

## Parenting Mythology

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### **Abstract**

**Introduction:** We make reference in this paper to those mythologies which affect the attitudes of parents towards their children, how they get involved in parental and children roles in their relationships. We hypothesized that implicit communication, from right brain to right brain, creates implicit expectations, implicit roles and implicit scenarios. The implicit mythological roles are transmitted by relational unconscious (Ginot, 2017) and are associated with implicit procedural memory.

**Objectives:** This research aims to identify those myths that shape child-parent relationship by generating implicit expectations, implicit roles and implicit scenarios.

**Methods:** For this research we used the interpretative phenomenological analysis (Glaser, Strauss, 1967; Mucchielli, 2002; Smith, 2008). In this context for collecting the data we used as methods semi-structured interviews (Mucchielli, 1995; Moscovici, Buschini, 2007), case study (Atkinson, 1998, 2006; Yin, 2005) and genogram (McGoldrick, Gerson, 1990).

**Results:** The qualitative analysis allowed the identification of specific mythologies associated with child-parent relationships and the clusters of specific implicit roles in these relationships.

**Conclusions:** We attempted to identify the way in which the mythology of parenting has an effect in shaping parent-child dynamics. In the case studies we showed how the mythology of parenting creates a way of being parents, conjugal partners, or children in a family. This kind of mythology generates implicit expectations, implicit roles, implicit needs, implicit emotions and implicit behavior in the child-parent relationship. So, child and parent could experience their relationship in an implicit mythological scenario, not being aware of their roles, needs and behavior. The myths about caregiving and parental roles are created and structured in concordance with the narcissistic needs of the members of the family. These myths represent the implicit interdiction to be and act in a different way.

**Keywords:** *implicit familial roles, implicit mythological scenario, projective identification, protoconversation, right brain, intergenerational and transgenerational transmission*

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## **I. Introduction. Theoretical Frame**

We made the assumption that the mythology of parenting has an effect in shaping parent-child dynamics. We use the mythology of parenting in a systemic transgenerational approach and we refer to stories and roles on being parents, which are transmitted in families and communities. Thus, the mythology of parenting is a familial mythology. The familial myth is a representation shared by members of the familial group (Hall, 1980; Neuburger, 2006). It creates rules about how the members of a family can fulfil their roles (Neuburger, 2006). The familial myth writes the roles and attributions of family members in reciprocal transactions. As false or illusory these roles and attributions may be, they are accepted as sacred values and taboo (Selvini Palazzoli et al., 1980). Therefore, the mythology of parenting refers to stories, representations and ways of performing parental roles in a family, which are transmitted from generation to generation.

The research developed by Allan N. Schore (2019a), in the context of interpersonal biology, enables us to understand the familial roles as an effect of interpersonal mechanism. "The interpersonal mechanisms are expressed in brain-to-brain social interaction and thereby are activated in relational context, especially those in which two emotionally communicating right brains are aligned and synchronized" (Schore, 2019a, p. 2). 'The principle of interbrain synchronization' is very important to understand the way "minds and brains are shaped by other minds and brains" (Schore, 2019b). The mechanism of protoconversation is fundamental for comprehending how the relational unconscious is transmitted in family relationships.

Meares describes a conversation between two right brains as a protoconversation (Schore, 2019b). The protoconversation mechanism is fundamental for human communication.

The relational unconscious is a concept that regards the communication between one unconscious mind to another unconscious mind (Ginot, 2017). Ginot mentions that nonverbal implicit communication from the right brain to right brain (facial expression, prosody, gestures) determines unconscious affective transactions between participants to the relation.

The mythology of parenting creates a way of being parents in a family. This kind of mythology generates expectations, roles, needs, emotions and behavior in the child-parent relationship. So, child and parent could experience their relationship in a mythological scenario, not being aware of their roles,

their needs, their behavior. The mythology of parenting could produce roles confusion, needs confusion and dysfunctional behaviors. We could say that a mythological scenario is an implicit scenario and the members of the family participate in the multitude of implicit roles transmitted by procedural memory. These implicit roles have a major significance in the context of family mythology. The sacrificial mother is an example of a role in a mythological scenario that can deeply affect the development of a child.

Eveline Granjon conceptualized generational legacy as a structuring factor of the familial group. She made a differentiation between intergenerational and transgenerational transmission. Intergenerational transmission regards the objects, myths, stories and phantasms which are acceptable to the family members. The transgenerational transmission regards the negative objects, the secrets of the family, something that cannot be said (Ciccone, 1999). This differentiation made us understand the role of family mythology in preserving the familial group.

One phenomenon that maintains the myths in the family is projective identification. Projective identification could be the most important mean of psychic interaction, which is the base of intersubjective transactions at unconscious level (Ciccone, 1999). 'Projective identification' was introduced in 1946 by Melanie Klein. She had as clue the phantasmic relationship between the mother and her child. This phenomenon implies an extension of the Ego and an illusion of possessing an external object. In the mother-child relationship one could perceive this extension of the mother's Ego in a way that the needs of the child do not exist. Normal projective identification serves to communication but pathological projective identification serves to evacuation of unconscious content (Ciccone, 1999). For Melanie Klein projective identification is a phantasmic phenomenon. There are parts of the self which are placed in the phantasmic object. The problems potentially appear when the real object is constraint to conform to the role associated with the phantasmic object. In the case of the parent-child relationship the parent could put pressure on the child to adhere to the mythological role. In this case the child's identity is confused. We could use what Donald Winnicott understands by 'false self' to illustrate how the child feels its identity. Winnicott conceives false self as a defensive mechanism created in infant and child. Pathological projective identification modifies the feel of identity (Ciccone, 1999). Depression, false self, obsession, compulsive attachment could be the

consequences of this phenomenon (op. cit., 1999). The family myth presumes a group projective identification.

Piera Aulagnier introduces narcissistic contract to designate the unconscious bond between parents and the child, but in the same time, between the ancestors and the child (Ciccone, 2003). Every child came with a mission in the family group. Not just the parents but every member of the family expect from this child something that can ensure continuity of the family and fulfilment of the needs which are not expressed and satisfied by the family members. Aulagnier sees the child as a deposit for the unfulfilled dreams of the parents. The child is narcissistically invested. The child finds, in the family space, the place for self-development. The primary narcissistic contract is made in the primary social group breaking through the narcissism of the parents in the scenarios, myths and identity clue (Kaës, 2009). The narcissistic contract is asymmetric in a way that will be imposed to the child (op. cit., 2009).

The myths about caregiving and parental roles are created and structured in concordance with the narcissistic needs of the family members. These myths represent the interdiction to be in a different way. If one lives in a particular family, one cannot be another way. Here we introduce the concept of tyrannical bond (Ciccone, 2003). When the roles and scenarios created by the myths are imposed by the family, tyrannical bonds become constructed. Living in a mythological scenario could mean the relationship between a child and an insecure mother who is confirmed by the family in the maternal role on the mythological dimension of the familial role. She feels insecure about being a mother and the attachment relationship with her child is developed in a rather insecure manner.

Klein showed how an individual's inner world shapes their perception of the object and how, through projective identification, the object is coerced into feeling and behaving in accordance to the projections it receives (Holmes, 1993). Bowlby has an evolutionary-ethological account of the mother-child bond. He was loyal to object-relations theory but researched ethological clues for explaining the effect of maternal deprivation. "The time is ripe for a unification of psychoanalytic concepts with those of ethology, and to pursue the rich vein of research which this union suggests" (Bowlby, 2005). "Attachment theory accepts customary primacy of the mother as the main caregiver, but there is nothing in the theory to suggest that fathers are not equally likely to become principal attachment figures if they happen to provide most of the child care" (Holmes, 1993).

Bowlby describes attachment by using the concept of internal working models. "A securely attached child will store an internal working model of a responsive, loving, reliable caregiver, and of a self that is worthy of love and attention and will bring these assumptions to bear on all other relationship. Conversely, an insecurely attached child may view the world as a dangerous place in which other people are to be treated with great caution..." (op. cit., 1999).

The secure or insecure attachment, avoidant or ambivalent, are developed as strategies of being in relationships. Avoidant attachment implies the child's denial of attachment needs from fear of being rejected. The ambivalent strategy implies the oscillation between being submissive in relationship with the caregiver or being very caring in relationship with the caregiver. The hyper anxious mother reduces the exploratory behavior of her child and the separation becomes very difficult.

## **II. Objectives**

For our current study the general objective was to identify the myths on caregiving and parenting, transmitted in family contexts.

The specific objectives aimed at identification of:

1. how these myths shape the mother-child, parent-child relationships;
2. the implicit roles and the scenarios associated with child care mythology;
3. the pathological effect of transmitted caregiving mythology.

### *Hypotheses*

The present article treats those mythologies which affect the attitudes of parents towards their children that influence the parental and child roles, in the frame of child-parent relationships.

The hypothesis is that implicit communication, from right brain to right brain, creates implicit expectations, implicit roles and scenarios. Implicit procedural memory underlying the implicit roles is transmitted transgenerationally. In different families we encountered a collection of implicit roles with significance for the members. Sacrificial mother, sacrificial woman, savior and victim, competent mother are examples of implicit roles in families.

In my therapeutic practice I have encountered many family dysfunctions due to the confusion on being parent and about being child. When the child is born into a family, every member of that family imagines him or her in various ways. Implicit roles are created this way,

as are implicit expectations and implicit behaviors on being a child. Sometimes, he or she comes to fulfil the parents' expectations or of other members of the family, but the confusions about implicit expectations generate difficulties in assuming a role or another. The dissonance between implicit and explicit expectations generates double bind communication and confusing roles in the family relationships.

Some expectations concerning being a child were based on the myths about duties, the pathological loyalty of duty. The numerous gifts and duties originate in a genealogical chain in which each is represented by what *'has been (received)'* and what *'will be (offered)'*, the expression of the act of *'receiving from others'* and of *'passing on to others'*. This genealogical chain is passed on from generation to generation, as French psychoanalyst Alberto Eiguer stated, thus generating a specific pathology he described as "the gift and duty pathology". The intergenerational and transgenerational mental transmission implies a continuous transmission process of various mental contents from one subject to the next, with the receiver having to metabolize them and thus integrate them in his own mental representation system (Eiguer, 2005, p. 26-31; Godeanu, & Godeanu 2016). Implicit-procedural memory is the neurological correlate of these contents.

When the familial myth is more important than personal needs, we can encounter familial disorders due to a small level of differentiation from the origin nuclear family.

### III. Methods

For this study we had a sample of 75 subjects divided in six main groups:

- four groups (40 participants) consisted in mothers with children/ teenagers (ages 7 -18 years old);
- 1 group (12 participants) was composed of mothers with children (ages 1-3 years old);
- 1 group (13 participants) was composed of mothers with adult "children" (ages 27-35 years old).

In this study we used IPA – Interpretative phenomenological analysis (IPA) (Glaser, Strauss, 1967; Mucchielli, 2002; Smith, 2008). "The aim of interpretative phenomenological analysis is to explore in detail how participants are making sense of their personal and social world, and the main currency for an IPA study is the meanings particular experiences, events, states hold for participants. The approach is phenomenological in that it involves detailed examination of the participant's live-world; it attempts to explore personal experience and is concerned with and individual's

personal perception or account of an object or event, as opposed to an attempt to produce an objective statement of the object and event itself. At the same time, IPA also emphasizes that the research exercise is a dynamic process with an active role for the researcher in that process" (Smith, 2008, p. 53). "The assumption in IPA is that the analyst is interested in learning something about the respondent's psychological world [...] meaning is central and the aim is to try to understand the content and the complexity of those meanings" (op. cit., 2008, p. 66).

Semi-structured interviews are the exemplary method for IPA (Smith, 2008). For collecting the data, we used as methods:

- *Semi-structured interviews* (Mucchielli, 1995; Moscovici, Buschini, 2007);
- *Case-study* (Atkinson, 1998, 2006; Yin, 2005);
- *Genogram* (McGoldrick, Gerson, 1990).

### IV. Results

After the conduction of qualitative data analysis, we identified the following mythologies, that will further be detailed:

- A. Mythology about implicit maternity roles
- B. Mythology about implicit paternity roles
- C. Mythology about the caregiving relationship

#### A. Mythology about implicit maternity roles

Themes clustering:

- the sacrificial mother – the main role;
- the sacrificial woman;
- the victimized woman;
- the aggressive father;
- the incompetent father;
- the parental child.

We identified several myths occurring with great frequency:

*"To be a mother means to sacrifice herself."*

*"To be a mother means to do anything for your child."*

*"To be a mother means that you have no life for yourself."*

*"Only the mother knows what the child needs."*

The associated roles are:

- a) sacrificial mother;
- b) sacrificial woman;
- c) savior and victim;
- d) victim;
- e) competent mother.

The consequences on the child-mother relationship are:

- loyalty duty phenomenon;
- reduced autonomy;
- confusion of the needs;
- roles confusion;
- lack of an awareness of boundaries;
- lack of rules;
- dysfunctional communication;
- separation difficulty.

The consequences on the conjugal couple:

The mythology on being a parent interferes with the mythology on the conjugal couple.

*"When you are a mother you can't have time for yourself anymore."*

*"When I became a mother, I vanished from my couple."*

Aftermaths:

- confusion of the needs;
- roles confusion;
- lack of awareness of boundaries;
- lack of rules;
- dysfunctional communication.

#### B. Mythology about implicit paternity roles

- the mythology about parenting does not put emphasis on the father's role in relationship with the child;  
- he could be perceived as authoritarian figure who manifests himself from time to time without constancy.

The myths associated with the paternity role:

*"The father is the one who sets the rules in the family."*

*"The father must be the strongest."*

*"The father does not know anything about us. Mother did everything for us."*

Associated roles:

- a) authoritarian father;
- b) aggressive father;
- c) persecutor father;
- d) incompetent father.

The consequences on the father-child relationship:

This mythology about paternity affects the father-child dynamic. The role expectations are very

confusing and this generates dysfunctional communication. The child with incompetent or authoritarian father has difficulties in separating from the mother and acts with reduced autonomy.

The aftermaths on the conjugal couple:

- the incompetent father is often an incompetent conjugal partner;
- roles confusion;
- difficulties in communication.

#### C. Mythology about the caregiving relationship

*"A mother must do everything for her child."*

*"You have to care for the child in a way that prevents all dangers."*

*"There are many dangers for the child and he must be protected."*

Consequences on the mother-child relationship:

The child could encounter difficulties in the developmental stages.

#### Case studies

We chose to conduct some case studies as examples for the dynamic of implicit mythological roles and implicit mythological scenarios.

##### A. Mythology about maternity role. Maternity as a sacrifice.

With high frequency, in many responses I found the mythology of the sacrificial mother.

A1. *"Being a mother means being a sacrificial woman"*. A mother must sacrifice for the best interest of her child. The sacrificial mother myth has many implications for the conjugal couple and for the development of the child. This myth shapes the relationship with the child, setting the expectations from mother to child and from child to mother. These expectations could be explicit or implicit. Many times mothers do not engage in open communication. Duty and loyalty are implicit expectations from the child.

##### Case study 1: consequences of the myth on the mother-child relationship

*"I stayed at home for you"*, said Irina to her child when he wanted to move out from home. Saying it she wished that her 20 years old son remained with her at home. Implicit loyalty generates a pathological

response from the son, which is described as pathological duty (Eiguer, 2006). The relationship between mother and son is developed as a projective identification phenomenon associated with the anxious ambivalent attachment and loyalty duty from her child.

The son's autonomy was blocked by the mother. This hyper anxious mother restrains the son's autonomy due to her own anxiety of relationship and of exploration. The anxious ambivalent attachment features this kind of mother-child relationship. The mythology confirms and shapes the dynamic of this mother-child relationship. *"I am the mother who sacrificed herself for you and I need you to do the same for me."* – this is the implicit message from this *"sacrificial mother"* to her child, in this case. She came from her origin family with this role of mother who experienced the maternity not as something to be desired but as something very difficult. *"It is difficult to raise a child"*. This mother came with the burden from her origin family and her procedural memory perfectly matched the mythology of the sacrificial mother. She did not know how to be a mother in any other way. She did not know any other mother role.

The mythology about maternity helped this very anxious mother to perform a maternal role. She chose a sacrificial role as she brought this legacy, of the sacrificial mother, in her couple relationship.

#### *Consequences of the myth on the conjugal couple*

The myth of sacrificial mother strengthens the relationship between mother and child in a pathological way; the woman disappears from the relationship with her partner. The partner might leave the conjugal relationship because he lost his role. Paradoxically he might have lost both roles, as father and as conjugal partner.

#### *Consequences of the myth on the child development in adult offspring*

In this particular case, the son felt guilty about his attempt to separate from his home and from his mother. He decided to remain in his origin town and renounced to pursue a profession that might have implied moving elsewhere.

At the moment, the son was 32 years old and had a profession he did not like. He would still live with his mother. He had a girlfriend but they did not live together, as he could not leave his mother. He came to psychotherapy with symptoms of moderate depression. He did not know what he wanted, what he

needed. His girlfriend pressured him to make a change, to move together, but he was not prepared. He would feel guilty if he decided to leave his mother – a case of pathological loyalty.

#### *Case study 2: Consequences of this myth on the conjugal couple.*

Being in the role of sacrificial mother could be an obstacle for the development of the conjugal couple. In many cases the mother isolates herself with the child in a separate room, for many years. I have the example of a mother who shared the same bedroom with her son until he was 12 years old. The relationship with her husband was affected. The space of the couple disappeared and the man developed a relationship with another woman. Sacrificial mother was a role priority for his wife.

The socialization of the child was affected too. He developed anxiety in relations with classmates and possible friends. He became more and more isolated. Separation anxiety in relation with his mother persisted even after having a personal bedroom. The loyalty for his mother manifested also in his adolescence, when he renounced to meet with his colleagues to go to a party because he did not want to leave his mother alone during weekend. He tried to respond to his mother's expectations. He assumed the role of a savior for his mother. There were consequences on the awareness of the needs, of the boundaries between the son and his mother.

A2. *"When you are a mother you can't have time for yourself anymore", "When I became a mother I vanished from my couple"*. This kind of family myth induces dysfunction in the conjugal couple and in the development of the child.

The space of the erotic couple constantly disappears and the child acts as the power factor in the family. Paradoxically, the child must bear responsibilities in the family, that are not adequate for his stage of development. This creates a dysfunctional pattern of behavior in the child-parents relationship.

*Case study 3:* Ilona complains that cannot spend time with her husband because of her son, who is 5 years old. In her erotic couple appears a dysfunctional pattern of communication. The husband initiates a program, she agrees with him but after renounces this initiative as her son has fever, or because she cannot leave him with her sister, or the son does not allow her to leave. This kind of interaction

between her and her husband affects the erotic relationship and gives the child great power in deciding the parents' time together. The son can develop as a tyrannical child who can ask everything from his parents or who can decide for their needs or program. There is a lack of rules and limits. He will develop difficulties in performing age adequate tasks and in the acquisition of social skills. The child will become more and more responsible for his parents.

#### *Consequences on the child development*

Ilona's child has difficulties in relating with his peers at kindergarten. He wants to be with his mother all the time. The teachers have difficulties in communicating with him. He cannot eat while in kindergarten without his mother. He cannot be autonomous because is dependent of his mother. Separation anxiety hinders him from being functional at kindergarten, as in other social places. In the same time, at home, he is the one who has the power to control his parents. The parental role of this child prevents him from growing up functionally in important developmental areas.

#### *Consequences on the conjugal couple dynamic*

Ilona and her husband have problems in functioning as a conjugal couple. When the child was born, she separated from her husband and shared the bedroom with her son.

A3. *"You cannot leave your child because you need to rest or you need to do something for yourself. There are no limits when you are a mother. You must do anything for your child"*.

The mythologies on being a mother hide both mother's and child's real needs. False expectations are created and the mother-child communication is affected. The roles become mythical and are performed in a scenario which preserves and enforces the same mother-child relationships.

#### *B. Mythology about the paternal role*

The mythology about parenting does not emphasize the role of the father in relationship with the child. The father is rather absent from this formula. This kind of prescribed role affects the father-child relationship. The child remains in the mother's arms and the separation could happen very late in his life. Pathology concerning the autonomy stands as evidence in these cases. The mother remains the only parental clue in the child life.

*Case study 4:* Maria grew-up in a family in which the father did not engage in many interactions with his children. Now she has her own family and the expectations for her husband as a father are almost inexistent. Her 7 years old son, Marius, wants to spend more time with his father but the father is not prepared to spend time with his son. Until recently, he didn't have any idea how to stay more with his son. The relationship dynamic shaped by this mythology does not permit other interactions.

The myth that *"Only the mother knows what her child needs"* generates an evident role, the incompetent father. The incompetent father was, first of all, an incompetent husband or conjugal partner. The confusion of roles frequently generates confusions in expectations and misunderstandings in communication.

#### *C. Mythology about caregiving relationship*

*"You have to care after the child in a way that prevents the dangers. There are many dangers for the child and he must be protected"*. This kind of mythology generates anxiety and hyper protection in the mother or other caregivers. We deal with the same projective identification and anxious attachment. The mother role is created having in the middle the scenarios in which danger is central.

The expectations concerning caregiving in the family and in the community create the hyper protective behavior. Even at ages when the child is able to act with autonomy and can take care of their basic needs – can eat by himself, the mythology of parenting in Romania intervenes to cancel the autonomy, because of parental anxiety and need for control. For example, Carmen cared after her 12 years old child whenever he used the toilet. The tendency to do things in others' place generates confusion on their needs.

*Case study 5:* Maria is the mother of 7 years old Remus. She came to therapy being concerned about the eating habits of his son. She said Remus did not want to eat as she expected him to. She grew up in a family that had many stories on how a child should be well nourished. She came in her nuclear family with these stories. She had a problem with her son's behavior, as she expected him to meet her expectations. After the evaluation of the feeding behavior of her son we found that Remus was eating in accordance with his needs, whenever he was hungry. His mother was unhappy about it because she thought that Remus should eat more. The stories and the myths about eating came to the surface. She could not renounce these

stories and that affected the relationship with her son and his feeding behavior.

There is a mythology of caregiving who emphasizes alimentary behavior. You are a good mother if you are able to feed your child a lot of food. The expectations of the mother were shaped by the mythology and were not in touch with the child's needs. She 'knew' that the child would be well if he accepted to eat all she gave him.

## **V. Conclusions**

We have chosen to emphasize, with priority, the implicit role of the sacrificial mother, as it is often mentioned as most frequent transmitted maternal role in the Romanian family. The myth of sacrificial mother bears many implications for the conjugal couple and for the healthy development of the child, as we have seen, shaping the relationships and setting expectations. Pathological loyalty is the effect. The mythology on being parents interferes with the mythology on being conjugal partners. The priority to be a mother and not a woman shapes the conjugal partners' relationship.

We have attempted to identify how the mythology of parenting has an effect in establishing parent-child dynamics. In the presented case studies we showed the way in which the mythology of parenting created a manner of being parents, conjugal partners, or child in a family. This kind of mythology generates implicit expectations, implicit roles, implicit needs, implicit emotions and implicit behavior in the child-parent relationship. So, child and parent could experience their relationship in an implicit mythological scenario, not being aware of their roles, needs, behavior. As mentioned, the myths about parental roles emerge and are elaborated in concordance with the narcissistic needs of the family members. These myths represent the implicit interdiction to be in any other way.

"Being a mother means being a sacrificial woman". A mother must sacrifice for the best interest of her child. The expectations could be explicit too, but that dissonance with the implicit expectations creates double bind messages and role confusions. In this role the mother lives maternity not as something wishful but as a very difficult experience. "It is difficult to raise a child". This way of experiencing maternity is very frequent in Romanian homes and has been encountered in the last four generations. This is not just an effect of the communist era, when it was really difficult to raise a child, but comes as a consequence of myths and stories about caring for a child which are mainstreamed in the family and community.

This myth of sacrificial mother affects the conjugal couple too, as we highlighted. The mythological scenario in which the priority is to be a mother and not a woman shapes the conjugal partners relationship. The mythology on being parents interferes with the mythology on being conjugal partners. The woman role would be dissipated in the mother role. Her expectations, as a woman, from her partner will become secondary. "*You can't leave your child because you need to rest or you need to do something for yourself. There are no limits when you are a mother. You must do everything for your child*".

Pathological loyalty results from the mythology of mother sacrifice. Many children who are raised in families with this mythology feel to a great extent responsible for their parents. They are invested with a parental role by their parents. It is very difficult for them to bear this role because the expectations from their parents are very confusing. The communication is, many times, paradoxical. "*I expect from you to be my parent but, in the same time, I always remember you that you are my child*". The insecure attachment style, either anxious or avoidant, features this kind of relationship.

The mythology about caregiving for children transmitted in the family and in the community has consequences on the parents-child relationship and on the child development. We saw that the child is experiencing developmental difficulties.

As effects there can be mentioned:

- the autonomy of the child in different stages of development with regard to satisfaction of the basic needs is affected;
- the mother or other caregiver has difficulties in setting the rituals of micturition, defecation or feeding to the child;
- associated pathology, enuresis, encopresis, bulimia, anorexia;
- risk for developing substance, digital or hazard games abuse.

Thus, the effect of mythological pressures in the family is materialized through dysfunctional communication, roles confusion and pathological relational dynamic. Loyalty of duty is one of consequences of living in mythology. Psychotherapeutic intervention is needed. We developed a way of intervention called demythologization, in which we aim to help parents and children leave their mythic roles while reconnecting with their real needs, emotions and roles in the family.



## Annex

The semi-structured questionnaire on parenting mythology:

1. How is maternity represented in your life?
2. How was maternity represented in your origin family?
3. What stories do you know about being a mother?
4. What was the discourse in your origin family about the mothers in the family?
5. What expectations are transmitted in your family about the mother role?
6. What expectations are transmitted in your community about the mother role?
7. How is paternity represented in your life?
8. How was paternity represented in your origin family?
9. What stories do you know about being/ acting as a father?
10. What was the discourse in your origin family about the fathers in the family?
11. What expectations were transmitted in your origin family about the father role?
12. What expectations are transmitted in your community about the father role?
13. How do the stories about being a mother shape the relationship with your child?
14. How do the stories about being a father shape the relationship in the parental couple?
15. What stories about childcare are transmitted in your family?
16. What stories about childcare are transmitted in your community?
17. How do the stories about child care shape your care behavior?

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