

Alcohol Abuse and Family Relationships: Is there a Reciprocal Effect between Alcohol Abuse and Family Dynamics?

Article by Heba W. Kostandy

MA Counseling, Hope International University and PhD Candidate, Texila American University

E-mail: hebakostandy2011@gmail.com

Abstract

The present literature review aims to examine a range of reciprocal effects between alcohol abuse and family relations: as individuals and as a system. The study targets the mutual relationship between alcohol abuse and the family. Alcohol abuse is being examined to affect the personalities of family members and the functioning and interactions of the family as a system. The family in turn is examined in terms of contributing to the onset, alleviation or persistence of alcohol abuse. Accordingly, recovery from alcohol abuse would necessitate the involvement of family members besides the main subject of abuse. An ethnographic study would be used to examine the direct and indirect mutual effect families and alcohol abuse have on one another.

Keywords: Alcohol, abuse, family, systems, recovery, abstinence.

Introduction

Over the past decades, researchers have explored the family's role in the development, treatment, and prevention of alcohol abuse and dependence. Much of this research has focused on the children of alcoholics, who are at a significantly higher risk of becoming alcoholic themselves; that is in addition to studies that targeted children of non-alcoholics (Jacob, J and Johnson, S. 1997).

Children and extended family members, can become codependent on a loved one's alcohol abuse, or at least be significantly affected. These members may have a greater likelihood of having emotional troubles compared to children who grow up in sober homes. Early exposure to an alcohol abuser can also increase the child's susceptibility to have a problematic relationship with alcohol. In general, children of individuals who abuse alcohol have been studied and shown four times more likelihood to abuse alcohol themselves. (Alcoholism and Family 2018).

Alcohol Abuse is linked to a range of negative effects on individuals and families from exhibiting poor behaviours, family arguments and ruined family occasions and relationships; to child injuries, ongoing child neglect and abuse; and domestic violence. (Laslett, A. M. et al 2015).

Method

Various perceptions have been used to guide empirical studies in the area of family dynamics as they relate to Alcohol Abuse, including genetic biological efforts; studies of the personality and psychosocial characteristics of the alcoholic as well as of their spouse and children; and analyses of other variables (i.e., moderator variables), such as family structure, social class, and ethnicity. It is worth exploring that comprehensive treatment for the child or the family unit (including the parent who abuses alcohol or other drugs) can effectively address and improve the many problems associated with violence and neglect in the home. (Alcoholism and Family 2018).

To answer the given research question, qualitative methods would be most appropriate to find an answer. The purposive sample depends upon researchers knowing what is typical and atypical of the populations they are studying. The sample will be selected by going to AA support groups for individuals with alcohol abuse issues coupled with familial issues.

Once participants respond and confirm their consent to take part in the study, the researcher will begin to go into the family home and talk to family members. Since ethnography is similar to a participant observation study, the researcher needs to build a relationship with the families being studied, especially with those who have the Alcohol Abuse issue, to assess the changes that have

occurred in behavior since the diagnosis. Once trust is established, the researcher can come in and begin recording the conversations about the diagnosis time, and how participants felt.

Limitations of such study lie in the fact that most of the data is self-reporting, hence, the introduction of ethnography which provides the researcher with an understanding of how participants see the world and how they interact with everything around them.

In therapy, clients identify who they think should be included in therapy. The therapist cannot decide which individuals make up another person's family. When starting therapy, the therapist needs to ask the client, "Who is important to you? And who you consider as family to you?" It is critical to identify people who are important in the person's life. Anyone who is instrumental in providing support, maintaining the household, providing financial resources, and with whom there is a strong and enduring emotional bond may be considered family for the purposes of therapy. No one should be automatically included or excluded regardless of geographical distance. (Kaufman, E. 2004).

A list of operationalized concepts such as: love, affirmation, avoidance, and fear, would be offered to classify the dynamics among the family. Collecting both verbal and nonverbal accounts can give a better representation of the dynamics among family members. Using ethnography will allow for an in depth and lengthy analysis of the different families, and the effects of Alcohol Abuse on Family Dynamics.

Results

(Laslett, A. M. et al 2015) indicated that alcohol abuse plays a role in couples' relationship formation and dissolution. Adolescents who abused alcohol were likely to marry younger than those who did not. Two possible explanations are that those who abuse alcohol are more impulsive and have a higher sensation-seeking drive than others.

Alcohol Abuse is further responsible for cognitive deficits and impaired judgment. Adolescents accordingly participate in risky sexual behavior, get pregnant, and then marry early. It was found that 11% of divorced men and women claim that alcohol abuse played a role in their divorce and that alcohol abuse rates are higher among divorced individuals compared to married individuals (Laslett, A. M. et al 2015).

Discussion

Worldwide health hazards of alcohol abuse

According to World Health Organization (WHO 2018) The harmful use of alcohol is one of the leading risk factors for health worldwide, including those for maternal and child health, infectious diseases (HIV, viral hepatitis, tuberculosis), and mental health, injuries and poisonings.

In 2016, the harmful use of alcohol resulted in 3 million deaths worldwide and 132.6 million disability-adjusted life years. Mortality resulting from alcohol consumption is higher than that caused by diseases such as tuberculosis, HIV/AIDS and diabetes (WHO 2018).

Familial hazards of alcohol abuse

Families can provide support and love, but they also have the potential to limit or damage the development of their members. The United Nations Children's Fund (UNICEF as cited by Laslett, A. M. et al 2015) states that it is the fundamental right of children to develop and be safe within their family, protected from harm and supported to reach their full potential. However, effects of heavy drinking upon families can include arguments, disharmony, divorce, domestic violence and inadequate role performance by various family members. People who are seeking treatment for their own alcohol problems are often dealing with financial problems, separations and divorces, stress, and poor health. (Laslett, A. M. et al 2015).

Effect of alcohol abuse on children

In a study conducted in Australia that targeted the effect of alcohol on families in 2008, 2,649 individuals responded. The study focused on the 1,142 respondents who had families with children. Interviews revealed that children experienced a range of harms, with the most common of these witnessing verbal or physical conflict, or drinking or inappropriate behavior. Children were also

verbally abused, left in an unsupervised or unsafe situation, physically hurt or exposed to domestic violence because of others' drinking. (Laslett, A. M. et al 2015).

Fear, behavioral problems, and shame were some of the outcomes for children (as reported by interviewees). The main impact on the family of having a parent whose drinking was harming children was that the other parent was prepared to leave the relationship. While separation removed some children from the harm of daily exposure to a problematic drinker, it did not mean that they were now unaffected by that person, as parents still had access rights and the custodial parent worried about the harms the drinker could still inflict. (Laslett, A. M. et al 2015).

Effect alcohol abuse has on partners

Despite the lack of consensus about the etiology of alcohol-related intimate partner violence, alcohol appears to be a consistent risk factor in its perpetration resulting in more aggression within relationships and increased severity of injury (Laslett, A. M. et al 2015).

A study was conducted to analyze the relationship between alcohol and partner aggression severity using data from a range of 13 developing and developed countries and found a consistent relationship between alcohol use and increased severity of partner aggression even across diverse cultures. (Laslett, A. M. et al 2015).

On the other hand, a study has shown that the health of the partners of those who abuse alcohol suffered due to their lack of engagement in behaviors to prevent their own illnesses and stress from taking care of their alcohol abusing partners. They also have higher rates of chronic illnesses such as high blood pressure, ulcers, cancer, and gastrointestinal problems. Researchers further found that spouses of alcoholics experienced symptoms of obsessive-compulsive disorder, interpersonal sensitivity, depression, anxiety, hostility, and phobic anxiety. (Younkin, F. L. L. 2013).

There are several reported harmful effects of heavy drinking for couples including conflict, dissatisfaction, and intimate partner violence. Research has further shown that when one partner drinks significantly more than the other partner, relationship satisfaction and intimacy are disrupted in couples' relationships in addition to communication. (Younkin, F. L. L. 2013).

Family dynamics – survival mechanisms

In a family, patterns of relating to one another evolve; a division of functions occurs and roles interlock. For the family to function smoothly, each person must play his/her role in a predictable manner and according to the expectations of others in the family. When the family as a whole is functioning smoothly, individual members of the family also tend to function well. When this organization is disrupted, repercussions are felt by each family member. A crisis is under way. Usually there is an initial denial that a problem exists. The family tries to continue in its usual behavior patterns until it is obvious that these patterns are no longer effective. At this point there is a downward slump in organization. (Jackson, J. K. 1958).

Each stage in the crisis of alcoholism has distinctive characteristics. The types of problems faced, the extent to which the situation is structured, the amount of emotional support received by individual family members, and the rewards vary as to the stage of the crisis. Although each stage of the crisis appears to give rise to some similar patterns of response, there is considerable variation from family to family. The wife whose original personality fits comfortably into denying the existence of the problem will probably take longer to get past this phase of the crisis than the wife who finds dominating more convenient. The latter will probably prolong the stage of attempting to eliminate the problem. Some families make an adjustment at one level of the crisis and never seem to go on to the next phase (Jackson, J. K. 1958).

Family factors contributing to alcohol abuse

Genetic vulnerabilities to Alcohol Abuse, family attitudes about alcohol, and family drinking patterns have direct effects on drinking. In family studies, individuals who are first-degree relatives (brothers, sisters, parents, or children) are four to seven times more likely to develop alcohol dependency as people in the general population. There is more evidence for the genetic influence on alcoholism than of adoption studies, children who are born to an alcoholic parent and then adopted by

non-alcoholic parents are susceptible to develop alcoholism as adults more than adopted children born of non-alcoholic parents. However, genetic effects are not deterministic but are rather a factor that relates to vulnerability and risk and interact with other environmental factors (Saatcioglu. O. et al 2006).

Another major factor in alcoholic problems is stress. Many alcoholics report that before they drink, they often experience one or more of the following distressing events: a family argument, poor communication, inadequate family problem solving or nagging (Saatcioglu. O. et al 2006).

The family and recovery

The idea of family denotes a lasting involvement on an emotional level. Family members may scatter geographically, but still be connected emotionally and able to contribute to the dynamics of family functioning. Families need to be distinguished from social support groups such as 12-Step programs—although for some clients these distinctions may be vague. One distinction is the level of commitment that people have for each other and the duration of that commitment. Another distinction is the source of connection. Families are connected by agreement, but also by blood and powerful emotional ties. Support groups, by contrast, are held together by a common objective. (Kaufman, E. 2004).

Family systems and alcohol abuse

Researchers focusing on the role of family relationships in the creation and maintenance of alcohol abuse have identified a strong connection between disrupted family relationships and alcohol. (Jackson, J. K. 1958). According to (Wallis, D. J. 2013), although equilibrium and homeostasis can be a comfort zone for a family, this does not mean that equilibrium is good or healthy for the family. Equilibrium may simply reflect the fact that family feels a sense of stability or consistency, even if it is unhealthy or maladaptive. When families fall into roles and patterns, the equilibrium in the family is disrupted, or someone is trying to move outside of their role.

According to the Family systems theory assumption, every member of a family takes on a certain role. Such roles are patterns of behavior that are developed through repetitive interaction and fulfill a particular function. (Jackson, J. K. 1958).

Family members' responses to treatment give the therapist more insight into the function that alcohol plays in the family. Alcohol has been linked by studies to help the family system maintain homeostasis; and as such treating and changing alcohol use can disrupt the family system. Families are oftentimes resistant to disruptions in their homeostasis so they as a result, can be unknowingly resistant to treatment for alcohol abuse. (Jackson, J. K. 1958).

According to family dynamics, when the alcoholic seeks treatment, family members may have very mixed feelings towards the treatment process. Hope that the parent may recover is revived and if sobriety succeeds, they are grateful.

Problems begin during times of change or when stress is put on the family system. When the alcoholic starts to exert effort to change his/her drinking patterns, this will result in changes in the family such as the adjustment of roles of family members and changes in family dynamics. For example, while the alcoholic member drank, they may have abandoned their responsibilities. When the alcoholic is sober, roles and the dynamics of family decision making and authority may change. In couples, other things that may change are the dynamics associated with intimacy. Some examples of times of stress on a family system include launching children, job loss, and death of a family member. (Jackson, J. K. 1958).

In addition, family members may feel resentment that an outside entity can accomplish what they have tried to do for years and couldn't. They may also resent the emotional support which the alcoholic receives from the treatment entity, while they are left to cope with still another change in their relationship to that member without support. Most families have little awareness of what treatment involves and are forced to rely on the alcoholic member for their information. However, there has been a growing recognition that the family of the alcoholic also requires help if the alcoholic is to be treated successfully. Hence the introduction of the Family-involved therapy, which attempts to educate families about the relationship patterns that typically contribute to the formation and

continuation of alcohol abuse., (Jackson, J. K. 1958). Family members becoming ready to make personal changes might positively impact family functioning and improve family support. Research has concluded that individual readiness to change could enhance family functioning and promote recovery-oriented changes not just for the identified person in recovery, but for the family as a unit. (Bradshaw, S. D. et al 2016).

Conclusion

The family has a role in the offset of Alcohol Abuse. They can also be a very important influence in recovery. It may start when families unsuspectingly have a dysfunctional system. When the negative dynamics of families are changed, recovery from alcohol can occur, thus reducing the probability of other family members abusing alcohol. It's important that all family members are aware of how they can impact the process; and also, be willing to change their own behaviors as well.

When families try to change their dynamics, they often find it is a real challenge. In many cases, therapy can help families better communicate on important issues and reconcile for past issues. When this group begins to function in a healthy manner, recovery from addiction is more likely to be facilitated: the rates of dropping out of treatment decreases, and there is a greater chance for positive long-term outcomes.

References

- [1]. Alcoholism and Family (2018). Marital Problems. American Addiction Centers. Retrieved from: <https://americanaddictioncenters.org/alcoholism-treatment/family-marital-problems/>.
- [2]. Bradshaw, S. D. et al (2016). Family Functioning and Readiness in Family Recovery from Addiction. Article. Research Gate. Retrieved from: https://www.researchgate.net/publication/298422755_Family_Functioning_and_Readiness_in_Family_Recovery_From_Addiction.
- [3]. Cochran, L. A. (2014). Children of Alcoholics: How Patterns and Perceptions of the Past Affect the Future. Thesis. Portland State University. Retrieved from: <https://pdxscholar.library.pdx.edu/cgi/viewcontent.cgi?referer=https://www.google.com/eg/&httpsredir=1&article=1047&context=honorsthesis>.
- [4]. Global status report on alcohol and health (2018). World Health Organization. Retrieved from: <http://apps.who.int/iris/bitstream/handle/10665/274603/9789241565639-eng.pdf?ua=1>.
- [5]. Jackson, J. K. (1958), Alcoholism and the Family by JOAN K. JACKSON, The Annals of the American Academy, Volume: 315 issue: 1. Retrieved from: <http://journals.sagepub.com/doi/abs/10.1177/000271625831500112>.
- [6]. Jacob, J and Johnson, S. (1997). Parenting Influences on the Development of Alcohol Abuse and Dependence. Alcohol Health & Research World Vol. 21. Retrieved from: <https://pdfs.semanticscholar.org/39ff/4f4814347193495367e8650b50afef573da3.pdf>.
- [7]. Kaufman, E. (2004). Substance Abuse Treatment and Family Therapy. Treatment Improvement Protocol (TIP) Series, No. 39. Center for Substance Abuse Treatment. Substance Abuse and Mental Health Services Administration (US). Rockville (MD). Retrieved from: <https://www.ncbi.nlm.nih.gov/books/NBK64269/>.
- [8]. Laslett, A.M. et al (2015). The Hidden Harm: Alcohols Impact on Children and Families. Foundation for Alcohol Research And Education Ltd. Retrieved from: <https://www.fasdhub.org.au/research-and-publications/publications/2015/alcohols-impact-on-children-and-families/>.
- [9]. Saatcioglu. O. et al (2006). Role of family in alcohol and substance abuse. Psychiatry and Clinical Neurosciences. Retrieved from: <https://onlinelibrary.wiley.com/doi/pdf/10.1111/j.1440-1819.2006.01476.x>.
- [10]. Saatcioglu. O. et al (2006). Role of family in alcohol and substance abuse. Psychiatry and Clinical Neurosciences. Retrieved from: <https://onlinelibrary.wiley.com/doi/pdf/10.1111/j.1440-1819.2006.01476.x>.
- [11]. Wallis, D. J. (2013). Adolescent Substance Abuse Treatment: Does Family Systems Therapy Improve Family Functioning and Decrease Drug Use? Dissertation. University of Denver. Retrieved from: <https://Digitalcommons.Du.Edu/Cgi/Viewcontent.Cgi?Article=1682&Context=Etd>.
- [12]. Younkin, F. L. L. (2013). Differentiation and Relationship Satisfaction: Mediating Effects of Alcohol Use. Dissertation, The Ohio State University. Retrieved from: https://etd.ohiolink.edu/rws_etd/document/get/osu1384942239/inline.