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## RESEARCH ARTICLE

## Wendy Syndrome as “Super Mother”: A Scale Development

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### Abstract

Wendy syndrome is a very common situation in the society. Wendy syndrome describes women who acted as mother to their husbands or people close to them. In order to develop the Wendy Syndrome Scale, data were collected from 666 women older than 18 years of age ( $M_{age} = 31.67$ ,  $SD_{age} = 10.8$ ). Three factors obtained as a result of EFA explain 49.56% of the variance relating to Wendy syndrome. Factor load values of the items are between .40 and .82. Three factors were called “self-sacrifice, dependency, gender role.” Model fit values obtained as a result of CFA were  $p = .00$ ,  $\chi^2/SD = 2.2$ ,  $RMSEA = .06$ ,  $GFI = .92$ ,  $AGFI = .90$ , and  $CFI = .91$  and the fit values of the model were found to be acceptable. According to second order CFA results, it was confirmed that a total score can be calculated from the scale. Item–total test correlations of the items in the scale were found to be between .33 and .70. Cronbach’s alpha coefficient was found as .82. It can be said that Wendy Syndrome Scale is a measurement instrument that has valid and reliable psychometric features in determining the level of symptoms that women present within the context of this syndrome.

**Keywords:** Career obstacles, fairy tales syndromes, gender role, parentification, super mother, Wendy, marital dynamic

### Introduction

Helping others, showing compassion, making sacrifices, or altruism includes acting for the good of other people. Most of the time, when people see someone in a difficult situation, they want to help and act in an altruistic way. The behavior of helping sometimes takes place with material rewards and sometimes with non-material rewards such as admiration, respect, commitment, and dependence. Acts of self-sacrifice, help or altruism which bind individuals together, develop cooperation and provide social support sometimes may cause individuals to overcompensate, to get stressed, to experience burnout, or to put themselves in danger.

While Whitehead (1981) stated that women were inclined to self-sacrifice due to their identities of mother and wife, Vyrastekova et al. (2014) stated that mothers chose to be more self-sacrificing than fathers. This situation can be a result of the gender roles the society imposes on women and men. In terms of evolutionary psychology, parental investment theory states that women invest more in children than men (Trivers, 1972). Therefore, making sacrifices for someone else, undertaking their responsibility and making too many compromises are more common in women. In most societies, women are exposed to messages about making sacrifices and taking responsibility from an early age. Gender roles are transferred to new generations through fairy tales (Akkaya, 2020). In fairy tales, one of these messages, mother image, beautiful woman image, and passive woman image are created through fairy tale heroes such as grandmothers, stepmothers, birth mothers, witches, fairies, and princesses. In one of these tales, the Peter Pan tale, the super mother image appears through the character Wendy. Under the influence of this fairy tale, it is evident that the area of the house where girls play is referred to as the “Wendy House” corner (Whyte, 1983).

When psychologist Dan Kiley defined Peter Pan syndrome in 1983, he also used the Wendy syndrome to describe women who act as mother to their husbands or people close to them (Kiley, 1984). Wendy is portrayed as a woman who does things that Peter Pan does not do for him to exist, takes on his responsibilities, and stands by him in J. M. Barrie’s fairy tale “Peter Pan.”

In the tale, Wendy sees Peter Pan as a playmate who could be her boyfriend; Peter Pan, on the other hand, sees Wendy as a mother figure. Peter Pan takes Wendy and her two siblings to Dreamland with the promise of never-ending excitement and eternal youth. Soon, Wendy finds herself living in a tree stump, babysitting lost children, and being forced to take on the role of mother by the man she wants to love (Kiley, 1984). It can be said that in the tale, Wendy also becomes a parent towards her siblings, other children, and her partner. Women with Wendy syndrome, who play the role of supermothers, devote themselves to their partners and children and can sacrifice things that are important to them. She both tries to please her partner and needs his approval. Out of fear of abandonment, she constantly shows interest in her partner and takes on more of her responsibilities than necessary (Quadrio, 1982). In Wendy syndrome, the woman is described as a mother and her role in life is to feed her “children.” There is a situation which depends on the need to satisfy someone else rooted in the fear of being abandoned and rejected and a constant desire to please everyone, especially the partner. Wendy, who can sacrifice the things that matter to her for the people she loves, needs the approval of others. She puts the preferences of others ahead of her own and feels unsuccessful when she cannot meet the needs of those close to her. She blames herself for things that go wrong in the lives of people she loves. According to Wendy, a woman should ignore the selfishness of her husband, she should excuse the man’s angry reactions, and she should

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not do anything without getting permission from her husband. Driven by perfectionism, Wendy feels guilty and puts up with the role of victim when something goes wrong, especially when it is about making others happy. For her, love is synonymous with love. She is very emotional and obedient. She avoids conflict and tries to make others happy by putting her happiness aside. While she has very little control over her life, she focuses on controlling the lives of others (Kiley, 1984).

It is seen that different concepts similar to Wendy syndrome are used in the literature, such as “super mother syndrome, forced mother syndrome, and modern mother syndrome.” Super mother syndrome, experienced by working women and especially mothers in the modern age, is one of the syndromes that hinder women’s careers. The most distinctive features of this syndrome are the excellence in career, meticulousness in carrying out household chores and order, and ambition to be number one in children’s education (Gunduz, 2017). Characteristics such as passivity, dependence, nurturing, and helpfulness, which are among the characteristics that constitute the traditional gender role of women (Bacacı Varoglu, 2007) point to the relationship of Wendy syndrome with traditional gender roles. Women cannot achieve their independence due to their upbringing based on gender based on the traditional family structure and are directed to act dependent on men. Women who have been raised in this direction since childhood do not develop a perception of independence (Yildirim, 2018). With the role of Super Mother, women can put obstacles in the way of their careers. In line with society’s expectations, beautiful, fit, and energetic women are defined from a sexist perspective. Women, on the other hand, strive to achieve superior success in terms of home and business life (Gunduz, 2017). In addition, girls are taught traditional gender roles in early childhood through “Wendy house” or house games (Curry & McEwen, 1989). From an early age, parents expect their children to contribute emotionally and financially to the family, and these expectations lead to the emergence of parentification behavior in children at an early age (Carkoglu, 2016). Considering the parenting and caregiving roles that society assigns to women, it becomes more understandable why Wendy syndrome is so common in society. There are too many examples of women who take too much responsibility for her children and her spouse, who do the homework of their children, who do all the household chores without asking for help and assume the role of a “good wife,” who forgive everyone or find their husband right in everything and gain approval and acceptance through exerting themselves. Marriages which involve an unfaithful and narcissist husband Peter Pan (see Kalkan et al., 2021 for more detail), and suffering and depressive wife Wendy are also common. Although Wendy suffers from her husband’s unfaithfulness and indifference, she prefers not to share her feelings and thoughts with her husband because she is afraid of losing him or driving him away. Unfortunately, women with Wendy syndrome raise children with Peter Pan syndrome.

The origin of this syndrome lies in the childhood and family of the individuals suffering from it. Because these individuals feel excluded and unprotected, they compensate for the lack of orientation and protection by taking on the role of parent in childhood. Unlike Peter Pan syndrome, Wendy syndrome affects women more than men. The reason for this may be cultural and educational factors. In addition to emotional experiences and educational patterns of childhood, there are also other factors contributing to the development of this disorder. Personality traits, low self-esteem, fear of rejection, abandonment, and a search for authority for social acceptance can be listed among these factors developing in childhood (Ulloa, 2021).

When the past lives of women with Wendy syndrome are analyzed, it can be seen that their fathers are not interested in the family (e.g., “always out with his male friends,” “always working,” etc.). As the “super mother,” the mother of Wendy is overly concerned with her

family and over protective most of the time; she protects her children from the “dangers” of the outside world or from the effects of the “bad” father. Wendy’s mother is not only a strong mother figure, she is also known as both hostile and critical and she represents a source of conflict in the ongoing life of Wendy. Wendy believes that she should stick to her marriage no matter what and that she cannot find another husband and certainly a man as exciting as “Peter.” Wendy suffers, she is exposed to bullying at home and she maintains her safe role as “little mom.” In fact, she is scared to leave the role of “suffering little mom” because this will expose her to the “dangers” of a real adult relationship (Quadrio, 1982).

It is seen that Wendy, who is afraid of being abandoned in her relationship and constantly seeks approval, has an insecure attachment style, and becomes parentified, and does not gain autonomy. So it is possible for Wendy syndrome to result in sadness and loneliness, depression and anxiety, relationship problems, burnout and discontentment (Burks, 2020). But, most of the time, women with Wendy syndrome do not feel like part of a problem and are not aware of this. Intervention strategies that strengthen the individual’s self-esteem and develop assertiveness should be determined and attempts should be made to change the individual’s negative, unrealistic or irrational thoughts about self and especially to change the thought patterns related to self-worth, abandonment, and guilt. On the other hand, it is also important to present a psychological help that is centered on not only the woman with Wendy syndrome, but also her spouse or family.

Planning the process of psychological help requires determining the level of the women’s Wendy syndrome. Therefore, there is a need to develop a measurement tool to determine the level of Wendy syndrome in women, to find out the variables that may be associated with Wendy syndrome, and to plan psychological interventions. In this context, it is considered important to develop Wendy Syndrome Scale (WSS), original for both our country and for international literature. With this purpose, WSS was developed and its validity and reliability studies were conducted. In this study, the answer to the question has been sought as “What is the factor structure of the WSS?”

## Methods

This study aimed to develop a scale to determine the level of Wendy syndrome and to conduct validity and reliability analyses. In this context, the research is a scale development study. Information about the study group and the steps followed in the development process of the scale are given below.

### Participants

This study was carried out in 2022 with a total of 666 women older than 18 years of age who were reached through convenience sampling method. Data were collected from two groups during the scale development process: Exploratory Factor Analysis (EFA) was performed on the data collected from 340 women in the first group, while Confirmatory Factor Analysis (CFA) was performed on the data collected from 326 women in the second group. Table 1 shows the characteristics of all participants. While 51.3% ( $n=342$ ) of all women who participated in the study ( $n=666$ ) did not have a relationship, 48.7% ( $n=324$ ) had a relationship. The ages of women were between 18 and 72 and mean age was 31.67 ( $SD=10.8$ ).

### Scale Development Process

In the first stage of developing the WSS, the related literature about Wendy syndrome was reviewed and an item pool including the characteristics of Wendy syndrome was prepared. The construction of the WSS took into account Kiley’s book, *The Wendy Dilemma* (Kiley, 1984). In line with the examinations, a pool of 33 items was created.

Table 1.  
Characteristics of the Participants

Variables	First Study Group (n=340)	Second Study Group (n=326)
Age		
Mean (SD); range	32.77 (11.6); 18–72	30.52 (9.73); 18–70
Relationship status		
In a relationship	51.5%	45.7%
Not in a relationship	48.5%	54.3%
Parents' relationship		
Together	90.6%	91.1%
Separated	9.4%	8.9%

Expert opinions on the subject and scope of the 33 expressions in the item pool were taken from two faculty members who are experts in the field of Psychological Counselling and Guidance. Expert opinion relating to the meaning and grammar in items in the scale was taken from a faculty member who is an expert in the field of the Turkish language. Corrections were made in line with the feedback, and a 5 Likert type trial scale with 33 items was created.

In the second stage, a 33-item trial scale was applied to 340 women and EFA was conducted on the data. A 16-item scale obtained as a result of EFA was applied to 326 different women in the third stage, and CFA was performed on the data obtained. Reliability of the scale was examined with item total test correlations and Cronbach's alpha coefficient.

#### Data Collection and Analysis

In the development of WSS, first ethics committee approval was obtained. Individuals older than 18 years of age were informed about the research and their informed consent was obtained. Then the data were collected online from volunteers who participated in the study voluntarily through Google Docs between June and December in 2022.

Before testing the construct validity of WSS, multivariate normality tests were conducted. Since the data were not normally distributed, multidirectional outliers were determined with Mahalanobis distance; the data with a value of  $>.001$  were excluded from the analysis (Tabachnick & Fidell, 2020). Thus, 9 data points with outliers were excluded in the data collected for Exploratory Factor Analysis (EFA) and 17 data points with outliers were excluded in the data collected for Confirmatory Factor Analysis (CFA). In addition, kurtosis and skewness values of the data were found to be between  $-1.5$  and  $+1.5$ , and the data were found to show a normal distribution. The Kaiser–Meyer–Olkin (KMO) sample adequacy coefficient was calculated as  $.84$ , and the Bartlett sphericity test  $\chi^2$  value was calculated as  $2207.66$  ( $p < .001$ ). Since Bartlett test was significant and the KMO value was higher than  $.60$ , the data were found to be suitable for factor analysis (Buyukozturk, 2020). Having at least between five times and ten times as many participants as the number of items in the scale seems to be sufficient for factor analysis (Bryman & Cramer, 2011; Ho, 2006). In addition, Tabachnick and Fidell (2020) stated that it is appropriate for the sample number to be at least 300 in order to obtain a reliable factor structure in factor analysis. Therefore, it was decided that the sample size was sufficient, and the data were suitable for factor analysis.

EFA was conducted to find out the factor structure of the scale, and CFA was conducted to test the model that was created. Finally, the reliability of the scale was analyzed with item–total test correlations and Cronbach's alpha coefficient, split-half internal consistency coefficient, Guttman and Spearman–Brown coefficients. EFA, item analysis, and reliability analyzes were conducted with The Statistical Package for Social Sciences version 22.0 software (IBM

Corp.; Armonk, NY, USA), while CFA was conducted with AMOS 20.0 program.

#### Research Ethics

This research was approved by Ondokuz Mayıs University Social and Human Sciences Ethics Committee (Approval No: 2022-129, Date: 25.02.2022). All ethical rules were followed during the research. Written informed consent was obtained from all participants who participated in this study.

#### Results

In this section, EFA and CFA results of the developed scale, followed by reliability analyses and item statistics are presented respectively.

#### Exploratory Factor Analysis (EFA)

Data were collected from 340 women to find out the factor structure of the trial form of Wendy syndrome which consisted of 33 items. Nine outliers were excluded from the data obtained and EFA was conducted on 333 data. Principal axis factor analysis was applied since it is more reliable in determining the factors (Field, 2013) and eigenvalues were analyzed. Scree plot was given in Figure 1.

Eigenvalues of the factors were found to be 4.87, 2.09, 1.97, and 1.07. Components which have an eigenvalue of  $>1$  can be considered as factors (Cattell, 1966); however, there may be too many factors in this case. Therefore, the number of factors can be determined by analyzing the scree plot (Zwick & Velicer, 1986). When both the scree plot (Figure 1) and the related literature were taken into account, it was decided that the scale was more suitable for a three-structure factor. Factor loads were given in Table 2.

In the resulting three-factor structure (Table 2), the items with a factor load of  $<.40$  and those with a factor load value of  $<.10$  in the sub-dimensions were excluded. It was found that the remaining 16 factors had high values in a single factor and the factor load values were found to be high. Eigenvalues of the three factors in the scale were 4.40, 2.03, and 1.48, respectively. These three factors explain 49.56% of the variance relating to Wendy syndrome. The first factor explains 27.54% of the variance, while the second factor explains 12.71% and the third factor explains 9.29%. Factor load values of the items are between  $.40$  and  $.82$ .

After the factors were determined, they were named by taking the expressions in the related factors and also the related literature into

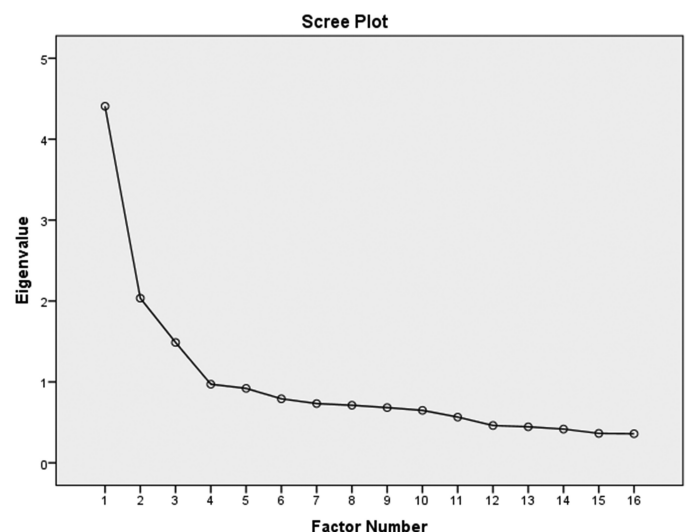


Figure 1.  
Scree Plot.

Table 2.  
Factor Load Values and Item–Total Test Correlations of the Items

Item Number	Factor 1	Factor 2	Factor 3	Item Total Test Correlation
1	.80			.60*
2	.73			.44*
4	.61			.64*
10	.65			.70*
11	.52			.47*
12	.62			.69*
5		.60		.56*
6		.40		.47*
8		.69		.46*
14		.65		.68*
16		.82		.65*
3			.60	.33*
7			.72	.37*
9			.61	.38*
13			.72	.33*
15			.68	.44*
Eigenvalue	4.40	2.03	1.48	Total variance
Variance	27.54%	12.71%	9.29%	49.56%

Note: \* $p < .001$ .

account. The first factor was called “self-sacrifice” (items 1, 2, 4, 10, 11, 12), the second factor was called “dependency/approval” (items 5, 6, 8, 14, 16) and the third factor was called “gender role” (items 3, 7, 9, 13, 15). There are no reversely coded items in the scale. The highest possible score of the scale is 80, while the lowest possible score is 16. A high total score means a high level of Wendy syndrome.

**Confirmatory Factor Analysis**

The 16-item scale was applied to 326 women to test the model obtained as a result of EFA by using CFA (Cokluk et al., 2018). The data with eigenvalues were excluded and CFA was conducted with 309 data.  $\chi^2$ , RMSEA, GFI, AGFI, and CFI values, which are commonly used in goodness of fit index (Sumer, 2000) were interpreted. A  $\chi^2/SD$  value of  $<5$  (Kline, 2005); a  $p$  value of  $<.05$  (Cokluk et al., 2018); a RMSEA value of  $<.10$  (Tabachnick & Fidell, 2020); a CFI value of  $>.90$ ; and GFI and AGFI values of  $>.90$  (Hooper et al., 2008) indicate that the model data fit is acceptable. Three-factor model of the scale is shown in Figure 2.

As a result of CFA, goodness of fit indices were found as  $p = .00$ ,  $\chi^2/SD = 2.5$ ,  $RMSEA = .07$ ,  $GFI = .91$ ,  $AGFI = .87$ , and  $CFI = .88$ . It was found that AGFI and CFI values were not acceptable. When the fit values of the model are not within the range of acceptable values as a result of CFA, modifications can be made by associating the error terms of the items of the same factor (Cokluk et al., 2018). It was found that error terms related to items 1 and 2 were associated. Item 1 is “I always try to make others happy” and item 2 is “I like to take a lot of responsibility in my close relationships”. These items are included in the “Self-sacrifice” factor and the statements in these items appear to be quite similar to each other. It can be stated that since these items serve to measure a similar structure, the error terms are related to each other. The modification made by associating the error terms of items 1 and 2 appears to be compatible with the theoretical structure. Therefore, one modification was made in the model established for WSS. Model fit values obtained as a result of these were  $p = .00$ ,  $\chi^2/SD = 2.2$ ,  $RMSEA = .06$ ,  $GFI = .92$ ,  $AGFI = .90$ , and  $CFI = .91$ , and the fit values of the model were found to be acceptable. These results show that the three-factor model of WSS is confirmed (Figure 2). Following this, a second-order CFA was conducted, and the second-order CFA model of the scale is shown in Figure 3.

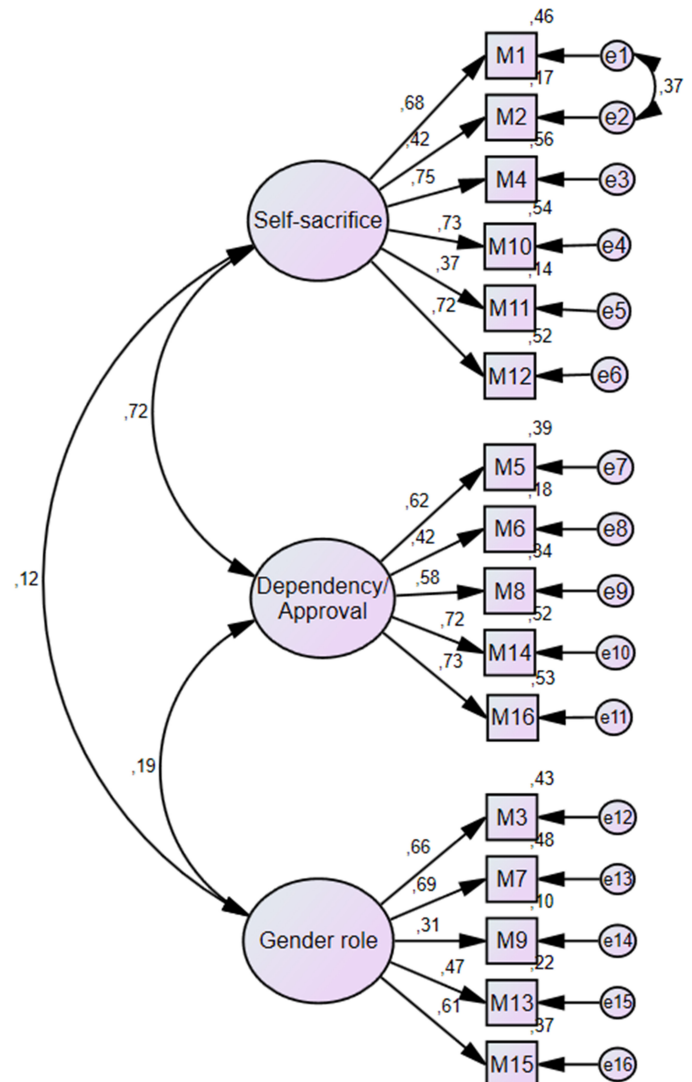


Figure 2.  
Three-Factor Model of the Scale

Second-order CFA is conducted to use the total score obtained from the overall scale. According to second-order CFA results, fit values of the model (Figure 3) were found as  $p = .00$ ,  $\chi^2/SD = 2.21$ ,  $RMSEA = .063$ ,  $GFI = .91$ ,  $AGFI = .90$ , and  $CFI = .90$ . In line with these results, it was confirmed that a total score can be calculated from the scale.

**Results Regarding the Reliability of the Scale**

Reliability of the scale was analyzed with item–total test correlations and Cronbach’s alpha internal consistency coefficient. Item–total test correlations of the items in the scale were found to be between .33 and .70 (Table 2). It can be seen that item–total test correlations are higher than .30 and their discrimination is sufficient (Buyukozturk et al., 2021).

Cronbach’s alpha coefficients (Table 3) were found as .80 for “self-sacrifice,” as .73 for “dependency/approval,” and as .70 for “gender role.” Cronbach’s alpha coefficient of the total scale was found as .82. After the reliability coefficients of the whole scale were calculated, the internal consistency reliability of the scale was also calculated with the split-half method. The Cronbach’s alpha coefficient of 8 items in the first half was .70, and the Cronbach’s alpha coefficient of 8 items in the second half was .72. It can be said that the internal consistency coefficient values of the two groups formed with the split-half method are close to each other and very good. With this



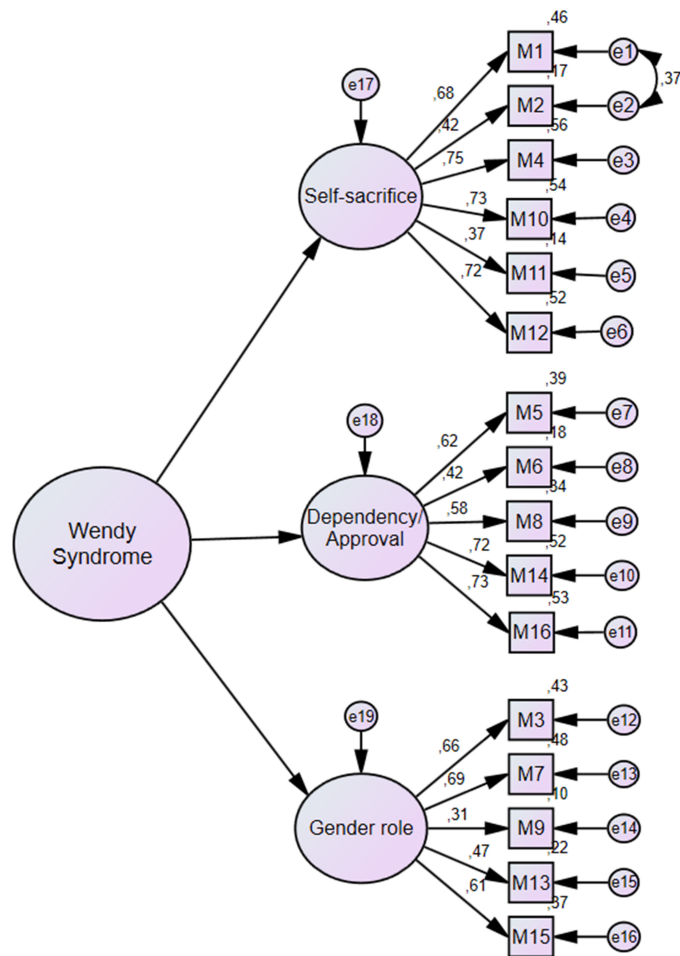


Figure 3. Second-Order CFA Model of the Scale.

method, Guttman and Spearman–Brown coefficients were found to be .85. According to these results, it can be said that WSS has a sufficient level of reliability.

**Correlations Between the Factors**

Correlations between the total score from the scale and the scores from the factors were calculated with Pearson Product-Moment correlation analysis, and results were given in Table 3.

As shown in Table 3, correlation coefficients between the total score from WSS and “self-sacrifice, dependency/approval, and gender role” factors were found as .85, .81, and .52, respectively ( $p < .001$ ). Accordingly, each of the sub-dimensions has a strong association with the total score of Wendy Scale.

**Discussion, Conclusion, and Recommendations**

Today, when women are starting to move away from their traditional roles, most women try to do housework and motherhood in the

best way possible, even if they are working. Motherhood and parenting roles continue to predominate for women who try to juggle many roles. Women who try to balance career and family while also caring for family members inevitably become vulnerable to super mother syndrome. Almost all working mothers are victims of “super mother syndrome,” a psychological condition that causes physical and emotional pain (Srivastava & Singh, 2019). Most of the studies on super mother syndrome were conducted on women who were divorced or whose spouses died (Mabrey, 2020; Nuralita, 2021; Sukmana & Hanami, 2023). However, today, as married women try to be super mothers, it is observed that Wendy syndrome is quite common in society. There are too many examples of women who take too much responsibility for her children and her spouse and gain approval and acceptance through exerting themselves. Most of the time, women with Wendy syndrome do not feel like part of a problem and are not aware of this. Intervention strategies that strengthen the women’s self-esteem should be developed to change the thought patterns related to self-worth, abandonment, and guilt. Planning the process of psychological help requires determining the level of the women’s Wendy syndrome.

One significant gap in the literature was the absence of a measurement method to assess Wendy syndrome in women. A useful scale with good validity and reliability was sought to measure Wendy syndrome in light of this deficit. The construction of the WSS took into account Kiley’s book, *The Wendy Dilemma* (Kiley, 1984). In line with the examinations, a pool of 33 items was created, and expert opinion relating to the meaning and grammar in items in the scale was taken. Data were collected from two different study groups for the validity and reliability analysis of the scale. As a result of the EFA conducted in the first study group, a three-factor structure with 16 items was obtained. The first factor called “self-sacrifice” includes expressions such as “I prioritize others’ needs over mine”; the second factor called “dependency/approval” includes expressions such as “others’ approval is important to me”; the third factor called “gender role” includes expressions such as, “A woman should not do anything without taking the permission of her husband.” WSS consists of three factors explaining 49.56% of the variance regarding Wendy syndrome. As a result of the CFA, one modification was made in the model established for WSS, which is compatible with the theoretical structure, and fit index values of this three-factor model were found to be within acceptable limits. A total score can be calculated in WSS, while scores from each factor can also be calculated separately. Item–total test correlations of the items in the scale were found to be between .33 and .70, and the Cronbach’s alpha coefficient of the total scale was found as .82. The internal consistency reliability of the scale was also calculated with the split-half method. The coefficient in the first half was .70, and the coefficient in the second half was .72. Guttman and Spearman–Brown coefficients were found to be .85. As a result, it can be said that WSS is a measurement instrument that has valid and reliable psychometric features in determining the level of symptoms that women present within the context of this syndrome. When both national and international literature were reviewed, no measurement instruments were found to determine the level of Wendy syndrome. Therefore, this study will fill the gap in this field and contribute to literature.

Different concepts similar to Wendy syndrome are used in the literature, such as “super mother syndrome, forced mother syndrome, modern mother syndrome.” In addition, concepts in the literature such as “parentification, little parent and overburdened children” also emphasize parenting-motherhood roles. It seems that these concepts point to similar characteristics with Wendy syndrome. For example, similar to Wendy syndrome, children who become parentified also undertake domestic responsibilities and take care of family members (Champion et al., 2009), sacrificing their own needs (Castro et al.,

Table 3. Correlation Coefficients Between the Factors

	1	2	3	4	Cronbach’s Alpha
Total Wendy syndrome (1)	1				.82
Self-sacrifice (2)	.85*	1			.79
Dependency/approval (3)	.81*	.49*	1		.71
Gender role (4)	.52*	.23*	.24*	1	.70

Note: \* $p < .001$ .

2004). These women cannot gain autonomy and cannot differentiate from their families (Hooper, 2007; Jankowski et al., 2013; Karatas, 2020; Lee & Kim, 2019; Ozbiler, 2022). The low level of differentiation of these women from their families increases the need for approval (Degirmenci & Demirci, 2019) and the perception of perfectionism and control (Koyden, 2015). Additionally, they may experience indecision between their family's wishes and their own wishes, and this may negatively affect their lives (Turk, 2019). No matter how successful these children are in adulthood, they continue to feel inadequate (Castro et al., 2004). Parentification causes depression (Jankowski et al., 2013; Burton et al., 2018; Karatas, 2020; Zencir, 2018), anxiety (Karatas, 2020) and somatization (Schier et al., 2015) in the individual. All these mentioned parentification features and effects are quite consistent with Wendy syndrome. For example, Wendy syndrome also causes depression, anxiety, and burnout in women (Burks, 2020). This syndrome, which is generally seen in hard-working, meticulous and perfectionist women, brings with it many psychosomatic problems (Besser et al., 2010). However, this syndrome should not be labeled as a medically treatable disease. It would be more accurate to consider this syndrome as a result of unrealistic expectations and lifestyle decisions (Srivastava & Singh, 2019).

In conclusion, the WSS, whose validity and reliability have been established, can be used by practitioners and researchers for a variety of applications. The WSS, whose validity and reliability have been established, can be used by practitioners and researchers for a variety of applications. Research can be done to identify Wendy syndrome in women and the factors associated with the syndrome. Additionally, studies can be conducted to examine the impact of Wendy Syndrome, which is stated to be frequently encountered in working women, on women's career lives. By identifying women with high Wendy syndrome through the scale, psycho-education programs can then be developed to reduce Wendy syndrome, and the success of these programs can be assessed. It is thought to provide information especially for interventions in the field of marriage and family psychological counseling.

This research has several limitations. Mostly women living in the city center and having a high level of education participated in the research. For this reason, it can be said that a sample that would better reflect the general society could not be reached. It is debatable whether the WSS is a valid and reliable measurement tool for measuring Wendy syndrome in women with low education levels and living in rural areas. Validity and reliability studies can be conducted by collecting data from a women sample that better reflects the general society.

**Ethics Committee Approval:** Ethics committee approval was received for this study from the ethics committee of Ondokuz Mayıs University (Approval No: 2022-129, Date: 25.02.2022).

**Informed Consent:** Written informed consent was obtained from all participants who participated in this study.

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## References

- Akkaya, B. (2020). Sindirella kompleksi. N. Cemaloğlu (Ed.), *Sendromların eğitim ve yönetime yansımaları: Mitolojiden kurama içinde* (ss. 79–102). Pegem Akademi.
- Bacacı Varoğlu, D. (2007). Örgütsel yaşamda cinsiyet rolleri. In S. Güney (Ed.), *Yönetim ve organizasyon* (ss. 398–427). Nobel Yayıncılık.
- Besser, A., Flett, G. L., & Hewitt, P. L. (2010). Silencing the self and personality vulnerabilities associated with depression. In D. Jack & A. Ali (Eds.), *Silencing the self across cultures: Depression and gender in the social world* (pp. 285–312). Oxford University Press.
- Bryman, A., & Cramer, D. (2011). *Quantitative data analysis with IBM SPSS 17, 18 and 19*. Routledge.
- Burks, D. B. (2020). *Wendy's syndrome: People who need the approval of others*. Retrieved from <https://virtualpsychcentre.com/wendys-syndrome-people-who-need-the-approval-of-others/>
- Burton, S., Hooper, L. M., Tomek, S., Cauley, B., Washington, A., & Pössel, P. (2018). The mediating effects of parentification on the relation between parenting behavior and well-being and depressive symptoms in early adolescents. *Journal of Child and Family Studies*, 27(12), 4044–4059. [CrossRef]
- Buyukozturk, S. (2020). *Sosyal bilimler için veri analizi el kitabı* (27. baskı). Pegem Yayıncılık.
- Buyukozturk, S., Kilic-Cakmak, E., Akgun, O. E., Karadeniz, S., & Demirel, F. (2021). *Bilimsel araştırma yöntemleri* (31. Baskı). Pegem Yay.
- Carkoğlu, A. (2016). *Türkiye'de toplumsal cinsiyet rollerinin ve kadının toplumdaki yerinin kamuoyundaki algısı araştırması*. Kadir Has University, Center for Gender and Women's Studies. <https://gender.khas.edu.tr/sites/gender.khas.edu.tr/files/inline-files/TTCKAA2020.pdf>
- Castro, D. M., Jones, R. A., & Mirsalimi, H. (2004). Parentification and the impostor phenomenon: An empirical investigation. *American Journal of Family Therapy*, 32(3), 205–216. [CrossRef]
- Cattell, R. B. (1966). The scree test for the number of factors. *Multivariate Behavioral Research*, 1(2), 245–276. [CrossRef]
- Champion, J. E., Jaser, S. S., Reeslund, K. L., Simmons, L., Potts, J. E., Shears, A. R., & Compas, B. E. (2009). Caretaking behaviors by adolescent children of mothers with and without a history of depression. *Journal of Family Psychology*, 23(2), 156–166. [CrossRef]
- Cokluk, O., Sekercioglu, G., & Buyukozturk, S. (2018). *Sosyal bilimler için çok değişkenli istatistik: SPSS ve LISREL uygulamaları* (5. Baskı). Pegem Akademi.
- Curry, C. A., & McEwen, A. (1989). The 'Wendy' House syndrome: A teenage version. *Research in Education*, 41(1), 53–60. [CrossRef]
- Degirmenci, E., & Demirli, C. (2019). *Çekirdek veya geniş ailede yetişen bireylerde sosyal onay ihtiyacı ile benliğin farklılaşması arasındaki ilişkinin incelenmesi* (Unpublished Master Thesis). İstanbul Ticaret University.
- Field, A. P. (2013). *Discovering statistics using IBM SPSS Statistics* (4th. Ed). Sage.
- Gunduz, S. (2017). Kariyer basamaklarında kadının düşmanı olarak kendisi: Süper anne sendromu, görünmez kadın sendromu ve Külkedisi sendromu. *Karadeniz Uluslararası Bilimsel Dergi*, (35), 84–94. <https://dergipark.org.tr/en/download/article-file/346213>
- Ho, R. (2006). *Handbook of univariate and multivariate data analysis and interpretation with SPSS*. Taylor & Francis Group.
- Hooper, D., Coughlan, J., & Mullen, M. R. (2008). Structural equation modeling: Guidelines for determining model fit. *Electronic Journal of Business Research Methods*, 6(1), 53–60. <https://academic-publishing.org/index.php/ejbrm/article/view/1224/1187>
- Hooper, L. M. (2007). Expanding the discussion regarding parentification and its varied outcomes: Implications for mental health research and practice. *Journal of Mental Health Counseling*, 29(4), 322–337. [CrossRef]
- Jankowski, P. J., Hooper, L. M., Sandage, S. J., & Hannah, N. J. (2013). Parentification and mental health symptoms: Mediator effects of perceived unfairness and differentiation of self. *Journal of Family Therapy*, 35(1), 43–65. [CrossRef]
- Kalkan, M., Batık, M. V., Kaya, L., & Turan, M. (2021). Peter Pan syndrome "men who don't grow": Developing a scale. *Men and Masculinities*, 24(2), 245–257. [CrossRef]
- Karatas, A. (2020). *Ebeveynleşme ile depresyon, kaygı, stres arasındaki ilişkide benliğin ayrışması ve sosyal sorun çözme becerisinin aracı rollerinin incelenmesi* (Unpublished Master Thesis). Mersin University.

- Kiley, D. (1984). The Wendy dilemma. *Do you mother your man?* Arrow Books.
- Kline, R. B. (2005). *Principles and practice of structural equation modeling* (2nd ed). Guilford.
- Koyden, D. (2015). *Ebeveynleşme olgusunun depresyon, kaygı, öfke ve obsesif inanis biçimleriyle ilişkisinin incelenmesi* (Unpublished Master Thesis). Hacettepe University.
- Lee, J. S., & Kim, J. M. (2019). Comparison of the effects of children's parentification on their internalized problems between multicultural and monocultural families: The mediating effects of internalized shame and self-differentiation. *Korean Journal of Child Studies*, 40(2), 39–56. [CrossRef]
- Mabrey, E. (2020). *From single mom to supermom: A transformative journey* (Master Thesis). Ball State University. <https://www.proquest.com/docview/2444375801?%20Theses&fromopenview=true&pq-origsite=gscholar&sourcetype=Dissertations%20>
- Nuralita, L. (2021). *Not all heroes wear capes—work life balance super mom (Work-life balance pada perempuan single parent di Terban Yogyakarta)* (Master Thesis). University of Islam Indonesia. <https://dspace.uui.ac.id/handle/123456789/43919>
- Ozbiler, S. (2022). *Annelerin ebeveynleşme geçmişi ile kız çocuklarının ebeveynleşmesi: Benliğin ayrımlaşmasının moderatör rolü*. <https://www.researchgate.net/publication/36047638>
- Quadrio, C. (1982). The Peter Pan and Wendy syndrome: A marital dynamic. *Australian and New Zealand Journal of Psychiatry*, 16(2), 23–28. [CrossRef]
- Schier, K., Herke, M., Nickel, R., Egle, U. T., & Hardt, J. (2015). Long-term sequelae of emotional parentification: A cross-validation study using sequences of regressions. *Journal of Child and Family Studies*, 24(5), 1307–1321. [CrossRef]
- Srivastava, M., & Singh, V. (2019). Supermom Syndrome: Challenges faced by working women. *Indian Journal of Preventive and Social Medicine*, 50(1). <https://pesquisa.bvsalud.org/portal/resource/pt/sea-186142>
- Sukmana, H. F., & Hanami, Y. (2023). Solo supermom: *Psychological well-being pada ibu tunggal yang kehilangan pasangan meninggal dunia*. *Psyche 165 Journal*, 16(4), 264–271. [CrossRef]
- Sumer, N. (2000). Yapısal eşitlik modelleri: Temel kavramlar ve örnek uygulamalar. *Türk psikoloji Yazıları*, 3(6), 49–74. <https://psycnet.apa.org/record/2006-04302-005>
- Tabachnick, B. G., & Fidell, L. S. (2020). *Using multivariate statistics / Çok değişkenli istatistiklerin kullanımı* (6.baskı, M. Baloglu Ed., Çev). Nobel Yayıncılık.
- Trivers, R. L. (1972). Parental investment and sexual selection. In B. Campbell (Ed.). *Sexual selection and the descent of Man* (ss. 136–179). Aldine.
- Türk, E. (2019). *Beliren yetişkinlerde toplumsal cinsiyet rollerine yönelik tutumun, benlik kurgusunun ve benliğin ayrımlaşmasının eş seçme stratejilerini yordamadaki rolü* (Unpublished Master Thesis). Muğla Sıtkı Koçman University.
- Ulloa, G. (2021). *Wendy's syndrome: The disorder that affects many women who felt excluded as children from health*. <https://newsbeezzer.com/chilean-g/wendys-syndrome-the-disorder-that-affects-many-women-who-felt-excluded-as-children-from-health/>
- Vyrastekova, J., Huisman, J., Mosh, I., & Smits, J. (2014). Mothers more altruistic than fathers, but only when bearing responsibility alone: Evidence from parental choice experiments in Tanzania. *PLOS ONE*, 9(6), e99952. [CrossRef]
- Whitehead, A. (1981). "I'm hungry mum": The politics of domestic budgeting. In K. Young, C. Wolkowitz & R. McCullagh (Eds.). *Of marriage and the market* (pp. 88–111). CSE Books.
- Whyte, J. (1983). *Beyond the Wendy house: Sex role stereotyping in primary schools*. Longman, Schools Council Publications.
- Yıldırım, S. (2018). Sindrella kompleksi: Çağdaş kadında bağımsızlık korkusu. *Anasay 3 aylık Ulusal Hakemli- Süreli dergi*, 2(6), 111–115. <https://dergipark.org.tr/en/download/article-file/626720>
- Zencir, T. (2018). *Çocuklukta ebeveynleştirilme, evlilik doyumu ve depresyon* (Unpublished Master Thesis). Hacettepe University.
- Zwick, W. R., & Velicer, W. F. (1986). Comparison of five rules for determining the number of components to retain. *Psychological Bulletin*, 99(3), 432–442. [CrossRef]