



International journal of basic and applied research

[www.pragatipublication.com](http://www.pragatipublication.com)

ISSN 2249-3352 (P) 2278-0505 (E)

Cosmos Impact Factor-5.960

## An assessment of the effect of alcoholic parents on the behaviour and wellbeing of scheduled castes and scheduled tribe children

**Mavis Henriques**

PhD Scholar

Department of Economics,

Birla Institute of Technology and Science, Pilani

K. K. Birla Goa Campus

India.

&

**Debasis Patnaik**

Professor

Department of Economics,

Birla Institute of Technology and Science, Pilani

K. K. Birla Goa Campus

India

**Received: 10 April Revised: 18 April Accepted: 26 April**

### Abstract

The purpose of this research paper was to examine the effect of alcohol use by parents on the wellbeing of scheduled caste and scheduled tribe children. Alcoholism is a global concern and many people's drinking problem has an effect on their families particularly their children's health and wellbeing. Children are exposed to abuse, neglect and often bad economic situations because of their alcoholic parent. The aim of this study was to study how parental drinking has had an effect on the wellbeing of their children.

The study was conducted on a total of 97 children from scheduled caste and scheduled tribe communities. Data was collected using personal data questionnaire, children of alcoholics screening test and general health questionnaire.

The findings of the study reveal a positive correlation between children of alcoholics and the effect on their general wellbeing. Early depression also shows signs of schizoaffective disorder in later stages of life.

**Keywords:** Alcohol, Children, Depression, Health, Parent, Wellbeing.

### Introduction

According to the National Institute of Alcohol Abuse and Alcoholism, problem drinking that becomes severe is given the medical diagnosis of "alcohol use disorder" or AUD. AUD is a chronic relapsing brain disease characterized by compulsive alcohol use, loss of control over alcohol intake, and a negative emotional state when not using. The two most prevalent psychiatric disorders in the world today are Alcohol abuse and alcohol dependence (Murray & Lopez, 1996).



Children tend to become alcoholics themselves when they are exposed to genetic and environmental factors of alcoholism (Cotton, 1979; Cloninger et al, 1981; Kaprio et al, 1987). Children with alcoholic parents are brought up with negligent and abusive parenting styles face economic hardships and also become socially isolated (Black, 1981; Fillmore, 1987). The disorder often leads to economic problems for the families, disruption in family life, and causes one to ignore children, low work productivity and affect the health of those around you (Watkins, 2019). The National council on Alcoholism and Drug Dependence states that alcoholics often neglect important duties, need time to nurse hangovers, encounter legal problems and have physical dependence on it. 4.8% student's experienced poor mental health/depression out of which 81.7% of the students reported consuming alcohol (Weitzman, 2004). Females reported binge drinking at a higher level in high school than in college. Students who engage in binge drinking tend to have lower grades.

Alcoholism is also associated with other health problems such as cardiovascular illnesses pneumonia, cirrhosis, pancreatitis and cancer. In addition to health concerns an alcoholic parent may lose wages while being unemployed, be in huge debts, be involved in gambling and have more medical bills to pay.

Alcohol has an adverse affect on one's spouse and family. There may be domestic violence and huge demands for finances from the spouse or family members by the alcoholic individual. Marital conflicts may increase as the spouse may feel burdened by the stress of living with an abusive partner. According to the American Academy of Child and Adolescent Psychiatry (AACAP), one in every five adult Americans resided with a relative who abused alcohol in their adolescence. Early exposure may also increase a child's tendency to consume alcohol late in life. The alcoholic parents' abuse of alcohol may also disrupt children's routines which they require for a healthy emotional development. Epidemiological studies have revealed 20%-50% of a substantial minority of lifetime alcohol users progress to more alcohol problems or become dependent on alcohol.(Helzner and Canino, 1992). Children who have adverse childhood experiences in a home with an alcoholic parent are more at risk for depression later in life (Anda et al, 2002).

Some children of alcoholic parents often show behaviour such as constantly seeking perfection in school, engaging in risky behaviours like experimenting with alcohol smoking, sex, suicidal thoughts, truancy, absenteeism, antisocial and may become violent or aggressive (Watkins, 2019). Studies have shown that stressors in childhood such as abuse or witnessing domestic violence can lead to various negative health outcomes and behaviours like substance abuse, suicidal attempts and depressive disorders. (Brodsky 1997; Kingree 1999; van der Kolk 1991;Kendall-Tackett 1993;Osofsky 1999;Hefferman 2000;Kendler 2000;Putnam 2003;Rohsenow 1988). Mothers who were treated violently had children who were most likely to suffer from multiple forms of abuse, serious household dysfunction and neglect. A positive graded risk was shown for self reported alcoholism, drug use and depression affect as intimate partner violence frequency increased (Dube, 2000; Bygholm & Bilenberg, 2000)

Approximately 7.4% of US adults were diagnosed with a past year of alcohol abuse or dependence (Grant, 2000). History of sexual and physical abuse during childhood was associated



with psychopathology for lifetime and tends to be stronger for women than men (MacMillan et al, 2001).

Age at first use is a powerful indicator of progression to alcohol related harm. Studies indicate that youngsters who consume their first drink at an earlier age are at greater risk of abusive consumption and alcohol disorders later in life (Hawkins et al, 1997; Chou & Pickering, 1992; Gruber et al, 1996, DeWit et al, 2000; Grant & Dawson, 1997). 51% of 8<sup>th</sup> graders, 70% of 10<sup>th</sup> graders and 80% of 12<sup>th</sup> graders have had some experience with alcohol (Johnston et al, 2002)

Early use of alcohol interferes with cognitive functions and social learning processes that determine a healthy social functioning in life (Clayton. 1992). Early use of alcohol during adolescence also increases the vulnerability to alcohol problems due to environmental conditions such as onset of puberty and opinions of peer's thereby making alcohol use regular (Guthrie et al, 1994; Zucker & Fitzgerald, 1991). Alcohol use at ages 11-14 heightens the risk of progressing to developing alcohol disorders greatly (DeWit et al, 2000).

Adolescents viewed their peers more negatively in terms of blame, anger and dangerousness when they abused alcohol as compared to those with a mental illness or leukemia. Similarly participants who viewed alcohol abuse teens as dangerous tended to fear and avoid them. (Corrigan et al, 2005)

The National Survey for Alcohol and Drug Abuse found that of the 40697 male respondents (across 25 states, covering rural and urban populations) aged 12-60 years, 74.1% reported life-time abstinence and 21.4% reported being current users (used in last 30 days) of alcohol. Of the total-users, 17% were classified as dependant users (based on the International Alcohol Use in India Classification of Diseases 10) (WHO, 2004). Studies also reported that the national prevalence of alcohol use was 4.5%. Individuals from scheduled castes and scheduled tribes also significantly reported regular use of alcohol as well as tobacco smoking and chewing. (Neufeld et al, 2005) An analysis of the Indian National family Health Survey for the period of 1998-1999 showed that members of schedules tribes and scheduled castes were likely to consume alcohol as compared to other castes in India (Subramaniam et al, 2005).

Father's drinking led to disruption in rituals and routines thereby making the mother shoulder the responsibilities during periods of hangovers and drinking episodes. Mothers may also get frustrated and direct their irritability towards their children (Haughland, 2005)

### **Research methodology**

#### **Statement of the problem:**

An assessment of the effect of alcoholic parents on behaviour and wellbeing of Scheduled caste and scheduled tribe children.



**Objectives:**

1. To study the effect of alcoholic parents on the behaviour and wellbeing of scheduled castes and scheduled tribe children
2. To assess if early childhood depression would lead to schizoaffective disorder in later stages of life.
3. To suggest an intervention plan to help children of alcoholics in distress

**Hypotheses:**

Ha1: A positive correlation exists between behaviour of children of alcoholic parents and wellbeing.

Ha2: Early childhood depression will lead to schizoaffective disorder in later stages of life.

**Sample:**

The population in the sample consisted of 120 children between the age group of 11-14 years from the scheduled caste and scheduled tribe community. However after many children failed to answer complete questionnaire, the sample was reduced to 97. Stratified sampling was used. Data was collected using a Children of Alcoholics Screening Test (CAST) and General Health Questionnaire (GHQ).

**Results and discussion**

**Ha1: A Positive correlation exists between behaviour of children of alcoholic parents and wellbeing.**

Table 1.1 indicating the Means, Standard Deviations and Pearson's Product Moment Correlation of Children of Alcoholics Screening Test (CAST) and General Health Questionnaire (GHQ) of Scheduled Tribe and Scheduled caste children.

Variable	Mean	Std. Deviation	Correlation Coefficient
CAST	3.82	4.364	.926**
GHQ	43.18	15.081	

\*\* Significance at 0.01 level

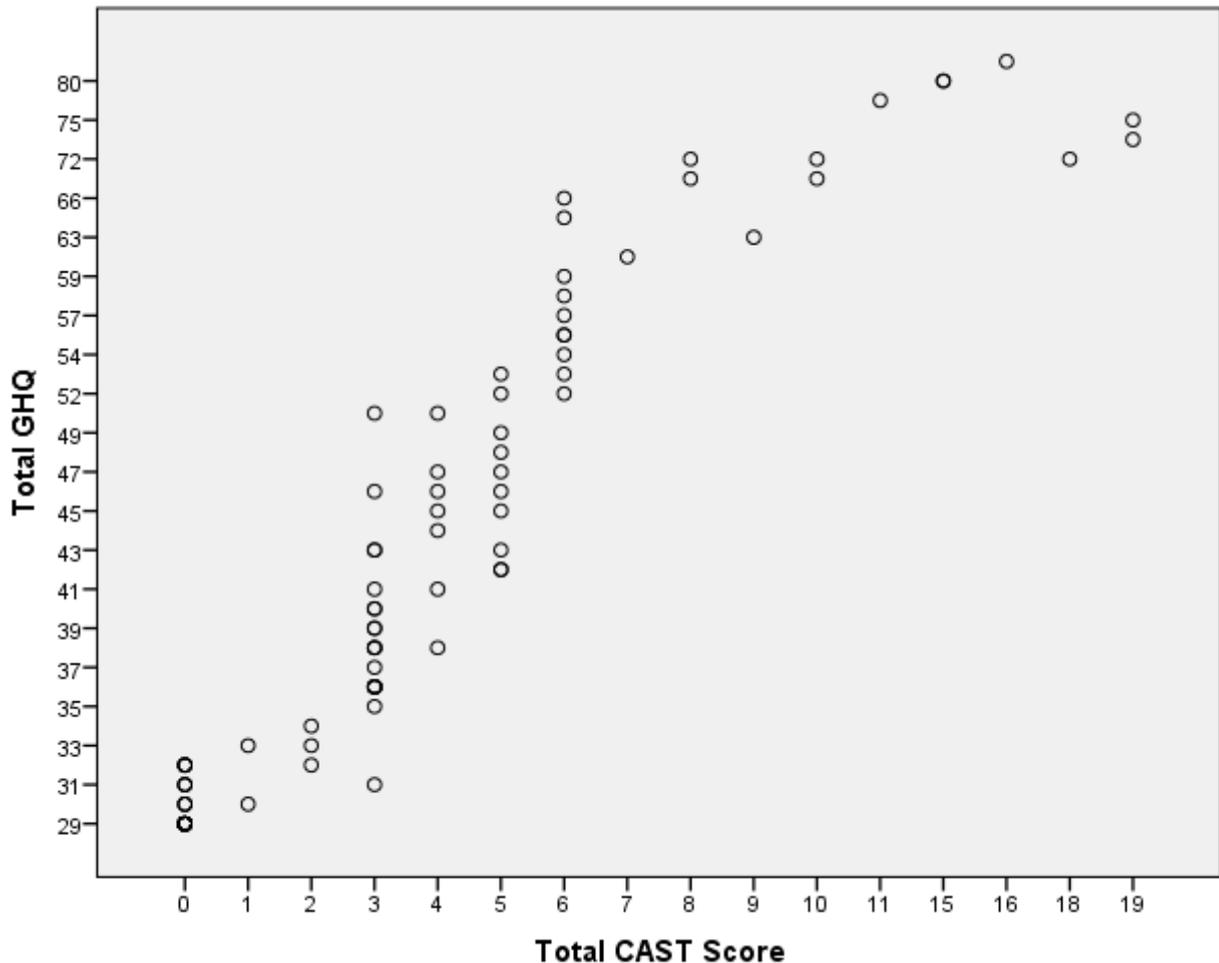


Table 1.1 indicates the means, Standard deviations and Pearson's Product Moment Correlation of Children of Alcoholics Screening Test (CAST) and General Health (GHQ). The mean and standard deviation of CAST was 3.82 and 4.364 respectively while that of GHQ was 43.18 and 15.081 respectively.

The Pearson's Product Moment Correlation coefficient was 0.926 which was significant at 0.01 level of significance. According to the range of computed correlation coefficient, there is a large correlation and a significant relationship. This relationship indicates that the Children of Alcoholics Screening Test is positively correlated, i.e. an increase in the score of the CAST will lead to an increase in high scores on the GHQ and a decrease in score on the CAST will lead to a decrease in the scores on GHQ. According to CAST high scores indicate that the child has an alcoholic parent and low scores indicate that the child does not have an alcoholic parent. On the other hand the GHQ scale shows that high scores indicate poorer wellbeing while low scores indicate better wellbeing.



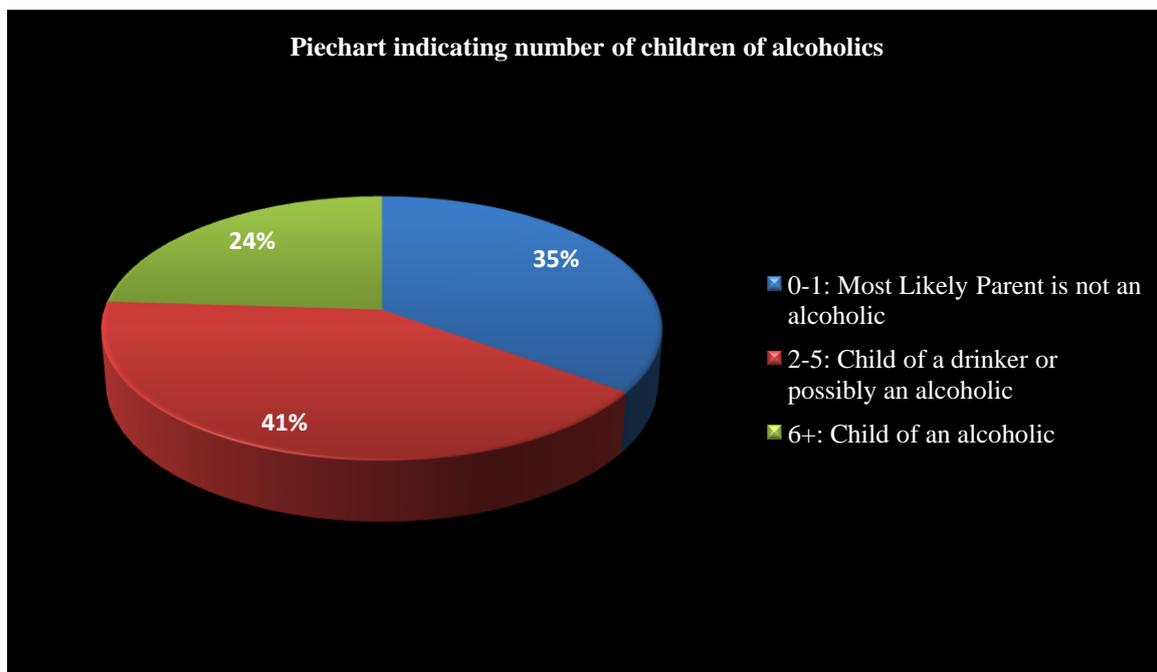
Children in middle school are constantly faced with the burden of performing well in school and getting good grades. However this can only be possible when they have a good support system at home to take care of them. When children are faced with troubled situations at home, their performance in school is not only affected but there can be an overall change in their behaviour and personality. Children require care and love from parents and living with an alcoholic parent can be very traumatising and stressful. Thus higher the scores on CAST poorer is the general health of the child and vice versa.

Thus Ha1, there exists a positive correlation between children of alcoholics and general health is accepted.

### Observations

**Ha2: Early childhood depression will lead to schizoaffective disorder in later stages of life.**

Figure 1.1 Indicating the number of children of alcoholics based on CAST scores.



The study was conducted on students of middle school from the scheduled caste and scheduled tribe community in Goa. A sample of 120 students was obtained however only 97 were considered as the final sample group due to drop out or non-completion of questionnaires. Out of the total sample 35% of children did not have an alcoholic parent, neither did they ever live with one. 41% of students either had a parent who consumed alcohol on a regular basis or had a parent who was possibly turning into an alcoholic. Almost a quarter of the students had at least one parent who was an alcoholic.



During the course of the study it would found that children who lived in a joint family had a parent who was currently an alcoholic. On the other hand single parent children reported to have lost their parent to alcoholism or cirrhosis.

Since the study focused on scheduled castes and scheduled tribe children, their father's occupations comprised mainly of daily wage workers like drivers, toddy tappers, milkmen, masons, electricians, woodcutters, painters, labourers, farmers, contractors and engineers. Mothers occupations comprised of housewives, service in government institutions and other houses, tailors, fisherfolk and flower vendors.

In most cases both parents were illiterate or had only completed primary education. Very few had graduated. This would indicate that they lacked facilities for basic exposure to educational settings.

Many children when interviewed revealed that they had an extreme fear of their alcoholic parent and that on many occasions they had faced abuse and torture from the parent due to intoxication. Children also reported constantly feeling depressed and unable to cope and so well in school as they were mentally disturbed. When asked as to why their parents never sought help from doctors or professionals, most reported that they felt burdened with life, children and the need for money and that it was their fate to suffer this way.

Most single mothers who lost their husbands due to cirrhosis or alcoholism lived off government schemes for widows and found it difficult to send their children to college leading to many dropping out after class 10.

Children reported to being shamed and ridiculed for having an alcoholic parent and that they found it difficult to make friends and trust people. They also stated that their alcoholic parents would hallucinate and have delusions and attack them forcing them to defend themselves. Children often felt depressed and wished they could escape from reality.

Early depression also shows an inclination towards schizoaffective disorder which could hamper children lives and make living in society difficult. Thus Ha2, early childhood depression can lead to schizoaffective disorder in later stages of life is accepted.

### **Intervention plan**

Creating awareness can be a difficult task. Awareness begins at home. A team of researchers/counsellors should be trained to explore SC/ST households to screen how many children have alcoholic parents. Following which the parents may be enrolled in alcoholics anonymous support groups. A detailed census of households across Goa once established can help design an appropriate plan to offer effective treatment for alcoholic patients. Early depression in children of alcoholics needs to be studied and analyzed further to prevent children from being shamed in society.

Medical interventions may include use of aversive medications to prevent alcoholic patients from drinking further. Antipsychotics may have to be use depending on severity of the disease and whether patient may be experiencing hallucinations or delusions. Engaging alcoholics in



supervised working conditions can not only prevent further drinking but may induce a sense of worth in the patient. Occupational therapy may also be used to help treat long standing alcoholics.

The research can further be explored by connecting with support groups and NGOs that manage and work with alcoholics.

### Conclusion:

This study was conducted to assess the effect of alcoholic parents on the behaviour and wellbeing of scheduled caste and scheduled tribe children. A positive correlation is found to exist between children of alcoholic and their wellbeing. This states that children who have alcoholic parents are more prone to having bad health. They live in constant fear of being abused, ridiculed and having to fend for themselves. Their childhood is robbed by their alcoholic parents. Most children have to defend themselves in times of threat and this can often lead to spells of depression. Depression for long periods of time may also lead to schizo affective disorder in later stages of life.

### References:

- Anda, R.F., Whitfield, C.L., Felitti, V. J., Chapman, D., Edwards, V.J., Dube, S.R., Williamson, D. F (2002). Adverse Childhood Experiences, Alcoholic Parents and Later Risk of Alcoholism and Depression. *Psychiatric Services*, 53:8.
- Black, C. "It Will Never Happen to Me!" New York, NY: *Ballantine Books*; 1981.
- Brodsky, B. S., Malone, K. M., Ellis, S. P, Dulit, R. A., Mann, J. J (1997). Characteristics Of Borderline Personality Disorder Associated With Suicidal Behavior. *American Journal of Psychiatry* 154:1715–1719
- Bygholm, C. H, Bilenberg, N. (2000). Behavioral and Emotional Problems in Children of Alcoholic Mothers and Fathers. *European Child and Adolescent Psychiatry*, Volume 9 (3), 219-226.
- Chou, S. P., Pickering, R.P. (1992). Early Onset Of Drinking As A Risk Factor For Lifetime Alcohol-Related Problems. *British Journal of Addiction*. 87: 1199–1204
- Clayton, R. R (1992). Transitions In Drug Use: Risk And Protective Factors, In Vulnerability To Drug Abuse. Edited by Glantz M, Pickens R. Washington, DC, *American Psychological Association*, pp 15–51
- Cloninger, C.R., Bohman, M., Sigvardsson, S. (1981). Inheritance Of Alcohol Abuse. *Archives of General Psychiatry*. 38:861–868.
- Corrigan, W. P., Lurie, B. D., Goldman, H. H., Slopen, N., Medasani, K., Phelan, S. (2005). How Adolescents Perceive The Stigma Of Mental Illness And Alcohol Abuse. *Psychiatric services*. Vol 55 No 5.
- Cotton, N. S. (1979). The Familial Incidence Of Alcoholism: A Review. *Journal of Studies on Alcohol*.40:89–116.
- Dewit, D.J., Adlaf, E.M., Offord, D.R., Ogborne, A.C. (2000). Age At First Alcohol Use: A Risk Factor For The Development Of Alcohol Disorders. *American Journal of Psychiatry*. Vol 157:5
- Donovan, J.E (2004). Adolescent Alcohol Initiation: A Review Of Psychosocial Risk Factors. *Journal of adolescent health*. Volume 35



- Dube, S.R. (2000). Exposure to Abuse, Neglect and Household Dysfunction Among Adults Who Witnessed Intimate Partner Violence As Children. Implications for Integrated Health and Social Sciences. *Violence and Victims*. 17(1):3-17.
- Fillmore, K. M., (1987). Prevalence, Incidence And Chronicity Of Drinking Patterns And Problems Among Men As A Function Of Age: A Longitudinal And Cohort Analysis. *British Journal of Addiction*. 82: 77-83.
- Grant, B. A and Dawson, D. A. (1997). Age At Onset Of Alcohol Use And Its Association With DSM- IV Alcohol Abuse And Dependence. Results from the national longitudinal alcohol epidemiological survey. *Journal of Substance abuse*. Volume 9:103-110.
- Gruber, E., DiClemente, R. J., Anderson, M. M., Lodico, M. (1996). Early Drinking Onset And Its Association With Alcohol Use And Problem Behavior In Late Adolescence. *Preventive Medicine* 25:293- 300
- Guthrie, B. J., Loveland-Cherry, C., Frey, M. A., Dielman, T. E. (1994). A Theoretical Approach To Studying Health Behaviors In Adolescents: An At-Risk Population. *Family Community Health* 17:35- 48
- Haughland, B. S.M. (2005). Recurrent Disruptions In Rituals And Routines In Families With Paternal Alcohol Abuse. *Family relations*. Volume 54.
- Hawkins, J. D., Graham, J.W., Maguin, E., Abbott, R., Hill, K. G., Catalano, R. F.(1997). Exploring The Effects Of Age Of Alcohol Use Initiation And Psychosocial Risk Factors On Subsequent Alcohol Misuse. *Journal of Studies on Alcohol* 58:280-290
- Heffernan, K., Cloitre, M., Tardiff, K., Marzuk, P. M., Portera, L., Leon, A. C. (2000). Childhood Trauma As A Correlate Of lifetime Opiate Use In Psychiatric Patients. *Addiction Behavior* 25:797-803
- Helzer, J.E., Canino, G.J.(1992). Alcoholism In North America, Europe, And Asia. New York, Oxford *University Press*.
- Johnston, L.D., O'Mally, P.M., Bachman, J.G. (2002). Monitoring The Future National Survey Results On Drug Use: 1975-2001. *National Institute of Drug Use*. Volume I
- Kaprio J, Koshenvuo M, Langinvainio H, (1987). Genetic Influences On Use And Abuse Of Alcohol: A Study Of 5,638 Adult Finnish Twin Brothers. *Alcoholism*. 11:349-356.
- Kingree, J. B., Thompson, M. P., Kaslow, N. J. (1999) Risk Factors For Suicide Attempts Among Low-Income Women With A History Of Alcohol Problems. *Addiction Behavior* 24:583-587
- Kendall-Tackett, K. A., Williams, L.M., Finkelhor, D. (1993) Impact Of Sexual Abuse On Children: A Review And Synthesis Of Recent Empirical Studies. *Psychological Bulletin* 113:164-180
- Kendler, K. S., Bulik, C. M., Silberg, J., Hettema, J. M., Myers, J., Prescott, C.A. (2000) Childhood Sexual Abuse And Adult Psychiatric And Substance Abuse Disorders In Women: An Epidemiological And Co twin Control Analysis. *Archives of General Psychiatry* 57:953-959
- MacMillan, H.L., Fleming, J.E., Streiner, D. L., Lin, E., Boyle, M. H., Jameison, E., Duku, E.K., Walsh, C.A., Wong, M.Y.Y., Beardslee, W.R. (2001). Childhood Abuse and Lifetime Psychopathology in a Community Sample. *American Journal of Psychiatry*, 158:1878-1883.
- Murray, C. J. L. & Lopez, A. D. (1996). The Global Burden of Disease. Boston, Mass: *Harvard School of Public Health*



International journal of basic and applied research

[www.pragatipublication.com](http://www.pragatipublication.com)

ISSN 2249-3352 (P) 2278-0505 (E)

Cosmos Impact Factor-5.960

- National Institute of Alcohol Abuse and Alcoholism (2019). Alcohol use Disorder.
- Neufeld, K.J., Peters, D.H., Rani, M., Bonu, S., Brooner, R. K. (2005) Regular use of alcohol and tobacco in India and its association with age, gender and poverty. *Drug and Alcohol Dependence*. Issue 77, pp. 283-291.
- Osofsky, J. D. (1999) The Impact Of Violence On Children. *Future Child* 99:33-49
- Putnam, F. W. (1998) Developmental Pathways In Sexually Abused Girls. Presented At Psychological Trauma: Maturational Processes And Psychotherapeutic Interventions. *Harvard Medical School*, Boston MA.
- Rohsenow, D. J., Corbett, R., Devine, D. (1988) Molested As Children: A Hidden Contribution To Substance Abuse? *Journal of Substance Abuse Treatment* 5:13-18
- Subramanian, S.V., Nandy, S., Irving, M., Gordon, D., Smith, D. G. (2005) Role Of Socioeconomic Markers And State Prohibition Policy in Predicting Alcohol Consumption Among Men And Women In India: A Multilevel Statistical Analysis. *Bulletin of the World Health Organization* Issue 83 (11) pp. 829-836
- Van der Kolk, B. A., Perry, J.C., Herman, J. L. (1991) Childhood Origins Of Self-Destructive Behavior. *American Journal of Psychiatry* 148:1665-1671
- Watkins, M. (2019) Alcoholism and Family Marital Problems. *American Addiction Centres*.
- Weitzman, E.R. (2004). Poor Mental Health, Depression and Associations With Alcohol Consumption, Harm and Abuse in a National Sample of Young Adults in College. *The Journal of Nervous and Mental Disease*, Vol 192(4).
- World Health Organization (2004). Global status report on alcohol 2004. *World Health Organization. Department of Mental Health and Substance Abuse*. Geneva.
- Zucker, R.A., Fitzgerald, H. E (1991) Early developmental factors and risk for alcohol problems. *Alcohol Health and Research World* ; 15:18-24