
COPING STRATEGIES AMONG WIVES OF ALCOHOLICS - A SOCIAL WORK PERSPECTIVE

***Mr. A. Bellaro John Regan, Assistant Professor, Department of Social Work, Sree Narayana Guru College, Coimbatore.**

****Ms. D. Antonette Lydia, Assistant Professor, Department of Social Work, Sri Ramakrishna College of Arts and Science, Coimbatore.**

ABSTRACT:

Alcoholism is a perennial problem for the family members especially for the wives of the alcohol addicts. Each and every day, the wives of the families face different levels of problems because of the worst behaviours of the alcoholics. It has been called as a disease of the family by the experts. This research paper would clearly depict us various matters related to alcoholism like the Classification of the Alcoholism, Stages for Alcoholism, Types of Alcoholic Families, Impact of Alcoholism in the Family and the Treatment means. Above all, the Social Workers have to intervene in this matter and try to find solution for the problem. The Researchers' focus is to primarily study difficulties faced by the respondents, the coping strategies and the general well-being of the respondents. The study is Descriptive in nature. In the research study, the researchers have adapted the Convenient Sampling Method.

Key Words: Alcoholism, Family, Social Workers

INTRODUCTION

“First the man takes the drink, then the drink takes the man” - Japanese proverb

Alcoholism is chronic progressive and often fatal disease. It is a primary disorder and not a symptom of any other diseases or emotional problems. The chemistry of alcohol allows it to effect nearly every type of cell in the body, including that in the central nervous system. When a person consumes alcohol, it is absorbed by the stomach cell and later taken to the systemic circulation and goes to all the

tissues. The effects of alcohol are dependent on a variety of factor, including a person size, weight, age and sex as well as well as the amount of food and alcohol consumed. The effects of intake of alcohol include dizziness and talkativeness, an immediate effect of a larger amount of alcohol includes slurred speech, disturbed sleep, nausea, and vomiting. Alcohol consumption at low doses may significantly have impaired the judgment and coordination. Low to medium doses of alcohol can also increase an incidence of variety of aggressive acts which includes domestic violence and child abuse.

DEFINITION

According to the National Council for Alcoholism and Drug Dependence (NCADD) "Alcoholism is a primary, chronic disease with genetic, psychosocial, and environmental factors influencing its development and manifestations. The disease is often progressive and fatal. It is characterized as continuous or time to time impaired control over drinking, preoccupation with the drug alcohol, use of alcohol despite adverse consequences, and distortions in thinking, most notably denial."

The term 'Alcoholism' has endured usage for a long time since it was coined in 1847 by the Swedish Doctor, Magnus Huss (Madden, 1980). The **World Health Organization's** (1952) official definition reads in part, 'Alcoholics are those excessive drinkers whose dependence on alcohol has attained such a degree that shows a noticeable mental disturbance or an interference with their bodily and mental health'.

CLASSIFICATION OF ALCOHOLISM

Jellinek (1960) has classified alcoholism into four major types.

- **Alpha Alcoholism:** purely psychological dependence to relieve bodily or emotional pain.
- **Beta Alcoholism:** medical complications owing to heavy drinking in the absence of physical or psychological dependence.
- **Gamma Alcoholism:** progression from psychological to physical dependence and a marked deterioration of behavior.

- **Delta Alcoholism:** inability to abstain from drinking and experience of withdrawal symptoms.

STAGES OF ALCOHOLISM

Jellinek (1960) delineated four distinct phases through which the disease of alcoholism progresses if untreated.

- **Phase-I: Pre Alcoholic Phase.**
- **Phase - II: Early Alcoholic Phase (Non-addictive Alcoholism)**
- **Phase - III : Crucial Phase (Addictive Alcoholism)**
- **Phase- IV: Chronic Phase**

ALCOHOLISM - A FAMILY DISEASE

Alcoholism is also known as a family disease. Alcoholics might have young, teenage, or grown-up children and they have wives or husbands, brothers or sisters, and parents or other relatives who are dependent on them. An alcoholic can entirely disrupt the family life and cause harmful effects that can last throughout their life.

TYPES OF ALCOHOLIC FAMILIES

Type 1

This system is riddled with active alcoholism. In children, parents, grandparents, great grandparents and even further back the family history, active alcoholism is rampant. Every generation of this family will have both active alcoholism and adult children of alcoholics' issues to deal with.

Type 2

In this system the actively drinking member of the nuclear family has stopped drinking. Although the active alcoholism has been arrested, the family system will continue to operate in a way that can only be described as an alcoholic. It is important to note that even when the alcohol is removed from the system, if the family remains untreated, an alcoholic behaviour will continue to operate. Many ACoAs who come from this type of system feel a great deal of conflict.

Type 3

In this type, the active drinking has been removed from the family for one or more generations. In this system, the parents did not drink in the alcoholic way, but one of their parents or even grandparents was alcoholics. Even though active drinking has not been in the family for some time, the family dynamics continue in a way that is still characteristic of an alcoholic family. Many ACoAs come from this type of family. Their parents did not abuse alcohol, but one or more of their grandparents did, and their family continues to follow the rules and behaviours of an actively drinking alcoholic family.

Type 4

In this non-alcoholic family one of its members becomes an alcoholic. The family then becomes an alcoholic family. The family becomes more and more dysfunctional in its attempts to deal with the alcoholics' behaviour.

When looking at the four major types of alcoholic families, it is important to consider two things. First, the effects of alcoholism on the family occur even when active drinking is

not present. Secondly, the alcoholic system will recreate its generation after generation if the family is not treated.

IMPACT OF ALCOHOLISM IN THE FAMILY

The nature and extent of an impact of alcoholism in the family can be described under three main headings namely financial, social and emotional.

- **Financial Impact**
- **Social Impact**
- **Emotional Impact**
 - ✓ Guilt
 - ✓ Grief
 - ✓ Anger
 - ✓ Hurt
 - ✓ Shame
 - ✓ Fear
 - ✓ Loneliness
 - ✓ Denial

TREATMENT

Interventions

Brief mediations may be utilized when alcohol consumption is abusive or dangerous to the drinker, or those around him or her. Goals typically include:

- Moderating drinking activity
- Establishing specific behavioral goals
- Building necessary skills to change drinking behaviour

Mediations usually consist of one to four counseling sessions by a trained interventionist who may be a doctor, psychologist or social worker. New plans of action such as motivational interviewing are used to persuade resistant individuals who do

not believe their drinking is harmful or hazardous.

Residential Programmes

Residential or inpatient alcoholic treatment programmes provide medical detoxification, in-depth therapy, and education to rehabilitate alcohol-dependent individuals. The therapeutics often include both individual and group counseling, structured physical activities, nutritional counseling, stress reduction, various holistic approaches such as yoga, saunas, acupuncture and neuro-feedback, other programmes including vocational training, relapse prevention support, social skills training, educational services and 12-step substance abuse programmes.

Medication

It has played an increasing role in recent years and is sometimes prescribed to complement and propel other treatment initiatives. While in taking medicine, it will not help overcome alcoholism (or any addiction), three drugs have shown promise in supporting overall treatment efforts and have received approval by the U.S. Food and Drug Administration.

- Disulfiram
- Naltrexone
- Acamprostate

REVIEW OF LITRETURE

Lakshmana Govindappa, B.Pankajakshi (2014): Investigated a community **study on violence among wives of alcoholics**. The objectives of the study were to identify the socio demographic details and different kinds of violence among wives of alcoholics. This investigation was followed

by Descriptive Design and the sample size was 50. Sampling Technique used was cluster sampling. The age of the respondents were 33.4 years, majority of the respondents (92percent) were educated upto 10th standard, 74percent were house wives, 88percent were currently living with husband and children, 90percent were belongs to nuclear family, the mean marital years of respondents were too low among which 36percent of the respondents come under 31-40years. Violence experienced by the respondents show that 88percent, 92percent, 86percent and 74percent has moderate level of physical, emotional, intellectual and economic violence respectively.

AlokTyagi, Shubham Mehta (2013): investigated a **study on the impact of partner's alcohol consumption on spouse**. The major aim of this study was to identify the correlation between alcohol consuming husbands, which results in depression and suicidal ideation in their wives. Thirty alcoholic addicts were wives of persons dependent on alcohol who were assessed using PHQ-9 for depression and MSSSI for suicidal ideation. The husband's alcohol consumption was graded using the AUDIT scale. The age of the sample was 30.67 years (SD 8.125). Majority of the sample were housewives (67percent), of the Hindu religion (83percent), had received at least primary education and were living in a nuclear family (53.3percent). The mean value duration of alcohol consumption among the husbands was 9.60 years (SD 2.79). Among the alcoholic users, the mean value of AUDIT score was 11.47 ± 4.05 . The mean value of PHQ-9 score among the wives was 4.87 ± 5.49 . The result

was found to have significant positive correlation between alcohol consumption in husbands and depressive symptoms and suicidal ideation in their wives.

RamneekKaur, B.Sc (N) (2010): conducted a study to assess the ways of coping among the wives of alcoholics who were staying with their husbands during de-addiction treatment. The Non Probability-Convenience sampling was done to select 200 wives of alcoholics. Majority (83.5percent) of the wives of alcoholics used positive reappraisal, painful problem solving coping 82.5percent, escaping avoidance 74.5percent, accepting responsibility 72percent, confrontive coping 68.5percent, self controlling (64percent) and seeking social support, coping moderately (58.5percent) to cope up with the stressful situations; 45percent and 53.5percent of them used distancing coping moderately and minimally respectively.

Avila Escribano and Ledesma Jimeno (2010): emphasized a study to assess the coping behaviours of wives of alcoholic. Study was conducted among 30 wives of alcoholic addicts using orford – Guthrie’s ‘coping with drinking’ questionnaire. The most common coping behaviour reported was discard, avoidance, indulgence and fearful withdrawal while marital breakdown, taking special action, assertion and sexual withdrawal was regular. There was no significant correlation between the coping behaviours and the variables like duration marriage, duration of husband’s alcoholism, socio- economic and educational qualification. Study was concluded that the husband’s personality causes the alcoholic

which in turn causes the coping behaviour of wife.

Revathi. E (2005): found from a study to assess the psychological distress, social burden and coping between wives of alcoholics and non alcoholics. The study results that majority of wives experienced mild to severe psychological distress and social burden than wives of non alcoholics. The most common coping style used by the wives of alcoholic addicts was discord and avoidance. The common coping behaviour is competition and sexual withdrawal.

Jackson (2000): investigated a study to assess the Alcohol Use, Alcohol Problems, and Depressive Symptomatology among newly married couples. A sample of husband and wife (N = 634) were assessed by using Multilevel models to analyze the association between one spouse alcohol involvement and alcohol problems. The partner’s depressive Symptomatology over time, and the study concluded that husbands and wives marital alcohol problems were associated with wives depressive symptoms. The reason for husband’s depressive symptoms were related to marriage problems which resulted in alcohol problems and frequency of heavy drinking, however wives alcohol problems and alcohol use were unrelated to husband’s depression.

RESEARCH METHODOLOGY

Research methodology can be defined as “the procedure used in making systematic observations or otherwise obtaining data, evidence or information as part of a research project or study”. Research Methodology is a

systematic way to solve the research problem for studying how research is done scientifically.

OBJECTIVES OF THE STUDY

- To study the demographic profile of the respondents.
- To study the difficulties faced by the respondents.
- To study the coping strategies of the respondents.
- To study the general well being of the respondents.

SAMPLING AND RESEARCH DESIGN

A sample design is a specific feature that is obtained from a given population. It refers to the technique or the procedure which a researcher would adopt in selecting items for the sample for the present study. The researcher has used convenience sampling for the research. The study is descriptive in nature. The descriptive research designs include surveys and fact-finding enquiries of different aspects. The major purpose includes description of the state of affairs as it exists at present.

Sources of Data

Data collection can be done in two ways in which the researcher used both primary and secondary sources of data.

Tools of Data Collection

The researcher collected the data from the respondents through interview schedule method.

Primary data

Primary data are those which are collected from first time. In other words,

primary data are original in character. This data was collected by the researcher using interview method.

Secondary data

Secondary data are those which have already been collected from books, journals, magazines, websites, articles, reports and other projects.

Findings and Suggestions

- Separate counselling centres should be opened exclusively for wives of alcoholic addicts.
- Proper awareness should be given to the following members of the alcoholic, regarding the causes, symptoms and treatment modalities due to excessive consumption of alcohol.
- Providing training to the uneducated wives of alcoholics to develop an income generating programmes and supportive action plan by the Government and Non-Government Organizations to rehabilitate them.
- Children who are from alcoholic families should be given more care and consideration in their schools in the form of counselling, motivation and encouragement.
- Bringing up of female children should be given utmost care and proper guidance moreover, emotional, financial and social supportive initiatives to be given priority.

Conclusion

Due to alcoholics the worst affected are their wives. Many researchers have shown that alcoholism is a multifaceted and

multidimensional problem. We come across in our day to day life different kinds of alcoholic dependents and problems faced by their wives. Adult alcohol consumers act as a role model for the young generation. The identification of risk factors is essential for its prevention. As drinking pattern varies considerably, the prevention of alcoholism is not much easy. Educating, creating awareness among public, discussion, and investigation on public attitudes may result in the measurable improvement. This network should be combined with social welfare and health services. By bringing changes in the attitude, and behaviour of the alcoholics through individual therapy, family therapy, group and occupational therapy and some dimensional activities such as music therapy, yoga, meditation and relaxation techniques may support to an alcohol free society.

BIBLIOGRAPHY

1. Bhowmick .P, Tripathi B.M and Jhingan. (2001) Relationship between social support coping resources and co-dependence wives of individuals with alcohol dependency. *Indian Journal of Psychiatry* ; 43 (3): 219-224
2. Chakravarthy , Christina: (1988). Ranganathan, shanty. coping behaviour of wives of alcoholics, *Journal of psychological researchers* May; 29(2): 112-116
3. Chavan BS, Arun P, Bhargava R, Singh GP. Prevalence of alcohol and drug dependence in rural and slum population of Chandigarh: *Indian J Psychiatry*. 200; 49:44-8.
4. James,J.E, Goldman, M.(1999). Behaviour trends of wives of Alcoholics, *Quarterly journal of studies on Alcohol* Dec; 46 (13): 76-81.
5. Kahler CW, McCrady BS and Epstein EE, (2003). Sources of distress among women in treatment with their alcoholic partners, *Journal of Substance Abuse Treatment*. Apr; 24(3):257-65.
6. Sangy, D.de. (1999). Personality patterns of wives of alcoholics, *quarterly journal of studies on Alcohol*, ; 3: 69-76.
7. T.S Sathyanarayanarao and K.Kuruvilla. (1994).Coping Behaviour of wives of Alcoholic. *Indian Journal of psychiatry* Feb; 34(4): 359-365.

Websites:

1. http://en.wikipedia.org/wiki/Computer_issued_medical_problems.
 2. <http://ergoTplus.com/rulaTassessmentTto olTguide/>
 3. <http://ergoTplus.com/wpTcontent/uploads/ManagingTStress.pdf>
 4. <http://iospress.metapress.com/content/0keyayjwbjne87jm>
 5. <http://www.Biomedsearch.com/nih/21226803.html>
 6. <http://www.cdc.gov/niosh/>
-