

Parental Reflective Functioning Among Parents with History of Childhood Abuse: A Preliminary Mixed-Method Study

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Abstract. This preliminary study explored Parental Reflective Functioning (PRF) among parents with a history of childhood abuse. PRF, the ability to understand a child's mental state, played a key role in breaking the cycle of intergenerational maltreatment. An explanatory sequential mixed-method design was employed, involving 10 participants in a quantitative phase and two in a follow-up qualitative phase. No significant correlation was found between childhood abuse and PRF. However, qualitative findings revealed key themes, including coping strategies, parenting outcomes and related challenges. This study provided initial insights and highlighted the need for further research with larger samples.

Keywords: Childhood Abuse, Explanatory Sequential Mixed Method, Intergenerational Maltreatment, Parental Reflective Functioning, Preliminary Study.

Abstrak. Studi pendahuluan ini mengeksplorasi fungsi refleksi orangtua (FRO) pada orangtua dengan riwayat kekerasan di masa kanak-kanak. FRO, kemampuan untuk memahami keadaan mental anak, berperan penting dalam memutus siklus kekerasan intergenerasi. Penelitian ini menggunakan desain *mixed-method* dengan pendekatan sekuensial eksplanatori, melibatkan 10 partisipan pada fase kuantitatif dan dua partisipan pada fase kualitatif lanjutan. Tidak ditemukan korelasi signifikan antara kekerasan di masa kanak-kanak dengan FRO. Namun, temuan kualitatif mengungkap tema-tema utama, termasuk strategi koping, *outcome* pengasuhan dan tantangan terkait. Studi ini memberikan wawasan awal dan menekankan perlunya penelitian lanjutan dengan jumlah partisipan yang lebih besar.

Kata kunci: Fungsi Refleksi Orangtua, Kekerasan di Masa Kanak Kanak, Kekerasan Intergenerasi, Mixed Method, Studi Pendahuluan.

According to World Health Organization report, violence against children is a common problem affecting 300 million children worldwide, although many cases of violence are not reported (Sedlak et al., 2022). Based on the results of the National Survey on the Life Experience of Children and Adolescents (SNPHAR) in Indonesia, the incidence of violence against children still shows a high number of cases, with around one in five boys and one in four girls experiencing some form of violence in the last 12 months (KemenPPA, 2022). Furthermore, family is one of the three groups who sexually, emotionally, and physically abuse children (Susilowati et al., 2022). WHO defines child abuse as any form of physical, emotional, sexual, neglect, commercialization or exploitation of a child that may potentially endanger the health, survival, development, and dignity of the child (Krug et al., 2002).

The impact of child abuse (CA) not only hinders children's development in various dimensions, but the impact of CA can continue into adulthood and shape parenting behavior when they become parents (Greene et al., 2020; Masson et al., 2015). Findings show that increased exposure to violence in childhood can reduce parental competence (Manshadi et al., 2023), weaken maternal sensitivity which has an impact on mother's parenting behavior (Schneider et al., 2021), difficulties in daily interactions with children (Pasalich et al., 2016; Rijlaarsdam et al., 2014), tend to show less supportive parenting behavior (Condon et al., 2022), and damage parents' capacity to engage in positive parenting behaviors (Savage et al., 2019).

Although several findings prove the negative impact of experiences of violence in childhood on future parenting, Parental Reflective Functioning (PRF) is one of the determining factors that predicts (Berthelot et al., 2019; Decarli et al., 2022; Jessee et al., 2018; Zeegers et al., 2017), modifying (Schwarzer et al., 2021) and moderating (Borelli et al., 2021) between the experience of violence in childhood and the quality of marriage, parenting and maladaptive consequences. PRF as a predictive factor means that the reflective function can estimate the parent's autonomy support and psychological control over the child, the parent's perception of their ability to care for the child, and is able to predict the quality of marriage and co- parenting. PRF is also able to change (modify) maladaptive consequences in adults with psychological/emotional violence in childhood. Finally, PRF acts as a moderator between the experience of rejection in childhood (psychological violence) on the quality of the couple's relationship and parenting behavior, where adequate reflection function is related to reducing unresponsive behavior and increasing satisfaction in the relationship.

Parental Reflective Functioning is defined as the ability of parents to imagine and understand the mental state of themselves and their children (Rutherford et al., 2017), which is influenced by internal mental states (feelings, expectations, desires). Reflecting on one's own mental experiences and how interacting with children may form and vary them are examples of Parental Reflective Functioning (Luyten, Mayes, et al., 2017). Parents with a high Parental Reflective Functioning have a curiosity about their child's subjective experiences, what influences their behavior and how the situation relates to them in the past. PRF could enhance the development of secure attachment, emotional regulation, self-control, and interpersonal functions (Bateman & Fonagy, 2019; Luyten et al., 2020).

Although there is a variety of research states that childhood abuse can impair Parental Reflective Functioning, Ensink et al. (2014) argues that the experience of violence in childhood does not directly impair Parental Reflective Functioning, but only parents who are unable to do Reflective Function related to the Trauma (RF-T) will affect parenting behavior towards children. The Parental Reflective Functioning becomes a crucial key that explains whether parents with a history of childhood abuse will continue violent behavior in children with those who do not continue the abusive behavior. Thus, the aim of this study is to investigate the Parental Reflective Functioning among parents who have a history of childhood abuse.

Method

Variable Identification

This study examines the relationship between childhood abuse and parental reflective functioning (PRF), by identifying key variables that shape parenting dynamics. The independent variable in this study is childhood abuse, which refers to adverse experiences of violence during the early years of a person's life, including physical, emotional, or psychological abuse/neglect. This variable is assessed to determine its potential impact on PRF. The dependent variable is parental reflective functioning (PRF), which indicates a parent's ability to understand and interpret their child's mental, emotional, and behavioral states. PRF plays a significant role in shaping parenting practices and determining whether parents will continue or break the intergenerational cycle of violence.

Research Instruments

In Study 1 (quantitative study), the trauma history was recorded using the childhood trauma questionnaire short form (CTQ-SF), whereas Parental Reflective Functioning was used the Parental Reflective Functioning Questionnaire (PRFQ). The CTQ-SF consists of 28 items (e.g., *"I was punished with a belt, a board, a cord (or some other hard object)"*). The responses to the CTQ-SF are recorded on a Likert Scale, ranging from 1 (never) to 5 (Very Often). The Indonesian adaptation of the CTQ-SF was conducted by Rahma et al. (2021). The adaptation of the CTQ-SF by Rahma et al. (2021) was found to be valid and reliable and has been utilized by other researchers to assess childhood trauma history (Boentario et al., 2021).

PRFQ is a self-report questionnaire that measures parents' ability to understand their child's mental state (Luyten, Nijssens, et al., 2017a). PRFQ consists of three sub-scales, including curiosity about the mental state, such as *"I'm curious about what a child thinks and feels"*; certainty about a mental state, in which a parent's ability to recognize the unclear mental state of a child (mental states are opaque), such as *"I can always predict what my child is doing"*; and providing the difficulty or inability of a parent to reflect on a child's mental state, like *"when a child is agitated, he acts in such a way to upset me"*. The PRFQ's response was recorded on the Likert scale, ranging from 0 points (strongly disagree) to 7 points (strongly agree).

Data collection in Study 2 (qualitative study) was conducted either offline or online via Google Meet. The open questions are structured with the aim to understanding parental care among parents with a history of childhood abused in the lowest and highest categories. The interview consisted of four sessions, with the first session aimed for building a rapport, communicating the purpose of the interview as well as ensuring confidentiality to the participants. Conversations during interviews were recorded using an audio recorder (Audacity) for verbatim transcripts and data analysis

Research subject

Participants in this study were parents aged 23-33 years, recruited through convenience sampling due to challenges in identifying individuals with a history of childhood abuse and time constraints. The quantitative phase included 10 participants (2 males, 8 females), with educational backgrounds ranging from high school (n=3) to undergraduate (n=6) and master's degrees (n=1). While the small sample size limits statistical power, it aligns with the study's exploratory nature, aimed at identifying preliminary trends rather than generalizable conclusions.

For study 1 (quantitative phase), participants recruitment was conducted through the WhatsApp platform, where questionnaires were distributed via Google Forms. The sampling technique used was convenience sampling, as participants were selected based on accessibility and willingness to participate. This approach was suitable given the study's exploratory nature and challenges in accessing a specific population. In study 2 (qualitative phase), purposive sampling was used to select participants with a history of childhood abuse, specifically those with low and high Childhood Trauma Questionnaire (CTQ) scores, who were willing to share their parenting experiences in depth.

Research methods

The mixed method study was used in this research because it allowed researchers to comprehensively understand the role of Parental Reflective Functioning (PRF) among parents with history of childhood abuse. The study follows an explanatory sequential mixed method design, wherein the first phase (quantitative) examines the relationship between childhood abuse and PRF using a non-experimental correlational study to explore the association between these variables. The second phase (qualitative) employs in-depth interviews to gain insight into how parents with a history of childhood abuse nurture their children. The integration of both quantitative and qualitative approaches ensures a more holistic and nuanced understanding of PRF among this population.

Analysis Techniques

Because the sample size was small ($N=10$) and the CTQ-SF total score was ordinal, which does not meet the assumptions needed for parametric analysis, the data from study 1 were examined using non-parametric statistical technique. Since non-parametric methods do not require normality test and are more reliable when examining data that is not normally distributed, they are especially well-suited for small samples (Wulansari, 2023). Spearman's rho test will be used to prove the hypothesis of a correlation between a history of childhood abuse and Parental Reflective Functioning. The data processor will be assisted by Jamovi software version 2.3.17.

Interview data from Study 2 (qualitative study) will be analyzed thematically (thematic analysis). The next phase of analysis is to create open coding based on verbatim transcripts, then axial coding. Coding begins with the definition of category types and then continues with the discovery of relationships between categories and sub-categories. The final stage is selective coding, where researchers select categories to find core or central categories for subsequently

finding themes (Corbin & Strauss, 2015). The entire coding process was conducted manually, utilizing Excel as an organizational tool to facilitate data management and analysis.

The results of the quantitative and qualitative data analysis will be integrated narrative-contagious, and the integration of the phases will be done by presenting the findings in a report where the quantity and quality findings are in different sections (Fetters et al., 2013).

Result

A. For Results of Quantitative Research

The Spearman's rho correlation analysis (Table 1) revealed a moderate positive correlation ($r = 0.80$) between childhood abuse and Parental Reflective functioning (PRF). This suggests that a higher level of childhood abuse is associated with an increase in PRF. However, the correlation was not statistically significant ($p = 0.33$, $p > 0.05$), indicating that the observed relationship may have occurred by chance. Therefore, the findings do not provide sufficient evidence to support a significant association between childhood abuse and PRF in this sample.

Table 1

Relationships between Violence in Childhood and Parenting Reflective Function

Correlation Matrix	CTQ		PRFQ
CTQ	Spearman's rho	—	
	p-value	—	
PRFQ	Spearman's rho	0.800	—
	p-value	0.333	—

Note. * $p < .05$, ** $p < .01$, *** $p < .001$

B. Results of Qualitative Research

Analysis of the interview transcripts identified key themes that characterize the dynamics of PRF among parents with a history of childhood abuse, namely:

1) Effort (Input)

Parental effort in individuals with low levels of childhood trauma (CT) were categorized into two distinct approaches: mental management-focused efforts and behavioral-focused efforts. Mental management-focused efforts involve cognitive and emotional regulation strategies aimed at processing past traumatic experiences. This includes

recognizing feelings of insecure attachment or emotional detachment from parental figures and consciously striving to prevent the repetition of these patterns in their parenting practices. As one participant stated, acknowledging these attachment difficulties served as a motivation to foster a more secure and nurturing relationship with their child.

“I want my child to be open and comfortable with me, so that if something happens my child can tell me straight away. I realized that I was always reluctant to tell my mother because I felt like I was often blamed...until now there has been a lot of miscommunications between my mother and me.”

Another mental effort is to mentalize what is felt by observing the child's body language and asking what is thought and felt. In addition, there are efforts focused on real behavioral efforts to deal with parental trauma, including attending parenting seminars and reading books entitled parenting. Such behavior is carried out in the hope of increasing the knowledge and awareness of parents so that the trauma experienced is not inherited by the child.

Nonetheless, participants with high trauma characteristics (high CT) reflected minimal effort both mentally and behaviorally in coping to the trauma they experienced in childhood.

*“Hmm... I've been trying to take the same transpersonal therapy with coach guna***... At that time my wife was there, too. She also saw how my emotions flooded during the process. But yes... it just stopped there... what else I can do... even though my wife repeatedly reminded me to make peace with dad and mom, the feeling of resentment is still there... they are really dumb, their brains really fric*, they like to blame their children... I hope they die quickly!”*

2) Result (Output)

This output represents the culmination of both cognitive and behavioral processes directed toward parenting. These outcomes manifest in several key forms: (1) the ability of parents to regulate their children's emotions during moments of distress, including employing relaxation techniques, seeking support from social networks, engaging in discussions about parenting strategies with a partner, and demonstrating empathy; (2) active parental participation in shared play activities and imaginative interactions with their child; and (3) intentional engagement in dedicated quality time with their child. These adaptive

parenting behaviors were predominantly observed among participants with low levels of childhood trauma (low CT).

Conversely, participants categorized as having high levels of childhood trauma (high CT) exhibited tendencies toward prementalizing mode. Prementalizing refers to a cognitive state in which parents struggle to attune to their child's subjective experiences, leading to difficulties in recognizing and interpreting their child's mental states and behaviors. This impaired reflective capacity contributes to heightened interpersonal distress, potentially exacerbating conflict and emotional disconnection between parents and their children.

3) Challenge

The challenge is the obstacles that are encountered in the parenting process. Many of these barriers originate from the individual (parents) related trauma of parenting in the past that is still unhealed or unfinished. Parents are still in conflict with figures of authority from the past. The following statement implies one of the challenges experienced by participants with low CT characteristics:

“Humm... The most challenging thing is probably when your child wants to stick to you all day. Honestly, sometimes I feel like I do not like it when a child likes to stick to me all the time... I do not know why... I just feel like I am irritated. especially since there is a lot of work... Maybe because in the past my parents rarely touched (loved) so I felt a little uncomfortable when kids love to stick around.”

In responding to the obstacles, the participants attempted to return to the mental or behavioral effort as described in the beginning.

“For example, if my child cries, I reflect on how when I was little, in the same position, I expected to be treated like that, well... That's how I treat my child now.”

For participants with high CT characteristics, the obstacles experienced came from within as a result of conflict with parents that still exists until now. Therefore, participants also have difficulty overcoming obstacles during parenting.

“Sometimes I like to let loose with children (get angry) for example when a child spills rice...what can I do...it just feels emotional...in the past I was often blamed for anything...just ask my wife, my mother was too fussy about commenting on imperfections. Meanwhile, my

father likes to force things. If I do not follow their wishes, I will definitely be scolded, even kicked... they just want their viewpoint to be heard, they like to blame."

The themes obtained from the interview are described in the following chart (Figure 1):



Figure 1. (The dynamics of parental care with a history of child abuse)

C. Integration of Quantitative and Qualitative Research Results

Statistics by theme is used to present the integration of quantitative and qualitative results in a joint display (Guetterman et al., 2015). The integration of quantitative and qualitative research results is presented in Table 2.

Table 2

Joint display (statistic by theme) integration quantitative and qualitative results

Effort

Attitude/behavior in coping with parenting trauma

Low CT	<i>"I often take part in seminars like Elly Risman's seminars, psychology seminars, learning about emotions... because I feel I need that knowledge. So, from there, taking part in seminars like that, I learned to be able to update myself better in educating children. Basically, I'm happy to learn... and enjoy the learning process"</i>
High CT	<i>"Hmm... I've been trying to take the same transpersonal therapy with coach gunaw**... that time my wife was there, too. She also saw how my emotions flooded during the process. But yes... it just stopped there... what else I can do... even though my wife repeatedly reminded me to make peace with dad and mom, the feeling of resentment is still there... they are really dumb, their brains really fric*, they like to blame their children... I hope they die quickly!"</i>

Output

Results of mental & behavioral efforts towards parenting

Low CT	<i>"Sometimes before we go to sleep, the kids and I like to pillow talk... asking about how they feel "son, how are you feeling today"? "Are you happy or not? Are you sad? Why?"</i>
High CT	<i>"Sometimes yes, sometimes no... Sometimes I like to play pranks... For example, I know he might be angry but he still does it. For example, if he is told to come forward, he doesn't want to, then I force him, so in the end he gets cranky"</i>

Challenge

Obstacles encountered in the process of parenting

Low CT	<i>"Yes, sometimes I realize that my child is "aware" that I'm uncomfortable (doesn't like being touched by children), so sometimes Maryam just becomes more independent... Well, that is where my empathy also appears... everything went wrong... Yes, but up to now I've struggling as to how I could overcome such things"</i>
High CT	<i>"Sometimes I like to let loose with children (get angry) for example when a child spills rice...what can I do...it just feels emotional...in the past I was often blamed for anything...just ask my wife, my mother was too fussy about commenting on imperfections. Meanwhile, my father likes to force things. If I do not follow their wishes, I will be scolded, even kicked... they just want their viewpoint to be heard, they like to blame.</i>

Discussion

The results of a correlational analysis showed no correlation between prior trauma and Parental Reflective Functioning. In other words, the low level of trauma that individuals have experienced in the past has no impact to the ability for reflecting their own and their child's mental states in the context of parenting. This result is in line with the study which found that childhood trauma experienced will not impair the Parental Reflective Functioning in general but only specific

context of trauma that are unable to be reflected by parents (Ensink et al., 2014) Instead, Parental Reflective Functioning becomes the key construct that distinguishes whether a parent with a history of childhood abuse will transmit the trauma to the child or choose to terminate it (Luyten, Nijssens, et al., 2017b).

Parental Reflective Functioning as a key construction is described in the results of an in-depth interview analysis on phase 2, qualitative. Both mental and behavioral efforts can be made by parents. The mental effort is made by thought and contemplation of how his parents previously cared for them, resulting in awareness. This awareness is realized by parents through behavioral efforts such as improving parental knowledge through seminars, workshops, reading books and discussing with psychologists. As a result of this effort, the parents have a secure attachment to their children. Parents can empathize with their child's condition, self-regulate their emotions, and seek help from the support system when finding obstacles to coping with their child's tantrums.

However, the above reflection condition does not occur in parents with a history of high CTQ scores. Based on the study's integration matrix, it is possible to conclude that parents who experienced childhood abuse have trouble reflecting or mentalizing in parental context. Minimum mental or behavioral effort yields low output, i.e., an inability to understand the child's self and mental condition (prementalizing). The difficulties that parents have with violence in childhood may be attributed to the frequency, intensity, and duration of the trauma. According to interviews with participants who had violent childhood trauma, psychological abuse against him continues to this day, even though he is the leader of his family and has children. The participants' parents are still continually pressuring and blaming himself, thus making him full of anger and revenge. This supports study findings that the severity and complexity of trauma can influence an individual's

ability to cope with the negative impacts of future trauma (Bailey et al., 2007; Thomson & Jaque, 2017).

The transition to being a parent is considered as an important period. This transition requires a reorganization of the identity of parents, including the acquisition of a new balance between autonomy and dependence, which can be accompanied by a huge amount of pressure (Blatt, 2008). Furthermore, it is expected that this transitional period will remind parents of their own childhood experiences and reactivate their own parents' depiction (Fraiberg et al., 2003). It can be a difficult and stressful process, especially for parents who have a history of childhood abuse and neglect, putting them at risk of transmitting trauma and unstable intergenerational attachment (Madigan et al., 2006). Disruption of attachment relationships early in life can damage caregivers' capacity to mentalize (Luyten & Fonagy, 2015; Sharp et al., 2012) and specifically in the context of intense emotional relationships such as parent-child relationships (Allen, 2018). Maltreatment or Abuse that occurs during childhood not only influences the development of insecure attachment in children with long-term effects on intimate relationships in adulthood, but also disrupts mentalization abilities (Huang et al., 2020).

Parental Reflective Functioning or Mentalization is a key construct that differentiates normal development from disturbed development (Luyten et al., 2020). The development of Parental Reflective Functioning is rooted in the quality of attachment between caregiver and child (Bateman & Fonagy, 2019; Fonagy et al., 2023; Dunschinsky & Foster, 2021). The importance of early attachment relationships and emotional attunement between caregiver and child allows for the development of normal mental functioning (Fonagy et al., 1991; Freeman, 2016; Slade, 2005).

Parental Reflective Functioning or mentalization is defined as an individual's capacity to imaginatively think, understand, and interpret the behavior of oneself and others as a combination

of mental states (Freeman, 2016). Parental Reflective Functioning (PRF) emphasizes the parent's mental representation of the child and the parent-child relationship. In addition, PRF requires an attitude towards interests and curiosity about the child's inner world. Parental Reflective Functioning (PRF) represents the parent's tendency to understand the mental conditions underlying the child's behavior so that they can respond to the child's needs and emotions (De Roo et al., 2019).

However, this research has some limitations. The number of samples used in phase 1 (quantitative study) is not representative, i.e., $N = 10$. Because the data was considered to have a non-normal and non-linear distribution from the beginning, the small number of samples had a significant impact on the analysis outcomes. The PRFQ is also suggested for large-scale studies (Luyten, Mayes, et al., 2017). Furthermore, to ensure its accuracy, consistency, and suitability in assessing the function of parental reflection in various populations, the Indonesian version of the Parental Reflective Functioning Questionnaire (PRFQ-Indonesian version) needs to undergo a content validity and reliability test.

Conclusion

The findings of this preliminary study indicate no significant association between childhood trauma history and parents' ability to understand their child's mental state, known as parental reflective functioning (PRF). However, qualitative findings suggest that parents with low levels of childhood trauma (low CT) demonstrate behavioral and cognitive strategies to cope with past trauma, reflecting their capacity to provide adequate care for their children. In contrast, parents with high levels of childhood trauma (high CT) continue to face challenges in their parenting practices, which may contribute to the intergenerational transmission of childhood abuse. Given the exploratory nature of this study and its limited sample size, these findings should be interpreted with caution. Future research with larger and more diverse samples is needed to further investigate the complex mechanisms underlying PRF. Additionally, the integration of PRF into parenting

interventions should be considered as a potential approach to foster secure parent-child attachment and prevent adverse parenting outcomes associated with childhood trauma.

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