

THE IMPACT OF FAMILY ENVIRONMENT ON THE DEVELOPMENT OF ALCOHOL DEPENDENCE

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SUMMARY

Background: Alcoholism is a family disease. Many studies confirm that a family history of alcoholism is associated with the development of later alcohol dependence. The aim of this study is to analyze the impact of family structure and relations between its members in the development of alcohol addiction in children grown up in these families.

Subjects and methods: The research study was based on authors' anonymous questionnaire including questions referring to: family structure, parents' divorce, prevalence of alcoholism in the family, parents' attitude towards alcohol and parent-child relationships. The study group consisted of 125 people, 83 men and 42 women, aged from 22 to 68 participating in treatment programs for alcohol addiction. The control group consisted of 231 people, 136 men and 95 women, age from 17 to 65, with no history of alcoholism.

Results: The study group participants stated less frequently that they had been raised by both parents (78% vs 87%, $p < 0.05$). In this group one of the parents significantly more frequently abused alcohol (43% vs 19%; $p < 0.05$) or both parents abused alcohol (15% vs 1%; $p < 0.05$). The participants also claimed to be more often punished for their failures, abused physically/verbally and could less often depend on their parents.

Conclusions: Based on these results we concluded that patients addicted to alcohol were more often raised by a single parent, they were more likely to have alcohol-dependent parents and relationships with their parents were more often impaired.

Key words: alcohol addiction - familial alcoholism - parenting models

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INTRODUCTION

The negative impact of alcohol abuse on the human organism is undeniable, there are a great number of diseases caused by excessive consumption of alcohol but we should not forget about the influence on a fundamental unit of society – the family (Meyrhoff et al. 2013). The family is a principal institution for the socialization of children, its basic tasks are meeting the emotional needs of its members and providing a sense of security and moral values. It is the basic institution in society for the survival, protection and development of the child. When the family is caring and supportive, it gives the child a good start and proper example for being a responsible adult. On the other hand when it is dysfunctional, it may cause in the children's future problems with finding their place in society which may be associated with the development of psychiatric conditions such as anxiety disorders (Bracik et al. 2012) or substance abuse or addiction. There is evidence that a basic factor for observed dysfunctionality is familial alcoholism (Mattoo et al. 2013). To understand how important this problem is we have to realize that it is estimated that more than half of adults have a close family member who have had alcoholism or are still dealing with alcoholism, moreover approximately one in four children younger than 18 is exposed to alcoholism or problem drinking in the family. Growing up in an alcoholic family is associated with feelings of shame, regret, resentment, chaos and isolation (Sztander

1993). Another serious consequence in alcohol dependence in mothers is the danger of Fetal Alcohol Syndrome, which can impact the development of the child in a family with alcohol problems (Przybylo et al. 2008). An alcoholic family is a family where at least one member is alcohol-dependent, most often it is the husband/father. According to Bolanowska (1989) there are four main types of attitude towards a partner's alcoholism – the positive ones are active constructive (encouraging the husband to recover from alcoholism) and defensive constructive (wife gives up on her husband but she protects her children against the father's negative influence). The negative, however very common ones, are: active destructive (drinking alongside her husband) and defensive destructive (criticism and hostility towards husband, overprotective/neglects children). Alcoholism is a disease of the family not only due to a genetic component passed from generation to generation, but because the drinking problems of a single family member affect all other family members. It is proven that a family history of alcoholism has a substantial effect on the development of later alcohol dependence (Grant 1998). Various studies have demonstrated that first-degree relatives of alcoholics are two to seven times more likely than people with nonalcoholic relatives to develop problems with alcohol at some time in their lives (NIAAA 1997). Genetic studies show a link between certain genes and the prevalence of alcoholism. In one study conducted on students it was shown that subjects with a particular version of gene

linked to the regulation of serotonin engaged in binge drinking more often, drank to intoxication more often, and consumed more alcoholic drinks per drinking occasion than did students with other variants of the gene (Herman et al.2003). Another study performed on Asian American students reported that students who carried a particular version of the ALDH gene (aldehyde dehydrogenase – enzyme responsible for the oxidation of aldehydes to carboxylic acids) were less likely to be drinking regularly and were consuming less alcohol while drinking than students with other ALDH variants (Wall et al. 2001).The National Institute on Alcohol Abuse and Alcoholism funded the Collaborative Study on the Genetics of Alcoholism (COGA). COGA researchers associated several genes with alcohol dependence in adults, i.a. muscarinic acetylcholine receptor M2 (CHRM2) gene (Wang et al. 2004) and genes encoding the GABAA receptor: GABRG3 (Dick et al. 2004) and GABRA2 (Edenberg et al. 2004). There are several of studies on the impact of alcohol abuse on the modern family. Therefore we would like to present this problem differently – how does a family influences alcoholism. How do such factors as parents’ divorce, familial alcoholism, parents’ attitude towards drinking alcohol and impaired parent-child relationships impact on future problems with alcohol.

SUBJECTS AND METHODS

356 people participated in our research study. They agreed to answer an anonymous author questionnaire. The questionnaire was divided into two parts – the first part contained questions on the general family structure and the prevalence of alcoholism in the family, while the second part was related to the parent-child relationships in the subjects’ families. The study group included 125 alcoholics, 83 men and 42 women, aged from 22 to 68 (mean age 45), patients of the Alcohol Detoxification Unit at the Specialist Mental Health Hospital in Rybnik, Poland and members of 7 Alcoholics Anonymous support groups in 3 Silesian cities – Katowice, Rybnik and Zawiercie. In the control group there were 231 people, 136 men and 95 women, age 17-65 (mean 24). Some of them were students of the Medical University of Silesia.

They were requested to answer the same questionnaire and additionally the AUDIT test to exclude respondents with the score >23 points. Statistical analysis was performed with Statistica v. 10, the results were considered as significant with a p value <0.05. The chi-squared test was used for qualitative variables.

RESULTS

Family structure

The results were as follows (study group vs control group, rounded to the nearest integer): most respondents were brought up by both parents, however significantly more often (p<0.05) in the control group (78% vs 87%); by single mothers (14% vs 10%); by single fathers (3% vs 3%); in an orphanage or foster family (3% vs 0%; p<0.05) and by other family members (2% vs 0%). More often the respondents’ parents were divorced in the study group (13.6% vs 12.9%) however this is not statistically significant. To the question "Was anyone in your family alcohol- dependent?" the answers were as follows (study group vs control group, rounded to the nearest integer): father (36% vs 14%; p<0.05); no one (25% vs 56%; p<0.05); other family members (13% vs 23%; p<0.05); other family members and parents (12% vs 6%); both parents (10% vs 0%; p<0.05); mother (5% vs 1%; p<0.05). To another question "What was your parents’ attitude towards drinking alcohol?" we obtained the following responses: one of the parents abused alcohol (43% vs 19%; p<0.05); parents hardly ever drank alcohol (21% vs 52%; p<0.05); both parents abused alcohol (15% vs 1%; p<0.05); parents occasionally got drunk (14% vs 23%; p<0.05); parents were teetotalers (7% vs 5%).

Parent-child relationship

In the last part of our questionnaire we presented sentences and asked respondents to evaluate the sentences from 1 to 5 (1-never, 2- rarely, 3 – sometimes, 4 – always, 5- never. The collected results are presented in Table 1, p<0.05 indicates statistical significance. All statements are presented below.

Table 1. Parent-child relationships (study group vs control group)

	Never	Rarely	Sometimes	Often	Always
Parents fulfilled all my needs	3% vs 1%	24% vs 5% (p<0.05)	33% vs 24% (p<0.05)	29% vs 52% (p<0.05)	11% vs 19% (p<0.05)
We could freely talk about our feelings	24% vs 3% (p<0.05)	31% vs 18% (p<0.05)	18% vs 24%	14% vs 24% (p<0.05)	14% vs 31% (p<0.05)
Parents cared about my problems	11% vs 2% (p<0.05)	23% vs 7% (p<0.05)	30% vs 24%	24% vs 31%	12% vs 36% (p<0.05)
I could depend on my parents	8% vs 2%	24% vs 7%	15% vs 17%	29% vs 29%	24% vs 45% (p<0.05)
Parents abused me physically/verbally	45% vs 69% (p<0.05)	24% vs 20%	15% vs 9%	10% vs 2% (p<0.05)	6% vs 0% (p<0.05)
Parents punished me for my failures	21% vs 42%; p<0.05	33% vs 30%	24% vs 17%	15% vs 8%	6% vs 3%

"Parents fulfilled all my needs" – the most common answer in the control group was "often" while it was chosen almost twice less frequently in the study group (29% vs 52%; $p < 0.05$); in the aforementioned group the most frequent answer was "sometimes" (33% vs 24%; $p < 0.05$). "We could freely talk about our feelings" – answers varied significantly in both groups. More than a half (55%) of non-alcoholics responded "always" or "often" whereas in the study group the exact same percentage (55%) answered "never" and "rarely". "Parents punished me for my failures" – the main statistically significant difference between both groups is in the answer 'never' which was chosen twice as often by the control group (21% vs 42%; $p < 0.05$). "Parents cared about my problems". – three times more often the answer "always" was given by non-alcoholics. As many as 34% of alcoholics responded "never" or "rarely" while these responses was given only by 9% of control group. "I could depend on my parents" – nearly twice more often the answer "always" was given in the control group 24% vs 45% ($p < 0.05$). "Parents abused me physically/verbally" – however in both groups the most common answer was "never", it was chosen significantly less often in the study group (45% vs 69%; $p < 0.05$). Answers "always" or "often" were chosen significantly more often in the study group (16% vs 2%).

DISCUSSION

A family history of alcoholism has both genetic and behavioral background. Even in non-alcoholic families parents' permissive attitudes about drinking alcohol has a profound influence on youth. There are many studies indicating that adolescence is a particularly important period in terms of alcohol initiation (Kuehn 2006). The parental pattern of consumption (quantity and frequency) impacts on young people's models of consumption throughout their lifetime. Also the aspects of parent-child relationship have been linked to adolescents' alcohol use (White et al. 2000). According to research comparing drinking levels and different parenting models the strategies that can effectively reduce adolescent alcohol experimentation are awareness of the child's whereabouts and activities and avoiding excessive conflict and strictness (Latendresse et al. 2009). Low parental monitoring is also a predictor of using psychoactive substances (Chilcoat & Anthony 1996) alongside larger family size, higher birth order, parental alcoholism and parental absence (McCarthy & Anglin 1990). When parents communicate clear norms against drinking alcohol by their children they can in most cases inhibit alcohol initiation (Kosterman et al. 2000).

CONCLUSIONS

Results of our research study indicate that alcoholics were less often raised in complete families, they more

often had alcohol-dependent parents and their parents were less caring, supportive, helpful and dependable. Based on our results we concluded that family structure and parent-child relationships have an impact on later alcohol dependence.

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