

LET'S BREAK THE SILENCE

THE CHILDREN IN THE FAMILIES WITH

ALCOHOLICS

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Abstract

In this paper I expose the negative influences that children in families where one or both parents are alcoholic endure. Several case studies which show the harmful effects of alcoholism upon children, the most vulnerable category affected, are presented and analyzed in the paper. In the end there are mentioned the stages of recovery from the disease of alcoholism as well as the importance of family support in this difficult process.

Keywords: alcoholism, codependency, children of alcoholics, alcoholics treatment

1. Introduction

Alcohol dependence is a disease which, in the Romanian society, is unfortunately seen with indulgence. The reason is twofold: on the one hand, information concerning alcoholism is still quite little - few people are aware of the fact that alcohol is a potential drug and alcoholism is an illness, making it part of the addictions. On the other hand, the contemporary society rather encourages alcohol consumption, which makes the boundary between 'normal' and 'excess' quite difficult to be determined in the case of alcohol consumption. Consequently, many people addicted to alcohol either choose too late to undergo proper treatment or do not choose it at all [1].

Alcohol is one of the substances related to the so-called 'legal highs', acting directly on the functions of the central nervous system. Although it may determine abuse and dependence, alcohol is the drug most widely used in our culture. The reason is that the effect of the alcohol is felt, in the first stage, as being pleasant. Thus, alcohol can help one overcome states of fear and inhibition, it can make loneliness bearable, it can reduce the feelings of inferiority, the tension and the fear of failure and it can increase the feelings of joy. Regarding its effect on the psyche, alcohol acts in two phases: in small doses, it has a stimulating effect and in higher doses it has an inhibiting effect on

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the central nervous system. Thus, alcohol has effects similar to some sleeping pills and tranquilizers upon the central nervous system [2]. Some research shows that the limit between a harmless consumption and a harmful consumption would be 40 grams of pure alcohol per day for men – i.e. approx. 0.1 l strong drink, 0.4 l of wine or 1.0 litres of beer - and half of this amount for women [1].

As I have mentioned before, the most important feature of the alcohol is that it is not perceived as a drug but rather as an integral part of our lives, our culture and our economy. We are dealing with a ‘masked’ drug, generally accepted by society and this fact consequently increases its dangerousness. However, we shall see next that danger lurks not only alcoholics, but also those around them, especially children who are extremely helpless against the harmful effects of the alcohol.

2. Effects of alcohol abuse on individual

When drunk, there are many physical and mental changes regarding: 1) mental state - from the good mood (euphoria) to depression, anger and aggression, 2) initiative - from stimulation to inhibition, 3) social behaviour - from facilitating some contacts to aggressive manifestations, 4) state of consciousness - from the feeling of being conscious to dizziness and even coma, 5) reasoning - slowing the process of thinking or the emergence of obsessive ideas, 6) motricity - a more difficult speaking, uncontrolled gestures and disturbances in the coordination of the movements, also some neuro-vegetative changes may occur (vasodilatation, heart rate changes, nausea and vomiting, etc.). These changes become more obvious with the increased drunkenness, it is considered that the lethal risk is from 3 ‰, death usually occurring at a blood alcohol level of more than 5 ‰ [2, p. 40].

In time, the body develops a tolerance to alcohol, which makes it generally easy to distinguish two types of abusive drinkers: the drinker ‘in the habit’, who drinks regularly to feel at ease, and the drinker ‘when having problems’ the one who ‘treats’ his/her discomfort, the feelings of inferiority or the spiritual crises with alcohol. Regardless of the reasons why someone starts drinking, alcoholism leads to one or more of the following symptoms: restlessness inside, aggression, sleep disorders, fear, mood swings, inferiority complexes (sometimes hidden by a facade of megalomania) difficulty concentrating and memory gaps, lack of will, increased superficiality, increased emotivity and sensitivity, distrust of the intentions of others, slapstick, euphoric mood, tendency to reduce or deny problems, reducing spheres of interest and tendency toward isolation, frequent change of job, possibly the house, hiding empty bottles while having a strong sense of guilt [2, p. 124].

3. Social and family consequences of alcohol dependence

The negative effects of alcoholism are reflected not only in the individual who abuses alcohol, but also in his family and social environment. This should

include: impaired interpersonal relationships, reduced sense of responsibility towards the others, neglecting the education of children, delay and absence from work, accidents at work and car accidents, demotion in career, loss of other people's respect and even loss of home and possibly delinquency.

The entrance of those around the alcoholic into the 'Labyrinth of codependency' is very complicated. There are ten fundamental characteristics of the codependent person: 1) the codependent person is dominated by one or more obsessions, 2) he/she is marked and suffers from the problematic situation in the family in which he/she was raised, 3) has very low self-esteem, 4) is sure that his/her happiness depends on others, 5) feels overly responsible for others, 6) shows a lack of balance between dependence and independence, 7) is a master of denial and repression, 8) worries excessively for things he/she can not change, 9) falls easily out of one extreme into another and 10) is in a permanent search for something to give a meaning to his/her life [3]. Not incidentally, many of these symptoms are found in children from families with an alcoholic parent/alcoholic parents.

4. „Let's break the silence ...”

Even if it is not noticeable at first glance, the alcoholics' spouses and children are particularly affected physically and emotionally. Children from families with alcoholics seem to be more mature, but they lack parental care; not only that they don't receive it, but they should really offer it. They are often ashamed because of their parents, they find excuses and they lie to defend and get to fight with other children their age when these mock at their alcoholic parents. The vast majority of these children suffers in silence and does not complain. Initially they feel guilty for the suffering of their parents and they can even believe that they have certain guilt in the suffering of their parents. Later, especially in adolescence, they can get to despise their alcoholic parents [2, p. 132].

These events, like others, are evident if we consider some testimonies of children from families with an alcoholic parent or alcoholic parents [4]. One of them says that his father never had time for family: either he was working or he was drinking. The child never felt him close to him, which inevitably led to a cold between the family members. What's more, when the father was absent from home a longer time to attend a professional course, they regarded this period as an 'oasis of tranquillity'. The main stressor was removed. Conclusion: the child felt the father like a stranger and „had he died then, I do not know if I had cried” [4, p. 11-14].

Sonja, 19, asks rhetorically: „How could I explain the schizophrenia in which I lived every day?” On the one hand, she had to hide the signs of the drama she was living with an alcoholic father, on the other hand, in her family, along with the other members of the family, she experienced a real drama. Her father was always making a scandal when he was drunk and awaiting his arrival home was always an opportunity for continuous stress. The greatest desire was

that in the future, maybe the father will stop drinking and everything will be normal in her family. Then the relationship with the others could be a normal one, not one marked by a continuous lie [4, p. 32-34].

The testimony of the 26-year-old Beate is similar. Her childhood was a taboo for a long time since it was marked by the negative experience lived with an alcoholic father. Her mother's only consolation and confident was Beate, as her brother Ralf was younger. Thus, the teenager heard things which were inappropriate for someone her age, which in time led to envy towards her brother – who did not (apparently) have to go through this – and hatred of the father, because of all the evil he had done. All these negative feelings were doubled by the love she felt that she must have for both parents, which split her behaviour. In time, she even got to not having contact with parents, the situation improving somehow only after the father went to rehab [4, p. 37-38].

20-year-old Peter confesses that he has lived 'like in a prison'. His father was drinking, his mother was weeping much, and in time he came to regard this situation as normal, but this had not to be told to other relatives or acquaintances. A moment of great shame was when his father was coming home drunk and Peter and his sisters were having guests. Equally embarrassing was when mother was complaining to her children that „your father came home drunk once again”. Continuous stress brought the children into a state of permanent fear of others, but especially into a hatred of father. They even wanted their mother to part with father. Peter finally got to pretend that everything was fine, thus to act, laughing when he should have cried. This situation lasted until today [4, p. 39-40].

If one of the parents falls into addiction to alcohol, this almost inevitably leads to the formation of 'coalitions' among the other members of the family. The cases are atypical: either the father is the 'weak link', the weak and helpless one, or he is the factor of tyrannical power. Generally, alliances are between the mother and the children against the father. In time, it can be concluded that the family would be better off without the destabilizing factor, the alcoholic one.

A complex case is that of Ursel (24 years old). In her family there was a split of the following type: an alcoholic father and the coalition formed of Ursel, her mother and her maternal grandfather. The interdenominational differences were at stake: her father was Protestant, her mother and her grandmother was Catholic and she was also baptized Catholic. Being violent to the mother and Ursel, sometimes the father was causing them to leave house and go to their grandparents. After a while they were coming back home, hoping that things would improve. Her grandfather was often intervening in the conflict and was arguing with her father. At one point her father left home. Ursel stayed in contact with her father and in time, relations thawed not only between mother, daughter and father, but also with her grandfather. Ursel believes that forgiveness and prayer played an important role in this [4, p. 45-49].

Karin, 20 years old, says that the time that her father was in therapy was the best time of her life so far. But though her father came to stop drinking, he remained as cold and cynical as before. So she remained attached to her mother.

But because her mother was taking her father's side, Karina estranged more and more from her. According to her confession, it was only among friends that she could find what she was lacking at home: communion, freedom, unconstraint, joy, forgiveness [4, p. 51-53].

Other testimonies reveal life with an alcoholic as living in uncertainty and fear day by day. Gudrun (19) confesses he is very concerned for his mother's life. This comes from the tensioned relationship with an alcoholic father who has repeatedly hit his wife and threatened to throw her out the window. The child feared greatly that he would lose his mother; sometimes he was waking up at night and went to listen to his parents' bedroom door. Sometimes they were quarrelling, and the child was shaking with fear. He came to isolate from the rest of his colleagues, just as his mother's family was avoiding his mother. Even today Gudrun fears that his mother might be hurt or that she could commit suicide [4, p. 61-63].

In families in which parents are alcoholic it may happen that one or more of the children take the role of a parent. Subjected to stress, forced to examine themselves and the others with greater acuity, they are subject to faster maturation. 26-year-old Monika remembers how she had to take care of her younger brother like a mother. Why? Because her father became an alcoholic. Problems began when her parents began to build a house. Money was lacking, the mother became increasingly nervous and the father started drinking. For the youngest child, Thorsten, 'salvation' came from his older sister because their parents were neglecting him (sometimes grandfather was taking care of the boy). Thus the young girl was acting as a parent, despite her young age [4, p. 69-77].

Children depend on parents. But what happens when one of the parents is addicted to alcohol? It is possible for the other parent to take almost all control over the family. This situation is described by Michael (20 years old): „everything was under my mother's control” [4, p. 93-95]. His mother tried to have total control over the family even after his father went to rehab. But the child felt this as an abnormal situation although in the previous situation, when his father was an alcoholic, it all seemed natural. Now he is determined to never marry a woman like his mother. Conclusion: not only the father but also the mother needed therapy [4, p. 95-96].

Having an alcoholic parent may result in feeling guilty. Is the alcoholic parent the only person to be guilty? Is his co-partner guilty? What about the family, the child or the children? If given another family, would not the alcoholic parent have been drinking? Let us listen now to the strange confession of Bernd (20 years old), who asks rhetorically: „Am I guilty that my father became an alcoholic?” [4, p. 105-110]. He had a sickly mother, the family chore being made especially by the father and by the maternal grandmother. The latter was actually running the household, including managing finances. Father, who was receiving only a small amount of money and was always receiving orders from his mother-in-law, started drinking. Bernd was sent to buy beer, more bottles and more bottles every day. He was always rewarded with small sums of money – the price paid by the father for not saying anything to his grandmother.

Becoming an alcoholic, father began to tremble if he did not drink alcohol; he was hospitalized in a clinic and Bernd began to wonder whether he was guilty because he had bought the alcohol for his father. He asked his grandmother if that was the case, but he received no response. The therapist denied his fears and Bernd told this to his grandmother. After the cure, the father returned home and grandmother ceased to act authoritatively. Mother 'cured' – perhaps the disease was an attempt to escape from under her mother's dictatorship – and father never drank again. Every year there was a small celebration, to which the former colleagues from the rehab were invited. The wife never drinks alcohol and there is no alcohol kept in the house [4, p. 110].

The problem of guilt also arises in the case of Peter (21 years old). Even if he does not remember exactly when his father started drinking, he remembers that his mother, aunt and sisters were suffering because of it. Thus he came to hate his father. Today he confesses that he no longer hates him, but he hates the alcohol which has produced so much suffering to him. Father quit drinking and the family's confidence in him grew. Peter remembered the commandment of the Decalogue 'Honour thy father...' and wonders if he behaved correctly towards his father fell into alcohol addiction. He is suffering for his behaviour and he is praying to the Father: „Father, forgive me” [4, p. 117-118].

Even if in the Romanian society the traumatic testimonies of the children who live in families with alcoholics are less publicized, it does not mean that they do not exist. We mention here only one case: Johnny, a 5-year-old boy, was abused physically and mentally (and possibly sexually) by his father, an alcoholic. It is outrageous that at one point he was taken to the orphanage but, following an extremely brief evaluation, he was then 'reintegrated into family' which made Johnny suffer further mistreatment of the father [5].

5. Children in families with alcoholics: the most vulnerable

The foregoing testimonies reflect the vulnerability of children in families with alcoholics and also the negative effects that alcoholism has on their development. Living in a family where there is an alcoholic means to live an experience that will follow you all your life. The negative effects of alcohol on children send us to the Bible verse that says „The fathers have eaten sour grapes, and the children's teeth are set on edge” (Ezekiel 18.2) [6, 7].

Although alcoholism is not inherited so obvious as some personal characteristics (eye colour) or certain hereditary diseases, however it was noted that the risk of becoming addicted to alcohol is four times higher in the case of children from alcoholic families. Therefore, even if the addiction is not directly hereditary and not all children of alcoholics will become, in their turn, dependent on alcohol, the risk is much greater in these cases. Why? Because the biological heritage is accompanied by a 'social inheritance', i.e. certain learning processes that the children from families with alcoholics are probably not aware of but which are greatly affecting these children. These children are exposed to conditions which they consider to be 'normal' – although it is not so! [8] – and

in time these conditions constitute a set of characteristics that distinguish them from other adults who did not have one or both parents alcoholics: 1) they do not know what normal behaviour is and are guided by others, 2) they have difficulty in monitoring and enforcing a plan from start to finish, 3) they lie even in situations in which they could easily tell the truth, 4) they judge themselves bluntly, 5) they have difficulty to relax, 6) they take everything very seriously, 7) they have difficulties in intimate relationships (they fear not to be left), 8) they quickly show excitement to changes in the environment when they can not control them 9) they always seek appreciation and confirmation 10) they consider themselves to be different (superior?) to others, 11) they are extremely conscientious or they lack responsibility, 12) they are extremely loyal, even when it is obvious that their loyalty is not deserved, 13) they are impulsive (they tend to engage in actions without preliminary analysis of alternatives and consequences) [2, p. 61-62].

6. Conclusions

Excessive drinking creates a vicious circle that is hard to come out of. This is brilliantly illustrated in 'The Little Prince'. In his journey of discovery to Earth, the main character stops on the planet where a drunkard was living, sitting quietly in front of a pile of empty bottles and one full bottle. When asked 'What are you doing?' he replied to the little prince that he was drinking to forget that he was ashamed to drink [9].

Both the ones affected by the disease of alcoholism and those around them are trapped in this vicious circle. It's a seemingly hopeless situation and stopping the alcohol abuse (breaking the vicious cycle of passion) supposes some seemingly small but very important steps: events that are a warning that something goes wrong in life, the ability to find a causal link between alarming events and alcohol abuse, the identification of the personal and social values that are harmed by drug abuse, taking responsibility for themselves, clearing error and the clear negative perception of it, hoping that there is a way that can be followed to solve the problem and, finally, knowing this way and the strength and perseverance necessary to follow it [2, p. 83]. It is a difficult way to be followed, and the chances to succeed increase even more if the alcoholic is supported by his family and by the loved ones. In addition to medical therapy the spiritual remedies should also be used (since, quite often, the fall in alcoholism is related to dissatisfaction and spiritual maladies): the common prayers of the Church (Sacrament of Holy Unction) and private prayers, both by the one affected by the passion of drunkenness and by those close to the family [10].

Paradoxically, „the ultimate choice in long-term recovery ... is whether patients continue to expand their self and the interpersonal field instead of trying to maintain their self and the interpersonal static field” [11]. On the one hand, restoring the relationship with oneself (intrapersonal) starts by defining the limit in relation to drug or alcohol and is linked to recovering the identity as “a way in which we understand ourselves and live in time” [11, p. 103]. On the other hand,

„the recovery tool” implies restoring relations with others (interpersonal) with the following general purposes: „complementarity, flexibility and redefinition of boundaries, interpersonal competence and cooperation” [11, p. 69]. But as it has been said, ‘late recovery’ refers to the extension of self ‘beyond oneself and the others’ to God (transpersonal).

Even after someone manages to get out of alcohol addiction, relapse remains a danger. The easiest – and safest – way to not reach alcoholism is that man should not succumb to the temptation to drink excessively (which, paradoxically, today’s society seems to encourage despite obvious antisocial effects of excessive alcohol consumption; it is enough to mention the numerous advertisements in newspapers or on TV for alcoholic products) [12]. Otherwise, the battle with alcohol becomes heavy and continuous. Finally we present the touching testimony of a therapist about a man who, overcoming alcohol abuse, is constantly struggling with it (which does not exclude others, but involves them) [13, 14]. “I remember Henry, a man who lived facing the future. Henry was very involved in recovery, still looking very healthy at the age of 65. When I met him he had been sober for 30 years. He started sailing since he had retired and often stopped at the treatment centre where I was working. His eyes had the look of a man who was watching the horizon, feeling the wind and waiting for the next change of direction or intensity. When he died, I thought of him as he stood in his small sailboat with his white hair messed up and his keen eyes scanning the horizon. He was simply stepping forward in the world, while knowing where he had been. From time to time I imagined him looking back, talking about his alcoholic past, but he was getting away from it in the open water. This image of Henry gives a snapshot of the long-term recovery as a journey to make contact with anything next, always remaining aware of what had happened.” [11, p. 129]

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