

The Impact of a Standardised Family Constellation Exercise on Parentified Individuals - A Qualitative Study

Alexandra Katakalea^{1,2}, Panagiota Balikou^{1,2}

¹ College for Humanistic Sciences- ICPS

² University of Lancashire

Abstract

Background: Family Constellations are widely recognised for their experiential impact but face challenges regarding empirical validation, standardisation and replication. The practice's subjective nature often limits its integration into evidence-based clinical frameworks.

Aims: This study aimed to explore the effects of a Standardised Family Constellation Exercise within a virtual setting, focusing on adults who had experienced parentification. The goal was to assess whether a structured and replicable approach could elicit therapeutic effects and meaningful personal insights.

Method: Ten Greek-speaking adults aged 18–45, with no prior exposure to constellation work, participated in the process through the Delightex Edu platform. The intervention included structured resolution sentences and symbolic visualisations targeting the systemic burden of parentification. A qualitative design with Thematic Analysis was used to examine participant experiences.

Results: Six core themes emerged: (1) the Burden of Responsibility as a Psychosomatic Experience, (2) Revival of the Child Role, (3) the Power of Resolution Sentences, (4) Ambivalence – Guilt – Letting go, (5) Identity and Role Renegotiation, and (6) the Therapeutic Value of Visualisation.

Conclusion: Findings suggest that a Standardised Family Constellation Exercise can reliably evoke profound emotional reactions, facilitate the symbolic resolution of the parentification burden, and support shifts in participants' self-concept and family role dynamics. Despite limitations such as sample size and the researcher's dual role, there is therapeutic potential of structured constellation methods as accessible, trauma-informed interventions within clinical settings.

Keywords

parentification, role reversal, family constellations, resolution sentences, visualization in therapy, symbols in therapy, systemic therapy, virtual therapy

Correspondence Author: Alexandra (Sandra) Katakalea, katakaleaa@gmail.com

Introduction

Family Constellations is a brief therapeutic approach designed to help individuals gain new perspectives and understand their interactions within the family system (1). It evolved from Virginia Satir's work on family systems, Jacob Moreno's psychodrama, Ivan Boszormenyi-Nagy's exploration of relational ethics and family sculpture (2, 3, 4). Bert Hellinger popularized the method in the early 1990s by integrating these psychological frameworks with elements from Zulu cultural traditions that emphasize familial and ancestral interconnectedness (5).

Family Constellations uncover hidden dynamics, unresolved trauma, and intergenerational patterns that unconsciously shape emotions and behaviors (5, 6). In group or individual formats, clients explore systemic patterns through symbolic representation of family members, either using live representatives or visualization in the client's *mind's eye* (7). The process aims to restore balance through alignment with what Hellinger termed the *Orders of Love*, systemic principles that promote harmony within family hierarchies. Disruptions to these principles, such as parentification, exclusion, or unresolved trauma, often manifest as psychological or physical distress (8).

Resolution sentences, central to the constellation process, help bring clarity and completion by acknowledging hidden loyalties, expressing unsaid emotions, and creating an image of resolution that allows "love to flow again" (5, 9). These phrases, carefully worded to honor each family member's place, reinforce the restorative effects of the constellation by enabling emotional release and reorganization within the system.

Although widely practiced, Family Constellations face challenges in empirical validation. Existing research is often anecdotal, and while participants frequently report profound emotional shifts, the mechanisms underlying these outcomes remain underexplored (10). Some explanations draw on Sheldrake's morphogenic field theory, suggesting that humans are interconnected through energetic or informational fields (11). Despite limited empirical evidence, the approach continues to attract interest for its experiential depth and systemic insight.

A central systemic disruption often explored in Family Constellations is parentification, a phenomenon in which a child assumes adult caregiving roles to meet parental needs (12). This inversion of roles may occur emotionally, when a child caters for parent's feelings, or instrumentally, when practical or financial responsibilities are transferred to the child being disproportionate to their age and maturity (13, 14). Such experiences can hinder the child's emotional development, blur relational boundaries, and leave lingering guilt and over-responsibility into adulthood (15, 16).

Parentification commonly arises in families affected by illness, addiction, mental health challenges, financial strain, or marital conflict (17, 18, 19, 20). The dynamic tends to manifest differently by gender, with girls more often emotionally enmeshed with mothers and boys affected by parental separation or paternal absence (21, 22). While parentified children often

develop resilience, empathy, and responsibility, the emotional costs can include low self-worth, depression, and difficulties forming healthy adult relationships (23, 24, 25, 26, 27).

The impact of parentification varies according to family, cultural, and situational contexts (28, 29). In collectivist cultures, caregiving roles may be viewed positively as filial duty rather than pathology (30). For example, the rise of child- and youth-headed households in parts of Africa due to widespread HIV related deaths and the experiences of immigrant families show how caregiving can reflect resilience and adaptation (31,32). Relationship quality also moderates outcomes; secure maternal and sibling bonds can buffer negative effects, whereas dysfunctional family environments amplify stress (33, 34). To capture both adaptive and maladaptive dimensions, some scholars prefer the term "filial responsibility" (24).

Because parentification can have enduring effects on self-concept, relationships, and boundaries, therapy often focuses on restoring balance and differentiating self from family roles. Systemic approaches, like Contextual Therapy and Family Constellations, target the phenomenon at its relational source. Contextual Therapy conceptualizes parentification as a response to "loyalty fabrics", unspoken emotional contracts binding generations (35, p.38). Family Constellations similarly address these intergenerational imbalances by symbolically returning responsibilities to their rightful owners, thereby restoring systemic order (5).

Within constellation work, the facilitator guides clients to represent their family visually or through symbolic figures, revealing unseen loyalties or burdens. "Healing" or resolution sentences affirm the rightful hierarchy, such as "I am your child; you are my parents", helping clients reclaim their role and release internalized guilt (36, 37). Through this process, individuals re-establish emotional boundaries, reclaim their sense of self, and begin to experience relational connections without over-functioning.

Despite its therapeutic promise, research on Family Constellations remains limited. Proponents describe profound insights and emotional relief, yet systematic studies are scarce and often lack standardization (38,10). Some small-scale studies report improvements in psychological functioning, enhanced sense of belonging and confidence, and improved relational awareness (39, 40, 41). Others highlight specific benefits, such as reduced anxiety in nursing students or improvements in chronic illness symptoms (42,43). A systematic review found moderate mental health benefits in most studies but noted substantial methodological variability (44).

Factors such as facilitator style, representative selection, or the specific wording of resolution sentences can vary widely, making it difficult to identify which elements drive therapeutic change. Emotional and somatic activation may heighten memory and meaning-making, yet the precise mechanisms during constellations remain speculative (45).

Standardizing Family Constellations, particularly the use of resolution sentences and movement patterns, offers an opportunity to strengthen scientific validity by identifying the active components of change and improving

reproducibility. Establishing methodological consistency allows researchers to examine emotional and cognitive outcomes without the confounding effects of facilitator variation. Advancing such methodological clarity is essential for integrating constellation work within evidence-based therapeutic frameworks.

In this context, the present study introduces and evaluates a Standardized Family Constellation Exercise designed to explore the lived experiences of adults with histories of parentification. Using a qualitative framework, it investigates how participants engage emotionally, cognitively, and somatically with a structured constellation process conducted in a virtual environment. The study aims to illuminate how symbolic and trauma-informed interventions may foster psychological integration and healing from early role reversal, thereby contributing to the growing empirical understanding of Family Constellations in clinical practice.

Methods

The research employed Thematic Analysis to investigate participants’ lived experiences providing an in-depth understanding of how they made sense of their engagement with the constellation exercise (46). A uniform constellation protocol ensured methodological consistency and comparability of experiences. The researcher maintained a reflexive stance throughout facilitation, interviewing, and analysis, supported by strict adherence to a standardized script.

Participants and Recruitment

Ten Greek-speaking adults participated in the study, all of whom self-identified as having experienced parentification during childhood, either emotional (providing comfort, mediation, or emotional support to parents) or instrumental (assuming practical or financial responsibilities) or both.

Participants were recruited in collaboration with therapists who identified suitable candidates. Inclusion criteria required participants to (a) have taken on caregiving roles during childhood, (b) be currently engaged in psychotherapy to ensure emotional support, and (c) no prior exposure to Family Constellations to ensure their responses reflected the standardized exercise rather than pre-existing familiarity. Exclusion criteria included a history of psychosis, active PTSD, or emotional instability that could compromise safety.

Screening incorporated items adapted from the Filial Responsibility Scale—Adult to verify experiences of significant parentification (47). Only participants meeting multiple criteria, such as having been a primary source of emotional support for a parent or having managed adult responsibilities at a young age, were included. This ensured that the sample authentically represented the lived experience of role reversal.

Prior to participation, all individuals completed informed consent and provided demographic information, including age, years in therapy, and the parent for whom they had served as caregiver (Table 1). They were informed of their right to with-

draw from the study at any time without consequence, and ethical approval for the research was obtained beforehand.

Table 1. Summary of Participant Demographic Characteristics (N = 10)

Variables	Category	n
Age (years)	Range: 22–42; M = 32	
Gender	Female	9
	Male	1
	Other/Non-binary	—
Education Level	High School	1
	College/University	4
	Master’s Degree	5
	PhD	—
Marital Status	Single	10
	Married	—
	Civil Partnership	—
Employment Status	Full-time	7
	Part-time	3
	Unemployed	—
Duration of Psychotherapy	<6 months	1
	6 months–1 year	1
	1–2 years	3
	>2 years	5
Served Caregiver For	Mother	6
	Father	1
	Both	3

Note: Values represent the number of participants in each category

The Standardized Constellation Exercise

Participants engaged in a virtual Standardized Family Constellation Exercise conducted individually via the Delightex Edu platform, a three-dimensional interactive environment that allowed symbolic placement of figures representing family members (48). Each participant worked with three figures (Self, Mother, and Father) and one Object symbolizing the burden of responsibility associated with their parentified role.

The exercise was conducted in four structured phases:

- 1. Placement and Visualization:** *Participants selected digital figures to represent themselves and their parents, arranging them intuitively to reflect emotional distance or closeness. The researcher operated the platform to maintain standardization and reduce technological distractions.*
- 2. Identification of the Burden:** *An object, such as a stone or any other personally selected item, was placed between the individual and parent figures to symbolize the emotional weight carried since childhood (Figure 1). Participants described what the burden represented and where they felt it physically or emotionally.*

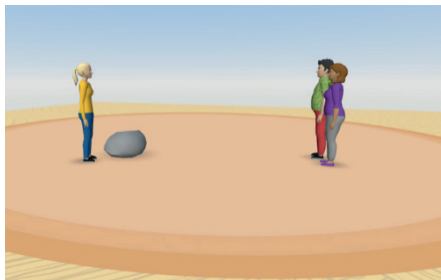


Figure 1. Initial set up

3. Resolution Sentences: Participants were guided through a sequence of emotionally resonant statements designed to acknowledge and return responsibilities that were not theirs to carry. These were spoken aloud in the presence of the symbolic family configuration. Example sentences included:

- *As a child, I took on responsibilities that I was too small to take on. I was just a child.*
- *"Your life path, struggles, and traumas belong, but I no longer need to carry them as my own." "I respectfully return them to you and keep only what belongs to me."*
- *"And by focusing on my own needs, dreams, and desires, I will be honouring you."*

Through these symbolic declarations, participants were encouraged to take an emotionally differentiated position, separating their own identity and needs from those of their caregivers. In this way, the resolution sentences acted as a therapeutic tool, enabling participants to articulate unspoken family dynamics, establish healthier emotional boundaries, and reframe their self-concept beyond the constraints of parentified roles. They are intended to "clarify, strengthen, and resolve" (49, p. 18).

4. Return of the Burden and Closure: After returning the burden, participants turned their gaze toward the future with their parents as a source of strength behind them and were encouraged to notice shifts in the symbolic field and observe any emotional or physical sensations (Figure 2).

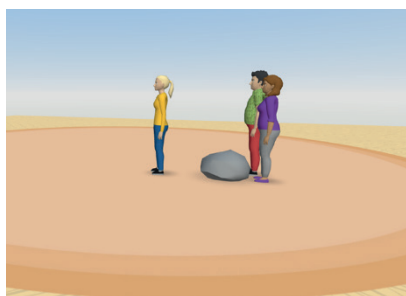


Figure 2. Final set up

This simplified constellation structure deliberately focused on the nuclear family (parents and self), excluding siblings or ancestors to ensure consistency and emotional containment. Conducting the process from the adult self-position, rather than the child, helped participants reframe past experiences

with clarity and autonomy, avoiding reinforcement of childlike entanglement or *blind love* (50).

The virtual modality offered emotional safety through symbolic distance, allowing participants to observe sensitive material without overwhelm (51). It also enhanced standardization by ensuring identical spatial arrangements and movements across sessions.

Data Collection

Following the exercise, each participant took part in a semi-structured interview via secure video conferencing. The interview explored emotional reactions, bodily sensations, insights, and reflections on the constellation experience. Participants were asked about the meaning of the resolution sentences, any sense of relief or closure, and perceived changes in self-perception or family relationships.

This approach allowed the researcher to capture both the immediate emotional impact and participants' broader interpretations of therapeutic value (52). Interviews were conducted in Greek and later translated into English for analysis. Rather than audio recording, detailed notetaking was employed to foster participant comfort when discussing sensitive emotional experiences. This decision reflected ethical and methodological considerations prioritizing openness and safety (53, 54).

Data Analysis

Interview notes were analyzed using the six-phase Thematic Analysis framework (46). Coding was inductive and reflexive, allowing patterns to emerge naturally from the data rather than being imposed by pre-existing frameworks. Analysis produced six central themes representing the shared essence of participants' experiences.

The themes captured both the cognitive and emotional processes participants underwent, from embodied burden to symbolic resolution and integration.

Ethical Considerations

Confidentiality was maintained through pseudonyms and secure storage of anonymized data. Delightex Edu platform complies with current data protection regulations (including the General Data Protection Regulation - GDPR). The researcher maintained a clear boundary between facilitation and data collection. During the exercise, facilitation followed a fixed script to preserve neutrality; during interviews, an open-ended, non-directive stance encouraged authentic expression.

Results

The findings are organized into six thematic categories capturing key aspects of participants' lived experiences during the Standardized Family Constellation Exercise. Each theme reflects a distinct yet interconnected process of emotional, cognitive, and somatic transformation, illustrated through direct participant quotations.

Thematic Category 1: The Burden of Responsibility as a Psychosomatic Experience

All ten participants described the weight of parentification as both an emotional and physical experience. Encountering the initial constellation image often triggered a visceral awareness of long-held pressure.

"I felt a knot in my chest and a rapid heartbeat." — Participant 3

- *"I feel the weight in my chest and throat."* — Participant 6
- *"Like a stake reaching up to the shoulder blade."* — Participant 4
- *"I felt it squeezing me from both sides."* — Participant 5
- *"I feel the injustice in my heart."* — Participant 1

These descriptions reveal how unresolved emotional responsibilities were internalized and "stored" somatically. The constellation allowed participants to visualize this burden, effectively transforming diffuse emotional strain into embodied awareness. Expressions of tightness, suffocation, or pressure formed a body map of trauma, illustrating the enduring somatic imprint of early caregiving roles.

Thematic Category 2: Revival of the Child Role

Six participants reported a return to the emotional state of their childhood during the exercise. The intervention did not merely evoke memories but reactivated feelings of abandonment, helplessness, and longing for care, providing a safe space for re-experiencing and integrating these emotions.

"I felt that I entered the mediator's state... it takes me back and makes me sad. I felt sadness for the young Mirsini." — Participant 4

"Seeing the representation, I see my mother waiting for me to 'take a position.' It is as if I cannot express myself, to maintain a balance." — Participant 6

"Setting up the figures and the object, it was as if I re-entered it. I relived it, look how I created this weight myself." — Participant 7

"I felt like no one cared whether I was alive or not." — Participant 10

The constellation appeared to function as a "corrective emotional experience": participants revisited past roles within a structured and supportive context, allowing reprocessing of childhood emotions under safer conditions. This theme underscores the therapeutic power of symbolic regression when combined with emotional containment.

Thematic Category 3: The Power of Resolution Sentences

All participants identified the spoken affirmations as the most emotionally impactful component of the exercise. The standardized sentences, simple, clear, and emotionally resonant, acted as triggers for deep release.

"When I said, 'I am just a child, I wanted to cry.'" — Participant 4

"I return the burden to you with respect, brought me relief." — Participant 10

"The sentence about 'focusing on my dreams'... it was very moving." — Participant 8

Language became both symbolic and emotional catalyst, transforming internal states rather than merely describing them. Participants experienced physiological responses such as crying, yawning, or sighing, signs of integration between emotional and bodily processes. "The words were simple yet very powerful... they gave me a new perspective." — Participant 9

"The statements had the greater impact. I felt them as a shift... They form the foundation for proper and healthy relationships." — Participant 5

"At first, I was afraid, but then I felt it more strongly when I said the words because I agreed with them." — Participant 1

"While I was repeating the words, I was upset. I wanted to cry. Now I feel a sense of release." — Participant 2

"It was like a ritual; they had meaning." — Participant 10

"It helped me see through the anger... as if the anger was holding onto the burden and would not let it go, while the sense of humanity gave it back through the words." — Participant 9

The resolution sentences acted as emotionally charged anchors, ritualized speech acts that gave participants permission to express long-suppressed truths and a means to validate, reframe, and ultimately begin to heal internalised narratives of responsibility, guilt and pain.

Thematic Category 4: Ambivalence – Guilt – Letting Go

Letting go of inherited responsibility evoked ambivalence for some participants. Relief and lightness often coexisted with guilt, as many struggled to release obligations that had defined their identity for years.

"At the end, when I was giving the responsibilities back, I expected to feel really good and not guilty." — Participant 4

"It is hard to let it go... I experienced a fluctuation. It is not something static. It moved through safety – guilt – doubt – joy – doubt." — Participant 7

"I felt strange but also good about not taking on the responsibility. I am used to it, and it is not easy to let it go." — Participant 3

Despite moments of conflict, six participants ultimately described emotional or physical relief after symbolically returning the burden.

"I thought I would feel more pressured and weighed down, but I don't. I feel like we have closed the issue." — Participant 6

"I am happy and full of energy... even my headache went away." — Participant 8
 "I became more forgiving toward all of it and myself." — Participant 9
 "I did not expect the relief I felt upon completing the exercise; one moment I wanted to cry, and the next I felt relief." — Participant 2

These accounts highlight the coexistence of guilt and liberation, a hallmark of systemic loyalty dynamics, where love and individuation must be renegotiated simultaneously.

Thematic Category 5: Identity and Role Renegotiation

Eight participants reported a transformation in self-perception following the constellation, describing a clearer understanding that the burdens they carried were never truly theirs. This realization marked a turning point in identity reconstruction.

"... balance is restored in the roles, and feeling gratitude allows me to look ahead at my life." — Participant 7
 "I am not my mother's spouse. Her spouse is my father." — Participant 8
 "A boundary was set, that it should not have been my problem." — Participant 1
 "It helped me understand that I did not create it, and I am not to blame for it." — Participant 3

Participants described this awareness as a movement from enmeshment toward differentiation, acknowledging love for parents while reclaiming autonomy and self-agency. The constellation thus facilitated boundary clarification and the redefinition of self within the family hierarchy.

Thematic Category 6: The Therapeutic Value of Visualization

All participants recognized the value of visualization and externalization as central to emotional processing. Seeing roles and burdens represented in space enabled a cognitive and emotional shift from internal chaos to external clarity.

"When something is visual, it is easier to understand it." — Participant 1
 "I liked the use of symbols. When I assign symbols, I can understand better what is happening to me." — Participant 3
 "It is helpful to bring the object of responsibility into an image, to visualize my emotion." — Participant 4
 "When I saw the rock, it had a presence... we may talk about these things in theory, but when you see it, I feel like I have to do something about it." — Participant 6
 "Seeing the roles visually made it clear that we are not a triangle." — Participant 8
 "More powerful than just talking about them." — Participant 9
 "It helped me because I could see it actually happen-

ing: the burden leaving. When I turned my back, I felt like I was moving on." — Participant 2

The spatial and symbolic dimension enabled participants to observe, rather than relive, their experiences. This facilitated reflection, insight, and emotional release, transforming abstract understanding into tangible awareness.

Discussion

This study explored the emotional and psychological impact of a Standardized Family Constellation Exercise on adults with histories of parentification. Through Thematic Analysis, six themes emerged: the Burden of Responsibility as a Psychosomatic Experience, the Revival of the Child Role, the Power of Resolution Sentences, Ambivalence – Guilt – Letting Go, Identity and Role Renegotiation, and the Therapeutic Value of Visualization. Across participants, the constellation experience elicited multidimensional transformations integrating body, emotion, and cognition. The symbolic structure appeared to activate embodied memories of parentification, often experienced as heaviness or constriction, while the standardized resolution sentences provided linguistic pathways for emotional release and redefinition.

Participants' experiences followed a processual sequence of change, beginning with awareness of burden and emotional reactivation, progressing through verbal acknowledgment, ambivalence/guilt, and/or letting go, identity reconstruction, and reflective integration. The interplay of language and visualization proved especially powerful: spoken sentences functioned as semantic anchors for new meaning-making, while visual elements externalized internal conflicts, creating symbolic distance that supported emotional regulation and cognitive reframing.

Overall, these findings illustrate how a Standardized Family Constellation Exercise can facilitate profound emotional and somatic release while promoting shifts in self-concept and family role perception. As both an experiential and symbolic process of reorganization, the intervention enabled participants to reclaim psychological boundaries, cultivate compassion toward self and family, and move toward a renewed sense of balance and belonging.

The Burden of Responsibility as a Psychosomatic Experience

Participants' descriptions of tightness in the chest, pressure on the shoulders, or breathlessness align with trauma research, emphasizing that the body often retains unprocessed emotional memory (55). Ogden et al. (56, p. 3), describe such embodied traces as a "sensorimotor story" where unresolved affective experiences are encoded somatically. These findings underscore the somatic legacy of parentification, where childhood responsibility, internalized over time, manifests as bodily tension and psychosomatic distress in adulthood.

Revival of the Child Role

The revival of the child-role during the intervention facilitated emotional recall and safe re-experiencing of unmet needs. The symbolic nature of the constellation allowed participants to revisit early roles within a supportive framework, transforming emotional regression into an opportunity for reprocessing. Bowlby's attachment theory (57) and Young et al.'s schema therapy concepts (58) illuminate this process: emotionally evocative experiences can trigger "vulnerable child modes," yet within safe containment, they enable corrective integration. In this way, the exercise mirrored aspects of reparenting and emotional repair within a contained ritual space.

The Power of Resolution Sentences

The emotionally charged affirmations used in the exercise, such as "I am just a child" and "I respectfully return the burden to you", emerged as central mechanisms of transformation. Participants experienced these statements as *emotional keys*, unlocking deep affective material, and enabling embodied release. This supports Hellinger's view that healing sentences should be short, direct, and truthful, spoken from a place of humility serving to restore systemic order and belonging (5, 59).

From a theoretical standpoint, these phrases function as ritualized linguistic acts that mark transitions between psychological states where language becomes a vehicle for meaning-making and identity reconstruction (60, 61). Anthropological frameworks on ritual and symbolic healing further support the transformative function of spoken affirmation in evoking emotional catharsis and reorganization (62, 63, 64).

The deliberate use of concise, resonant language allowed participants to articulate previously unspoken truths within a structured and emotionally contained setting. Beyond personal expression, these affirmations supported the reconstruction of psychological boundaries and the renegotiation of familial roles, enabling participants to differentiate between inherited obligations and authentic self-definition. Through this process, language became both symbolic and transformative, providing a means for participants to give voice to internal realities and to reposition themselves within their family systems with greater clarity and autonomy.

Ambivalence – Guilt – Letting Go

The coexistence of guilt and relief among participants highlights the non-linear nature of healing. While many felt liberated after symbolically returning responsibility, others described discomfort or self-doubt. This ambivalence reflects enduring "invisible loyalties", where releasing burdens can feel like betrayal (35). Such tension mirrors Mahler et al.'s notion of separation-individuation, in which autonomy is accompanied by anxiety, and Bradshaw's observation that inner child work often evokes guilt tied to loyalty bonds (65, 66).

Acknowledging this dynamic is essential for therapeutic practice. The constellation setting offered participants a structured container in which both guilt and relief could coexist, allowing the psyche to tolerate ambivalence while integrating

change. These findings affirm that detachment from dysfunctional family roles involves emotional oscillation rather than linear progression.

Identity and Role Renegotiation

Participants' reflections on identity renegotiation resonate with Bowen's "differentiation of self," wherein emotional separation from the family system enables authenticity and relational balance (67). Through symbolic return of responsibility, participants articulated clearer boundaries: "I am not my mother's spouse" or "It should not have been my problem." These insights illustrate how constellation work facilitates movement from fusion toward individuation.

Satir's framework on personal growth and self-worth similarly underlines the importance of boundary restoration in systemic healing (68). The exercise's focus on reordering family roles allowed participants to integrate compassion with differentiation, reclaiming autonomy without emotional cutoff.

The Therapeutic Value of Visualization

Visualization functioned as both a mirror and mediator for emotional insight. Seeing internal dynamics externalized in a symbolic field enabled reflection, meaning-making, and emotional regulation. Participants consistently described the act of *seeing* as transformative, bridging inner experience and outer representation. This reflects Moreno's psychodrama principles, which position spatial enactment as a medium for deep integration, and Siegel's view that imagery engages neural pathways of self-observation and coherence (3, 69).

By situating emotions in space, visualization created distance between self and symptom, facilitating perspective-taking. The standardized format also demonstrated that therapeutic immersion can be achieved even in virtual contexts when the symbolic frame is well structured.

Implications for Standardizing Family Constellations

This study contributes to ongoing efforts to make constellation work more replicable and empirically grounded. Traditional constellations rely heavily on practitioner intuition and group dynamics, which hinder standardization. Here, a structured design, consistent affirmations, movements, and visual configurations, proved capable of eliciting consistent emotional depth and insight across individuals.

Findings suggest that certain symbolic actions, such as the *returning of the burden* or the *child declaration*, may have cross-cultural or transdiagnostic relevance, especially for individuals with similar developmental histories. These could serve as foundational components for developing empirically testable protocols. Nonetheless, flexibility remains critical: while standardization ensures comparability, practitioners must remain attuned to individual responses and emergent emotion.

Implications for Practice

For clinicians, this research highlights how *structured symbolic interventions* can complement talk therapy, particularly when working with adults who carry unresolved family roles. Therapists might integrate brief constellation-inspired elements, such as spatial mapping, the use of objects, or collaboratively crafted affirmations, to help clients externalize emotional patterns and foster insight.

Practitioners should also attend to ambivalence: releasing old responsibilities can evoke both freedom and guilt. Offering space for this complexity aligns with trauma-informed care and supports sustainable integration. Finally, this study underscores the therapeutic potency of language. Therapists can co-create emotionally resonant sentences with clients that acknowledge pain, restore hierarchy, and promote healing.

Limitations and Future Research

The qualitative design, though rich in depth, involved only ten participants, limiting generalizability. Future studies should test standardized constellation exercises with larger and more diverse samples across cultures and clinical contexts. Participants' ongoing engagement in psychotherapy may also have enhanced introspective ability, potentially influencing outcomes.

The researcher's dual role as facilitator and interviewer, while managed with reflexive boundaries, may have shaped participant responses. Future work could separate these roles to enhance neutrality. Note-taking, chosen to prioritize participant comfort, limited fine-grained linguistic data; hybrid approaches could balance safety with analytic depth.

Further research could explore longitudinal effects, assessing whether symbolic constellations yield sustained shifts in identity and relational functioning. Mixed-methods designs combining qualitative narratives with pre- and post-intervention measures (e.g., emotional distress, boundary clarity, or self-concept) would strengthen evidence. Future studies might also examine neurobiological mechanisms underlying symbolic and spatial therapeutic work, bridging systemic psychotherapy, and trauma neuroscience.

Conclusion

This study demonstrates that a Standardized Family Constellation Exercise can activate profound emotional, cognitive, and somatic processes among adults with histories of parentification. Six core themes, *The Burden of Responsibility as a Psychosomatic Experience*, *Revival of the Child Role*, *The Power of Resolution Sentences*, *Ambivalence – Guilt – Letting Go*, *Identity and Role Renegotiation*, *The Therapeutic Value of Visualization* revealed a coherent trajectory of awareness, emotional release, and redefinition.

Unlike traditional, facilitator-led constellations, this research introduced a replicable structure without sacrificing depth,

supporting both empirical validation and therapeutic safety. The findings highlight the central role of symbolic language and spatial imagery in unlocking internalised experiences that may otherwise remain preverbal or inaccessible through talk therapy alone.

While limited by sample size and context, the study offers compelling evidence for developing structured, trauma-informed constellation interventions. By uniting systemic theory, symbolic process, and experiential depth, such approaches may provide accessible and evidence-grounded pathways for healing early relational trauma and restoring balance in the self and family system.

References

1. Manne J. *Family Constellations*. North Atlantic Books, Berkeley, CA, 2012.
2. Satir V, Stachowiak J, Taschman HA. *Helping Families to Change*. Jason Aronson, Incorporated, Maryland, 1994.
3. Moreno JL, Moreno ZT. *Psychodrama. Vol. 3, Action Therapy and Principles of Practice*. Beacon House, New York, 1969.
4. Boszormenyi-Nagy I. *Foundations of Contextual Therapy:..Collected Papers of Ivan*. Routledge, New York, 2014.
5. Hellinger B, Weber G, Beaumont H. *Love's Hidden Symmetry: What Makes Love Work in Relationships*. Zeig, Tucker, Phoenix, AZ, 1998.
6. Hurley J, Koenning M, Bray A. Responding to Intergenerational Psychological Trauma: A Literature Review Paper on the Place of Family Constellation Therapy. *Psychotherapy and Counselling Journal of Australia*. 2018;6(1). doi:<https://doi.org/10.59158/001c.71192>
7. Franke U. *In My Mind's Eye*. Carl-Auer Verlag, Heidelberg, 2017.
8. Schneider JR, Beaumont C, Weber G. *Family Constellations Basic Principles and Procedures*. Carl Auer Verlag, Heidelberg, 2020.
9. Cohen DB "Family Constellations": An Innovative Systemic Phenomenological Group Process From Germany. *The Family Journal*. 2006;14(3):226-233. doi:<https://doi.org/10.1177/1066480706287279>
10. Konkoly Thege B, Petroll C, Rivas C, Scholtens S. The Effectiveness of Family Constellation Therapy in Improving Mental Health: A Systematic Review. *Family Process*. 2021;60(2):409-423. doi:<https://doi.org/10.1111/famp.12636>
11. Sheldrake R. *The Sense of Being Stared at: And Other Aspects of the Extended Mind*. Crown, New York, 2004.
12. Chase ND. *Burdened Children : Theory, Research, and Treatment of Parentification* . SAGE, California, 1999.
13. Dariotis JK, Chen FR, Park YR, Nowak MK, French KM, Codamon AM. Parentification vulnerability, reactivity, resilience, and thriving: A mixed methods systematic literature review. *International Journal of Environmental Research and Public Health*. 2023;20(13):6197-6197. doi:<https://doi.org/10.3390/ijerph20136197>
14. Engelhardt JA. The developmental implications of parentification: Effects on childhood attachment. *Graduate Student Journal of Psychology*. 2012;14(1):45-52. doi:<https://doi.org/10.52214/gsjp.v14i.10879>
15. Leon K, Rudy D. Family Processes and Children's Representations of Parentification. *Journal of Emotional Abuse*. 2005;5(2-3):111-142. doi:https://doi.org/10.1300/J135v05n02_06

16. Schorr S, Goldner L. "Like stepping on glass": A theoretical model to understand the emotional experience of childhood parentification. *Family Relations*. 2023;72(5). doi:<https://doi.org/10.1111/fare.12833>
17. Abraham KM, Stein CH. When Mom has a Mental Illness: Role Reversal and Psychosocial Adjustment Among Emerging Adults. *Journal of Clinical Psychology*. 2013;69(6):600-615. doi:<https://doi.org/10.1002/jclp.21950>
18. Borchet J, Lewandowska-Walter A. Parentification – its direction and perceived benefits in terms of connections with late adolescents' emotional regulation in the situation of marital conflict. *Current Issues in Personality Psychology*. 2017;5(2):113-122. doi:<https://doi.org/10.5114/cipp.2017.66092>
19. Carroll JJ, Robinson BE. Depression and Parentification among Adults as Related to Parental Workaholism and Alcoholism. *The Family Journal*. 2000;8(4):360-367. doi:<https://doi.org/10.1177/1066480700084005>
20. Tedgård E, Råstam M, Wirtberg I. An upbringing with substance-abusing parents: Experiences of parentification and dysfunctional communication. *Nordic Studies on Alcohol and Drugs*. 2019;36(3):223-247. doi:<https://doi.org/10.1177/1455072518814308>
21. Jurkovic GJ. *Lost Childhoods : The Plight of the Parentified Child*. Routledge, New York, 2015.
22. Mayseless O, Bartholomew K, Henderson A, Trinke S. "I was more her Mom than she was mine:" Role Reversal in a Community Sample*. *Family Relations*. 2004;53(1):78-86. doi:<https://doi.org/10.1111/j.1741-3729.2004.00011.x>
23. van der Mijl RCW, Vingerhoets AJJM. The Positive Effects of Parentification. *Psihologijske teme*. 2017;26(2):417-430. doi:<https://doi.org/10.31820/pt.26.2.8>
24. Jurkovic GJ, Kuperminc GP, Sarac T, Weisshaar D. Role of Filial Responsibility in the Post-War Adjustment of Bosnian Young Adolescents. *Journal of Emotional Abuse*. 2005;5(4):219-235. doi:https://doi.org/10.1300/j135v05n04_03
25. Earley L, Cushway D. The Parentified Child. *Clinical Child Psychology and Psychiatry*. 2002;7(2):163-178. doi:<https://doi.org/10.1177/1359104502007002005>
26. Schier K, Herke M, Nickel R, Egle UT, Hardt J. Long-Term Sequelae of Emotional Parentification: A Cross-Validation Study Using Sequences of Regressions. *Journal of Child and Family Studies*. 2014;24(5):1307-1321. doi:<https://doi.org/10.1007/s10826-014-9938-z>
27. Sang J, Cederbaum JA, Hurlburt MS. Parentification, Substance Use, and Sex among Adolescent Daughters from Ethnic Minority Families: The Moderating Role of Monitoring. *Family Process*. 2013;53(2):252-266. doi:<https://doi.org/10.1111/famp.12038>
28. Burton L. Childhood Adultification in Economically Disadvantaged Families: A Conceptual Model. *Family Relations*. 2007;56(4):329-345. doi:<https://doi.org/10.1111/j.1741-3729.2007.00463.x>
29. Hooper LM, Tomek S, Bond JM, Reif MS. Race/Ethnicity, Gender, Parentification, and Psychological Functioning. *The Family Journal*. 2014;23(1):33-48. doi:<https://doi.org/10.1177/1066480714547187>
30. Khafi TY, Yates TM, Luthar SS. Ethnic Differences in the Developmental Significance of Parentification. *Family Process*. 2014;53(2):267-287. doi:<https://doi.org/10.1111/famp.12072>
31. Chademana KE, van Wyk B. Life in a child-headed household: Exploring the quality of life of orphans living in child-headed households in Zimbabwe. *African Journal of AIDS Research*. 2021;20(2):172-180. doi:<https://doi.org/10.2989/16085906.2021.1925311>
32. Kosner A, Roer-Strier D, Kurman J. Changing Familial Roles for Immigrant Adolescents From the Former Soviet Union to Israel. *Journal of Adolescent Research*. 2013;29(3):356-379. doi:<https://doi.org/10.1177/0743558413508202>
33. Borchet J, Lewandowska-Walter A, Rostowska T. Parentification in late adolescence and selected features of the family system. *Health Psychology Report*. 2016;4(2):116-127. doi:<https://doi.org/10.5114/hpr.2016.55921>
34. Petrowski CE, Stein CH. Young Women's Accounts of Caregiving, Family Relationships, and Personal Growth When Mother Has Mental Illness. *Journal of Child and Family Studies*. 2016;25(9):2873-2884. doi:<https://doi.org/10.1007/s10826-016-0441-6>
35. Boszormenyi-Nagy I, Spark GM. *Invisible Loyalties Reciprocity in Intergenerational Family Therapy*. Brunner/Mazel, New York, 1984.
36. Stiefel I, Harris P, Zollmann AWF. Family Constellation - A Therapy Beyond Words. *Australian and New Zealand Journal of Family Therapy*. 2002;23(1):38-44. doi:<https://doi.org/10.1002/j.1467-8438.2002.tb00484.x>
37. Franke U. *The River Never Looks Back*. Carl-Auer Verlag, Heidelberg, 2017.
38. Janus D, GaştoľB. *Family Constellations : A Breakthrough in Psychotherapy and Human Sciences*. Lexington Books, Maryland, 2022.
39. Hunger C, Weinhold J, Bornhäuser A, Link L, Schweitzer J. Mid- and Long-Term Effects of Family Constellation Seminars in a General Population Sample: 8- and 12-Month Follow-Up. *Family Process*. 2014;54(2):344-358. doi:<https://doi.org/10.1111/famp.12102>
40. Hunger C, Bornhäuser A, Link L, Schweitzer J, Weinhold J. Improving Experience in Personal Social Systems through Family Constellation Seminars: Results of a Randomized Controlled Trial. *Family Process*. 2013;53(2):288-306. doi:<https://doi.org/10.1111/famp.12051>
41. Georgiadou S, Wilkins-Smith J. Participants' Experiences in Hellinger's Family Constellation work: Findings of a Grounded Theory Study in the USA. 2013.
42. Goode KP. *Enhancing the Affective Domain in Order to Reduce Fear of Death in First-Year Student Nurses*. 2016. doi:<https://doi.org/10.18745/th.17172>
43. Jafferany M, Capec S, Yaremkevych R, Andrashko Y, Capec G, Petrek M. Effects of family constellation seminars on itch in patients with atopic dermatitis and psoriasis: A patient preference controlled trial. *Dermatologic Therapy*. 2019;32(6). doi:<https://doi.org/10.1111/dth.13100>
44. Thomas GK. *Therapy in the New Millennium: New Sciences and Their Application to Therapy. Effectiveness of Systemic Family Constellations* . 2010.
45. Burke A, Heuer F, Reisberg D. Remembering emotional events. *Memory & Cognition*. 1992;20(3):277-290. doi:<https://doi.org/10.3758/bf03199665>
46. Braun V, Clarke V. *Successful Qualitative Research: A Practical Guide for Beginners*. SAGE, London, 2013.
47. Jurkovic GJ, Thirkield A. Filial Responsibility Scale--Adult (FRS-A) [Database record]. Published online January 1, 1999. doi:<https://doi.org/10.1037/t17803-000>
48. Delightex GmbH. Delightex Edu: Make AR & VR in the classroom. Delightex Edu: Make AR & VR in the classroom. Published 2025. Accessed October 22, 2025. <https://edu.delightex.com/>
49. Ulsamer B. *How to Heal Old Wounds and Draw New Strength: The Essentials of Family Constellations for Self-Help and Therapists in 70 Exercises*. Self-publishing, Freiburg, 2025.

50. Hellinger B. *To the Heart of the Matter : Brief Therapies*. Carl-Auer-Systeme Verlag, Heidelberg, 2003.
51. Glanz K, Rizzo A (Skip), Graap K. Virtual reality for psychotherapy: Current reality and future possibilities. *Psychotherapy: Theory, Research, Practice, Training*. 2003;40(1-2):55-67. doi:<https://doi.org/10.1037/0033-3204.40.1-2.55>
52. Larkin M, Thompson AR. Interpretative Phenomenological Analysis in Mental Health and Psychotherapy Research. *Qualitative Research Methods in Mental Health and Psychotherapy*. Published online June 28, 2011:99-116. doi:<https://doi.org/10.1002/9781119973249.ch8>
53. Seidman I. *Interviewing as Qualitative Research: A Guide for Researchers in Education and the Social Sciences*. 5th ed. Teachers College Press, New York, 2019.
54. Weiss RS. *Learning from Strangers: The Art and Method of Qualitative Interview Studies*. Free Press, New York, 1994.
55. Van der Kolk B. *The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma*. Penguin Books, New York, 2014.
56. Ogden P, Minton K, Pain C. *Trauma and the Body: A Sensorimotor Approach to Psychotherapy*. W.W. Norton, Cop, London, 2006.
57. Bowlby J. *A Secure Base: Parent-Child Attachment and Healthy Human Development*. Basic Books, New York, 1988.
58. Young JE, Klosko JS, Weishaar ME. *Schema Therapy: A Practitioner's Guide*. Guilford Press, London, 2003.
59. Hellinger B, Gabriele Ten Hövel. *Acknowledging What Is Conversations with Bert Hellinger*. . Zeig, Tucker, Phoenix, AZ, 1999.
60. Frankl VE. *Man's Search for Meaning : An Introduction to Logotherapy*. Beacon Press, Boston, 1946.
61. White M, Epston D. *Narrative Means to Therapeutic Ends*. W.W. Norton & Company, London, 1990.
62. Turner V. *Ritual Process: Structure and Anti-Structure*. Routledge, London, 1969.
63. Van Gennep A. *Rites of Passage*. University of Chicago Press, Chicago, 1960.
64. Frank JD, Frank JB. *Persuasion and Healing : Comparative Study of Psychotherapy*. Johns Hopkins U.P, Baltimore, 1991.
65. Mahler MS, Pine F, Bergman A. *The Psychological Birth of the Human Infant Symbiosis and Individuation*. Basic Books, New York, 2008.
66. Bradshaw J. *Homecoming : Reclaiming and Championing Your Inner Child*. Bantam Books, New York, 1992.
67. Bowen M. *Family Therapy in Clinical Practice*. Rowman & Littlefield Publishers, Cop, Maryland, 1978.
68. Satir V. *Peoplemaking*. Souvenir Press, London, 1991.
69. Siegel DJ. *The Mindful Therapist: A Clinician's Guide to Mindsight and Neural Integration*. W.W. Norton & Co, New York, 2010.