Background: Children of Alcoholics and Addicts

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Drug and alcohol addiction presents a vast number of social, economic, and public health concerns that affect society to a great degree. The National Institute on Drug Abuse (2011) estimates that the annual cost of substance abuse in the United States surpasses $600 billion. While this figure is truly astounding, it does not represent the far more detrimental implications of substance abuse for the addict’s children as related to their mental health and overall development.

Beginning with the earliest stages of life, any illicit substance used by a mother during pregnancy puts her developing fetus at risk of inheriting a number of cognitive and physical impairments, including mental retardation (American Psychiatric Association, 2000). Maternal substance abuse during pregnancy can also trigger physiological dependence in the fetus (American Psychiatric Association, 2000). Consequently, many developmental milestones may not be achieved at the expected ages and the child’s mental stability and quality of life become compromised (Towers, 1989).

While under the influence of drugs or alcohol, a parent’s ability to fulfill his or her role as a caregiver or perform household duties is inhibited (Towers, 1989). The overall wellbeing of the child may be neglected and in some instances, children may find themselves assuming the responsibility of looking after younger siblings (Towers, 1989). The DSM-IV-TR reports that parental neglect is especially prevalent in households where cocaine, hallucinogen, and inhalant use are abundant (American Psychiatric Association, 2000). Tension is likely to arise among family members regarding drug use, thereby exposing children to a potentially violent environment.

As children of alcoholic and drug addicted parents approach school age, Sher (1997) reports that they are more vulnerable to bullying, have higher rates of school absenteeism, and
are more likely to be referred to school psychologists than children whose parents do not abuse substances. Subsequently, their academic achievement may suffer and many students are suspended from school as a result (Towers, 1989). Austin and Sciarra (2010) also note that there is a link between school truancy and susceptibility to drug and alcohol abuse.

Rebellious and acting out behaviors are commonly diagnosed as characteristics of attention deficit disorder and conduct disorder (Towers, 1989). These psychiatric disorders tend to manifest within children of drug and alcohol addicts as a result of the child’s low self-esteem, inability to trust others, and feelings of shame and fear (Towers, 1989). In addition, feelings of insecurity have the potential to negatively influence the child’s self worth as well as their ability to cope with stress (Towers, 1989). Psychological implications of these maladaptive coping mechanisms include “…depression, phobias, panic reactions, and hyperactivity” (Towers, 1989).

Social isolation is yet another major challenge that these children face as they approach adolescence (Towers, 1989). The desire to fit in with peers often outweighs one’s good judgment, and many adolescents gravitate toward those who abuse drugs and alcohol as a result. Therefore, having substance-dependent parents puts children at risk of also using illicit drugs.

In sum, children of substance abusing parents are at a much greater risk of developing cognitive and mental disabilities, falling behind academically, and enduring various traumatic experiences in the form of abuse and neglect. The most extreme outcomes for these children include “…delinquency, substance abuse, and suicide…” (Towers, 1989). This issue is relevant to the applied developmental psychology field as mental health and school officials have the opportunity to intervene and potentially change the lives of these children for the better.
References


