



Topic overview

## Children of Alcoholics

*International Encyclopedia of Marriage and Family*

Ed. James J. Ponzetti. Vol. 1. 2<sup>nd</sup> ed. New York: Macmillan Reference USA, 2003. p279-282.  
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## CHILDREN OF ALCOHOLICS

*Children of Alcoholics* (COAs) is a general term used to describe individuals with one or more alcoholic parents. Although the ramifications of living with an addicted, alcoholic parent are variable, nearly all children from alcoholic families are at risk for behavioral and emotional difficulties (Christensen and Bilenberg 2000), and live with scars—psychological or physical—as a result of parental alcoholism (Seixas and Youcha 1985). From prenatal influences leading to learning and memory problems (Coles and Platzman 1993) to vulnerabilities in behavioral control and aggression in adulthood ( Jacob and Windle 2000), a significant number of COAs exhibit psychological and/or interpersonal difficulties. In fact, COAs can be differentiated from nondistressed and psychiatric comparison groups in regard to such factors as personality characteristics, depressive symptomatology, and educational attainments, as well as patterns of alcohol and drug use ( Jacob et al. 1999).

Effects of parental alcoholism, then, unfortunately can lead to untoward psychological effects as well as difficulties with adult relationships. Leon I. Puttler, Robert A. Zucker, Hiram E. Fitzgerald, and C. Raymond Bingham (1998) noted that both male and female COAs are at risk for myriad difficulties. At the same time, developmental trajectories can differ widely, depending upon both the parent's alcoholism as well as individual resilience. As a result, psychiatrists, psychologists, family therapists, and counselors commonly consider an array of family dynamics when examining the effects of parental alcoholism.

## Family Dynamics and Developmental Influences

There is no doubt that living in the presence of an alcoholic parent yields negative impacts (Christensen and Bilenberg 2000; Crespi 1990; Steinglass 1987). Parental alcoholism can instill a legacy which affects the development of both individual family members and patterns carried forward from one generation to the next (Rosellini and Worden 1985; Seixas and Youcha 1985). Still, what are the specific developmental implications of living within a family stained by alcoholism?

*Developmental implications of an alcohol-focused family.* Much of what is known about the developmental implications of growing up within an alcohol-focused family system (i.e., a family adjusting and reacting to an alcoholic parent) comes from research comparing children (and adult children) of alcoholic parents to the children of nonalcoholic parents. The research conclusively indicates that children from alcoholic family systems are more prone to develop life-long psychological and/or behavioral problems than children from nonalcohol-focused family systems (e.g., Black 1981; Crespi 1985, 1990; Jacob et al. 1999; Woititz 1985, 1983). Thus, children of alcoholics are often

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thought to be casualties of parental drinking, with such generalized problems as impaired school performance, low self-esteem, role confusion, impulsiveness, and depression. In addition, partially as a product of the behavioral consequences associated with living within a dysfunctional alcoholic system, children of alcoholics are at-risk for abuse, eating disorders, conduct disorders, alcoholism, communication problems, relational deficits, and problems with intimacy (Whipple, Fitzgerald, and Zucker 1995; Chassin, Rogosch, and Barrera 1991; Jacob, Krahn, and Leonard 1991; West and Prinz 1987). Moreover, families of alcoholics tend to be less organized, less cohesive, and marked by increased levels of conflict than nonalcoholic families.

The developmental problems resulting from growing up in an alcohol-focused family system are further supported by the longitudinal research on COAs. In a 33-year study of children of alcoholics, for instance, Robert E. Drake and George E. Vaillant (1988) noted that sons of alcoholic fathers were less competent in such tasks as schooling and interpersonal relationships, were more likely to be delinquent, and were more likely to become alcohol dependent than sons of nonalcoholics.

In spite of the fact that much of the extant research has used relatively small comparative samples, the widespread problems associated with familial alcoholism cannot be discounted. Thus, Janet G. Woititz (1983) identifies thirteen long-term after-effects of alcoholic parenting:

1. Adult children of alcoholics guess at what normal behavior is.
2. Adult children of alcoholics have difficulty following a project through from beginning to end.
3. Adult children of alcoholics lie when it would be just as easy to tell the truth.
4. Adult children of alcoholics judge themselves without mercy.
5. Adult children of alcoholics have difficulty having fun.
6. Adult children of alcoholics take themselves very seriously.
7. Adult children of alcoholics have difficulty with intimate relationships.
8. Adult children of alcoholics overreact to changes over which they have no control.
9. Adult children of alcoholics constantly seek approval and affirmation.
10. Adult children of alcoholics usually feel that they are different from other people.
11. Adult children of alcoholics are super-responsible or super-irresponsible.
12. Adult children of alcoholics are extremely loyal, even in the face of evidence that their loyalty is undeserved.
13. Adult children of alcoholics are impulsive. They tend to lock themselves into a course of action without giving serious consideration to alternative behaviors or possible consequences. This impulsivity leads to confusion, self-loathing, and loss of control over their environment. In addition, they spend an excessive amount of energy cleaning up the mess.

*Family dynamics within the alcohol-focused family system.* As noted above, the alcohol-focused family system is associated with developmental problems. Although common sense would suggest that parental alcoholism would not be a positive influence, and whereas all children are not impacted equally, there is striking evidence that COAs have felt that their families were not "real" families and that the family environment was adversely impacted by an alcoholic parent (Wilson and Orford 1978). In addition, the research makes it clear that children within alcohol-focused systems often occupy roles that limit their autonomy, flexibility, and overall adjustment.

Building a conceptual framework, Edward M. Scott (1970) identified an assortment of roles often assumed by children of alcoholics. Each of Scott's identified roles reflects unresolved themes that hamper happiness and well-being. Those he categorizes as *babes in the woods*, for instance, retain many childlike and immature emotional reactions throughout adulthood. Likewise, Scott's *bedroom adult* reflects a person who finds adulthood through sexuality, while actually being hampered from psychological maturity and autonomy because of unresolved familial issues stemming from alcoholic influences. Elsewhere, Tony D. Crespi (1990), drawing on a detailed case analysis as a foundational framework, described the concept of *tool children* to illuminate a devastating categorization of roles in

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COAs, using the conceptualization of children as tools for parental needs. From *sexual magnets* used to gratify inappropriate adult needs to *garbage children* treated as so much discarded garbage, the model of tool children reflects the negative consequences which result when children are used in overly restrictive ways. Unfortunately, a tool that breaks when used inappropriately may be replaced; children cannot.

While different researchers use different terms for different roles, the concept of narrowly restricted behavioral roles is noteworthy for COAs. In effect, children in alcoholic families rarely learn the combinations of roles characteristic of healthy adult personalities and instead become locked into narrow roles based upon what they need to do to survive. Such roles (e.g., Wegscheider-Cruse 1989) can include *the enabler*, *the hero*, *the scapegoat*, *the lost child*, or *the mascot*. As a result, COAs do not develop flexible behavioral ways of coping with stress and learn to focus on overly narrow ways. As the alcoholic becomes the focus of family adjustment, family members begin to act and react to alcoholic-induced and -effected behavior, rather than reacting in healthy unimpaired ways.

While this only partially captures the complex dynamics of an alcoholic family, it highlights how the developmental adjustment of adulthood is impacted by an alcoholic parent. While the effects of parental alcoholism can vary depending upon a child's developmental stage (Harter 2000), there is growing evidence that parental alcoholism impacts development across the lifespan. A sampling of developmental research conducted on COAs at different ages and stages of development reveals that pre-school and young children have demonstrated behavior problems, vulnerabilities to aggressive and delinquent behavior, and difficulties in such areas as academic achievement and cognitive functioning (Puttler et al. 1998); adolescents have demonstrated negative academic performances in English and math, as well as negative psychological and substance abuse outcomes (McGrath, Watson, and Chassin 1999; West and Prinz 1987); depression has been noted as elevated in college samples (Sher et al. 1991); and increased marital conflict, decreased family cohesion, and role distress has been reported in a middle-aged sample (Domenico and Windle 1993).

Ironically, in spite of individual efforts to separate and reject the family, the legacy of an alcoholic parent can assert influence and control over a wide array of life events, as well as a life course. COAs are at greater risk of possessing psychological and behavioral difficulties. H. Bygholm Christensen and Niels Bilenberg (2000) found that COAs had more than twice the risk as non-COAs for depression and social behavioral disorders and enhanced risk for alcoholism.

## Conclusion

In short, dysfunctional alcoholic families have the potential to vividly restrict the individuation process. Extant research underscores the importance for children from alcoholic dysfunctional families to learn strategies for enhancing separateness from parental influences. In other words, children need to be encouraged to accept their parents' illness and to understand that they are not responsible either for the illness or for helping the parents to resolve their personal problems. Only in this way will children be able to constructively individuate from the family, explore their own identity options, and maintain constructive relationships with the parents at the same time.

See also: ACADEMIC ACHIEVEMENT ; CHILD ABUSE: PHYSICAL ABUSE AND NEGLECT ; CODEPENDENCY ; CONDUCT DISORDER ; DEPRESSION: ADULTS ; DEPRESSION: CHILDREN AND ADOLESCENTS: DEVELOPMENT: COGNITIVE ; DEVELOPMENT: EMOTIONAL ; DEVELOPMENT: SELF ; DEVELOPMENTAL PSYCHOPATHOLOGY ; FAMILY DIAGNOSIS/DSM-V ; HEALTH AND FAMILIES ; JUVENILE DELINQUENCY ; RUNAWAY YOUTHS ; SEPARATION-INDIVIDUATION ; SUBSTANCE ABUSE

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