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# Understanding Adolescent Identity Construction in the Context of Living with a Parent with an Acquired Brain Injury

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Understanding Adolescent Identity Construction in the Context of  
Living with a Parent with an Acquired Brain Injury

by

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A THESIS

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## Abstract

Adolescent identity construction is complex. Despite decades of research revealing various understandings of identity, it is unclear how disruptive phenomena influence identity construction, particularly during adolescence. Therefore, when adult participants from my master's thesis talked about becoming different people as a result of their adolescent experiences of living with a parent with an acquired brain injury (ABI), I wondered how the occurrence of such a phenomenon could change identities and self. This wondering inspired my doctoral research studies and led me to ask the following research question: *How might we understand adolescent identity construction in the context of living with a parent with an ABI?*

To respond to this question, I used hermeneutic inquiry guided by Gadamer's (1960/2004) philosophical hermeneutics. I recruited volunteers from the Calgary area through emails to ABI and counselling service providers, posters, news media interviews, social media advertisements, and snowball sampling. I obtained nine adult participants (three males, six females) aged 20 to 38 years, who were adolescents (i.e., 10 to 19 years of age) at the time their parent incurred an ABI. Participants engaged in a one- to two-hour audio-recorded interview that was then transcribed verbatim. Analysis and interpretation of the data included reviewing interview transcripts, listening to the recordings, journaling thoughts and questions inspired by the interviews, discussing preliminary thoughts with supervisory committee members, and consulting the literature to create an understanding of the topic.

Through this process, I created six interpretations that revealed how we might understand adolescent identity construction in the context of living with a parent with an ABI. These interpretations included: (a) using normal as a guiding concept in identity construction, (b) remaking home environments to construct identities, (c) adopting and rejecting roles resulting

from parental ABI, (d) experiencing trust and betrayal in social relationships, (e) being unrecognized and/or forgotten, and (f) silencing in identity construction. Following a presentation of these interpretations, I discuss my synthesized understanding and the implications of the findings for theory, practice, and research.

*Keywords:* adolescence, identity construction, narrative identity, acquired brain injury, hermeneutics, social construction

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## **Dedication**

I dedicate this research to my number one fan and life-partner, Jeff Cruz, whose patience, cheerleading, love, support, and humour inspired me daily. He believed in me when I doubted myself.

I also dedicate this to my little baby boy, Finn, who reminded me of the big picture.

Finally, I would also like to dedicate this research to my mother. Her strength, love, courage, and un-ending belief in me fostered a resilience and perseverance that helped me achieve my dreams. She brings new meaning to “making a come-back” which also served as an inspiration.

## Table of Contents

<b>CHAPTER ONE: WHEN EVERYTHING CHANGED.....</b>	<b>1</b>
The Address of a Topic: My Own Story.....	2
The Topic Being Addressed .....	4
<b>CHAPTER TWO: LITERATURE REVIEW.....</b>	<b>9</b>
Identity and a Culture of Amazement: Relevant Self and Identity Theories .....	10
Psychosocial Development and Identity .....	12
Extensions and Critiques of the Psychosocial Theory of Development.....	13
Social Identity: The Influence of Self-Categorization.....	15
The Life Story Model and a Shift of Ideological Directions .....	17
A Social Constructionist View of Identity .....	20
Small stories in big stories: Narrative identity.....	21
Researcher Position on Self and Identity.....	25
Structuring Adolescence .....	26
Narrative Identity and Adolescence .....	29
Important Influences on Adolescent Identity Construction.....	32
The Role of Parents, Family, and Attachment .....	32
The Role of Peers .....	34
The Role of Trauma and Crisis in Adolescence .....	35
Acquired Brain Injury in the Family.....	37
Parents with ABI and their Children: Problem and Purpose .....	39
Summary .....	41
<b>CHAPTER THREE: THE METHOD IN HERMENEUTIC INQUIRY .....</b>	<b>44</b>
Hermeneutic Philosophy: A Philosophical Practice .....	45
Friedrich Schleiermacher: A Theologian in Search for Contextualized Truth.....	46
Wilhelm Dilthey: A Protocol to Understand .....	47
Edmund Husserl: Introduction to the Life-World .....	48
Martin Heidegger: The Hermeneutic Turn.....	50
Hans-Georg Gadamer: The Hermeneutic Turn Expanded .....	53
Truth, <i>bildung</i> , and the ontological shift of hermeneutics .....	54
History and prejudice.....	55
Language, conversation, and dialogue.....	58
Fusion of horizons .....	59
Play .....	59
Method, the hermeneutic circle, topic of address, and research .....	61
A Hermeneutic Practice: Application to a Research Design .....	63
Role and Influences of My Insider View: A Note about Prejudice.....	66
Recruitment and Participants.....	68
Participant demographics.....	71
Interviews and Analysis: The Dialogue Begins .....	73
The analysis and development of interpretations .....	75
The Rigor of Hermeneutic Inquiry .....	77
Summary and Concluding Remarks about Hermeneutic Inquiry .....	81

A Change in Focus.....	82
<b>CHAPTER FOUR: WHAT IS “NORMAL” ANYWAYS? .....</b>	<b>83</b>
<b>CHAPTER FIVE: DISRUPTED HOME, DISRUPTED SELF .....</b>	<b>92</b>
<b>CHAPTER SIX: NOW AND THEN: A CONTINUATION OF ROLES AS PART OF IDENTITY .....</b>	<b>103</b>
Roles: Child-like and Adult-like .....	106
When Roles Collide.....	109
Past Role: Current Identity .....	114
A Revisitation of Role and Identity Sparked by Milestones .....	119
<b>CHAPTER SEVEN: “STAND BY ME” (KING, LIEBER, &amp; STOLLER, 1964): TRUST AND BETRAYAL.....</b>	<b>124</b>
<b>CHAPTER EIGHT: THE UNRECOGNIZED AND FORGOTTEN: A LOSS OF IDENTITIES.....</b>	<b>138</b>
<b>CHAPTER NINE: SILENCE: THE UNACKNOWLEDGED CONTRIBUTOR TO IDENTITY.....</b>	<b>149</b>
Truth in Silences .....	151
The Forms of Silence .....	154
Silence of Disenfranchised Experience .....	158
Silence, Disenfranchisement, and Identities .....	160
The Power of Voice and a Reconciled Self .....	164
<b>CHAPTER 10: INTEGRATED UNDERSTANDINGS AND IMPLICATIONS ....</b>	<b>167</b>
“I am who I am because of my parent’s brain injury” (Freeman, 2012, p.167): A Synthesis.....	167
A Reminder of Interpretations: The Parts of a Whole.....	168
The Whole and the Parts: Identity Construction in the Context of Parental ABI ..	171
Construction of self and identity in response to parental ABI.....	171
Interconnectedness of social and cognitive influences on identity.....	175
Safety, time, and space in identity construction .....	178
The lasting influence of parental ABI on identity construction.....	181
Implications of the Whole and its Parts: From Ideas to Applications .....	182
Implications for Theory .....	182
Implications for Practice.....	185
Implications for Research.....	190
Strengths and limitations .....	190
Future directions for research .....	193
Lingering Thoughts: Acknowledging a “Disaster Waiting to Happen” .....	194
<b>REFERENCES.....</b>	<b>197</b>
<b>APPENDIX A: RECRUITMENT EMAILS .....</b>	<b>226</b>
Agency Recruitment Email Script .....	226



Email to Potential Participants .....	227
<b>APPENDIX B: INFORMATION SHEET.....</b>	<b>228</b>
<b>APPENDIX C: RESEARCH POSTER .....</b>	<b>229</b>
<b>APPENDIX D: SOCIAL MEDIA RECRUITMENT SCRIPT .....</b>	<b>231</b>
<b>APPENDIX E: PARTICIPANT CONSENT FORM.....</b>	<b>232</b>
<b>APPENDIX F: PARTICIPANT ORAL CONSENT SCRIPT .....</b>	<b>236</b>
<b>APPENDIX G: SAMPLE INTERVIEW QUESTIONS.....</b>	<b>237</b>
Demographic information .....	237
Interview Questions.....	237

## **List of Tables**

Table 1: Participant Age Demographics .....	72
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## CHAPTER ONE: WHEN EVERYTHING CHANGED

When I engage in conversation with peers, colleagues, family, and friends, the topics of discussion eventually turn towards my education to date. Specifically, I answer questions about what I am doing, what I am working on, and how close I am to completing all my education. Inevitably, the conversation turns towards the topic of my dissertation research, particularly, why I chose to pursue the topic that I did. I explain that I did not choose the topic, but instead, it chose me. In fact, I think the topic plagued me relentlessly until I was ready to acknowledge the questions it asked of me. Such an explanation tends to inspire questioning looks as they ask, “How is it possible that a topic can relentlessly pursue a researcher?”

In hermeneutic philosophy, the guiding philosophy for this research, this relentless pursuit is called the address of the topic (Gadamer, 1960/2004). The address of the topic is when we are “hailed by subject matter, or better perhaps, a *subject that matters* so that, when we are addressed, we are obligated to respond, not in ‘any old fashion,’ but to respond to the best of our abilities, to do the right thing, in the right way, as Gadamer would say” (Moules, Field, McCaffrey, & Laing, 2014, p. 2). Although there can be a suddenness of the topic of address, there can also be a slow nagging of a topic that later comes into our awareness and begs us to understand it (Moules et al., 2014). The topic of address tends to interrupt the way that we typically see the world, and it forces us to consider questions related to the topic, thus granting entry into the field of study for further exploration. Therefore, it is only fitting that I introduce my research work with how the topic addressed me, as that is when the research began. I first explain how I came to needing to understand adolescent identity in the context of living with a parent with an ABI. Then, I discuss the creation of the research question to introduce the topic.

### **The Address of a Topic: My Own Story**

When I was 15 years old, my life changed considerably, which is what created the context for the address of the topic upon starting my doctoral studies. My mother incurred an ABI resulting from a severe motor vehicle accident (MVA) and health-related complications during her recovery. I have many poignant memories of that time ranging from visiting my mother in the hospital and discovering her loss of language and memory to witnessing her struggle in returning to work and everyday activities. All the while, we were not aware that her experiences and struggles were connected to an ABI. In fact, we were initially told that my mother was faking her symptoms, further adding to the confusion of this challenging time in my life. After years of advocating for her, my siblings and I had a medical professional re-assess her. She concluded that my mother had evidence of a traumatic brain injury (TBI) as well as several ischemic strokes resulting from her complicated recovery. I witnessed my mother struggle with sadness and anger while she also tried to continue to be the parent, the professional, and the person she used to be. I witnessed my siblings engage in power struggles in the interest of what was best for my mother. I noticed significant and subtle changes in my mother, my siblings, and myself, yet never fully understood what had happened to us as a family until at least 10 years after the initial injury occurred.

Though I could spend much more time and energy describing the full details of my own experience, that is not the focus of this dissertation as “it is not that the writing is not by me, but it is not about me” (Moules, 2002, p. 12, citing Smith, 1991). Instead, I aim to provide the context from which this topic came to light. It is important to note that simply having the experience was not enough for me to pursue the topic. In fact, I had dismissed the experience entirely and swore not to allow it to infiltrate my research and career goals during my

undergraduate degree. However, I was fortunate to encounter a research team exploring the experience of persons with TBI in an expressive arts therapy context. I was initially drawn by the possibility of learning more about expressive arts therapy. However, as I heard stories similar to that of my mother through the research work of my undergraduate degree, I started to recognize that something was happening to families when a loved one incurs an ABI and that my family was not the only one affected by such an injury. The topic began to make itself known to me, though I continued to resist the questions that came to mind due to the strong belief that research made from a subjective position weakened the quality of research.

Upon my entry into the Master of Science in counselling psychology program at the University of Calgary, I struggled to shake the topic. Over several conversations with my research supervisor, I gradually shared with her my own personal experience which informed my interest in doing research with people with an ABI and their family members. She proposed that I consider investigating the experience of adolescents living with a parent with an ABI because it was a question that nagged her as well. She normalized researcher subjectivity over several meetings while I continued to explore the literature to determine what academic writings existed regarding the topic. Upon the realization that little research explored the topic, I knew I could not turn away from the topic as I was left with many questions, but dominated by one: What happens to children whose parents acquire a brain injury?

After exploring the experience of adolescents whose parents had incurred an ABI while also coming to own my personal experiences with the same phenomenon, I knew that I had a foundation for further exploration of the topic. Each participant in my master's thesis research shared how they suffered in the dark with their experiences, attempting to understand something in their adolescence which no one seemed to understand. I was surprised when all the

participants described feeling like different people resulting from their experiences with their parent, leading me to wonder how the experience of living with a parent with an ABI informed one's identity. It was unclear if this phenomenon was a function of experiences of a parental ABI in the family, the developmental time period, both, or neither. Regardless, the narrative remained the same – we are who we are because of such experiences.

Despite these questions and the recognition of the need for exploring the topic, I was resistant to pursuing the area of identity as part of my doctoral studies because of how extensive and large the topic could become. However, this topic continued to occupy my thoughts. I continued to think about the potential implications. By understanding adolescent identity construction during a potentially disruptive life event, counselling practitioners might have a better understanding of how to intervene to minimize adverse reactions and effects. Furthermore, such research could also inform future programming to ease the suffering of future generations. After several conversations with my research supervisor, I yielded to the topic due to a need to understand what was happening in the unique context of parental ABI and an appreciation of how this research topic could benefit adolescents and adults whose parents incurred an ABI. I needed to explore the questions this topic presented to me as it had more potential than I had previously thought. This was how the topic relentlessly pursued me as a researcher – a long-lasting nagging of questions that needed to be addressed.

### **The Topic Being Addressed**

As I had multiple questions contributing to the nagging need to understand the topic, I also recognized that I needed a guiding question to help me navigate the topic in all future research activities. With many conversations, reflective journal writings, and literature searches, I created a question that addressed the most pressing inquiries I had when acknowledging the

topic. Specifically, I wondered: *How might we understand adolescent identity construction in the context of living with a parent with an ABI?* There are several components to this question that are explained in more depth in Chapter Two, the literature review; however, to introduce the topic effectively, it is helpful to briefly consider these components to ensure the reader understands the question as I have come to understand it.

First, I turn to consider adolescent identity construction. Adolescent identity has been discussed in popular culture and research literature as a developmental process in which adolescents explore and establish a consistent, stable identity to present to the world as adults (Erikson, 1968; Gleason, 1983; Kroger, 2007; Kroger & Marcia, 2011). However, more recently, identities have been thought to result from an ongoing constructive process in which individuals construct multiple identities to contribute to constructing a self (Bamberg, 2004). Such a perspective has arisen from a social constructionist paradigm that suggested that our realities are co-created through the interactions with our world, particularly in conversation. Therefore, as I took a social constructionist perspective because it most closely aligned with my worldview both as a researcher and a practitioner, I chose to use the wording *adolescent identity construction* to reflect this perspective and guide the exploration of identity and self. Through much deliberation, I concluded that identity and self was the best way to alert the reader to the problem – that adolescents are changed somehow by their lived experiences. Therefore, I sought to explore identity and self to clarify how this change occurred with the intention of further informing adolescent development and recognizing that experiences can interrupt identity constructive processes.

Second, I also consider the unique context of living with a parent with an ABI. An ABI is a phenomenon commonly described by how it is caused, rather than its effects. Specifically, it

can be defined as an injury to the head occurring after birth due to trauma (i.e., being hit by or against objects), stroke, medical illness (e.g., meningitis, brain tumor), substance use/abuse, and/or a lack of oxygen to the brain (Brain Injury Association of Canada [BIAC], 2014). ABI tends to result in changes in an individual's biological, cognitive, psychological, social, behavioural, and physical functioning that combine to appear as though the individual has had a personality change (Yeates, Gracey, & McGrath, 2008). With such a variety of causes and effects of ABI, it is no surprise that defining the injury can be a challenge when no two injuries are alike and thus, each person has different experiences navigating an ABI in terms of making sense of the injury's influence in his/her life (Gelech & Desjardins, 2011). Though it is well documented that families and family members are significantly influenced by a spouse, child, or sibling incurring an ABI, very little is known of how individuals and the family adjust when the individual with an ABI is a parent (Butera-Prinzi & Perlesz, 2004; Charles, Butera-Prinzi, & Perlesz, 2007; Coppock, Ferguson, Green, & Winter, 2018; Freeman, 2012; Kieffer-Kristensen & Johansen, 2013). Therefore, this particular context was integral to the research question as the intention was to start and contribute to a conversation regarding parental ABI.

Finally, I turn my attention to the third component of the research question which speaks to the method I chose to address it: hermeneutic inquiry. I worded my research question with *how might we understand* because I had a thirst to understand from an interpretive lens. I had already owned my personal experience and knew that there were some advantages (and disadvantages) to being an insider to the experience. Therefore, I chose to pursue hermeneutic inquiry: a qualitative research method based on Gadamer's (1960/2004) philosophical hermeneutics that focuses on interpreting the world to create an understanding of it (Moules, McCaffrey, Field, & Laing, 2015). As further discussed in Chapter Three, the purpose of



hermeneutic inquiry is not only to recognize that something is happening that inspires curiosity, but also to develop an understanding of that thing that is happening (Moules et al., 2015). Therefore, the wording of questions using hermeneutic inquiry reflects this purpose (i.e., to understand something) and reveals the study as a hermeneutic study.

Taken together, these primary components of the research question addressed the topic that had been pursuing me throughout my educational years. Through the witnessing of my and others' experiences, I was able to address the topic by constructing a question to guide my doctoral research work with the hope of creating answers. By using hermeneutic inquiry, my intention was not to provide *the* answer but rather *an* answer of many (Moules et al., 2015). Therefore, in the remainder of this dissertation, I aim to demonstrate what, why, and how I came to these answers through the process of a rigorous method and research design all grounded in the research question at hand.

The structure of this dissertation is designed to provide the reader with an opportunity to come to understand the topic as I have. Therefore, in Chapter Two, the literature review, I discuss the pertinent and relevant literature that informs the topic including a brief consideration historical contributions to the topic. In Chapter Three, I discuss the methodology in more detail, particularly regarding the philosophical underpinnings guiding hermeneutic inquiry, in addition to sharing the research method and design I chose to address the research question. Specifically, I collected additional data by conducting interviews with nine adult participants who were able and willing to reflect on and share their experiences of identity construction that further illuminated the topic. In Chapters Four, Five, Six, Seven, Eight, and Nine, I share the interpretations created from the participant data based on what seemed to address the topic in ways that had been previously unknown, hidden, or ignored. Finally, in Chapter Ten, I conclude

by discussing implications for theory, practice, and research to pull together all the pieces that contribute to my response to the research question. It is my hope that through this dissertation structure, the reader comes to appreciate the complexity and richness of understanding the topic to continue a dialogue, as this is only the start of a conversation, not the end of it.

## CHAPTER TWO: LITERATURE REVIEW

Adolescence is a developmental period in which individuals make a transition from childhood to adulthood. Though to transform from being a child to being an adult is understood differently around the world, North Americans conceive of adolescence as the time to explore who one is, who one can be, and who one wants to be. Furthermore, North Americans tend to believe that to mature is to also stake claim to a coherent sense of self with a solid collection of identities (Erikson, 1959; Hendry & Kloep, 2012). Although it has been widely debated about how self and identity develop as well as how identity is “done,” most researchers have agreed that something happens during adolescence that cognitively, psychologically, and socially encourages individuals to actively define themselves (Hendry & Kloep, 2012; Santrock, 2012). However, within the last two decades, conceptualizing self and identity as fluid and adaptable has gained momentum in identity research (Bamberg, 2011; Holstein & Gubrium, 2000). In other words, identity can be conceptualized in many ways, and thus, it no longer must be defined as a fixed and stable construct that one must have, but rather, something that can evolve and be transformed with experiences that demand new meanings to be made.

To better understand self and identity in the context of adolescence coupled with the experience of living with a parent who incurred an ABI, I aim to explore the concepts of self and identity by discussing the historical development of the constructs and the relevant theories that contributed to our current understandings of identity. The relevance of the theories and research literature included was determined by revisiting the various components of the research question. Though the theories discussed are not an exhaustive list, they are prominent and well-used theories in psychology that offer a foundation for my current understandings of identity. Next, I explore the research literature that illuminates identity construction within the context of

adolescence and the transition to adulthood, particularly the main contributors to the constructive process. Finally, I explore the literature highlighting the challenges of adolescent children of parents with an ABI as well as the lack of literature that led me to asking the following research question: *How might we understand adolescent identity construction in the context of living with a parent with an acquired brain injury?*

### **Identity and a Culture of Amazement: Relevant Self and Identity Theories**

Self and identity are constructs that are particularly slippery in the research literature as they are often used interchangeably. It is clear that self and identity were intended to be different concepts, yet as they continued to be used in popular culture, they lost their subtle distinction in meaning (Gleason, 1983; Serpe & Stryker, 2011).

The term self was traditionally used to define a person's own sense of holistic personhood. In exploring the history of defining self, many contemporary researchers have referred to symbolic-interactionism in sociology initiated by George Herbert Mead (Gleason, 1983; Holstein & Gubrium, 2000; Stryker & Burke, 2000). In this framework, the self was believed to be one's overarching understanding of who one is in relation to society, created through interactions and jointly created meanings. Similarly, the social constructionist perspective refers to the "self" as the continually evolving product of multiple social interactions that result in co-creating meaning about who we are, who we hope to be, and who we try to be in the world (Bamberg, 2004a; Lock & Strong, 2010). Symbolic-interactionists, as well as social constructionists, suggested that the self is the result of multiple performances of roles or identities that frequently overlap within each social interaction (Bamberg, de Fina, & Schriffin, 2011; Stryker, 2008), giving individuals a sense of sameness and difference across multiple social interactions (Bamberg, 2009). Over time, such repeated interactions and ongoing

constructions of identity eventually lead to a coherent and consistent sense of personhood with slight variations across situations (McAdams & McLean, 2013). Basically, the self refers to how one recognizes their personhood across all social performances in various situations and roles.

Identity, however, was a term that was confused with self upon its introduction. For Gleason (1983), identity was a relatively new term popularized in the 1950s that follows from earlier terms such as character, personality, the self, or ego. According to the Merriam-Webster (2017) online dictionary, there are three relevant definitions of identity: (a) sameness of essential or generic character in different instances, (b) the distinguishing character or personality of an person, and (c) the relation established by psychological identification. Also, the root word of identity is the Latin word *idem*, meaning “the same” (The Online Etymology Dictionary, 2017). Based on these definitions, identity also seems to refer to one’s personhood over time. However, the term, identity, was not widely used until the 1950s. It was not a social priority in North America until after World War II when Americans and Canadians attempted to redefine their respective cultures (Cushman, 1995; Gleason, 1983). In fact, the pre-war term of identity was used to describe identification and categorization (e.g., identifying with a cultural group and/or labelling; Gleason, 1983). Through the growing pains of self-exploration, North Americans sought pre-war definitions of culture, yet discovered that both the United States and Canada had changed because of the war. As such, there was a surge of interest in who we are in comparison to who we were as individuals, communities, and society, resulting in considerable theory development to better understand identity and guide identity research.

The confusion of self and identity seemed to arise after the term, identity, was used by Erik Erikson (1959) whose work was then used to satisfy society’s thirst for definition. To clarify the cultural and academic definitions of self and identity, I now turn to the key players in

developing the field that eventually led to the evolution of these terms and current understandings. After discussing the key contributors to post-war identity research and the evolution of the field of identity, I then reveal my own positioning regarding the usage of both self and identity.

### **Psychosocial Development and Identity**

Erikson was a psychoanalytic theorist who was interested in the identity development of children, adolescents, and young adults throughout his career (Zrzavy, 1995). Erikson (1968) believed that identity was shaped, adapted, and updated by resolving various life stage crises. Each crisis forced individuals to revisit and reflect on their conceptualization of self and identity based on how they approached and resolved the crisis. Of Erikson's eight psychosocial stages and crises informing a person's "ego identity" across his/her lifespan, Erikson proposed that adolescence was the most important in the identity formation process (Schwartz, 2013).

For Erikson (1968), the adolescent's primary task is to explore and establish an identity. He believed that actively exploring identities will lead to successfully synthesizing an identity, while not exploring or limiting one's identity can lead to identity confusion. In essence, identity confusion resulted from either prematurely establishing an identity that did not fit or neglecting to take part in the identity formation task. Erikson (1959, 1968) indicated that individuals who had a confused identity seemed to be lost and would face various identity crises resulting from lived experiences, which may force them to reconsider, clarify, and synthesize their identity. It is important to note, however, that Erikson believed such tasks were not completed in isolation.

Erikson (1968) included a social component to his identity theory: an elaborate feedback loop in which perceptions of others and perceptions of one's self through others' eyes shape identity development over time. This ongoing social interaction process was believed to inform

identity and the psychosocial crises; ego identity is strengthened, enhanced, adapted, and molded to fit with new lessons learned from experience and interaction in the social world. Despite this social component, Erikson believed that a person's identity is a fixed construct that is regularly updated with minor changes after individually making sense of experiences. In this sense, identity is an inner and cognitive process with minor influences from the social world. In addition, Erikson proposed that identity remained generally the same over time, suggesting that he subscribed to essentialist ideas of identity (i.e., that identity was considered to be created with minimal external influences and was one's personal property; Cerulo, 1997; Mischler, 2004).

Erikson's (1959, 1968) theory of psychosocial development and identity initiated a psychological curiosity about identity as a modern construct of personhood, despite the theory's limitations. One such limitation is that Erikson neglected to consider the influences of culture, gender, or other diversity factors that may alter how identity is understood in both its relevance and importance for diverse groups (Cote & Levine, 1987; Josselson, 1982). In addition, the psychosocial developmental theory may not be suitable for today's adolescents who continue to explore their identities into their emerging adulthood (i.e., 18-25 years of age) in response to feelings of being between adolescence and adulthood (Arnett, 2006; Schwartz, Zamboanga, Luyckx, Meca, & Ritchie, 2013). In light of these more modern-day critiques of Erikson's theory, research continued to better understand identity development by advancing, expanding, and extending Erikson's ideas about identity.

### **Extensions and Critiques of the Psychosocial Theory of Development**

After Erikson's initial proposal, Marcia (1966) adapted Erikson's conceptualization of identity to validate and operationalize it, resulting in the identity status model. Marcia provided the term, identity status, to allude to four identity categories measured from two axes:

exploration and commitment of identity. Identity achievement represented commitment to identity after a period of exploration, while identity moratorium represented ongoing exploration without commitment. In addition, identity diffusion referred to an absence of commitment and exploration while identity foreclosure represented committing to an identity without exploration. Using these concepts, Marcia was able to define unique characteristics of each of the four identity statuses to further clarify the importance of identity in overall life satisfaction and psychological well-being (Schwartz et al., 2013), yet he did not outline how such identities were “done” beyond the commitment and exploration dimensions. As such, in Marcia’s attempt to quantify and measure Erikson’s identity statuses, the interactional process between the person and their social environment was lost, thus misrepresenting Erikson’s original conceptualization of identity (Coté & Levine, 1988). Furthermore, Marcia’s identity status model was also criticized for oversimplifying the identity development process by neglecting diversity factors and the potential fluidity of identity over one’s lifespan (Schwartz et al., 2013).

Berzonsky (1990) revised and adapted the identity status theory with identity styles to address the process of forming an identity rather than achieving an identity. Identity styles, then, were preferred ways of handling daily situations that later inform identity (Schwartz, 2001). However, these identity styles were strikingly similar to Lazarus and Folkman’s ways of coping as outlined by the stress appraisal model (see Lazarus & Folkman, 1984), making it difficult to discern the difference between coping and identity styles. Therefore, identity was represented by coping preferences and styles in how it was performed in daily life. Although Berzonsky (1992) admitted to this influence and justified his use of these coping styles in his identity processing theory, he also neglected to consider the role of social interaction with others in his theory.



Erikson (1959, 1968), Marcia (1966), and Berzonsky (1990) each offered a theoretical approach focusing on one element that seemed to be missing from the other. However, each was based in essentialist understandings of identity that have since been found to be limiting in counselling practice because of their inflexibility to life experiences and change (Mischler, 2004; Nelson, 2001). Basically, from the essentialist perspective of identity, it was recommended that people should establish an identity. If they do not establish a stable identity, then individuals will experience problems living their everyday lives (Schwartz et al., 2013). However, some identity scholars (i.e., Cerulo, 1997; Josselsson, 2009; Schwartz, 2001) challenged essentialist views of identity by suggesting that identities needed to be conceptualized with more flexibility to explain how a person might change and develop over the lifespan.

Extending beyond Eriksonian and neo-Eriksonian approaches, other research (e.g., Josselsson, 2009; Mischler, 2004; Polkinghorne, 1991; Sampson, 1993; Tajfel, 1982) has contributed to the call for more flexible conceptions of identity that also consider social influences (e.g., social interaction, social feedback, etc.) as well as the influence of gender, culture, and other forms of diversity on one's positioning in the world. As such, psychology and sociology researchers decided to consider the role of group membership in creating a sense of self and identity.

### **Social Identity: The Influence of Self-Categorization**

Social identity is defined differently depending on one's school of thought. In psychology, social identity is described as the self-categorization of groups defined by the performance of roles associated with such groups (Tajfel, 1982). Furthermore, Tajfel (1982) believed social identity was separate from one's personal identity because personal identity is one's sense of self that remains consistent across multiple situations while social identities are

less consistent. Tajfel developed the social identity theory to understand the relationship between group membership and between-group conflict or discrimination. From this perspective, the emphasis is on cognitive-processes underlying social identity along with how group membership might influence one's behaviour in role performance in a variety of situations (Deaux, 2000).

Alternatively, in sociology, social identity is defined somewhat differently. In this case, social identity is the result of many interactions and co-constructions of one's personal performance in their roles (Deaux, 2000; Sets & Burke, 2000). Derived from the symbolic-interactionist school of thought, one's understanding of their roles and the associated behaviours is informed by social and cultural contexts as well as witnessing of how such roles are performed in society (Sets & Burke, 2000; Stryker, 2008). These roles are then practiced and performed in groups where individuals receive feedback regarding the effectiveness and appropriateness of such roles (Holstein & Gubrium, 2000; Stryker, 2008). Such feedback is incorporated into the person's subsequent performances to further support his/her commitment to that specific role and begin a process of self-categorization (Hacking, 1995). Therefore, behaviours become more pronounced to enact a particular role and one's personal understanding of self-categorization, which improve one's performance of these social identities (Hacking, 1995). With improved performance and personal engagement, the role becomes part of one's social identity: the identities one holds of oneself in the social realm of life. Social identity and personal identity are believed to intertwine (Deaux, 2000; Sets & Burke, 2000) rather than be separate, unlike the psychological understanding of social identity defined by Tajfel (1982). Social identity informs personal identity (or self) because one is constantly adapting social identities to better fit with the group to which one belongs, which then also influences parts of the personal identity.

Both definitions contribute to an understanding of social identity, though the term is typically credited to Tajfel (1982). By developing and acknowledging the existence of a social identity from both sociology and psychology, researchers attempted to address the deficit in identity theory regarding social influences and the external contribution of social and cultural groups to the self and identity (Deaux, 2000; Sets & Burke, 2000; Tajfel, 1982). However, social identity did not address the longitudinal effects of group membership despite serving its purpose in exploring intra-group conflict (Tajfel, 1982). Therefore, the construct of identity needed to evolve further to include not only social and cultural influences, but also influences of life experiences over one's life time. This resulted in a turn towards using narrative as a metaphor for self and identity. From a psychoanalytic perspective, Schaefer (1980) argued that stories about identity can be told and retold to demonstrate the psyche's inner workings and reveal ideas about the self, identity, and sociocultural influences over time. Influenced by psychoanalytic perspectives and Erikson's theory of psychosocial development, McAdams (1988) developed a theoretical approach that elaborated on narrative identity.

### **The Life Story Model and a Shift of Ideological Directions**

McAdams (1988) used a narrative metaphor to talk about creating meaning and self-understanding from lived experiences. The life-story model focused on the process and content of creating an identity over a lifetime based on life experiences, social interaction, and personal sense-making (McAdams, 1988). While significant life experiences and autobiographical memories are continuously incorporated into the life story, McAdams believed that identity, conceptualized as a life narrative, guided a person's behaviour, perception of self, and perception of others based on the kind of story he/she wanted to maintain or change (McAdams & Bowman, 2001; McAdams & McLean, 2013).

The life story is composed of content components (i.e., setting, characters, specific episodes contributing to the plot, and a generativity script or legacy), themes (i.e., power and intimacy motivations), and the narrative complexity of the story as it relates to the maturity of the person. The narrative's complexity and themes inform how a person understands and incorporates the content components into a life story (McAdams, 1988). McAdams and Bowman (2001) expanded the life story model to include redemption and contamination sequences to account for transitional experiences and ways individuals make sense of positive, negative, or unsettling experiences. Redemption sequences involve "movement in life storytelling from an emotionally negative or bad scene to an emotionally positive or good outcome" (McAdams & Bowman, 2001, p. 5). Redemption sequences enable a person to reconcile negative events and create a positive story to incorporate into a life story. Conversely, a contamination sequence occurs when an "emotionally positive or good experience is spoiled, ruined, sullied, or contaminated by an emotionally negative or bad outcome" (McAdams & Bowman, 2001, p. 5). Contamination sequences enable a person to reframe positive events into negative stories to incorporate into the life story. Redemption and contamination sequences are used to make sense of significant life experiences and our responses to those experience. As the life story is told, it can evolve with social influences to become helpful or unhelpful to the person's way of being in the world. However, social influences and interaction were not emphasized or considered to be significant parts of McAdams' narrative identity.

McAdams (1988) added flexibility and adaptability that was missing in previous Eriksonian theories, allowing individuals to make sense of their experiences in relation to their identities. However, the life story model remained somewhat restrictive in that identity was still

an essential possession that was mostly influenced by internal processes. In other words, one's identity was predominantly created from one's own cognitions.

Following this initial contribution of using a story as a metaphor for identity, other scholars started to consider external processes that also influenced identity because they believed that people, as social beings, were also influenced by social interactions and social discourses. Gergen (1998, 2000) suggested that individuals are susceptible to ongoing social influences that shape their identities, their storytelling, and their selves. In considering many sources bombarding people with social discourses about the type of person they should become, Gergen (2000) argued that identities are constantly adapting to ever-changing social influences, and therefore, the self is also responding to the social demands to accommodate the interaction of changing identities. Similarly, feminist identity theorists argued that women's process of constructing a self has been shadowed by a patriarchal perspective, suggesting that women's identities may be significantly influenced by their political positioning in society (Josselson, 2011; Miller & Mothner, 1971). This feminist critique encouraged researchers to recognize cultural, social, and political influences on self and identity construction, as such influences can frame and possibly limit our self and identity construction (Josselson, 1982; Miller & Mothner, 1971).

With four decades of essentialist ideas of self and identity at the forefront and many critiques of the limitations of such theories, identity researchers have turned towards other ways of understanding identity (Mischler, 2004; Polkinghorne, 1991, 2000). Increasingly, researchers have begun to explore the construct by using story as a metaphor for self and identity construction to accommodate sociocultural, historical, and individual influences that earlier research suggested was critical in future self and identity theory. Despite this critique, many

external influences (e.g., social norms, expectations, etc.) and relational dynamics continued to be ignored or de-emphasized. As such, social constructionists, influenced by social psychology and sociology (Gergen, 1985; Lock & Strong, 2010), considered the possibility that identity and self were constructed from an interaction of individual perspectives and social discourses as it is played out in social interaction to construct meaning in experiences.

### **A Social Constructionist View of Identity**

Social constructionism is a school of thought with many philosophical, research, and practical contributions emphasizing social interaction and conversational negotiations (Lock & Strong, 2010). Although Erikson (1968) and McAdams (1988) included limited social interaction components in their theories, social constructionists argue that meaningful self and identity construction cannot occur without social and life experiences (Holstein & Gubrium, 2000). Burr (2003) and Lock and Strong (2010) have outlined five tenets of social constructionism to explicate the foundation of this paradigm:

- Meaning and understanding are central to all human activities (Lock & Strong, 2010).  
Meaning is symbolically created and shared between people speaking the same language, contributing to our understanding of the topic, each other, and experience (Burr, 2003).
- All meaning and understanding begins and ends with social interaction (Lock & Strong, 2010).
- Creating meaning and understanding is specific to times and places (Lock & Strong, 2010). As meanings and understandings vary from situation to situation, a person is constantly refining and altering meanings of experiences and social encounters. Thus, knowledge and meaning are historically and culturally defined. Knowledge and meaning are not stable, but rather change with the context (Burr, 2003).

- Essentialism, the idea that there are stable characteristics that belong to people, is incongruent with social constructionism due to the stance that all meaning, understandings, and knowledge change with the context. Therefore, one's demonstration of self and personhood also changes with the changing meanings (Lock & Strong, 2010).
- It is important to adopt a critical perspective on topics with the intention of revealing socially constructed events that can be taken for granted in day-to-day living (Lock & Strong, 2010). As such, social constructionists may be called upon to reveal and alter operations of the social world and power inequities (Burr, 2003; Lock & Strong, 2010).

With these five tenets in mind, I discuss narrative identity from a social constructionist perspective that differs from McAdams' (1988) theory of narrative identity.

**Small stories in big stories: Narrative identity.** Stories, and the act of telling them, have been an important part of constructing our social world, reality, and selves throughout human history (Bamberg, 2004a; Bruner, 1991; Cushman, 1995; Holstein & Gubrium, 2000; White & Epston, 1990). In written, pictorial, and oral forms, storytelling was a primary medium to share experiences, social and cultural norms, and history (Bamberg, 2004a; Cushman, 1995). Bamberg (2004a) proposed that identity is navigated through the social interactional process of everyday life: shaping, sharing, and listening to stories to negotiate and construct their meanings through conversation and language. From a social constructionist perspective, language is the means by which we represent our identities and selves (de Fina, 2006). Bamberg (2004a, 2009, 2010a, 2011) studied the storied self for several decades developing a socially constructed view of identity and ways to analyze the navigation and negotiation of identities in social situations.

Bamberg's (2011) approach to narrative identity, in both theory and research, is based on six assumptions. First, all narratives are part of a specific social context, meaning that narratives

are socially negotiated and constructed within a social setting. Second, regardless of the media (e.g., pictorial or written), narratives are performed, meaning that intonation, body-language, and facial expressions are all important to understanding the narrative. Third, stories refer to a world of players, places, and events that have typically taken place in the past, suggesting that context is important for understanding stories. Fourth, the worlds constructed through narratives can be about the speaker, another person, or both, and each story has a plot with a culturally relevant structure. Fifth, all narratives are told for a reason, taking relevant past events and putting them into the present context and blending temporal lines. Sixth, stories force narrators to make identity claims demonstrating the person they want and hope to be. These six assumptions frame Bamberg's (2010a) approach to narrative identity using small and big stories.

Based on these assumptions, Bamberg (2004a, 2007, 2010a, 2011) described identity construction in terms of constantly navigating three identity dimensions to share small stories (i.e., stories of critical incidents that are deemed relevant for present meaning and conversation) and big stories (i.e., over-arching life narratives). Individuals navigate their identities within these dimensions across various situations as they attempt to define themselves from one situation to the next (Bamberg, 2004a, 2010b). This definition of self and identity is negotiated using language as a means to construct meaning and understanding of one's own positioning in the world. Small stories, positioned within each dimension, inform big stories, while big stories represent the self over time, situations, and experiences. Both small and big stories continually evolve and adapt based on the social encounter, the story that needs to be told, and the co-constructive process with listeners.

The first dimension, sometimes called diachronic identity navigation (Bamberg, 2011), refers to how individuals position themselves between remaining the same person and changing



across time in narratives. Fully integrated narratives are balanced in their position between change and constancy. However, small stories may demonstrate more change than constancy while big stories may demonstrate more constancy than change. As such, identities may be both constant and changing, yet neither constant nor changing (Bamberg, 2010b, 2011).

The second identity dimension refers to the idea that a person recognizes him/herself as the same as or different from others (Bamberg, 2011). Individuals tend to believe they are different from others in many ways, yet also identify with certain groups that offer a sense of belonging (Bamberg, 2010a; Holstein & Gubrium, 2000). Therefore, individuals may identify themselves as the same as and different from others simultaneously. However, they position themselves differently when confronted with different others. A person's positioning on this dimension is most relevant when he/she explores his/her values and beliefs to determine how he/she compare to others inside and outside of his/her communities. This dimension is most closely aligned with Tajfel's (1982) social identity as this concept is based on the multiple identities that individuals adopt and perform because of group membership. Bamberg added a continuum regarding the extent a person may identify with his/her social identities at any given point in time or situation. For example, I may identify as biracial (i.e., black and white), and there may be times I identify more as "black," "white," or "biracial," depending on the social situation and what positioning I am both socially expected to take up and feel is most suitable to the stories I want to tell.

Bamberg's (2011) third identity dimension, agency, refers to the extent to which individuals think they are in control of their lives. On one end of the continuum, people who construct themselves as "recipients" may present as passive actors in their stories with little or no control over their lives and circumstances. On the opposite end of the continuum, people who

construct themselves as “agentive self-constructors” (Bamberg, 2011, p. 106) may present as heroic, strong, and self-determined people with considerable control over their lives. A person positions him/herself on this continuum based on the needs of the stories he/she is constructing to represent understanding of identities and self.

Bamberg (2011), inspired by social positioning theory (Davies & Harré, 1990), emphasized that each dimension requires positioning to create small and big stories that are meaningful and representative of their perceived selves. Our positioning is revealed through discourse in conversations, and it can invite others to contribute to our changing identities in the social context (Drewery, 2005). Each position is chosen for countless reasons and tends to vary from situation to situation. However, each choice made for small stories also determines the tone of big stories over time (Bamberg, 2011). Together, big stories and small stories create a person’s socially crafted sense of personhood that is continuously evolving to accommodate the ongoing interaction between identity, self, and society (Bamberg, 2009, 2007, 2011; Drewery, 2005).

The majority of Bamberg’s (2007, 2011) work in identity has focused mostly on the construction and discourse of small stories, arguing that there has been too much emphasis on big stories. As such, there seemed to be fewer research and theoretical approaches coming from a social constructionist perspective that also considered the role of big stories in the construction of self and identity (Freeman, 2010). Instead, there is a call to combine big stories with small stories for a more complete exploration of narrative identity (Freeman, 2010). However, it does not appear that research work has been done to further this initiative, but rather, the focus has been on considering big story research and small story research as two separate, yet related, fields of study (Dunlop & Walker, 2013).

### **Researcher Position on Self and Identity**

After considering the vast field of identity theory and research, my understanding of self and identity as constructs has become clearer. Historically in psychology, identity tended to be a term used to mean one's overarching personhood, infused with essentialist ideas (Coté & Levine, 1988; Erikson, 1968; Stryker & Burke, 2000). Taking into account that various theories differ on the form, function, and development of self and identity, researchers seemed to agree that identity can shape our understandings and perceptions of ourselves and others in the world in the past, present, and future (Bamberg, 2004a, 2009, 2011; Erikson, 1958; McAdams, 1988; Stryker & Burke, 2000). In the last two to three decades, psychology researchers have acknowledged the distinction and relationship between self and identity (Mischler, 2004). Specifically, the psychology field has expanded to include the social constructionist perspective that self and identity not only guide our performance of roles in social interactions, but also are constructed in social interaction and conversation (Bamberg, 2009; Bamberg et al., 2011; Davies & Haré, 1990; de Fina, 2006).

As I take a social constructionist perspective within my practice of psychology, I have chosen to be consistent with my developing theoretical orientation and subscribe to social constructionist definitions of self and identity. Specifically, I use self to refer to one's own sense of personhood across multiple situations and interactions resulting from multiple performances of multiple identities. In addition, I use identity to refer to one's performances of roles and positioning in conversations (i.e., "mother", "daughter", "child", etc.) revealing interpretations of identities as well as the self.

Furthermore, in reflecting upon the theories presented while considering my hermeneutic approach to this study, I chose to be guided by some of Bamberg's (2010, 2011) concepts as a

narrative identity framework to help me understand the processes of identity construction for both big and small stories. Despite Bamberg's (2007) lack of interest in big stories, I have also chosen to adopt his perspective to consider the parts and whole of identity construction. Similarly, as Bamberg (2004a, 2007, 2010a) uses the terms *discourse* and *narrative* to distinguish between two types of meaning units (i.e., parts supporting the meaning-making process), I also use both terms accordingly. In this case, discourse refers to the meanings created and shared with language and conversation. I often use the term social discourses to also refer to the ways we talk and think about our world, including ourselves and communities, using language (de Fina, 2006). Alternatively, Bamberg (2004a) suggested that narrative refers to the meaningful stories created and shared resulting from discourse that shapes our understanding of experiences and our selves. Therefore, discourse is part of the creation of narratives (or the whole). After having defined my own positioning to perform the research, it is important to note that as with any hermeneutic study, I am also loosely holding onto this framework to ensure that I remain open to being challenged in my existing viewpoints with the expectation that I will unveil new or diverse understandings.

### **Structuring Adolescence**

To better understand why the experience of being an adolescent while living with a parent with an ABI may influence identity, one must understand what is known of adolescence as a developmental phase in life along with potential influences that may affect such development. Adolescence is a transition to adulthood, encompassing changes in both mind and body (Santrock, 2012). According to the Online Etymology Dictionary (2014), the word, adolescence, comes from the Latin word, *adolescens* or *adolescentem*, which means growing, nearing maturity, and youthful. The origins of the word seem to be consistent with today's

understanding of adolescence as a time of growth and development in multiple areas concurrently. The World Health Organization (WHO, 2014) identified several components defining adolescence: medical (e.g., physiological changes), psychological (e.g., cognitive capabilities), and legal (e.g., the age of majority) components for a definition of adolescence that is intended to be applicable around the world. WHO (2014) defined adolescence as:

a period of life with specific health and developmental needs and rights. It is also a time to develop knowledge and skills, learn to manage emotions and relationships, and acquire attributes and abilities that will be important for enjoying the adolescent years and assuming adult roles. (Recognizing Adolescence section, para. 1)

The WHO (2014) further defined adolescents as people aged 10 to 19 years. It is important to note that not all adolescents start developing at 10 years of age, nor do all adolescents stop developing by age 19 years (WHO, 2014). However, this age range was intended to guide adolescent research and policy worldwide.

Alternatively, the United Nations (UN Department for Economic and Social Affairs [DESA], 2011) suggested that youth spans ages 10 to 24 years, with adolescence ranging from 15 to 19 years. Much of the research produced by select UN scholars of adolescence used the youth age range to describe adolescence arguing that most people are taking longer to feel adult-like (UN DESA, 2011). However, other researchers have argued that this delay in feeling like an adult is a new normal amongst today's youth, and such a delay does not warrant the need to include emerging adulthood in the same developmental category as adolescence (Arnett, 2000, 2006; Cote, 2006; Nelson & Barry, 2005). Therefore, the concept of youth proposed by the UN may be over-inclusive to the point where the particulars of adolescence and emerging adulthood are lost.

Emerging adulthood was a term coined by Arnett (2000) to describe individuals aged 18 to 25 years who are legally adults and take up most adult responsibilities but are partially dependent on parents or other caregivers due to educational, financial, or psychological limitations that restrict their ability to be fully independent adults. Several authors argue that emerging adulthood is a distinct and separate developmental period complete with unique developmental challenges (Arnett, 2000, 2006; Cote, 2006; Nelson & Barry, 2005). Emerging adults are expected to take adult roles yet may not have the means to do so, and while adolescents may experiment with adult responsibility, such responsibilities are not typically expected of adolescents (Arnett, 2011; WHO, 2014). This change in social expectation is primarily what makes emerging adults different from adolescents (Arnett, 2011). Therefore, it would be inappropriate for adolescent research to include emerging adulthood as part of adolescence. Given this recommendation from the literature, I chose to be consistent with the WHO's (2014) definition of adolescence.

Despite debates over adolescence as a construct and experience, tremendous variation exists amongst people in terms of adolescent development (Santrock, 2012). Some individuals may be termed "early developers" and others, "later developers." Such developmental ideas are constructed based on a normal period of biological, psychological, cognitive, emotional, and social changes (Burman, 2008; Steinberg & Morris, 2001; Turner, 2005). Normal, in this sense, is based on what is expected of adolescents meeting various developmental milestones, yet adolescents are also sensitive to this cultural idea of normal in that they may strive towards a sense of normalcy based on their own meanings of being normal (Freeman, 2012; Hendry & Kloep, 2012; Steinberg & Morris, 2001). Amidst these changes and maturation at various rates, adolescents attempt to clarify themselves as neither adults nor children, but somewhere in-

between. Being *in-between*, they construct an identity in response to biological, psychological, cognitive, emotional, and social changes that would inform their adult identities. It is believed that this initial response is what provides adolescents and emerging adults the opportunity to create a foundation for their understanding of self in the world, in response to the world (Bamberg, 2004b; McLean, 2005; McLean, Breen, & Fournier, 2010). To better understand this process, I now turn to relevant research literature exploring narrative identity and adolescence as well as the important contributors to adolescent identity construction.

### **Narrative Identity and Adolescence**

Several narrative identity scholars (Habermas & Bluck, 2000; McAdams, 1988; McLean, 2005; McLean et al., 2010) question the applicability of a narrative identity for adolescents and children. According to McAdams (1988), children do not have the narrative complexity, cognitive capacity, or enough life experiences to draw upon to create coherent life stories that accurately reflect their identities. Habermas and Bluck (2000) provided support for McAdams' ideas. They found that children and some young adolescents lack the capacity to create coherent life-stories based on their small stories. They argued that children and adolescents struggle to recognize and represent causal attributions, coherent themes, and sequential time elements. As individuals become more cognitively competent and aware of the sociocultural demands to have a coherent life-story, they start creating and living by self-selected and meaningful small stories (Habermas & Bluck, 2000; McLean, 2005; McLean et al., 2010). Bamberg (2010a) called this discursive demand the "who-are-you question" as others in social interactions attempt to understand the individual. The social pressures of this question seem to peak around mid- to late-adolescence (Bamberg, 2004b). Therefore, it seems that many narrative identity scholars agree with Erikson (1968) that adolescence is the beginning of ongoing identity exploration.

In contrast, several other narrative identity scholars believe that identity construction begins in childhood and that childhood identity does not look the same as adolescent or adult identity (Bamberg, 2004a, 2004b; Harter, 2012). This argument is based on different ideas about the influence of social discourses on narrative identity construction. From birth, we are thrown into a world with pre-existing historical and social ways of being that inform our interactions with our surroundings (Bamberg, 2004a; Gergen, 2000; Strong & Lock, 2010). This is often communicated to individuals in language, behaviours, images, and role models we learn to respond to, to be relational and cultural beings in the world. We learn to take part in others' already existing stories and interactions by joining in this communication of historical and social ways of being, while shaping it as we continue to explore it. Thus, children are already learning about who they are and who they can be in the world because they are already a part of it, changing it, and learning from it (Bamberg, 2004a; Bruner, 1991; Burr, 2003; Holstein & Gubrium, 2000).

As children and adolescents interact with their peers, teachers, and other influential figures, they learn more about their selves and accept feedback about how others perceive them. They are further informed of their overall performance of various roles as friend, child, and student by trusted people who are also heavily influenced by social discourses of childhood (Burman, 2008). These influential figures, then, reflect back their understanding of the children's and adolescents' selves in specific situations, contributing to their big story (Bamberg, 2004a). One example of a childhood small and big story is gender socialization in which children learn at a very young age what defines them as "girl" or "boy." Their gendered behaviour may vary depending on the demands of the social situation, yet with more demonstrations of small stories,



children and those interacting with them gain a better understanding of how the child identifies as girl or boy.

Despite the role of discourse in childhood and early adolescence, most narrative identity scholars agree that there is something unique about adolescence as a context for identity construction (Bamberg, 2010b; Habermas & Bluck, 2000; McAdams, 1988; McLean et al., 2010; Thorne, McLean, & Lawrence, 2005; Thorne & Shapiro, 2011). This may be because adolescents feel social pressures to define themselves so they can call themselves (and feel like) “adults” (Bamberg, 2004b; Nelson & Barry, 2005; Steinberg & Morris, 2001). Adolescents are susceptible to social discourses of identity suggesting that they need to “establish” an identity to grow up (Habermas & Bluck, 2005). For example, late adolescents are often pressured to decide on a career, which requires reflection on who they want to be as adults beyond their careers.

Bamberg’s (2004a) conceptualization of identity as the telling of small and big stories seems to add flexibility that appeared to be missing in previous conceptualizations. Using a social constructionist approach, narrative identity enables individuals to write, re-write, consolidate, and reconceptualize their lived experiences as both small and big stories to create positive meanings of the self in the world. As such, Bamberg’s approach seems to be well-suited to understanding adolescent identity construction in the context of living with a parent with an ABI. His emphasis on the interactional process of integrating and making sense of experiences is integral to understanding how such an experience may uniquely influence identity construction. Given that Bamberg’s (2004a) approach is a social constructionist framework, it is important to consider some important influences in adolescents’ lives to which they may choose to respond in constructing new meanings and identities.

### **Important Influences on Adolescent Identity Construction**

Adolescents are surrounded by many important influences on adolescent identity construction including parents, family, peers, and the experiences of trauma and crisis.

Adolescents, then, might make sense of and construct meaning in response to these influences to inform their identity stories in helpful or unhelpful ways.

### **The Role of Parents, Family, and Attachment**

According to the research literature, parents and family life were important for development – an influence that continues well into late adolescence (Beyers & Goossens, 2008). Beyers and Goossens (2008) found that parents who were perceived to be warm and supportive with clear boundaries, rules, and structure in the family home (i.e., authoritative parenting style) were also perceived to be more supportive of their children's identity exploration process. Similarly, families with clear yet supportive boundaries and relationships between members helped adolescents feel safe and secure enough to explore their identities without judgement or fear of losing support (Faber, Edwards, Bauer, & Wetchler, 2003; Smits et al., 2008). Faber et al. (2003) also found that even though they might knowingly violate boundaries, adolescents felt encouraged by supportive families to make meaning from their choices and consequences to inform their identity. In other words, adolescents who exhibited secure attachments to one or both parents were more likely to genuinely make sense of their experiences to inform their narrative identities.

Research has also shown that adolescents who perceived their parent-child relationship as positive and secure could better anticipate their parents' reactions to their choices and behaviours (Cumsille, Darling, Flaherty, & Martinez, 2009). Similarly, these adolescents also considered their parent's authority prior to making certain choices or behaving in certain ways (Cumsille et

al., 2009; Pratt, Arnold, & Mackey, 2001). Adolescents' choices, behaviours, and consequences provided feedback about the person they can and want to be, thus further informing their stories, big and small. Adolescents from supportive and stable families might consider their parent's guidance (implicit or explicit), authority, and feedback, but adolescents might not always follow it, so they could make their own choices and meanings in life to inform their identities (Dumas, Lawford, Tieu, & Pratt, 2009; Pratt et al., 2001). However, it seemed that much of this self-development required a securely attached relationship to support the adolescent in meaning-making processes.

Attachment in adolescence was believed to look slightly different given the expectations of society for adolescents to construct identities ready for adulthood (Scharf & Mayseless, 2007). Sarracino and Innamorati (2012) argued that, as adolescents progressed through this intermediary developmental phase, their relationships with their parents reorganized to allow more independent decision-making and behaviour. As a result, the secure or insecure attachment with parents was then also extended to their social exploration and interaction with their peers (Sarracino & Innamorati, 2012). Adolescents with secure attachments had healthy emotional and psychological adjustment to adolescence, and they were more tolerant of the reorganization of parent-child relationships (Moretti & Peled, 2004; Sarracino & Innamorati, 2012). However, insecurely attached adolescents exhibited internalizing of such reorganization of relationships that led to a greater risk of psychopathology (Bendiczen, 2013; Milan, Zona, & Snow, 2013). In addition, these adolescents experienced increased externalizing behaviour leading to problems in psychological and social adjustment in adulthood as well as difficulties in relationships requiring intimacy (Bendiczen, 2013).

Though many authors might argue that attachment was established and maintained as a stable construct after early childhood (see Bendiczen, 2013), there was evidence to suggest that some experiences in adolescence could disrupt and change one's attachment from secure to insecure and vice versa (Strauss, 2017). Particularly, if the adolescent experienced trauma or other crises that forced him/her to reconsider his/her relationships with the parents or attachment figure, then this also forced the adolescent to question other securely attached relationships – peer or familial (Sarracino & Innamorati, 2012; Strauss, 2017). In such a situation, adolescents might have thought there were few people they could trust, thus, lacking the safety and security to effectively narrate their stories and construct various identities.

### **The Role of Peers**

In addition to responding to parental and familial influences, adolescents also turn to their peers who are experiencing similar developmental processes. Generally, peers have less influence on adolescents when adolescents feel supported within the family home and by their parent(s) (Cavanagh, 2008; Ciairano, Rabaglietti, Rogerro, Bonino, & Beyers, 2007). As family stress increases and family support decreases, adolescents seek additional support beyond the family home, thus increasing the influence of both helpful and unhelpful peer feedback (Cavanagh, 2008; Ciairano et al., 2007). Peers' and adolescents' responses to them can influence identity construction as the peer group becomes a key resource shaping small stories through the co-constructive process of social interaction (Bamberg, 2004b). If adolescents do not feel confident in peer relationships, they may not share stories at all (Freeman, 2012), thus limiting the co-construction of small stories. This limitation is troublesome because adolescents need a safe place to make sense of hardship to create resilient stories to support adult identities (Compas, 2004; Lidenberg & Ungar, 2008; Rutter, 2012).

Adolescents who do not feel safe enough in their family, nor within their peer group, to request social support are at greater risk of mental health concerns and problematic behaviours such as substance use/abuse or illegal activity (Carr, 1999), or even suicidal ideation (Portes, Sandhu, & Longwell-Grice, 2002). In other words, adolescents may respond to lack of social support, parental guidance, or familial stability by “acting out” to cope with their troubling circumstances (Compas, 2004). Unfortunately, a lack of support, parental guidance, and familial stability characterize living with a parent with an ABI (Freeman, 2012). These experiences and responses to them inform the adolescent about the person he/she can be in the world. This type of feedback can have long-term, devastating effects if an adolescent is unable to create meaningful and helpful stories to inform an adult identity (McAdams & Bowman, 2001).

### **The Role of Trauma and Crisis in Adolescence**

Trauma is the result of experiencing an event that (a) is sudden, unexpected, or outside of normative experiences; (b) is perceived as being beyond a person’s ability to meet the demands of the situation; and (c) disrupts the individual’s frame of reference and psychological needs (McCann & Pearlman, 1990). Recently, researchers have challenged practitioners to be aware of how different events may result in trauma in children and adolescents (Kieffer-Kristensen, Teasdale, & Bilenberg, 2011; Taylor & Weems, 2009). For example, some children may experience trauma resulting from witnessing violence directly or vicariously in addition to a sudden loss or separation from a parent or sibling (Taylor & Weems, 2009). Some authors have further speculated that parental illness or disability is potentially traumatic for the children in the family because of the ambiguous loss of a parent (Rolland, 1999) and sudden instability of the family system (Kelly & Ward, 2011; Kieffer-Kristensen et al., 2011). Traumatic events often force individuals to reframe their understanding of the world in a way that encompasses the

occurrence of the event (Baranowsky, Gentry, & Schultz, 2011). For adolescents, this is particularly difficult as they respond to such events while constructing their selves and identities.

When individuals are not able to re-story the traumatic event to incorporate it into a healthy, meaningful story reflecting the self and identities, they may encounter many problems over their lifetime that reinforce such stories created from a traumatic event (Nelson, 2001; Wade, 1997). Problems due to traumatic experiences can arise in behaviour, relationships, psychopathology, emotions, and cognitions that can disrupt every-day living and continue to reinforce damaged identities (Nelson, 2001). If this traumatic event has occurred in the family, adolescents are less likely to seek support within the family (Cavanagh, 2008). In fact, some individuals may make small acts of resistance to cope with the traumatic event within the family (Wade, 1997), such as relying on other forms of support to aid them in shaping small stories to make sense of the traumatic event. These stories can become a source of resilience later in life if adolescents create stories of strength to inform future behaviours, beliefs, and identities (Compas, 2004; Rutter, 1999; 2012).

However, the research literature supports the idea that difficult events and adolescents' meaningful responses to them play a large role in constructing identities over their lifetimes (Baranowsky et al., 2011; Compas, 2004; Masten & Obradovic, 2006; Neimeyer, 2000; Prati & Pietrantonio, 2009; Wade, 1997). Adolescents' meanings created from hardship shape understandings of future difficulties and challenges in their world, thus informing the self (Rutter, 2012). Therefore, traumatic events and crises within the family have just as much of a role to play in adolescent identity construction as parents, families, and peers. Parents are known to enhance adolescent resilience (Rutter, 1999) and shape helpful big stories in light of difficult life experiences (Dumas et al., 2009; Pratt et. al, 2001). With such a significant role to play, if

parents can no longer support their children, this loss of support may see adolescents negatively responding to events that may contribute to damaged identities as they move into adulthood. Such a loss of parental support can occur when a parent incurs an ABI (Freeman, 2012).

### **Acquired Brain Injury in the Family**

An ABI is defined as an injury to the brain incurred after birth resulting from a medical concern (e.g., aneurysm), trauma (e.g., struck by or against objects), illness or infection (e.g., encephalitis), stroke, substance use and abuse, or a lack of oxygen. Although ABI is typically defined by how it is caused, it is considered a biopsychosocial phenomenon impacting a person's biological, psychological, emotional, cognitive, and social functioning (Yeates, Gracey, & McGrath, 2008). These changes in functioning are, sometimes, apparent to the person with an ABI who may compare his/her pre-injury self to his/her post-injury self, but such awareness depends on the injury (Prigatano, 2005). When a person is aware of the discrepancy between pre- and post-injury selves, he/she may undergo a process of grieving his/her old self and identities. Such a grieving process may occur while the person is also attempting to understand and make sense of his/her new, post-injury self and identities with the help of family members, friends, and health professionals (Gelech & Desjardins, 2011; Gracey et al., 2008).

Over 100,000 individuals are estimated to acquire a brain injury in Canada each year (Brain Injury Association [BIAC], 2014), meaning over 100,000 individuals are expected to be changed forever because of the experience of incurring and recovering from an ABI (Westcott, 2007; Yeates et al., 2008). Most people with an ABI report never feeling the same again post-injury (Landau & Hissett, 2008), and they reconstruct their selves and identities to accommodate changes resulting from an ABI (Cloute et al., 2008; Gelech & Desjardins, 2011; Gracey et al.,

2008). While engaging in the recovery process of both mind and body, people with an ABI are also tasked with the challenges of (a) integrating social and individual beliefs about disability, brain injury, recovery, and rehabilitation (Zola, 1993); (b) incorporating the self they knew with a new self they are coming to know (Gracey et al., 2008); and (c) learning the language that most accurately reflects their identities post-injury (Gelech & Desjardins, 2011). With repeated observations of how they are treated, verbal and non-verbal conversations when possible, and ongoing reflections, such individuals may begin to make sense of what has happened to them and what those changes might mean (Goodwin, 2003). In the midst of this complex process that coincides with rehabilitation over several years, family members may wait to make sense of what happened to their family member and learn who their family member has become.

Therefore, not only are over 100,000 individuals affected by ABI directly, but their families are also affected. Families are a primary source of support during the recovery process beyond immediate rehabilitation interventions (Kreutzer et al., 2009). It is for this reason that brain injury research has considered the influence of an individual incurring an ABI on siblings, spouses, caregivers, parents, and the whole family system (Carnes & Quinn, 2005; Elbaum, 2007; Kreutzer et al., 2009; Orto & Power, 2000; Tramonti, Bongioanni, Bonfiglio, Rossi, & Carboncini, 2017). This research revealed that family members and family systems of a person with an ABI are challenged by sudden caregiving duties (Tramonti et al., 2017), increased levels of stress (Carnes & Quinn, 2005), strained marital and familial relationships (Arango-Lasprilla et al., 2008; Freeman, 2012; Kreutzer et al., 2009), increased likelihood of depression and anxiety in family members (Carnes & Quinn, 2005; Elbaum, 2007), and family role and responsibility changes (Freeman, 2012; Orto & Power, 2000; Tramonti et al., 2017). In addition, some families



may experience ambiguous loss (Boss, 2007) and disenfranchised grief (Doka, 1999) due to a sense of losing the person they knew before the injury (Freeman, 2012; Kreutzer, Mills, & Marwitz, 2016; Landau & Hissett, 2008; Rahman & de Souza, 2013).

Families may find creative ways to cope and make sense of their experiences under these circumstances. In particular, some family members may attempt to embrace their caregiving roles as part of their new duties to contribute to the family, while others may see it as an anomaly and may grow to resent their experiences (Freeman, 2012; Kieffer-Kristensen & Johansen, 2013). However, given the stress of such significant changes in the individual with an ABI as well as the family system, some family relationships may disintegrate (Charles et al., 2007; Orto & Power, 2000). One can imagine the magnitude of stress if the person with an ABI is also a parent. However, little continues to be known about how family members adjust to a parental ABI.

### **Parents with an ABI and their Children: Problem and Purpose**

Although researchers have examined the experiences of individuals with an ABI and their families, only a few research studies acknowledge that the person with an ABI could also be a parent with children in the family home. When a parent incurs an ABI, both parents struggle to guide and support their adolescent children (Freeman, 2012). While the injured parent is recovering, the non-injured parent takes up caregiving duties and any roles and responsibilities of the injured parent in addition to his/her own. With parents who can offer little to no support and guidance, friends who may not be understanding or supportive (Freeman, 2012), and a community who may stigmatize disability (Zola, 1993), children in the family home are left with few social supports. Some studies exploring parental ABI in families unintentionally discovered that children's needs and voices were often neglected and ignored in therapy, rehabilitation, and

research (Charles et al., 2007). By virtue of being in-between childhood and adulthood, adolescents may be expected to take on more adult-like roles, such as caregiving or financial responsibilities, while also being excluded and sheltered from the parent's recovery process like younger children (Coppock et al., 2018; Freeman, 2012; Kieffer-Kristensen & Johansen, 2013). Because of the complexities involved in their developmental transition and making sense of being *in-between*, adolescents may be at greater risk of adverse effects after a parent's injury in comparison to adolescents without such experiences (Coppock et al., 2018; Kieffer-Kristensen & Johansen, 2013). However, few studies illuminate how parents incurring an ABI might influence the family, let alone adolescents in the family (Coppock et al., 2018).

With very little research available about the topic, psychologists have few ways to anticipate how to support adolescents living with a parent with an ABI. As a result, help-seeking adolescents may not feel heard, understood, or supported (Freeman, 2012), potentially leading to unhelpful or even harmful therapeutic interactions (Coppock et al., 2018; Freeman, 2012; Higham, Friedlander, Escudero, & Diamond, 2012). For my master's thesis research, I took up the challenge to explore the experiences of adolescents who had lived with a parent with an ABI in an effort to fill this gap in the literature (Freeman, 2012). Having lived as an adolescent whose parent had acquired a brain injury, I believed that I could not be alone in having this experience. To address the question, "What is it like for adolescents and emergent adult children to grow up living with a parent with an acquired brain injury?" (Freeman, 2012, p. 54), I interviewed six adult participants (aged 18-32 years) who were adolescents (aged 12-18 years) at the time their parent incurred an ABI. I used heuristic inquiry – an interpretive qualitative method based on descriptive phenomenology in which the researcher includes his/her own experience with the phenomenon in the data (Moustakas, 1990). The most striking finding was

the sense of personal growth that resulted from the experience. The participants shared the story of overcoming adversity, only to think of themselves as forever changed by their experiences.

Upon further reflection after my master's thesis, I wondered how these experiences influenced identity stories. Specifically, Bamberg (2004b) suggested that adolescents are responding to the who-are-you question with more intention than ever before. However, it is unclear what might happen to their responses to identity questions when they experience such disruption as parental ABI. As previously discussed, how adolescents make sense of difficult events plays a role in constructing their identities over their lifetimes (Baranowsky et al., 2011; Compas, 2004; Masten & Obradovic, 2006; Neimeyer, 2000; Prati & Pietrantoni, 2009; Wade, 1997). Furthermore, as parents tend to enhance adolescent resilience (Rutter, 1999) and shape helpful identity stories in light of difficult life experiences (Dumas et al., 2009; Pratt et. al, 2001), it follows that if a parent incurs an ABI, then adolescents might negatively respond to events that could contribute to their adult identities. Therefore, in the current study, I sought to understand adolescent identity construction in the context of living with a parent with an ABI.

### **Summary**

Adolescence is a unique developmental period in which individuals experience a sense of being neither children nor adults while simultaneously being both children and adults. While body and mind are transitioning to adult forms, people face questions and social pressures that force them to reflect on their identities. Although identity was not always a culturally relevant concept with great importance, human development scholars developed a keen appreciation for the construct as individuals and communities started to question what made the “me” and the “us” different in comparison to others (Cushman, 1995). At first, identity was traditionally

defined in essentialist ways – as the essential characteristic of a person that is stable, constant, and well-established by adulthood. Essentialist perspectives of identity (e.g., Berzonsky, 1990; Erikson, 1959; Marcia, 1966) were later criticized for limiting flexibility and adaptability in identity development and ignoring sociocultural factors as well as the role of social life.

In response to these critiques, several identity scholars proposed using story as a metaphor for identity, making room for social constructionist perspectives incorporating flexibility, adaptability, and personal agency while also accounting for social interactional processes that may influence identity construction. Although it continued to be debated as to whether the concept of narrative identities is appropriate for adolescents and children (Habermas & Bluck, 2000), Bamberg (2004b, 2010a) – a social constructionist scholar – argued that children and adolescents must respond to social demands that require them to position themselves in storytelling. Therefore, Bamberg argued that children and adolescents intentionally create identities with big and small stories regardless of the complexity and comprehensiveness of the story (Bamberg, 2004b).

Parental ABI can be seen as an experience that disrupts the status quo of adolescent life (Freeman, 2012), and thus, could also interrupt adolescent narratives (Bamberg, 2004b). Though adolescents might respond to such disruption in a variety of ways (Butera-Prinzi & Perlesz, 2004; Kieffer-Kristensen et al., 2011; Nelson, 2000; Prati & Pietrantoni, 2009), these responses may confirm or disconfirm their existing ideas of self and identity. Such responses could also result in a struggle to negotiate healthy and resilient stories when there is limited parental guidance and support (Dumas et al., 2009; Pratt et. al, 2001; Rutter, 1999). because it is currently unclear how this kind of disruptive experience may influence adolescent identity stories, practitioners are left in the dark as to how to be helpful in supporting healthy and resilient

identity construction. Though narrative identity (Bamberg, 2011) - – a social constructionist approach to reconceptualizing individuals as having the capacity, power, and hope to change their identities depending on the story they need to tell – is well-suited to frame an understanding of adolescent identity construction, it continues to be unclear how disruptive experiences may influence such construction. Without such knowledge, practitioners are left in the dark as to how to be helpful in supporting healthy and resilient identity construction when they encounter adolescents or adults whose parent has incurred an ABI. Therefore, the purpose of this study was to understand the phenomenon of adolescent identity construction in the context of living with a parent with an ABI. With Bamberg's (2011) narrative identity framework I hoped that this research might help fill the existing gap in the literature to inform theory, research, and practice.

### CHAPTER THREE: THE METHOD IN HERMENEUTIC INQUIRY

Hermeneutic inquiry, as taken up as a qualitative research method, is born from centuries of philosophy (McCaffrey, Raffin-Bouchal, & Moules, 2012; Moules, 2002; Moules et al., 2015). As a tradition of thought originally used to interpret biblical and literary texts, hermeneutic philosophy has been applied to qualitative research in practice-based disciplines including education, nursing, social work, and psychology (Moules, McCaffrey, Morck, & Jardine, 2011). Many practice-based disciplines, including that of counselling psychology, have witnessed a philosophical shift towards valuing the knowledge gained from both objective and subjective perspectives to enhance our understanding of a variety of phenomena (Martin & Sugarman, 2001). My professional and academic development has meant moving from a positivist perspective to a social constructionist one because I have come to understand the importance of recognizing my own role in my research as well as my practice. I am a person who is always already part of the world, steeped with my own experiences and knowledge that inform my worldview. As an insider to the experience of living with a parent with an ABI, I chose a method that would help me strive for a more complete understanding of the phenomenon with discipline and rigor to both use and temper my perspectives based in my own experiences of the world. As such, I chose to use Gadamer's philosophy to apply hermeneutic inquiry as a qualitative method to investigate the following research question: *How might we understand adolescent identity construction in the context of living with a parent with an ABI?*

To clarify the methodology, rationale, and method, I first discuss some early hermeneutic philosophy, including the contributions of Schleiermacher, Dilthey, and Husserl, to this approach. Next, I explain some of Heidegger's ideas that gave rise to the hermeneutic turn followed by a discussion of Gadamer's philosophy and concepts relevant to conducting research

guided by Gadamerian hermeneutics. Then, I explain the hermeneutic circle, which also guided my research design. Finally, I discuss my rationale for this method followed by my application of the hermeneutic philosophy to outline my research design.

### **Hermeneutic Philosophy: A Philosophical Practice**

Hermeneutics, as a word, means interpretation or a method of interpretation (Merriam-Webster Dictionary, 2014). This definition speaks to hermeneutics being both a philosophy and a practice of interpretation. Hermeneutic also comes from the Greek word for interpreting (Online Etymology Dictionary, 2014). Other sources have suggested that hermeneutics, derived from the Greek word *hermeneutikos* meaning interpreting, may also be traced to the name of the Greek messenger God, Hermes (Grondin, 1994; Moules, 2002). Hermes delivered messages from the Gods to mortals using creative means often resulting in the messages being unclear or incomplete (Moules, 2002). As such, it was left to the mortals to interpret and make sense of these unclear messages, which occasionally led to unfortunate consequences due to misinterpretation. Given this rich etymological background, hermeneutics, then, involves the practiced interpretation and meaning-making of messages and human experiences (Caputo, 1987).

It seems that interpretation is a part of human experiences in that we are always trying to make sense of our being in the world as is documented in literary and historical texts (Heidegger, 1927/2010). There is something about being human and needing to draw meaning from our experiences. Many philosophers, such as Friedrich Schleiermacher, Wilhem Dilthey, Edmund Husserl, Martin Heidegger, and Hans-Georg Gadamer have sought to understand how we interpret our world as it is an important part of our human experience. Because Schleiermacher was considered the first person to introduce hermeneutics in its contemporary form (Gadamer,

1960/2004), I briefly explore contemporary hermeneutic philosophy beginning with Schleiermacher's contribution.

### **Friedrich Schleiermacher: A Theologian in Search for Contextualized Truth**

Friedrich Schleiermacher (c. 1768 – 1834), a German theologian, is considered to be the “father of contemporary hermeneutics” (Moules, 2002, p. 4) because his ideas about understanding the written word within its historical and cultural context revolutionized interpretation of texts. Schleiermacher reflected on interpretation and the active construction of understanding, arguing that the natural interpretation of text often led to misunderstandings (Grondin, 1995). The natural way of understanding was described as a loose interpretation of our world and the normal state of human understanding (Grondin, 1995). It is undisciplined and simplistic because the natural way of interpreting tends to be automatic and lacking critical thought and examination. Such interpretation may then lead to frequent misunderstandings and assumptions that impede one's ability to recognize information as others had intended it. Therefore, according to Schleiermacher, interpreters must be vigilant against this natural interpretation using hermeneutics – a practiced and studious method of interpretation (Grondin, 1999/2003).

Schleiermacher's goal when interpreting text was to “understand an author better than he understood himself” (Grondin, 1999/2003, p. 58). As such, Schleiermacher also believed that understanding was “right” when interpreters knew the historical and cultural context in which the text was written, so they might understand it from the same perspective as the writer. For Schleiermacher, language was the key to understanding text and its true meaning (Grondin, 1995), and interpretation must move between the particulars and the universals (Gadamer, 1960/2004). In this case, the particulars were the meaning of the words and language, and the



universals were the cultural and historical context of the time the words were written. It was only by considering the parts in relation to the whole and the whole in relation to its parts that interpreters could understand the text as it was intended, thus having the correct understanding.

Schleiermacher was fascinated by how people understand or misunderstand text and sought to create a way to accurately interpret the written word. However, in doing so, Schleiermacher fell into a form of psychologizing hermeneutics because of his insistence on understanding the author's psychology to understand the text (Grondin, 1995). Later philosophers struggled with knowing the historical context without the influence of their present context (Gadamer, 1960/2004). Dilthey, then, made an attempt to address these problems with the introduction of systematically developing hermeneutic understandings.

### **Wilhelm Dilthey: A Protocol to Understand**

Wilhelm Dilthey (c. 1833 – 1911) was a German philosopher who was credited with developing a systematic process to investigate the human sciences based on hermeneutic philosophy (Grondin, 1995). Dilthey suggested that human sciences and natural sciences were epistemologically different. The natural sciences sought to explain natural phenomena while human sciences sought to understand human experience. Given the epistemological differences, Dilthey sought to develop a structured way to interpret, understand, and legitimate human science knowledge.

As a biographer of Schleiermacher and a student of his philosophy, Dilthey recognized the importance of history in understanding (Moules, 2002). He suggested that one could not understand human experience if it was separated from its context and the historical foundation from which it came (Dilthey & Jameson, 1972). Dilthey argued that we may never know the history as it actually happened, but we may reconstruct history based on interpreting the trail of

historical clues from multiple sources (Dilthey & Jameson, 1972). In many ways, then, Dilthey argued for the living, breathing presence of the past in the present. Both the past and the present blend in our interpretations of human experiences.

For Dilthey, understanding meant “the process of grasping the subjective meaning of human action from its objective expression” (Tuttle, 1982, p. 127). As such, Dilthey believed that there could be a protocol for interpretation, and it needed to be different from that of natural sciences yet equally legitimate. However, Gadamer (1960/2004) criticized Dilthey for subscribing to a modern concept of “method” in that this protocol for the human sciences mimicked the scientific method of the natural sciences. Dilthey placed more value on following the objective “bread crumbs” to solve meaning and legitimize knowledge from the human sciences, rather than acknowledging the value of subjective knowledge that cannot be traced to objective indicators.

### **Edmund Husserl: Introduction to the Life-World**

Edmund Husserl (1859-1938) is considered to be the father of contemporary phenomenology (as cited in Lavery, 2003). Husserl’s work was not hermeneutic, but he contributed to understanding the world to include complexity and interconnectedness (Moules, 2002). Husserl introduced the idea of the life-world as the world that contains our everyday experiences and actions with and without our recognition (Gadamer, 1977; Smith, 1991). If we were to isolate a phenomenon without considering the other interconnections, we would lose meaning in understanding the phenomenon. Husserl reportedly described the life-world to be a constant interaction between the subject and the object (Gadamer, 1977); that is, our experiences are always of something in the world. For example, I experience music by listening to it, and I may reflect on it to determine if I enjoy it, despise it, or create meaning from it. My experiences

and reflections (the subject) are always *of* the music (the object). The experience of the object forces the subject to reflect upon itself to create an interpretation of or meaning from the object with or without intention. Husserl called this interactive process intentionality.

Husserl indicated that we can understand the essence of experiences of the life-world by reducing it to the bare necessities that characterize the experience, illuminating the universal experience of a phenomenon (Husserl, 1965). He argued that true understanding can only be obtained when individuals separate (or bracket) themselves from the life-world to limit the influence of their subjective knowledge in understanding the universal characteristics of an experience (Husserl, 1965). This seemed contradictory in light of Husserl's main argument suggesting that people need to recognize the life-world as a complex and interconnected place to understand human experiences. If people are part of the life-world and influenced by its complexity, how can they separate themselves from an experience of the life-world without losing meaning or limiting understanding? It is unclear if Husserl was able to answer this question in a way that honoured his philosophy.

Although Husserl is not considered a hermeneutic philosopher, his writings helped shift the human sciences away from prior beliefs that we must isolate parts of the life-world to understand them (Hoy, 1993; Jardine, 2012). Instead, he persuaded audiences to consider the interconnectedness of the life-world to better reflect how phenomena exist within it. However, it was his belief and argument that people can separate themselves from the life-world to gain an understanding of the universal experience of a phenomenon that led to logical problems. Other philosophers, like Heidegger, noticed contradictions in Husserl's philosophy which led to what has been called the hermeneutic turn.

### **Martin Heidegger: The Hermeneutic Turn**

Martin Heidegger (1889-1976) was a student of Husserl, and therefore, knew Husserlian philosophy well. However, Heidegger diverged from Husserl in his re-examination of the question of Being (Guignon, 1993). His philosophical legacy focused on re-placing value on the knowledge gained from human experiences because this knowledge has been historically devalued and delegitimized. Heidegger emphasized that understanding was the mode of being in the world; knowledge gained from being was not less valuable, only different from other forms of knowledge (Heidegger, 1927/2010).

Heidegger was credited for the hermeneutic turn: the philosophical movement away from conceptualizations of knowledge as a separation of the object and the subject, with the knowledge gained from the subject being less valuable than that gained from the object (Hoy, 1993). Heidegger's work marked the turn towards valuing and utilizing subjective knowledge in conjunction with objective knowledge to gain a more complete understanding of a human experience (Hoy, 1993). Specifically, Heidegger disagreed with Husserl's claim that we can only understand the essence of experiencing a phenomenon by stepping outside of the life-world. Rather, Heidegger believed that phenomena can only be understood from within the life-world (Heidegger, 1927/2010). This change in thought led to an ontological shift of hermeneutic philosophy. Heidegger stated, "Being is the most 'universal' concept," (Heidegger, 1927/2010, p. 2) as all humans express Being by partaking in the world. Heidegger named this way of being-in-the-world *Dasein*, the German word for "being there" or "presence" and often translated into the English words "Being" or "existence."

Although *Dasein* was a word used by Hegel to mean human existence, Heidegger reinterpreted the word to better reflect his philosophical argument suggesting that our existence

in the world is through *Dasein* (Hoy, 1993). Given *Dasein* is our way of being and experiencing the world, the idea of separating object from subject is irrelevant (Hoy, 1993). Heidegger saw both subject and object as forever linked, informing each other to create greater understanding. The subject was conceived as the individual or the parts, while the object was conceived as the surrounding environment or the whole. As such, both subject and object are forming interpretations between them as they cycle from one to the other. Further still, we are constantly interpreting the object through our subjective views and our subjective views are being shaped by the object. In recognizing this movement previously described by Schleiermacher, Heidegger chose to name this cycle, *the hermeneutic circle*, which became a means of interpreting our Being and our world (Grondin, 1999/2003). This circle can continue forever, but Heidegger was clear that there was a limit to our understanding.

Our finitude means that we may always strive to know and understand, but we will always be limited in our understanding. For example, I may continuously gaze upon a cube, but I can never see all six sides simultaneously to know how they contribute to the cube's shape, colour, shadow, and existence simultaneously. Thus, my interpretation of the cube's existence will always be limited. Heidegger emphasized that we may consider the past, present, and future in our being-in-the-world, but our finitude influences the extent and "completeness" of our understanding. Our understanding can never be complete, but it is the act of striving for completeness over time that guides our Being and the ongoing evolution of our understanding (Davey, 2006).

Heidegger was concerned with time in relation to Being (Heidegger, 1927/2010). Being is influenced by our personal and collective history as it is interpreted and understood in the present. Our understandings of history are influenced by the They which always already has pre-

existing meanings of a pre-existing past (Heidegger, 1927/2010). The They is the common social collective that shares social understandings of the world we live in. It is what tells us that the world is round instead of flat or that mental illness is shameful. The They conveys understandings that have pre-existed us as truths of our world, and such understandings will continue to evolve and exist beyond our lived experiences. The They dictates the “shoulds” of our existence while Dasein is our own interpretation of our existence. By exploring Dasein using hermeneutics, we challenge the taken-for-granted knowledge shared by the They. Time and Being, then, are intricately linked as one continues to inform, shape, and transform the other with a delicate interaction of Dasein and the They.

Given that our Being is understanding, Heidegger also stated that “language is the house of Being” (Heidegger, 1947/1993, p. 217), suggesting that everything that is experienced in the world is contained, expressed, shared, and understood within language. We use language as a tool of *Dasein* to express our being in the world, but language is also necessary for Being. Language is continuously updated by people living within sociocultural and historical contexts so it may be representative of their being-in-the-world, yet as our understanding changes, there may be no words to represent this change in understanding. Thus, language is necessarily limiting.

For Heidegger, a goal of hermeneutics, then, was described with the concept of *aletheia*, a Greek word for “the event of concealment and unconcealment” (Caputo, 1987, p. 115). *Aletheia* has three meanings revealed in the etymology of the word (Laing, 2013; The Online Etymology Dictionary, 2014). The root word of *aletheia* is *lethe* from the mythological river Lethe that transported souls into the underworld (Laing, 2013). Lethe was hidden to mortal eyes, but mortals believed their loved ones were granted safe passage. It was also known as the River

of Forgetfulness, so the anthesis to it (*aletheia*) is to remember. Therefore, one meaning of *aletheia* is to remember what was forgotten. A second meaning of the word *aletheia* is to reveal what was previously concealed (Caputo, 1987; Moules, 2002). Closely connected to another meaning of *lethe* is lethal, death, *aletheia* can also mean to enliven something that was dead (Moules, 2002, 2015; Moules et al., 2015). Both Heidegger and Gadamer agreed that we can understand phenomena by remembering what was forgotten, revealing the concealed, and enlivening what was previously dead. *Aletheia* is a grounding concept reminding me of the precarious balance required in practicing hermeneutics, as by revealing one thing, I may also conceal another.

Heidegger was focused on the question of being and significantly shifted the direction of hermeneutic philosophy (Grondin, 1995). After Heidegger's major publication describing his ideas, *Being and Time*, hermeneutics became the philosophical practice of understanding that we know today (Hoy, 1993). Heidegger had contributed to the hermeneutic turn, which led to other philosophers expanding on or diverging from his work, adding to the conversation about hermeneutic philosophy and further developing the field.

### **Hans-Georg Gadamer: The Hermeneutic Turn Expanded**

Hans-Georg Gadamer (1900-2002) was a German philosopher known for his 1960/2004 magnum opus, *Truth and Method*. As a student of Heidegger and a philosopher influenced by Greek philosophers, Schleiermacher, Dilthey, and Husserl to name a few, Gadamer has been credited for creating a coherent philosophy that has been applied to research in the human sciences and practice-based fields (Grondin, 1994; Moules et al., 2011; Moules et al., 2015). I next discuss some concepts that are pertinent to understanding Gadamerian hermeneutics.

**Truth, *bildung*, and the ontological shift of hermeneutics.** In *Truth and Method*, Gadamer (1960/2004) sought to explicate the difference between the knowledge gained from natural sciences and that gained from human experience. He suggested that knowledge based in human experience is a form of truth, yet it cannot be taught. Truth, according to Gadamer, is not a word limited to objectively discovered knowledge, but rather, it also refers to the knowledge gained from subjective interpretation of experiences. For Gadamer, truth is knowledge found in the interpretation of and meaning created in reaction to the objective. Such knowledge is informed by one's personal positioning and experiences of life that have lent one to a particular worldview through which to observe and understand experiences of the objective. Therefore, truth does not exist in the traditional sense of seeking an ultimate and singular truth. Instead, Gadamer argued for legitimating and valuing knowledge gained in the interpretation of experiences in the world, meaning that there is no single truth, but multiple truths that all share important pieces of our humanity (Gadamer, 1977). Truth can only be gained from interpreting practical and thoughtful experiences of the world (Laing, 2013). One noteworthy form of knowledge gained from such practical and thoughtful experience is *bildung*.

*Bildung* is a type of knowledge gained from seeking experiences with an openness and readiness to learn what that experience can teach us. In English, it is loosely translated to mean cultured or cultivated. *Bildung* is the result of a process of becoming (Gadamer, 1960/2004), and although gaining practical skill is a consequence of cultivation, it is not the goal. An example of *bildung* is the way a dancer knows how to listen to music to improvise movement through an appreciation for the music. A dancer will listen for the counts in the music, the rhythm, and the breaks that require a change in movement to accurately represent his/her interpretation of the music. The anticipation of rhythm and the movement involved in listening to music for the first



time is a skill that dancers learn with more exposure to different forms of music and dance. No one can teach another how to listen to new music in this way and each dancer will hear the music differently. In this case, *bildung* is based on the dancer allowing the music to teach him/her how to listen to it, so the dancer can respond appropriately. Even with this active learning, *bildung* is not guaranteed. Gadamer wrestled with how we can understand such a process of cultivation that can transform us into more cultured beings.

Gadamer (1960/2004) further wondered how it was that this type of experiential knowledge was delegitimized. After a full exploration of philosophical aesthetics, Gadamer concluded that this knowledge has been misunderstood (Gadamer, 1960/2004). Gadamer agreed with Dilthey that human sciences and natural sciences are different. However, he disagreed with Dilthey in that he believed that it is the way knowledge exists in the world (ontology) that is different, rather than the way we come to know this knowledge (epistemology) (Grondin, 1995). As such, human scientists have historically misunderstood the existence of this knowledge from the beginning. This knowledge is more fluid and dynamic than previously believed, composed of historical and cultural meanings begging us to understand them. Each person develops an understanding of the world that can change how it is understood in the future, as evidenced by the evolution of hermeneutic philosophy.

**History and prejudice.** History is important in Gadamer's work (Moules, 2002; Moules et al., 2015). Heidegger introduced the idea of historicity; that is, history is constantly informing our interpretations, values, beliefs, and understandings in the moment (Heidegger, 1947/1993). In agreement with Heidegger and contradicting Schleiermacher and Dilthey, Gadamer suggested that history can only be interpreted in relation to the present (Gadamer, 1960/2004). Although

history is an account of the past, we know it in relation to our present and future. Therefore, history is also lived in the present in our interpretations of experiences. Gadamer (1977) stated,

It seems to me there can be no doubt that the great horizon of the past, out of which our culture and our present live, influences us in everything we want, hope for, or fear in the future. History is only present to us in light of our futurity. (pp. 8-9)

From the moment of birth, we step into a pre-existing history that will influence us just as we influence it. History lives in the present, informing our interpretations. For example, my past personal and professional experiences of the topic influence how I perceive, interpret, and understand the topic in the present.

In addition to suggesting that all people are influenced by history, Gadamer (1977) also cautioned against misusing historical accounts. Some people learn about historical events yet fail to acknowledge the spirit of the times. As a result, some people may critically examine the past with perspectives of the present and dismiss the past and influences that could come from it (Gadamer, 1977). By placing judgment on history, some may forget that historical accounts are accounts of human phenomena – experiences that were interpreted to create a historical record. Therefore, Gadamer (1977) suggested:

The historical consciousness has the task of understanding all the witnesses of a past time out of the spirit of that time, of extricating them from the preoccupations of our own present life, and of knowing, without moral smugness, the past as a human phenomenon. (p. 5)

Our understanding of history was already interpreted before we learned it. If we recognize that our historical consciousness is only “an alienated form of this historical tradition” (Gadamer, 1977, p. 7), then we can understand interpretations of present phenomena influenced by history.

Prejudice is a concept closely aligned to history and historical consciousness (Gadamer, 1960/2004). Although we often think of prejudice as a negative pre-judgement, Gadamer (1960/2004) defined it as a judgement formed and created without value. Prejudice is based on our acquired sociocultural history as well as our experiences of interacting with the world (Gadamer, 1960/2004). Gadamer argued that some prejudices are legitimate while others are not. Legitimate prejudices are judgments that remain open to something new that may contradict, challenge, or reshape them (Gadamer, 1977).

Prejudices are biases of our openness to the world. They are simply conditions whereby we experience something – whereby what we encounter says something to us. This formulation certainly does not mean that we are enclosed within a wall of prejudices and only let through the narrow portals those things that can produce a pass saying, ‘nothing new will be said here.’ Instead we welcome just that guest who promises that something new to our curiosity. (Gadamer, 1977, p. 9)

We cannot know all our prejudices, and as Moules (2002) argued, the most influential prejudices are often those that we may not know exist. However, it is important to note that we cannot acknowledge all prejudices that influence our perspectives and understandings as it is not possible to be completely aware of all possible pre-judgements we might hold (Gadamer, 1960/2004). Instead, Laing (2013) suggested that hermeneutic researchers acknowledge their history and known influences that make up the prejudices so the researchers can use them to offer new meanings and interpretations about the topic. In some cases, we may come up against our prejudices when they are contradicted or challenged and those prejudices come into our awareness as we learn to remain open to new perspectives, information, and interpretations (Moules et al., 2015). A part of research, then, is being ready to risk and challenge our

prejudices to make new meanings (Davey, 2006). By remaining open to differences and listening for variations, I may transform my existing prejudices and my historical consciousness.

**Language, conversation, and dialogue.** Like Heidegger, Gadamer (1960/2004) emphasized the importance of language in hermeneutics. Gadamer shared Heidegger's ideas that language is the container of our being, interpretation, and understanding. Language is "the universal medium in which understanding occurs" (Gadamer, 1960/2004, p. 389) and in which our being in the world is represented. Language is historically, culturally, and socially informed in a way that reveals information about our partaking, understanding, and shaping of our world (Palmer, 2007). We often forget where our words come from in our everyday speech and why we have chosen certain words to represent ourselves (Grondin, 1999/2003); thus, it is common practice in hermeneutic inquiry to explore the definition and etymology of words to reveal meanings hidden within a particular topic.

Although human understanding is necessarily limited, we can continue to expand our existing understanding and prejudices using language in genuine conversation and dialogue (Gadamer, 1960/2004). Gadamer (1960/2004) believed that a genuine conversation is:

...never the one that we wanted to conduct. Rather, it is generally more correct to say that we fall into conversation, or even that we become involved in it... No one knows in advance what will 'come out' of a conversation. Understanding or its failure is like an event that happens to us... All this shows that a conversation has a spirit of its own, and that the language in which it is conducted bears its' own truth within it. (p. 385)

This conversation, if genuine, transforms us and our understandings because we have had a genuine exchange of ideas, knowledge, meanings, and understandings. It is through dialogue, a sharing and joint construction of meaning through language, that genuine conversation is made

possible. Davey (2006) also stated that dialogic engagement in conversation needs both parties to be open and willing to risk their claims for the other's consideration.

**Fusion of horizons.** Integrating his ideas about history, prejudice, language, and conversation, Gadamer introduced horizons as a way to describe combining multiple existing perspectives to construct our understandings (Gadamer, 1960/2004). When I think of this concept in relation to how I understand the word, I think of the horizon line when painting an image. It is the line where the sky and the earth meet, and even though I am fully aware that there is more beyond this line, I am unable to paint past it while also painting things from my current viewpoint. This line is limited vertically, but also horizontally as I can only include so much on a canvas that is within my view. Gadamer described horizons similarly – that there is a limit or finitude to our understandings and thus, our horizons can only reach so far without other influences or experiences.

Using this same metaphor, another person may approach me to report on what they have seen as well as their interpretation beyond my horizon. With genuine conversation, I may learn more about what is beyond my horizons so I may create a more complete picture (Gadamer, 1960/2004). Also, the other person is learning from me about what I have seen. Through this process and exchange of information, our horizons melt together, creating a greater perspective that represents both horizons of understanding. It is through the process of gaining more information, learning alternative viewpoints, and engaging in genuine dialogue that a fusion of horizons enriches our understanding (Binding & Tapp, 2008).

**Play.** Play is a seemingly simple concept with a wealth of complexity in its Gadamerian meaning. According to Gadamer, play can have two meanings: the play that is involved in playing a game and the game itself (Laing, 2012). Play is what happens when the game absorbs

the players and teaches them how to play the game. In this instance, the game may be considered the topic while play is what happens to understand the topic. We recognize play when we realize “something is going on or something is happening” (Gadamer, 1960/2004, p. 104), yet it is unclear what *it* is. However, one can only learn what is at play when the players take it seriously, and allow themselves to be absorbed by play. The player is immersed into the game with a commitment to learn everything he/she can about it.

Play has a certain amount of freedom, leeway, and flexibility that allows it to take place between the whole and the particulars as well as between players (Gadamer, 1960/2004; Moules et al., 2015). Play, then, requires multiple players moving to and fro allowing play to change both the players and the game (Laing, 2012). Through genuine dialogue, the players shape play while also learning the game, thus contributing to their understanding of what is happening (Gadamer, 1960/2004). When I think of play, I think of the call and response of West African dancers and their drummers. The dancers and drummers engage in a non-verbal dialogue with music and dance. The dancer and drummer agree on the drumming rhythm and dance. As the drummer plays the rhythm, the dancer chooses movements that will highlight the rhythm, and the drummer accents the movement of the dancer. The drummer can change the dancer’s movement by playing slight variations to encourage the dancer to do something different while the dancer can change the drummer’s accents with his/her movement. Together, dancer and drummer play within the confines of a set rhythm (the game) to both demonstrate and learn more about the artform, yet no two performances are ever alike. In this way, both players engage in play and conversation creating a better understanding of the movement, the music, and the art form. Each time the rhythm is played, the dance and the drumming will be different. Play must be taken seriously or nothing will be learned from joining the game.

**Method, the hermeneutic circle, topic of address, and research.** Throughout his discussion in *Truth and Method*, Gadamer (1960/2004) argued for an ontological and epistemological change in how we investigate and understand our world. Specifically, he took issue with the traditional usage and application of the scientific method to the human sciences. He believed such methods were inappropriate due to the natural sciences and the human sciences having very different forms of knowledge, and therefore, to seek knowledge gained from human science, one must consider a new method that honours the humanness of that knowledge (or subjectivity). Gadamer called for alternative ways of investigating and developing an understanding of the human sciences, which is what led him to hermeneutic philosophy. As such, he argued for the practice of hermeneutic philosophical thought when seeking human-based knowledge that reveals parts of our humanity.

For Gadamer (1960/2004), such knowledge was drawn from seeking to interpret human experiences and understandings of phenomena. In this way, hermeneutics is a form of phenomenology in that the philosophy offers a way to understand our experiencing of the world (Moules, 2002; Lavery, 2003). However, hermeneutics differs from descriptive phenomenology, pioneered by Husserlian philosophy, by emphasizing that we interpret our experiences of a phenomenon because we cannot remove ourselves from our understandings of the world. Instead, we use these understandings of past experiences and knowledge to make sense of new experiences of the world. Therefore, our knowledge of the world, also known as our truths of the world, is always sourced from interpreted experiences. By applying Gadamer's hermeneutic philosophy to interpret phenomena, we can access truths of our human experiences of the world from within the world (Gadamer, 1960/2004). As truth is a form of interpreted knowledge, Gadamer used the concept of the hermeneutic circle to demonstrate the process of

interpretation to reach an understanding of phenomena, and thus access truths contained within experiences.

Therefore, one of the most important concepts in Gadamer's philosophical hermeneutics in research and practice is the hermeneutic circle. The circle was a concept originally described by Schleiermacher, taken up and named by Heidegger, and further developed by Gadamer (Grondin, 1995, 1999/2003). Simply put, when regarded in the conduct of research, the hermeneutic circle is the researcher engaging in and responding to dialogue with the whole and its parts, creating a circular motion as one explores the parts in relation to the whole and the whole in relation to its parts (Gadamer, 1960/2004). Heidegger and Gadamer believed that it was through the hermeneutic circle that we come to interpret and understand our world, and thus, all the aforementioned concepts are influential on the circle (Grondin, 1999/2003). Gadamer elaborated on Heidegger's descriptions of the circle (i.e., ongoing conversation between subject and object) as it is a cornerstone of his philosophy and its practice.

Individuals engage in the hermeneutic circle upon the moment a topic addresses them (Gadamer, 1960/2004). When we are taken up into the hermeneutic circle to better understand a topic, we recognize it has something to say to us (Moules, Field, McCaffrey, & Laing, 2014). The address of the topic is quite powerful in hermeneutics as it is the topic – the thing that grabs us and asks something of us – that is unshakeable. It typically starts when something happens to us: the witnessing or first-hand experiencing of a phenomenon followed by curiosity (Laing, 2013; Moules et al., 2014). Curiosity becomes one or several questions that cannot be ignored. For example, I had made many attempts to not explore identity as I knew it was a large concept, and yet I continued to come across the topic in my previous research work. The topic had me



before I knew or even acknowledged it and despite my resistance to it, the topic made a call that begged to be answered much like the play between African drummer and dancer.

The hermeneutic circle is a metaphor for the process of understanding in general. Grondin (1999/2003) emphasized that Gadamer used the same language as Heidegger to describe the process, but Gadamer saw it as a constantly evolving and changing process rather than a fixed circular motion. Heidegger offered a circle metaphor with the idea that the person always moves back to the particulars or the whole of a topic, clarifying his/her understanding with each movement. However, Gadamer (1960/2004) suggested that a person's interpretations and understandings change with each encounter of the whole and its particulars. With each encounter, the person reflects on his/her interpretations informing his/her understandings. Through this reflexivity, individuals never arrive at the whole or particulars from the same position, perspective, or understanding (Grondin, 1999/2003).

The hermeneutic circle is an important concept for researchers as they seek to understand their topic. For the current research study, I began this cycling between the wholes and the parts from the moment I was addressed by the topic and started to curiously explore it. Therefore, in the hermeneutic sense, I started my research process to understanding my topic simply by making the conscious choice to pursue it, remaining open to what it had to teach me. To guide my scholarly approach to the topic while staying true to hermeneutic philosophy in application, I developed the following research question: *How might we understand adolescent identity construction in the context of living with a parent with an ABI?*

### **A Hermeneutic Practice: Application to a Research Design**

I chose to use hermeneutic inquiry based in Gadamer's philosophical hermeneutics for a variety of reasons. First, my personal positioning in viewing the world through a postmodern

lens courtesy of my clinical training in counselling meant that I already recognized that there is no single truth, but multiple truths. Postmodernism was founded on the idea that there were many truths to a story as there were always multiple perspectives of the same event (Chang, 2010). However, as human beings, we could never fully know the single objective event without our subjective interpretations (Chang, 2010). Therefore, postmodernism and hermeneutic philosophy were well-aligned as hermeneutics also was founded in the idea of multiple interpretations reflecting our personal understanding of any particular phenomenon. As this was an attitude that I subscribed to in my therapeutic work, it made sense that my research work would follow suit in the interest of my professional congruence. In addition, for my MSc thesis, I had already utilized an interpretive phenomenological method (i.e., heuristic inquiry; Moustakas, 1990), which allowed me to use my experience as an insider to understand the phenomenon. By engaging in such research, I came to appreciate the assumption that I am always interpreting experiences of the world, and I valued being able to conduct such research accordingly. In other words, I could own my experiences and use the knowledge gained from such experiences to explore and develop understandings of phenomena while also challenging my knowledge to expand my understandings of phenomena.

In addition, I viewed identity and adolescents –the key concepts of my research question – from a social constructionist perspective which was also consistent with my post-modern training. Social constructionism, as described in Chapter Two, was an amalgamation of philosophical input that was guided by the principle that all meaning is constructed and negotiated in the social and cultural context through language (Lock & Strong, 2010). As hermeneutic philosophy had contributed to the social constructionist paradigm, it follows that hermeneutics would also share this perspective and emphasis (Lock & Strong, 2010; Strong,

2014). Both hermeneutic and social constructionist scholars shared ideas about language, conversation, and social interaction shaping our understanding of the world. While social constructionists focused on how meaning was developed through social and cultural interactions with language as a central feature, hermeneutists also incorporated historical influences as well as the role of personal reflection and interpretation in meaning making (Strong, 2014).

Hermeneutic inquiry was well suited to address the topic because I sought to understand the phenomenon of adolescent identity construction in the context of living with a parent with an ABI while considering social, linguistic, cultural, and historical influences (Gadamer, 1960/2004). Also, I wanted to consider both the parts and the wholes together to reveal what was at play within the topic, thus enhancing a deeper and unique understanding of this experience. My goal was to continue the conversation about the phenomenon to raise awareness of and illuminate the topic. As such, hermeneutic inquiry inspired by hermeneutic philosophy was the most appropriate method to apply to my research question and to better understand the topic of address.

Given my rationale for applying hermeneutic inquiry to respond to my research question, I created a research design that I believed was best suited to investigate the topic. The reader may notice my intentional usage of research design instead of the more qualitatively common word, *method*, to describe my research activities. My choice of wording is informed by Gadamer's (1960/2004) usage of *method* to convey an application of hermeneutic philosophy, and I use *method* accordingly. However, I also chose to use *research design* to describe the specifics of how I have conducted the research using hermeneutics as a method.

To clarify how I developed an understanding of this topic, I discuss the specifics of my research design. Specifically, I begin by disclosing the role and influence of my personal

experiences and perspectives on the research process as an insider to the phenomenon. Then, I share my participant recruitment process, participant demographics, the interview and analysis processes, and rigor as it pertains to this study.

### **Role and Influences of My Insider View: A Note about Prejudice**

In approaching this topic that addressed me, it was important for me to acknowledge the prejudices that I carried into the hermeneutic circle. Gadamer (1960/2004) would also argue that it is impossible to know all prejudices influencing persons applying hermeneutic practices; however, one needs to be ready and willing to abandon them when confronted with information that is different from one's prejudices and early understandings. Therefore, it was important to acknowledge that I am influenced by my previous experiences living with a parent with an ABI in my adolescence and my previous research into this area as well as my professional training in counselling psychology. As is expected of previous history and experiences, I saw these influences as both a strength of the research as well as something to continuously challenge me to remain open to new perspectives.

The call to this topic was strong to begin with because of my personal experiences with the phenomenon. Despite my attempts to reject the topic due to my own fear of opening up what I had previously closed, I found myself continuously drawn to the question of why the participants in my master's thesis research had all stated that they were different people because of their experiences of living with their parent with an ABI. I was also drawn to the fact that I had more questions about the troublesome side of the phenomenon – an element of my thesis research that I was hesitant to explore. After noticing my attraction to these questions and admitting that I could not let them go, I chose to explore them further to better understand the transformative power of the phenomenon that led individuals to state that they felt like different

people after their parent incurred an ABI. However, I was also prepared to be challenged by alternative possibilities.

As expected, my perspectives as an insider to the phenomenon guided many parts of my research activities including participant recruitment, the interview questions and process, my analysis, and my writing of this entire dissertation. In particular, I used my personal experience and professional training to inform how I sought participants and what questions I intended to ask, as well as the questions that were spontaneously created in conversation. I was open about my own experience with potential participants, which I believed helped the participants be open with me about all facets of their experiences including the troublesome elements that I avoided in my thesis research. I believe my insider experience as well as my prejudices helped me ask questions about difficult, vague, and unclear topics to support the creation of meaning and understanding of the phenomenon. My insider experience also helped me seek and explore difference in the extraction of information that later developed into my interpretations as I did not want to confirm my own experience, but rather deepen and expand my understandings of the topic. In other words, I was guided by Gadamer's concept of a fusion of horizons in my work as I wanted to see what was beyond my horizon based on what others had shared with me.

Although there were many similarities between my previous experiences and understandings and the newly shared experiences of the participants, the angles and perspectives were different, and it was important for the rigor of the study to honour those differences as well as similarities.

To ensure that I was not completely ruled by my own perspectives, I frequently revisited the transcripts and journaled to clarify where my interpretations were coming from. In addition, I explored the research literature to actively deepen my creation and understanding of the interpretations. In combination with conversations with my supervisory committee members, I

used these strategies to remain open and diligent to recognizing support or challenges of my prejudices as well as to completely new perspectives.

### **Recruitment and Participants**

To find participants who could inform me about the topic, I needed to recruit individuals who were adolescents at the time their parent acquired a brain injury. I sought adults aged 18 to 50 years who were aged 10 to 19 years at the time their parent incurred an ABI. I chose adults currently aged 18 to 50 years because I wanted to include individuals who were in their emerging, young, and middle adulthood. People in these developmental categories have been found to be reflective of their experiences in different ways. Individuals in emerging and young adulthood are still in the process of exploring their identities, yet, can reflect on their identity construction (Luyckx, Goossens, & Soenens, 2006). Individuals entering middle adulthood tend to become more reflective of who they were in relation to their experiences (Srivastava, John, Gosling, & Potter, 2003), and as such, their previous transitional experiences continue to influence their sense of self as they reflect on their adult selves (Perrig-Chiello & Perren, 2005).

Furthermore, I required that the participant's parent incurred an ABI a minimum of two years prior to the interview. Previous ABI research suggested that families tend to experience considerable upheaval within the first two years of ABI recovery because of the amount of change that can occur as families attempt to adjust to the changes in the individual with an ABI (Arango-Lasprilla et al., 2008; Carnes & Quinn, 2005; Orto & Power, 2000). Although some elements may become more manageable for families after the first two years, individual recovery is ongoing (Birkett & Storrie, 2012). In addition, trauma researchers suggested that people struggle to reflect on their difficult life experiences as well as the influence of such experiences while still in the thick of managing the crisis (Baranowsky et al., 2011). Therefore, participants

were required to have had some time to adjust to their and their family's new circumstances and to be beyond a prolonged sense of crisis management prior to participating in the study. It is important to note that retrospective accounts are different from current accounts. By looking at retrospective accounts of adolescent identity construction, I anticipated learning about how the participants understood and made sense of a past process.

To access this hidden population, I used a combination of advertisements about the study, word of mouth, and snowball sampling to recruit participants in the Calgary area. I sent email communications to key contacts (i.e., executive directors, directors of research, supportive services team leads, supervisors of frontline staff) of various brain injury and disability service agencies including the Association for the Rehabilitation of the Brain Injured (ARBI), the Southern Alberta Brain Injury Society (SABIS), Supportive Lifestyles, and Community Neurorehabilitation Services (CNS). In addition, I contacted several counselling service agencies including Calgary Counselling Centre, Catholic Family Services, and Jewish Family Services. In my initial email communication to these key contacts (see Appendix A), I had included an information sheet to be distributed to staff regarding the research project (see Appendix B) as well as the research poster (see Appendix C). Service providers were given information about the study including participation criteria and requirements to relay to their clients while emphasizing that participation would not affect their services.

To recruit participants who might not have accessed supportive services, I mounted posters in post-secondary institutions in the Calgary area including Southern Alberta Institute for Technology (SAIT), Mount Royal University, and the University of Calgary (U of C). I also mounted posters in a variety of coffee/tea shops around the city. Posters included participation criteria and participation commitment. I utilized social media outlets such as Facebook and

LinkedIn to advertise for my study and recruit potential participants (see Appendix D).

Finally, I was also able to advertise the continuation of my previous master's research, which helped advertise for my doctoral research using UToday, a U of C based daily publication that is available online, as well as media coverage including a radio interview on CJSW and CBC news radio, CTV news, and Global news. As the media coverage generated interest prior to having ethics approval, I had informed interested parties that I could not conduct the research until my current proposed research study was approved, at which point they could choose to participate or not participate in the study. When I was able to start the research, I contacted potential participants who expressed interest in the study prior to ethics approval by sending a recruitment email designed for this group (see Appendix A). Finally, some potential participants had contacted others within their personal network who fit the participation criteria with the hopes that their peers could also participate in the study.

Interested individuals were instructed to contact me directly for more information about participating in the study. Participants were asked to provide informed consent both verbally and in writing in accordance with the Tri-Council Policy Statement (see Appendix E for the participation consent form; CIHR, NSERC, & SSHRC, 2010). Participants who could only participate in a telephone interview instead of an in-person interview were asked to mail the consent form to me and to provide audio-recorded oral consent with me on the phone using an approved script (see Appendix F). All participants were made aware of the purpose of the study as well as their role as participants, and they were informed that they would have the right to withdraw from the study up until I started the analysis process. They were cautioned that their information might still influence my thinking and understanding of the topic informally as this is unavoidable when using hermeneutic inquiry. Participants were informed that their participation



and their specific information would remain confidential with only myself and my supervisory committee having access to their information. Participants chose pseudonyms to protect their and their families' identities and were cautioned that those who knew them well may still be able to identify them. The participant pseudonyms are used throughout the interpretive writing to credit the participants' quotes.

In addition, participants were assured that their participation would not affect their or their family members' access to services because their information would remain confidential. Participants were informed of the limits to confidentiality: if they disclosed knowledge of a child or dependant adult in an abusive situation or that the participant was at risk of imminent self-harm or suicide, or imminent harm of others, I was ethically obligated to inform proper authorities to ensure all parties involved were safe. Finally, participants were informed of proper storage precautions as per the Tri-Council Policy Statement (CIHR, NSERC, SSHRC, 2010) and that the information they provided would be used for future publication manuscripts and presentations at conferences. Participants were informed of the risks and benefits of their participation. If individuals agreed to participate, we scheduled an interview to take place at the U of C. This study was approved by the Conjoint Faculties Research Ethics Board at the U of C (CFREB).

**Participant demographics.** Participants for this study were persons who were knowledgeable informants of the topic of adolescent identity construction in the context of living with a parent with an ABI. A total of nine people chose to participate in the study. Six participants identified as female and three participants identified as male (See Table 1 for participant age demographics below).

Table 1: Participant Age Demographics

Category	Mean (yrs)	Range (yrs)
Age at Time of Interview	30.1	22 -37
Age at Time of Parent ABI	13	11 – 19
Time since Parent ABI	17.1	10 - 25

The participants shared that the time since their parent's injury that resulted in noticeable changes ranged from 10 years to 25 years. Though this large gap in time since the injury was a source of concern at the time of participant recruitment, it was later revealed with the analysis that many participants needed more space and time from their experiences to reflect effectively on how their experiences with their parent shaped their sense of self and identity. In other words, each participant was reflective and able to inform the topic effectively despite the passage of time as it continued to have an effect, even 25 years later. Of the nine participants, two were siblings, meaning that nine stories of eight parental ABIs were shared.

Of the eight parents with an ABI, six incurred their injury by being struck by or against objects via motor vehicle accidents, falls, or repeated concussion caused in a variety of ways. Another parent was reported to incur an ABI resulting from an aneurysm due to a complication after the removal of a brain tumour. The last parent incurred her injury in a manner unknown to the participant as he was not included in the information exchange, but the parent's ABI was confirmed by medical professionals shortly after her sudden decline in functioning. It is important to note that the experiences of ABI are diverse due to the location and severity of injury, pre-existing conditions, complicating factors in recovery, and countless other influences (Prigatano, 2005). However, I decided to not focus on this diversity as I believed it would detract from the topic being addressed. Therefore, ABI has been discussed as though it is a

singular experience shared by all the participants to simplify the discussion and maintain a focus on the topic.

All the participants identified as Canadian first, while some added secondary ethnic identities. Three participants also identified as having Scottish heritage, two with Finnish heritage, one with French Canadian heritage, and one with Jewish heritage. All the participants also identified as Caucasian.

### **Interviews and Analysis: The Dialogue Begins**

Participants engaged in a 1-2 hour, semi-structured, audio-recorded interview with me. I collected demographic information such as current age, years since parent's injury, type of ABI, ethnic/cultural background, and family composition. In the interviews, participants were asked to reflect on their stories informing their self and identity before, during, and after their parent's injury (see Appendix G for interview questions). I intentionally chose not to use "identity" in my interview questions because I recognized it as an ambiguous and frequently confused construct in Western society (Cushman, 1995; Gleason, 1983; Serpe & Stryker, 2011). I also recognized that "identity" could be considered jargon, and thus, unclear to my participants. Therefore, I used language that portrayed my own meaning of identity in terms of the research topic. The wording of the research questions was influenced by my understanding of identity construction and the experience of living with a parent with an ABI created by my previous research work and review of the literature. For example, I used language such as "describe," "change," and "shape" in relation to "yourself" or "you" to address the content and process of identity construction in plain language. I also chose language such as "before ABI" and "after ABI" to reflect my understanding of the topic and explore the change after such events. However, this assumption was challenged by the idea that ABI may not always be a definitive

moment or a single critical incident, but instead, there may be several events related to the ABI that occur over longer periods of time.

In each interview, I was guided by the topic, making an effort to keep the topic in the forefront of all discussions (Moules et al., 2015). One participant was approached for a second interview to clarify details from the first. Although the interview was semi-structured, I aimed to have a guided dialogue with the participants with the spirit of a genuine conversation (Binding & Tapp, 2008). It is important to note that it is impossible to have a truly genuine conversation as Gadamer (1960/2004) described when conducting research interviews because interviews are intentionally conducted with a clear purpose guiding the conversation rather than remaining open to where the conversation goes. Therefore, as a researcher, it was important for me to find a balance between guiding the conversation and allowing the conversation to flow within that guidance. It was also important to acknowledge that the conversations taking place during the interviews shaped the way both researcher and participant storied and understood the experience.

Each interview was transcribed verbatim to formally begin the analysis. However, it is important to recognize that the analysis occurred before, during, and after the interviews took place (Laverty, 2003; McCaffrey et al., 2012). I could not and would not stop myself from being influenced by the conversation that took place as both the participant and I were changed due to our dialogue (Gadamer, 1960/2004; Lock & Strong, 2010). Therefore, I conducted each interview based on the knowledge and understandings gained from my previous research, the research literature, and previous interviews so that I could address the gaps in my understanding and create space for new meanings (Binding & Tapp, 2008).

**The analysis and development of interpretations.** While approaching the data, I was reminded that I arrived at this research with considerable knowledge of the topic. I had personally experienced being an adolescent when my parent experienced an ABI. I conducted my master's study on the topic and I had read extensively on it. This, of course, had influence on what I was looking for in the interviews but Gadamer (1960/1989) would have offered that it is exactly our prejudices that allow us to see what we are able to see.

Gadamer described prejudices as prejudgments that exist or are rendered before all other situational elements are examined. Unlike the notion of bracketing, we do not hold our prejudices in abeyance but think with them and we situate them in our understandings. Our prejudices allow us to hear something we would not have heard otherwise, they determine what we can recognize, and they provide our access to the world. (Moules et al., 2015, p. 121)

This is not to say that I only saw what I expected to see. Though we see everything in the world through the lens of our prejudices, we are always open to the newness that comes to meet us. We are delighted when what we thought we knew is overturned, or when we learn something new. "Prejudices and positions are there to be tested" (Moules et al., 2015, p. 121). This is the process of the fusion of horizons when what I bring and what the participant brings serve to open the horizon of what can be understood about the topic.

The analysis and interpretations were based on what spoke to me (i.e., something that captured my attention) and how that related to all the knowledge I had gained from exploring the topic and its history. Therefore, the analysis entailed the practice of reflexivity, transcripts review, journaling, ongoing conversations about the topic, meaning-making of the data from my engagement with the hermeneutic circle, and active interpretation of the information shared by

the participants about the phenomenon (Laverty, 2003). It is important to note that not all the participants needed to be represented in each interpretation. As Moules et al. (2015) stated, “sometimes, a particular word or turn of phrase, in the context of an interview transcript, might be enough to suggest that there is potential for reflection, questioning, and elaboration” (p. 128). The interpretations are created with a focus on what the participants have to say about the topic. Thus, only one participant needs to offer something that encourages the researcher to further reflect on what that phrase means and how it might contribute to understanding the topic.

To create interpretations, I started by reviewing each transcript while listening to the audio recordings. I made notes in the margins of my transcripts to develop ideas and highlighted the statements or general themes that caught my attention in relation to the topic. After reviewing the transcripts and audio-recordings several times, I found myself realizing that I kept highlighting the same parts that spoke to the whole of the topic. Upon this realization, I knew I needed to engage in further reflections and reading of literature to deepen my understanding and broaden my horizons. I also consulted with my supervisor to discuss my analysis process as well as some preliminary ideas for interpretations. Through these conversations both on paper and in-person, I was able to acknowledge and challenge my prejudices as needed, and I revisited the transcripts. From within this process, I developed six interpretations that I believed spoke best to illuminating the topic of understanding adolescent identity construction in the context of living with a parent with an ABI.

For each interpretation, I immersed myself in the research literature keeping my reflective journaling nearby to help me stay on topic and to draw me back to the purpose of reading. I often compared this process to falling down multiple rabbit holes just like Alice did in the Lewis Carroll (1865/1988) story of *Alice in Wonderland*. Alice followed her curiosity which

resulted in following the white rabbit down a hole to a completely different land. In those moments of curious exploration and attempts to make sense of the data, I identified with Alice as I continued to follow my curiosity and expand my reading pool to areas including poetry, reflective editorials about artwork and world events, YouTube videos, and academic literature. With each rabbit hole, I discovered that these unconventional sources helped me gain a better understanding of what my participants talked about, which only deepened my understanding of the topic. Each interpretation evolved as I wrote it, connecting all these data sources to the lessons hidden within a previously concealed topic. I started to see the topic slightly differently in that parental ABI was not the sole contributor to adolescent identity construction, but rather, one highly influential component that shaped adolescents' daily interactions.

### **The Rigor of Hermeneutic Inquiry**

Hermeneutic inquiry can be misunderstood for being overly “subjective” and not sufficiently rigorous in the traditional sense of the word. Rigor in hermeneutic inquiry means the extent to which the claims made are believable and trustworthy (Madison, 1988; Moules et al., 2015). Though most qualitative research is assessed on four dimensions to determine its trustworthiness (i.e., credibility, transferability, dependability, and confirmability), the rigor of hermeneutic inquiry cannot be judged based on all four dimensions (Vivar, 2007).

Dependability (i.e., the degree of consistency should the study be repeated) and confirmability (i.e., the objectivity of the data) are philosophically incongruent with assessing rigor of hermeneutic studies because no two hermeneutic studies are expected to be alike. Gadamer (1960/2004) argued that, through conversation, individuals are more likely to develop similar ideas, yet the ideas may still be interpreted differently because each person is a unique combination of personal prejudices, history, and experiences. Therefore, hermeneutic studies are

not repeatable nor objective by design and cannot be judged against such criteria. As noted by Moules et al. (2015),

Rigor in this context does not show itself in a strict adherence to an inflexible method, or in absolute and precise findings that can be replicated to authenticate them, but rather in attention to a cohesive, comprehensive, cogent, and expansive contribution to understanding of the topic (p. 172).

Furthermore, according to Moules et al. (2015), in hermeneutic research,

the goal is not to describe the participants fully, nor to conserve their stories and experiences intact, but rather to listen to what participants have to say for that which will cast new light on the topic and expand our understanding of the phenomenon....

Therefore, an interpretation made by the researcher does not need to be authenticated by the participant. Rather, its authentication comes from the fact that it has opened up new possibilities for seeing and doing; it has “enlivened” practice. (pp. 123-124)

Therefore, using dependability and confirmability would be counter to the goal of hermeneutic research.

Credibility and transferability would be reasonable criteria by which to judge the rigor of hermeneutic studies. Credibility refers to the authenticity of the data in that the data need to reflect the participants’ experience of the phenomenon being studied (Vivar, 2007). While in other qualitative studies researchers may ask their participants to review their findings and interpretations to confirm or correct them, this is not a requirement of hermeneutic research. Rather, as suggested by Moules et al. (2015) in the above quote, the credibility of a hermeneutic study comes from enlivening the topic. In this study, any interpretations developed were supported by passages from the interviews to ensure that my interpretations were well-founded



in the data as well as the existing literature. It can be easy for hermeneutic researchers to become tangential in their writing and interpretations, so it is critical that it is always brought back to the data that inspired the interpretation and the research question. A hermeneutic study is credible when other people who have experienced a similar phenomenon recognize themselves in the interpretations, demonstrating something true about the topic.

Transferability refers to “the generalisation of the study, denoting the extent to which the data are relevant to a number of contexts” (Vivar, 2007, p. 68). For hermeneutic studies, the goal is not to generalize our understandings to all possible contexts. Rather, as Madison (1988) stated,

All interpretation is under the promise of truth... When we opt for a given interpretation, we do not do so because we *know* it to be true... but because we believe it to be the best, the one which offers the most promise and is the most likely to make the text intelligible, comprehensible for us. (p.15)

Transferability for hermeneutic work, then, is the extent to which one who has experienced the phenomenon can recognize his/her own story within the interpretation because there is truth within it (Caputo, 1987). To ensure my study was both credible and transferable, I continuously referred back to my data asking myself the question, “What was said that made me come to this conclusion or idea?” This helped me ensure that my work remained representative of the participants’ perspectives while also adding my own interpretation based in scholarly research as well as my personal experiences.

Madison (1988) also noticed a lack of clear guidelines for gauging good interpretive research as many existing guidelines for rigor were heavily influenced by quantitative research, which does not support the idea that there can be multiple truths. Therefore, he offered nine

criteria for good interpretive research: coherence, comprehensiveness, penetration, thoroughness, agreement, appropriateness, contextuality, suggestiveness, and potential.

Coherence refers to interpretations that present unity without contradiction. If contradiction exists, it is addressed. For the current study, this meant ensuring that the interpretations were not contradicting each other, but instead, were presenting clear understandings of the experience.

Comprehensiveness refers to the interpretation being intelligible and understandable while penetration refers to an interpretation being clear in its intention. I addressed both criteria predominantly through discussions with my supervisor and peers who helped me clarify my ideas while I was writing in addition to having my supervisor and supervisory committee review my findings to ensure these criteria were met. This same process was also helpful in addressing thoroughness – the attempt to answer or deal with all the questions left in interpretations – as well as agreement – the extent to which the interpretation fits with the argument that the author is making.

Madison (1988) went on to explain that good interpretations are also appropriate for the research question, the topic, and the questions that the text itself raises (i.e., appropriateness). In this study, I used multiple reminders while creating interpretations to help me stay focused on the research question as well as the questions that arose throughout the process that are connected to the topic. I aimed to address this criterion with every interpretation answering different parts of the question as it became apparent to me through the data collection process. I also ensured that I was grounded in the history and literature connected to the topic which led me to fulfilling the contextuality criterion (i.e., interpretations offer the historical and background information pertinent to understanding the interpretations). The last two criteria, suggestiveness (i.e., the potential generativity of the interpretation in that it may raise questions for future research) and

potential (i.e., the extent to which the interpretation can lead to application and remain true in practice) were addressed when considering future implications for research and practice in the final chapter of this dissertation.

Keeping transferability, credibility (Vivar, 2007), and Madison's (1988) standards for good interpretations in mind, I aimed to ensure the rigor of my interpretive research process. Each interpretation was created with these principles in mind to help guide the scholarly work and manage the influences of my prejudices. It is important to note that the interpretations presented in this dissertation share one perspective of adolescent identity construction in the context of living with a parent with an ABI: my own understanding of the phenomenon. The beauty of hermeneutic inquiry is that this work sparks conversation to illuminate more truths to continue to evolve our knowledge of the phenomenon.

### **Summary and Concluding Remarks about Hermeneutic Inquiry**

Hermeneutic inquiry has a significant history that contributed to its use in human science and practice-based disciplines. After exploring the contributions of Schleiermacher, Dilthey, Husserl, and Heidegger to hermeneutic thought, I chose to use Gadamerian philosophical hermeneutics to guide this hermeneutic study to understand adolescent identity construction in the context of living with a parent with an ABI. Guided by this approach and with reflexive and scholarly interpretation of all the data collected (i.e., literature, interview transcripts, and consultations), I developed an understanding of this human experience using a research method well-suited to unveiling previously concealed truths about the phenomenon. This is not to say that this understanding is *the* understanding, but rather, it is one way to interpret the phenomenon. Therefore, I intended to not only understand what is at play within the topic, but

also contribute to conversations about how we might understand adolescent identity construction in the context of living with a parent with an ABI.

### **A Change in Focus**

At this point in the writing process, I am moving from the technicality of methodology, method, and research design to an intense focus on the topic in question. This change is reflected in the content, and the style and tone of writing. I intend to reveal my understandings created from the rigorous process of hermeneutic inquiry to answer my research question. The reader will note that Chapters Four to Nine will reveal parts of this understanding with a total of six interpretive writing pieces that disclose my findings of this research endeavour. Though this structure diverts from traditional dissertation structures (i.e., the five chapter model), it is important to note that hermeneutic studies can be structured based on the writer's judgment of how best to represent the lessons learned from the process of doing a hermeneutic research study focused on the topic of address. Therefore, each hermeneutic study may follow a different format in conveying the findings of the research activities because each topic demands different things from the researcher and each researcher brings new things to the topic. As such, I chose to present each interpretation in separate chapters to not only make the findings more easily understood, but also to convey the way that I came to understand the topic. Each interpretation was created and written to share interpreted knowledge and insight about the phenomenon from an insider's perspective of adolescent identity construction in the context of living with a parent with an ABI.

## CHAPTER FOUR: WHAT IS “NORMAL” ANYWAYS?

*Normal is nothing more than a setting on a washing machine – Whoopi Goldberg*

The above quote is a commonly shared saying – a North American proverb if you will – that suggests that normal has no place in describing things other than a setting on a washing machine. In the psychology world, normal often refers to the average of a group. Psychology, as a developing research field, used the scientific method to better understand the inner workings of individuals. Therefore, to describe the range that most people would fall within when measuring a particular phenomenon, psychology researchers adopted the term normal. Normal is applied to a variety of human experiences such as age, development, reactions, mental and physical health and illness, relationships, families, and so many more. However, with a focus on what is normal, we lose valuable pieces that can help us understand our humanity (Gadamer, 1960/2004; Jardine, 1992). Sometimes within the abnormal, we can learn new truths about ourselves and our experiences.

Therefore, understanding normal became a logical starting point in discussing adolescent identity construction, as this idea of normal (i.e., a normal adolescent, a normal person, a normal son) became an important component of the participants’ narratives that included socially prescribed meanings of the concept. Throughout the interviews, the participants spoke of “normal” as a reference point. Normal was informed by social discourses shared by their families, parents, peers, social groupings, culture, and society indicating how things are “supposed” to be in the world. Simon described comparing his experiences with those of his friends, only to realize that he was not experiencing a normal family life:

I think I looked at what other friends' families were like, and how normal they were... just you know, going over to a friend's house, you know, like, not, it not being an issue, you know. Like, you know, talking to people's parents like having it be relatively okay. Families going on vacation... then just you know, kind of looked at what was happening... It was just like, you know, this is not how things should be.

Adolescents tend to be more pre-occupied with what is considered normal or abnormal as there is a strong desire to fit into a particular peer group (Hendry & Kloep, 2012). Therefore, it follows that adolescents would have developed some conceptualization of normal as a reference point for themselves and others regarding many forms of behaviour and experiences. This idea of normal helps them to make sense of their experiences, yet can also be damaging based on the social discourse regarding abnormality in adolescence.

In fact, the research literature is ripe with language regarding normal and abnormal adolescent development and behaviour. Most of the research in the last 30 years has focused on troublesome or abnormal youth experiences with an occasional spattering of typical, non-challenged adolescent development, suggesting to the reading audiences that abnormality is the norm. However, as Arnett (1999) poignantly described, noticing this trend almost 20 years ago, adolescence has traditionally been dubbed the age of storm and stress – a term that has since been criticized because statistics have demonstrated that most adolescents become fully functioning adults without many worrisome difficulties. Arnett argued that the research literature is partially to blame for the narrative that most adolescents are troubled by the developmental transition to adulthood as the focus of much adolescent research has been on problem development in comparison to normal development. Therefore, it seems this well-known narrative is incomplete and unbalanced.

However, there is evidence suggesting that emerging adults in post-secondary schools specifically are demonstrating increased mental health concerns because they have had few opportunities to build resilience during adolescence (MacKeen, 2011). MacKeen further suggested that youth mental health efforts have increased with the intention to protect adolescents from the challenges of their transition to adulthood, but such efforts have also resulted in limiting exposure to the exact challenges that help them develop effective coping and stress management strategies to incorporate into their adult lives. Therefore, upon entering post-secondary school, emerging adults have struggled with fewer resources for support and fewer ways to independently manage the challenges of post-secondary experiences.

Why is our positioning regarding normal and abnormal relevant to understanding adolescent identity construction? Identity is co-constructed and therefore, to position oneself between same as, and different from, others as Bamberg (2011) suggested, one must understand normal as a reference point within this context. It is an interesting cultural tension as we want to be the same and different simultaneously due to our individualistic cultural norms in North America. One hopes to be normal and abnormal in a variety of ways, and there is still a cultural understanding of what is an acceptable level of abnormality. This phenomenon is most evident in adolescence as group membership begins to take precedence in developing social relationships (Hafen, Laursen, & DeLay, 2012), creating a sense of belonging amongst peers. In a way, this fosters one's sense of normal. Willow described feeling more comfortable when she found her friendship group in high school, which helped ease the feelings of strangeness and "weird" in other areas:

And then in grade 11, it was like, I had found my entire posse of cool chicks that wanted to go to shows with me and wanted to make CDs and tape mix-tapes with me and stuff.

And so, I... dyed my hair black and did dreadlocks and then got two lip rings and two nose rings and all this other stuff. And so, but I didn't feel weird. Like my girlfriends were all really supportive of me... I didn't really think about like, I didn't think I was weird, you know? I thought that I was like, I like this and it's fun... me and my girlfriends went to shows and guys would really hate that, and they would pick on my girlfriends and all us posers and stuff. And because I was always the big one who was like, scary, I'd always be the one who was like, "What? You have a problem?" ...So I mean, I felt like I was a protector of these like, five or six women who were just like my great girlfriends... We were like this little posse of like badass bitches (laughs).

In finding a peer group that accepted her, she stopped feeling alienated from herself and instead adopted her unconventional self-presentation as a part of her identity. It was through her group membership that she was able to not "feel weird" and, instead, feel normal amongst her peer group who served as a reference point for normal. In a way, she would be considered both normal and abnormal given that she identified with a sub-cultural group in the heavy metal scene and had a sense of belonging within that same group. Though it may be expected of adolescents to have a desire to fit in to a particular group, I suspect it is especially important for adolescents living with a parent with an ABI.

Based on previous research, we know that adolescents only rely on their parents for guidance and support throughout their adolescence when a parent-child relationship is secure, supportive, and authoritative (Faber et al., 2003; Moretti & Peled, 2013). However, when that relationship is disrupted or the family home experiences increased levels of stress, the adolescents then turn to their peers for ongoing support and guidance (Ciairano et al., 2008; Levitt, Silver, & Santos, 2007). Peers and social cultures become the primary source for what is



considered normal and acceptable behaviour. When a parent acquires a brain injury, the adolescents are more likely to turn to their peers due to a loss of support and stability within the family home (Freeman, 2012). As demonstrated by the participants, peer support became critical in creating a sense of normal when home was anything but normal.

When peers become points of reference, however, the adolescents begin to recognize their sameness and their difference (Bamberg, 2004b, 2010a) in all areas of self and identity construction. One particularly dominant point of discussion during the interviews was regarding the participants' sense of maturity in some areas and immaturity in other areas in comparison to their same-aged peers. Cyrus described his experience of this unique tension:

Because you feel like you grow up so quick because you have to look after them. Um, but you also feel like you get a little bit of resentment and you feel jealous of your friends. Like you see them having fun and all that (pauses)... Like you want to grow up to help, but at the same time, you want to stay a kid. You want to have fun. But it becomes very difficult. It shapes you into being stronger and independent, I find. I feel like I can deal with a lot more, and I feel just basically growing up that much quicker.

Like I see some of my friends that still haven't grown up.

By accepting and performing the duties and expectations demanded of him by his family system, Cyrus developed a sense of maturity that surpassed his peers. Most participants also identified that growing into a mature young person as an adolescent came at a cost. Ruth explained,

And there have been times where I did step up to the plate, and then you get the, like, the congratulatory, like, "good job, you are handling things really well!" It's hard to be like, crashing (tearful). And not like, "if you save me from this, I'd be really appreciative,"

but like, it's not really something you are equipped to do when you are that age. So, pretty much, it's easier to take it.

As a result of struggling with these new duties at a young age, the adolescents may suffer silently in an effort to simply maintain the peace at home. I think this also suggested an attempt to maintain the appearances of normalcy on the outside – by pretending to “handle things really well” so as to not cause alarm. By not opposing the imposed narrative of “handling things really well,” adolescents can continue to manage the images they portray, despite their internal struggles. They can appear as “normal” to protect themselves and their families from suspicion or systemic involvement similarly to other young caregivers in Canada (Charles, Stainton, & Marshall, 2012).

Participants also described an interesting consequence of accepting duties and responsibilities that enhanced their maturity through the experience. Several participants disclosed feeling psychosocially delayed in some areas of their lives. For some, it was in their social interaction, while for others, it was their ability to effectively process and manage emotions. Catherine stated regarding her romantic relationships:

Not socially, in terms of friendships, but I would say romantically socially, definitely stunted... It took me a long time to really be comfortable with anyone like that. I think, and because that, I mean, I was at that age when those are the things you talk about, my mind was elsewhere.

Catherine openly acknowledged that romantic relationships simply were not part of her life during her adolescence or young adulthood because she needed to focus on other things such as her father's wellbeing, followed by his death. Another participant, Elizabeth, described her experiences in recognizing her own emotional delay:

And so that was the biggest thing – was like, repressing and uh, like doubting my own emotional reaction to things. And uh, dealing with that, like, that's what has taken me like 20 years to start dealing with. Like, not letting myself react genuinely or authentically... Like doubt the legitimacy of a reaction when it first comes up.

This delay in comparison to what is believed to be normal developmental progress and experiences was troublesome for the participants as they attempted to find ways to continue their adult lives. The disparity between their increased maturity in some areas and their delay in other areas was confusing as it forced the adolescents turned adults to question their adult-status, particularly as they seek support to remedy the disparity. Ruth explained her own predicament regarding support:

Yeah, I think it's harder to work on it as you get older, though. Like, when I think of it, it becomes less socially acceptable for a lot of things. And for the rest of it, like, you don't really have the resources available to you. Like, especially in University, you have access to good counselling, and like medical support and things like that. And as you get older, it becomes more costly to get access to that.

When the participants had the space and readiness to engage in a process to balance out their maturity with their immaturity in their adulthood, they found they continued to combat a social stigma regarding a slight delay in their psychosocial development. However, this acknowledgement of maturity and immaturity speaks to the continuous self-reflective activities these participants engage in as they contemplated their position in the world in relation to others. In fact, their self-reflective processes suggested that they were being heavily influenced by the social realm for guidance. This seeking of guidance from peers and society is commonly seen amongst children living in families with increased stress and decreased stability (Cairano et al.,

2005; Zarrett & Eccles, 2006), so it follows that these youths would seek social cues and guidance from society to gauge their progress towards normal.

Given what we know of how these participants engaged in their experiences with their families influenced by an ABI, the disparity between maturity and immaturity is a logical result of the choices that they needed to make as adolescents. They dropped many of the typical activities that might have helped them story various parts of their selves and their identities in an effort to grow up quickly. Therefore, they emulated their understanding of “grown-up,” putting energy into becoming an adult as an adolescent rather than developing other necessary areas such as emotional regulation and appropriate romantic behaviours in relationships. As such, while some areas were intentionally developed, there was simply not enough space, time, or energy left for the participants to engage in further self-development beyond what was immediately necessary for survival in their respective situations.

In sum, these adolescents are influenced by the family’s well-intentioned guidance into adulthood by placing adult-like responsibility on their shoulders as well as the social and cultural discourses that guide how they are “supposed” to be to become an adult in our society. Further still, the participants demonstrated that adolescents also were highly aware of the disparity between maturity and immaturity, leading to significant confusion regarding their role as an adult, and they struggled to catch up to their same-aged peers without additional formal supports such as counselling. In addition, the participants demonstrated how living with a parent with an ABI effectively shifted their process of identity construction so they relied more so on feedback from society rather than other, potentially less idealistic sources. Such a reliance can create more difficulties for adolescents as they are constantly striving for normal in a society where normal may not exist. With the concept and interpretation of normal in hand, I move on to discuss the

meanings of home as another aspect of self and identity construction. Home, like so many other parts of life, may not be considered an important part of identity construction, yet with the next interpretation in Chapter Five, the reader may begin to consider home differently.

## CHAPTER FIVE: DISRUPTED HOME, DISRUPTED SELF

When the participants talked of not being home, craving to be away from home, and finding other homes in reaction to their parent acquiring a brain injury, I initially believed this was telling of a strong desire to escape their challenging and traumatic experiences. However, one statement uttered by Simon during his interview made it clear that there was something more to be discovered in this narrative beyond simply a need to escape circumstances: “To this day, one of the most relaxing things ever for me is being in a hotel room, just ‘cause I’m not home. That brings me a kind of calm that, ah, I don’t really find anywhere else.”

I remember finishing the interview and returning to my own home. I wondered what it was about being away from home that brought this participant comfort as it was in direct contrast with my own experience of home. I observed myself arriving home after a long day away and noticed I smiled as I was greeted by a familiarity of senses. I smelled the scent of a wooden frame and stone. I heard the call of my husband from another room. I knew exactly where to touch the light switch that would eventually give way to my sight that guides my footsteps on the floor. As I took off my jacket and unburdened my shoulders from my book bag, I gained a sense of peace and comfort that told me, “I am home” amongst the familiars - carefully chosen objects, designs, colours, and layout that all reflect the home that my husband and I negotiated and created together.

However, for Simon, “home” did not mean the same sense of comfort and familiarity as it does for many others (Marcus, 2006; Molony 2010). Instead, it meant being in the unfamiliar, anonymous space that he could reside in with peace. This was his place of refuge - home was away. It became apparent to me through my interviews and reflections that home was more than a place in which we reside containing objects and loved ones. As Heidegger (1927/2010;

1954/1993) argued, objects and design choices are a reflection of our way of being in the world, and therefore, a clue to our knowledge, histories, and selves. One could conclude that home has something to say about our selves and identities.

One way to begin to understand this phenomenon of home as a reflection of self is to consider Heidegger's (1927/2010; 1947/1993) discussion of dwelling as a form of being-in-the-world, or *Dasein*. Heidegger (1927/2010) described *Dasein* as the primary way human beings exist in the world. It entails the ways we relate to our world and the way that our world relates to us. Heidegger explained that *Dasein* is enveloped in a context that pre-exists each person. However, it is the *They* that provides information about how to understand the world into which we were thrown, describing what existence is supposed to be like and how we are supposed to make sense of it. It is the *They* that outlines the expected in everyday life. In many ways, I conceptualize this concept of the *They* as the social discourses that guide the way we make sense of experiences, events, and situations, thus supporting the construction of narratives (de Fina, 2006). The *They*, then, is shared by our parents, families, social network, culture, and society that inform our world based on what is commonly known, thus telling us how we are supposed to understand the world. Heidegger attempted to determine how one can understand *Dasein* without the *They*, yet later authors such as Gadamer (1960/2004) emphasized that one continually informs the other, and thus neither can be separated from the other without losing meaning. The *They* is simply a part of the world into which we were thrown, and therefore, must be considered in how we make sense of the world.

With the concept of *Dasein* in mind, Heidegger continued to explore ways that *Dasein* is expressed. In his 1954/1993 publication, *Building Dwelling Thinking*, Heidegger discussed dwelling as an expression of being, arguing that dwelling is the "basic character of being" (p.

362). Dwelling is defined by the Merriam-Webster online dictionary (2016) as “a shelter (as a house) in which people live.” At first glance, this definition is relatively simple, yet it is interesting that the word “live” is used. Given Heidegger’s reflections on being and dwelling, living *is* Dasein because living includes the way in which we exist, navigate, and understand a world with its pre-existing histories and contexts. Therefore, dwelling, another word for home and house, is integral to our being, and therefore, our selves.

When our dwelling or home is no longer somewhere we can be, then that could result in restricting our being and self-development. This level of disruption can lead to feeling more lost and rootless than ever with the sole source of guidance coming from the They instructing them on what home and family is supposed to be at any age. Simon explained,

I saw how people, you know, how people my age were living. You know, like, you know having people over for dinner parties, having people over for parties... backyard barbeques, whatever. You know, and like, there was another slice of normalcy that I didn’t have... It was just seeing you know, like this is what I could be doing or really what I should be doing... just seeing that people who were on their own like, had good relationships with their parents. They could have them over for dinner, they could talk to them or whatever.

It seems that these adolescents are launched into a period of questioning the They in the face of their current situation of living with a parent with an ABI, likely due to immense dissatisfaction and multiple losses these individuals experience (Butera-Prinzi & Charles, 2004; Freeman, 2012). Similar to the discussion in Chapter Four, by continually comparing their lives to the appearance of others’ lives and constructing a sense of what is normal under such circumstances, I think these adolescents learned to recognize that there are multiple ways of being in the world



that challenge their current existence in the family home. Therefore, being in the family home became much less desirable. Michelle reported ending up living on the streets because the family home was no longer a viable option for her:

I was kinda staying with my mom for a bit so then I met some guy online from the states. He was gonna marry me. I'd never met him, but he was gonna take me to [USA]. So I was going there to marry this guy just to leave. Then, when I couldn't get over the border on my way back, I met this other guy at the bus stop who was like, "you wanna come stay with me at my friend's place?" I was like, "sure." I just moved in with him that day that I met him... turns out he had a big drug problem so he got evicted.... I just kind of stayed following him around for 7 or 8 months until I got pregnant and realized this has to change.... Once I was out there, it's not like I could call my mom and have a conversation with her to be like "this is not good. The situation I'm in." I was being beat up by this guy, like all the stuff happening, but I was like, "well, I can't talk to my mom about it or anything." So I guess it was better that way than being at home.

For many individuals living with a parent with an ABI, actions like those described above were made not only out of desperation for change, but also in search of alternative ways of being in the world with autonomy. They were actions that were not initially intended to redefine the meaning of home, yet, resulted in such an outcome. Michelle continued to explain:

I guess just a lot more perspective for different types of people and different situations. Just a lot more grateful, I guess... I was happy when it was like, "well, I could be sleeping on the outside, so my house is a mess and a disaster, but... oh well, at least I have a house to clean." Because I remember missing like, just being able to wash dishes even though I don't like it. Just putting a bigger perspective on things.

She endured hardship and homelessness resulting from a recognition of needing to find a new home, and her experiences resulted in her cultivating a new meaning of home.

However, to begin to understand how alternative meanings arise, I need to start by deconstructing what home traditionally means. According to the Merriam-Webster online dictionary (2017), home as a noun means “the place (such as a house or apartment) where a person lives,” “a family living together in one building, house, etc.,” or “a place where something normally or naturally lives or is located.” The research literature offers more depth to reveal a richer understanding of home. Molony (2010) conducted a qualitative metasynthesis with the hopes of sharing common understandings of home presented in the research literature. Molony indicated that home was considered both a place and a process. It is a place where one tends to seek refuge, comfort, and safety in addition to a place of empowerment (i.e., do what one wants to do) and mastery (i.e., competence). It is a place of familiarity. However, home is more than a place as it is also something each person defines based on what they know make home *feel* like home (Molony, 2010), especially when home is disrupted by relocation, disaster, family circumstances, or other elements that challenge the fundamentals of home. As Molony (2010) indicated, creating a home that *feels* like home was also an ongoing process that reflected our connectedness, relationships, and history. So, home, then, is a place and a feeling.

To further this explanation, Molony referenced place-identity (Proshansky, Fabian, & Kaminoff, 1983). As explained by Proshansky et al., place-identity is an extension of self-identity – the conception of who one is in the world. Place-identity is defined as

a substructure of the self-identity of a person consisting of... cognitions about the physical world in which the individual lives. These cognitions represent memories, ideas, feelings, attitudes, values, preferences, meanings, and conceptions of behaviour

and experience which relate to the variety and complexity of physical settings that define day-to-day existence of every human being. (Proshansky et al., 1983, p. 59)

The authors add that place-identity is informed by an environmental past of the person, which is used to inform the satisfactory fulfillment of a person's biological, psychological, social, and cultural needs. In other words, the things we appreciate about a place and the objects with which we fill such spaces in structure, appearance, and function are the things that mean "home" to us, which were informed by our past experiences of home. For example, the colours of my home, the amount of light, and the placement of particulars are all informed by what I associated with home in my past. As such, we carry these preferences, ideas, memories, attitudes, values, and meanings with us no matter where we go to inform how we create home in the present and thus, are reflected in the items we choose and the structures we prefer. As our past experiences are not shaped independently, Proshansky et al. (1983) further emphasized that our place-identity, then, is shaped by our upbringing, culture, and social experiences in addition to our cognitions.

In contemplating the information shared by the participants, it seems that when something disrupts one's construction of home, it changes one's view of home for the future as Proshansky et al. (1983) had argued. I was reminded of Gadamer's (1960/2004) discussion of cultivating taste in trying to understand how the participants may have redefined home after one's home was disrupted. Gadamer referred to taste as a way of knowing as it reflects everything that makes us who we are including our history as a human race, our culture, our social environment, our family, and our own cognitions. He further emphasized that "good taste" was not something that was dictated by social and moral positions, but rather something that is cultivated through experiences in the world and an exploration of various alternatives (Gadamer, 1960/2004, p. 33). Therefore, for many of the participants, leaving home was one

way to cultivate their own taste that reflected their sense of self that encompassed their multiple identities. Cyrus described actively cutting ties with his family to engage in this process without the family pressures of caregiving for his parent.

I got to be carefree for a while. I got to look after myself and do anything I wanted like go to comic-con. That's when the wife and I went to Disneyland and all that. And it's just, I could get away... That Christmas, I went over to my parent's house, and it was just them with my sister and her husband and that was it. And it was the best Christmas I ever had.... So I think after that Christmas, like, I left a little bit early just because I was starting to get worn out. Because my mom was being my mom – the same conversation and all that. When I came home, I was just by myself because the other two guys I was living with, they were still at their families' place. I felt lonely, I just felt like, oh maybe I should be in contact with them more. Maybe I should go back.

After taking a year off from his family life to engage in the adult life he had imagined for himself, Cyrus realized that it was his family relationships that helped him feel at home and at ease with himself. In exploring the things he thought he wanted to be able to develop himself, he realized he wanted his family, resulting in a redefinition of himself and his idea of home to accommodate family. Therefore, it seems that important self-knowledge was gained from cultivating taste and the judgement of taste with the exploration of various alternatives, as Gadamer had explained. This suggests that home and self needed to be explored by being away from home.

What about their family homes made it so challenging to explore home and self within the confines of the family home? It became clear that, for some of these individuals, home was no longer a safe refuge from the world but rather, as Suzie stated, "It just felt really dangerous...

it's like living with a terrorist... And my dad's not doing a very good job at being, you know, the UN peacekeeper. It was, it just felt emotionally unsafe, and sometimes physically unsafe.” Though comparing one's family home environment after a parent with an ABI returns home to terrorism may seem extreme, El Fassed (2001) described a similar sense of discomfort and unsafety as a Palestinian man witnessing the political and war-torn circumstances of his home from a different continent. He described a continual sense of homelessness as it is an ongoing reality that his true home will never be somewhere he could reside within his lifetime. Though he carried Palestinian culture with him everywhere he went, he described continuously being plagued by a lack of meaning in home as his home is no longer a place, but rather a sentiment and a community without borders. His description powerfully revealed that, when home is disrupted, human beings need to find a way to create home beyond the place of residence, but within their own hearts. This description connects to the participants of the current study. When confronted with a disrupted home life, they had to engage in critically examining the meanings of home so that they could have a “home” in the future. El Fassed (2001) anecdotally shared that this is no easy feat and can often leave one with a loss of self, identities, and roots. As Ruth described,

I lived in Quebec for a couple months and as soon as I [left] Quebec, I cut ties with everyone. Each place I go, I just essentially live a different life everywhere I went... Like I could be whoever [I] want... We moved around so much, and even now, I kind of struggle with my identity. I'm not really sure like, what I want to be or if I'm unhappy with what I am doing with my life.

Such disruptions of home, then, can affect one's view of home, preferences, and self in the future (Proshansky et al., 1989), thus further disrupting one's understanding of self and being in the world.

So what is it about living with a parent with an ABI that can disrupt this sense of home? According to the literature, such disruption in the family home after a family member acquires a brain injury is common as it tends to result in upheaval of family dynamics. Upon the parent with an ABI returning home, some family members quickly recognize that the parent has changed (Gelech & Desjardin, 2011; Landau & Hissett, 2008; Yeates, Gracey, & McGrath, 2008). As a result of such changes being witnessed in the injured individual's personality, relationships tend to also change following an ABI (Carnes & Quinn, 2005; Charles et al., 2007; Freeman, 2012; Kreutzer et al., 2009). Because we know, based on Molony (2010), that relationships and a sense of connectedness are integral to developing shared experiences that create a sense of home, it follows that these teens would feel a significant disruption in home. I suspect that the disruption of these common elements that typically contribute to a sense of home is what led these individuals to question their home as a reflection of being and self, as it was no longer a reflection of what they knew. Therefore, home was later achieved by being away from the home that was now foreign.

However, given their home situation with limited access to support from their parents (Butera-Prinzi & Perlesz, 2004), the participants described having little knowledge of how to redefine home and themselves while also building taste and referencing their historical knowledge of home. Catherine described her process of self-discovery after leaving the family home using the metaphor of rebuilding a house:

Like, that sort of is what changed. Maybe not the values themselves, but how they manifest... It's kind of like my base foundation, but everything else changed. You know, you take bare walls down to the basement and then start again. So that's kind of like what it is. And that certainly started... when I first did 2 years of music school at [Alberta town] and then I moved overseas... it was still "this is me moving away" and learning to become my own person and live on my own and those things.

With her description, she revealed that she had a starting point from which to explore her identities, otherwise known as the basement or her foundation. However, she needed to make an effort to figuratively build the remainder of her home based on her existing knowledge of self and home.

Therefore, it seems it took the act of leaving the family home to be able to reflect on the self, identities, and the resulting hopes for a future dwelling. Most participants used this disrupted home life as an opportunity to learn and grow, therefore, cultivating their taste further with experiencing the world in new ways. In other words, home could only be explored away from home. As Suzie described,

And this scary world was more inviting to me than the craziness that was happening in the four walls of where I lived. And honestly, the day that I left, it was like I could breathe... I could just make my own mistakes... I would learn from them and I felt really good about making the decisions I was able to make. And sure, I made tons of really crappy decisions, but I lived through them and whatever. I mean, I grew.

This, in turn, helped them develop their identities and self as they sought home while away.

Something happened to these children who lived with a parent with an ABI when they left the family home. As Suzie described, she was able to grow from the choices and mistakes

that she made independently, thus giving her a sense of autonomy not previously experienced in the family home. As such, she had the freedom to explore her identities in a different context. Others, like Catherine, found that they needed to be exposed to different people, perspectives, and situations to begin to broaden their own expectations of themselves and who they could be: “Probably when I really moved away. I lived in Europe for a year, and a totally different culture where they do express everything... It was also living somewhere that there were absolutely zero expectations...” The peace and comfort of being home was no longer part of their family home; therefore, some participants needed to find a way to cultivate home away from home. As such, these individuals took the opportunity to further develop themselves and their identities when they were no longer in the environment that disrupted their conceptualizations of home. While many described continuing to explore what these meanings could be today, many further emphasized that their identities continued to evolve as their meanings of home evolved. Therefore, it seems that a disrupted home led to a disruption in self, and as a new meaning of home was discovered, so, too, was a new meaning of self.

With the exploration of new meanings of home and self, one may also encounter new experiences that further contextualize one’s identity within home. Often, such experiences of identity at home are connected to identified, imposed, accepted, and embraced roles being performed. I discuss such roles as they arise in the context of being an adolescent living with a parent with an ABI and their connection to identity construction in the next interpretation.



## CHAPTER SIX: NOW AND THEN: A CONTINUATION OF ROLES AS

### PART OF IDENTITY

*“When I was a child, I talked like a child, I thought like a child, I reasoned like a child.*

*When I became a man, I set aside childish things” – 1 Corinthians 13:11.*

In most cultures and societies, there are a variety of roles that we perform: child, daughter, son, mother, father, elder, husband, teacher, mentor, and many more. Within each role, there is a set of socially prescribed rules and regulations that create the boundaries of our role performance (Stryker, 2008; Turner, 1956). It is our interpretation of each role that defines how roles are performed and the appropriateness of our role performance for our social interactions. Much like that of any theatre or drama production, roles are there to guide us. However, it is our adoption of them, our understanding of such adoptions, and our incorporation of the feedback we receive regarding said role performance that allow roles to become part of who we are in the world (Stryker, 2008; Stryker & Burke, 2000).

The well-known quote from Corinthians shared above demonstrated a perceived difference between the roles of children and the roles of adults. Specifically, adults are to abandon “childish things” upon entry into adulthood, as childish things are unsuitable for and incongruent with the roles of adulthood. However, we know that our transition to adulthood is more complex than a simple abandonment of childish ways. In the case of adolescents living with a parent with an ABI, it seems that adolescents choose to adopt roles previously not expected of them by society or by their families (Freeman, 2012; Rose & Cohen, 2010), while also being expected to remain in their child role. Suzie described this struggle within her family:

Because when she (mom with an ABI) came home, there was this expectation from my perspective, of me to return to being a child or kid. Which didn't make a whole lot of sense for me because I had been given all these extra responsibilities. Adult responsibilities, really, and being expected to do a bunch of things... I certainly didn't think that it was fair to be returning back to that.

Many participants echoed her description, stating a range of reactions from resentment to anger in not being acknowledged for their acceptance of adult-like responsibility and instead being expected to return to child-like ways. When adolescents take up adult-like duties and responsibilities in the family, it follows that they would then begin to feel more mature. As one study by Benson and Ferstenberg (2006) revealed, individuals who adopt parenting duties, manage a household and finances independently, and attain a sense of social independence were more likely to "feel" like adults upon their transition to adulthood. Furthermore, the authors suggested that feeling like an adult or having a sense of greater maturity was an indicator of incorporating an adult identity. However, the adoption of adult-like identities resulting from performing adult-like roles is expected of adults, but not children (Burman, 2008). Would such a phenomenon also apply to youth?

The literature exploring young carers' or caregivers' experiences suggested that these youths tend to feel more mature than their same-aged peers because of the increased responsibility and uptake of adult-like duties in supporting the household as well as family members (Charles et al., 2012; Coppock et al., 2018; Rose & Cohen, 2010). Furthermore, several authors have suggested that this adoption of the caregiving role as a youth may support the youth's transition to adulthood despite the continuation of his/her caregiving duties into young adulthood (Hamilton & Adamson, 2013). However, more of the literature seems to

subscribe to the idea that young caregivers are a group of children deprived of their childhood, suggesting that these children are victims rather than valued contributors to the family home (Aldridge, 2006; Keith & Morris, 1995; Rose & Cohen, 2010). As such, most of the literature has and continues to focus on the ways that children suffer and the negative impact that young caregiving has on the children's lives (Keith & Morris, 1995; Rose & Cohen, 2010).

I suspect that such views portrayed in the literature are due to the commonly understood role of children conflicting with these children taking up roles that are considered to be better suited for adults in Western culture (Burman, 2008). In a way, young caregiving is a phenomenon that goes against the dominant narrative of the child role, and the research portraying these children as victims or as sufferers of an injustice is one way of perpetuating this dominant narrative and disempowering these children as well as their family members (Keith & Morris, 1995). Such a role conflict often comes packaged with social and political sanctions, which then limit one's ability to adopt adult-like roles publicly as well as one's ability to make sense of their occupation of conflicting roles (Stryker, 2008; Turner, 1956). This is problematic as researchers know that roles can influence one's identities (Stryker, 2008).

Conversely, alternative research exploring the experience of young caring in a Kenyan community suggested that the problems associated with young caring is culturally determined as young caregivers in the Kenyan community were highly respected as children doing their job to support the family (Skovdal & Andreouli, 2011). In fact, these children demonstrated more activity in community life, were recognized by their communities, and were bolstered by positive conceptualizations of their role that affirmed their resilience. Thus, such social feedback helped these individuals construct positive identities that reflected their role as both children and caregivers (Skovdal & Andreouli, 2011). However, because Western cultures see caregiving as

beyond the child role, it is something that is sanctioned and shamed while these children are understood as victims of family circumstances (Keith & Morris, 1995). As such, the children learn that caregiving is something abnormal and inappropriate for them because this is the message that society gives them. Therefore, it is no surprise that these children would incorporate negative understandings of their experiences, which then only feeds a troubled or challenged identity constructive process while navigating role conflicts. It is clear to me that the adoption of roles and the connection of roles to identity is more complex than initially believed as roles are an amalgamation of cultural, societal, familial, and individual understandings of one's positioning in the world. To begin to understand the complexity of how roles adopted as an adolescent living with a parent with an ABI contributed to identity, I explore the basics of roles.

### **Roles: Child-like and Adult-like**

Roles are defined as socially constructed positions we take up in our interactions with others (Turner, 1956). Initially, George H. Mead, a symbolic-interactionist prominent in the sociological field, explored the idea of the role as something that individuals take up, enact, and construct in social interaction (Carreira de Silva, 2010; Stryker, 2008). Later, several authors discussed his position on roles and elaborated on the idea to create theories of self and identity (Stryker, 2008; Turner, 1956; Thomas & Biddle, 1966). Turner (1956) described roles as

a collection of patterns of behaviour which are thought to constitute a meaningful unit and deemed appropriate to a person occupying a particular status in society (e.g., doctor or father), occupying an informally defined position in interpersonal relations (e.g., leader or compromiser), or identified with a particular value in society (e.g., honest man or patriot). (p. 316)

Roles, then, are one way of living up to a prescribed set of behaviours that convey our positions, statuses, and values in society. The term role was derived from the French word *rolle* describing the roll of paper on which an actor's character was written (Online Etymological Dictionary, 2017). One's role is the character one is interpreting, performing, and bringing to life, beyond what is written on the page, to demonstrate a part of our humanity as all roles come from our shared understanding of experiences (Demorest, 2013). This shared understanding of the role that defines the appropriate associated behaviours, perceptions, cognitions, psychology, and emotions is known as the script (Barber, Eccles, & Stone, 2001; Demorest, 2013; Thomas & Biddle, 1966). The person interprets and applies the script to his/her own life circumstances while loved ones, peers, role models, communities, institutions, and culture influence the parameters of this performance (Demorest, 2013; Turner, 1956).

As humans existing within a society, we have many ways to convey these social understandings and discourses that inform the scripts guiding our roles (Gergen, 2000). Such social discourses perpetuated by key individuals seem to be the primary avenue shaping the understanding of the roles the participants adopted. Simon explained,

I went to a school board psychiatrist with her (mom with an ABI). He got her to stand up and leave the room and asked me some pretty basic questions... like, "are you the parent?" You know, "do you feel like you're handling more than you should at your age?" all that kind of stuff. It was straight yeses.

In this quote, Simon is comparing his role to his same aged peers, suggesting that he started to realize that he was acting beyond his role as "child" as prescribed by reputable sources such as a psychiatrist. Of course, this is perpetuated further by the existing research literature exploring young caregiving as a phenomenon (Aldridge, 2006). Catherine shared a similar sentiment when

she explained that she was primarily responsible for her father's care because she was so close to her father that she understood him the best. When reflecting on the reasons for her to move several provinces away from her father to live with her mother, Catherine stated, "When I was 13... we decided collectively that it would be best for me to move back to Alberta to live with my mom (non-injured parent). Because it isn't fair to put a child in that position." Her comment suggested that she and her guardians acknowledged she was taking on more responsibility than children were supposed to, and that she was operating beyond her script as the child in the family and violating her role as child.

As stated earlier, children are believed to engage in "childish things" which typically mean an immature expression of behaviour, attitudes, psychology, cognitions, and emotions (Benson & Furstenberg, 2006; Burman, 2008). In Western culture, we typically think of children as needing to be free and unbridled of responsibility, while adolescents – who are still considered children – are expected to undertake increasing amounts of responsibility in preparation for their transition to adulthood (Benson & Furstenberg, 2006; Hamilton & Adamson, 2013). Conversely, adults are believed to be competent and mature enough to manage all forms of responsibility as part of their role as adults. When either children or adults cross the expectations of their role, individuals are questioned, sanctioned, and corrected to perform their prescribed roles (Demorest, 2013; Turner, 1956). However, it is rare that individuals only perform one role in any given situation, and it is challenging for individuals to make sense of their personal positioning when their roles conflict. Therefore, I wondered how children might make sense of being both a child and adult when their roles collide.

## **When Roles Collide**

Typically, individuals encounter situations in which they are performing multiple roles (Turner, 1956). For example, I may be performing my role as student, daughter, and advocate while I write this dissertation. In this intersection of roles, I must negotiate how these roles are performed and some roles may be more dominant than others in any given situation. In this case, I may be privileging my student role more so than my other roles as it is the role that most strongly applies to the situation, yet my enactment of other roles contributes to my wording, my structuring and organizing, and the overall product of a dissertation. Simultaneously, others may be contributing to my performance of all roles by offering feedback, suggestions, sanctions, or guidelines that inform how my roles should be enacted within this situation. This ongoing negotiation of influences on role performance informs my identity as I begin to consider these roles as part of who I am and as society and I evaluate my performance as a student, daughter, and advocate (Demorest, 2013; Turner, 1956). As such, my performance and the feedback on my performance will further inform my positioning of self and identity in the social realm (Barber et al., 2001; Demorest, 2013).

However, this process of negotiating multiple roles is considerably more challenging when people are in situations that involve roles that conflict because the social scripts and norms of each role are incongruent (Barber, Eccles, & Stone, 2001; Demorest, 2013; Hamilton & Adamson, 2013; Staff et al., 2010). For example, children who provide care to family members are believed to experience conflicting roles by being a child or adolescent and a caregiver (Rose & Cohen, 2011). I would add that children who also take up adult-like roles such as advocacy and financial responsibilities for family members may also experience a role conflict as child-like and adult-like do not tend to be roles that can be blended easily. Given this challenge, I

wondered how adolescents who have lived with a parent with an ABI managed such a role conflict in their adult-like responsibility and duties in the family home. I further wondered how this might inform their identity construction as we know that the roles one takes up also inform one's sense of identity and self.

Consistent with the young caregiver literature, some participants described separating their roles as much as possible as an adolescent, meaning that they tended not to invite friends or peers to their homes and avoided situations in which their parent would also be present with their peers. For example, Ruth stated, "I think, I like, worked hard to keep them separate... It was definitely helpful to have the two different worlds, like my mom life and my dad life." She suggested needing to keep various parts of her life separate, and she discovered that this was a skill she continued to use in her adulthood: "I was still pretty cautious about keeping my life separate. Like I had friend groups that I would keep very separate, too, and it would definitely help when I moved around." By learning how to maintain separation in multiple areas of life, these individuals did not need to reconcile divergent and conflicting roles. Instead, they were free to adopt and perform these roles without question. However, with such separation, these individuals engaging in some roles in secret was a way to protect their world as it existed before parental ABI. In the case of Ruth quoted above, she maintained a strong separation between two worlds because it was easier for her to perform her caregiving duties for her father in secret, thus avoiding the conflict of roles all together. This intentional separation of roles allowed participants to keep a part of themselves and their identities hidden to portray an image of being a normal adolescent while also being able to become adult-like in various contexts.

Alternatively, other participants found it too challenging to separate their roles because the collision of worlds was inevitable. Simon described being frustrated with his situation at



home, and he disclosed being vocal about his role conflicts and the expectation to separate his home life from his school life.

I was just pretty much mad all the time... I would call her on things. Like you know she would be like, "Oh, you haven't done the dishes this week," and I would be, "what have you done?" Then my dad would get really mad, and I would just be like, "what have you done, tell me right now, what you have done?" Ah, there was an instance where I threw her across the kitchen... A friend of mine had come over to my place in her car to borrow my snowboard – she was going snowboarding for the first time... So I opened the garage door at 11 o'clock on a Saturday, gave her the snowboard, closed it, whatever... My mom came yelling and screaming about how dare I open the garage door... She started hitting me. I was just like, you know, "don't hit me." She was like, I repeated myself a couple times, and she's like, "I'll hit you any time I want." I just threw her like into the opposite wall... I left my house and went to a friend's house. When I went home the next day, you know, it was all about me. It wasn't what my mom had done that led to that, it was, you know, this was my fault... I got angry. I was involved in punk rock which is a pretty anti-authoritarian subculture, so I've still kind of got that streak in me. And yeah, I just started standing up and while it didn't always result in me hurling her into the cat food, um, you know, it just gave me the ability to be like, "no, what about you?"

As such, to perform the "anti-authoritarian" role, he chose to stand up to his family and speak about unacceptable expectations placed upon him and his sibling. Specifically, Simon suggested that he was expected to be more responsible and emotionally regulated in any interactions than his mother. Based on what is known about adolescence, this is an especially challenging

expectation. An adolescent's cortex is still developing in combination with increased hormonal activity meaning that emotional regulation skills become strained as the adolescent encounters more complex cognitive, psychological, and emotional experiences than they ever have before (Sandhu et al., 2014; Steinberg & Morris, 2001; UN - DESA, 2011). Despite Simon's anti-authoritarian role and positioning in the family, it was apparent in the above description that he was not proud of his aggressive outburst as it seems a part of him also believed he needed to remain calm when interacting with his mother because of the ABI. I suspect that this was his way of being able to maintain his anti-authoritarian role while also learning to become the mature son that he was expected to become after the injury. As such, both the anti-authoritarian role and the adult-like role became part of his identity as he strove to minimize the problems in his interactions with his family. This was a lesson he only learned when his worlds collided, and he was forced to integrate other roles into his identity.

Willow also described how the collision of her home life and school life affected how others would treat her. She reported that she was often singled out as being strange, and she was frequently bullied in school because of this. However, after her mother's injury, she returned to school to find she was being treated differently, which challenged her existing identity as the "misfit" in school.

When my mom's accident happened, um, the thing that really stuck out for me was that it happened in the summer so I was really thankful because I was like, "I don't have to tell these jerks at school who don't like me that like, my mom is like in a coma in the hospital." ... My teacher who, you know, I loved... he was like, "oh so you know, I know there is something going on with your family and I know that your mom is sick and like, I asked people in the class if they could help," and I was like, "oh god, fuck." He

brings me to the staff room and the entire fridge was full of food that people's families had made and I, I remember like, you know as an adult, I would have been very touched by that gesture. But as a child, I was like, "fuck all of you! I'm so angry that all these people who, you know, made fun of me...were now like, oh well your mom's broken so it's cool, like, take our shit."... People were nicer to me after that point.

With her mother incurring an ABI, others in her community changed their perceptions of her and treated her differently with a forgiving stance. Her school life and her home life collided resulting in different social feedback that no longer punished her strangeness. However, this participant described being skeptical of their change as she already had a reputation within her community as the "misfit." When the bullying resumed upon her entry into Junior High, she chose to own that part of her identity as a role that was forced upon her:

It was already that I was like a misfit. And so, like, as that time went by, you know, I was, like, misfit with anger issues and someone who doesn't, like, outwardly express their anger. Like I had just started you know, doing all this (gestures to current alternative style influenced by metal music). Which is where I am today! Which I love.

Her description conveys the effect of a collision of roles on her personal identification in a social setting and the influence of social interactions on her identities. Even though she had temporary relief from the bullying from her peers, the participant adopted the role of "misfit with anger issues" to make it her own by implementing an image inspired by heavy metal music. In a way, it gave her the opportunity to feel normal, accepted, and encouraged as a misfit. Such an identity was something that seemed to develop and become well established to help her manage the intersection of all of her worlds – home life, school life, and social life – so that she could remain

the misfit and derive pride from it. In this way, the act of reclaiming her identity as misfit encouraged a helpful identity rather than a hurtful one.

When roles collide and create conflict, it can be a challenge to negotiate the performance of each role. At times, it is guided by individual work such as a need to maintain separate worlds, while for others, their worlds necessarily collide and they must renegotiate their roles in relation to their situation that demands all roles to be performed. Both instances speak to the way that adolescents manage their roles and how some of these roles may later become ones that they identify with. It became apparent to me while reviewing the information shared by the participants that the adoption or rejection of some of the conflicting roles as an adolescent was critical to their identity construction as an adult.

### **Past Role: Current Identity**

As I asked the participants to reflect on their experiences and how they shaped and were shaped by these experiences, many of them disclosed that the roles that they took up in adolescence were roles that they continued to perform in adulthood. This idea did not surprise me as I knew from the research literature that adolescents typically take on various roles and identities in an attempt to discover identities that are congruent with their sense of self within their social interactions (McLean, 2005, 2010). However, each participant had their own way of coming into the role as an adolescent as well as their own way of adopting the role as their own, thus the role became a part of the self as an identity. Though it is to be expected that adolescents take up roles that will later become a part of their identities, I think that the way by which the participants adopted, rejected, and incorporated roles that were perceived as necessary to perform in the family is integral to understanding the identity constructive process for this unique population.

Firstly, some of the participants acknowledged that they saw a need for a specific role to be played in their family system. For Simon, he frequently stood up to his parents to defend himself and his younger sibling as he realized his father would not stand up for them against his mother:

I think the other thing, too, was my dad's cowardice when it came to standing up to my mom. It's like he would not do anything. Which was bizarre to me. So, I know from talking to like my Aunt, like his sister... she basically just said, how could he let her do that to my brother and I?

As a result, he stepped into a role that he believed he could perform and that no one else in his family seemed willing or able to do. Similarly, Elizabeth stated that, as the eldest child in her family, she felt it was her responsibility to adopt a caregiving and nurturing role while her father was indisposed at the hospital attending to her mother. As such, she performed duties that reflected this role:

I mean, when my mom was in the hospital, my brother was 3, my sister was 9, so I was 12... I'd come home every day and my dad was at the hospital all the time... So, I'd come home, and I would walk the dogs, and I would vacuum, babysit my brother, and make dinner. And like, do all these things... When my mom got home from the hospital, I felt like she was this stranger... I had taken all this responsibility for the last 6 months and I'm tired, and you try to come home and tell me what to do. And that did not sit well. So then, so I really rebelled... I just wouldn't do anything she said without a fight.

The participants tended to adopt roles by responding to a need in the family, whether it be advocacy or caregiving. As such, they performed this role based on their understanding of the

script, forcing them to interpret their parents' behaviour in adult-like roles as well as the social portrayal of a person performing their role competently.

Aldridge (2006) explained that most young caregivers take up a caregiving role in the family out of necessity, though not simply because they felt they had no choice. Like the participants of this study, young caregivers have reportedly responded to a need in the family (Aldridge, 2006; Rose & Cohen, 2010). Many young caregivers reportedly felt pride in providing care even if it is perceived as limiting and restricting of their experiences of childhood (Aldridge, 2006; Hamilton & Adamson, 2013; Rose & Cohen, 2010). Contrary to the literature, the participants in this study shared a different perspective of their caregiving and role changes. Elizabeth further described a growing resentment of the imposed role of caregiving:

And I just sort of remember, too, like, sitting in the living room and like, comforting my brother and my dad being like, "you are the only one that he will stop crying for." Um... I think that's why it sticks in my head because it was like, a realization that like, that this was my responsibility was to take care of him (sigh)... I resented that a lot. That might have been why I resented it so much because I was like, "I'm the kid! What the hell?" Like, "I am not supposed to be the one that is taking care of (pauses) everyone." But if I didn't do those things, like no one else was going to.

Simon described taking up additional responsibilities that he was not prepared for, which resulted in him growing up quickly but at a significant cost:

I was the eldest so I had to, like, I had to learn how to do the bills and the mortgage and all that kind of stuff. I was dealing with my grandfather who was helping me with it because he was fairly financial... It made me grow up pretty fast. It made me a lot

tougher than I thought I was. Um (pauses 4 seconds), but I mean, you know, like I said, it wasn't in a positive way. Like, I was just upset and angry, stressed out all the time.

It seemed that as the participants reflected back on their experiences, some resented the uptake of the new adult-like roles. This finding was surprising as it differed from the majority of the research literature suggesting that young caregivers appreciated the opportunity. However, there may be a relatively simple explanation for this finding.

In a study examining the transition of young caregivers to young adult caregivers, young adult caregivers shared that they began to recognize the stressors and limitations that their caregiving duties imposed on their life choices (Hamilton & Adamson, 2013). Hamilton and Adamson (2013) referred to this as a “bounded-agency” because the young adults were able to transition smoothly to adulthood, yet they limited their choices as they considered their caregiving duties as a part of their future adult life. In addition, the authors found that young caregivers (i.e., children and adolescents) did not perceive the same level of disruption as the young adult caregivers had. This was consistent with Cyrus' perspective as he described the influence of his responsibilities on his choices as an adult:

And it hit me that I needed to grow up and help out more. It was almost like a quick transition, like, a flick of a switch... This is my life now... Because I got into my career, um... And basically, I just buckled down and worked one job for seven years. And yeah, it, I don't know, I just sort of planned that I would go through more school before just getting into a job right away, but I realized, no, I gotta bring in some money to help out and to get a better car, so I can help drive her (mom) around more.

These roles were taken up willingly and necessarily as adolescents. Despite their willingness and capabilities to adequately perform such roles with support, these roles had long-term effects on how one perceives one's self and identities into adulthood. The participants described resentment, stress, and anger associated with their duties in hindsight, and it is possible that with adult eyes and maturity, they may have constructed their experiences differently (Josselson, 2009).

Many of the participants were able to integrate these roles into existing identities performed and demonstrated in other situations that are unrelated to their family life. Simon stated that his ability to stand up for himself and others by pointing out wrong-doing or injustices infiltrated his adulthood in a variety of situations. Using a metaphor in which he was in a crowded room attempting to draw others' attention to injustices he witnessed, he stated,

I mean, I've also kind of carried that stand up and yell in the room thing with me elsewhere, like you know, in life. So you know, um, at work for example. It might not be the best thing to question the things that come from up top, but I have and I will.

This quote suggests that Simon gained valuable skill as well as a personal sense of self for being the whistle-blower which is now a part of who he is in various areas of his life. Elizabeth also reported that after initially rejecting the idea of continuing to be a "nurturer" or caregiver after her experiences of caring for her younger brother, she noticed that she identified as a nurturer in many other areas of her life:

...being so motherly, that was definitely a big thing for me from then on. And, um. I actually didn't want kids at all when I was a teenager. Um. Which is kind of weird thinking how much I want them now (laughs)... I taught my first class and I was like, this is the best thing ever. All these people listening to me and this is awesome. And I



think as a teacher, there's also a big part of me that liked that kind of nurturing, to be the, like, nurturing motherly person. I don't think it's divorced from everything else that's happened in my life.

Though the participants may have adopted and rejected their roles, these roles became an important part of who they were in the world, incorporating such roles into their adult views of self. In the above quote, the participant described having no desire for children as she was the primary caregiver for her younger brother throughout her adolescent years, yet she changed her mind while reflecting on her own definition of parenting as she faced a new milestone.

### **A Revisitation of Role and Identity Sparked by Milestones**

A small number of participants reflected on how the roles they adopted during their adolescence affected how they identified in new roles as they experienced major life events such as marriage and parenthood. We know that major life events already require people to re-examine their existing self and identities (Bridges, 2001; Schlossberg, 2011). This is mostly because people need to make sense of their uptake and experiences of new roles. For example, several months before I got married, I remember experiencing something I can only call a confusion of identity. Specifically, I questioned what it meant to become “wife” and as a child raised in a single parent home, I had few role models to help me understand what it meant to be “wife.” I recognized this same confusion and questioning while I listened to the participants speak about their navigation of their own new roles as they were heavily influenced by how their parent(s) behaved in similar roles. Suzie described this phenomenon generally:

Because, you know, you hit different parts... Even in my adulthood, I'm hitting different parts of my development right now, and I'm still bringing up stuff from my past.

Whereas, things I hadn't thought about or whatever, you know, and I don't know if you ever really put this stuff to bed or if you just discover new parts of yourself in it. As she disclosed, different life experiences brought up memories and experiences inherent in living with a parent with an ABI that required an exploration of new parts of herself. In a way, she needed an opportunity to re-story herself to make sense of her identities and self within new contexts of experiences.

One of the first milestones that seemed to be heavily influenced was the development and maintenance of committed relationships. As families tend to be the primary training ground for most social interaction (Minuchin, 1985), we may use the romantic relationships we witnessed in our family to guide what relationships are supposed to look like. To highlight my example above, I had few points of reference to begin to understand what "marriage" was supposed to look like beyond what I witnessed of my friends' parents' relationships and what was shared in the media. Through such observation, I positioned myself based on behaviours that I hoped to emulate and ones I intended to abandon. Other participants seemed to share similar sentiments regarding their approach to committed relationships. Simon stated,

One thing I have noticed which I've carried forward um, that whole calling-my-mom-out thing is um, something that I've carried into my relationships with women. Uh, also, like, my, if I'm giving my friends advice and stuff, you know, it's not in a disrespectful or misogynous way. It's just like, call it as you see it. Kind of nip stuff in the bud. Just because my dad never did that.

In this case, Simon disclosed learning from his parents' marriage and realizing he wanted to do something differently in his relationships. His parents' marriage became a reference point. As

such, he chose to do the opposite of what his father did and speak to his girlfriends about things that were inappropriate, and he expected his girlfriends to do the same with him.

In addition to negotiating romantic relationships, some participants who were also parents or contemplating becoming parents disclosed worrying about how they would perform the parenting role. Cyrus stated that he noticed how his mother's injury affected him as an adolescent, and as he contemplated having children in the future, he realized how cautious he has become in terms of his own wellbeing:

I'm almost scared to have kids now because I see how big of an impact that kind of injury can have. I mean, even before I got married, I used to climb roofs for like, if we only had one ladder, me and another guy, I would hold onto his belt and he would reef up the ladder and we would bring it onto the second story. And now that I'm married, I look at that and I'm like, "well, I can't do that because if I fall, my wife can't afford the house." Like, there's too much to lose. And when I think about having kids, it's like, "Oh my God, if anything ever happens to me," like. That terrifies me beyond belief.

Between the lines of this quote seems to be a sincere worry that his children will be subject to the same experiences he had as a child of a parent with ABI. Similarly, Michelle reflected on how she was raising her children in light of her experiences of her mother's parenting behaviours:

Well there are some things. I kinda know my mom always, even after the accident, would put everything first... So, I guess, like, that self-sacrificing part, I learned that from her... And then the rest was just knowing how not to be like her... Just worrying that my son is gonna end up like I did and just worrying about – and just having a really open dialogue with him, like, to let him know he can always come to us for anything. It's like, a huge thing because I never had that... I was really messed up for like, that long.

And just making really really bad choices, and I don't want him to end up in bad relationships. I don't want him to end up like, hiding things from us.

Michelle conceptualized her experiences and choices as a product of the family system. She accepted that there were parts of her mother's performance as parent that she wanted to incorporate, and yet other parts she preferred to leave behind for fear that her children would "end up like I did." She wanted a different future for her children, and because she recognized that many of her behaviours were symptoms of not being able to talk with her mother with an ABI about her distress and emotional experiences, she felt it was important to do the opposite of what her mother did. Again, her mother's parenting and her subsequent injury resulted in this participant choosing an alternative performance of her mother role, so that she can identify as the mother she wants to be.

The role of parent seemed to be a very sensitive topic for the participants as they knew that their perspectives of the role had changed. When one's role model for parenting changes, it follows that one would seek other possibilities to determine how one might perform the role. In most cases, the participants who contemplated marriage and parenthood suggested that it was their experiences living in their family home that inspired alternative choices in role performance. Although this meant that many participants would be flying partially blind into new roles informed only by social scripts, it meant that they needed to truly reflect on the person they have become and the person they wanted to be.

Upon stepping into an adult-like role, adolescents living with a parent with an ABI may adopt adult-like identities to accommodate their role performance and make sense of conflicting roles. As such, this unique population, like other young caregivers, felt more mature than their same-aged peers (Freeman, 2012). Combined with this sense of maturity, the adolescents then

found ways to create identities based on their roles, making it easier to perform such roles in new situations. Being the caregiver, the advocate, and the financier became a part of how they identified as an adult, and therefore, the experiences of living with a parent with an ABI shaped the identities they adopted, rejected, and incorporated into the adult self. It is important to note, however, that these roles were often adopted due to an absence of such role performance in a situation that required these roles. In some instances, such vacancies were coupled with a sense of hurt and betrayal as those expected to take up a role failed to do so. Therefore, trust, betrayal, and relationships are discussed in the next interpretation as yet another component contributing to an understanding of adolescent identity construction in the context of parental ABI.

## CHAPTER SEVEN: “STAND BY ME” (KING, LIEBER, &amp; STOLLER, 1964):

## TRUST AND BETRAYAL

*We talk about trust as though it is something we build, as though it is a structure or thing, but in that building, there seems to be something about letting go. And what it affords us is a luxury. It allows us to stop thinking, to stop worrying that someone won't catch us if we fall. Stop constantly scanning for inconsistencies. Stop wondering how other people act when they aren't in our presence. It allows us to relax a part of our minds and focus on what's in front of us. And that's why it is such a tragedy when it's broken. A betrayal can make you think of all the other betrayals that are waiting for you, all the things we hadn't thought of, people you rely on. And you can feel yourself tightening up, bracing for the worst cases resolved to trust no one. But that doesn't really work. Trust is your relationship to the unknown, to what we can't control (BuzzFeed & Ze Frank, 2014).*

The above quote was from a narration discussing the importance of trust by Ze Frank to a beautifully choreographed performance piece by two Cirque du Soleil performers engaged in partnered and trust-based lifts and poses. In his narration, Ze Frank speaks to the benefits and risks of trust and eventually concludes that our trust in others speaks to who we are and how we exist in the world. Do we operate within our world with tension and suspicion or with relaxation and trust? Alternatively, could it be both? Regardless, our approach to the world may be born from our experiences and understandings of trust. I suspect that trust and betrayal may have contributed to how the participants who lived with a parent with an ABI were able to construct identities and selves because of how each participant presented in the microcosm of the interview.

While I listened to the audio-recordings of the interviews, I noticed a pattern within the process of each conversation. Each interview lasted for approximately one and a half to two hours, and initially, I thought the length may have been due to the enormity of content that needed to be discussed or perhaps my ability to keep participants focused on the topic. However, as I listened to each interview in close temporal proximity, it seemed to take the participants some time to discuss and share the complexities of their identity- and self-constructive processes regardless of the type and focus of questions. I examined my questions and participant responses in each transcript to discover that I had often asked the same question using different language focused on identity and self throughout each interview because these questions went unanswered early in the process of our conversations. As I conducted more interviews, I had intentionally asked questions related to identity and self earlier in the process with the expectations of shortening the interviews. However, the pattern persisted in that each participant demonstrated some hesitation in answering such questions directly regardless of wording until later in the interview. Eventually, the participants tested the proverbial waters by adding more detail to their disclosures about the process of self-construction without being prompted, resulting in open and unbridled discussion, and I suspect that this behavioural pattern reveals that the participants became comfortable and safe enough with me, as the interviewer, to disclose the positive, negative, and neutral changes in their selves and identities.

One could assume that any qualitative interview would come with its challenges around self-disclosure for the participants because they are asked to share freely about their beliefs, cognitions, attitudes, and experiences in a way that could open themselves up to judgement in the vulnerability of the moment. As such, there is a basic level of trust required to conduct research interviews so that the participants can inform the topic under study (Moules et al., 2015). This

trust-building process begins from the first contact with the participant and continues into the informed consent process as well as throughout the interview. However, the pattern of hesitancy demonstrated by the participants led me to believe that there was more to be revealed in terms of developing trust in an interaction beyond a research interview. Therefore, I wondered what happens to one's general sense of trust in others as an adolescent living with a parent with an ABI and how this might shape one's self and identity.

Based on my previous descriptions of self and identity, I understand both to be constructed within the social realm. Simply put, I may adopt a series of identities based on the roles I take up within society and culture, which I then perform in my interactions with others (Holstein & Gubrium, 2000; Ibarra & Barbulescu, 2010). Through these interactions, my identities may be renegotiated to accommodate the shared meanings, or small stories, created within my interactions (Bamberg, 2011; Ibarra & Barbulescu, 2010). In this way, my identities are constantly being adjusted. However, my self and my stories of self, or big stories, may remain more consistent and coherent to accommodate the variety of small stories (Bamberg, 2010). Similarly, I believe that trust, as a concept and behaviour with meanings, is also constructed in the social realm.

Erikson (1959, 1963) argued that basic trust is the first step towards developing one's sense of self within the world (or ego identity as he had called it). This first psychosocial developmental task called basic trust versus basic mistrust involves one learning that his/her world is a safe and good place based on his/her early experiences of being cared for. Erikson stated that this task is typically wrestled with and resolved from birth to two years old. At that young age, our world is dominated by our relationships with family members and/or caregivers who start to socialize us and help us learn how to interact with other people. We may encounter



other children who can also inform us of how we need to be in the world and offer meanings of the world itself. However, our family becomes our primary source of creating foundational relational patterns that lay the groundwork for creating and adapting relational patterns with others (Collins, Raby, & Causadias, 2012). This trust or mistrust is based in our early relationships, suggesting that the first task of psychosocial development is the foundation of our own identities, our future social relationship building capacities, and our understanding of the world around us. In other words, trust and violations of trust can shape us.

To understand how trust is at play within these interviews as well as identity construction processes within the context of living with a parent with an ABI, we must first attempt to understand what trust is. Trust is a slippery concept as it is commonly used and loosely defined. In fact, the same word is used to convey various meanings such as a way of knowing (epistemological definition), one's expectations placed on another, a behaviour (i.e., I trust you to do X), one's trustworthiness, and the character claim of another (Hardin, 2001). The concept is so slippery that Hardin (2001) called the variety of usages of trust as "slippages" in his discussion attempting to understand how one conceptualizes trust (p. 7). In fact, the Merriam-Webster Online dictionary (2017) demonstrates the inconsistency and complexity of the word by providing five definitions for trust as a noun, five definitions for trust as a verb, and countless more definitions for trust as a legal term. It seems that trust is a word with an assumed meaning, yet trust is poorly understood.

In attempting to understand conceptualizations of trust, Hardin (2001) described the "encapsulated-interest account of trust" (p. 3). His approach suggested that we determine one's trustworthiness by believing that the other person has our interests genuinely in mind when he/she makes certain choices of action or behaviour. Such genuine consideration must be of

one's own free will and not of coercion. For example, fulfilling a duty that was entrusted to me under gunpoint would not be considered trustworthy behaviour because it is not done of my own free will, but rather because I have an incentive to avoid the consequences of death.

Harding goes on to explain that one might trust another because of the other's moral commitment to abide by the trust placed in him/her. I think of this moral commitment as one's way of maintaining his/her stories of self as being a trustworthy person. For example, if I know it is important to my partner to remain faithful in order to be a "good partner," then I will trust my partner to be faithful in the relationship due to his moral commitment and desire to identify as "good partner." Based on the encapsulated-interest account of trust (Hardin, 2001), we decide to trust others based on who we think other people are in our relationship with them.

However, when individuals noticeably change in our relationship with them, what might happen to our trust within the relationship? Most of the participants described noticing significant changes in the overall personality of the parent with an ABI, which resulted in changes in their relationship. Willow described noticing the changes in her mother after she incurred an ABI:

I mean, she was a very, very different person. Before that (the accident resulting in injury), I remember when I got upset when I was a kid, she would be like, "okay, you are sad. It's okay for you to cry and like, you know, talk about your feelings." And like, after she woke up, I mean that was like the worst time... she was very angry, but in a very quiet way... She stopped cooking and that was a big part of our household when we were younger... then the fact that my mom and my relationship got so bad after that.

Elizabeth also described a sense of contradiction in the way that she was parented and the way her mother was now behaving, particularly towards her sister:

My mom's a lot harder on her (sister) than she's ever been on me. It makes me so mad because I feel like my mother makes me feel like I should be able to protect my sister, and it's so messed up to think that I need to protect my sister from my mother.

For Elizabeth, being a competent older sister meant protecting her sister – a duty imposed on her by her mother as part of her identity as an older sister. However, when her mother with an ABI started to emotionally attack her younger sister, something she would not expect from her mother's role as "good mother," she noticed a role conflict – does she protect her sister as a good sister would or does she support her mother like a good daughter would? She explained that receiving such contradictory messages have further diminished her relationship with her mother as it is clear that she struggles in who to believe – her mother or her sister. In such circumstances, her sister remained the same, and thus, held the same level of trust. However, her mother had changed in many ways resulting in her mother becoming someone unfamiliar to her and someone she could no longer rely upon. Therefore, she could no longer trust her mother like she had before her mother's injury.

We know based on the research literature that it is common for the relationships between family members to change after one family member incurs an ABI (Carnes & Quinn, 2005; Charles et al., 2007; Freeman, 2012). These relationship changes are mostly due to the individual with the injury enduring a perceived personality change (Yeates, Gracey, & McGrath, 2009) and undergoing an identity reconstructive process in reaction to the changes in their physical, psychological, social and cognitive functioning (Cloute, Mitchell, & Yates, 2009; Gelech & Desjardins, 2011). The participants echoed this finding in the research in identifying such changes in their parent. Suzie stated,

I know that a big part of the problems that I had stemmed from the fact that a very different person came home from the hospital than went in. Basically, I felt like my mother had died and I, like, this stranger came and took her place... A lot of the problems that we had in our relationship stems from that. One of the big conclusions that we (therapist and participant) came to in the last year was that I wasn't allowed to grieve because my mother survived.

Suzie described one of the previously mentioned definitions of ambiguous loss by Boss (2007) – the psychological loss of someone who is physically present. This comment further supports Landau and Hissett's (2008) findings that family members struggle to create new relationships with family members with traumatic brain injuries due to feeling unable to effectively grieve for the person they lost while simultaneously creating the relationship with the person they gained. If the person they gained is unfamiliar, new trust needs to be developed; yet it seemed to these participants that this trust was assumed rather than recreated.

As I listened to these participants describe their pain in ambiguously losing their family member and having a new person take their place, I perceived a sense of unfairness, outrage, and frustration that, as adolescents, they were expected to simply accept this new person as the parent they trusted. This tended to take the form of rejecting the parent's parenting at the same time as their growing autonomy was not acknowledged as adolescents. Elizabeth explained,

You wanted me to take all this responsibility on and now you want to turn around and try to be my parent again? Like, kind of screw you, I don't want any part of it. You can't expect me to be an adult and then expect me to be a child again... This is something that still is an issue. I feel like because my mom was in the hospital for that period of time, like right when I was turning twelve and because I was so angry with her as I was going

through that transition, I think that... it's like she missed the shift from child to adult for me... Like she still wants me to be eleven... She hasn't really wrapped her head around the fact that like, I'm turning 30 and I've lived away from home for ten years, and I'm getting married and we are talking about kids.

As Elizabeth described, she matured into adulthood, yet her mother was unable to make this shift to accommodate the new person she had grown into. Another participant, Ruth, described a similar experience:

Like, the older I get and become the person I think I want to be, the further I get from this person I used to get along with and have a close relationship with. So instead of growing up and building a stronger relationship as an adult with my father, I am losing it with every passing year... (He's) not something I want a relationship with or could want to be shaped by, I guess.

It seems that as the parents with an ABI requested that their new selves be accepted and embraced in the relationship with loved ones, their adolescent children turned adults were making the same request. There is a parallel process of growth occurring as a result of a parental ABI. However, the difference between maintaining the relationship and having the relationship disintegrate lies in how these subtle requests are handled. When the relationship changes in reaction to a parent incurring an ABI and neither parent nor child makes the expected adjustments to accommodate such changes, it follows that there may be a sense of a violation of the pre-existing trust within the relationship. If the relationship changes, then the nature of trust in that relationship will also need to change. Yet it seems that trust is assumed to stay the same in these relationships because few acknowledge the changes in the individual and relationship.

Therefore, trust after parental ABI may become fragmented, damaged, or broken due to the lack of acknowledgement of the changed relationships and trust between family members.

Trust violations, or betrayals, within the parent-child relationship have been discussed with the development of the betrayal trauma theory by Freyd (as cited in Gobin & Freyd, 2014). Betrayal trauma is a type of experience involving one's trust being violated in a traumatic way, such as sexual violence perpetrated by a loved one or experiencing a motor vehicle accident (Goldsmith, Freyd, & DePrince, 2012). In both instances (i.e., sexual violence and motor vehicle accident), one's expectations of others is being challenged in a hurtful and potentially damaging way. The betrayal trauma theory was developed to conceptualize how people can endure such betrayals of trust. Specifically, Freyd suggested that individuals attempt to cope with traumatic betrayals by blocking their awareness of the betrayal. As a result, these individuals are able to continue to engage in their critical attachment relationships despite the betrayal of the pre-existing trust (Gobin & Freyd, 2014). Though such adaptations may be helpful to start, continued blindness to betrayals can lead to further victimization in other relationships by interfering with the decision-making process regarding who is trustworthy and who is not (Gobin & Freyd, 2014). Though this theory was created with the intention to understand the trauma of childhood sexual abuse, more recent literature has demonstrated that betrayal trauma theory could be applied to other early betrayals (Chan, 2009; Goldsmith, Freyd, & DePrince, 2012).

It is unclear if some of these participants would identify as having experienced betrayal trauma resulting from the changes in their relationships with their parents. However, some participants described parts of their experiences with notes of betrayal by someone or something. Suzie referred to her sense of betrayal from both injured and non-injured parents:

There was a guise of him (father) standing up for us, but he actually wasn't. Like he was actually going along with her (mother), and I think the scary thing is that he continued to do that without really thinking about the consequences of that... I was saying to my parents, "you know, I'm graduating, are you going to come," because I'm still black-sheeped from the family. And my dad was saying, "you know, I would really like to go," and then the word is after, "actually we can't come." And I heard through the grape-vine that the reason why he's not coming is because my mom threatened to divorce him if he'd gone. And so they didn't go.

Suzie anticipated her mother's reaction as she was unable to rebuild a trusting relationship effectively with her after her mother's ABI, but when her father also fell short of her belief that he was still there for her, she no longer felt she trusted either of her parents, further alienating herself from the family. In short, she felt betrayed.

Research has demonstrated that betrayals define how we develop trust later in life (Bonivitz, 2013; Gobin & Freyd, 2014; Kieffer, 2013). In fact, such betrayals can shape our mental health (Goldsmith, Freyd, & DePrince, 2012), our future trust-based relationships (Gobin & Freyd, 2014), and our identities (Kieffer, 2013). Kieffer (2013) explained that betrayals in the parent-child relationship during adolescence may result in more problematic, unstable, and tumultuous adult relationships as they attempt to restore a sense of trust in relationships. Furthermore, individuals who experienced a betrayal during key developmental time periods may also learn that others cannot be fully trusted (Kieffer, 2013). Suzie continued to explain:

There's nothing more that I wish [for] in this world [than feeling] like I could trust that somebody else would fully be able to take care of me. But I don't know that I can really trust that. I want to believe that.

Suzie's description highlights the challenge in being able to give others the opportunity to be trusted – a lesson learned from experiences in her parent-child relationships. It is as though the experiences in the family home taught these individuals growing up with a parent with an ABI that they could rely upon no one else but themselves. It is important to note that such lessons were not only learned within the context of the parent-child relationship, but also the sibling relationships. Cyrus stated,

It's so interesting because before this, like, my sister was the reliable one. She'd get better grades in school. She'd be more active and going out and doing stuff... Through this process, it's like she instantly cut herself off. I don't think she did this on purpose. But it's like, she said "okay, I'm out. I'm done. I don't have to worry about this, I'm out." Whereas with me, it's like, oh, I'm stuck... Even not being really close to a family growing up, like an extended family, I still see the value of still needing to be there for people that need you.

Though Cyrus did not directly state that he needed his sister, the above quote suggests that his sister left in his family's time of need. He described needing his sister's help with the enormity of responsibility that fell on his shoulders, and she simply was not there.

Of all the people in the world to trust, we tend to start with trusting our own family members, as demonstrated by Erikson's first psychosocial developmental task (Erikson, 1963). It is critical for us to learn how to trust for future relationships to grow and develop. We expect that our family members will stand by us in our time of need. However, when they are not there for us, the depth of such betrayal cannot be ignored. We cannot help but be changed by such an experience. However this betrayal occurred, it is clear that family members behave in ways that we might not expect or anticipate in the context of living with a parent with an ABI. It casts



doubt on the relationships that serve as a reference point for future relationships. In other words, if this person, who used to be there for me in my dark moments, is not there in my darkest moment, I may question the potential of anyone being able to be there for me.

I am reminded of the lyrics of a song that my siblings and I adopted when we were younger: Stand by Me, performed originally by Ben E. King. The lyrics describe a man's plea for his loved one to stand by his side while they face life's challenges. King, Lieber, and Stoller's (1962) lyrics change from a plea to having his loved one stand by him to a plea for the loved one to allow him to stand by him/her. Specifically, Ben E. King sings about a variety of situations from being alone and afraid to catastrophic world events to demonstrate his hope that this person will stay by his side. However, in the last chorus, the lines change slightly, asking this person to stand by him when he/she is in trouble – even when all their friends are gone.

This song has been a personal anthem for loyalty and trust, and upon closer inspection, I have recognized this subtle shift in the lyrics that connected to one last thought about trust shaping identities and self in the context of living with a parent with an ABI. Trust is reciprocally developed (Gottman, 2011). To develop a trusting relationship, one must not only be willing to be there for the other, but also be prepared to allow the other to be there for oneself. The other person may be trustworthy, yet if I am unable to trust another, then I may never give them an opportunity to demonstrate their trustworthiness. Furthermore, if I am unable to trust the other to do what I expect and hope in my own best interests, I also cannot enjoy the richness of such relationships in how they also help me evolve my identities and self. The self may stagnate, leading us to crave that trusting relationship even more.

Some participants reported discovering that they needed to open themselves up to relationships they could rely on, and they disclosed making a choice to start to redefine their trust

in healthy relationships. Before meeting her current husband, Michelle described frequently talking to strangers in a neighborhood bar about her challenges and experiences with her mother because they were people she felt were safe:

I don't confide in, like, in my best friend and we don't talk about all this... I could always talk to her, if I wanted to, but no... I would just go to this shady pub in downtown... I'd be the only young person drinking with these toothless old men that were drinking all day, every day. And we would like, lots of my best friends through that period were like 50, 60-year-old men. We would... talk about anything basically. There was no judgment whatsoever.

Later in the interview as Michelle reflected on her current ability to talk more openly about her experiences with her husband and how that has helped her create more stability in her life:

I guess having my husband. Like he's stable and he's understanding and all that. So I like that part and knowing I have someone to fall back on, and I can talk to him about anything... This is the first time I've lived in one place longer than a year since I was 16 or 17.

It seems that healing from such betrayals may also have occurred within the relationships in which the participants chose to risk being vulnerable. In some cases, this resulted in a repeated betrayal, while in others, like Michelle, they were able to learn what it meant to trust and reap the benefits of having trust in relationships.

As I think back to the process of the interview, much of the work entailed demonstrating my trustworthiness by holding participants' stories without judgment and allowing the participants to share in the way they needed to. With these conversations, the participants were able to seek and accept trust in the research-participant relationship, revealing the underbellies of

their selfhood with all its complexity. How might one perform one's identities if one is frightened of the other being unable to understand or support the identities shared or performed? I think this speaks to the possibility that through developing new relationships, redeveloping and healing old attachment injuries, and reconstructing the meaning of trust, these participants began to accept the people they have become in their adulthood despite how different it might be from the person their parents knew. The change in self and identity was acceptable as it was the person they wanted to share with the world, despite the residual scars of previous betrayals within their families. Though they were still learning to trust again, the interview took place within the fluid context of attempting to learn what it means to trust others in a short amount of time with the magnitude of an event that had fundamentally changed their understanding of self and identity. Now, I turn to discuss the challenges that result when such identities contained within relationships are unrecognized or forgotten.

## CHAPTER EIGHT: THE UNRECOGNIZED AND FORGOTTEN:

### A LOSS OF IDENTITIES

*I was standing next to his hospital bed, and it was, “who is that? I don’t know.” Like that was, um, I think that was the big defining moment because... he couldn’t say my name, nothing. And so it was, it was less of a making of who I am now, and more of an unmaking of who I was. Like I lost that identity of I’m not his kid... So if I’m not his kid, then who am I? What am I? And I think I really floated on that all the way through the rest of my adolescence... I’m really just existing and not really living. - Catherine*

The quote above was from the interview of a participant, Catherine, who distinctly remembered the moment her father gazed upon her for the first time after the stroke that resulted in ABI. She described being close to her father, and for him to not recognize or remember her led to an unravelling of identities and self, resulting from such betrayal. This powerful quote demonstrated the “unmaking” of identity when a parent does not recognize us, does not know us, or forgets us. The act of being forgotten or unrecognized is impactful for anyone who has experienced it and, though intuitively, this phenomenon of being unmade by being unrecognized or forgotten by one’s parent makes perfect sense to me, I acknowledge that it warrants further exploration and interpretation to gain a better understanding of why it makes sense in this context and how such a hurtful phenomenon also led to shaping identity.

I will start with considering the meaningfulness and importance of recognition. According to the Online Etymological Dictionary (2017), recognition is a word dating back to 15<sup>th</sup> century and derived from the Latin word, *recognitionem*, meaning “a reviewing, investigation, examination.” Recognition was used in the 15<sup>th</sup> century to convey knowledge

and/or understanding of something. To recognize something was to understand it, acknowledge its existence, and to some extent, approve of it. Although, today, understanding tends to refer to an in-depth comprehension of something, it is important to note that we may also use recognition as a way to demonstrate a similar in-depth knowledge of others. For example, the statement, *I see you*, can suggest a simple recognition of another by physically seeing another person we recognize, but it can also be a psychological acknowledgement of one's personhood. In the latter, we suggest an understanding of the other by saying that we see the person for the identities and selves he/she is presenting to us and that those identities are uniquely his/hers.

In a North American social and historical context, there are many examples of the influence of such recognition or lack thereof on individuals or groups. Prime examples are those of the human rights movements regarding people who identify as diverse from the dominant group including women, people of colour and/or various ethnicities, people identifying as LGBTQ, and people with disabilities. These human rights movements involved a call to be recognized as human beings with diverse identities, backgrounds, values, and beliefs as well as to be celebrated for their difference rather than being tolerated as beings, inferior to the dominant group (Jones, 2006).

Jones (2006) discussed considering recognition of diversities instead of simply tolerating them because of the undesirable effect on diverse persons' sense of self and identities. According to the Merriam-Webster dictionary (2017), tolerance means, "a sympathy or indulgence for beliefs or practices conflicting with one's own" or "the act of allowing something." However, in practice, tolerance tends to convey a slightly different meaning. Jones argued that tolerance signifies withstanding something of which one disapproves. To some

extent, tolerance also suggests a lack of acknowledgement of diverse identities, as though one knows they exist, but one does not need to know more about their existence (Jones, 2006). For example, a person might tolerate homosexual marriage suggesting he/she can put up with the practice yet may not approve of or acknowledge it as a valid practice. Instead, Jones suggested that, politically and culturally, we consider practicing recognition of diversity as this acknowledges the identity and practices of others as valid and worthy of existence. With social, political, and cultural recognition, one's identities can be publicly acknowledged and approved of rather than shamed and ignored, thus re-affirming the identity (Jones, 2006). In fact, such public acknowledgment and approval can support individuals' ability to own and accept their own diversities rather than actively attempting to reject or destroy such diversities within themselves (Liu & Laszlo, 2007). Jones demonstrated the importance of recognition on identities as these identities cannot thrive without the supportive social acknowledgment of their existence and value.

Similarly, acknowledging and recognizing adolescent identities is integral to adolescents' acceptance of those identities in social interactions of all kinds. How we understand our selves and identities is partially informed by what is reflected back to us by our social context (Bamberg et al., 2011). In the case of the participants, it is as though one's identity as "my father's daughter" could no longer exist if the father did not recognize that she is "my daughter." This led me to wonder how a parent's recognition or lack of recognition could be so powerful as to make or break an identity in adolescence.

Fivush, Habermas, Waters, and Zaman (2011) indicated that parents have the capability to influence the way their children, from preschool to late adolescence, structure and narrate their autobiographical memories. By observing and listening to parents share stories of experiences,

adolescents also learn how to share similar stories about themselves, their parents, and their families. Also, adolescents are influenced by intergenerational narratives regarding their family, typically shared during family gatherings involving storytellers with strong connections with the teenager (Fivush, Bohanek, & Zaman, 2010). Intergenerational stories share information about their parents' childhood, which then become integrated as part of the adolescent's personal stories. Fivush et al. added that through the process of listening to and narrating intergenerational stories, adolescents practice creating coherent stories for themselves while intertwining their family stories into their own narrative identities. Though it is unclear if such a process occurs in childhood, it is believed that the unique demands placed on adolescents set the stage for individuals creating identities with narration (Bamberg, 2004b; Habermas & Bluck, 2000; Pasupathi & Weeks, 2010).

That said, the adolescent is only receptive to such dynamics and influences when the parent-child relationship is warm, secure, and authoritative in addition to the family home remaining a safe, caring, and stable environment (Beyers & Goossens, 2008; Dumas et al, 2009; Faber et al., 2003; Pratt et al., 2001). Many adolescents with such relationships with their parents seek approval and confirmation of the narrative being constructed by the adolescent. Ciairano et al. (2007) discovered that adolescents with secure and authoritative relationships with their parents were more likely to make decisions that they knew their parents would approve of while those without such a relationship would not consider their parents' preferences. This suggested that adolescents continue to utilize parental guidance to construct identities based in experience. The parent, then, reflects this desirable identity back to the adolescent when the parent-child relationship is perceived as safe and secure.

When parents incur an ABI, the relationship between parent and child is disrupted and the family home and relationships may not be perceived as safe, secure, and stable as demonstrated by the previous interpretations. It is also known that adolescents begin to view their parents differently after the parent incurs an ABI, which also results in a change in relationship and family dynamics (Freeman, 2012). From what the participants said regarding the influence their parent's ABI had on their selves and identities, observing the changes in their parents and their family over time resulted in discovering that one of the significant points of reference for personal identity development was no longer available, accessible, or reliable.

Michelle described witnessing such an impact on her younger sibling:

It's this traumatic thing... And then my little brother – Mom didn't remember him... I guess just like, having lots of (sigh) guilt because I just feel like I just, we could have done more to help my brother... He's probably like the most messed up now out of all of us (laughs). Yeah, he's got like tattoos all over his neck and he's like, I don't know. He's got some, like, anger issues, and stuff like that... My mom was going through her wallet and she was like, "Oh I have this picture of this weird fat kid in here." And like, he went through this chubby period and then he wasn't again, so we were like, "that's [younger brother]" and she's like, "no, I wouldn't have a fat child like this!"

Michelle noted her own sense of guilt in witnessing her mother's ongoing difficulties remembering the youngest child in their family. While noting how she was affected by witnessing her brother's struggle, Michelle fully acknowledged her brother's reaction to being repeatedly forgotten by their mother and regretted not being more present for him to help him know that she, as a sister, recognized him. In a way, witnessing such an experience highlights an early recognition of the fragility and vulnerability of one's self and identity in the context of the



family – that in a moment, one could disappear from the life of a parent. If one is no longer remembered by a parent, it could mean that the child does not exist in the same way. This phenomenon highlights a human fear common in various cultures – the fear of being forgotten.

Historically, various cultures around the world have demonstrated that the human species has an intense fear of being forgotten and being left in nothingness. Lifton (1979) reflected on how people understand death and immortality, particularly in terms of the memorializing behaviours we tend to undertake as human beings after a loss. Many people from various cultural groups engage in ritual and practices to promote a symbolic immortality through sharing the names and stories of the deceased. The idea, then, is that if one is remembered by others, one will continue to live on. One does not cease to exist if one is deceased, but instead one continues to exist albeit in a different way. With this logic, then, if one is forgotten, then one may cease to exist.

Though it may seem exaggerated to apply this same logic to adolescents whose parents with an ABI no longer remember them, it is important to note that this fear is common within North American culture. We have a strong need to ensure our names are left in places to commemorate or memorialize us and our deeds or contributions. It is our way of remaining immortal despite our physical death (Lifton, 1979), and it is a very human experience to fear our mortality and vulnerability, particularly in the face of existence coming to an end (Frankl, 1992/2006). This same fear of mortality and non-existence is sparked early in these adolescents who are faced with their parents who no longer remember them, as it forces them to consider their own existence – such considerations are not expected to occur until middle or late adulthood (Armstrong, 2007; Dorner, Mickler, & Staudinger, 2005). Catherine further described

being unrecognized amidst the chaos, confusion, and uncertainty of her parent's injury and the impact this had on her sense of existence:

So, it was, sort of, a confusion – not really knowing what to say or do... I was raised in a family of “crying doesn't solve anything” so I don't, I don't remember crying about it except I think when they first told me. But I do remember (pauses 3 seconds), um. Like the nurses saying, “so whose that?” and him looking right at me and saying, “I don't know.” And that brought a sense of – I don't know if its isolation or abandonment – but certainly being lost, like I didn't exist.

When a parent has forgotten their child as was conveyed by participants quoted above, there is an experience of being erased from existence. It is not a surprise, then, that being forgotten by a parent, the reference point for most identity constructive processes, is transformative as one must now reconstruct independently one's own existence within the context of a family influenced by a parental ABI. However, to add to this phenomenon of being forgotten and a need to re-story one's identities and self within this context, participants noted doing the forgetting as well.

Within the context of a parent acquiring an ABI, it became clear that being unrecognized and forgotten are only part of the transformation that occurs.

In the case of the participants, many described having difficulties remembering their experiences regardless of how much time had passed. While one participant had 25 years between her current self and the moment her parent incurred an ABI, another only had 10 years with approximately four years of living outside the family home. This did not seem to matter for the participants struggling to remember parts of their stories. Thus, some participants described a parallel process between the parent with an ABI and the adolescent child – both struggled with memory and forgetting. However, the parts the participants described remembering were the

parts that they identified as being significant to their sense of self and identity within the context of living with a parent with an ABI. Within the early acute phase of the injury (described by the participants as the first two years post-injury), participants noticed singular moments usually centred around their parents' reaction to them. Suzie elaborated,

I remember him (father) coming to get us, how upsetting that was for him. I remember – I don't remember much. Just uh, I'm sure I had questions about um, what happened to mom, what happened to him, what's going to happen to us? ... I don't remember any of that stuff. The only next real memory I have is going to visit her, and her not remembering us... The only parts that I remember is really when we went to go and visit her.

It became apparent to some of the participants describing their experiences that there were lapses in their own memory, mirroring that of their injured parent's memory. Catherine attempted to make sense of her own lapses in memory by stating,

I actually don't remember a lot of my adolescence. And it's, I almost wish I could say that it was because I was doing drugs and drinking, but it isn't. It's, I, I don't think it's as easy as saying I'm repressing memories so much as I wasn't encoding them at the time because I didn't want to be there... There are aspects that I just, it's just a blur... some of my cousins and some of my friends remember high school so vividly. And I don't. And I think it's because my mind was elsewhere, both figuratively and literally. Like, um, my mind was thinking about my dad, so what was actually physically around me didn't interest me much.

Catherine and Suzie were not alone in acknowledging that memories from their adolescent years were choppy and piecemeal at best. The parts they remembered were centered around important

moments with or about their parent or their family. Other memories were focused on experiences with friends who helped them be in the moment rather than focused on their home. However, because of these lapses in memory, I wondered, as Catherine stated above, if it was simply a lack of encoding (or storying them) or a desire to not remember.

I think of my own experiences with my mother and my memory of those experiences. As an adolescent, I used a journal to express and make sense of the changes I was witnessing in our family home. I poured my teenaged angst, heartbreak, tears, and genuine questions of existence and reality into that journal. Approximately a decade later, as I started my research as an adult and realized I struggled to remember my full story, I looked for the journal that I had buried away yet could not destroy. When I found it, I rejoiced and opened it up bracing myself for the angst and pain that I would face by re-reading the passages. However, I discovered I had torn the pages out – a three year gap of torn pages, and so the story was gone. It was an act of me willing myself to forget what had happened from my adolescent perspective. Through the physical act of tearing out my journal pages, I intentionally tore those pieces of the story from my memory so that I could forget. To this day, I do not remember the act of tearing out those pages nor the reason for it. I do not remember the exact sequence of events as I had clearly documented them in my teen years. I remember the emotion and pieces of the experience, but the exact events, information, and timeline were lost. Since then, it is only through reconstructing this story using conversations with siblings, my mother, and other loved ones, as well as clues I had left behind, such as old paintings and poems that I created for school, that I was able to rediscover what I had so desperately forgotten. As I heard these participants share their challenges around remembering what was once forgotten, and we explored it further in the interview, I recognized this same need to forget the story as a teen.

In the academic literature, this can be explained as one's way of managing trauma as an adolescent (Kieffer-Kristensen, Teasdale, & Bilenberg, 2011; Taylor & Weems, 2009). In fact, Kieffer-Kristensen and colleagues found that children of parents with an ABI exhibited more post-trauma symptoms than children with parents with diabetes or parents without any diagnosable condition. One such symptom is simply not encoding experiences into long-term memory, otherwise known as an act of forgetting just as the participants described. In addition, Dumas and colleagues (2009) also discovered that parents have the capability to guide low-point narratives to help their children construct a positive sense of identity as emerging adults in relation to the low-point event. Without the parents' guidance, such low-points in one's story might be focused on destructive meanings or may be ignored entirely as an event without meaning (Dumas et al., 2009). Therefore, the participants and I forgot details, events, or entire moments that then shaped how we viewed ourselves in the experience.

The participants indicated being transformed because being forgotten or unrecognized as well as doing the forgetting erased existing identities. In addition, participants were frequently tempted to involuntarily or voluntarily forget challenging experiences inherent within the context of living with a parent with an ABI. Thus, in combination, it seems that adolescents constructing identities in this unique context felt that their old self could no longer exist in their new world. They had to create something new that fit with new experiences as well as the remembering or forgetting of experiences. These participants fully acknowledged that the event of a parent incurring an ABI had changed them and continues to change them in their adulthood like many other traumatic events. However, as mentioned in the previous interpretation regarding trust and betrayal, many of the participants may not recognize their experiences as traumatic, but rather something that happened in their family that had a lasting influence. In the following

interpretation, I discuss another contributor, silence, that may further influence this lasting reflection on identity and self construction.

## CHAPTER NINE: SILENCE: THE UNACKNOWLEDGED CONTRIBUTOR TO IDENTITY

*“It was just this thing we didn’t really talk about... Never admit anything was wrong.” -*

Ruth

*“I guess, just [Husband] is the only person I’ve ever told this stuff to. Like, this is stuff that like my brothers don’t even know.” - Michelle*

*“Taking that very stoic, very strong perspective on life. Rather than acknowledging that life was falling apart.” - Catherine*

I had often called this population – children of parents with an ABI – the hidden population of the brain injury field. Children of parents with an ABI are frequently forgotten in the process of their parent’s recovery due to a lack of services addressing the family and a strong desire for the children to be protected from the effects of the injury (Butera-Prinzi & Perlesz, 2004; Freeman, 2012). Furthermore, in my master’s thesis research, I found that this intended protection was problematic as the children recognized and witnessed the changes in their parents yet had no way to understand what had happened in their family and had few supportive resources to learn more (Freeman, 2012). As such, these children were left in the dark for the purposes of protecting them from information that could in fact help them (Biester et al., 2016). The research literature is perpetuating the idea that children are not affected by parental ABI when researchers ignore or forget to portray the experiences and voices of these children, thus

encouraging further silence and the concealment of this unique group (Butera-Prinzi & Perlesz, 2004; Charles et al., 2007; Freeman, 2012).

I also referred to them as the hidden population because during recruitment, they can be a challenging group to target. I discovered that these individuals as adults could be found in a variety of settings, and though many had come forward to reveal themselves as part of this unique group affected by parental ABI, others had chosen to remain hidden. Further still, some had revealed themselves, but chose to remain silent for the fear of the consequences of voicing their experiences: a sense of betrayal to the family or parents, a psychological and emotional undoing as a result of revisiting such experiences, a concern for the newly constructed and fragile new normal, and a general dislike for revisiting buried memories. As Clint Smith (TEDTalks, 2014) stated as part of his spoken word piece, “Silence is the residue of fear” and it seems that this population is ripe with fear: A fear of what might happen if they were to use their voices and disclose the meanings generated about their parent, their family, and their selves.

I recognize this desire to remain silent, and “never admit that anything was wrong.” There is utility in maintaining such silence. It can be a way to protect oneself and others (Bond, 2010), to validate and agree with what is said without overtly validating or agreeing (Glenn, 2004; Brown & Coupland 2005), and to deny one’s truth for another (Glenn, 2004; Fivush, 2010). For myself, it was a way to maintain a normal life and pretend that this thing that happened did not shape me or my view of the world. It was a way to maintain the status quo that I had come to know as normal. However, it was only when I chose to voice my experiences that I recognized how my past had informed my present. As the participants shared their stories, I recognized the struggle of breaking the silence and the attempt to own all the parts of the story of living with a parent with an ABI as an adolescent – the good, the bad, and the ugly composing



such complex experiences. In knowing that my own silence prevented me from acknowledging the influence this critical incident had on my own self and identity, I noted the role of silence in the construction of self and identity in this hidden population.

### **Truth in Silences**

Silence is often believed to be simply the absence of sound or speech. However, as Max Picard (1949/1988) argued, silence is something that is whole in and of itself as its existence is not defined by sound or the absence of it. Instead, silence exists despite sound as “one cannot imagine a world in which there is nothing but language and speech, but one can imagine a world where there is nothing but silence” (Picard, 1949/1988, p. 17). Picard suggested that silence exists as a necessary part of the world and can contain within it a world of possibility. However, once silence is interrupted with speech and language, the focus is on what is being said while silence contains what is being unsaid (Picard, 1949/1988). What is left unsaid is just as important as what was said, and truth can be found within the silence.

Language and silence are connected, yet exist independently of each other (Picard, 1949/1988). Though silence may be considered the negative of language, like the negative space in a painting or the negative of a photograph, silence tends to remain hidden until we are alerted to its presence, and it is outwardly discussed as something from which to derive meaning (Glenn, 2004). The partnership of language and silence reminded me of a key concept of hermeneutics: *aletheia*. Aletheia is a Greek word used to connote the action of unveiling what was once veiled (Moules, 2002). Extending the concept as it applies to silence, aletheia means to also give voice to what was once silenced in understanding identity construction in the context of parental ABI. However, it seems that silence itself has something to contribute in shaping our selves and identities much like language (Fivush, 2010).

There will always be parts of our stories that will not be shared because once we reveal some parts through narration, we are inevitably hiding other pieces yet to be narrated (Fivush, 2010). There is also virtue in maintaining secrets as a healthy and important part of socialization and conversation, yet such silence can also come with its dangers. If parts or entire narratives are never shared and remain unsaid in the silence, it is possible that such experiences will remain hidden or disguised as they rest in the world of infinite possibilities. In other words, if we do not speak of a human experience, then it can disappear in the silence, and we can pretend it was never part of our lives. Gadamer (1960/2004) suggested that human understanding comes from language and conversation. However, he also acknowledged that there are limitations to language just as there are limitations to understanding. If an experience is never voiced, then we may struggle to begin to understand it as we do not use language to negotiate meanings from the experience (Davies & Harré, 1990; Josselson, 2009).

However, there are other ways to be in conversation in silence to create meaning from lived experiences. I may never utter a word, and yet I may engage in a silent dialogue with the messaging that is presented to me through culture and society. Heidegger (1927/2010) emphasized that individuals learn how they are supposed to interpret their world and how they are to respond to the world through socialization and social messaging. It is through one's interpretation of these social messages that one may learn what information needs to be said and what information needs to be left unsaid at any given point in time to convey one's own personal messages (Bamberg et al., 2011; Fivush, 2010). For example, individuals who lived with a parent with an ABI as children may always remember what happened, but they may struggle to voice their experiences due to limited interpretation of circumstances, which were considered beyond normative developmental occurrences. Social discourses give us interpretations of non-

normative experiences, yet they fail in helping us create helpful meanings from the non-normative experience simply because they are considered abnormal (Fivush, 2010). Abnormal is wrought with negative connotations, especially in adolescence as it is a means of stigmatizing experiences (Hendry & Kloep, 2012).

Alternatively, individuals influenced by parental ABI may create other meanings shaped by the familial and cultural narratives shared exclusively within the family. In some cases, the family narratives combined with the social discourses that suggested that the adolescent child had no reason to be challenged and distraught by their experiences of parental ABI. Cyrus explained,

When you are going through it, you'll feel like there is nothing wrong with you. [I] feel there is nothing wrong with me. It's my mom that's dealing with this. Why do I feel like I need to get therapy? I'm here to help her. I'm *her* support... Like just a simple conversation in the last 13 years, just sit down for an hour or two and just say like, "so how's *your* life going? Crazy still?"

In believing that one has no place to share his/her experience and should have no reason to feel the emotions and psychological pain that he/she does, it makes sense that one would make an effort to remain silent because their reactions were not acceptable. It was made clear within some families that there was no place for the adolescent's emotional experiences. Elizabeth explained her experiences of silence:

So that was the biggest thing – was like, repressing and like doubting my own emotional reaction to things... Like, that's what has taken me like 20 years to start dealing with. Like, not letting myself react genuinely or authentically. I have to like, um (pauses), I don't even know how to say it (pauses). Like, doubt the legitimacy of reactions when it

first comes up... And then secondary to that was just like, never being allowed to express anger and like... having those two things so intertwined that I couldn't express anger to anyone.

Elizabeth worked hard to silence herself and emotional experiences to the point where she was unable to express any negative emotion due to the suggestion from her parents that her anger was not valid. Both these participants revealed that individuals are not only silencing themselves due to a sense of doubt about their own experiences, but also are feeling silenced by their family systems' and societal expectations of their suffering, coping, and healing processes. Their experiences were not acceptable, and therefore, silence consumed the possibility of creating alternative meanings suggesting that their experiences were valid, legitimate, and worthy of voice. I suspect that this is how this unique population became a hidden population as few individuals would have legitimized or validated their experiences enough to combat such social and familial discourses. As such, there are few opportunities for these adolescents influenced by parental ABI to share their unique perspectives as a child within a family system influenced by an ABI. With few opportunities to story one's experience with language, the meanings derived from parental ABI remained in the silence. Therefore, in understanding the role of silence in such meaning making, we may begin to understand how silence contributed to one's self and identity.

### **The Forms of Silence**

The research literature and philosophical explorations of silence suggest that silence comes in multiple forms when observed in social systems (Achino-Loeb, 2006; Glenn 2004; Picard, 1949/1988). For the purposes of this discussion based on the data gathered, only two primary forms of silence are relevant: imposed silence and self-silence. Imposed silence

suggests that a person or group of people are being silenced by another force, typically one that is considered more dominant than the other (Glenn, 2004). Being silenced is often witnessed by marginalized groups or individuals, particularly when the marginalized group challenges the dominant narrative with a counter-narrative (Brown & Coupland, 2005; Magu, 2015). An African proverb with many variations across the continent speaks to this phenomenon beautifully: “Until lions write their own history, the tale of the hunt will always glorify the hunter” (as cited in Magu, 2015). This proverb speaks to how history, which is written and told by the dominant group, inevitably silences the marginalized groups as the dominant group may only share one interpretation of the experiences: their own (Magu, 2015). This interpretation is then perpetuated and shared through language conveying that this is *the* truth while alternative truths remain in the silence until counter-narratives are developed, negotiated, and shared (Achino-Loeb, 2006; Magu, 2015; Nelson, 2001).

In addition, imposed silence can occur due to societal and cultural expectations that certain experiences do not happen in the society (Fivush, 2010; Glenn, 2004). It is a way to maintain the dominant social and cultural narrative of what is within the normal realm of human experience, and such narratives do not allow for atrocities, trauma, or other forms of experiences that may be beyond one’s sense of normalcy. Imposed silence can take the form of literally disallowing a person to speak, disbelieving or discrediting one’s story, misunderstanding or misrepresenting an event, or blaming or shaming the individual for their experiences (Fivush, 2010; Glenn, 2004; Magu, 2015). Imposed silence can occur at the societal level in which individuals have no space to be heard as well as at the familial level in which subtle communications may deny individuals’ experiences (Bond, 2010). Elizabeth described how her parents did not acknowledge that her behaviours in adolescence were not simply due to her

developmental transition to adulthood, but rather her behaviours were influenced by the experience of a parent incurring an ABI:

Yeah, my parents don't even separate the two (adolescence and parental ABI). Like my dad teased me for years. He was like, "you put us through hell when you went through puberty." And just recently, I'm kind of like, "well, what did you expect? Look what I'd just gone through!" But to them, those changes were all hormonal... They were all part of puberty. I don't think that they really... clued into the fact that I was, that I had been so affected.

She described the experience of being silenced in the home where it was suggested that she had no other reason to struggle beyond what one would consider "normal adolescence." In the imposed silence, other truths may be found that counter the dominant discourse, yet if these truths are never brought forth, it is possible that the dominant discourse will limit the conclusions one makes about one's self and identities (Achino-Loeb, 2006). In the case of the above participant, she admitted to once believing she was simply a challenging adolescent and did not acknowledge the possibility that the parental ABI that coincided with her adolescence also contributed to putting her parents through hell until she had engaged in therapy. This suggests that such an imposed silence can be internalized to shape one's view of self and experience.

The second form of silencing that is relevant to this discussion is self-silencing. Contrary to imposed silence, self-silencing results when an individual makes a conscious or unconscious choice to not disclose information (Bond, 2010; Fivush, 2010). Though this conscious choice of non-disclosure may also be influenced by social expectations and dominant discourse, self-silence is the result of an individual cognitive process leading one to choose not to disclose personal information. As Fivush (2010) stated, the choice of non-disclosure can be one of

empowerment in which one has control over what, how, and when one shares information. However, such choices can also allow the listener to be guided by the dominant discourse, making assumptions about the experiences of the storyteller, thus protecting the storyteller from having to disclose something that diverts from this norm (Bond, 2010; Fivush, 2010). For example, Catherine described attempting to make friends after she moved to western Canada after her father's accident and subsequent strokes: "You are trying to make new friends. How do you open with 'well my dad's dying on the other end of the country?'" She further explained how she would often end up managing others' reactions to her news that her father was dying or, later, had died, as it was counter to the narrative that they expected:

I mean at one time, I would have avoided those things (disclosures of father's condition and later death) at all costs because... I would have that almost guilt because when somebody asks, "so tell me about your dad," and you say, "well he's dead" and they sort of, have a weird guilt feeling about it. So, it's like, you almost don't want to tell them because you feel you don't want them to feel bad.

The result of such self-silencing is to maintain a visage of normalcy and save oneself the awkwardness and guilt that follows such disclosures with the belief that the other cannot handle the news.

Furthermore, Bond (2010) emphasized in her study examining the non-disclosures of persons with HIV that self-silencing can act to protect one's identities in social situations. If one does not need to share something that is counter to the dominant narratives and counter to one's conceptualizations of self, then one can maintain an existing identity that continues to fit within the social interaction. However, though helpful in the immediate moment, this choice can lead to further isolation as one's identities may not fit with new conceptualizations of self that

incorporate new information such as having HIV (Bond, 2010), or in this case, a parent with a visible or invisible disability. Such isolation prevents one from further storying their experiences, leading to challenges in reconciling and making sense of all parts of their experiences (Glenn, 2004).

### **Silence of Disenfranchised Experience**

Based on the discussion of both imposed silence and self-silence, it seems that silence may result in a similar experience to that of disenfranchised grief (Doka, 2002). Disenfranchised grief is the experience of grief that cannot be publicly or socially acknowledged. Such disenfranchisement tends to lead to the denial of one's grief, thus stalling and complicating the grieving process (Doka, 1999). Neimeyer and Jordan (2002) suggested that disenfranchised grief is the result of an empathic failure on multiple levels of the self-and-social system: self with self (i.e., denying, disowning, or disapproving some parts of one's grief experience), self with family (i.e., family members attempt to control or regulate the acceptable forms of grief experienced by others), self with community (i.e., communities not accepting or understanding the grieving experience), and self with transcendent reality (i.e., one's sense of abandonment by one's spirituality in light of the loss). Attig (2004) explained an empathic failure as a failure to "appreciate either the gravity of what has happened or the resulting anguish and loss of meaning in the mourner's life" (Attig, 2004, p. 201). Attig (2004) further argued that this unique form of grief is also the result of a political and ethical failure of societies in that we are continuously informed by the policies that attempt to contain the context and extent of our experiences of loss and grief. With the combination of empathic, political, and ethical failures, our experience of grief becomes an experience that we perceive as beyond our rights to have. Therefore, we neglect the grieving process with attempts to stifle, ignore, or disregard its presence in our lives



while also feeling shame, guilt, and judgment for the fact that we are silently grieving anyways (Doka, 2002).

Attig (2004) also argued that this disenfranchisement is not limited only to grief, but also can include various forms of suffering. In fact, to disenfranchise someone is to deprive a person of the freedom, right, and/or privilege to something (Merriam-Webster Online Dictionary, 2017). In the case of grief, it is to deprive someone of their right to grieve for a loss by not acknowledging the loss or grief as an appropriate or legitimate experience (Doka, 2002). However, in the case of being an adolescent living with a parent with an ABI, such disenfranchisement can take the form of not acknowledging the influence of parental ABI on other individuals and disregarding one's reaction to the experience resulting in one's suffering being silenced by self or others. The participants described this disenfranchisement of their psychological and emotional suffering by stating that they denied their own challenges resulting from the parental ABI or that they had their experiences denied by others. Such denial resulted in the participants remaining silent and believing that no one was available or willing to listen to and understand their pain and suffering.

I think it's like, part of my dad's concern is still a little like, I don't really know who to go to for answers for all of that, because my aunt doesn't buffer it and it's, like, too much overload. And then, I don't really want to go to the care centre – I don't really know who to talk to there.

Ruth described her struggle to navigate the system when supporting her father who incurred an ABI. She required additional support and information regarding her father's ABI and recovery, yet due to the systemic barriers to her access of such support, she found she had no place to voice her concerns or questions despite her involvement in his care. Without the appropriate resources

to support her caregiving responsibilities and her overall wellbeing, the system suggested that she was not entitled to supportive services as the support is entirely for the parent with an ABI. This is consistent with the subtle narrative that the individual with an ABI is the only person in need of care and support (see Charles et al., 2007 and Turner et al., 2007). Such socially shared narratives could, in turn, silence individuals by suggesting that they are not entitled to the challenges associated with their experiences of parental ABI. Such narratives, then, can lead to a disenfranchisement of experience.

### **Silence, Disenfranchisement, and Identities**

It seems that disenfranchisement and silence are intricately connected in the case of living with a parent with an ABI. Disenfranchised experiences suggest that individuals then do not speak about their experiences for a variety of reasons, and thus, disenfranchised suffering can result in both imposed silence and self-silence. For example, Cyrus described not having his experiences considered by his friends, family, and loved ones as the focus of conversation was typically on his mother's condition:

No one asks [how he is managing the parental ABI]. Ever. Like, I would call my mom and my wife would even say, "well how is your mom doing?" and I would be like, "Oh she's fine" and I never thought of it any other way. At all. It's just strange.

Because it was his parent who was clearly in recovery, few asked him how he was managing the situation despite his own suffering in response to his mother incurring an ABI. This suggested to him that he was not entitled to his struggle, and thus, he rarely thought of his own experiences resulting from parental ABI even though he knew it influenced him:

Because it is a big weight. But at 19, 15 to 19, you are not going to understand the impact that this will have on your life. I think if there is like, actual evidence to show like

this has happened, that this is the way it is negatively impacting people... You will not understand it and you'll get confused. You'll get angry. You'll get frustrated. You will play the blame game with your parents, with yourself, with your siblings. But then, there is like that, you'll become strong through this experience.

Based on the above quote, it is as though Cyrus needed external permission to acknowledge the negative impact as well as the positive impact. He indicated needing someone to confront him with potential facts about the experience to help him realize that it was permissible to feel angry and frustrated in the situation. While his parent obviously suffered, he struggled to admit and allow himself to acknowledge the experience as something that influenced him, suggesting that he and potentially other participants were disenfranchised from the legitimacy of their own suffering (Neimeyer & Jordan, 2002).

However, because the participants suffered regardless of the social and cultural acceptance, permissibility, or acknowledgment of such suffering, some participants disclosed feelings of shame and guilt for the suffering they encountered. The participants derived meanings and conclusions about themselves within the context of a disenfranchised experience resulting in unhelpful self and identity narratives that became a source of shame. Cyrus also described setting boundaries with his mother with an ABI and her family in terms of his caregiving responsibilities and the ongoing demands from his mother's family. Such boundaries may be framed as a way of maintaining a healthy relationship with a parent (Galambos & Kotylak, 2012); however, instead, he created a different narrative leading to negative views of himself within his relationship with his mother:

I feel terrible when like, I see the phone pop up and it's her (mom), and I actually grumble and don't answer. I hate that. I *hate* that. Like sometimes I feel like I'm going

to call her or I'm going to visit her and it's going to be great. And then, when I hit that breaking point... I start to, like, shut everything down. I hate the way I feel... Like I feel like I'm a bad kid by not getting back to all my mom's Facebook messages. It's just like, am I a bad son for not returning every single call I get? I don't know.

Cyrus poignantly described a dislike for himself and his behaviour when interacting with his mother with an ABI to the point of questioning his identity as a good son. Instead, he questioned whether he was a "bad son" when he puts his own needs for self care above his mother's needs in their caregiving relationship, suggesting that a good son would never think of his own needs. The shame of going against the common caregiver discourse (i.e., to be a caregiver, one must be selfless, Revenson et al., 2016) and wondering if he had become a bad son would be enough to force him to maintain silence about the experience for fear that such a narrative might be true.

The possibility of an identity becoming something one should be ashamed of if it were true was an intriguing contributor to maintaining silence. The silence was maintained by the tension between how one should behave and how one actually behaves in an unusual and unexpected situation such as parental ABI. It seems that part of identity construction was the result of combining an identity created with the meanings derived from the experiences of parental ABI with alternative identities shaped in other contexts. These alternative identities arose out of necessity to combat the unhelpful meanings of self, constructed within the context of parental ABI, while also supporting the helpful meanings of self, such as becoming a stronger and more resilient person. The challenge, then, arose when one or more identities were clearly incongruent with the self or did not fit with other identities. Ruth described her difficulties in continuing to be the person she had worked hard to become in most areas of her life when it differed from the person who used to get along with her father:

I can't really relate to him anymore. Like the older I get and become the person I think I want to be, the further I get from this person I used to get along with and have a close relationship with. So instead of growing up and building a stronger relationship as an adult with my father, I am losing it with every passing year... It's not something I want a relationship with or would want to be shaped by, I guess. So the further I can distance myself the better. But there's always that connection, and like that nagging guilt of "he should be playing a role in my life in some way," and "I should, since he can't be as actively involved in my life, I should be more actively involved in his..." It's just more of a guilt thing that drives me for the most part.

In getting closer to the person that she hoped to present to the world, she was getting further from the person who had a meaningful relationship with her father. Therefore, she found herself behaving in ways that her father would expect while at the same time presenting the alternative identities in every other context to support her idea of self. Michelle explained creating two dominant parts of herself that she presented to the world since her mother incurred an ABI:

So it was just like a double life, I guess. So we'd go downstairs and be like the perfect daughter and help my mom with dinner and do all that stuff. And then, yeah, we'd go upstairs and be like, doing lines of Crystal Meth, and all this. And she (Mom) just had no idea about any of that. She still doesn't know... Because she would just feel like, horrible. She'd probably feel like a failure as a mother if she knew any of this stuff that went on. So that's why we never (sigh) growing up, we just knew to never tell my mom anything.

Michelle's dual selves allowed her to escape her struggles in the family home by using drugs, alcohol, and partying regularly, while also being able to appear as the "perfect daughter" to

uphold the identity that her mother expected of her. All the while, silence continued to maintain the distance between both identities as one was filled with shame and the other was not consistent with her views of self. It seemed that silence is a contributor to the adolescent construction of self and identities as shame and guilt continue to drive one's ability to be comfortable with the self in the world.

### **The Power of Voice and a Reconciled Self**

When living with a parent with an ABI as an adolescent, silence, shame, and guilt drive the identity and self constructive process to the point where one may not be able to acknowledge one's own experiences of parental ABI. In this lack of acknowledgement, one's overall disenfranchisement of the experience of suffering perpetuates feelings of shame and guilt that further feed silence's power over the identities one attempts to create through one's interactions in the world. The participants described struggling to maintain these separate identities, which were no longer congruent with the self, yet this only occurred in adulthood. Willow described making a conscious choice in the person she wanted to present to the world:

I'm very clear about what I want and that's like with every person in my life... And like, [I am] so honest. But it, it's made me, because I used to hide everything, and I'd just be like, "everything is fine, everything's fine, everything's fine." And then, you know, I (sighs), I got um, I got diagnosed in, um, during my undergrad with PTSD and anxiety and depression. And so I had this really bad relationship that kind of exploded in my face in a really dramatic way. So by that point, I was like, "I can't do this anymore, I need to be more honest, and I need to figure out why I'm so mad all the time." So, like, now, like I'm just (pauses), you can't shut me up and... every single thing I say is generally like incredibly to the point and exactly, specifically what I want to say.

She described several critical incidences in which she had to acknowledge her history, experience, and patterns of relating to others, which led her to choosing to no longer hide or silence herself. Similarly, Cyrus discovered his enjoyment of speaking about his experiences openly in the interview process: “This is the first I’ve ever been this open about it. Even with my wife, even with my parents, my sister. I’ve never talked this openly about it. So, it feels good. I can talk for hours about this.” In his case, voice was met with a sense of relief near the end of the interview as he realized he could speak about his experiences freely and in confidence without the fear of judgment. It was as though with the power of voice, one was able to acknowledge the legitimacy of one’s experience, releasing the sense of disenfranchisement and allowing one to construct new meanings regarding the experience. In adulthood, with additional experiences and interaction in different contexts, one was able to learn that there was more to one’s self and identity than what was contained within the context of parental ABI.

In revealing their silence and voicing their experiences, the participants demonstrated truth within the silence – there was pain and suffering that needed to be acknowledged to effectively ease the tension between diverse identities. The silence continues to be influential as the participants navigate how much to share and with whom, which has supported ongoing identity construction. However, the silence during their experiences living with a parent with an ABI seemed destructive rather than constructive, and though silence itself is not negative, it seemed to have negative effects for the construction of self and identity in that fear, disenfranchisement, shame, and guilt guided their process. When learning that there was nothing to fear or be shameful or guilty of, the disenfranchisement lifted allowing new meanings to be created. Thus, by exploring the silence that pervaded this hidden population, I have come to understand how identity construction may become complicated with unhelpful meanings and

denial in the context of parental ABI. With this final interpretation, I now turn to share my response to the research question demonstrating an integrated understanding of the topic including implications for theory, practice, and research.



## CHAPTER 10: INTEGRATED UNDERSTANDINGS AND IMPLICATIONS

Identity is already a complex theoretical concept as I demonstrated in the literature review. Though the authors contributing to the existing identity research literature continue to tease apart this complexity in order to simplify it, my current research study has revealed that the process of identity construction cannot be simplified as understanding the phenomenon lies within the complexity. As such, there is some overlap between the interpretations that were written with the intention of addressing the research question: *How might we understand adolescent identity construction in the context of living with a parent with an ABI?* The interpretations revealed that this topic, like many topics addressed by hermeneutic inquiry, has intricately linked parts that also inform an understanding of a whole.

Each interpretation illuminated parts of how adolescents negotiated identity and self while living with a parent with an ABI. Together, the interpretations also revealed that this phenomenon occurring in adolescence continued to influence identity construction well into adulthood. Identity construction was intertwined with the experiences of parental ABI, as it was an experience that changed most of what these adolescents had previously known, and it challenged what was once taken for granted. Thus, to demonstrate my overall understanding, I discuss both the parts and the whole of the topic to reveal my response to the research question. Specifically, I share a synthesis in which I review the interpretations and then describe an integrated understanding drawn from the interpretations. Then, I discuss the implications for theory, practice, and research. I end with some lingering thoughts about the topic.

### **“I am who I am because of my parent’s brain injury” (Freeman, 2012, p.167): A Synthesis**

The driving force of this inquiry was a question inspired by an idea proposed in my master’s thesis research – one becomes the person he/she is today because of his/her experiences

living with a parent with an ABI (Freeman, 2012). Intuitively, this idea made sense, and yet, I questioned how and why such a phenomenon was happening. Through the process of examining the research literature, conducting interviews with nine participants who informed the topic, and creating six interpretations resulting from such information gathering, I have come to an understanding of adolescent identity construction in the context of living with a parent with an ABI. Thus, in the following sections, I provide a brief overview of the interpretations followed by an integrated interpretation sharing my overall understanding of the topic of address. I convey my response to the research question, fully recognizing that this is one out of many possible responses.

### **A Reminder of Interpretations: The Parts of a Whole**

In the first interpretation, *What is Normal Anyways?*, I discussed the influence of social and cultural discourses on how the participants defined and established normal as a point of reference for negotiating their identities. Such an establishment of normal was both helpful and harmful. Normal served as something allowing the participants to embrace themselves within a group where “weird” was normal. In addition, normal, as it was defined by society (Burman, 2008), created an impossible standard and expectation for the participants to attain. Regardless, normal became something that guided the adolescent identity construction process.

In the second interpretation, *Disrupted Home, Disrupted Self*, I discussed the influence of having the home environment disrupted by the occurrence of a parental ABI, and the significant changes that resulted in the home no longer *feeling* like “home.” I argued that home was an extension and expression of self and identity. Therefore, when home was disrupted, so, too, was the construction of identity. Home became unfamiliar and unsafe, which meant that, for some participants, self and identity were no longer appropriately reflected in their home environment.

As a result of this disruption, participants indicated feeling lost and confused in their home environments without a safe and secure base for exploration, reflection, and construction of self and identities. Thus, to create a sense of self, one also needed to make sense of home amidst one's unique situation.

In the third interpretation, *Roles: Now and Then*, I discussed the imposition, acceptance, and rejection of roles that later became integral in shaping adult identities. The roles that the participants took up during their adolescent years were reflected in the identities they adopted as adults. These roles, such as caregiver or advocate, helped guide the participants in actively choosing the futures they wanted – extending to aspects of these roles they could or could not accept. Each voluntarily or involuntarily adopted role was performed with the intention of making sense of the role, and therefore, the participants created meaning as they needed to justify their uptake of these roles as well as their continued role performance.

In the fourth interpretation, *Stand by Me: Trust and Betrayal*, I discussed the changes in relationships due to parental ABI and the influence of these changes on trust in relationships. Some participants experienced a strong sense of loss and betrayal in that someone who was trusted no longer met the expectations of the pre-existing relationship that fostered such trust. Therefore, as the relationship changed without their awareness or understanding, participants reported feeling betrayed in that the rules of their relationship were no longer followed. Furthermore, they believed they had little to no say in the renegotiation of the new relationship. As such, the participants experienced difficulties trusting others because of their previous betrayal trauma resulting from parental ABI (Gobin & Freyd, 2014). However, despite the experience of betrayals at the hands of trusted family members that shook one's sense of attachment in relationships, there were opportunities and possibilities of healing such betrayals

through new, supportive, and trusting relationships. These relationships provided the participants with a sense of security and stability that was previously lost upon their parent's injury, and therefore, they were able to learn how to trust others as well as how to become trustworthy as adults.

I discussed the challenges of memory, forgetfulness, and recognition in the experience of living with a parent with an ABI in the interpretation, *The Unrecognized and Forgotten: The Loss of Identities*. Specifically, I shared an interpretation of how being unrecognized and forgotten by a parent with an ABI dissolved one's identity as the parent's child. Such a phenomenon led to an unmaking of an identity coupled with a need to remake an identity that fit with new circumstances: the idea of not being their parent's child. Furthermore, there was a pattern of forgetting selected experiences and events associated with living with a parent with an ABI regardless of how much time had passed since the parent's injury. The participants described being confused or surprised by their memory loss, and some participants acknowledged that it was possibly due to simply not wanting to remember the experiences. I also argued that the participants may have perceived some experiences as traumatic, resulting in difficulties being able to make sense of troublesome and difficult situations. When one struggles to make sense of these difficult or traumatic experiences, the meanings created may be destructive rather than constructive in creating resilient identities (Nelson, 2000). Therefore, the participants may have been better able to create resilient identities by forgetting the experience entirely.

In the sixth and final interpretation, *Silence: The Unacknowledged Contributor to Identity*, I described the influence of silence on the construction of identity, particularly around the stories that were or were not shared regarding their experiences of parental ABI. While some

stories and experiences were left unsaid due to the stigmatization of the participants' perceptions and experiences, other stories were simply not shared because there was no place or space to share such stories. As such, the participants were disenfranchised from many parts of the experience of living with a parent with an ABI, limiting the participants' ability to make sense of their experiences. With mostly a perceived social standard of normal to guide their perspectives of how they should or should not frame their experiences, the participants indicated that it was a challenge to make sense of their experiences that contradicted their roles, responsibilities, and positioning as children as well as adolescents and adults. To present a bigger picture, I turn towards an integrated discussion composed of and drawn from the interpretations and their parts.

### **The Whole and the Parts: Identity Construction in the Context of Parental ABI**

It is evident that parental ABI is a tumultuous experience for all family members with a particularly unique influence on adolescent children of the injured parent. The six interpretations revealed how adolescent identity construction might be understood in this unique context. I now share my overall understanding of the topic in response to the research question by discussing four main aspects drawn from the interpretations. The four main aspects include: a) identities are constructed in response to the experience, b) identities are constructed with both social and psychological influences, c) identity construction is influenced by one's sense of safety and requires space and time, and d) identity construction resulting from the experience continues into adulthood. I discuss each of these aspects below while integrating the interpretations.

**Construction of self and identity in response to parental ABI.** It is no surprise that adolescents engage in constructing their identities as adolescents are prone to respond to the social demand and expectations to create identities (Bamberg, 2004b, 2010a; Habermas & Bluck,

2000; McLean et al., 2010). Therefore, it is also no surprise that the individuals in this study supported this idea: Adolescents need to discover their own positioning in the world. However, they had a unique approach to identity construction because of their circumstances.

Adolescents may need to reflect on and make sense of their parent incurring an ABI using any means possible. This could include exploring ideas and narratives presented to them by society and family because there are few alternative and accessible sources for meaning-making available to adolescents influenced by parental ABI. The participants described struggling to discuss their experiences with family members, and some often preferred to remain silent rather than speak to trusted peers or professionals due to a need to maintain a sense of being a “normal” teen. However, the participants also described rich and thoughtful meanings and conclusions concerning their identities despite their silence. This suggested that participants actively sought to understand themselves within the context of living with a parent with an ABI. This was most evident in the discussion regarding normality, role performance, forgetfulness, and the influence of silence.

Normal, as a concept, was fed to the participants by society and their family. They indicated that normal became a point of reference for them in negotiating their identities within the context of living with a parent with an ABI. However, participants conceptualized normality differently based on their family, social support network, peer group, and societal messaging. This suggested that adolescents may reference normalcy in their own unique way depending on how they make sense of the abnormality of the phenomenon. By determining their positioning regarding their own sense of normalcy, adolescents may actively seek their individualized responses to the who-are-you question based on how close or far from normal they have become and learn to embrace or reject such identities. This is consistent with Bamberg’s (2011) narrative

identity dimension in which individuals position themselves as the same as or different from others when negotiating identities.

The adoption and performance of roles also involved a similar comparative action. Participants reflected on how others performed such roles, which enabled them to make sense of how they could adopt and perform the role themselves. Furthermore, the participants assessed the need to take up various roles based on the changes in the family home and relationships due to parental ABI. In other words, they needed to recognize what had occurred in their family and make sense of such changes to successfully evaluate their new roles in the family. If there was a role gap that needed to be filled, such as caring for younger siblings, participants needed to understand why this gap existed to fully adopt and perform the role that was missing in the family. With such a careful evaluation of need and a commitment to the newly acquired role after parental ABI, adolescents may actively explore and create identities that fit within such roles to justify their adoption and performance of various roles. Specifically, by behaving in ways they think are consistent with a role, adolescents may consider what this role performance reveals about them as individuals (Demorest, 2013; Turner, 1956). As such, they receive socially informed feedback to support negotiating further performance of the role (Stryker, 2008), meaning that adolescents may put more effort into improving their performance. Psychologically, individuals need to justify their reasons for their choices (Rose & Cohen, 2011), and by putting more effort into a particular role, adolescents may adopt such roles as identities to justify such effort.

In addition, participants who experienced or witnessed an unmaking of identity due to being forgotten in the family also needed to consciously engage in reconstructing a sense of self that could accommodate being forgotten. Such action could result in recreating meaning from

the parental ABI to permit or explain a parent forgetting or not recognizing his/her child.

Alternatively, it seemed that such action could also result in a complete rejection of being the parent's child. Thus, adolescents living with a parent with an ABI may be faced with a question: If I am not my parent's child, then who am I instead? The participants posed such questions, and this resulted in a need for answers to replace the identities lost by the experience of parental ABI. Therefore, adolescents living with a parent with an ABI may also be strongly encouraged to create alternative identities to develop a sense of belonging and value beyond the family construction of self and identities.

Finally, the influence of silence seemed to be a powerful contributor to accepting or rejecting one's circumstances and a new normal. By choosing silence over voice, participants created identities that existed beyond their family circumstances to supplement the identity stories they chose to leave in silence or the identities that they lost (e.g., parent's child). However, by experiencing silence imposed by family, communities, and society, participants stifled identity stories due to an awareness of limited acceptable options for self-positioning within the phenomenon and a fear of being considered more than an acceptable level of "weird," thus disenfranchising the experience. Therefore, adolescents influenced by an imposed silence may also experience a strong sense of shame and stigma contributing to a disenfranchisement of experience (Attig, 2004), thus further limiting any meaning-making of the phenomenon. Silence, then, both encouraged and discouraged the construction of identities guided by one's choice of stories to tell. Silence encouraged construction of identities in that one chose what, how, and when stories were shared and negotiated while silence also discouraged identity construction in that one's stories were stifled by social discourses and the influences of existing social



narratives. The difference lays in one's sense of agency when influenced by a chosen silence versus an imposed silence (Fivush, 2010; Magu, 2015).

The participants often spoke of making conscious choices and decisions throughout their identity constructive processes, particularly around the choices of how they want to exist in the world. For example, when adopting roles, some participants spoke of making choices about how to perform such roles followed by a firm rejection of the role when they were no longer in the family environment. Then, with careful reflection on behaviours, social interactions, and decision-making processes, there was a choice to accept the role as a part of the self. Though the circumstances under which adolescents may create identities seems chaotic at first, given changes resulting from parental ABI, a sense of order is reflected in their ability to make choices regarding such identities and their construction: How do I embody this identity? Do I accept or reject this identity? Does this identity reflect my experiences, knowledge, and skills? Is this identity reflected back to me in my social interactions? Therefore, constructing identity involved mitigating the confusion and questioning of experiencing parental ABI with intentional decision-making and self-reflective processes influenced by one's own behaviours, cognitions, and social interactions that encouraged one to negotiate possible selves.

**Interconnectedness of social and cognitive influences on identity.** The current authors of social constructionist identity research literature suggested that identity is mostly negotiated in conversation and social interaction through language (Bamberg et al., 2011; de Fina, 2006). As Bamberg (2010a, 2010b) explained, narrative identity that is shared and negotiated with small stories in conversation was considered a critical part of identity construction. However, internal dialogue and reflection resulting from such negotiations were de-emphasized in studying the constructive process (Freeman, 2010). Though thought and reflection is experienced through

language and language is an expression of our interpreted existence (Gadamer, 1960/2004), Bamberg was criticized for only considering what was clearly demonstrated through conversation. That said, one might wonder how one can consider and understand the internal reflections of one's experiences if it is not expressed in conversation with big and small story narration. It is difficult to study something that is not expressed. This is why Bamberg (2010b) further clarified that the focus of his work was on understanding the role and function of small stories due to an overemphasis on big stories in the research literature (i.e., McAdams, 2001; McLean, 2010; etc.). Specifically, big story narrative identity approaches were criticized for privileging cognitive influences of identity creation (i.e., thought, reflection, and meaning-making without dialogue) while ignoring social interaction processes that Bamberg (2010a, 2010b) believed contributed to both big and small story narration. However, it seems that there may be a need for a more balanced approach to understanding identity construction.

Although the participants indicated that creating shared meanings with conversation and social interaction was important to the construction of identities, they also emphasized cognitive reflection and internal dialogue as equally important to the creation of such identities. Based on the interpretation regarding silence, adolescents may be influenced by societal narratives to help them make sense of their unusual experiences, but sense-making could occur in silence. Specifically, adolescents influenced by parental ABI may not share parts or the entirety of a story, yet they may still be able to create meaning from them. This suggested that dialogue could be understood differently in that individuals may create meaning using an internalized dialogical process that may be influenced indirectly by external sources such as social discourses. It could be easier for some adolescents who have lived with a parent with an ABI to make sense of their experiences with fewer overtly shared voices, opinions, and judgments about those experiences.

This is not to say that social influences, such as social discourses and narratives, are not important or influential in making sense of experiences. Rather, I suggest that adolescents may also choose to use silence as a tool to help them negotiate identities with an internalized dialogue that includes social, cultural, and psychological influences.

However, such an internalized dialogue could also be destructive, as individuals of parents with an ABI may be stuck in unhelpful narratives suggesting that they were “not good” people in various roles and relationships. This was most evident in the discussion regarding the uptake and adoption of various roles. With an ongoing evaluation of their own role performance in comparison to others, participants created ideas about what their roles were supposed to look like, who was supposed to perform them, and why such roles might be performed in society. In other words, they created meaning of what these roles would “normally” look like and aimed to emulate that same behaviour. Based on these deductions that did not involve overt conversation, the participants evaluated their own role performance against a “normal” role performance as constructed by subtle messaging and observations. The participants had come to conclusions of being adequate or inadequate in their roles based on societal and familial narratives of what was “normal.”

To further highlight the importance of the internalized dialogue in identity construction, some participants also shared that the act of forgetting limited the possibilities of how certain memories were utilized to confirm or deny identities. This suggested that if adolescents are forgotten or unrecognized by their parent, they may experience a complete or partial unravelling of identities in the absence of parental feedback and recognition as “daughter” or “son.” Therefore, they may engage in constructing identities in the absence of such feedback to replace the identity of “daughter” or “son” with alternative identities, going from feeling lost to feeling

found. However, adolescents may also choose not to disclose that their parent had forgotten them, and still, they need to make sense of being forgotten. As such, adolescents may attempt to make sense of being forgotten silently to ensure that no further damage is caused to their identities, while putting forward the identities that do not involve being “daughter” or “son.”

The internal dialogue and social influence are critical to understanding adolescent identity construction because both processes operate together. Therefore, researchers, theorists, and practitioners may only be considering one part of a greater phenomenon when they exclusively consider social or cognitive influences. As the participants had stated and as demonstrated in the interpretations, identity construction during adolescence as well as adulthood requires personal reflection and insight in addition to social interaction to negotiate the meanings associated with living with a parent with an ABI while being a “normal” teenager.

**Safety, time, and space in identity construction.** Throughout the interpretations, it had become clear that the participants struggled to feel safe enough, while also having the time and space to be able to effectively reflect on and intentionally create helpful identities resulting from their experiences living with a parent with an ABI. Specifically, many participants indicated needing to leave the family home due to feeling emotionally and physically unsafe in the family environment. Safety was a fundamental need for the participants to be able to effectively reflect on and create identities from their experiences. This is consistent with Abraham H. Maslow’s (1954/1970) theory of human motivation and personality development.

Maslow (1954/1970), a humanistic psychologist, argued that certain needs have to be met before personality (i.e., self and identity) can be effectively explored, understood, and established. Specifically, he developed a hierarchy of needs composed of five categories: physiological, safety, belongingness and love, esteem, and self-actualization. According

Maslow, individuals will aim to meet their foundational needs prior to exploring or developing parts of self and identities.

Using Maslow's (1954/1970) hierarchy of needs, it follows that adolescents feeling unsafe will be limited in constructing self and identity. The participants faced physical and emotional threats and violence at home that resulted in safety becoming an unmet need. Therefore, they struggled to negotiate and construct their identities within the family home; thus, limiting identity construction within the family context. Instead, they sought safety outside of the family home to effectively create alternative identities that suited their lives beyond family. This could be why participants worked at keeping their home life and out-of-home life separate – their identities in both contexts needed to be different to meet the demands of various environments.

Furthermore, given the multiple roles both imposed and adopted by the participants while living with a parent with an ABI, they no longer had the time nor the emotional space to focus on creating meaning from their experiences due to a need to survive the experience and perform the roles charged to them. This suggested that adolescents may not focus on identity construction to respond to the who-are-you question immediately and thoroughly, but rather, they may focus on simply surviving the experience with limited meaning-making activities that effectively help create identities. Therefore, some identities created within the family context may not be as well constructed as others created beyond the family home.

With a lack of safety, time, and space, participants extended their ideas of home and safety to many other areas of their lives in an effort to begin creating a sense of self and identity. Many participants described a time of feeling lost in who they were as adolescents and adults, and once they were able to leave an unsafe environment, they were able to better understand

their own positioning in the world through other social experiences. Whether they perceived emotional and physical safety in relationships due to betrayal in the family or they perceived home environments as emotionally and physically unsafe, the participants needed to delay meaning-making activities because their basic needs of physical and emotional safety were not met during their adolescence (Maslow, 1954/1970).

Therefore, many participants described intentionally and urgently constructing their identities as adults by engaging in behaviours and experiences that were often perceived as “normal” adolescent activities. For some, such behaviours included drug usage as well as experimentation in various relationships to further develop the parts of self that they realized were under-developed, while for others, these behaviours included exploring a range of emotional expression due to recognizing a delay in emotional awareness. Furthermore, most participants explored a sense of belonging by venturing into multiple peer groups to meet their social needs and repair the relational damages caused by previous betrayals resulting from parental ABI. However, this only seemed to occur after the participants left the family home or family environment, forcing them to take the time and space to consider neglected identities. Some participants found other ways to create a sense of safety for themselves upon leaving the family home resulting in further meaning-making activities such as developing a sense of home away from home. The participants’ need to create safety, time, and space to construct identities suggested that adolescents may also need certain criteria to be met prior to effectively creating identities. Identity construction could not occur without one’s physical, security, and social needs being met, all of which were severely challenged by the experience of parental ABI.

**The lasting influence of parental ABI on identity construction.** Though the focus of this study was on adolescent identity construction, the participants also spoke of their continual revisitations of identities in their adulthood. Some participants disclosed encountering new facets of their experiences requiring further reflection and meaning-making as a result of facing new milestones in their lives. As they faced new and significant moments in their lives, such as the birth of a child or marriage, they developed new perspectives of their experiences of living with a parent with an ABI that demanded an update to their existing identities born of the experience. These ongoing revisitations suggested that living with a parent with an ABI was not a single experience, but a phenomenon that left a lasting impression and influence.

Specifically, some participants referenced their parents' parenting strategy or marriage to guide how they understand their own respective roles as a parent or a spouse, thus forcing them to reconsider the meanings of such roles within the context of their experiences. Furthermore, such milestones also helped the participants gain new insight and a new sense of empathy for other family members now that they understood the demands of being a parent or the responsibilities of being a spouse. Once adults with parents with an ABI revisited meaning created from specific experiences; they could automatically reflect on their positioning within that experience seeing it with new perspectives and understandings. They may begin to question what their behaviours and thoughts said about who they were as individuals in a particular context while renegotiating their identities in the social realm (Bamberg et al., 2011).

Consistent with social constructionist perspectives of identity (Bamberg et al., 2011; Habermas & Bluck, 2000; Holstein & Gubrium, 2000), it is clear to me that identity continues to evolve throughout one's lifetime. With creating each interpretation, it seemed that the participants continued to be influenced by living with a parent with an ABI well into their

adulthood. The experience was viewed as transformative, and one that left an imprint on multiple areas of their lives. Therefore, it follows that experiences of parental ABI would continue to shape adult identities as individuals negotiate meanings of new experiences that may be reminiscent of meanings drawn from their developmental years as an adolescent.

I suspect that this lasting influence was due to a parent incurring an ABI during a prime developmental time period in which individuals question their own place within the world. With a critical experience at a critical time of development, it follows that an adolescent's responses to those experiences would shape the meanings and conclusions about self and identity well into adulthood. Therefore, it seems the experience of living with a parent with an ABI as an adolescent is both transformative and evolutionary for identity construction throughout one's lifetime.

### **Implications of the Whole and its Parts: From Ideas to Applications**

After revisiting the interpretations, it is important to consider what to do with this information. Though it is important to acknowledge that something is happening that needs to be attended to, it is equally important to share what this information means for researchers, practitioners, and other professionals in the field who may encounter these teens or adults. I provide suggestions regarding what can be done with this information and how one can attend to the topic when it is encountered. Therefore, I venture to discuss implications for theory, practice, and research.

### **Implications for Theory**

Identity theory has evolved from an essentialist perspective (i.e., individuals are the sole proprietor of and contributor to their sense of personhood) to a social constructionist perspective (i.e., individuals co-create identities from the interaction of personal, social, political, and



cultural influences; Burkitt, 2011; Stryker & Burke, 2000). Though Erikson (1959) provided significant contributions in terms of recognizing the development of one's identity over a lifetime of encountering psychosocial crises, more recent conceptualizations demonstrate that identity has more fluidity and flexibility than previous models by considering the role of social interaction (Holstein & Gubrium, 2000; Mischler, 2004). Identity theory continues to change as we gain more knowledge about the complexity of the concept, and its application to a variety of people in a variety of circumstances.

The interpretations offer some insight into identity theory, though it is tautological to suggest that these interpretations support social constructionist theories as the approach to this hermeneutic study was born from a social constructionist approach. However, this study does provide insight into further enhancing and developing such theory. In particular, I used Bamberg's (2004a, 2004b, 2007, 2010a) concepts with a slight adaptation to help me understand the data so that I might be able to understand the parts as well as the whole.

In applying Bamberg's (2004a, 2004b, 2007, 2010a) narrative identity approach to my conceptualization of the data, I realized the importance of considering both small and big stories in understanding adolescent identity in the context of parental ABI. In the research literature, there was debate about Bamberg's call to focus more on small stories rather than big stories (Bamberg, 2010a, 2010b; Freeman, 2010). Therefore, it may seem as though one has to choose one approach over the other. However, much like the hermeneutic circle (Gadamer, 1960/2004; Moules et al., 2015), one will lose pertinent information regarding identity when one focuses on one approach and not the other. The current research findings have illuminated that big and small stories may need to be considered together to appreciate the richness that both approaches to identity can provide. There is a need for identity theorists to conceptualize and examine the

creation and interaction of small stories with big stories and vice versa, as there is important information missing regarding the construction of identity in terms of how big and small stories influence each other on an ongoing basis. It has been theoretically discussed (Bamberg, 2010a, 2010b; Freeman, 2010), yet very little work has progressed since to explore this theoretical connection in practical application.

Furthermore, with an emphasis on small stories and the creation of identities in social settings, there seems to be less focus on the interaction of both social and psychological influences in creating an identity. Therefore, theorists and researchers may also need to consider the psychological and cognitive aspects of creating identities from small and big stories to better understand the whole of identity construction, instead of only parts. This could further enrich existing identity theories.

Turning towards developmental theory, it is important to note that much of the developmental literature surrounding adolescence has focused on problems in terms of behaviour, mental health, resilience, and transition to adulthood. With such an intense focus, as described in *What is Normal Anyways?*, the theoretical perception of adolescence in North American cultures is one of intense stress, volatility, and vulnerability (Arnett, 1999; Burman, 2007). This is not to say that adolescents do not encounter their fair share of challenges as they transition to adulthood, but rather, it is an acknowledgement of the possibility that such social discourses may be limiting the development and resilience of adolescents (Burman, 2007; Skvodal & Andreouli, 2001). Therefore, in becoming aware of a common understanding of adolescence, developmental theories need to expand beyond normality in development to also acknowledge how cultural understandings also influence theorists' perspectives of normality. For example, an adolescent may embrace being a young caregiver, and this may have

consequences (positive and negative) for the adolescent's development into adulthood (Skvodal & Andreouli, 2001). To entertain the possibility of these diverse consequences on development, one needs to consider that there may be more richness and complexity (e.g., caring for a parent as a rewarding experience that promotes resilience) involved in young caregiving beyond negative or positive effects.

Furthermore, developmental theory has been limited to considering what is expected of adolescence in terms of psychological, social, cognitive, and physical developmental milestones. However, few developmental theorists explore what might happen to adolescent development when significant events disrupt or interrupt a "normal" developmental trajectory. Theoretically, such exploration could guide researchers and practitioners in understanding the development of adolescents who may encounter troublesome or potentially traumatic events in the family. Based on the current study, it seems that some disruptive experiences during adolescence continue to influence individuals well into adulthood, and it may be helpful to better understand how such disruptions may alter the developmental processes one experiences throughout a lifetime. Such theoretical approaches would also need to consider the sociocultural context as previously mentioned.

### **Implications for Practice**

Though this research was not primarily about practice or the participants' involvement in therapy, the interpretations created from the data offer insight into a unique phenomenon. The meanings and understandings presented in this research can be used by counselling professionals to start a conversation with clients and significant others with the intention of exploring their own understanding of the phenomenon. This knowledge can serve as way to create space for clients to discuss their concerns and explore possible interpretations and understandings of their

own, noting that the understanding presented here is only one of many interpretations possible. The interpretations created from the data also speak to several other considerations for practice.

First, it is clear that there was a lack of availability and accessibility of supportive services for the participants, both as adolescents and as adults. The participants described being unsure of where to seek supportive services that would be appropriate for them, and many stated that they struggled to investigate potential service providers and their appropriateness due to a lack of safety, time, and energy. However, the resources that were available were not specific to the concerns that this unique population faced as young caregivers as well as young people living with a parent with an ABI. Many participants reported feeling silenced and misunderstood because of how helpers intervened with a lack of knowledge or understanding of their circumstances. Therefore, there is a need to educate practitioners so that they may be more effective with adolescents and adults whose parent had incurred an ABI.

Despite some resources being available, adolescents may be paralyzed into continued silence due to the fear of the consequences of seeking support. Specifically, if an adolescent disclosed that he/she was exclusively in charge of cooking all meals or caring for a younger sibling or the parent, there was a fear that he/she might be perceived as a neglected child resulting in a report being made to Child and Family Services. Though many participants reported having mixed feelings about this possibility, they did not want to be responsible for upsetting the balance in their family or risk being removed from their family home, causing further disruption. This finding is consistent with other research that suggested that adolescents might maintain their silence due to a fear of further loss resulting from how their or their parents' behaviours may be perceived by counselling professionals (Kieffer-Kristensen & Johansen,

2013). As such, adolescents may not think it is appropriate or safe to seek support for themselves if they need it. Therefore, if an adolescent living with a parent with an ABI were to access supportive resources, the professional would need to clarify what and how much confidential information is disclosed to appropriate authorities as well as to their guardians if there is a concern regarding neglectful practices or the adolescent's safety. This overt transparency is one way a counselling professional can help the adolescent feel safe enough in any interaction with him or her, and it may also result in building trust in the relationship (Higham et al., 2012). Thus, therapeutic interactions within a trusting environment can further support healing from previous betrayals (Gobin & Freyd, 2014).

In terms of modalities, counselling professionals may also want to consider familial intervention as well as individual intervention as there are many factors involved that disrupt the adolescent's identity construction that are beyond the control and capabilities of the adolescent. Individually, the adolescent can explore their own meanings from their experiences interacting with their parent with an ABI and other family members while also engaging in activities to explore how these interactions reflect on themselves as people. With a family systemic approach, adolescents can learn how their entire family is affected so that it eliminates the silence that may pervade the family system as well. By encouraging family engagement in jointly creating meaning as a system, adolescents can also feel their experiences are normalized and validated within their family. The family can hopefully face the challenges together as a full caregiving unit rather than individually (Tramonti et al., 2017). Furthermore, families can create new narratives that become a part of a family culture to promote healing and togetherness (Tramonti et al., 2017). Families can negotiate new meanings, which can help the adolescent begin to incorporate such meanings into their own identity stories, so it is representative of their

own experiences living with a parent with an ABI (Fivush et al., 2010). However, such negotiations may need to be monitored as the family narrative may drown out the adolescent narrative of experience (Charles et al., 2007).

If family intervention is not an option, group therapy is also highly recommended because it can help remove the silence and stigma of the experience itself (Charles et al., 2012), allowing individuals to recognize that they are not alone in their experiences, cognitions, emotions, choices, and behaviours (Charles et al., 2007). Furthermore, by hearing and witnessing others struggle to narrate their experiences, other adolescents may begin to feel validated and may be more willing to engage in conscious meaning-making with their peers in the process of living with their parent with an ABI. By delivering care and support in such a format, counselling professionals might prevent and/or remove the disenfranchisement of experience and encourage the adolescents to story their experience with a focus on what it means for their identities and selves as they navigate their changed world.

In terms of a particular focus for supporting these adolescents in a therapeutic context, it would be helpful for counselling professionals to understand the myriad of roles that have been imposed on adolescents influenced by parental ABI while inquiring about their acceptance or rejection of such roles. Specifically, professionals are encouraged to explore how these roles are helpful for the adolescent. For example, the adolescent may simultaneously feel pride and frustration in their role performance. By exploring the meaning of these roles with the adolescent, professionals may be better able to support identities that may be a source of resilience for the adolescent instead of a source of distress (Skvodal & Andreouli, 2011).

Another important implication for supporting adolescents living with a parent with an ABI in a therapeutic context includes considering the adolescents' social and cultural sources for

meaning-making. As the participants described attempting to make sense of their experiences, they often compared such experiences to a reference point of a conceptualized normal, or reflected on their perception of family members to guide how they wanted to exist in the world. For some individuals, this may be helpful when such discourses encourage resilience in the face of challenge. However, for other individuals, this may be unhelpful as such discourses may prove to communicate unattainable standards and expectations that may only feed into the existing shame, stigma, and silence already present in the phenomenon. Therefore, I would suggest counselling professionals engage the adolescent in deconstructing meanings and understandings created from social and cultural discourses to support helpful identities as opposed to destructive ones (i.e., “bad son” or “bad kid”). Counselling professionals may choose to engage in social justice activities such as advocacy and public speaking to raise awareness about the influence of such discourses.

Finally, it is important for counselling professionals to be aware of potential trauma responses when counselling adolescents or adults whose parents had incurred an ABI. Many of these individuals were exposed to situations and experiences that shook the foundation of what they believed about the world. Researchers have suggested that traumatic experiences in childhood and adolescence shape how individuals view themselves and their surroundings (Gobin & Freyd, 2014; Kieffer-Kristensen et al., 2011; Taylor & Weems, 2009). Therefore, it may be helpful to be prepared for supporting the adolescent in making sense of experiences that seemed traumatic to the adolescent and to encourage the adolescent to create his/her own story of strength in overcoming challenging and hurtful experiences. It is hoped that these adolescents would not only be able to break their silence regarding their suffering and disenfranchisement,

but also have opportunities to story their experiences to inform their identities in helpful and constructive ways.

### **Implications for Research**

Any research study conducted with the intention to create an understanding of a topic is bound to have strengths and limitations that inform the implications and future directions for research. In hermeneutics, limitations are also considered strengths because limitations speak to alternative directions and perspectives to further one's understanding (Davey, 2006).

Hermeneutic research never results in a complete understanding of phenomena as what is said automatically leaves other parts unsaid (Moules et al., 2015). Thus, researchers need to recognize and acknowledge both the strengths and the limitations of the study to encourage conversations that reveal other truths about the topic and enhance the existing understandings. From this perspective, I highlight strengths, limitations, and implications for research and follow this with a consideration of future directions for research.

**Strengths and limitations.** For this study, I chose to interview adults whose parents had incurred an ABI during the participants' adolescent years (i.e., 10-19 years of age), and the parental ABI must have occurred at least two years prior to the interview. There are three benefits of having made this choice that I believe are strengths of this study. First, participants were better able to discuss identity and identity construction processes by having had some distance from the experience. Consequently, they could reflect on their experiences to better understand the meanings they had created and to speak about how living with a parent with an ABI as an adolescent had influenced their identities. Second, participants revealed several aspects about their identity construction that they would not have been able to recognize had they been temporally closer to the experience or even still living with their parent who incurred an



ABI. Specifically, the participants described how their experiences had lasting influences on their identities, revealing that living with a parent with an ABI can be a transformative experience. Third, some participants also happened to be thinking about becoming parents themselves or were already parents at the time of the interview. Therefore, they revealed how their experiences with their own parents shaped their understanding and appreciation of the parenting role as well as their own performance of the same role. Such a revelation could have been missed had I made a different choice regarding the participation requirements.

By focusing on the retrospective accounts, the participants were reflecting on their adolescent and young adult experiences with adult eyes. Therefore, I was not able to learn directly from adolescents actually living with a parent with an ABI about the negotiated meanings resulting from navigating the experience itself. Furthermore, I was also not able to explore actual conversations between adolescents and significant others to better understand the process of identity construction at the time. I see using retrospective accounts as a limitation in addition to a strength because adolescents who are currently living with a parent with an ABI may negotiate different meanings by virtue of being an adolescent rather than an adult. By learning about these meanings directly from adolescents, researchers and counselling professionals may develop a better understanding of adolescent meaning-making processes to inform theory and practical interventions.

While considering additional strengths and limitations of the study, it should be noted that the participants were of a similar race and cultural background (i.e., identifying as white, European-Canadian, or Canadian). Therefore, the participants were not able to speak to the experience of being a racial or ethnic minority nor were they able to speak to cultural influences beyond those of European or Canadian background. This is a limitation of this study as cultural

influences also shape identities (Cushman, 1995; Gergen, 2000; Skvodal & Andreouli, 2011).

If I had spoken to individuals from racially and culturally diverse backgrounds, additional truths could have been shared regarding identity construction while living with a parent with an ABI from within different cultural contexts. Despite the homogeneity of racial and cultural backgrounds, there were variations in the participants' socio-economic status in both their adolescence and adulthood, and the participants also had significantly different experiences within their families after a parent incurred an ABI. This suggested that the participants had many truths to share to enrich the understanding of the topic, which I believe was a strength of the study.

In addition, I had more female participants than male, which may have influenced the findings. Women tend to be socialized differently than men (Josselson, 1982, 2011; Miller & Mothner, 1971), and thus, the meaning-making processes involved in identity construction of women could look different from those of men. For example, one's gender identity could influence how one makes sense of the roles one chooses to adopt or reject. However, such differences were not the focus of this study. Instead, the focus of this study was simply on understanding adolescent identity construction regardless of variations in gender.

Finally, I want to acknowledge the role of my contributions to the research study as both a strength and limitation. My perspective as an insider with specific training in counselling psychology from a scientist-practitioner model has supported the research process (i.e., interviewing, data collection, analysis, and interpretation). My background and prejudices steered the research into a particular direction. As such, if another individual were to engage in a similar research process, I would think that there may be some similarities and many differences

to contribute to an overall understanding that is different from that presented in the current study. Such differences in perspective are the beauty of hermeneutic research.

**Future directions for research.** Based on the strengths and limitations, there are several research directions that warrant further exploration. First, I would recommend further exploration into the topic of parental ABI using a retrospective design as it would continue the conversation about the topic and further enliven the topic. Second, despite the strength of a retrospective research design such as the one presented in the current study, it would be helpful to explore meaning-making and identity construction while adolescents are living with a parent with an ABI to better understand their immediate constructive processes as well as their therapeutic needs. Furthermore, such research could be conducted using a longitudinal design to better understand how perspectives, meanings, and identities evolve over the initial two-year period of a parent's recovery from an ABI. Alternatively, it would be helpful to engage adolescents with their significant others in order to examine the conversational and dialogical elements involved in constructing an identity in this particular context while the adolescents are experiencing the phenomenon. Future research, exploratory or not, needs to also consider the influence of race, culture, and gender diversity on the experiences of adolescents living with a parent with an ABI to better understand other contributing elements to a socially constructed identity, as this was missing from the current study.

Third, it would be fruitful to further explore the role of traumatic experiences in adolescent identity construction in the context of parental ABI because the current study as well as other studies (see Kieffer-Kristensen et al., 2011) have noted signs of trauma in children of parents with an ABI. Such research can further inform theory and practical interventions when counselling individuals of this unique population.

Fourth, as participants had mentioned reflecting on their parents' parenting as they considered becoming parents themselves, it would be helpful to further explore how the experience shaped their own parenting of children. It would also be beneficial to explore the experience of parents with an ABI as they continue to perform parenting roles. Both research directions could aid counselling professionals in supporting parents as well as families in re-establishing supportive family dynamics and relationships.

### **Lingering Thoughts: Acknowledging a “Disaster Waiting to Happen”**

In considering theory, practice, and research implications, I think about the main messages the participants shared in their discussions with me. Of the many things that stood out from the conversation, the six interpretations offer insight into the topic of adolescent identity construction in the context of living with a parent with an ABI. These certainly are not the only interpretations sharing knowledge of this phenomenon, and yet the interpretations were created to illuminate aspects of the phenomenon that were previously unknown, unclear, or simply hidden. After having interviewed nine participants with sufficient insight to inform the topic, the topic has been enlivened in such a way that it can be known in a different way. As a phenomenon traditionally taken for granted, the interpretations demonstrated a complexity that was previously unexamined in the experience of parental ABI. Suzie described this complexity eloquently by highlighting the inherent challenge of the experience that makes it so complex:

This car accident was kind of like a trifecta of evil. It was a time in my life where I was hitting a major developmental milestone where shit comes up from your childhood anyways... then you add this car accident, which is mind-blowing, and parents who are not able or capable to be there, and then you add the third dynamic of a third generation

of family members who are influencing the family dynamic... It was just like a disaster waiting to happen.

It is not only that a parent incurs an ABI, but also that it occurs to a child during adolescence – a time that is ripe with self-discovery, change, meaning-making, and development. When one adds an additional ingredient such as family dynamics, peer relationships, and any other experience society considers typical of adolescence, one could have exactly what Suzie called a “disaster waiting to happen” if it is not addressed or acknowledged. This was the nagging sensation of the topic of address. It was the idea that the phenomenon could result in disastrous consequences, yet little was known of what was happening to these teens to begin to understand how such disasters may or may not occur.

As a researcher with insider experience of the phenomenon, I hold considerable responsibility to honour the study participants’ voices to demonstrate what was happening to these adolescents. It is evident that the influence of a parent incurring an ABI during the participants’ adolescence had significant implications throughout their lifespan. As they continued to reflect on their past experiences, it became clear that parental ABI was particularly formative as individuals negotiated meanings in new situations, milestones, and experiences throughout life. The participants described an ongoing reflective process that revealed the continual influence of parental ABI on their selves and identities. It was not only one incident that resulted in such significant changes, but also multiple revisitations with the phenomenon that demanded the individual’s attention. As Suzie further explained during her interview:

I don’t know if you ever really put this stuff to bed, or if you just discover new parts of yourself in it... Part of me is like, “oh god, can I ever just, can I just rest from growing?” ... I know it’s fantastic and wonderful and all these things, but it is deeply painful, and I

just wanna be and exist for a little while and not have to dive into it all the time. But sometimes, we're forced into it.

This constant revisiting of the phenomenon was exhausting and likely continued to be exhausting. Although such revisitation was a critical part of the continued construction of selves and identities and the participants appreciated the growth and change, self-development had come at a cost of destruction, loss, pain, and challenge that few could understand. However, with such painful revisitations of their experiences, self-understanding and growth were only gained by revisiting their pasts. Though identities continued to be haunted by the ghosts of living with a parent with an ABI as an adolescent, these identities born of such challenges also served as a reminder of the person one was, could be, and hoped to become in the world.

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## APPENDIX A: RECRUITMENT EMAILS

### Agency Recruitment Email Script

Dear (Agency contact name),

I am a doctoral candidate in Counselling Psychology at the University of Calgary. I am undertaking a research project (officially approved by my supervisory committee and approved by the University of Calgary Conjoint Faculties Research Ethic Board) to understand how adolescents might build their identities in the context of living with a parent with an acquired brain injury (ABI). I am contacting you because I would like to recruit participants from your agency with your support and collaboration.

My current research topic stems from my award-winning masters work where I explored the experiences of adolescents living with a parent with an ABI, and I continuously heard stories about how these individuals were forever changed. However, individuals also reported that they felt they had very little support to help them navigate their process of change. In some cases, this can lead to a higher risk of drug abuse, self-harm, or other problematic behaviours. Due to this finding, I want increase awareness and understanding of this unique experience so that professionals can better support these teens. As such, I expect to identify some ways professionals can help these teens proactively build resilient identities that will support their adult ways of life and integrate these experiences into a healthy sense of self. I am contacting you and your agency because of the hidden nature of this population - persons who were adolescents at the time of their parent's injury. Although your clients may not be directly affected by this research, they may have children who might be interested in this study.

I request that you pass along an information sheet containing some project details as well as my contact information to appropriate individuals. I am looking for adults (ages 18-50) who were adolescents (ages 10-19) at the time of their parent's injury. Individuals will be asked to participate in a 1 to 2 hour audio-recorded interview where they will be asked questions like, "How would you describe yourself as a teenager before your parent's injury? And after?" and "were there any defining moments for you after your parent incurred an ABI?" In my optimism, I have attached the information sheet for you and your staff to provide to interested individuals. It is important that potential participants do not feel pressured to be involved, so I recommend that you let them know that they can contact me to learn more about the study. Also, if it is easier, I am happy to speak with your staff or any client groups about this project as part of my recruitment efforts.

I would appreciate any help you are willing to offer for this research project. Please let me know if you would be willing to help me recruit, and please do not hesitate to contact me further if you have any questions, requests, or comments by e-mail ([family.braininjury@gmail.com](mailto:family.braininjury@gmail.com)).

## Email to Potential Participants

Dear (potential participant name),

You had contacted me (date of contact) in response to the media coverage that my masters research had received in August, 2014. My proposed study has received approval from the University of Calgary's Conjoint Faculties Research Ethics Board (CFREB) meaning that I am now scheduling interviews to learn more about living with a parent with an acquired brain injury (ABI).

I am contacting you now because you had expressed interest in possibly participating in my doctoral research to share your experiences and contribute to this developing field. I will be looking into how adolescents might build their identities while living with a parent with an ABI. My hope is to inform counselling psychologists of this experience and how living with a parent with an ABI might influence the teen identities. I expect that this information will help professionals be more supportive in creating resilient identities to inform healthy adult selves.

To take part of the study:

- You need to be currently between 18 and 50 years of age.
- Your parent must have had an ABI when you were between 10 and 19 years of age.
  - o ABI defined as an injury to the brain after birth resulting from trauma (e.g., being struck by or against an object), illness (e.g., encephalitis), stroke, substance use/abuse, or a lack of oxygen to the brain.
- Your parent's injury must have occurred 2 or more years ago.
- You must have been living in the Alberta area at the time of your parent's injury.
- Be willing to participate in a 1-2 hour audio-recorded interview with me to reflect on and share your experiences and stories. You will be asked questions like "How would you describe yourself as a teenager before your parent's injury? And after?" and "were there any defining moments for you after your parent incurred an ABI?"

Please do not feel pressured to take part, and your participation is entirely voluntary. If you are or are not interested in participating in this study, please respond to this email accordingly. If you are still interested, I will provide you with more information, and we can arrange a time for an interview. Please do not hesitate to contact me further if you have any comments, questions, or concerns about the study.

I look forward to hearing from you!

## APPENDIX B: INFORMATION SHEET

### Information Sheet: Adolescent Identity Construction in the Context of Living with a Parent with an Acquired Brain Injury

The purpose of this study (approved by the University of Calgary Conjoint Faculties Research Ethics Board) is to understand adolescent identity construction in the context of living with a parent with an acquired brain injury (ABI). This research stems from Aiofe Freeman-Cruz's master's thesis research investigating the experience of adolescents living with a parent with an ABI. Throughout all the interviews, she heard stories of individuals feeling forever changed because of their experiences. To better understand how individuals are transformed as a result of living with a parent with an ABI, she is exploring how adolescents might build their identities while integrating their experiences from within their families.

She expects that this research will reveal ways psychologists can support adolescents in creating healthy and resilient identities that could inform their adult lives. By exploring the experience of adolescents living with a parent with an ABI, psychologists can start addressing concerns that may be unique and troublesome for this group of individuals. To participate in this study, you need to fit the following criteria:

- Currently, be an *adult aged 18 to 50 years*.
- Your parent had an ABI – an injury to the brain that occurred after birth resulting from illness (e.g., encephalitis), trauma (e.g., struck by or against objects), stroke, aneurysm, substance use/abuse, and/or a lack of oxygen to the brain.
- At the time of your parent's ABI, *you were between the ages 10 to 19 years*, and it has been *2 or more years* since your parent's injury.

As part of your participation, you will be asked to engage in the following activities:

- One 1 to 2 hour audio-recorded interview to talk about your experiences living with a parent with an ABI and to reflect on how this experience may or may not have changed who you think you are. You might be asked questions like “How would you describe yourself as a teenager before your parent's injury? And after?” and “were there any defining moments for you after your parent incurred an ABI?”

If you are interested in participating or would like more information, please contact Aiofe with the information below. You are under no obligation to participate if you decide to contact Aiofe and remember that the choice to participate is entirely yours.

**E. Aiofe Freeman-Cruz, Doctoral Candidate**  
**Contact only with e-mail: [family.braininjury@gmail.com](mailto:family.braininjury@gmail.com)**

Supervised by Dr. Sharon E. Robertson, R. Psych

## APPENDIX C: RESEARCH POSTER

See the next page.

# Did your parent experience an Acquired Brain Injury when

Researchers are doing a study to learn more about how living with a parent with an **acquired brain injury (ABI)** may or may not have changed you as a person. An ABI is an injury to the brain incurred after birth resulting from trauma, illness, stroke, aneurism, substance use/abuse, and/or a lack of oxygen to the brain. Share your experiences with the researchers so that we might understand adolescent identity in the context of living with a parent with an ABI.

If you participate, you will take part in a 1 to 2 hour audio-recorded interview. Some questions you might be asked are, "How would you describe yourself as a teenager before your parent's injury? And after?" and "were there any defining moments for you after your parent incurred an ABI?" With more research in this area, we hope that professionals will be more prepared to help individuals like you. If you:

- ✓ Are between the ages of 18 and 50
- ✓ Were 10 to 19 years old when your parent acquired a brain injury
- ✓ Want to share your story with someone who has also had a similar experience

Then please contact Aiofe Freeman-Cruz at **[family.braininjury@gmail.com](mailto:family.braininjury@gmail.com)** for more information about this innovative study.

This study is approved by the University of Calgary Conjoint Faculties Research Ethics Board.



## APPENDIX D: SOCIAL MEDIA RECRUITMENT SCRIPT

Did your parent acquire a brain injury when you were a teenager? Did this happen to someone you know? I am doing a research study approved by the University of Calgary Conjoint Faculties Research Ethics Board looking at how living with a parent with an acquired brain injury (ABI) may or may not have changed you as a person. An ABI is an injury to the brain incurred after birth resulting from trauma, illness, stroke, aneurism, substance use/abuse, and/or a lack of oxygen to the brain.

Share your experiences so that we might understand adolescent identity in the context of living with a parent with an ABI. I am looking for individuals between the ages of 18 and 50 who were 10 to 19 years old when their parent acquired a brain injury to participate in a 1 to 2 hour audio-recorded interview. These people will be asked questions like, “How would you describe yourself as a teenager before your parent’s injury? And after?” and “were there any defining moments for you after your parent incurred an ABI?” If you are interested in learning more about the study or in participating, please contact Aiofe Freeman-Cruz at [family.braininjury@gmail.com](mailto:family.braininjury@gmail.com) for more information about this innovative study.

## APPENDIX E: PARTICIPANT CONSENT FORM

See the next page.




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**Name of Researcher, Faculty, Department, Telephone & Email:**

E. Aiofe Freeman, MSc., Doctoral Candidate in Counselling Psychology  
Educational Studies in Counselling Psychology, The Werklund School of Education

**Supervisor:**

Sharon E. Robertson, PhD Counselling Psychology, Professor

**Title of Project:**

Adolescent Identity Construction in the Context of Living with a Parent with an Acquired Brain Injury

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This consent form, a copy of which has been given to you, is only part of the process of informed consent. If you want more details about something mentioned here, or information not included here, you should feel free to ask. Please take the time to read this carefully and to understand any accompanying information.

The University of Calgary Conjoint Faculties Research Ethics Board has approved this research study.

**Purpose of the Study**

The purpose of this study is to understand how adolescents might build an identity after their parent had a brain injury. An acquired brain injury (ABI) is an injury to the brain after birth due to trauma (e.g., being hit by or against something), illness (e.g., encephalitis), stroke, aneurism, substance use or abuse, and/or a lack of oxygen to the brain.

**What Will I Be Asked To Do?**

You will be asked to take part in a 1 to 2 hour audio-recorded interview. During the interview, you will be asked questions about your experience living with your parent who had an ABI and the changes you noticed in others, yourself, and your family. We want to know if and how these experiences shaped who you were as a teenager and who you are today. We might talk about some sensitive topics, and you can choose not to answer any question during the interview. Once the interview is over, you might be contacted for a voluntary follow-up interview.

Your participation in this study is completely voluntary. You may choose not to participate in any part of the study or not to answer all questions. You may also withdraw from the study at any time without penalty or loss of benefits or services (e.g., any services you or your family receive from agencies).

**What Type of Personal Information Will Be Collected?**

If you agree to participate, you will be asked to provide some personal information. Your name and phone

number will be collected for future contact and for our confidential records. We will also ask you about your age, gender, cultural background, education, profession, parent information (e.g., parents' ages, parents' educational background, parents' pre- and post-injury professions, nature and cause of ABI, gender of injured parent), and family structure. To protect your and your family's identity, we ask that you choose a pseudonym (i.e., another name for yourself). We will remove any names of family members, professionals, community members, agencies, or others, and we will replace it with names that describe the relationship these bodies have to you. For example, we would change your friend's name to "friend" in all documents.

All interviews will be audio-recorded which will only be available to the researchers listed on this form. There is also a possibility that a professional transcriptionist will make the transcripts from the interviews, but this person will sign a confidentiality form so they keep your information private. Otherwise, recordings will never be heard in public. The edited transcripts might be available to the researcher's supervisory committee members who are also required to maintain confidentiality.

*The pseudonym I choose for myself is:* \_\_\_\_\_

### **Are there Risks or Benefits if I Participate?**

You need to know the possible risks in participating in this study. It is possible that those who know you well might identify you despite the use of a pseudonym and removal of all names. In addition, it is possible that discussions during an interview may raise upsetting issues as you revisit your past and share your perspectives, stories, and memories. Please inform the interviewer if you become upset during the interview. If you are upset after the interview, you are encouraged to contact one of the counselling service agencies mentioned below.

<b>1. The Distress Centre (24-hr Crisis line)</b>	<b>Free</b>	<b>(403) 266-1605</b>
<b>2. The Calgary Counselling Centre</b>	<b>Sliding-Scale</b>	<b>(403) 265-4980</b>
<b>3. Catholic Family Services</b>	<b>Sliding-Scale</b>	<b>(403) 269-9888</b>
<b>4. Eastside Family Counselling Centre (Walk-in)</b>	<b>Free</b>	<b>(403) 299-9696</b>

Some benefits of participating include being able to share your experiences to enhance the awareness of the experiences of children living with parents with an ABI in the mental health field and to improve practices in counselling psychology. Although this interview is not therapy, you might notice some therapeutic effects after sharing your experiences with the interviewer.

### **What Happens to the Information I Provide?**

Participation is completely voluntary, anonymous, and confidential. You are free to stop participating at any time during the study. If you choose to withdraw from the study, you will no longer be contacted and your data will be destroyed. If you withdraw from the study after the analysis has begun, your data will be kept. No one except the researcher and her supervisor will be allowed to listen to the interview recordings unless it is a transcriptionist who signed a confidentiality form. Upon the completion of the study, transcripts with no identifying information may be made available to other researchers if they have approval from a Research Ethics Board. The findings from the current research project will contribute to a doctoral dissertation as well as presentations, publications, and other ways to share the findings. Findings may be presented (i.e., oral or written) to supportive service agencies in the Calgary area in a group format (i.e., not individual reports). Finally, participants may be provided a summary report if they want to know the findings.

All hard copies of interview recordings, transcripts, notes, and any other sources of data will be locked in a cabinet only available to the researcher and her supervisor. All electronic copies will be securely stored on an external hard drive and password protected, only available to the researcher and her supervisor. All the data will be archived and stored indefinitely.

**Signatures**

Your signature on this form indicates that 1) you understand to your satisfaction the information provided to you about your participation in this research project, and 2) you agree to participate in the research project.

In no way does this waive your legal rights nor release the investigators, sponsors, or involved institutions from their legal and professional responsibilities. You are free to withdraw from this research project at any time. You should feel free to ask for clarification or new information throughout your participation.

Participant's Name: (please print) \_\_\_\_\_

Participant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Researcher's Name: (please print) \_\_\_\_\_

Researcher's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Questions/Concerns**

If you have any further questions or want clarification regarding this research and/or your participation, please contact:

*Ms. E. Aiofe Freeman-Cruz, Doctoral Candidate  
Educational Studies in Counselling Psychology, The Werklund School of Education*

*and*

*Dr. Sharon E. Robertson, Supervisor  
Educational Studies in Counselling Psychology, The Werklund School of Education*

If you have any concerns about the way you've been treated as a participant, please contact the Research Ethics Analyst, Research Services Office, University of Calgary at (403) 210-9863; email [cfreb@ucalgary.ca](mailto:cfreb@ucalgary.ca).

A copy of this consent form has been given to you to keep for your records and reference. The investigator has kept a copy of the consent form.

## APPENDIX F: PARTICIPANT ORAL CONSENT SCRIPT

Upon confirming that the participant is aware of being audio-recorded and that he/she also has the consent form in front of them. Then the interviewer will follow the script below.

*Please state your full name for the recording. (wait for response)*

Have you read the consent form?

If yes, follow to the next question.

If no, ask: *Take some time to read it, now, please.*

Do you understand the consent form? (wait for response) Do you have any questions about what it says or what anything means? (wait for response)

Address any questions that the participant has.

What pseudonym do you choose for yourself?

Are you willing to participate under the conditions described in the consent form?

*I will now be ending the recording of the oral consent process.*

Ensure the participant is aware that the signed consent form will need to be mailed back to the researcher via email or regular mail. In the case that the participant is unable to sign the consent form for any reason, follow the following protocol:

Follow the same script above. If the individual consents to participating, document the consent on the consent form in front of you with the date and time of consent. Please use a code for identification purposes for future reference, and sign the consent form.

## APPENDIX G: SAMPLE INTERVIEW QUESTIONS

### Demographic information

- Age of participant
- Age of participant at time of parent's injury and years since injury
- Parents' current ages
- Gender (parent and child)
- Family structure (possibly a quick genogram)
- Cause of ABI
- Ethnicity of participant (how they identify)
- Education of parents
- Current education of participant

### Interview Questions

- To begin, tell me about your experience growing up and living with a parent with an ABI. You can begin by telling me about what it was like before and after the injury if you like. (To orient the participant and interviewer to the topic).
- How would you describe yourself as a teenager before the parental ABI? How would others describe you?
- How would you describe yourself after the ABI? How would others have described you after the ABI? How about now?
- Did you notice changes in yourself or things that stayed the same after your parent's ABI? What led you change and/or stay the same? What changes did others notice about you?
- What changes did you notice in others around you? How did this influence any changes in yourself?
- How were you able to still feel like you while also accepting some of these changes (in self, in parent, in family)?
- How did living with a parent with an ABI shape you as a person? If your parent's injury didn't happen while you were a teenager, do you think you would have still described yourself now as...? Why or Why not?
- What were some defining moments for you after your parent incurred an ABI, during their recovery or beyond (i.e., later in life), that you would say changed you? Why are these moments important and how did they shape you? What is it about those moments that told you about who you are or who you wanted to be?
- Did your experience with your parent with an ABI ever result in you thinking or feeling negatively about who you are as a person, who you were, or who you could be? Tell me more about this and how you managed it. Did you ever reconcile negative sense of self?

How is this reconciliation or non-reconciliation informing who you think you are now?

- What would have made these changes in self easier or harder to deal with? How were friends, family, and communities helpful or unhelpful? How were professionals helpful or unhelpful?
- What would you say psychologists and therapists need to know about how to help a young person like you were living with a parent with an ABI?
- How was it for you to be interviewed for this study? Do you see yourself differently in any way as a result of being interviewed?
- Is there anything that you would have liked to be asked that I didn't ask?