



STUDY ON THE ADOLESCENT CHILDREN'S PSYCHOLOGICAL WELL BEING OF ALCOHOLIC PARENTS OF COASTAL AND NON-COASTAL AREAS

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ABSTRACT

According to the findings of several studies, the negative consequences of alcohol use on a person's life are pervasive and easily observable in all aspects of that person's existence, including the physical, the psychological, the social, and the economic. The low quality of life and heavy reliance on alcohol that is common among the coastal inhabitants of Kerala, who are predominantly male, creates problems for family life and the children's schooling. According to research, the majority of evenings in the families of alcoholics who are dependent include arguments and disruptions in the normal flow of the home environment. This has a negative impact on the children who are born into and raised in homes where at least one parent is an alcoholic, regardless of whether or not the family lives near the seaside. The psychological well-being of children whose parents are hooked on alcohol is frequently called into question and frequently presented with challenges.

The research explores the psychological wellness of children whose parents drink too much utilizing a descriptive research design and a proportional random sample method in which data was collected from children from Thrissur District and Ernakulum District equally, irrespective of their gender. Based on their geographical area (coastal or non-coastal) and gender (male or female), the results show that the psychological wellbeing of the adolescent children of alcoholic addicted parents is found to be at a moderate level.

This is true regardless of whether the children come from a coastal or non-coastal area. The children of these parents are more likely to struggle with worry, tension, low self-esteem, and a lack of direction in their life goals. A rise in this can help people better their orientation in life, purpose in life, and personal growth experience, which can lead to a feeling of having mastery over their life and autonomy

Keywords: Coastal, Non-Coastal, Alcoholic, Psychological Well-being.

1. INTRODUCTION

The impacts of alcohol use on a person's life are extensive and visible in all aspects (physical, psychological, social, and economic) of that person's life. Researchers have demonstrated that alcohol consumption has a negative impact on brains and leads to behaviour that increases the likelihood of adverse outcomes such as



later alcohol dependence, sexually transmitted infections, unintended pregnancies, sexual assaults, and even suicide as well as additional deaths. Because every individual is a member of a family, it has an effect on the other members of the family. Additionally, the collective and long-term impacts are felt by all parts of the society in which we live, with the health sector being the one that is most negatively affected. Intoxication, often known as drunkenness, and alcohol dependency are two of the negative effects that can result from drinking alcohol. Alcohol is a contributor to traumatic outcomes that kill or disable at a relatively young age, resulting in the loss of many years of life due to death or disability. In addition to chronic diseases that may affect drinkers after a number of years of heavy use, these outcomes can be brought on by heavy drinking (WHO, 2004). Alcoholism is a chronic disease that can present itself in a variety of ways, depending on a number of factors, including genetics, social factors, neurological factors, and environmental factors (Maher, 2017). Both the motivations we drink and the effects that drinking to excess may have on our mental health are intricately connected to one another. For the most part, common folks have been baffled by it (Foundation, 2008). However, each year one in every four of us will struggle with a mental health condition. The need to remove the stigma around mental health is one that must be addressed immediately. Alcohol use is one of the aspects of mental health that receives the least attention, despite the fact that it is one of the most essential elements overall. Alcohol is intertwined with many aspects of our lives; we use it in a variety of contexts to help us relax, feel braver, introduce ourselves, drown our sorrows, seal business deals, celebrate life events, remember, forget, welcome people, get to know people, and say our goodbyes; and sometimes we use it simply because we have forgotten how to do anything else without alcohol (Jain, Jay Mishra, & Singh, 2017). Addiction is usually always about the attempt to relieve unpleasant feelings. It is a condition that occurs when a person consumes a substance (such as alcohol, cocaine, or nicotine) or participates in an activity (such as gambling or pornography) that can be pleasurable, but the continuous use of which becomes compulsive and interferes with ordinary life responsibilities (such as work, relationships, and health, for example). It is a condition that is known as addiction. It's possible that users are unaware that their conduct is out of control and generating issues for both themselves and those around them (Trust, 2017). The coastal inhabitants of Kerala are well-known for the hardships they face to make a living and the ways they live. The majority of people living in Kerala's coastal areas are dependent on the sea and other maritime industries. The individuals whose livelihood is dependent on the sea have to put in a lot of physical effort in order to make a living while going about their everyday lives. This does not need a significant amount of schooling but rather the gradual acquisition of expertise via experience. Due to the fact that the majority of them engage in physically demanding work, they frequently turn to alcohol and other substances



for relaxation. They are not even adequately instructed to save what little money they make, and they ignore the measures and efforts made by the government and other organizations in this area. The low quality of life and heavy reliance on alcohol that is prevalent among coastal residents, the vast majority of whom are male, creates tension within families and interferes with the education of children. According to research, the majority of evenings in the families of alcoholics who are dependent include arguments and disruptions in the normal flow of the home environment. This has a negative impact on the children who are born into and raised in those homes. Whether they are from a coastal or non-coastal area, children who live under the care and protection of alcoholic parents frequently display symptoms of mental health conditions such as stress and anxiety, addiction to drugs and alcohol, and behavioral problems. The psychological well-being of children whose parents are hooked on alcohol is frequently called into question and frequently presented with challenges. Children of alcoholics, who are dependent on alcohol, whether they live in coastal or non-coastal areas, frequently have difficulties in balancing the requirements of their social, physical, and mental health.

1.1 Alcoholic Consumption and Well Being

Drinking alcohol is usually used to celebrate, relax or mingle with others. Our age, family history, how often we drink, and how much person consume are crucial elements when assessing our connection with alcohol. However, drink in excess, as a strategy to cope with or ignore other issues and tensions, it can lead to health and emotional problems. Alcohol misuse crosses across gender, race and ethnicity. Nearly 14 million persons more men than women in the USA are addicted on alcohol or have drinking issues. Issues regarding alcohol intake include memory loss, hangovers and blackouts. Long-term issues connected with heavy drinking include stomach disorders, heart difficulties, cancer, brain damage, memory loss, and liver cirrhosis. Heavy drinkers also considerably raise their odds of dying from motor accidents, murder and suicide. Alcohol consumption and misuse is also associated to a greater frequency of unemployment, domestic violence, and legal troubles. Co-morbidity is presence of a mental condition with alcohol use disorder. This dual diagnosis reports 60-70 percent of cases. One among the main explanation for psychiatric condition is chemical imbalances took place in the brain.

The risk for developing alcoholism is determined by both hereditary and environmental variables. Alcohol misuse tends to run in families: The rate of the condition is three to four times greater in close relatives of alcoholics, and the risk increases proportional to the closeness of the genetic tie. Environmental influences include cultural views about drinking, availability of alcohol, stress levels, substance misuse by peers, favorable expectations regarding the use of alcohol, and maladaptive ways of coping. Impulsivity as a



personality trait is also associated to heavy alcohol usage and abuse. The risk for consuming alcohol also increases if individuals use drinking to avoid thinking about things, to numb themselves to their difficulties, to manage with anxiety, fears or mood troubles, or to boost their creativity.

1.2 Dependence of Alcohol in Kerala

The use of alcohol has become an unhealthy fixation in modern Indian society. One of the states in India with the greatest per capita use of alcohol is Kerala, often known as "God's own city." The culture of consuming alcohol in India has developed over the course of several centuries. Throughout its history, India has had a complicated relationship with alcohol. The beginning of the East India Company was directly responsible for the liberalization of the liquor market in India, which in turn caused an increase in the use of alcoholic beverages. One of the states that have historically had a significant amount of people drinking a lot of alcohol is Kerala. Following that time period, people in India, particularly in Kerala, started drinking alcohol at younger ages. This trend was particularly noticeable in the state of Kerala. The majority of those who reported starting to drink at a younger age were heavy drinkers. As a consequence of this, there was a rise in the prevalence of alcohol dependence.

Alcohol use dates back quite a ways in Kerala. As we move into the contemporary period, the socio-political makeup of Kerala has contributed to changes in the state's drinking culture. Alcohol consumption among the tribal people of Kerala is a prime example of this pattern. According to one source, "Tribal drink both country-made arrack (Known as kottuvady) and also foreign liquors like brandy and Western-oriented lifestyles, including increased drinking of factory produced strong drinks, of which whiskey is generally the most widely used." When it comes to the usage of alcoholic beverages, Kerala has recently developed a highly materialistic attitude, which is a very concerning trend. The use of alcohol in this state places it at the top of the national rankings. Between the years 1980 and 2010, there was a consistent growth in the consumption pattern. According to the Alcohol and Drug Information Centre (ADIC), India (2017), the average annual use of alcohol in Kerala is 8.3 litres per person. Additionally, 20% of the state's general population partakes in alcohol drinking. The use of alcohol is also at a higher level in Kerala (14 percent of the population consumes alcohol on a daily basis), in comparison to the other states in the country (where on an average, 11 percent drink on a daily basis). In compared to the other states in the country, a disproportionately high number of men between the ages of 50 and 54, as well as widowers and those who have never been married, drink alcohol every day. Additionally, the age at which people begin drinking for the first time has been slowly lowered from 19 years (1986) to 13 years (2001). The data on sales indicate



that there has been a significant growth in sales since the middle of the 1990s. Even though there are sufficient laws for the prohibition of alcohol misuse, including this directive principle of state policy, the government has been ineffective in addressing issues relating to alcohol consumption. This is the case despite the fact that there are such laws in place. As more time passed, the state administration did not apply the restriction with the appropriate level of sensitivity. As a consequence of this, the sale of alcoholic beverages eventually became the state government's second greatest source of revenue.

2. SIGNIFICANCE OF THE STUDY

In middle-income countries, alcohol is the third-highest sickness and disability risk factor (World Health Organisation, 2011). Alcohol-dependence is characterised by behavioural, cognitive, and physiological symptoms, including a strong desire to take the drug, difficulty controlling its use, persisting in its use despite harmful consequences, prioritising drug use over other activities and obligations, increased tolerance, and sometimes a physical withdrawal state (World Health Organization, 2006). Harmful drinking impacts others before the drinker's health. Alcoholism harms children most (Klingemann & Gmel, 2001). 780,000 to 1.3 million UK children are impacted by parental drinking (Prime Minister's Strategy Unit, 2004). Euro care and COFACE (1998) used obsolete data from European countries with varied alcohol consumption patterns. The lower estimate comes from Danish adolescents. This is an underestimation as many problem drinkers are never hospitalised or their ailment isn't alcohol-related. Higher estimate based on Finnish children damaged by parental alcohol use. Alcohol-related harm is caused by intoxication or other physiological processes, not addiction. Alcoholism is secondary to drinking pattern. New users, especially teenagers, are at risk because of their inexperience with alcohol (e.g., car accidents, fighting, antisocial behaviour). Peer-group 'experimentation' often leads to teen drinking. School doesn't allow drinking, unlike smoking. Schoolmates often drink first. In the family, it might happen around birthdays or weddings. Younger people are drinking. Parental drinking may affect children's capacity to make a living and receive an education as they grow older. Failure gives children shame, remorse, and mental illness. The researcher decides to investigate drunken parents' children in Kerala. Psychological health of alcoholics' children may vary by area.

3. OBJECTIVES OF THE STUDY

- Understand socio-demographic Profile of the Respondents/
- Study on psychological wellbeing of children of Alcoholic Parents.
- Compare psychological wellbeing of the respondents based on their gender and area of residence.



4. MATERIALS AND METHODS OF THE STUDY

Researchers used a method called "proportional random sampling," which took 50 percent of people from the Thrissur district and 50 percent from the Ernakulam district, no matter what gender they were. From the list of hospitals that meet the inclusion and exclusion criteria, a sample of 150 people from each district is chosen as a representative sample. It means that out of every 150 samples in a district, 75 people are chosen from coastal areas and 75 people are chosen from areas that are not on the coast.

4.1 TOOLS OF DATA COLLECTION

Socio-demographic Profile: The researcher used a tool that he or she made on their own to study the socio-demographic profiles of the respondents. It asks where the respondent lives, what their gender is, how many siblings they have, what extracurricular activities they do, how much alcohol they drink, and how often they go to parents meetings.

Ryff's Psychological Well-Being (PWB) Scales: The 42-item version has six dimensions: autonomy and mastery of the environment, having a purpose in life, having a positive attitude, accepting yourself, and growing as a person. The more points you get, the better your mental health, and less points you get, the worse your social health.

5. RESULTS AND DISCUSSIONS

People who live on the coast and people who don't live on the coast have different ways of life based on where they live, their social status, and their culture. According to how the study was set up, the people who took part in the study were chosen on purpose based on inclusion and exclusion criteria. According to the study, in order to get a fair and balanced view of the respondents, the same number of people from coastal and non-coastal areas (150 each) was chosen as respondents. It's important for the study to look at how people of different genders live in coastal and non-coastal areas. Gender affects the way people think and act, and the researcher makes sure that both men and women are represented equally. The respondent's relationship with his or her siblings may affect his or her social and mental health. The respondent's sibling may help shape their behaviour and social life by supporting and encouraging them. According to the study, most of the people who took part have siblings (84 percent).

Table1 Distribution of the Respondents Levels of Psychological Well-being

S.NO.	LEVELS OF SOCIAL WELLBEING	NO.	PERCENTAGE
1.	LOW	28	9.3%
2.	MODERATE	272	90.7%
	TOTAL	300	100%

Based on the data in the above table, it can be seen that all of the respondents, no matter their gender or where they live, have a moderate level of psychological well-being. This suggests that the parents' alcoholism may have had a big impact on the mental health of their teenage children, both in coastal and non-coastal areas. The fact that their psychological well-being is only moderate means that social workers need to step in as soon as possible to raise it from moderate to high.

Table 2 Levels of psychological well-being based on gender of the respondents

S.No.	Levels of Psychological Well-being	Male		Female	
		N	(%)	N	(%)
1	Low	7	4.7%	12	8%
2	Moderate	143	95.3%	138	92%
	Total	150	100%	150	100%

According to the table above, the respondents did not have a moderate level of psychological well-being. Comparing the respondents' psychological well-being based on where they live (coastal or non-coastal) and their gender (male or female, which is spread out equally), it is interesting to see that none of the respondents have a high level of psychological well-being. It could be because their parents are alcoholics or because they come from a family of alcoholics. According to the study, the level of psychological wellbeing is the same for both men and women, no matter where they live or whether they live near the coast or not. It



means that the parents' drinking habits do have an effect on the social well-being of their teenage children.

6. CONCLUSION

The life style of the costal and non-costal people is varied in terms of their environment of social status and cultural life. As per the study design the respondents of the study was selected purposefully fulfilling inclusion exclusion criteria. As per the study in order to provide equal and balanced view of the respondent total number of the respondents is selected equally representing costal and non-costal area i.e., 150 each. Gender perspective of the people living in costal and non-costal area is important for the study. Gender influences attitudes and behavioural patterns and an equal distribution of the both genders, male and female, is made by the researcher. Sibling relationship of the respondent may influence social and psychological well-being. The sibling may act supporting and promoting roles in the formation of the behaviour and social life of the respondents. The respondents as per the study majority of them have (84%) sibling in their families.

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