

GROUP WORKBOOK

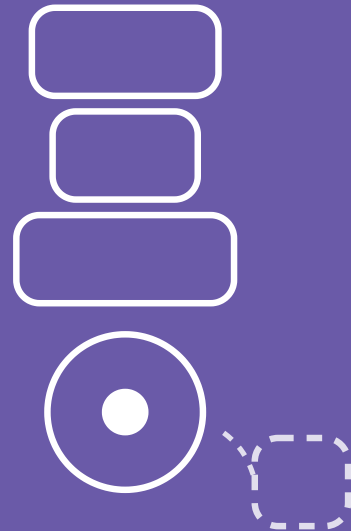
The Responsible One

For eldest daughters and parentified kids. Understand why you became the reliable one, what it cost you, and how to put some of it down, on your terms.

8 pages

Group workbook

Trauma informed



WHO THIS IS FOR

Eldest daughters, only children, and anyone who became a parent to their parents, siblings, or the family's feelings before they were ready.

START HERE, 60 SECONDS

Rest a hand on your chest. Ask: what am I holding for other people right now? Name one thing. Then name one thing that is truly mine to hold. Notice the difference.

UNDERSTAND

Parentification, explained

ATTACHMENT

And complex trauma

CULTURE

Duty, gender, and family

RECOGNIZE

Signs, myths, a trend check

TRY TODAY

Three practices

WORKSHEET

Then sources and next steps

Please read: this workbook is education. It is not a substitute for therapy or medical care, and it does not diagnose or treat any condition. You do not need to revisit painful memories on your own. If something feels like too much, stop.



Understand: what parentification is

UNDERSTAND

What parentification is

Parentification means a child takes on adult or parent-like roles: caring for siblings, managing a parent's emotions, handling money or paperwork, or keeping the peace. Researchers separate instrumental parentification (tasks and care) from emotional parentification (being a confidant or mediator). It is different from age appropriate chores.

Why eldest daughters

Families often hand the eldest daughter the caregiving role by default, especially when parents are stretched, ill, absent, or struggling. Gender expectations, cultural norms about duty, and being first in line all play a part. Sons, middle kids, and only children can carry this too. What matters is the load, not the label.

WHAT A CHILD NEEDS TO RECEIVE



WHEN THE CHILD BECOMES THE CAREGIVER



In a healthy family, care flows from parent to child. In parentification, it runs backward, and the child's needs go unmet.

ILLUSTRATION

Two kinds

Instrumental (tasks and care) and emotional (comfort and mediating), per Jurkovic (1997).

Not always harm

Helping at home can build skills. Harm rises when the load is heavy, unfair, and unseen.

Outcomes vary

Studies link heavy parentification to later stress and relationship strain, and results differ widely.

Both can be true. You can love your family, feel proud of how capable you are, and still grieve what you missed. Naming the cost is not blaming anyone. It is telling the whole truth.



Attachment: strategies you learned

Attachment theory (Bowlby, Ainsworth) describes how early caregiving shapes what you expect from closeness. When a child has to care for the caregiver, common strategies include hiding needs and relying only on yourself, or staying alert to others' moods and earning love by helping. These are adaptations, not defects.

Trauma and complex PTSD

For some people, parentification happened alongside neglect, chaos, addiction, mental illness, or abuse. Long lasting childhood stress can lead to complex PTSD (C-PTSD), described in the WHO's ICD-11. Not everyone who was parentified has C-PTSD, and only a qualified clinician can assess it.

FOUR COMMON PATTERNS (TENDENCIES, NOT DIAGNOSES)

PATTERN	HOW IT CAN LOOK IN THE RESPONSIBLE ONE
Secure	Can give and receive help. Rests without much guilt. Trusts that needs can be met.
Anxious	Over gives to keep love. Panics when someone is upset. Needs reassurance that never quite lands.
Avoidant	'I do not need anyone.' Independence feels like safety. Asking for help feels risky.
Fearful or disorganized	Wants closeness and fears it. Pulls in, then pulls away. Hot and cold patterns.

C-PTSD INCLUDES PTSD SIGNS PLUS THREE ONGOING DIFFICULTIES

PTSD signs

Re-experiencing, avoiding reminders, feeling on alert.

Emotion regulation

Big feelings, or shutting down and going numb.

Negative self view

Shame, feeling worthless, or feeling 'too much.'

Relationship strain

Hard to trust, stay close, or feel safe.

Fawn, fight, flight, freeze: For many responsible ones, fawning (pleasing and over helping) was the survival move that worked. It made sense then, and it can be updated now, at your own pace (Walker, 2013).

Patterns can shift. Attachment is not fixed. Safe relationships, including therapy, can build earned security over time. Trauma informed therapy can help. This workbook does not replace it.



Use these as prompts, not labels. Families vary widely inside every culture. Your therapist or facilitator should ask about your values, not assume them.

Duty, respect, and family first

Many cultures treat loyalty and respect for elders as core values: filial piety in East Asian traditions, familismo in Latino families, and related ideas across South Asian, Middle Eastern, African, and Pacific communities. Caring for family can bring pride and meaning. The question is not whether to care, but whether the load is fair and chosen.

Gender and the eldest daughter role

In many families the eldest daughter is expected to be a second parent, caregiver, and emotional center. Praise is often tied to being selfless, so rest can look like selfishness. Naming these expectations helps separate a cultural value from an unfair burden.

Immigrant and refugee families

Children may translate, handle bills and paperwork, or navigate schools and systems for their parents. Parents may be carrying migration stress or survival mode, so the responsibility can feel both necessary and loving. Your family's history can explain the load without making it yours forever.

Faith, community, and reputation

Communities may reward the reliable daughter with status, and read boundaries as disrespect or shame. Elders, faith leaders, and traditions can also be real sources of support. You can keep what nourishes you and still change what depletes you.

Both and. You can honor your culture and your limits. Boundaries can look like adjusting, not abandoning: fewer calls, shared tasks, clear asks, and time for yourself. Money, illness, disability, or a parent's addiction can also make caregiving a necessity. Your limits still count.

Ask yourself

- Which family or cultural values do I want to keep, and which load do I want to put down?
- Who decided what my role was, and when did I first feel it?
- What would honoring my family look like if it also included honoring me?



Recognize: signs, myths, trends

RECOGNIZE

COMMON SIGNS OF THE RESPONSIBLE ONE

BODY

- Always on, tense, on guard
- Tired but unable to rest
- Stomach or headache before family calls

THOUGHTS AND FEELINGS

- Guilt when you rest
- 'If I do not do it, no one will'
- Resentment, then shame about it

BEHAVIOR

- Overfunctioning at work and home
- Anticipating everyone's needs
- Hard to ask for or receive help

RELATIONSHIPS

- Feeling responsible for others' moods
- Choosing people who need fixing
- Lonely, even when needed

MYTH VS REALITY

MYTH

Being the responsible one means you are strong.

REALITY

It can also be a survival role. Real strength includes needing people.

MYTH

Resting is selfish.

REALITY

Rest is maintenance. Guilt about resting is learned, not proof you are doing wrong.

MYTH

Setting boundaries means abandoning your family.

REALITY

Boundaries change how you help, not whether you love.

TREND CHECK “Eldest daughter syndrome.”

WHAT IS TRUE

Many people recognize themselves in it. It names real, gendered expectations about caregiving and responsibility.

WHAT IS OVERSIMPLIFIED

It is not a diagnosis, and birth order alone does not predict this. It can affect any child, and it is only one piece of a larger story.

WHAT WE DO IN SESSION

We look at your role, family system, culture, attachment patterns, and any trauma together, then build choice into how you care.

Culture and context: Family loyalty can be a value and a burden at once. See page 4 for prompts that hold both.

Safety first: If a family member is violent, controlling, or unsafe, put your safety first and talk with a professional before making changes. If you have thoughts of suicide, call or text 988 now.



Try today: three practices

TRY TODAY

Before you start: closing your eyes, breath focus, and body scans can feel activating for some people. Every practice below works with eyes open. Skip anything that does not fit.

2 min

Whose Is This?

• • •

When to use it: You feel a tug to fix, rescue, or over explain.

1. Pause and feel your feet.
2. Ask: whose feeling or task is this?
3. Choose: mine, theirs, or ours.
4. If it is theirs, breathe out once before you act.

Too much?

Stop. Open your eyes, look around the room, and name 3 things you can see. Feel your feet. Reach out to someone you trust.

10 min

Rest Without Earning It

• • •

When to use it: Guilt shows up the moment you sit still.

1. Choose a rest: sit, lie down, or look out a window.
2. Set a timer for 10 minutes.
3. When guilt speaks, say: 'This is old training. I can rest anyway.'
4. Rate your guilt 0 to 10 before and after.

Too much?

Stop. Open your eyes, look around the room, and name 3 things you can see. Feel your feet. Reach out to someone you trust.

30 min

Draft One Boundary or Ask

• • •

When to use it: You are ready to shift one pattern.

1. Pick one recurring task, call, or expectation.
2. Write what you can offer and what you cannot.
3. Add one ask for help or sharing.
4. Try it once this week, and plan one comfort after.

Too much?

Stop. Open your eyes, look around the room, and name 3 things you can see. Feel your feet. Reach out to someone you trust.

Pick one for today: ☐ 2 minutes ☐ 10 minutes ☐ 30 minutes

Effort grows from one dot to three. Start small.

The Responsible One: pocket card

CUT OUT AND KEEP

PAUSE

Feel your feet.

ASK

Whose is this: mine, theirs, or ours?

OFFER

What can I give without losing myself?

REST

One small rest, on purpose.



My role inventory

List what you carry for your family. For each, mark whether you want to keep it, share it, or release it.

WHAT I CARRY	FOR WHOM	SINCE AGE	KEEP, SHARE, OR RELEASE?

Rest experiments

Once a week, try a rest that you have not earned. Rate your guilt before and after. You are collecting data, not grading yourself.

WEEK	REST I TRIED	GUILT BEFORE (0 TO 10)	GUILT AFTER (0 TO 10)	WHAT I NOTICED
Week 1				
Week 2				
Week 3				
Week 4				
Week 5				
Week 6				

Get curious

1. When did you first notice you were the one others counted on?
2. What did being 'the good one' earn you? What did it cost you?
3. Who took care of you, or who could have?
4. Which cultural or family values do you want to keep?
5. What might rest look like if guilt were not in charge?



Go deeper

SOURCES AND NEXT STEPS

KEEP THIS, THE SHORT VERSION

- Parentification is a role, not your personality, and roles can be updated.
- Rest is maintenance, not a reward for finishing.
- Culture and love can stay while the load changes.
- Attachment strategies once protected you. Safe relationships can shift them.

START HERE

Adult Children of Emotionally Immature Parents

Lindsay C. Gibson, PsyD (2015)

Validating and plain language.

www.lindsaygibsonpsyd.com

Set Boundaries, Find Peace

Nedra Glover Tawwab, LMFT (2021)

Practical boundary scripts.
nedratawwab.com

GO DEEPER

Complex PTSD: From Surviving to Thriving

Pete Walker, MA, MFT (2013)

The four F's and emotional flashbacks.

www.pete-walker.com

Attached

Amir Levine, MD, and Rachel Heller, MA (2010)

Adult attachment, made accessible.

www.attachedthebook.com

Burnout

Emily and Amelia Nagoski (2019)
Completing the stress cycle and resting.

www.burnoutbook.net

Break the Cycle

Mariel Buque, PhD (2024)
Intergenerational trauma.
www.drmariel.com

FOR THE RESEARCH MINDED

Lost Childhoods: The Plight of the Parentified Child

Jurkovic (1997), Brunner/Mazel

Instrumental and emotional parentification.

Attachment theory and family systems theory in parentification

Hooper (2007), The Family Journal, 15(3)

Complex PTSD (6B41)

World Health Organization, ICD-11 (2019)
icd.who.int

Trauma and Recovery

Herman (1992), Basic Books

Family obligation and the transition to young adulthood

Fuligni and Pedersen (2002), Developmental Psychology, 38(5)

Attachment and Loss; Patterns of Attachment

Bowlby (1969); Ainsworth et al. (1978)

What this looks like in the therapy room at SOULFLO

We work with your role, your family system, and your culture together. In IFS, we meet the responsible part with respect, not force. With EMDR, we build resources first and process only when you are ready. We never ask you to give up your family or your values.

Questions or ready to start?

soulflotherapy.com/contact

IF YOU NEED SUPPORT RIGHT NOW

988 Suicide and Crisis Lifeline: call or text 988 **Crisis Text Line:** text HOME to 741741

If you are in immediate danger, call 911.

This handout is education and does not replace therapy.