

EFFECTIVENESS OF RECOGNIZING PROBLEMS RELATED TO PARENTAL ALCOHOLISM ON MALADJUSTMENT AMONG CHILDREN OF ALCOHOLICS IN THINDAL COMMUNITY AREA AT ERODE**N. Thilagavathi*¹, Sampooram W.² and P. Padmavathi³**¹PhD Nursing Scholar, The Tamil Nadu Dr. M.G.R. Medical University, Chennai.²Principal, Bhavani College of Nursing, Erode.³Principal, Dhanvantri College of Nursing, Namakkal.***Corresponding Author: N. Thilagavathi**

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ABSTRACT

Parental alcoholism can impact children in both indirect and direct ways. This study aimed to investigate the effectiveness of problem focused strategies on maladjustment among children of alcoholics at Thindal Community Area, Erode. After obtaining written informed assent/consent, children of alcoholics subjects who fulfilled the inclusion criteria were selected. The total sample size was 60. Multi stage sampling technique was used to recruit the study subjects. CAST screening test was used to identify children of alcoholics. The CAST score above 3 was considered as the sample in this study. All participants were interviewed before intervention by assessing demographic variables. The levels of maladjustment were assessed by Mathew maladjustment inventory followed by intervening recognizing problems related to parental alcoholism. From the study findings it can be concluded that administration of recognizing problems related to parental alcoholism reduces maladjustment among children of alcoholics.

KEYWORDS: Recognizing problems, Parental alcoholism, Maladjustment, Children of Alcoholics.**INTRODUCTION**

Alcohol is a universal problem and of a great public health concern. Alcohol addiction is now the third leading cause of life style choice death. Nearly More than 3 million people died as a result of harmful use of alcohol in 2016, according a report released by the World Health Organization (WHO). This represents 1 in 20 deaths. More than three quarters of these deaths were among men. Overall, the harmful use of alcohol causes more than 5% of the global disease burden. "Far too many people, their families and communities suffer the consequences of the harmful use of alcohol through violence, injuries, mental health problems and diseases like cancer and stroke." In addition to this, the Global Burden of Disease Study (2016) also reported that alcohol stands 7th in terms of the disease risk it holds and its consumption results in premature mortality and disability (Griswold, et al 2018).

Children are vulnerable and easily affected by the environment which is provided to them while growing up. Experiences during the development period of life affects the emotional, social and cognitive development and forms the base of behavior and therefor personality in later life. During this period of life, children learn social, adaptive and coping skills to deal with situations.

These experiences are generated primary by parents, other family members, in school among peers. Successful experiences provide the child with a sense of competence, stable self- identify and coping skills, whereas failure in sense of inadequacy and poor or maladaptive coping skills. (Mansharamani 2018)

A significant way that parents indirectly influence their children is how parents model appropriate behavior. When alcoholic parents display characteristics such as prioritizing alcohol over family and work, being verbally or physically abusive, emotionally unavailable or inconsistent, their children are subjected to the harmful effects that alcoholism can have on their parents (Haverfield & Theiss, 2014).

There is strong evidence to suggest that family dysfunction during childhood can negatively influence later life experiences and adjustment. Drinking behavior may interrupt normal family tasks, cause conflict and demand adjustive and adaptive responses from family members who do not know how to appropriately respond. Parental alcohol abuse is an independent risk factor for attention and conduct problems at school. Prior research has found that characteristics of the family (e.g., parental monitoring, parental discipline, family conflict,

family rituals) may mediate and/or moderate the relationship between parental alcoholism and offspring adjustment. The Longitudinal associations between fathers' heavy drinking patterns and children's psychosocial adjustment results demonstrated significant and meaningful associations between these drink patterns in fathers and adjustment problems in children over time. (Sekar et al., 2007)

Saranbharati.B et al (2016) conducted a descriptive study to assess problems faced by the adolescents of alcoholic parent in selected community area, Kancheepuram district, Tamil Nadu. The data collected from 50 adolescents (Girls and boys) in the age group between 15 to 18 years. Study show that 9(18%) severe problems, 31(62%) moderate problems and 10(20%) mild problems. Study shows that there was significant association between the levels of problem faced by the adolescents of alcoholic parent with age and occupation of alcoholic parent (p value = < 0.05).

Karegaonkar Abhijeet M, Arun Kumar V (2021) conducted a cross sectional study of psychiatric morbidity in children of alcohol dependent fathers in private de-addiction centre in South India. Sixtyfive children in age group of 6 to 18 years, whose fathers were admitted for alcohol dependence syndrome. The result revealed that 55.4% (36/65) of children had some lifetime psychiatric diagnosis. Most common group of disorders found were anxiety disorders (41.5%) followed by mood disorders (35.4%), while 1.5% of the children had each adjustment disorders, disruptive behaviour disorders, mental retardation and disorders in 'others' category.

In Indian scenario, identification of children of alcoholics given less importance. So that its necessary to identify the risky children in community and school. As a health care professional, it is our prime responsibility to identify those children of alcoholics and give supports to overcome, the problem faced in those child' life (Yang S.H and Lee P.S 2005). The nurses play a major role in identifying these groups, rendering counseling and support and motivating them to utilize help from various sources. Nurses working in community have responsibility of understanding their needs and problems and rendering care by giving them an opportunity to ventilate their bottled emotions. She can also act as a counselor and as a facilitator for children of alcoholics.

Only few studies have looked at the impact of parental alcohol misuse on children. Lack of previous research in this area and the prevalence of alcoholism are very high in both rural and in urban areas. Therefore, the present study aimed to investigate the effectiveness of problem focused strategies on maladjustment among children of alcoholics.

MATERIALS AND METHODS

After obtaining written informed assent/consent, children of alcoholics subjects who fulfilled the inclusion criteria such as with age between 15 and 18, both genders were selected. The total sample size was 60. Multi stage sampling technique was used to recruit the study subjects.

CAST screening test was used to identify children of alcoholics. The CAST score above 3 was considered as the sample in this study. All participants were interviewed before intervention by assessing demographic variables. The levels of maladjustment were assessed by Mathew maladjustment inventory followed by intervening recognizing problems related to parental alcoholism which comprises of the following

- ✓ Children of alcoholics were made to recognize the stress and its symptoms by the following ways
- ✓ The investigator encouraged open and honest conversations with the study participants. Asked about their feelings and thoughts while the parent consumed alcohol. Created a safe and non-judgmental space for discussion.
- ✓ Shown puppet show on problems faced by children of alcoholics in the family.
- ✓ Used open-ended questions to encourage the subjects to express their thoughts and feelings. Questions like, "Can you tell me more about what's been bothering you?"
- ✓ The investigator responded with empathy and understanding. Expressed that investigator care and want to help. Phrases like, "I can see that you're going through a tough time, and I'm here for you,".
- ✓ Asked questions that prompt self-reflection, such as, "Have you noticed any physical symptoms when you're stressed?" like digestive and appetite issues such as stomach aches, upset stomachs or loss of appetite, headaches sleep cycle issues such as trouble falling asleep, staying asleep or having frequent nightmares, bedwetting, poor academic performance, regressive behavior like thumb sucking, throwing tantrums, new or recurring fears, inability to relax or calm down, trouble with controlling their emotions
- ✓ The investigator paid close attention to the words, tone, and body language and non-verbal cues, like body language and facial expressions. These can provide valuable information about a subjects' stress level.

Recognizing problems related to parental alcoholism were intervened for 2 weeks, with duration of 30–45 min. at the end of 1st week post-test I was conducted and at the end of 2nd week posttest II was conducted by using the same assessment techniques for all participants.

Descriptive, parametric, and non-parametric statistical methods were used to analyze and interpret the data. The data were expressed as frequency, percentage distribution, mean, SE. Paired "t" test, was used for

estimating the effectiveness of Recognizing problems related to parental alcoholism. A probability of 0.05 or less was taken as statistically significant. Statistical Package for the Social Sciences, PCT version 17(SPSS Inc, Chicago) was used for analyzing the data.

RESULTS

Description of sample characteristics

Frequency & Percentage distribution of demographic variables among children of alcoholics

Distribution of children of alcoholics according to their age group shows that 51.66% of them were 15-16 years and 48.33 were 17-18 years. 51.7 % of the children of alcoholics were male and 48.3 % of them were females. Most (40%) of them were studying 10th standard, 31.7% of the children of alcoholics were studying 12th standard, and 28.3% were studying 11th standard. According to the birth order, highest percentages (55%) of them were first born, 35% were second born and 10 % were third born. Family monthly income showed highest percentage (61.7%) earned Rs.5000-10,000 and 28.3 % belong to the income group of Rs.10001- 15,000 and 10 % children of alcoholics belong to the income group of Rs.15001-

20,000. According to the residential area, 63.3 % were living in rural area and 36.7 % were living in urban area. Highest percentages (76.7%) were living in nuclear family and 23.3% were from joint family. Father's educational status reported that 58.3% were illiterate, 30% were educated up to primary and 11.7% were educated up to higher secondary. Mother's educational status reported that 25% were educated primary education and 43.3% were illiterate and 31.7% were educated up to higher secondary education. Parent's occupation showed that 43.3% of them were unskilled worker and 56.7% were skilled worker.

In pretest, 10% showed with mild level of maladjustment, 62% with moderate maladjustment levels and 28% had severe level of maladjustment. In posttest I, 27% experienced mild level of maladjustment, 73% of subjects showed moderate maladjustment levels and none of the subjects had severe level of maladjustment. In posttest II, 55% experienced mild level of maladjustment, 45% of subjects showed moderate maladjustment levels and none of the subjects had severe level of maladjustment (Table 1).

Table 1: Frequency & Percentage distribution of level of maladjustment among children of alcoholics.

Level of Maladjustment	Group (n=60)					
	Pretest score		Posttest score I		Posttest score II	
	Frequency (N)	(%)	Frequency (N)	(%)	Frequency (N)	(%)
Mild	6	10	16	27	33	55
Moderate	37	62	44	73	27	45
Severe	17	28	-	-	-	-

Domain wise comparison such as anxiety, depression, mania, inferiority, paranoia and general maladjustment of the mean scores decreased in the post test and showed significant reduction in level of maladjustment among children of alcoholics. The Paired t- test value of

maladjustment scores of anxiety, depression, mania, inferiority, paranoia and general maladjustment showed statistical significance among children of alcoholics (Table 2).

Table 2: Domain wise maladjustment levels among children of alcoholics.

Domains of Maladjustment	Group	Mean	SD	T value	P value
Anxiety	Pre-test	9.90	2.468	5.977S	0.0001
	Post-test	7.70	2.118		
Depression	Pre-test	11.47	4.782	4.154S	0.0001
	Post-test	8.43	2.971		
Mania	Pre-test	8.51	2.078	9.182S	0.0001
	Post-test	5.93	1.087		
Inferiority	Pre-test	9.70	2.545	7.835S	0.0001
	Post-test	7.17	2.068		
Paranoia	Pre-test	9.18	3.367	4.897S	0.0001
	Post-test	6.67	2.144		
General maladjustment	Pre-test	13.93	4.434	9.716S	0.0001
	Post-test	8.98	2.467		

The association between posttest maladjustment scores and demographic variables such as father's education and parent's occupation showed statistical significance among children of alcoholics. Whereas there is no

significant association was found between age, gender, educational standard, birth order, family monthly income, residence, type of family and mother's education (Table 3).

Table 3: Association between Posttest Maladjustment Scores and Selected Demographic Variables among Children of Alcoholics.

Demographic Variables	Df	χ^2	P Value	Level of Significance
Age	1	0.20	0.88	Not significant
Gender	1	0.62	0.80	Not significant
Educational standard	2	0.99	0.60	Not significant
Birth Order	2	2.74	0.25	Not significant
Family Monthly income	2	2.78	0.24	Not significant
Residence	1	4.07	0.13	Not significant
Type of family	1	0.03	0.84	Not significant
Father's Education	2	6.59	0.03	Significant
Mother's Education	2	1.13	0.56	Not significant
Parent's Occupation	1	3.56	0.04	Significant

DISCUSSION

Somni Thomas (2010) conducted a study on assess the problems of children of alcoholic in selected community at Mangalore. The study result showed that majority 53.3% of children of alcoholics had moderate problems, 45% had severe problems and 1.7% had mild level of problems. The study revealed that there is association between sex and problems of children of alcoholics.

The Study findings show that children raised in alcoholic parent homes are faced many challenges and had unpleasant experiences as well. Such challenges include a higher incidence of maladjustment problems. However, the study findings also highlight the quality of care given to the Children of alcoholics. It thus becomes essential to plan interventions that would reduce their worries, and help them in coping and thus improve their psychological wellbeing. Children are the back bone of our society. So, it's essential to take care the living environment and the environmental conditions, which may change the child into a deviant personality. So much more attention should be in the research area for the welfare of the children of alcoholics.

From this study finding it can be concluded that administration of recognizing problems related to parental alcoholism reduces maladjustment among children of alcoholics.

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