This document reviews the literature on the following: (1) studies on the nature of the Hispanic family; (2) studies on the prevalence of Hispanic alcohol use and abuse; (3) general impact studies on the consequences for children of family alcoholism; and (4) studies of family factors that appear to protect or shield high-risk children from the adverse effects of parental drinking. A case study of a Puerto Rican child of an alcoholic family is presented. Although the high rate of abusive drinking that has been reported for Hispanics prompts concern for the effects on Hispanic children, it is likely that some types of Hispanic families are more likely to suffer from alcohol problems than are others. Ever among alcoholic Hispanic families, particular interaction and ritual patterns may serve to at least partially protect children from a long list of psycho-social problems disproportionately associated with being the child of an alcoholic. This is an area in need of research and research-based, culturally appropriate intervention and prevention. A list of 30 references is included. (BJV)
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ALCOHOLISM: IMPACT ON THE HISPANIC CHILD

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ALCOHOLISM: IMPACT ON THE HISPANIC CHILD

In this paper, I will review and attempt to link together four sets of indirect information that we possess that potentially are enlightening about the impact of parental alcoholism on the Hispanic child. This approach is necessary because of the lack of specific research data on this topic. These four sets of information include: (1) studies on the nature of the Hispanic family; (2) studies of the prevalence of Hispanic alcohol use and abuse; (3) general impact studies on the consequences for children of family alcoholism; and (4) studies of family factors that appear to protect or shield "high risk" children from the adverse effects of parental drinking.

Before reviewing and tying together these various bodies of literature, let me begin this discussion with a case history of a Puerto Rican child living in an alcoholic family. The family consists of a husband and wife and three children, the eldest being an eleven year old boy. The couple has been married for over ten years, since the wife was a teenager. Several years ago, the apartment the family was living in in New York was condemned and so the family moved to Hartford where they had relatives. A number of years ago, the husband began drinking heavily. When he was drunk, he would demand that the wife cook for him or clean his clothes. He also began seeing other women. Sometimes when he was drunk, he would beat his wife. After the move to Hartford, the frequency of the man's drinking binges increased, as did the beatings. In part because of his drinking, the couple was unable to meet their mortgage payments and lost a home that they had purchased. The wife and kids moved into an apartment without the husband. One day, the husband came to the apartment and beat up the wife severely. For the first time since the beatings began, she called the police. Shortly after this incident, the wife sought help from the Family Crisis Unit of the Hispanic Health Council. The woman reported that the son was afraid of the father and wanted to move somewhere that he would never find them. Also, she reported that the boy always acts in a hostile manner, and takes out his anger on his younger sisters. The boy, she said, runs around the apartment slamming doors and sometimes has attempted to hit her. The mother complained that the boy is constantly asking sexual questions and acts in an effeminate manner.

While it is likely that all agencies working with Hispanic families are familiar with cases like this one in which children appear to be suffering from the adverse effects of parental alcoholism, at the current time we do not know how typical this case is for the Hispanic community as a whole, how prevalent similar cases are, the specific set of impacts alcoholism has on the Hispanic child, and whether or not there are any differences based on ethnic, family, or drinking factors in the effects of alcoholism on Hispanic and
non-Hispanic children. Consequently, let me turn to the indirect data that may help us think about the potential impact of alcoholism on the Hispanic child.

The Hispanic Family

Let me begin by looking at the Hispanic family. Over the last ten years, two images of the Hispanic family have been constructed and disseminated through a host of impressionistic essays. I specifically chose the case history I presented because I believe it well portrays one of the existing images of the Hispanic family, the negative picture. In this image, said to be fairly typical by those who subscribe to culture of poverty theories, the man is dominant, alcoholic, and abusive, and family life is unstable. But there is another image, a positive one, that has also been presented in many descriptive accounts of the Hispanic family. Let me quote one description which I think is fairly typical of the positive image. The authors of this description, (Obeso and Bordatto 1979:338-339) assert that:

Culturally, the typical Puerto Rican adult is raised in a traditional, firmly structured world based on respect for a human being, for the hierarchy of the community, and for parents. Puerto Ricans firmly believe that at the heart of their culture is the family. It is of extreme importance to realize that Puerto Ricans consider membership in the family preeminent to all. They have a deep consciousness about their family and usually think of their world in terms of a pattern of intimate personal relationships. Coupled with this feature is the role of superior authority exercised by the man. To be 'macho' is one of the dominant values inculcated into the male child and continues to be valued in adulthood. <A> Puerto Rican family is never alone. Each is widely extended and each supports its various members....

The problem with descriptions such as this is not so much that it does not contain patterns that all of us have not seen or experienced in Hispanic families, but that generalizing about cultural patterns is an extremely difficult and potentially misleading endeavor. Consequently, most descriptions of the Hispanic family tend to reify an image that is too simplistic, too mechanical, too uniform, too dysfunctional or too traditional. Without denying that there is a customary emphasis on the family as an ideal and that a sense of family loyalty is a core value among Puerto Ricans, it is still possible to empirically demonstrate that a growing number of, and perhaps most Puerto Ricans in the U.S., do not live in quite the type of family described in the previous quote as exemplary of the Puerto Rican family. Thus research by Glorisa Canino and co-workers (1986) among Puerto Ricans in Philadelphia shows that verbal conformity to the ideal of the Puerto Rican family does not necessarily mean actual behavioral conformity. For example, she presents the following case:

In one family where clear-cut machismo appeared to exist, the father dominated the conversation, all family transactions were first approved by him, and the
children complained of a very strict and authoritarian father. His sex-role values were traditional and appeared inflexible. Yet when the couple was observed in their decision-making sequences, it became apparent that power was shared in this family. During the course of the interview, one of the children asked the father permission to go out. The father's initial answer was negative. Shortly after this, the husband and wife entered into a covert negotiation process, where the children's and wife's view were considered in the final decision. The final decision was verbally expressed by the father which made him appear in command... This same man, who in the initial part of the interview expressed very traditional sex-role values and appeared to be macho, also helped his wife in domestic affairs, especially when she was sick or felt overworked.

Similarly, research by the Hispanic Health Council in Hartford found not one but three main types of low income Puerto Rican families, with the most common type being single-parent families (Pelto et al. 1982). While involvement with extended kin was high in some family types, it was low in others.

Hence we can conclude that whatever patterns may have existed traditionally in Puerto Rican families, there currently exists considerable variability both in behavioral and organizational patterns. This observation is crucial if, as some suspect, alcoholism is not equally distributed among family types but tends to be most common in particular familial configurations and if certain family patterns tend to enhance or reduce the effects of parental alcoholism on the child.

Hispanic Alcohol Use and Abuse

In this light, let me now turn to studies of Hispanic alcohol use and abuse. Over the last few years, a number of reviews of the still meager Hispanic drinking literature have appeared and several more are currently in preparation. Let me cite the conclusions of two of these written by prominent Hispanic alcohol researchers. According to Raul Caetano (1983:57),

Hispanics seem to be concentrated at the extremes of the drinking scale distribution, that is, in the heavy drinking and the light drinking/abstaining categories. They have a higher rate of alcohol problems than the general population of the U.S.A. The norms and attitudes that govern alcohol use in the Hispanic community are permissive for men and restrictive for women and more so than the norms of the general population in the U.S.A.... The heavy drinking category is mostly populated by men, while the women are mostly abstainers. Consequently, most problems are reported by men and often, in what may well be <attributed> to the tension between an abstaining wife and a heavy drinking husband, affect family relations...

In a somewhat more alarmist tone, Anthony Alcocer (1982:365) argues that "the alcohol problem among the Hispanic American population is so pervasive, so widespread, that it could be labeled an epidemic." Whether or not Alcocer's choice of labels is
warranted, it is clear that heavy and abusive drinking rates among Hispanic males are high and that this has clear implications for a large number of Hispanic children.

Unfortunately, while it is known that there are great differences in drinking patterns even among alcoholics and that these differences affect the nature of the child's exposure to the behavioral consequences of alcoholism, we have little data on variations in abusive drinking among Hispanics. Thus we do not know if the comparatively heavy drinking patterns commonly found among Hispanic males are the sort that are most damaging or least damaging to the drinker's offspring.

Children of Alcoholic Parents

While there is little specific information on the effects of parental alcoholism on the Hispanic child, there is a consensus among researchers in several countries that the children of alcoholics are at risk for a variety of psychological, behavioral, health, and social problems. Let me briefly review this literature.

In the U.S., it is estimated that about 30 million children are living in homes in which alcohol abuse is ongoing or has occurred in the past. Potential problems experienced by these children can begin even before birth. Regular alcohol consumption by the mother during pregnancy has been linked to a set of physical, emotional, and developmental problems in newborns now commonly lumped together under the rubric fetal alcohol syndrome. As Clarren and Smith (1978) conclude based on their review of the world literature on this condition, maternal alcohol abuse during pregnancy "appears to be the most frequent known teratogenic cause of mental retardation in the Western World." Abusive drinking by the father during his partner's pregnancy has been linked to increased maternal stress, which in turn is known to contribute to problems of labor and delivery (Kinney and Leaton 1983).

After birth, children of alcoholic families are subjected to a range of experiences that may have detrimental consequences. These include:

1. exposure to higher than average rates of family instability, marital problems, separations, and divorce (Chafetz, Blane and Hill 1977).

2. exposure to frequent parental quarreling. In fact, based on interviews with 115 children from alcoholic families, Cork (1969) reports that 98 children indicated that parental fighting was their main worry, while only 7 children reported parental drinking or drunkenness was their major concern.
3. exposure to chaotic, confusing, and unpredictable family environments (Hindman 1975), including inconsistent and undependable relations with the alcoholic parent (Clinebell 1968).

4. exposure to deficient or distorted parental role models, including both the alcoholic and the non-alcoholic parent (Bosma 1972, Fox 1962, Hecht 1973).

5. exposure to higher than average rates of spouse abuse (Marsden and Owens 1975, Scott 1974). In a summary of relevant literature on this point, Hamilton and Collins (1981) report that most studies find that problem drinking is associated with 45 to 60 percent of spouse abuse, although, because most studies are based on victim recall, these figures may be fairly inaccurate (Aarens et al. 1977, Hilberman 1980); and

6. possible exposure to higher than average rates of child neglect and abuse. For example, in Wilson and Orford’s (1978) study of a small sample of families with one parent in alcohol treatment, violence toward children was found in 35 percent of the families. As these researchers report (Wilson and Orford 1978: 127):

   the most serious <case> was that of Mr. D. toward his wife and two stepdaughters. The elder daughter would be attacked when she tried to protect her mother from beatings and both children had been hit while their mother was absent. These children lived in an almost constant state of terror.

Wilson and Orford found that mothers were as likely to be violent as fathers. More generally, the most commonly cited statistics for the number of child abusers having alcohol problems are between 11 and 17 percent (U.S. Department of Health and Human Services 1983). Based on these figures, Orme and Rimmer (1981) conclude that child abusers may be no more likely to be alcoholics than the general population.

At any rate, the negative consequences for children regularly exposed to the list of painful experiences just recited are multiple. Emotionally children of alcoholics have been found to be disproportionately nervous, aggressive, irritable, depressed, and guilty (Wilson and Orford 1978). Research by McLachlan and co-workers (1973) found that children of alcoholics have significantly lower self-esteem than did controls. Hecht (1973) reports that such children feel tremendous shame, especially about parental fighting, and their anger and resentment is translated into rebellious behavior. In his study, Haberman (1966) found a greater frequency of stuttering, bed-wetting after the age of six, and deep
anxiety. Finally, research by Fine and co-workers (Fine et al. 1976) found that children from families with parental alcoholism are less able to maintain attention, less responsive to environmental stimulation, and are much more prone to emotional upset. According to these researchers, these children "tend to be anxious, fearful individuals who have a great difficulty in containing or regulating their excitement or mood " (Fine et al. 1976:515).

As an outgrowth of these underlying emotional conflicts, children of alcoholics show a higher than average incidence of problems at school, including engaging in temper tantrums and fighting with peers (Keene and Roche 1974), truancy (Haberman 1966, Kammeirer 1971), poor school performance (Chafetz et al 1971), expulsion from school (Becker and Miller 1976) and dropping out of school (Becker and Miller 1976). Many of the problems experienced by these children are of long duration or have a late onset. There have been at least anecdotal reports that children of alcoholics have enduring problems with role performance and ability to form relationships, and experience high rates of midlife emotional turmoil (Seixas 1979, Jacob et al. 1978). Moreover, whether due to genetic or environmental reasons, the children of alcoholics are twice as likely to develop alcohol-related problems compared to children of nonalcoholics (Bosma 1975, Goodwin et al. 1973). Furthermore, in a study of 156 male psychiatric patients, Winokur and his colleagues (Winokur et al. 1970) found that 29 percent had alcoholic fathers, 6 percent had alcoholic mothers, and 31 percent had alcoholic sons. Among 103 female psychiatric patients, these researchers found that 44 percent of their fathers, 3 percent of their mothers, and 50 percent of their sons were alcoholic.

Currently, there is no agreement in the literature as to whether an alcoholic father is more or less damaging than an alcoholic mother. However, research in England by Rathod and Thomson (1971) found that the greatest recurrence of alcoholism across generations is among daughters of alcoholic men and the lowest is among the sons of alcoholic women. On the other hand, Keane and Roche (1974) found that boys with alcoholic fathers showed a greater number of developmental disorders than did controls, but for girls this did not hold true.

Finally, it should be stressed that many children manage to cope positively with a pathological family situation. In fact, researchers have developed a number of overlapping typologies of the coping roles adopted by the children of alcoholics. A commonly used example is Sharon Wegschieder's (1979) four cell model consisting of the following types:

1. The Family Hero: a child who becomes super responsible, taking on various parental role obligations in the family.
2. *The Scapegoat*: a child who takes personal responsibility for most of the family's problems and is an outlet for family anger and confusion.

3. *The Mascot*: a child who fragilely embodies the remaining reserve of humor, good will, and hope in a disrupted family.

4. *The Lost Child*: a child who strives for invisibility and accommodation so as not to further rock a sinking ship.

While these roles enable children to survive very threatening situations, as Kinney and Leaton (1983:156) affirm, the danger is that "the child becomes frozen in these roles, that the roles become the lifetime pattern. What is helpful in childhood can become a deficiency for an adult."

**Protective Patterns**

While the children of alcoholics are at risk for various problems, not all such children suffer the deficits I have mentioned, or they do so in milder form. In other words, there appear to be a number of intervening variables which enhance or moderate the impact of parental alcoholism on children. Thus, we know (Booz-Allen and Hamilton 1974) that children of alcoholic parents are at lower risk if they:

- do not witness or experience physical abuse,
- are over six years of age at the onset of alcohol abuse,
- are not an only or the eldest child, and
- have supportive nuclear or extended kin.

Also, the nature of "the child's relationship with the nonalcoholic parent and the degree of marital conflict ... are likely to be major variables intervening between parental alcoholism and the effects experienced by children" (Wilson and Orford 1978:139). Finally, and most noteworthy, research by Bennett, Wolin and their co-workers (Wolin, Bennett, Noonan and Teitelbaum 1980) suggests that families that are able to maintain a set of rituals, including regular meals, celebrations of transitions such as birthdays and graduations, and special events such as holidays, and do not allow these rituals to either be disrupted by or absorbed into alcoholic behavior, are less likely to experience a recurrence of alcoholism across generations and perhaps may be less likely to transmit psycho-social deficits to the next generation. As these workers (Wolin et al. 1980:201) maintain, "through their special meaning and their repetitive nature, rituals contribute significantly to the establishment and preservation of a family's collective sense of itself. Rituals stabilize
family life by clarifying expected roles, delineating boundaries within and without the family, and defining rules ...” As this statement suggests, since alcoholism is most threatening to family identity, family stability, role definition, the parental subsystem boundaries, and rules of appropriate interaction within the family, families that are able to preserve their rituals may be able to shield their children from some of the damaging effects of parental alcoholism.

Conclusion

In conclusion, while the high rate of abusive drinking that has been reported for Hispanics prompts concern for the effects on Hispanic children, it is likely that some types of Hispanic families are more likely to suffer from alcohol problems than are others, and that even among alcoholic Hispanic families, particular interaction and ritual patterns may serve to at least partially protect children from a long list of psycho-social problems disproportionately associated with being the child of an alcoholic. Needless to say, this is an area in need of research and research-based, culturally appropriate intervention and prevention.

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References Cited


Canino, G. Transactional family patterns: a preliminary exploration of Puerto Rican female adolescents.


'nonou, G., Reich, T., Rimmer, J., Pitts, F. Alcoholism: Diagnosis and familial psychiatric illness in 259 alcoholic probands. Archives of General Psychiatry 23:104,