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## Study to Measure Magnitude of Problems of Alcohol Abuse among Head of the Families in Bannur Grama Panchayat

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**Abstract:** *Alcoholism is a disorder affecting the family. There are physical, psychological, economic and social programme for the family members of a person who abuses alcohol. This is an exploratory study done at Bannur Grama Panchayat in Puttur Taluk, Dakshina Kannada District, Karnataka, among families having a member with alcohol abuse. Lack of awareness about the ill effects of alcohol, poor motivation to give up alcoholism, community encouragement for drinking are causative factors of the problem. Study suggests active social work intervention to prevent the family problems related to alcoholism.*

**Key Words:** *Alcohol Abuse, Co-dependency of the Family Members, Awareness Programme.*

### Introduction

Alcoholism is known as a family disease. Alcoholics may have young, teenage, or grown-up children; they have wives or husbands; they have brothers or sisters; they have parents or other relatives. An alcoholic can totally disrupt family life and cause harmful effects that can last for a lifetime. According to U. S. Department of Health and Human Services and SAMHSA's (Substance Abuse and Mental Health Services Administration) National Clearinghouse for Alcohol and Drug Information, seventy six million American adults have been exposed to alcoholism in the family. Alcoholism is responsible for more family problems than any other single cause.

Alcohol Use Disorders come in two general forms, or levels: Alcohol abuse and alcohol dependence. Alcohol abuse refers to a problem pattern where the drinking interferes with work, school, or home life, as well as where the drinking is hazardous, such as in driving an automobile or operating machinery. Or, the problem may generate difficulties with the

law, with the spouse or family, or in the social realm—such as getting into fights.

Alcohol dependence can include any or all of the above, but it is even more serious. The person may be unable to stop or control the drinking, even after trying. There may be “tolerance” (having to drink more and more to get the same effect), or “withdrawal” (having physical symptoms when drinking is stopped or decreased).

Alcoholism does not have uniform effects on all families. The levels of dysfunction and resiliency of the non-alcoholic adults are important factors in effects on children in the family. Children of untreated alcoholics score lower on measures of family cohesion, intellectual-cultural orientation, active-recreational orientation, and independence. They have higher levels of conflict within the family, and many experience other family members as distant and non-communicative. In families with untreated alcoholics, the cumulative effect of the family dysfunction may affect the children’s ability to grow in developmentally healthy ways.

## **Review of Literature**

### **Alcoholism and the Family**

Alcoholism has two features which make it a uniquely family-related issue and concern. In the first place, it appears alcoholism has a strong genetic component and susceptibility can be passed down through the generations. Secondly, alcoholism affects the family first, and perhaps, the most of all relationships.

### **Alcoholism is a Family Problem**

Evidence shows that family history of alcoholism is a risk factor. Several studies have found that persons with an alcoholic parent are much more likely to develop a dependency on alcohol. Acknowledging an increased risk like this early in life can help stem potential problems with alcohol later in life.

Research scientists at the Molecular Neurobiology Branch of the National Institute on Drug Abuse carried out a comprehensive analysis of the human genome. The study was conducted in 2006 and was the first to ever consider how alcoholism and genes correlate. It had been a well-established fact that alcoholism runs in families, but linking alcoholism to specific genetic factors is promising for developing future treatments.

However, finding a link between genes and alcoholism does not mean that addiction is inevitable for those with a genetic predisposition. Addictive genes indicate a higher risk for developing alcoholism, but this can actually help a person avoid succumbing to alcoholism later in life. Likewise, knowing that their dependence on alcohol is due at least in part to genetics can give some alcoholics hope.

### **Alcohol Addiction Affects Families**

Alcoholism can also ruin the lives of family members. Alcoholics have difficulty taking an objective view on life, and they may not realize that they are acting in an unfair or even abusive manner. This is sobering, considering the fact that one out of four children in the US are in regular contact with a person who abuses alcohol.

Alcoholism is destructive to those closest to the alcoholic, and it affects families in several different ways. Many times, rehabilitating an alcoholic is only one part of the process of healing a home. Family members may also need support and counseling.

Alcoholic families suffer from a range of problems. Spouses can live in constant conflict. Children may develop low self-esteem, loneliness and fear of abandonment. Infants may even be born with lifelong birth defects. When support is not sought out, the results can be severe.

Alcoholism in family systems refers to the conditions in families that enable alcoholism, and the effects of alcoholic behaviour by one or more family members on the rest of the family. Mental health professionals are increasingly considering alcoholism and addiction as diseases that flourish in and are enabled by family systems. Family members react to the alcoholic with particular behavioural patterns. They may enable the addiction to continue by shielding the addict from the negative consequences of his actions. Such behaviours are referred to as co-dependence. In this way, the alcoholic is said to suffer from the disease of addiction, whereas the family members suffer from the disease of co-dependence.

Alcoholism is one of the leading causes of a dysfunctional family. As of 2001, there were an estimated 26.8 million children of alcoholics (COAs) in the United States, with as many as 11 million of them under the age of 18. Children of addicts have an increased suicide rate and on average have total health care costs 32 percent greater than children of non-alcoholic families.

According to the American Psychiatric Association, physicians stated three criteria to diagnose this disease: (1) physiological problems, such as hand tremors and blackouts, (2) psychological problems, such as excessive desire to drink, and (3) behavioral problems that disrupt social interaction or work performance.

Adults from alcoholic families experience higher levels of state and trait anxiety and lower levels of differentiation of self than adults raised in non-alcoholic families. Additionally, adult children of alcoholics have lower self-esteem, excessive feelings of responsibility, difficulties reaching out, higher incidence of depression, and increased likelihood of becoming alcoholics.

Parental alcoholism may affect the foetus even before a child is born. In pregnant women, alcohol is carried to all of the mother's organs and tissues, including the placenta, where it easily crosses through the membrane separating the maternal and foetal blood systems. When a pregnant woman drinks an alcoholic beverage, the concentration of alcohol in her unborn baby's bloodstream is the same level as her own. A pregnant woman who consumes alcohol during her pregnancy may give birth to a baby with Foetal Alcohol Syndrome (FAS). FAS (foetal Alcohol Syndrome) is known to produce children with damage to the central nervous system, general growth and facial features. The prevalence of this class of disorder is thought to be between 2-5 per 1000.

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Compared with non-alcoholic families, alcoholic families demonstrate poorer problem-solving abilities, both among the parents and within the family as a whole. These communication problems may contribute to the escalation of conflicts in alcoholic families. COAs are more likely than non-COAs to be aggressive, impulsive, and engage in disruptive and sensation seeking behaviors. Alcohol addiction is a complex disease that results from a variety of genetic, social, and environmental influences. Alcoholism affected approximately 4.65

percent of the U.S. population in 2001-2002, producing severe economic, social, and medical ramifications (Grant 2004). Researchers estimate that between 50 and 60 percent of alcoholism risk is determined by genetics (Goldman and Bergen 1998; McGue 1999). This strong genetic component has sparked numerous linkage and association studies investigating the roles of chromosomal regions and genetic variants in determining alcoholism susceptibility.

### **Marital relationships**

Alcoholism usually has strong negative effects on marital relationships. Separated and divorced men and women were three times as likely as married men and women to say they had been married to an alcoholic or problem drinker. Almost two-thirds of separated and divorced women, and almost half of separated or divorced men under age 46 have been exposed to alcoholism in the family at some time.

Exposure was higher among women (46.2 percent) than among men (38.9 percent) and declined with age. Exposure to alcoholism in the family was strongly related to marital status, independent of age: 55.5 percent of separated or divorced adults had been exposed to alcoholism in some family members, compared with 43.5 percent of married, 38.5 percent of never married, and 35.5 percent of widowed persons. Nearly 38 percent of separated or divorced women had been married to an alcoholic, but only about 12 percent of currently married women were married to an alcoholic.

### **Prevalence of Child Abuse**

Over one million children yearly are confirmed as victims of child abuse and neglect by state child protective service agencies. Substance abuse is one of the two largest problems affecting families in the United States, being a factor in nearly four-fifths of reported cases. Alcoholism is more prevalent among child abusing parents. Alcoholism is more strongly correlated to child abuse than depression and other disorders.

Adoption plays only a slight role in alcoholism in the family. Studies were done comparing children who were born into a family with an alcoholic parent and raised by adoptive (non-alcoholic) parents as compared to children born to non-alcoholic parents and raised by adopted alcoholic parents. The results (in US and Scandinavian studies) were that those adopted children born of an alcoholic parent (and adopted by non-alcoholic parents) developed alcoholism at higher rates as adults.

### **Correlates**

Children of alcoholics exhibit symptoms of depression and anxiety more than children of non-alcoholics. COAs have lower self-esteem than non-COAs from childhood through young adulthood. Children of alcoholics show more symptoms of anxiety, depression, and externalizing behavior disorders than non-COAs. Some of these symptoms include crying, lack of friends, fear of going to school, nightmares, perfectionism, hoarding, and excessive self-consciousness.

Many children of alcoholics score lower on tests measuring cognitive and verbal skills than non-COAs. Lacking requisite skills to express themselves can impact academic performance, relationships, and job interviews. The lack of these skills do not, however, imply that COAs are intellectually impaired. COAs are also shown to have difficulty with abstraction and conceptual reasoning, both of which play an important role in problem-solving academically and otherwise. In her book *Adult Children of Alcoholics*, Janet G. Woititz describes numerous traits common among adults who had an alcoholic parent. Although not necessarily universal or comprehensive, these traits constitute an *adult children of alcoholics syndrome* (cf. the work of Wayne Kraitsberg).

### **Treatment**

Suggested practices to mitigate the impact of parental alcoholism on the development of their children include: Attending meetings of Adult Children of Alcoholics Anonymous (ACA) Maintaining healthy family traditions and practices, such as vacations, mealtimes, and holidays. Encouraging COAs to develop consistent, stable, relationships with significant others outside of the family. Planning non-drinking activities to compete with alcoholic behaviour and tendencies.

### **Methodology**

Twenty samples were taken through snowball sampling method and the data available through administering the questionnaires are analysed.

### **Analysis and Discussion**

The drinking motive is very high among the middle aged. It also influences the youth and children. The major cause of alcoholism in Bannur is lack of awareness regarding the ill effects of alcohol. The social acceptance for the drinking behaviour is another contributory factor. Availability of money from daily wages and business make this habit sustainable down the generation. It

also leads to co-dependency phenomenon in the families. There are physical and psychological ailments for the family members in those families in which the head of the family is having alcohol abuse. Aggression, assault, anger outbursts, suicidal attempts, depression and other similar psychological problems are common in the families.

### Suggestions

1. Give awareness about the dangers of drinking habit among middle age people
2. Promote education among the people
3. Promote development activities in the Panchayath
4. Engage people in creative and innovative enterprises to sublimate the abuse habits
5. Active social work intervention in the Panchanyath through Panchayath Development Officer is need of the time.
6. Further qualitative research need to be conducted
7. Promote SHGs that can organise alternative strategies to divert the energy of the middle aged to constructive and developmental activities

### Conclusion

The alcohol abuse among middle age people in Bannur Grama Panchayat are high than the other areas as a result of the lack of awareness about the dangers of alcohol and lack of education. The drinking motives among people are destructing the family structure and also their future. It makes so many diseases and health problems. Hence active social work intervention is inevitable.

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