

CHAPTER 6

Narrative Identities in Children as Next of Kin. A Qualitative Interview Study

Kerstin Söderström Inland Norway University of Applied Sciences and Innlandet Hospital Trust

Abstract: This chapter explores how childhood and family experiences influence identity and self-understanding. Thirty-two interlocutors from 12 to 32 years old have shared their stories of living in, and growing up in, a troubled family in a conduct-of-everyday-life qualitative interview. All were children as next of kin to parents with substance use disorders and mental health problems. The stories were analysed in terms of self-defining memories and characteristic imagoes.

The interlocutors present themselves mainly as an agentic changemaker, as one being drawn into the parents' problems, or more or less deliberately distancing themselves from the parents' problems. At an early age the story is still open, undigested and in the making, as is the narrative identity. The mismatch between the unique family and the cultural norm is seen as a potential resource for self-understanding.

Keywords: narrative identity, family, children as next of kin, COPMI, parental mental health

Even in the absence of others, we learn about ourselves by imaginatively listening to our own thoughts through the ears of the other. At the beginning of life, we need a witness to become a self.

(Stern, 1989)

They always ask what is wrong with you and hardly ever ask what happened to you.

(Bentall, 2016)

Introduction

We tell stories about who we are, and we live by the stories that we tell (McAdams & Adler, 2010). Stories create order, meaning, and connection between events. The creation of narratives from lived experience is a central activity of identity formation. It involves the integration of what one has experienced in the past with both present and future selves (Marin & Shkreli, 2019). A well-integrated autobiographical narrative contributes to a sense of self-coherence (Stern, 1985). The story about who we are is rarely a precise recollection of facts, but rather an edited, interpreted, and co-created autobiography. The individual is not the exclusive creator and author. From the very beginning of life, parents and significant others inscribe their understanding onto what will become the child's autobiographical memory narrative, with surrounding cultural rules and values intertwined.

This chapter is about the development of identity and self-understanding. Based on stories from adolescents and young adults about growing up in families with parental substance addiction, mental illness, and child protection concerns, I will explore how these circumstances leave traces in the offsprings' stories about themselves, their narrative identity.

Children as next of kin

Children of parents with mental health or substance use problems are referred to in the literature as COPMI (Children of Parents with Mental Illness) or young carers, with the emphasis on role reversal through taking care of their own parents and performing adult chores. They are also named *children as next of kin* with an additional focus on legal rights, vulnerability, and support needs. In Norwegian legislation (Helsedirektoratet, 2010)

children as next of kin were first defined as those with parents suffering from serious mental or somatic illness or addiction, or those who had experienced the sudden death of a parent. Later, the definition was expanded to include being the sibling of a chronically ill child, and having an incarcerated parent. In this chapter, I write about children growing up with parental illness and/or substance addiction.

Children as next of kin used to be an invisible group. In the last two decades these children have received increased attention in research, social and clinical work (Gladstone et al., 2011). In many countries, including Norway, which is the context of this study, children as next of kin are given legal status and rights (Helsedirektoratet, 2010; Everts et al., 2022).

Three literature reviews have summarised research on children as next of kin. Gladstone et al. (2011) found that children who were considered actively involved in their parents' lives valued this involvement. However,

some children chose to 'opt out' of their relationships with their parent to act more independently. This strategy to 'preserve a sense of self' was posited as putting children at risk for behavioural problems associated with flawed 'attachment' to their parent. (p. 1136)

In Dam and Hall's (2016) meta-analysis, the overarching theme 'navigating in an unpredictable daily life', illustrated how children manage the family condition, develop an inner compass, and find their way of being and behaving on good and bad days. As part of the navigation, children often cover up and conceal what they fear to be outside the norm, and learn what can be told and what cannot. This leads to invisibility, and the children's needs often go under the 'radar' of teachers, child protection services (CPS), and other potential help (Dam & Hall, 2016).

Yamamoto and Keogh's (2018) review categorises four dimensions of research findings relating to: a) children's understanding of parental mental illness; b) children's relationship with parents; c) coping strategies; and d) the social connections of children, describing the importance of friends and other trusted adults, but also an increased risk of isolation and stigma.

In general, the reviewed literature confirms the extra burdens, needs, and developmental risks associated with being a child as next of kin. Williams (2021) identifies a lack of adequate empirical knowledge about the child's point of view, which represents a weakness in the knowledge base. There has been little research examining how individuals make sense of

trauma, and how it relates to identity development (Marin & Shkreli, 2019). Many of the reviewed studies did not disclose an explicit theory or conceptual framework to support their design and analysis procedures, making it difficult to judge how assumptions about mental health and illness, and about children, influenced the research findings (Gladstone et al., 2011).

The present project is part of the COPMI research tradition, with an emphasis on clarifying and exploring theoretical concepts and assumptions. It addresses the weak parts of the evidence base, as it aims to shed light on COPMI's identity development and meaning-making from their own perspectives. This is expected to contribute to improved understanding of the significance of family and parents for children's identity development and well-being.

A narrative theoretical perspective

Cultural psychology and the concept of narrative identity form the theoretical background. In this context, *narrative* refers to a basic cognitive, linguistic form and activity, through which individuals seek to organise and create meaning (Mishler, 1986). In cultural psychology, narratives are considered to be a conceptual tool to understand how cognition, feelings, action/agency, and perception work together, and integrate human experience in the form of storylines (Harré & Moghaddan, 2012). Of particular importance are those narratives that form our lives and self-understanding, those that integrate time, place, relationships, thought, feelings, body experiences, and actions (Harre & Moghaddam, 2012). Describing one's childhood is describing the time and context, especially the family, of growing up. It is a fusion of personal, parents', and others' interpretations of what happened, moving between inner experience and outside events.

Narrative identity can be described as an internalised story you create about yourself. It is a person's storied understanding of self, as situated across the reconstructed past and the imagined future (McAdams & McLean, 2013). McAdams and Adler (2010) see identity as a story, a myth that integrates talents, needs, beliefs, values, goals, important memories, and important roles. 'Self-narratives act to shape and guide future behaviour, as people act in ways that agree with the stories or myths they have created about themselves' (McAdams, 1985; Maruna, 2001). A well-integrated identity provides the individual with a sense of coherence over time and across situations, of being meaningfully situated in the social

context and ecology of the adult world (p. 38). Conscious reflection on the self and the formation of identity emerge with the cognitive, self-reflective capacities in adolescence (Habermas & Bluck, 2000). A flexible narrative process characterised by the generation of specific imagistic memories (memory specificity), and a process of linking recollected experiences to the conceptual structures of the self (meaning-making), is proposed to be a key to psychological health and well-being (Singer & Conway, 2011).

Importantly, the immediate experience can differ largely from what is said and told. 'If the lived past and the narrated past are very discrepant ... story making can establish and perpetuate distortions of reality' and cause harm to well-being and a distorted or false self (Stern, 1990, p. 136). Some experiences, especially those involving shame, embarrassment, fear, and threat may never be shared, or put into words, assumedly leaving them in the shadows of memory, fragmented, unclear, and poorly inscribed into the self-narrative.

Myths are created not only about oneself, but also about what family and parents are. Bruner (1990) describes dominant myths as *canonical cultural narratives*. These are broadly agreed upon normative truths and moral obligations in the form of narratives about the way things are or should be (Bruner, 1990). These cultural narratives are transformed into meaning-making and everyday practices. More than anything else, Bruner argues, family practices are formed by, and mirror, common cultural values and ideas. When family life is in step with cultural narratives, no storytelling or explanations are needed. Family and everyday life happen without thinking about them. However, deviations from the expected create the need to explain. 'The function of the story is to find an intentional state that mitigates or at least makes comprehensible a deviation from the canonical cultural pattern' (Bruner, 1990, p. 50). Growing up in families with severe psychosocial burdens deviates from the norm, and hence triggers the need to seek explanations and pull things together into a comprehensible story.

Childhood adversity and identity formation

Childhood adversity can disrupt the normative identity process, since it complicates identity work by 'challenging core beliefs and assumptions about the self, family, and the world' (Janoff-Bulman & Frantz, 1997). Especially traumatic events force individuals to confront and engage in meaning-making efforts. The social, interpretative, meaning-making

efforts are, over time, woven into how one situates oneself in the world and the social hierarchy, how one tends to see relationships, what can be said and done, and so forth. Beyond conscious, cognitive meaning-making, we are influenced by: routines and common events; the general social atmosphere at home; how feeling states were induced and dealt with; smells, sounds, and movements that together constitute the complex landscape of childhood. Novelist Hoem (2013) wrote, 'Childhood is not a time; it is a landscape'.

Studies of narrative identity generally look for *self-defining memories* or key autobiographical scenes, vivid and often emotionally charged episodes from the past. Of great interest is how the self-*imago* is represented within these scenes (McArthur & McLean, 2013). An imago refers to an idealised personification of the self with certain traits, roles or capabilities, which serves as a main character in the story. Self-defining memories and imagoes are fundamental units of narrative identity (Singer et al., 2012).

The main aim of this chapter is to explore the significance of family in identity formation and self-narratives. The overarching research question is: How is narrative identity influenced by being next of kin to parents with mental health or addiction problems? Sub questions are:

1. What are key self-defining memories and characteristic imagoes in the narratives?
2. How do they deal with discord between cultural norms of parenting and family, and what happened in their own family?

Methodology

The present chapter is part of a larger research project on children as next of kin, with a qualitative design, and in-depth interviews as the main method. As research data, stories are treated as the personal and subjective account of events and experiences, not representations of objective reality.

Participants

The original dataset, collected between 2015–2017, included stories from 32 participants, 28 females and 4 males, from 12 to 32 years old. All were next of kin to parents with mental health and/or addiction problems. They were recruited through the treatment institution of their parent,

from NGOs working with children, user organisations, or self-recruitment after receiving information.

Interviews

The interviews were tailored to elicit autobiographical memory narratives about everyday family life (Jansen & Andenæs, 2019) with questions like: What was a normal day like? Can you walk me through it? Interviews lasted between 40 to 90 minutes and were conducted either in the researcher's office, another public service office, or the home of the interviewee. The interviews were *thematic life stories*, as they circled around the topic of growing up with parental substance addiction and mental illness (Koski-Jännes, 1998).

Analysis

Interview transcripts were reanalysed guided by the theory of narrative identity, cultural narratives, and the concepts of self-defining memories and imagoes. A deductive content analysis (Kyngäs & Kaakinen, 2019) was used to test the usefulness of these key concepts to gain insight into how family influence narrative identity. A deductive content analysis is considered useful when the researcher wishes to reexplore existing data with new categories, concepts, models, or hypotheses (Marshall & Rossman 1995). First, each interview was read to get the overall storyline, and the characteristics of the teller. Second, the transcripts were analysed in a deductive approach guided by the above theory and concepts into a structured matrix using a Miro board text analysis template (<https://miro.com>).

Ethical reflections

The topic of the interviews was sensitive, personal, and could reactivate negative feelings and reactions. Measures were taken to provide professional support for participants if needed, for example, access to counselling or mental health services. Most of the informants expressed a motivation to contribute to the research, hoping it could make things easier for others in a similar situation. The project was approved by the regional ethics committee ensuring informed decision to participate, written approval from parents when participant was under 18, and full freedom to withdraw from participation with no need to explain why. To ensure anonymity,

identifying features are deleted and names changed in the results presentation. The number after the name is the age when interviewed.

Findings

The results are presented in a storied format – in line with the narrative approach of the project. First, I share some findings that were remarkable across the interviews. Then, I present various types of narrative content and imagoes, and discuss how these can be linked to self-defining memories and the significance of parents and wider family.

Identities in the making

The interview transcripts from the youngest informants, between twelve and sixteen, reveal identities in the making. They are still in the landscape of childhood, with little distance to what they have experienced as self-defining memories. For example, Bjørn-14 talked about the influence of his father's drug problem and how he just disappeared for a long time, and how Bjørn believed he was either dead or had left him forever. Talking about it seemed to trigger emotions – he became tearful and found it hard to talk. Past is still present and undigested. What happened had hardly been spoken about. The interview dialogue indicates that his meaning-making is still in process. A short excerpt:

Did you get the information that you needed?

No, almost everything.

What is your advice to adults in a similar situation?

Explain everything – most of the time.

Do you want to tell your dad how you were feeling?

No, I think he knows how I was doing. I don't know.

Similar, somewhat floating, indecisive, even internally contradictory narrations were found in other transcripts as well. Stine-15 described her violent father: 'He was absolutely not the mean one. I mean, he wasn't ..., he is not a ..., he should not be seen as the big, bad wolf, – even if he was'. She also said that 'We kids were always first priority', without noticing, at least not

reflecting on the fact that most of the content of her story is about falling outside the caring attention and priority of the parents.

In early adolescence one has just started to reason about self and life in abstract terms (Erikson, 1968). The self has barely emerged as an entity for abstract speculation that can be explored from a psychological distance. Although the coming into being is most evident in the youngest age group, those in late adolescence and early adulthood are also actively working on getting a grasp of what happened, how they were influenced, who they are, and want to become.

Sofie-24 remembered as a young child, ‘The only thing I have heard is that ..., mainly in a humorous way, that I was a hothead when I was little.’ In her teenage years she recalls feeling ‘terribly lonely, very insecure with low self-esteem.’ Yet, she was perceived as mature and independent, and through the intervention of the child protection services (CPS) in her mid-teens, she got her own apartment and lived alone. ‘That independence ... why was I so independent, and how could I present myself totally different from how I felt inside?’ she reflected. ‘I was rather clever at putting on a face.’ As a young adult, she successfully filed a legal compensation complaint against the CPS for not intervening to protect her earlier. At the time of the interview, she was studying to be a social worker, actively collecting, and putting pieces of her childhood together to create a coherent self-narrative to live by.

Vague and missing memories

Like many of the other participants from all age groups, Bjørn-15’s feelings, questions, and experiences were rarely spoken of by the adults close to him. When, in young adulthood, Sofie-25 wanted to understand more of her childhood, she discovered that she remembered very little. Memory is vague or lacking. Sofie-25 said:

What I have talked about today is just a tiny, tiny little picture, right? There was so much more than this that I don’t remember. I cannot remember ... any routines like that, and I remember very little of my feelings, and I can’t remember any routines.

Then she corrects herself and thinks that it could be that she remembers, ‘but I think it will take quite some effort for me to get access to ... to it’.

The ordinary, what was frequently occurring in the family slipped the attention of narrative working through and coding into memory. Just as

Bruner argues, that when things are in-step with cultural norms, they become invisible, taken for granted. In a similar vein, what is established as normal within a family is not necessarily noticed or talked about. In Sofie's words: 'You may not notice the unusual things, right, because it is so usual to you. It is ... – it is your life.'

The invisible child

Connected to the previous topic of missing memories is the character or imago of the invisible child. In many cases, the child often fell outside the caregiver's attention. Mental health and addiction problems either occupied the mind of the parent, distorted it, or caused stress that spilled over onto the children. In addition, several of the childhood recollections are of actual absences, of unpredictability, and of intrafamilial conflict that left children's needs unattended. Hence, the intersubjective community, the experience of coming into being through a relatively stable awareness, and reflection of one's physical and inner states in the presence of the caregiver, what in Stern's theory of self-development is key to the narrative self, was often lacking or of poor quality.

Loneliness – that is the word for my entire childhood. No rules, nobody who checked my homework, no hours to be home by. There was nobody who really noticed me. I just was. I just existed. But I wasn't there. I detached from everything to get through the day ... (Susanne-28)

Sofie-25 too felt lonely and invisible. Puzzled by the fact that she could feel some positive excitement when her father was aggressive to the point that they had to seek refuge at the neighbours', she reflects, 'Now, in hindsight, I believe that that feeling of excitement was related to getting some sort of attention. That something happened that made me visible in one way or another.'

Invisibility also came from spoken and unspoken rules of not telling, and children's deliberate strategies to cover and hide the familiar problems. 'How on earth could the teachers know that I was suffering at home? I never showed anything to them. Really, I am not the kind of kid who sits in the classroom and weeps,' Stine-15 said.

Although many of the narratives had this feeling of being invisible within the family, they were not necessarily invisible to the outside world. Sofie felt painfully visible through the flaws of her family, the parents'

behaviour, the house, the clothes. She described a deep feeling of embarrassment, shame, and of being different. Others told how they were seen as problem kids at school and in the neighborhood:

Yes, I was a problem kid with poor behaviour. But there is always a reason. Even if I couldn't express in words (what I had inside) I showed it with my behaviour, with all I owned and had. Even if you are deaf and dumb (stum), you show it. One just has to know what to look for. (Susanne-28)

Sofie, Stine, and Susanne exemplify what many of the other informants said. Their problems were not noticed, at least not acted upon by other adults. Even if others knew, they did not react.

Scapegoats, black sheep, and shit kids

'I sat there (expelled from class) screaming inside in silence,' Susanne said. However, feeling invisible and unheard could very well go together with the imago of a troublemaker, a shit kid. Gøril-18 felt that she was labelled as the problem and the black sheep of the family 'because I was always the one who had to go to treatment. It was like she [mother] dragged me to the mental health service to be assessed for this and that diagnosis'.

Many of the young informants, including Susanne, were diagnosed and treated for a mental illness, depression, anxiety, social withdrawal, conduct disorder, or ADHD. However, it was obvious to her, and to most after hearing her childhood story, that the problems were in her caregiving environment. She carried and exposed the burden of conflict, abuse, and failing child protection. Several express feeling stigmatised and worried about being mad. Gøril was puzzled, 'So I am the one who needs treatment'. She *hated* her mum for taking her to the psychiatrist. 'She used it against me. We had that quarrel, and she went like "Go and take your pill," and I just said, "Go and take one yourself," and left. Because she was on medication too.'

Like Gøril, many of the participants resisted their negative labels, but their self-understanding was influenced.

Even I thought – I am crazy, abnormal. I am a problem kid. I asked my mum several times, 'Am I a problem kid since I am here (in treatment)?' And they went like – 'no, no, no'. And my mum went – 'Hah'.

This is a memory fraction with a detailed recollection of what was said, the facial expression and tone of voice. It appears like a very confusing answer to her very serious identity question. Some participants reported additional burdens from negative comments from peers, and being bullied at school. Gøril believed that the bullying was more damaging to her self-esteem than what happened at home.

Withdrawing into calm and safety

Anna-17's key autobiographical memories and scenes from her childhood are related to her parents' divorce and conflicts, her mother's mental illness, and how the family's poor financial situation restricted her childhood – and youth activities. She withdrew from social contacts and found a place to be in reading: '... so I kind of hid in my books. That was easier than relating to all kinds of other people'. She described how she always struggled to feel confident in social interactions. '... but all of us [siblings] became, yeah, kind of quiet and withdrawn people, I think ...'

Susanne withdrew into music:

I listened to music and wrote poetry all day long. The texts hit me. I didn't bother with the melody; it was the lyrics that mattered. I dreamt myself to another place. I wasn't in the room but in totally other places where I could feel that things were better. I was seen by the music. The lyrics spoke to me, to me personally. I could feel that this text, of course this is me. The lyrics said things that I wanted to express, but I had nobody to say it to.

Whereas Anna defined herself as withdrawn and socially anxious as a general strategy and trait, Susanne moved between being social and outgoing, a troublemaker, an explorer, and being silent and withdrawn. Those who dived into music, books, sports, and nature did get a pause from parental problems. However, the stories indicate that they got more. They found other realities, other people, but also other reflections of themselves. Those chosen activities supplemented care, and provided something to grow from. Sven-19 found snowboarding, and discovered that he had talent, a talent that, together with a valuable coach, provided him with a new platform for developing self-esteem and identity.

Shameful

Sofie clearly remembered her deep embarrassment from her primary school graduation day. Her mum had disappeared, her elder sibling refused

to accompany her, and, reluctantly, her father came along. At the ceremony, she observed him lying about why the mother wasn't there.

I remember that it was totally ... to hear him lie, it was totally strange. I was so embarrassed, so shameful and embarrassed. He didn't ..., I mean, all the other parents had on nice clothes, suits, and pretty dresses, and they were so proud, you know. But he, he didn't dress up, of course.

She remembers how she felt 'really worthless ... in relation to the other kids and the other families. I went, and ... no, it was horrible, a terrible experience'.

The recollection is filled with emotions, details, observations, and self-defining elements. She is in the role of the inferior and shameful, an imago of the outsider and underdog. Yet, she manages to attribute the embarrassment to her parents, and how they were family compared to the others. Shame stems from being associated with her parents, not primarily from feelings stemming from herself.

Susanne also felt the burden of the family. In a small society, the family name was associated with problems and stigma. All her siblings eventually changed their surnames, but Susanne referred to wise words from her mum: 'A name can't shame anyone – only your own actions'. Instead she actively sought to associate with her more respected relatives. She aimed to 'clean' and change the family name by being decent and doing good. A fighting spirit and survival strategy was induced by the repeated saying of her big mother-sister: 'You have to raise yourself up. Regardless of what happens, if you are beaten to the ground, you raise yourself up and continue walking'.

Caregiver, protector, and in-between

Stine-15 took the role of child-superhero and guard to protect her mum and little brother from their violent father.

I was absent from school, eh ... because I didn't sleep because I had to watch so they didn't quarrel and things like that. Not like I was awake and scared to death, but just keeping awake. And I struggled to eat ... and things like that. Then, I had a period where I called mum up to fifteen times a day. To ask what she was doing, where she was, who she was with ... just to watch in case she and dad had been fighting or something had happened.

Stine was on guard 24/7. She tried her best to calm the conflicts.

So I just stand up in front of dad, ... and I am not the kind of person who cries, ... only when I get angry, then I cry. So, I stand there and say, 'Can you please leave? This is not nice, you are scaring your kids.'

Stine was literally standing in-between, in the heat of the parental fight.

Sandra-14 too was drawn into the parental and family problems in ways that made her feel older than her age.

I have heard things I shouldn't hear, known things I shouldn't have known. I have witnessed so many things in that house. And then, one of them (parents) talked to me, next the other explained, so I was kind of in-between.

Karl assumed the role of housekeeper and caregiver for his younger siblings, finding himself to be knowledgeable in things far beyond his peers: the daily special offers at the grocery store; what kind of detergent to use; and caring for a baby.

These are a few of many stories of role reversal, taking adult responsibility in a range of situations that would have been challenging for most adults, similar to what is well documented in the COPMI literature.

Older than their age

Like Sandra, several of the informants reported feeling older than their age. Anna-17: 'I was thinking more like an adult, at least more mature than my age. That made it difficult to relate to other children'. Sandra-14 also avoided talking with her friends because 'they are too immature to understand what I've been through'. Besides, 'they might pass it on to their parents and start rumors and everything. I have to shield my family'. They were also perceived by others to be older than their age. Gøril-18: 'I remember that she [the therapist] looked in her papers and said, I forget that you are only 12. You seem so much older. Okay, I thought, what does that mean?'

At 15 Sofie moved out to live alone, a decision made by the CPS. Based on what she herself said, and her mother's and uncle's opinions:

They believed that I was self-reliant and mature enough to live alone. Hmm, I shouldn't have done that, I almost said – in hindsight. This independence – why was I so independent, and what was the reason why I could appear so very different from how I felt inside?

This is a clear example of a discrepancy between what is said and how it is experienced, which according to Stern (1990) can distort self-development.

Agency and confrontation

These childhood narratives contained many instances of active involvement and interference to change the family situation. Rebecca's big sister confronted their mum with an ultimatum, 'Either you divorce our father or I will move out and bring my siblings with me. If you decide to stay, you will never see us again.' At that time my informant was one year old, her sister in her early teens.

Siv-30 described herself as a child trapped in the family. She too tried to convince her mother to divorce her alcoholic father, but did not succeed like Rebecca's sister did. After a while she refused to assist her mother in searching for hidden vodka bottles and filling them with water. Like in most of the stories, Siv distanced herself, she observed and reflected on her parents from a young age and laid plans for herself, while being immersed in, dependent on, and associated with the family. Besides dreaming of living alone with her mum, Siv dreamed about a holiday in Spain, like several of her peers had.

My parents said we couldn't afford it. So, I had a notebook and calculated the amount and costs for the alcohol he drank and showed how we could easily afford a family trip abroad for that amount. Eventually, we went to Spain. It was a nightmare; he was drunk all the time.

Sofie-28 recalls a similar idea of confronting the parent with their problematic behaviour.

One interesting event, one that I have thought about many times, was once when my dad was really drunk, talking nonsense and was totally hopeless. And ... eh, so I decided that now I will record it to let him hear tomorrow how he behaves when drunk. So I did, but I never played it for him, I didn't dare. Next morning it was as if it had never happened.

The importance of family in narrative identity

We are family! All but one of her siblings are half or step siblings, but Gøril-18 emphasises the point that a sister is a sister, a brother is a brother. Like many of the informants, Gøril described a complex family situation.

I have a rather big family, so to say. Lots of siblings, and mum, ... lots of grandparents, and she just got married, so I have a new stepdad, and that's fine, I almost said. ... all these mum's men; they have been my daddies. But the one, Jon, he is, has been more of a father than any of the others. So, I count him as more than a stepfather. He is part of the family, very much so.

Linda-17 expressed, 'Family is the closest and smallest society, so to say, that we live in. When something is not working there, you're very much affected'.

Families in flux

Parental problems often meant family instability. Many of the informants had to adapt to changing family constellations, mobility, and alternative caretakers. Karl- 26 illustrates the full range of instability in the other narratives, in his case crammed into one painful childhood narrative. Karl was born to a young mother with alcoholism. He was often left alone. From age two, he occasionally stayed with a foster family arranged by the CPS. At five Karl was moved to his grandparents. After three years the mother wanted him back into her growing family. Then 8-year-old Karl, for a year or so, lived with his pregnant mum, single and still drinking, and a toddler sibling. He became housekeeper and carer for his younger siblings -until he could not cope anymore and called the CPS. Karl was again moved to his grandparents. After a short stopover, he was placed with his father, whom he had never lived with and, according to Karl's story, everybody knew was unfit for parenting. After a while, a stepmother entered into Karl's paternal family unit. This took the boy on another move to a new place and school. Before reaching his teens, Karl had attended four different schools, and lived with five different primary caregivers and three half siblings.

Some of the informants with the most severe breaches in culturally expected, caring, stable family situations, expressed a loss of faith in a caring environment. 'Care makes me sick,' said Karl. Also, in other terms he tends to turn to the opposite, 'If someone says I am a warm person, I automatically think: No, I am cold,' as if the contradiction in what he needed and expected to get, and what he actually got, moved into his self as a template for understanding self and others.

Grandparents

In many of the stories, grandparents represented stability, and served some of their basic needs, including good food. Anna-17 described her grandmother as one who provided warmth, an orderly home, and a relationship to rest and feel good within.

At grandma's it was ..., things were kind of in order there. She always served me good food, and yeh ... and she kind of had time to listen, and if I needed anything she just understood. So, I had a very good support-player in her.

It is, it, ah, was grandma, or, how can I say it, yeah, it was she who brought me up. But my mum is the one closest to me.

Stine-15's self-narrative and the story about her family are closely intertwined. Her grandmother is the thread that never breaks.

The chosen family

Some found their nurturing relationship outside the biological family. Karl's recollection of his stepmother is the sunny part of his story. It illustrates how these children as next of kin actively choose who they see as significant caregivers. Karl claims to have no space in his life for his father, and never thinks of his mother as a mother. 'She is just a person I have to relate to. We have a common history, one that is still ongoing. My stepmother is my mother.'

Several informants choose a step parent over their biological parent, like Ken-21.

There was another man, a really kind and nice guy. I used to spend the weekends with him. I believed he was my dad. Then, when I was around 16, he met a woman from abroad – and he disappeared. This really made me sad.

Gøril favoured her ex-stepdad over her biological father. 'I have thought of him [her father] as a person who ... contributed to making me, in biological terms.'

Susanne chose her big sister to be her real mother figure, even into adulthood. When deciding a professional career, she was influenced by her therapist.

I've been thinking a lot about her since I started to think about what to become. I want to be a Sigrun to those who haven't yet had a Sigrun in their life. I have difficulties in trusting people, but when I first find trust, that trust is blind. She was a person like that. Her care for me – she saw me. It felt real, she honestly loved me, was honestly concerned about me. She didn't pretend.

With Sigrun she was able to talk about what happened in the family, the foster family, and at school for the first time. She was open and listened to her childhood experiences and became a co-author to her narrative, possibly also what Stern (1985) describes as an evoked companion. That means a representation of a relationship, a witness, an inner voice like – What would Sigrun have said or done? – similar to how parents' patterns of behaviour are internalised.

Gøril at 18, although embracing her big, complex family, speaks about her relatively fresh, Christian friends as the ones who restored self-confidence, acknowledge her, and feel like family.

Foster families

The children manoeuvred to manage and protect themselves and other family members from adversity. In some cases, problems surmounted their ability to cope, and child protection intervened and offered alternative caregivers. Leaving the family of origin proved to present new challenges. In a meeting with the CPS, Jens was asked what kind of family he would like to stay with, with children of their own, having a pet, etc.? Jens got the sense of being on the verge of a new life.

Suddenly, I could choose what kind of family I wanted. It's a strong memory. I returned home, went to the bathroom, and while I was peeing, I asked myself: Is this the last time I am peeing in this toilet? Will I be leaving soon? Is everything over now? What if I never see my brothers again? Never see my mother again – because I had ruined our relationship – that felt heavy.

The most mundane of all routines and places, going to the toilet, evoked questions that resonated through his whole existence. He felt nervous at the thought of leaving all things known and familiar. Who would Jens be without his family? Who would he become with a new family? Like in many stories, the bliss of the foster family was short-lived. Karl keeps in touch with the foster family from when he was two, 'but I was, – and still

am always a guest'. For some, foster care inflicted further damage. At first, Susanne felt in heaven and thought 'this is how it should be'. From seven to twelve, 'I was there all the time – it proved to be the worst thing that happened'. She was showered with loving attention and presents, which eventually turned into sexual abuse.

Discussion

Family is not always a haven of safety and nurturing care. Still, it is the base from where children grow and belong, a source of identity and understanding of self, others, and the world. They are immersed in the family, involved in its dynamics, and at the mercy of the adult world. They rarely disclose parents' problems, but rather defend and protect them. Some carry much of the burden of the parents' problems, sometimes as a scapegoat, like Gøril. Other times they are victims of the parents' aggression and misbehaviour, like Karl, or as the cause and object of the parents' conflicts, like Anna. The close relations within the family are impactful, even when the offspring distances him/herself, determined to be and behave differently from their own parents.

Navigating and coping with dissonance

The self-narratives vary between being an agentic changemaker, a child immersed and drawn into the parents' problems, or a withdrawn and distanced person. Yet, it is striking that most of the stories have elements of all three categories. Withdrawal and distancing could be passive, like retreating to your room or into your music or books. Or it could be very active and agentic, like fighting for the right to move out, or secretly applying to a school far away to escape. Obviously, more passive withdrawal and immersion were more prominent at a young age, whereas a more active distancing takes place at a later age.

Furthermore, while choosing books, music, or science were partly a way to get peace and maintain a sense of self, as Gladstone et al, (2011) described, it was also a rewarding choice of interest. They found alternative and supplementary niches to be and grow in, other sources of meaning and self-understanding. Children grow their identity from a large variety of sources.

Exposed to the problems of the adult world, these young people are forced to find ways to deal with it. Although, at a young age they take for granted the normality of their own family life and their parents' behaviour, they soon observe that the norms and behaviour in other families are different. The 'taken for granted' and 'awareness of differences' exist side by side.

Whereas much COPI research points out the extra burden of deviation from the cultural norm, I argue that the dominant cultural narrative also serves as a corrective, an alternative script for how things could be or should be. Although closed in various degrees, family life does not exist in a vacuum. Family, neighbourhood, school, and society are concurrent contexts for the child's development (Harkness & Super, 2021). Even if being different can be painful, the larger social expectations of care and family life are also resources for COPI. Cultural norms and the way other families work serve as a background, through which they can compare and evaluate the reasonableness of their own home context. Surrounding values, norms, and behaviour function as correctives to one's own experienced family normality, and hence prevent the child's identity from being absorbed by their own family. Becoming a self also involves identifying the not-me parts.

Role reversal and becoming young carers are well described in COPI literature, but there is less attention to how this influences identity. Through this project, I notice that the informants feel older than their age, and are often treated as older and more knowledgeable than they are. Their development into self-reliance and independence, and their ability to take care of others, are pushed and forced by the situation. They demonstrate post-adversarial growth and adaptational skills alongside their burdens and vulnerabilities. This comes with a risk of mismatch and contradictions in their self-understanding, like it is demonstrated in Sofie's reflection, 'How could I appear so independent when I felt so little and alone?'

Still searching for meaning

As young adults the meaning-making activity, and the construction of one's own narrative identity continues. Identity development through adolescence into adulthood appears like a challenging puzzle with lost, vague, and deformed pieces. The most challenging childhood experiences can thus remain unshared, unheard, unspoken. This is in order to protect oneself, to avoid exposing the parents unfavourably, and in fear of CPS intervention and removal from the family. Children downplay and conceal problems,

also because they feel ashamed for not being a normal family, for falling outside of what is expected and considered to be socially acceptable norms (Dam & Hall, 2018). In this study of narrative identity and childhood adversity, silence around the problematic aspects of family life leaves children on their own to make sense and build those parts of their childhood into their own self-narrative. Experiences that are unheard of are difficult to integrate into one's narrative identity, partly because they fall outside the imageable and unspoken (McAdams, 2010), which can explain the many dark holes in the narratives.

Sofie constructs herself as lonely and vulnerable, but also with agency and power, adaptable and caring, social while feeling lonely. Her multiple traits may challenge a sense of coherence. Her narrative was characterised by missing and unclear memories. Emotions were especially difficult to recall. She was actively searching for the pieces of her self-narrative. As a young adult she has moved into the role of helper, and demonstrates self-efficacy and communion. She is turning her childhood experiences into insights that can help others. Her narrative is complex, containing many themes, imagoes looking from various perspectives. It is flexible and alive, she is working to understand while she is telling, as if the discovery of her own past is ongoing. This research confirms the idea that the multiple paradoxes of identity are stretched between agency and subordination, unity and multiplicity, continuity and instability (Ragatt, 2019).

It is important to remember that the stories told in this project were influenced by the context and thematic focus of the interviews – on being next of kin to a troubled parent. This was an open autobiographical approach, like McAdams' life story interview (2015) might have produced. Nevertheless, these results and interpretations do not necessarily reveal the full picture of the narrative identity process of the participants.

Author biography

Kerstin Söderström is a clinical child psychologist at Innlandet Hospital Trust, Mental Health Department, and she is associate professor at Inland University of Applied Sciences, Department of Social Work and Guidance. She has published academic articles and book chapters, in addition to a range of publications, presentations, and arts-based disseminations for a wider audience, mainly on the topics of early childhood, parental substance addiction and child development, children as next-to-kin, and the

interlinks between mental health and human rights. Her work experience is in public mental health services for children and families, as private practitioner, and as researcher and lecturer.

References

- Bentall, R. (2016, February 26). Mental illness is a result of misery, yet still we stigmatise it. *The Guardian*. Retrieved from <http://www.theguardian.com/commentisfree/2016/feb/26/mental-illness-misery-childhood-traumas>, published 26 February.
- Bruner, J. S. (1990). *Acts of meaning*. Harvard University Press.
- Dam, K., & Hall, E. O. C. (2016). Navigating in an unpredictable daily life: A metasynthesis on children's experiences living with a parent with severe mental illness. *Scandinavian Journal of Caring Sciences*, 30(3), 442–457. <https://doi.org/10.1111/scs.12285>
- Elo, S., & Kyngäs, H. (2008). The qualitative content analysis process. *Journal of Advanced Nursing*, 62, 107–115. <https://doi-org.ezproxy.inn.no/10.1111/j.1365-2648.2007.04569.x>
- Erikson, E. (1968). *Identity: Youth and crisis*. Norton.
- Everts, S., van Amelsvoort, T., & Leijdesdorff, S. (2022). Mandatory check for COPMI in adult mental healthcare services in the Netherlands: A quantitative and qualitative evaluation. *Front Psychiatry*, 13, 807251–807251. <https://doi.org/10.3389/fpsy.2022.807251>
- Gladstone, B. M., Boydell, K. M., Seeman, M. V., & McKeever, P. D. (2011). Children's experiences of parental mental illness: A literature review. Experiences of COPMI: literature review. *Early Intervention in Psychiatry*, 5(4), 271–289. <https://doi.org/10.1111/j.1751-7893.2011.00287.x>
- Habermas, T., & Bluck, S. (2000). Getting a life: The emergence of the life story in adolescence. *Psychological Bulletin*, 126, 748–769. <https://doi.org/10.1037/0033-2909.126.5.748>
- Harkness, S., & Super, C. H. (2021). Why understanding culture is essential for supporting children and families. *Applied Developmental Science*, 25(1), 14–25. <https://doi.org/10.1080/10888691.2020.1789354>
- Harre, R., & Moghaddam, F. M. (2012). *Psychology for the third millennium: Integrating cultural and neuroscience perspectives*. SAGE Publications.
- Heyman, A. (2016). *Young and young adult carers' transitions to adulthood: The impacts of intergenerational mutuality, unequal reciprocity and intergenerational inequality* [Doctoral dissertation, University of Sunderland].
- Hoem, E. (2013). *Heimlandet: Barndom* [Homeland: Childhood]. Oktober.
- Jansen, A., & Andenæs, A. (2019). *Hverdagsliv, barndom og oppvekst. Teoretiske posisjoner og metodiske grep* [Everyday life, childhood, and growing up. Theoretical positions and methodological strategies]. Universitetsforlaget.
- Koski-Jännes, A. (1998). Turning point in addiction careers: Five case studies. *Journal of Substance Misuse*, 3, 226–233. <https://doi.org/10.3109/14659899809053506>
- Kyngäs, H., & Kaakinen, P. (2020). Deductive content analysis. In H. Kyngäs, K. Mikkonen & M. Kääriäinen (Eds.), *The application of content analysis in nursing science research*. https://doi.org/10.1007/978-3-030-30199-6_3
- Marin, K. A., & Shkreli, A. (2019). An examination of trauma narratives: Narrative rumination, self-reflection, and identity in young adulthood. *Journal of Adolescence*, 76(1), 139–151. <https://doi.org/10.1016/j.adolescence.2019.08.007>
- McAdams, D. P. (2015). Life story. In S. K. Whitbourne (Ed.), *The encyclopedia of adulthood and aging*. <https://doi.org/10.1002/9781118521373.wbeaal41>
- McAdams, D. P., & Adler, J. M. (2010). Autobiographical memory and the construction of a narrative identity: Theory, research, and clinical implication. In J. E. Maddux & J. Tangney (Eds.), *Social psychological foundations of clinical psychology* (pp. 36–50). Guilford Press.

- McAdams, D. P., & McLean, K. C. (2013). Narrative identity. *Current Directions in Psychological Science*, 22(3), 233–238. <https://doi.org/10.1177/0963721413475622>
- McAdams, D. P., Trzesniewski, K., Lilgendahl, J. P., Benet-Martínez, V., & Robins, R. W. (2021). Self and identity in personality psychology. *Personality Science*, 2, 1–20. <https://doi.org/10.5964/ps.6035>
- McLean, K. C. (2008). The emergence of narrative identity. *Social and Personality Psychology Compass*, 2, 1685–1702.
- Mishler, E. G. (1986). The analysis of interview-narratives. In T. R. Sarbin (Ed.), *Narrative psychology: The storied nature of human conduct* (pp. 233–255). Praeger Publishers/Greenwood Publishing Group.
- Ragatt, P. T. F. (2019). The self positioned in time and space: Dialogical paradigms. *Theory & Psychology*, 20(3), 451–460. <https://doi.org/10.1177/0959354310364206>
- Stern, D. N. (1985). *The interpersonal world of the infant: A view from psychoanalysis and developmental psychology*. Basic Books.
- Stern, D. N. (1990). *Diary of a baby*. Basic books.
- Williams, V. E. (2021). *Living with a parent with mental illness: Descriptions of caring, concealing and coping* [Doctoral dissertation, Grand Canyon University].
- Yamamoto, R., & Keogh, B. (2018). Children's experiences of living with a parent with mental illness: A systematic review of qualitative studies using thematic analysis. *Journal of Psychiatric Mental Health Nursing*, 25, 131–141. <https://doi.org/10.1111/jpm.12415>