to Enmeshment**

Most practitioners would agree to our human need for companionship. Bradshaw (1989) described our partnering in adulthood as the system’s need for a (good) marriage. Having someone with whom to share intimacies (emotionally as well as physically) is a need that seems to transcend species, even. Jane Goodall’s famous research on chimpanzee’s, for example, left little doubt in our minds regarding the stark similarities between humans and simians in our attachments to our children. “Flo,” the maternal figure in one of Goodall’s research units, demonstrated variable degrees of attachment with her own (chimpanzee) children, much like would be seen in human maternal relationships. Interestingly, Flo developed an unhealthy attachment with one of her male children, Flint. A catalyst for this enmeshed relationship, it seems, may have been Flo’s own compromised functioning secondary to the loss of another of her children (Johnson, 1996). Johnson (1996) proposed that Flo’s resolve to impose the “opposing force” (Kerr, 1988) that encourages independence in children may have been weakened by her grief. While Flint’s demands for his mother’s attention may have been manageable under not so stressful circumstances, in the face of grief, however, these same demands may have become overwhelming for the mother. However, Johnson contended, allowing Flint to continue to be dependent undoubtedly provided Flo opportunities to “mother” the lost child. In other words, Flint became a substitute for the lost child.

Although maternity is seen as a compassionate endeavor, we tend to equate it with a certain level of gentility; benign,
and certainly absent of the malice one associates with such terms as incest. Who among us, one may then ask, would inflict such an injustice on her own child? Research shows that the mother who spousifies her son is not necessarily an enigma (Bradshaw, 1989; Kinnier et al., 1990; Manzi et al., 2006). Manzi et al. (2006) concurred with the previous findings of Love (1990), Bradhaw (1989), and Forward (1989) that enmeshed mothers usually do not know the difference between parenting and partnering. These women, they say, are not knowledgeable about the emotional needs of children. They all assert, further, though, that among the primary liabilities of enmeshed mothers are their lack of role models and their own unresolved emotional issues.

As inferred earlier in the contribution, the primary training ground for child rearing is one’s own family of origin. The behaviors of our parents and significant extended family members are usually our only lessons in mothering or fathering. Consequently, their parenting becomes our parenting. Habits, ideologies, and philosophies are then transmitted generationally. It is no wonder, then, that women who engage in emotionally incestuous relationships with their sons are generally, themselves, the products of dysfunctional families. Emotionally incestuous mothers are generally looking to their sons to fulfill a need that has gone unmet long before adulthood. Furthermore, they, too, are so stunted in their emotional development, that they feel compelled to seek out need fulfillment in the most convenient manner, and from the most convenient source, their children (Bradshaw, 1989).

Theorists also point out the parenting fallacies portrayed by television families as contributing to the notion of women’s maternal responsibilities (Love, 1990; Manzi et al., 2006). June Cleaver, for example, seemed immersed in the goings-on of Wally and The Beaver, while placing little emphasis on her own circle of friends or on her relationship with her husband. Even more contemporary media portrayals of maternity offer up the continually self-sacrificing divorced mom as the epitome of morally correct parenting. Contemporary media provided us with such extreme cases of mothering as Marie Baron (“Everybody Loves Raymond”), as an indication of how not to mother. Even the nonpractitioner could readily see the profound pathology in this fictional family’s reactions to one another and an over-the-top manipulating mother. The symptoms of maternal enmeshment may not be so readily observable as what is noted in the Baron family.

While 21st-century TV mothers Rosanne Connor and Reba Hart hailed from opposite sides of the economic and social tracks, they both, like their predecessors, provided the world with images of women so invested in their children’s lives that they neglected their own needs. These kinds of messages, say systems theorists and practitioners, impose exacting demands on mothers regarding what their primary responsibilities should be. Such messages and messengers, of course, in conjunction with family members’ modeling place marriage and other significant relationships in a position secondary to that of mothering (Bradshaw, 1988a, 1988b; Hann-Morrison, 2006; Love, 1990).

Women who are enmeshed with their sons were consistently found to lack self-definition as well as healthy adult companionship (Love, 1990; Manzi et al., 2006). Expect the enmeshed mother, say researchers (Gavazzi, Anderson, & Sabatelli, 1993; Manzi et al., 2006; Parker, 1995), to be the one whose relationships with other adults are either nonexistent or severely limited. She may be a single parent, they say, by divorce or by choice. She may also be married but to an emotionally absent husband. Bradshaw (1988a, 1988b) and Love (1990) noted that in the case of the married woman who is in an enmeshed relationship with her child, although her husband may be physically present, he is not actively engaged in the role of a spouse, at least not at an emotional level. The void left by the physically or emotionally absent husband is then expected to be filled by the son (Schwartzman, 2006).

Although subsystems are independently functioning units, the adaptive operations of the family system are contingent on the (adaptive) interdependence of each subsystem with and among other subsystems (Minuchin, 1974). Each subsystem has a role to fulfill in ensuring the continuation of the system as a whole unit. Because of the dynamic relationships between and among subsystems, breaches in the functioning of one subsystem will adversely affect the ability of the other systems to function adaptively. A member in one subsystem may blur boundaries, however, in encroaching on members of another subsystem to have his or her’s needs met. When a “marriage” does not exist in its traditional terms and between two adults, it is not uncommon for a wife whose emotional needs are not being met to encroach on an available son to act in a spousal capacity (Dickstein, Seifer, Albus, & Magee, 2004). Another common liability noted in enmeshed mothers involve a spectrum of issues related to these women’s own emotional or mental stability. Love (1990), Bradshaw (1988a, 1988b), and Forward (1989) noted emotional instability and affective dysfunctioning to be characteristic of enmeshed mothers. Depression, they say, seems to be a major contributing factor in maternally enmeshed relationships more often than not. The phenomena, they contend, seems to be more common in women with chronic depression, and whose need for support may be overwhelming. Dickstein et al. (2004) noted that families with depressed mothers are related to increased levels of impaired functioning. Mothers with depression, it seems, tend to rely on their adolescents and adult children for support, and tend, further, to exhibit a broad array of dysfunctions in the area of affective functioning (Dickstein et al., 2004). Dickstein et al. report, interestingly, that while depressed women with infants tend to be disengaged from their infant children, they tend, conversely, to attach intensely to their adolescent and adult children. As their children age, it
seems, these women impose increasing demands on the children for intimacy and social support.

**The Social Fallout**

According to Schwartzman (2006), compromises in the interaction regulation between mothers and sons are more common than those between mothers and daughters. Lindsey, MacKinnon-Lewis, Campbell, Frabutt, and Lamb (2002) offered similar findings, noting that boys are more at risk for negative effects of parenting on social outcomes. According to Schwartzman and Lindsey et al., while enmeshment by mothers may plague the mother–daughter relationship, the mother–son relationship seems to be more vulnerable to maternal enmeshment.

As the “chosen child” (Love, 1990, p. 8), the boy who has found himself in his mother’s continual grace usually finds the special privileges and extra attention he receives from his mother gratifying. The ultimate toll on the child, however, will be nothing less than life altering. Levying the adult responsibilities of emotional nurturance for one’s parent on the shoulders of a child compromises the child’s development in several crucial domains. Love (1990) purported that as lofty a position as being the “chosen child” may seem, the victim of maternal enmeshment is precisely that—a victim. In exchange for his service to his mother, this child actually relinquishes his entire life. According to Anderson and Sabatelli (1992), this child loses out on opportunities to interact socially with peers, and ultimately loses out on his childhood. This loss of childhood, they offer, has a downwardly spiraling effect. In addition to rendering the child unfit for adaptive peer interactions, the unhealthy mother–son relationship also has the cumulative effect of decreased opportunities for adaptive adolescent interactions, and therefore limited opportunities to practice assuming adult roles. Gavazzi et al. (1993) believed that because the chosen child misses out on the socialization inherent in peer contact, he consequently does not develop emotionally or socially. His repertoire of responses, they contend, ends up being emotionally primitive and socially immature for his age. The chosen child reacts to his mother and she reacts to him. The reaction becomes generalized to the whole family, and this child becomes the crusader, so to speak, for maintaining the status quo. This reactivity leads to deepening of the fusion between mother and son, as the child is being programmed to have similar values and tastes as his mother.

Most family systems theorists find that the chosen child is isolated in childhood, and continues to be isolated in his adult life. They find, further, that as an adult, this person’s interactions with peers continue to be limited. As a product of limited opportunities to interact with his peers, the chosen child is rendered, in essence, grossly limited as an adult (Bradshaw, 1988a, 1988b; Love, 1990; Manzi et al., 2006).

According to Love (1990), chosen child grows up being unsure of what is acceptable or peer appropriate behaviors and what isn’t. In addition, as said by Love, as an adult, the victim of maternal enmeshment tends to be perfectionistic, and has a compulsive need to succeed. He will overcompensate in his efforts to appear at least normal. According to Love and Schwartzman (2006), because the chosen child has been in the spotlight of his mother’s life for most, if not all, of his own life, he believes himself to be superior. They both contend that it is not uncommon for this person to develop narcissistic traits, if not full-blown narcissism. This sense of superiority may manifest itself in extreme efforts at outdoing peers in his professional life. He wants to earn more money than . . . ; garner greater recognition than . . .

Despite his tendency to over function in his interpersonal relationships, this will be one area where the “chosen child” will probably experience the greatest frustration (Williams & Hiebert, 2001). Here, the narcissist becomes very dismissing of others’ feelings and seek out interpersonal relationships that serve his own needs for superiority. Needless to say, men who have been enmeshed with their mothers find it difficult to sustain meaningful interpersonal relationships with peers. Generally over a short period of time, the relationships will fizzle out for at least one of two common reasons—The chosen child will find another target to support his sense of superiority; or the mate of the chosen child will eventually come to recognize the futility of a relationship in which her partner over functions to promote maintenance of the status quo, as opposed to engaging in an adaptive exercise of emotional give and take that defines marriage. Realistically, any effort at a healthy relationship with the chosen child is doomed from the very start, as these men fear intimacy and commitment (Forward, 1989; Love, 1990). Bradshaw (1988a, 1988b), Love (1990), and Parker (1995) relayed accounts of their own clients who have themselves been their mothers’ chosen children. The general consensus, it seems, is that these men have a difficult time understanding the concept of freedom within interpersonal relationships. Reportedly, these men also tend to view close relationships as invasive. These same authors purport that the likelihood of marriage for the male chosen child is slim. Marriage quality, according to Dickstein et al. (2004), is intimately linked with the quality of functioning in other aspects of life. It stands to reason, then, that the likelihood of a healthy, adaptive marriage for these men might be somewhere close to nil. Although male victims of maternal enmeshment do marry, the results, reportedly, are usually disastrous (Bradshaw, 1988a, 1988b; Schwartzman, 2006).

The life transition inherent in what we define marriage to be would pose a significant threat to the chosen child’s identity. The maternally enmeshed son is likely to be challenged by a role that implies a degree of equality, and therefore a renegotiation of his position in the family system (Schwartzman, 2006). As the chosen child is accustomed to
being the center of his mother’s attention, and has very little, if any, experience with equality, he naturally assumes center stage in the marital relationship. Remember, he is a narcissist, and will not tolerate being upstaged. His choice for a spouse, likely, will be someone to whom he feels he is superior in the first place. This person will dominate the marital relationship, and will adhere vehemently to the family mythology of his inherent loftiness. Furthermore, he will adamantly deny any dysfunction in himself personally or in his family system. Should the chosen child’s spouse resist or in any way challenge his husband’s maladaptive level of functioning, the chosen child will usually pit his mother against his wife. This, according to Bradshaw (1989), is yet another incident of immature reactivity. As the ensuing drama between wife and mother unfolds, the wife typically becomes the outlaw, and a divorce is the end product (Love, 1990).

Despite the tendency for abject failure at interpersonal relationships, there is evidence to suggest that even the maternally enmeshed child may, with personal and committed effort on his part and support from significant agents of change, develop and sustain adaptive adult interpersonal relationships. Dickstein et al. (2004) offered, for example, that the presence and active participation of a secure and adaptively functioning partner/spouse may serve to offset the effects of negative childhood relational experiences.

The Therapeutic Setting

In considering offering therapeutic intervention to emancipate the maternally enmeshed man, one must understand that the enmeshed relationship between mother and son is the product of bilateral interactions of need. Schwartzman (2006), Dickstein et al. (2004), as well as family systems theorist over the span of decades have recognized that the enmeshed relationship is a co-construction between both parties (Bradshaw, 1988a, 1988b; Love, 1990). Both parties, they offer, contribute to the relationship’s continuation. Although one might subsume, then, that emancipation of the chosen child from the maladaptive grips of his enmeshed mother requires both parties, the fact is that emancipation is rarely the goal of both parties involved in such a relationship (Schwartzman, 2006). Schwartzman offer that generally it is the chosen child who seeks to heal the relationship between he and an overpowering mother. The catalyst for the chosen child to seek assistance is usually chronic anxiety, depression, and an undeniable pattern of unhealthy and emotionally unrewarding interpersonal relationships (Love, 1990; Schwartzman, 2006).

Although it is possible for the chosen child to be emancipated from his enmeshed mother, or from the undifferentiated ego mass that is his family, more often than not the only emancipation that occurs is the chosen child from a wife who has grown weary of the family fusion. For the chosen child, emancipation requires great effort—often more effort than this person is willing to invest, or can muster. Emancipation requires acknowledgment that the enmeshed relationship is unhealthy. As the chosen child has adopted similar values as the doting mother, it is unlikely that he will see the maternal relationship as a contributing factor in his inability to secure and maintain healthy adult functioning. Moreover, seeking emancipation means being dethroned—This translates into losing a position of power and prestige in the family to become “ordinary.”

Growth from this arrested place of social and emotional stagnation requires the victim of maternal enmeshment to challenge long-held and deeply ingrained beliefs, not only about himself but also more importantly about the system from which he comes. The reconceptualization of the system as broken usually requires insight from a source or sources that the chosen child deems credible.

The hallmarks of treatment for the maternally enmeshed son, then, are sure to include intensive education on enmeshment. These include teaching clients about the characteristics within systems that indicate or are related to the development and sustenance of maladaptive interactions among members. The client must be able to apply these concepts to his own relationship and be made to connect his unhealthy relationship with his mother to his unhealthy relationships with peers.

Conclusion

A family is typically thought of as that cohesive unit with which one has so much in common, but that simultaneously affords individuals the freedom to also exercise personal differences. We reasonably expect our families to be the primary source of nurturance and support and to facilitate emotional, physical, mental, and social growth. Gavazzi et al. (1993) offered that among parents’ greatest gifts to their children are the provision of opportunities for experimentation with a variety of responsibilities, while providing the children support and coaching. These opportunities, they contend, serve to create a context of emotional bonding and acceptance of personal boundaries.

Although families generally provide rather adequately for our physical and emotional needs, some simply fall miserably short of allowing members to become individuals. While one family may be quite able to afford members opportunities for personal development, another may present as totally inadequate due to its own multigenerational emotional and mental inadequacies. Parenting is, without question, among the most challenging of responsibilities, and yet, it is among the few for which there is no formal training. The primary source of our lessons in parenting is the models provided in our homes, with some unfortunate input from the fictitious character portrayals in the media. It is no wonder, then, that patterns of maladaptive family relationships are seen across generations.
In a society as enlightened as ours, abuse of a child is never an acceptable option, and as a society, we have banned together to collaboratively take up the cause of victims of both sexual and physical abuse. The emotional residues of both childhood sexual and physical abuse are readily observable in victims who struggle to form adaptive relationships in adulthood. For the child who is thrust into the adult role of providing for his mother’s emotional needs, we are not so quick to call foul. Sadly, and without society ever really noticing, these children lose ground emotionally, mentally, and psychologically. They lose out on the opportunities of childhood, and consequently struggle with adulthood. Because they have had such limited opportunities to learn what are peer appropriate behaviors, they typically suffer lasting delays in their own social and emotional development. These delays are telling in these adults’ clumsy attempts at meaningful interpersonal engagement with peers. Reasonably, then, victims of maternal enmeshment will be challenged to form families that function within the parameters of what may be considered normal. For this, along with a multitude of other reasons, emotionally impaired relationships between mothers and their sons require intense therapeutic attention.

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