

ABSTRACT OF APPLIED PROJECT

Lester Jones, M.A. in Education

Graduate School
Morehead State University
1995

EDUCATIONAL AND CAREER PREFERENCES OF
CHILDREN OF ALCOHOLICS

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An applied project submitted in partial fulfillment
of the requirements for the degree of
Education Specialist at Morehead State University

by

Lester Jones

Committee Chairman: Dr. Dean Owen

Professor of Education

Morehead, Kentucky

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Abstract

The Children of Alcoholics Screening Test (CAST) was administered to 198 college students to determine if Adult Children of Alcoholics (ACA's) are represented in different major areas of study in disproportionate numbers. Approximately 32% of the sample were classified as having at least one alcoholic parent. In the sample, the incidence of female ACA's was 37.06% and 24.39% for male ACA's. Also, z score results indicated a significant difference in ACA representation between (a) social work/nursing majors, pooled majors, (b) social work/nursing majors/English majors, and (c) social work/nursing majors/business majors. Problems ACA's experience are described and perceptions of parental alcoholism are discussed.

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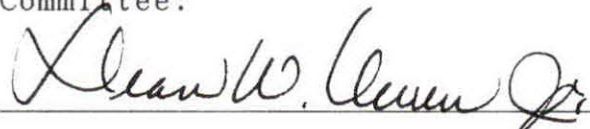


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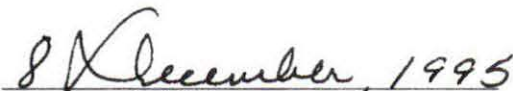
Accepted by the graduate faculty of the College of Education
and Behavioral Sciences, Morehead State University, in
partial fulfillment of the requirements for the
Education Specialist Degree in
Guidance and Counseling.



Director of Applied Project

Applied Project Committee:

 , Chair





DATE

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Chapter 1

Review of Literature

It is estimated that 18% of all men and 5% of all women are classified as heavy drinkers (Rice, 1991, p. 307); approximately 9.3 to 10 million individuals are alcoholics (Jacobs, 1989). Abuse of alcohol and drugs is directly related to problems involving the law, employment, and social relations (Deutsch, 1982). It is estimated, for 1988, the total economic cost of alcohol abuse was 85.8 billion dollars (Rice, 1991). It is important to think of alcoholism not only in these terms, but more importantly, as an illness that affects families (Chafetz, Blane & Hill, 1977; Leershen & Namuth, 1988; Newlon & Furrow, 1986). A 1971 study found that 41% of the parents in alcoholic families in its sample were divorced or separated (Chafetz, Blane & Hill, 1971, cited in Steinglass, 1987).

There are at least 15 million school age American children with parental alcoholism (Deutsch, 1982); 22 million adults grew up in an alcoholic home (Lake, 1986). "The children grew up watching a person, who is out of control, trying to control another, and they don't know what 'normal' is" (Leershen & Namuth, 1988, p. 54). Unable to counteract this, the family members get caught up in the consequences of the illness and become emotionally ill themselves (Schall, 1986; Woititz, 1990). The difference

between the alcoholic family system and a healthy system is that the alcoholic family system operates so that the actions and emotions of the individual members are limited and controlled (Kritsberg, 1988). "These children are four times more likely than children of non-alcoholics to develop alcoholism or other addictions" (Policoff, 1989, p. 240).

"The alcoholic family is a chaotic and often violent system with the likelihood of more trauma in an alcoholic family, than in other healthier families" (Kritsberg, 1988, p. 52). There are four general rules that operate in the alcoholic family. These rules are:

- Rigidity. The alcoholic family is inflexible and cannot adapt to change easily, nor does it willingly allow family members to change (Kritsberg, 1988). After time the non-alcoholic family members will begin to manipulate themselves so as not to "Rock the boat" (Akerman, 1987). Because of inflexibility the individuals cannot experiment with life, and are not allowed to grow emotionally (Kritsberg, 1988). This does not mean the children get no responsibility, they very often do, by being responsible for the care of their brothers, sisters, and at times their parents (Hecht, 1973; Woititz, 1990). They don't have a chance to be children (Lake, 1986).

1780-1800

The first two centuries of the American history are marked by the struggle for independence and the formation of the federal government. The American Revolution (1775-1783) was a pivotal moment in the nation's history, leading to the Declaration of Independence and the adoption of the Constitution. The early years of the Republic were characterized by a period of expansion and growth, as well as a struggle for national unity. The War of 1812 (1812-1815) was a significant event that solidified the nation's identity and led to the development of a sense of national pride. The period also saw the rise of various political movements and the establishment of the two-party system.

• **1800-1860** - The period of the antebellum South and the Civil War.

The antebellum South was characterized by a rigid social hierarchy based on race and class. The plantation system was the dominant mode of production, and the South's economy was heavily dependent on slave labor. The South's political and cultural identity was shaped by its commitment to states' rights and a strict interpretation of the Constitution. The Civil War (1861-1865) was a result of the deepening divide between the North and the South over the issue of slavery.

• **1860-1900** - The Reconstruction era and the Gilded Age.

The Reconstruction era (1863-1877) was a period of significant change and conflict. It was a time when the federal government sought to rebuild the South and integrate African Americans into the political and social fabric of the nation. The Reconstruction era was marked by the passage of the Reconstruction Acts, the Reconstruction Amendments, and the rise of the Ku Klux Klan. The Gilded Age (1870-1900) was a period of rapid industrialization and economic growth. It was a time when the United States emerged as a world power, and the industrial revolution transformed the nation's economy and society.

- Silence. Members of an alcoholic family are bound by silence and cannot talk about what is happening in the family, including talking to people outside of the family or other family members (Kritsberg, 1988; Stark, 1987; Woodside, 1982). This aspect of the family often keeps the children from bringing friends home, or in some cases, even having any friends (Marks, 1986). The children knew that they couldn't talk about the alcohol problem with friends or adults outside the family (Woititz, 1990).
- Denial. The members of an alcoholic family are required to deny the aspect of their lives that most dominates it (Marks, 1986). The people, particularly the children in the system are surrounded by denial on all sides, and it is so prevalent that children never learn how to honestly express emotions (Kritsberg, 1988; Sexias, 1977). After a while, the members start lying automatically (Woititz, 1990). "Denial becomes so pervasive in some alcoholic families that it affects a child's attention span and ability to concentrate" (Brown, 1984, p. 32).
- Isolation. "The standard governing the central event of the family, the drinking, and informing all other communication is one that undermines the very

- 1. The first part of the document discusses the importance of maintaining accurate records of all transactions and activities. It emphasizes that proper record-keeping is essential for ensuring transparency and accountability in the organization's operations.
- 2. The second part of the document outlines the various methods and tools used to collect and analyze data. It highlights the need for consistent data collection procedures and the use of advanced analytical techniques to derive meaningful insights from the data.
- 3. The third part of the document focuses on the implementation of data-driven decision-making processes. It discusses how organizations can leverage the insights gained from data analysis to identify opportunities for growth, optimize resource allocation, and mitigate risks.
- 4. The fourth part of the document addresses the challenges associated with data management and security. It emphasizes the importance of implementing robust security measures to protect sensitive information and ensure compliance with relevant regulations.
- 5. The fifth part of the document concludes by summarizing the key findings and recommendations. It reiterates the importance of a data-centric approach and encourages organizations to continue exploring innovative ways to harness the power of data for their success.

notion that words have meaning" (Deutsch, 1982, p. 57). If a member of the alcoholic family took the risk and made a friend, there was the fear of the truth being exposed (Woititz, 1990). The family system could not afford to have people outside of the family know what is happening in the system (Cork, 1969; Kritsberg, 1988).

How the adult child learned as a child to handle the stress of the alcoholic family may reveal clues as to how they handle stress today (Akerman, 1987). "Most adult children suffer emotional problems that go back to the role they once played in the dynamics of an alcoholic family" (Lake, 1986, p. 178). These roles needed for survival are:

- The Family Hero. These are children often regarded with respect because they have apparently developed strength, responsibility, and self-esteem from the jaws of adversity (Deutsch, 1982). "An only, or eldest child is apt to be very responsible, not only for himself, but for others in the family" (Shaw & Reese, 1979, p. 82). They take on parental jobs, assuming the duties that both the alcoholic and spouse have neglected (Black, 1979, 1981; Lake, 1986).
- The Scapegoat. "As a fresh focus for family attention, the scapegoat allows his parents to blame

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him for family troubles, and thus avoiding facing their real problem---alcoholism" (Lake, 1986, p. 38). They become the focus of the family rage, and make their contribution to the family by embracing each members anger, disappointment, and frustration (Deutsch, 1982). They are usually the second born.

- The Mascot. Usually the youngest, relieves family tension by acting the clown, they can defuse a family by acting silly (Lake, 1986). "In non-alcoholic families it is not uncommon for parents to prolong the immaturity of the 'baby of the family' in order to keep feeling needed, in alcoholic families this need is more pronounced" (Deutsch, 1982, p. 71). The family views the mascot as the immature and fragile object of its protection, older siblings, even the scapegoat subscribes to this idea (Shaw & Reese, 1979).
- The Lost Child.. "While their brothers and sisters suffer from being locked into rigid and exaggerated roles, middle children are often given no role at all, no way in which to make their presence felt in the family" (Deutsch, 1982, p. 66). The child fades into the family woodwork, never giving anyone trouble, the lost child does manage to stay out of the conflict (Marks, 1986). They react to turmoil

that exists in an alcoholic home by withdrawing, becoming a loner, a person with no real sense of who they are and where they belong in the world (Lake, 1986).

Most Adult Children of Alcoholics suffer problems that go back to the role they once played in the dynamics of an alcoholic family (Lake, 1986; Woititz, 1983). Some of these are: (a) emotional problems, such as guilt, resentment, anger, depression, distrust, and shame (Deutsch, 1982; Kritsberg, 1988; Moos & Billings, 1982), they will often marry an alcoholic (Shah & Reese, 1979); (b) physical problems, including gastrointestinal disorders (Cork, 1969; Kritsberg, 1988), psychosomatic complaints (Deutsch, 1982), and obesity from compulsive eating (Leershen & Namuth, 1988); (c) mental problems, including compulsive thinking, confusion, thinking in abstracts, hypervigilance (Kritsberg, 1988), and chronic depression (Leershen & Namuth, 1988); and (d) school and/or behavior problems, such as academic difficulty, high risk to develop alcoholism (Brown, 1984; Haberman, 1966; Hindman, 1975-76), social aggression (Deutsch, 1982), inability to have fun, compulsive-addictive disorders, intimacy problems (Kritsberg, 1988), poor grades (Policoff, 1989), and dropping out of school (Lake, 1986).

Also, there are common behavior patterns of ACA's resulting from the shared experience of being raised by an alcoholic family (Kritsberg, 1988; Black, 1984). Some of these patterns are:

- Control. Children of alcoholics display a strong tendency to interpret the world in terms of control and to be preoccupied with issues of self-control (Brown, 1984). The inability to have fun is also linked to the need to control; it is hard to have fun when all thoughts are on controlling the existing environment (Kritsberg, 1988; Leershen & Namuth, 1988). They take life too seriously and are prime candidates for burnout (Woititz, 1990).
- Denial. Denying reality, particularly painful reality, becomes second nature. "As the behavior of the family members become more and more dysfunctional, the denial becomes stronger, and stronger" (Kritsberg, 1988). Lying is basic to an alcoholic family system, and masquerades in part as overt denial of unpleasant realities, broken promises, and inconsistencies (Black, 1990; Woititz, 1990). Denial is a very prominent aspect of the children of alcoholics life thoughts (Akerman, 1987; Brown, 1984; Deutsch, 1982).

There are two main reasons for this. First, the
... (rest of the text is illegible due to extreme blurriness) ...

- Difficulty with intimacy. Adult Children of Alcoholics want very much to have healthy intimate relationships. It is very difficult for a number of reasons. They have no frame of reference for a healthy intimate relationship, because they have never seen one (Woititz, 1990). Intimacy requires trust, communication, and the ability to resolve conflict, all characteristics of which the child of an alcoholic has had very little training (Kritsberg, 1988). They are one-sided in their ability to display emotions (p. 36). They have a hard time investing in friendships and feeling stable and secure (Deutsch, 1982), and tend to marry alcoholic or troubled personalities because they are willing to accept unacceptable behavior (Leershen & Namuth, 1988).
- Inappropriate sense of responsibility. "Responsible children become their own parent, a parent to their siblings, and a parent to their parents" (Black, 1990, p. 16). The child doesn't have a good sense of their own limitations (Woititz, 1990) and if anything goes wrong they feel responsible (Gravitz & Bowden, 1984, 1987). It is very difficult for a child of an alcoholic to say no, resulting in more activities being attempted.

Responsible children may find their self-reliant nature leads them to be "too alone", making them unwilling to trust other people (Black, 1990; Shaw & Reese, 1979; Woititz, 1990).

- Difficulty trusting. Children of alcoholics commonly suffer from an inability to share feelings or trust with other individuals (Marks, 1986). The inability to trust is among the defense mechanisms developed at an early age to cope with an out of control family (Shaw & Reese, 1979). They learn to trust themselves more than anyone else when it is impossible to rely on judgment coming from an alcoholic family (Black, 1990; Lake, 1986). These children learn to turn off their feelings (Kritsberg, 1988).
- Compulsive behavior. "The alcoholic family is a compulsive-addictive one and the children from this system learn compulsive-addictive behavior" (Kritsberg, 1988, p. 47). Some of the most common are eating disorders, smoking, addictive relationships, exercise, addiction to sex, and compulsion about being perfect and doing a perfect job (p. 48). There have been excellent studies showing that children of alcoholics are disproportionately represented among alcoholics.

(Brown, 1984), and "children of alcoholics are said to have a much higher chance than average becoming alcoholics themselves," according to Joseph A. Califano Jr's 1982 Report on Drug Abuse and Alcoholism (Marks, 1986).

"Children that survive a parents' alcoholism by displaying unusual coping behavior often experience emotional and psychological deficits later on" (Black, 1981, Cited in Leershen & Namuth, 1988). The child of an alcoholic is driven by internal forces and motives that are of an unconscious nature (Kritsberg, 1988). Some children of alcoholics don't fall apart until they're in their twenties or thirties (Woititz, cited in Leershen & Namuth, 1988; Woodside, 1982).

Great strides have been made in combating alcoholism over the last decade, but children of alcoholics have been left behind (Deutsch, 1982). "Probably not more than 5% are getting the help they need" (p. 5). Many suffer from confused thinking, feelings of hopelessness (Kritsberg, 1988), emotional detachment and suicide (Deutsch, 1982), inability to function as a parent (Akerman, 1987), and are high-risk for development of alcohol abuse and other drug habits (Shaw & Reese, 1979). Due to the standards of perfection set in childhood, they always fall short of the goals they set for themselves (Woititz, 1983), and children

of alcoholics will often marry an alcoholic, or someone with other problems, continuing the cycle of frustration and sorrow (Lake, 1986; Marks, 1986; Shaw & Reese, 1979).

Upon completion of secondary school these ACA's are faced with career choices which will be influenced by earlier life experiences. Very little research has been done on this particular aspect of ACA's, although some research suggests that the earlier childhood life experiences have a definite impact upon career choices. Some examples would be in the areas of temperament, control, defense mechanisms, timidity, responsibility, depression, and shame.

"Different occupations afford differing opportunities for the expression of impulses, for the utilization of defenses, and for the organizing of one's dealings with the world" (Nachmann, 1960, p. 243). "One would, therefore, expect to find that individuals who choose one vocation would have had different developmental histories from those choosing a vocation with dissimilar characteristics" (Galinsky, 1962, p. 299).

Sternberg (1959) found that individuals in related college majors had greater similarity in interest and personality-trait characteristics than individuals in other college majors. "Vocational research also indicates that having a well-delineated sense of identity based on a

consistent developmental history is an important requisite for choosing a life's work" (Galinsky & Fast, 1966, p. 89).

Also, Super (1957) "thought that choosing an occupation involved checking the compatibility of an occupation with Self-Concept" and "this is difficult if one has a poorly formed sense of self" (cited in Schumrum & Hartman, 1966, p. 121). Self doubts and feelings of inferiority make vocational choices extremely difficult. "Many people, consciously or unconsciously think of choosing a particular occupation in the hope of assuming characteristics that seem to inhere in members of that occupation" (Galinsky & Fast, 1966, p. 91). When no firm concept of self has been established, an individual is constantly questioning themselves about who they are and what they can do.

"The worksite is often a replication of the family of origin where the ACA's can re-enact unresolved issues" and "a central characteristic of ACA's is the development of a sense of others rather than a sense of self" (Mathews & Holbrook, 1990, p. 267).

The variables which determine choice of college majors are extremely complex (Kurn, 1962). Many times, lacking reality based skills, ACA,s have an unrealistic perception of their actual abilities and aptitudes (Schumrum & Hartman, 1989). "The profession which an individual selects is one that, according to his concept of it and as he sees himself

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3. The third part of the document addresses the challenges of financial forecasting and budgeting. It discusses the various factors that can impact a business's financial performance and provides strategies for managing these risks. This section also covers the importance of regular financial reviews and adjustments.

4. The fourth part of the document discusses the importance of financial transparency and accountability. It emphasizes that businesses should be open and honest about their financial performance to build trust with stakeholders. This section also covers the role of financial reporting and auditing in ensuring the accuracy and integrity of financial data.

5. The fifth part of the document discusses the importance of financial planning and strategy. It emphasizes that businesses should have a clear financial plan in place to guide their operations and ensure long-term success. This section also covers the role of financial advisors and the importance of regular financial reviews.

6. The sixth part of the document discusses the importance of financial risk management. It emphasizes that businesses should identify and mitigate potential financial risks to protect their assets and ensure the stability of their operations. This section also covers the role of insurance and other risk management tools.

7. The seventh part of the document discusses the importance of financial compliance and regulatory requirements. It emphasizes that businesses must adhere to all applicable financial laws and regulations to avoid penalties and legal issues. This section also covers the role of financial auditors and the importance of staying up-to-date on regulatory changes.

8. The eighth part of the document discusses the importance of financial innovation and the future of financial management. It explores emerging technologies and trends that are shaping the financial industry and provides insights into the opportunities and challenges ahead. This section also covers the role of financial innovation in improving efficiency and reducing costs.

9. The ninth part of the document discusses the importance of financial education and training. It emphasizes that businesses should invest in the financial education and training of their employees to ensure they have the skills and knowledge needed to manage their finances effectively. This section also covers the role of financial education in promoting financial literacy and responsible financial behavior.

10. The tenth part of the document discusses the importance of financial sustainability and social responsibility. It emphasizes that businesses should consider the social and environmental impacts of their financial decisions and strive to create a positive impact on society. This section also covers the role of financial sustainability in building a resilient and ethical business.

in it, and seems to him to satisfy most adequately the needs that he feels the strongest pressure to fulfill" (Englander, 1960).

There is mounting evidence that many students in all educational settings come from homes where alcohol was abused by at least one parent. Naiditch & Lerner, (1987) estimated that 25% of all public school children are children of alcoholics.

University personnel should be trained to identify and offer assistance to children of alcoholics, because outside of the family, the educational setting is the most consistent relationship experienced by the child of an alcoholic (Yurman, 1984). Also, ACA's need to be viewed as more at risk for alcohol or drug abuse, and that they are victims of someone else's decision to abuse alcohol (Riddle, 1987-88). Thus, many students who may be referred for remedial testing and evaluation are ACA's and they require a different approach from the alcohol and other drug abuse prevention and intervention usually offered (p. 110).

A positive approach should be used to present information to individuals who have alcoholism in their families. Identify health-promoting behaviors for the students, presenting information about how to reduce risks could offer hope to ACA's (Casement, 1987-88).

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The overall goals should be: (1) provide general information, (2) to identify ACA's for the purpose of providing support services, (3) to identify ACA's for assistance in dealing with guilt, shame, embarrassment, disappointment, and anger, (4) to assist in developing better self-images, positive values, decision making skills and coping skills, (5) to provide workshops on alcohol to interested individuals, (6) to provide counseling to individuals from families in which alcohol has been a problem, and (7) to make appropriate referrals of individuals with alcohol-related problems (Casement, 1987-88; Riddle, 1987-88).

In response to problems associated with alcohol abuse, this study seeks to identify the prevalence of ACA's in three major areas to determine if certain areas have disproportionate numbers of ACA's represented. These majors are: (1) social work and nursing (helping professions), (2) business majors, and (3) English majors. These areas were chosen because of the personality differences projected from individuals in these professions and characteristics attributed to ACA's from a review of the literature.

The ultimate purpose of this study is to determine whether ACA's gravitate to some college majors or occupations more than others. Additionally, perceptions of parental alcohol abuse by the students, and their desire for

help, will be explored. This has resulted in the following null hypothesis being tested. There is no difference in the number of ACA's represented in business, English, and social work/nursing majors attending Morehead State University.

Chapter 2

Method

Participants and procedures:

The sample consisted of 116 female and 82 male, undergraduate and graduate students, enrolled in classes at a regional university. Students ranged in age from 18 years to 60 years, with a mean age of 24.7 years for the total student population screened.

The Children of Alcoholics Screening Test (CAST) was administered during the fall semester of 1995 to volunteer participants on main campus classroom settings, during day and evening classes. Additionally participants were asked their sex, age, marital status, college major, and birth order. Classes were selected from three major areas (English, business, and social work/nursing) offered by the university.

Instrument:

The Children of Alcoholics Screening Test (CAST) is a 30-item inventory that measures children's feelings, attitudes, perceptions, and experiences related to their parents' drinking behavior. The test items were formulated from real-life experiences that were shared by clinically diagnosed children of alcoholics during group therapy and from published case studies (Jones, 1981. cited in Pilat &

Jones, 1984-85). It is used to identify adolescent and adult children of alcoholics in a private manner.

A Spearman-Brown split-half (odd-even) reliability coefficient was found to be .98 for latency-age, adolescent, and adult children of alcoholics (Jones, 1982; cited in Wright & Heppner, 1991; Jones 1987).

In a study of validity, the instrument was found to discriminate clinically diagnosed children of alcoholics and self-reported children of alcoholics from a control group, with a validity coefficient of .78 (Jones, 1982, cited in Wright & Heppner, 1991).

Lease & Yanico (1995) did research to determine whether criticism of the CAST as an instrument lacking validity was justified. The results obtained by this study supported earlier research that the CAST was a valid instrument.

The standards established by Pilat & Jones (1984-85), were as follows: 0-1 yes answers, children of non-alcoholics; 2-5 yes answers, children of problem drinkers; and 6 or above, children of alcoholics. Using these standards, answers on each CAST were compiled for group participants in the respective categories.

Chapter 3

Results

Of the total college sample (N = 198, mean age = 24.7, range = 18-60) computations were made relative to all participants. As shown in the chart below, individuals classified as ACA were tabulated by number, percentage of total sample, and by sex.

RESULTS of TOTAL SAMPLE for ACA's, MEAN AGE, and AGE RANGE					
Group	Number	Classified ACA's	% Per Group	Mean Age	Range
All	198	63	31.82%	26.13	18-50
Male	82	20	24.39%	23.84	20-39
Female	116	43	37.06%	26.95	18-50

The percentage of married ACA's and the mean birth order were computed as shown below:

PERCENTAGE OF MARRIED ACA's and MEAN BIRTH ORDER			
Sex	Married ACA's	Mean Birth Order	
Male	50.00%	1.74	
Female	58.13%	1.81	

The college major sub-groups were checked for the prevalence of ACA's. The identified ACA's were expressed as a percentage of the total sample in each major group, as

well as ACA male/female representation in these major groups. The results are shown below.

TOTAL IDENTIFIED ACA's by SELECTED MAJORS			
Major/Area of Study	Male	Female	Total % by Major
English	24	21	26.66
ACA's	5	7	
% by SEX	20.83	33.33	
Business	22	19	26.82
ACA's	5	6	
% by SEX	22.73	31.58	
Social Wk/Nursing	8	43	47.05
ACA's	3	21	
% by SEX	37.5	48.83	
Pooled Majors	31	30	26.66
ACA's	5	11	
% by SEX	16.13	36.66	

Calculation of the z statistic for significant difference in proportion was completed for prevalence of ACA's between major sub-groups (nur/social work, English, business, and pooled majors), as well as for male/female representation in these sub-groups. This was also done for male/female representation in the individual majors. The following chart shows the z scores obtained.

CALCULATION OF THE Z STATISTIC FOR SIGNIFICANT DIFFERENCES IN PROPORTION BETWEEN VARIOUS SUB-GROUPS AND MAJORS						
COMPARED CATEGORIES				CALCULATED Z SCORE		
TOTAL MALE ACA's X TOTAL FEMALE ACA's						-1.59
NUR/SOCIAL WORK ACA's X NUR/SOCIAL WORK ACA's						-0.53
ENGLISH MALE ACA's X ENGLISH FEMALE ACA's						1.23
BUSINESS MALE ACA's X BUSINESS FEMALE ACA's						-0.75
ENGLISH MAJOR ACA's X BUSINESS MAJOR ACA's						-0.08
ENGLISH MAJOR ACA's X POOLED MAJOR ACA's						-0.02
BUSINESS MAJOR ACA's X POOLED MAJOR ACA's						0.07
NUR/SOCIAL WORK MAJOR ACA's X POOLED MAJOR ACA's						*2.29
NUR/SOCIAL WORK MAJOR ACA's X BUSINESS MAJOR ACA's						*1.99
NUR/SOCIAL WORK MAJOR ACA's X ENGLISH MAJOR ACA's						*2.06
(p<.05)						
*significant difference						

From the obtained scores, significant difference was found to exist between the following sub-groups/majors: 1. nursing/social work/pooled majors (z score = 2.29), 2. nursing/social work/English (z score = 2.06), 3. nursing/social work/business (z score = 1.99). In these four sub-group comparisons the z scores were greater than 1.65 (p<.05) and therefore the null hypothesis was rejected.

Perception of Parental Alcoholism

Frustration, guilt, worry, and embarrassment were characteristic responses to parental alcohol abuse and family problems arising from family alcoholism. Individual responses of students scoring in the ACA category were examined to determine the students' perception of parental

drinking, students' responses to a parents' drinking and students' desire for help.

1. Thought that a parent had a drinking problem (42.5%).
2. Felt alone, scared, nervous, angry, frustrated because a parent was not able to stop drinking (55.3%).
3. Argued or fought with a parent when he/she was drinking (44.68%).
4. Had a parent yell at or hit them or another family member when drinking (46.8%).
5. Had to protect another family member from a parent who was drinking (42.5%).
6. Wished that a parent would quit drinking (61.7%).
7. Avoided outside activities and friends because of embarrassment and shame over a parent's drinking problem (34.04%).
8. Worried about a parent's health because of his/her alcohol use (63.82%).
9. Ever thought your father was an alcoholic (55.32%).
10. Ever thought your mother was an alcoholic (8.51%).
11. Stayed away from home to avoid a drinking parent or the other parent's reaction to the drinking (36.17%).

12. Took over chores or duties at home that were usually done by a parent before he or she developed a drinking problem (21.28%).

Of the individuals classified as ACA's by the CAST, twenty-four (38.09%) reported a desire, now or in the past, to talk to someone who could understand and help the alcohol related problems in their family.

Chapter 4

Discussion

This study grew out of an interest to determine the relationship between early life experiences (of an alcoholic home environment) and occupational choice or college major. It departs from most traditional research of ACA's. Instead of the percentage of ACA's in a total sample, this research sought to determine whether ACA's grouped or gravitated in particular areas of study or choices of occupation.

The percentage of the sample classified as ACA's was comparable with results obtained from previous studies. Also, the percentage of male/female ACA representation and the percentage of ACA's that desired help in the past, was not of significance. Graduate students were not represented in adequate numbers for conclusions to be drawn.

The area of interest in this research was the comparison between ACA's represented in social work/nursing (helping professions) and the other majors/pooled majors. Z scores indicated a significant difference between social work/nursing x business, social work/nursing x English, and social work/nursing x pooled majors.

Very little research has been done in the area explored in this study. No studies or concrete data were found of a predictive nature (as to occupation or college major choice)

or to explain the results obtained from this particular sample.

Akerman (1987) says that ACA's constantly seek approval and affirmation. This could possible lead to an occupation where the work done would meet this need. In a helping profession, praise may be lavished on an individual caring for a sick family member or by helping someone receive benefits in a social work setting.

Black (1990) and Woititz (1990) concur as to the behavior of ACA's, that they may be very responsible. They took care of other family members and performed responsibly in duties inappropriate for their age. This situation made them caretakers at a very early age. The duties of a nurse or social worker require that individuals in these occupations be extremely responsible. They may have felt helpless in these situations and developed a desire for more training to feel competent and in control. This could be seen as a continuation of a behavior pattern started early in life and certain needs may be met by choosing nursing or social work as a profession.

This difference in ACA representation may indicate that ACA's are an unique group with common life experiences in their family of origin. This could cause individuals with similar life experiences to be drawn into certain areas of study or occupations.

Even though the results indicate a significant difference of ACA representation between the majors examined in this sample, other avenues should be explored. Factors such as race and other major areas of study, were not considered in this research. The data was collected in a mid-size university in a rural setting. A replication in a large metropolitan university might be done to see if similar results are obtained.

Since very little research has been done on this subject, further studies need to be done, both in size and scope.

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1. The first part of the document discusses the importance of maintaining accurate records of all transactions and activities. It emphasizes the need for transparency and accountability in financial reporting.

2. The second part of the document outlines the various methods and techniques used to collect and analyze data. It includes a detailed description of the experimental procedures and the statistical analysis performed.

3. The third part of the document presents the results of the study. It includes a series of tables and graphs that illustrate the findings and trends observed during the experiment.

4. The fourth part of the document discusses the implications of the results and the potential applications of the findings. It also addresses the limitations of the study and suggests areas for future research.

5. The final part of the document provides a conclusion and a summary of the key points discussed throughout the report.

CAST Cover Letter

October 14, 1995

Dear Student,

As a requirement for the Education Specialist Degree in Guidance and Counseling at Morehead State University, I am conducting a research study designed to investigate the relationship of alcohol use in the family and career/educational preference.

Enclosed is a Children of Alcoholics Screening Test that I would like for you to complete. Participation in this study is not required and is on a volunteer basis. Also, if you chose to participate, please fill in the information at the first of the instrument. After completing the instrument, do not sign your name or write any other identifying information. The individual information will be totally confidential. The individual information will be totally confidential. After the survey is filled out, please leave with your Instructor during the next class meeting.

After completion of this project, it should be in the Morehead State University Library, the spring semester of 1996. This study will be listed under my name (Lester Jones).

I hope that you choose to participate.

Thanks

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CAST

C.A.S.T.

Please check () the answer below that best describes your feelings, behavior, and experiences related to a parent's alcohol use. Take your time and be as accurate as possible. Answer all 30 questions by checking either "Yes" or "No".

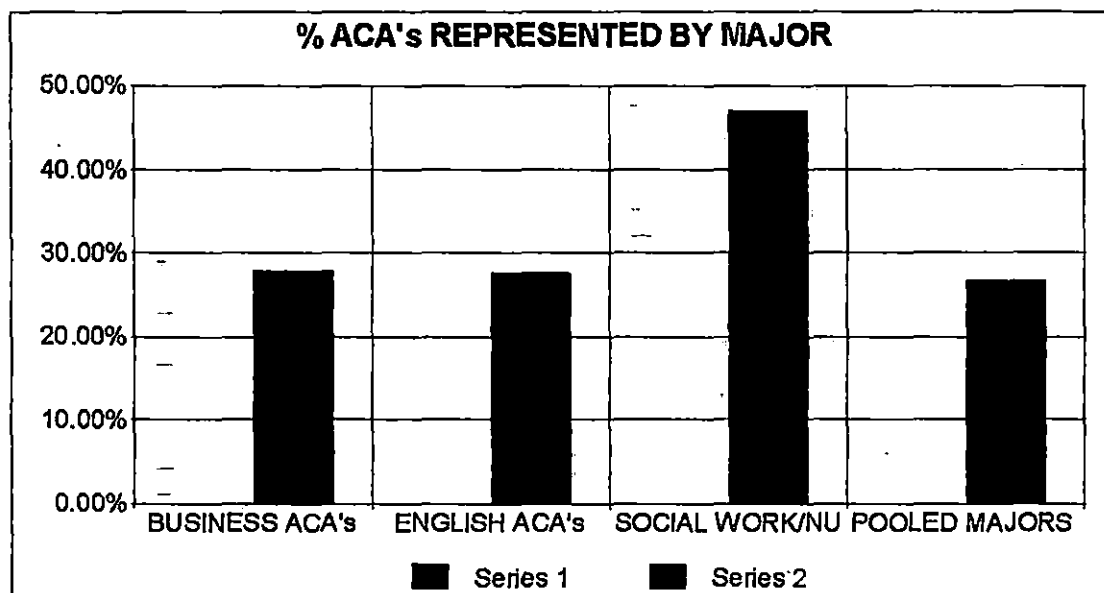
Sex, Male ___ Female ___ Age ___ College Major _____

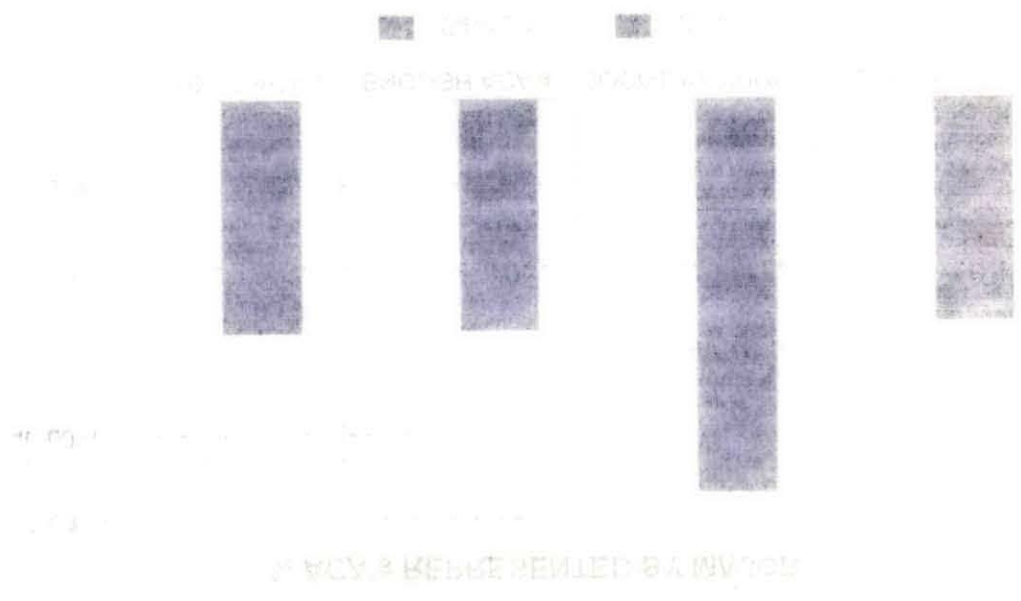
Married, Yes ___ No ___ Birth Order _____

Yes	No	Questions
___	___	1 Have you ever thought that one of your parents had a drinking problem?
___	___	2 Have you ever lost sleep because of a parent's drinking?
___	___	3 Did you ever encourage one of your parents to quit drinking?
___	___	4 Did you ever feel alone, scared, nervous, angry, or frustrated because a parent was not able to stop drinking?
___	___	5 Did you ever argue or fight with a parent when he or she was drinking?
___	___	6 Did you ever threaten to run away from home because of a parent's drinking?
___	___	7 Has a parent ever yelled at or hit you or other family members when drinking?
___	___	8 Have you ever heard your parents fight when one of them was drunk?
___	___	9 Did you ever protect another family member from a parent who was drinking?
___	___	10 Did you ever feel like hiding or emptying a parent's bottle of liquor?
___	___	11 Do many of your thoughts revolve a problem drinking parent or difficulties that arise because of his or her drinking?
___	___	12 Did you ever wish that a parent would stop drinking?
___	___	13 Did you ever feel responsible for and guilty about a parent's drinking?
___	___	14 Did you ever fear that your parents would get divorced due to alcohol misuse?
___	___	15 Have you ever withdrawn from and avoided outside activities and friends because of embarrassment and shame over a parent's drinking problem?
___	___	16 Did you ever feel caught in the middle of an argument or fight between a problem drinking parent and your other parent?
___	___	17 Did you ever feel that you made a parent drink alcohol?
___	___	18 Have you ever felt that a problem drinking parent did not really love you?
___	___	19 Did you ever resent a parent's drinking?
___	___	20 Have you ever worried about a parent's health because of his or her alcohol use?
___	___	21 Have you ever been blamed for a parent's drinking?
___	___	22 Did you ever think your father was an alcoholic?
___	___	23 Did you ever wish your home could be more like the homes of your friends who did not have a parent with a drinking problem?
___	___	24 Did a parent ever make promises to you that he or she did not keep because of drinking?
___	___	25 Did you ever think your mother was an alcoholic?
___	___	26 Did you ever wish that you could talk to someone who could understand and help the alcohol-related problems in your family?
___	___	27 Did you ever fight with your brothers and sisters about a parent's drinking?
___	___	28 Did you ever stay away from home to avoid the drinking parent or your other parent's reaction to the drinking?
___	___	29 Have you ever felt sick, cried, or had a "knot" in your stomach after worrying about a parent's drinking?
___	___	30 Did you ever take over any chores and duties at home that were usually done by a parent before he or she developed a drinking problem?

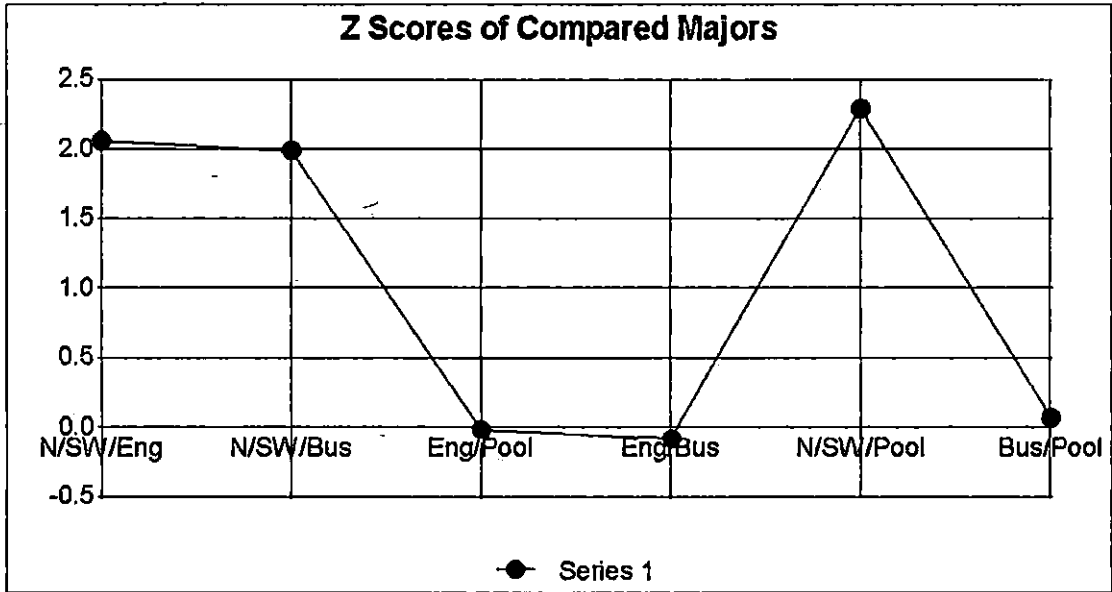
[The text in this section is extremely faint and illegible. It appears to be a multi-paragraph document or a list of items, but the specific content cannot be discerned.]

Graph 1





Graph 2



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