PERSONAL READINESS FOR MARRIAGE IN ADULT CHILDREN OF ALCOHOLICS AND ADULT CHILDREN OF NON-ALCOHOLICS

by

Hilary DeLap

A Research Paper

Submitted in Partial Fulfillment of the Requirements for the Master of Science Degree With a Major in

Guidance and Counseling

Approved: 2 Semester Credits

Investigation Advisor

The Graduate College University of Wisconsin-Stout December, 2000

The Graduate College University of Wisconsin-Stout Menomonie, WI 54751

ABSTRACT

DeLap	Hilar	y J		
(Writer) (Last N	(First	st) (Initial))	
Personal Readiness for Marriage in Adult Children of Alcoholics and Adult Children of				
(Title)				
Non-Alcoholics				
Guidance and Counseling 43	g Dr. Stephen Shumate	December 2000		
(Graduate Major)	(Research Advisor)	(Month/Year)	(No.	
of Pages)				
American Psychological Association (APA) Publication Manual (Name of Style Manual Used in this Study)				

A small body of research suggests that young adult children of alcoholics (ACOAs) are less prepared for marriage than their non-ACOA peers. This study examined readiness for marriage between ACOAs and non-ACOAs. A sample of 132 college students completed both the Children of Alcoholics Screening Test (CAST), which distinguishes adult children of alcoholics from adult children of non-alcoholics, and the Personal Readiness for Marriage Scale, which measures reported levels of personal readiness for marriage. The results of the comparison of mean values on the overall score and 10 subscales of the Personal Readiness for Marriage Scale between ACOAs and non-ACOAs were not significant. The null hypothesis was retained. There was no statistical significance between scores

on the Personal Readiness for Marriage Scale for college students with an alcoholic parent compared to college students not raised by an alcoholic parent.

These results contradict past limited research in this area and indicate that further investigation is necessary before any legitimate conclusions can be drawn regarding young ACOAs and their readiness for marriage.

Acknowledgements

First of all, I would like to thank Dr. Amy Gillett for getting me started in the right direction and for having an answer to every question I ever asked. I would like to thank Dr. Mitchell Sherman, Dr. Lynn James Harris, Dr. Donald Baughman, and Mark Fenton for allowing me to invade their classrooms and use their students as subjects. I would also like to thank the librarians who helped me to find resources that I did not know even existed, as well as how to use them. Finally, I would like to thank my research advisor, Dr. Stephen Shumate, for all of his wisdom, advice, and support of my project. I would like to thank him for taking the time and doing countless revisions of my paper, as well as keeping me and calm and focused when I might otherwise not have been. Thanks to everyone who offered me support and encouraged me throughout this project.

Table of Contents

	Page
Abstract	ii
Acknowledgments	iv
Table of Contents	v
List of Tables	vii
Chapter I Introduction	1
Introduction	1
Statement of the Problem	4
Definition of Terms	5
Assumptions	5
Limitations	5
Chapter II Literature Review	6
Introduction	6
Characteristics of ACOAs	6
Influence of Family of Origin	10
Intimacy	11
Divorce	12
Marital Attitudes and Satisfaction	13
Perceived Readiness for Marriage	13
Chapter III Methodology	16
Introduction	16
Hypotheses	16

Table of Contents (continued)

	Page
Subject Selection and Description	16
Instrumentation	17
Data Collection	18
Data Analysis	18
Chapter IV Results	20
Introduction	20
Sample Characteristics	20
ACOAs versus Non-ACOAs	21
Retained Hypothesis	22
Chapter V Summary, Conclusions, and Recommendations	24
Summary	24
Conclusions	24
Recommendations	26
References	27
Appendix A- Demographic Questionnaire	32
Appendix B- The Personal Readiness for Marriage Scale	
Appendix C- The Children of Alcoholics Screening Test (CAST)	

List of Tables

	Page
Table	
1	23

CHAPTER 1

Introduction

Alcohol related problems cost society almost \$100 billion dollars every year (National Institute on Alcohol Abuse and Alcoholism [NIAAA], 1996).

Most of that money is spent on the 14 million Americans who are either alcoholics or abuse alcohol (NIAAA, 1996). These 14 million American alcoholics and abusers tend to capture society's attention, while many others, particularly the children of alcoholics, are seriously affected by these disorders.

The 1992 NIAAA survey reported that 43% of all children are exposed to someone who has problems associated with alcohol abuse or alcohol dependence (NIAAA, cited in Children of Alcoholics Foundation, 1999). In addition, there are currently 22 million adult children of alcoholics (Children of Alcoholics Foundation, 1999). Although children of alcoholics have an alarming number of members, only recently has attention been given to their special needs.

Adult children of alcoholics experience a variety of problems. Many adult children of alcoholics were raised in homes characterized by inconsistencies in discipline (Lawson, Peterson, & Lawson, 1983; Sandoz, 1998), parental fighting and arguing (Black, Bucky, & Wilder-Padilla, 1986; Lawson, Peterson, & Lawson, 1983), blame (Friel & Friel, 1988), and feelings of rejection (Sandoz, 1998). Adult children of alcoholics often assume compensatory roles within their

dysfunctional families as a psychological defense (Lawson, Peterson, & Lawson, 1983). There are four main compensatory roles that have been identified in the literature: the hero, the scapegoat, the lost child, and the mascot (Friel & Friel, 1988; Lawson, Peterson, & Lawson, 1983). The hero is usually one of the older children who provides the family with a sense of worth through hard work and numerous accomplishments. These children give the family a good name at the expense of their own happiness (Friel & Friel, 1988; Lawson, Peterson, & Lawson, 1983). Scapegoats are children who act out to obtain attention from adults. For these children, negative attention is better than no attention. They are likely to abuse drugs and alcohol, steal, and get into fights (Friel & Friel, 1988; Lawson, Peterson, & Lawson, 1983; Woititz, 1983). The lost child's method of coping is to withdraw and avoid trouble. These children are passive and isolated, and they tend to feel inadequate and lonely (Friel & Friel, 1988; Lawson, Peterson, & Lawson, 1983; Woititz, 1983). The mascot is usually the youngest child who gets attention by becoming an entertainer. Mascots will use humor to divert attention from family problems and from their feelings of insecurity, pain, and isolation (Friel & Friel, 1988; Lawson, Peterson, & Lawson, 1983; Woititz, 1983).

Many adult children of alcoholics (ACOAs) report problems affecting their interpersonal relationships (Woititz, 1983). These include: low self-esteem

(Domenico & Windle, 1993; Friel & Friel, 1988; Woititz, 1983), intimacy problems, extreme dependency (Black, Bucky, & Wilder-Padilla, 1986; Friel & Friel, 1988), sexual dysfunction, anxiety (Friel & Friel, 1988), depression (Belliveau & Stoppard, 1995; Friel & Friel, 1988; Lawson, Peterson, & Lawson, 1983), and a need for control (Bradley & Schneider, 1990; Friel & Friel, 1990). ACOAs have also been found to have higher divorce rates and lower levels of satisfaction in their marriages (Kerr & Hill, 1992). In addition, Black, Bucky, & Wilder-Padilla (1986) reported that significantly more ACOAs married alcoholics in comparison to non-ACOAs.

For the most part, ACOAs' parents have not been adequate marital role models (Larson & Thayne, 1998). ACOAs also have a higher divorce rate than children raised in a nonalcoholic home (Kerr & Hill, 1992). However, ACOAs are not the sole contributor to the rising divorce rate. With nearly half of all marriages currently ending in divorce, at a rate of 4.2 per 1,000 population, readiness for marriage is an important research topic (National Center for Health Statistics, 1999). While young age is a strong predictor of divorce, it is not always necessarily true. In 1998, men waited until the median age of 26.7 to get married and women waited until the median age of 25 to get married (U.S. Bureau of the Census, 1999). This compares to 1950 when the divorce rate was 2.6 per 1,000

population and men were getting married at the median age of 22.8 and women were only the median age of 20.3 years (U.S. Bureau of the Census, 1975; U.S. Bureau of the Census, 1999).

Marital satisfaction and success are determined in part by marital competence (Stinnett, 1969). Marital competence has been defined as "the ability to perform marital roles in such a manner as to fulfill in the mate certain important needs involved in the marital relationship" (Stinnett, 1969, p. 693). These needs include: 1) love - providing security and affection; 2) personality fulfillment - helping one's mate to achieve social and intellectual development, as well as autonomy; 3) respect - providing understanding, encouragement, and good listening; and 4) communication - expressing true feelings and dealing with disagreement constructively. Stinnett (1969) also suggests that one's readiness to fulfill these needs contributes to a successful marriage. If this is true, then an examination of personal readiness for marriage might offer insight regarding which marriages will be successful and which ones will not. Readiness for marriage also affects a person's decision when to get married, whom to marry, and one's reasons for getting married (Larson, 1988). ACOAs with relationship difficulties might not be as likely to be considering these aspects of marriage as those who are not ACOAs.

Reviews of the ACOA literature indicate that adult children of alcoholics have a high number of personality characteristics, such as depression, fear of abandonment, and a need for control, that may cause problems in intimate relationships (Bradley & Schneider, 1990; Martin, 1995). Other studies have demonstrated that people who view their family of origin as unhealthy will have more negative feelings toward marriage (Fine & Hovestadt, 1984; Larson, Benson, Wilson, & Medora, 1998). Therefore, the research question examined in this study is whether or not adult children of alcoholics view themselves as less prepared for marriage than adult children of non-alcoholics. Only a few previous studies look at this population relative to marriage readiness. With the divorce rate already high, it is beneficial to identify populations with a high risk for divorce. Early identification of individuals at high risk for divorce may assist in the development of divorce prevention efforts.

Statement of the Problem

This study will determine variance in personal readiness for marriage, as measured by the Personal Readiness scale, for college students who differ in the amount of alcohol consumed by a parent as measured by the Children of Alcoholics Screening Test. The data will be gathered from UW- Stout students, ages 18-25, in introductory psychology classes. This information will help determine if adult children of alcoholics could benefit from additional premarital

counseling and/or education. With the divorce rate already high, this may be a population counselors could identify as benefiting from premarital counseling. This would help ACOAs become conscious of the problems they may encounter in a marriage as a result of the unhealthy experiences provided by their family of origin.

Definition of Terms

For the purpose of this study, adult children of alcoholics will be defined as people between the ages of 18 and 25 who have never been married and who answer yes to at least 6 of the items on the Children of Alcoholics Screening Test. Fusion is defined as the degree to which relationships in the family are emotionally bound and/or emotionally reactive. Triangulation refers to a process in which a third party, usually a child, becomes the focus of tension in a marital dyad.

Assumptions

There are two main assumptions relevant to this area of research.

- An assumption of this study is that the subjects answered the questionnaire truthfully.
- 2. Another assumption is that several subjects are classified accurately as children of alcoholics.

Limitations

There are also two main limitations for this study.

- 1. There is a limitation with external validity. Since the subjects were chosen on the basis of an enrolled course, they may not be representative of other people their age either not in college or in other college majors.
- 2. Since the information concerns the issue of alcoholism, subjects may not be willing to participate or may not answer the questions truthfully.

CHAPTER 2

Review of the Literature

Introduction

Adult children of alcoholics (ACOAs) recently have gained public attention and become the focus of scholarly research. For the purpose of this review, the ACOA literature is divided into six sections: Characteristics of ACOAs, influence of family of origin, intimacy, divorce, attitude toward marriage, and perceived readiness for marriage. The section on characteristics of ACOAs provides background knowledge relevant to understanding their risk for relationship difficulties. The influence of family of origin suggests that ACOAs risk replicating dysfunctional relationship patterns. The section on intimacy reviews ACOAs lack of healthy relationship modeling and their problems with forming intimate relationships. The section of the review on divorce examines

how ACOAs' attitudes toward marriage relate to their higher risk for divorce.

The section on attitudes toward marriage discusses how ACOAs feel about marriage and their tendencies to have lower levels of satisfaction in their relationships. Finally, perceived readiness for marriage literature identifies ACOAs as a distinct population who do not display high levels of readiness for marriage.

Characteristics of ACOAs

Many characteristics of adult children of alcoholics contribute to adjustment problems in their intimate relationships. Bradley and Schneider (1990) found that ACOAs had a significantly higher need for control in their relationships compared to non-ACOAs. Bradley and Schneider (1990) hypothesize that ACOAs do this in response to the lack of control that characterized their family of origin. Woititz (1985) asserts that ACOAs have an underlying fear that they will lose control of their life if they engage in a relationship. At least one of the ACOAs parents, if not both, were out of control and the ACOA seeks to avoid similar experiences. Woititz (1985) hypothesizes that since ACOAs are typically so unsure of themselves, they will push all major decisions to their partner so they do not make a "wrong decision". Yet, ACOAs may use this as a ploy to back away from the relationship because they will say their partner is trying to control them, but they are actually the ones who are

manipulating the situation. Black, Bucky, & Wilder-Padilla (1986) found that ACOAs did have significantly greater problems with both trust and emotional self-disclosure than comparison groups of non-ACOAs. This buttresses Bradley and Schneider's (1990) finding that adult children of alcoholics experience a higher level of stress in their life than their cohorts.

Many ACOAs struggle with depression, which also can have a negative impact on their relationships. Woititz (1985) asserts that many ACOAs are "chronically depressed" as a result of both anger with themselves and a continuous sense of loss. Most have lost the healthy experience of childhood and the ability to be spontaneous. This realization causes sadness and depression in ACOAs. Woititz (1985) believes ACOAs are skilled at masking their feeling of depression from their partners by being overly pleasant and happy. However, their overwhelming fear that the relationship will end eventually surfaces and paradoxically ends up driving their partner away. When this happens, the experience adds to both their depression and sense of loss. Belliveau and Stoppard (1995) found that ACOAs had higher mean Clinical Analysis Questionnaire (CAQ) factor scores on the depression scale than non-ACOAs. Jarmas and Kazak (1992) also found that ACOAs had a greater degree of introjective depression than non-ACOAs. Black, Bucky, & Wilder-Padilla (1986) found that ACOAs reported feeling significantly more depressed on a regular basis than non-ACOAs

according to a self-reported questionnaire. These findings support the idea that ACOAs tend to be self-critical and guilt prone, because these two characteristics are the main descriptors of introjective depression.

McLeod and Eckberg (1993) explored the connection between depression and marital quality using a modified version of the Diagnostic Interview Schedule, Version III-A and four created indexes. They found that a couple's perception of their marital quality depended on whether or not one of the spouses was depressed. Spouses with a depressed partner saw their marriage as being completely satisfying or very satisfying less often than spouses without a depressed partner. Spouses with depressed partners also rated their partners as more demanding and were more likely to avoid talking with them. Both the depressed spouse and their partner reported a poor level of marital quality compared to couples without a depressed spouse.

Schafer, Wickrama, and Keith (1996) looked at depression and marital happiness for married couples using an 11-item scale for the frequency of their depressive symptoms, their own reports of marital happiness, and how happy they perceived their spouse to be. They found that for both partners there was a negative association between depression and marital happiness. The partners with the higher levels of depression had lower levels of marital happiness.

Belliveau and Stoppard (1995) found that ACOAs had higher Clinical Analysis Questionnaire factor scores on the scales for psychoticism and neuroticism than non-ACOAs. When high scores are achieved on these two scales, it reflects instability and disorganization of their personality structure. In other words, high scores on these scales reflect a general maladjustment that interferes with efforts to form a close relationship. Jarmas and Kazak (1992) found that ACOAs use the defensive style "turning against others" significantly more than non-ACOAs, which indicates that they are more likely to use aggressive defenses. Finally, Berkowitz and Perkins (1988) used the Self-Identification Form and Interpersonal Orientations Form to report that ACOAs and non-ACOAs had personality differences when it came to levels of independence/autonomy and self-depreciation. ACOAs had higher levels for both measures. These results indicate that ACOAs experience both adaptive and dysfunctional consequences due to their parents' use of alcohol, but that it varies according to gender. Female ACOAs had higher levels of self- depreciation than non- ACOA females and male ACOAs had significantly higher levels of independence/autonomy and self- depreciation that male non- ACOAs. The high levels of self- depreciation may be connected to female depression and males may have higher levels of independence/autonomy due to their hesitation to rely on others (Berkowitz & Perkins, 1988).

Fear of abandonment is another characteristic that many ACOAs possess (Woititz, 1985). Woititz (1985) distinguishes this from a fear of rejection, which most ACOAs seem to be able to handle. Abandonment has much deeper roots. As a result of living with an alcoholic parent, ACOAs have come to expect a life filled with unpredictability and inconsistency. With this, ACOAs have a constant thought that their partner could leave at any time. To try and protect against this, the ACOA will try to do everything to keep the relationship "perfect" and avoid conflict. When conflict arises, ACOAs become so concerned about being abandoned that they lose sight of the problem. As a result, the conflict is usually not addressed because the ACOA will apologize immediately in order to preserve the relationship. Neither party gets the chance to discuss their feelings and the same issue will keep reappearing (Woititz, 1985).

Influence of Family of Origin

ACOAs have been identified as a high-risk population for developing numerous relationship problems due to family of origin dysfunction. Fine and Hovestadt (1984) suggest that if the Family of Origin Scale (FOS) can accurately identify the experience of a person's family of origin, then there is the possibility that not only pathologies may be transmitted, but also other behaviors such as perceptions of marriage. Jarmas and Kazak (1992) found that ACOAs perceive their families as having greater inconstancies, lower levels of cohesion, fewer

expressions of feelings, less organization, poor communication, and a high level of conflict than non-ACOAs. Harrington and Metzler (1997) used the Self-Report Family Inventory and Children of Alcoholics Screening Test to form three different groups: adult children of dysfunctional families with alcoholism (ACDFAs), adult children of dysfunctional families (ACDFs), and adult children of functional families (ACFFs). They administered 9 of the 11 subscales from the Marital Satisfaction Inventory and found that ACDFAs and ACDFs significantly differed on the problem solving communication subscale. Both ACDFAs and ACDFs reported higher levels of dissatisfaction with their problem solving communication in their intimate relationships.

Friel and Friel (1990) stress the concept of re-enactment. Re-enactment refers to behavior one has learned as a child that carries forth as an adult until there is a conscious effort to change the pattern. Unfortunately for most children of alcoholics, the patterns of behavior are very painful, habitual, and unconscious. Benson, Larson, Wilson, and Demo (1993) examined how young adults' family of origin influenced their intimate relationships. The dysfunctional processes of fusion, triangulation, and control were examined and young adults in families considered to be very fused were less likely to have open communication in their intimate relationships. They also found that all three processes were associated with higher levels of aversive communication (i.e. fighting, blaming, badgering).

High scores on the fusion and the triangulation scales, which are subscales from the Personal Authority in the Family System Questionnaire, Version C, or PAFS-Q, have been connected to marital problems (Benson et. al., 1993). In addition, Larson, Benson, Wilson, and Medora (1998) found that both high levels of triangulation and high levels of fusion were related to more negative feelings and attitudes about marriage. These findings support Fine and Hovestadt's (1984) research that young adults who see their families of origin as less healthy are more likely to have more negative attitudes and feelings about marriage. These negative feelings and attitudes are the demonstrated result of the doubts, worries, and insecurities about relationships caused by the interactions of fused and triangulated families of origin.

<u>Intimacy</u>

A fused or triangulated family of origin may result in low levels of intimacy in ACOAs' relationships. Intimate relationships can be hard for ACOAs to achieve because they may never have witnessed a healthy relationship. Their primary model has been their parents' marriage, which often is not a healthy example (Woititz, 1983). ACOAs' parents contribute to ACOAs' fear of abandonment due to the lack of consistency in their parental relationship. One day the parent wants the child close to them, and the next day the parent rejects the child. Between abandonment and poor examples of ongoing intimate

relationships, ACOAs have little basis for forming healthy intimate relationships (Woititz, 1983). Martin (1995) reported that ACOAs experience less intimacy in their relationships than non-ACOAs. The lower level of intimacy was also correlated with greater loneliness and less openness to feelings. Similarly, Black, Bucky, & Wilder-Padilla (1986) found that ACOAs described themselves as having difficulties with both intimacy and verbalizing their needs. As a result, ACOAs were much less likely than non-ACOAs to communicate their needs to their partners in a relationship. More recently, Sandoz (1998) found that recovering alcoholic adults, most of who were ACOAs, have lower levels of intimacy when their mother was an alcoholic compared to both parents being alcoholic. Sandoz (1998) offered the explanation that if both parents drank, the children would at least see an example of an intimate relationship, but one entwined with alcohol. If only the mother drank, she would have neglected her ability to care for the family and the children would have no nurturing role model and the relationship between her and her husband would lack intimacy and be characterized by conflict. In addition, the children are more likely to see much unresolved conflict between their parents and not understand true intimacy.

Divorce

Since childrens' earliest exposure to marriage comes from their parents, the perception of their parents' marriage will be closely related to their attitudes toward marriage (Greenberg & Nay, 1982). Greenberg and Nay (1982) found that young adults with parents who either separated or divorced had a favorable attitude towards divorce and rated their natural parents' marital happiness, up to the age of 12, as much lower than young adults in the parent-intact and parent-deceased groups. Black, Bucky, & Wilder-Padilla (1986) found that ACOAs reported higher levels of divorce than the comparison group of non-ACOAs on a self-report questionnaire. In the same study, Black, Bucky, & Wilder-Padilla (1986) found that ACOAs reported a much higher percentage of their parents getting divorced before age 18 than children of nonalcoholics. This may partially explain why ACOAs are at a higher risk for divorce since more ACOAs come from divorced parents than non-ACOAs. Even for the ACOAs who come from intact families, many of those families were characterized by parental fighting and arguing (Black, Bucky, & Wilder-Padilla, 1986; Lawson, Peterson, & Lawson, 1983).

Marital Attitudes and Satisfaction

ACOAs have more negative attitudes and feelings toward marriage, and are very likely to encounter problems in their intimate relationships (Larson & Thayne, 1998). Larson and Thayne (1998) also found that males had significantly higher levels of negative attitudes and feelings toward marriage than females.

Parker and Harford (1988) found that ACOAs have higher levels of marital

disruption than adults who were not raised by an alcoholic parent. Kerr and Hill (1992) found that ACOAs have a higher number of divorces in comparison to non-ACOAs. They also found that ACOAs have more problems with their level of marital adjustment and level of marital satisfaction than non-ACOAs and that ACOAs have less satisfaction overall in their spousal relationships than non-ACOAs.

Perceived Readiness for Marriage

Perceived readiness for marriage is a subjective measure of how prepared a person feels to fulfill the basic roles and responsibilities of marriage. Larson (1988) found that for young adults, their parents' marital status did not influence their perceived readiness for marriage. However, students who considered themselves romantic and completed a course on marriage and family scored significantly higher on the Revised Readiness for Marital Competence Index that measured their level of perceived readiness for marriage (Larson, 1988). Stinnett (1969) found that young adults who reported their childhood relationships with their parents as happy had a higher score of perceived readiness for marriage. Holman and Li (1997), using the PREPeration for Marriage Questionnaire, found that the variables of couple communication and agreement are significantly related to perceived readiness for marriage for people either dating only one person or who are engaged. They also reported that the variables of 'approval of

significant others' and sociodemographic characteristics, including education, income, and age, had high levels of significance in relation to readiness for marriage. Participants who had the approval of their peers and parents, and who had higher levels of education, income, and age perceived themselves as more ready for marriage than those participants with lower levels of sociodemographic characteristics and less approval from their parents and peers. Another finding of the Holman and Li (1997) study involved the variable 'physical attractiveness' and 'perceived readiness for marriage'. They found that the more physically attractive people saw themselves as, the less they perceived themselves as ready for marriage. Yet, they also found that a higher level of physical attractiveness was connected to a higher quality of communication that, as mentioned above, is significantly related to perceived readiness for marriage.

Only one recent study has examined perceived readiness for marriage in relation to the population of adult children of alcoholics. Larson and Thayne (1998) found that ACOAs perceive themselves as significantly less ready for marriage in comparison to non-ACOAs. They also reported that ACOAs wanted to wait for marriage and average of 7 months longer than non-ACOAs. Male participants wanted to wait about 6 months longer to get married than female participants (Larson & Thayne, 1998).

CHAPTER 3

Methodology

Introduction

The methodology of this research is divided into four sections: subject selection and description, instrumentation, data collection, and data analysis. Subject selection and subject description describe who participated in the study and why they were chosen as the population for this study. The section on instrumentation describes what instruments were used and their levels of validity and reliability. The sections on data collection and data analysis provide information on the process by which the data was collected and the statistical test chosen for data analysis.

Hypotheses

The research hypothesis for this study is that adult children of alcoholics will perceive themselves as less ready for marriage than adult children of non-alcoholics. In other words, college students who are identified as adult children of alcoholics will have lower scores on the Personal Readiness for Marriage Scale than college students who are not identified as having an alcoholic parent.

In contrast, the null hypothesis states that there will be no statistical significant difference between scores on the Personal Readiness for Marriage

Scale for college students with an alcoholic parent compared to college students not raised by an alcoholic parent.

Subject selection and description

The subjects for this study were drawn from University of Wisconsin-Stout undergraduate students enrolled in introductory psychology classes for the fall semester of 2000. Introductory psychology classes are large classes that encompass students with a wide variety of majors and interests. Every undergraduate student is required to take the course. Moreover, as an undergraduate class that most students take early in their college career, there was good opportunity to find the large numbers of unmarried students. There were 139 students who completed the questionnaires. The students ranged in age from 18 - 26, although only the students aged 18 -25 qualified for the study. Qualified subjects also were unmarried since premarital perceptions about marriage were the focus of the study.

Instrumentation

Demographic information was collected with a questionnaire containing 7 items. These items included questions on age, race, religious affiliation, hometowns, current relationship status, and parent's current relationship status (see Appendix A). The questionnaire was designed to provide background information on the subjects necessary to help interpret the results.

ACOA status was determined by the Children of Alcoholics Screening
Test (CAST) (Jones, 1981). The CAST is a 30-item yes or no response
instrument. The questions measure children's feelings, attitudes, perceptions, and
experiences relative to their parents' drinking behavior (Larson & Thayne, 1998;
Pilat & Jones, 1985) (see Appendix B). Answering "yes" to six or more questions
is the recommended threshold for identifying people as children of alcoholics
(Pilat & Jones, 1985). The CAST has been shown to be both a valid and reliable
measure, with a validity coefficient of .78 and a reliability coefficient of .98 (Pilat
& Jones, 1985)

Personal readiness for marriage was measured by the Personal Readiness Scale, which is part of the PREParation for Marriage Questionnaire, or PREP-M (Holman, Busby, & Larson, 1989) (see Appendix B). This scale consists of 11 subscales, which cover a wide variety of topics including: emotional health, emotional maturity, empathic communication behavior, open communication behavior, self-disclosure communication behavior, self-esteem, drug abstinence, independence from family-of-origin, overall readiness for marriage, age, and religious activity (Holman, Larson, & Harmer, 1994). For this study, only 10 subscales were used since age was already controlled for. The reliability coefficient for the Personal Readiness Scale has been shown to be .86, with the total PREP-M having a score of .83 (Holman, Larson, & Harmer, 1994). The

PREP-M, as a whole, has also been shown to have content, construct, and predictive validity (Larson, Holman, Klein, Busby, Stahmann, & Peterson, 1995).

Data collection

The three questionnaires were administered in class to students who were willing to participate in the study and no student refused to participate. After the questionnaires were completed, they were placed in an envelope to assure confidentiality. This process was repeated 5 different times for 5 different sections of introductory psychology classes.

Data analysis

The test for statistical significance was for an ex post facto study. An ex post facto study is a form of causal-comparative research. Its name is derived from the fact that it examines groups that have already been formed due to a shared circumstance, i.e. children with an alcoholic parent, versus a true experiment in which subjects can be randomly assigned to groups. Then, after a dependent variable is chosen, i.e. personal readiness for marriage, the data provides insight regarding how the groups connecting factor affects it, as well as providing possible causes, relationships, and meanings. The purpose of an ex post facto study is to look at a presumed cause-and-effect relationship by comparing consequences with hypothesized formative causes (Isaac & Michael, 1995).

Since there are two groups in this study, the first thing done for data analysis was to calculate the total CAST score and divide subjects into two groups, ACOAs with a score of 6 or higher and non-ACOAs with a score of 5 or lower. An independent group t-test was run on the 9 subscale scores and the one overall score from the Personal Readiness for Marriage scale, using CAST scores (ACOAs and non-ACOAs) as the independent variables.

CHAPTER 4

Results

<u>Introduction</u>

The subjects of this study were students from the University of Wisconsin-Stout enrolled in introductory psychology classes for the fall semester of 2000. Only unmarried students aged 18-25 qualified for the sample because premarital perceptions about marriage were the main focus of the study. No student refused to participate, although seven questionnaires were discarded because the students were over the age of 25 or already married. Students from five sections of undergraduate psychology courses completed the anonymous questionnaires, which included a demographics survey, the Personal Readiness for Marriage scale from the PREP-M, and the Children of Alcoholics Screening Test (CAST).

The resulting sample was composed of 132 never married adult college students (62 males and 70 females) between the ages of 18 and 25. Seven questionnaires were discarded from the data analysis because five of the participants were married and two of the participants were over the age of 25.

The mean age of the sample was 18.72. 83.3% of all participants were either 18 or 19 years of age. Over 95% of the sample was Caucasian. The next largest race or ethnic group represented was multi-racial participants at 2.3%.

The two overwhelming religious affiliations were Protestant (49.2%) and Catholic (37.1%). The remaining 13.6% answered either no religion or other.

25.8% of the participants came from a town 10,000 or less. The second largest group (22%) came from a city of 50,000-150,000. 18.9% of the participants represented both categories of rural non-farm/ranch and town of 10,000-50,000.

33.3% of the respondents were involved exclusively with one other person. 32.6% of the sample were single, but dating and 30.3% were single and not dating. The remaining 3.8% of the sample were either engaged or cohabiting. Responses concerning the marital status of the participants' parents revealed that 74.2% of their parents were married. The next largest category was divorced parents (9.8%). The remaining 16% of the participants' parents were either separated, remarried, widowed, or other.

ACOAs versus Non-ACOAs

The CAST mean score was 3.31 for the entire sample, out of a possible 30 points. After dividing the entire sample based on scores 5 or less for non-ACOAs and 6 or higher for ACOAs, the resulting groups included102 non-ACOAS and 30 ACOAs. The mean overall Personal Readiness for Marriage scores for ACOAs and non-ACOAs, were 2.77 and 2.72, respectively out of a possible 5 points. For the Readiness for Marriage subscale for ACOAs and non-ACOAs, the

mean scores were 1.43 and 1.48, respectively. These mean values were the lowest of all 10 subscales measured by the Personal Readiness for Marriage scale (see Table 1). The highest mean value for ACOAs was 3.28 on the Empathic Communication subscale. Non-ACOAs had the highest mean value on the Self-Esteem subscale with a mean value of 3.21. Most of the mean values between ACOAs and non-ACOAs were very similar. The largest margin of difference between groups was .18 on the Independency subscale. Non-ACOAs had the higher value at 2.76. ACOAs had a mean value of 2.58.

The t-test for independent means was computed on the overall Personal Readiness for Marriage score and the Readiness for Marriage subscale between ACOAs and non-ACOAs. The results were .48 and .84, respectively. Neither of these values were significant using a level of p < .05 for significance. See Table 1 for the subscale mean values and overall mean values for both ACOAs and non-ACOAs and their corresponding t-test results.

Retained Hypothesis

There was no statistical significance between overall and subscale mean values on the Personal Readiness for Marriage Scale for college students with an alcoholic parent compared to college students not raised by an alcoholic parent. The null hypothesis was retained.

Mean Values and t Statistic Comparing Independent Means of Adult Children of
Alcoholics (ACOAs) and Adult Children of Non-Alcoholics (Non-ACOAs) for
the Ten Subscales and Overall Score of the Personal Readiness for Marriage Scale

Subscale	ACOA	Non-ACOA	
<u>t</u>	(n=30)	(n=102)	
Emotional Maturity	2.68	2.69	

Emotional Health Empathic Communication	2.80 3.28	2.91 3.20	.50		
.53	3.20	3.20			
Self-Disclosure Communication		2.75			2.78
Openness of Communication	3.20	3.12		.58	
Self-Esteem	3.17	3.21			
.75				_	
Substance Abuse	2.58	2.74			
<u>.44</u>				_	
I. J J	2.50	2.76			
Independency .12	2.58	2.76			
.12					
Readiness for Marriage	1.48	1.43			
.84					
Religious Activity	1.93	1.96			
.91				_	
Overall Score	2.77	2.72			
.48	2.11	2.12			
. 10					
				_	
*n < 05 **n < 01					

*<u>p</u> < .05. ** <u>p</u> < .01

CHAPTER 5

Summary, Conclusions, and Recommendations

Summary

Adult children of alcoholics(ACOAs) recently have gained attention in the scholarly literature. However, in the area of marriage preparation, research has been limited. ACOAs have been found to have higher divorce rates and lower levels of satisfaction in their marriages than non-ACOAs (Kerr & Hill, 1992). With nearly half of all current marriages ending in divorce, readiness for marriage is an important topic to research, especially with populations at an increased risk, such as ACOAs. It is important to identify populations with a high risk for divorce in order to implement divorce prevention efforts, such as premarital counseling and/or education. The purpose of the study was to determine if there was a difference in personal readiness for marriage scores between ACOAs and non-ACOAs. It was determined that there was no statistical significant difference between ACOAs and non-ACOAs in the mean overall Personal Readiness for Marriage scores and all 10 subscales means. The null hypothesis was retained.

Conclusions

The present research contradicts Larson and Thaynes' (1998) study that found that ACOAs perceived themselves as significantly less ready for marriage than non-ACOAs. In fact, there may not be a difference between these two

groups. Similarities between ACOAs and non-ACOAs on the ten subscales and overall mean values on the Personal Readiness for Marriage instrument challenge Larson and Thaynes' (1998) conclusions. This may be due to the differences in the studies. Their sample was much larger and covered three geographically different areas of the country versus just the Midwest. This study had a relatively low number of ACOAs and they likely are not representative of the entire ACOA population. Another possible explanation for the contradiction is that the instrument used in this study was different than Larson and Thayne's (1998), who used a six-item Likert scale to assess feelings of overall readiness and the participants' estimated age at which they felt they would be ready to get married. Perhaps the Personal Readiness for Marriage instrument was not sensitive enough to truly measure the participants' feelings toward marriage or it might have measured slightly different variables. Some participants who were single and not dating seemed to have trouble answering questions about their partner so they left the questions blank, which may have had an impact on the mean values of the scale.

Another possible explanation for the contradiction comes with the fact that the majority of the respondents' parents are still married. Since most of the participants came from intact families, including ACOAs, they may not see a negative impact on the relationship from the drinking and are just as ready to get

married as the general population. Also, since all the participants were college students, it could be surmised that they have above average functioning and may not reflect the entire ACOA population.

The severity of the alcoholism may also have an effect on the ACOAs' perceptions of marriage. There may be a difference between ACOAs of daily drinkers, binge drinkers, and weekend drinkers because the parents' ability to function may be affected differently.

Recommendations

Further research in this area would help illuminate the premarital status of this population. This was only the second recent study completed regarding adult children of alcoholics and their perceptions towards marriage. Since the two studies were not exactly the same, further replication of this research is essential. Variations of the same study will help to provide a broader picture of this population and their potential need for premarital education and/or counseling.

Other promising studies could include ACOAs who comprise a broader mix of ethnicity and religious background. Also, it may be important to examine other testing instruments that may be more applicable to people who not currently in a relationship. Another interesting inquiry would examine if the gender of the drinking parent has an effect on ACOAs perceptions toward marriage. Also, it may be worthwhile to examine how the parents' drinking pattern may affect

ACOAs and their perceptions. The gender of ACOAs may affect their levels of readiness for marriage. Past research has been limited with this population and the topic of marriage. Therefore, any variation of this study may help to provide insight into strategies to help ACOAs with the institution of marriage.

REFERENCES

Belliveau, J. M., & Stoppard, J. M. (1995). Parental alcohol abuse and gender as predictors of psychopathology in adult children of alcoholics.

Addictive Behaviors, 20(5), 619-625.

Benson, M. J., Larson, L., Wilson, S., & Demo, D. H. (1993). Family of origin influences on late adolescent romantic relationships. <u>Journal of Marriage</u> and the Family, 55, 663-672.

Berkowitz, A., & Perkins, H. W. (1988). Personality characteristics of children of alcoholics. <u>Journal of Consulting and Clinical Psychology</u>, <u>56</u>(2), 206-209.

Bradley, L. G., & Schneider, H. G. (1990). Interpersonal trust, self-disclosure and control in adult children of alcoholics. <u>Psychological Reports</u>, 67, 731-737.

Children of Alcoholics Foundation. (1999). How many COAs and COSAs are there? Retrieved March 1, 2000 from the World Wide Web:

http://www.coaf.org/Research/number.htm

Domenico, D., & Windle, M. (1993). Intrapersonal and interpersonal functioning among middle-aged female adult children of alcoholics. <u>Journal of Consulting and Clinical Psychology</u>, 61 (4), 659-666.

Fine, M., & Hovestadt, A. J. (1984). Perceptions of marriage and rationality by levels of perceived health in the family of origin. <u>Journal of Marital and</u>
Family Therapy, 10(2), 193-195.

Friel, J. C., & Friel, L. D. (1988). <u>Adult children- The secrets of</u>
<a href="https://dysfunctional.com/dysfunctional.c

Friel, J. & Friel, L. (1990). <u>An adult child's guide to what's "normal"</u>. Deerfield Beach, FL: Health Communications, Inc.

Greenberg, E. F., & Nay, W. R. (1982). The intergenerational transmission of marital instability reconsidered. <u>Journal of Marriage and the Family, 44,</u> 335-347.

Harrington, C. M., & Metzler, A. E. (1997). Are adult children of dysfunctional families with alcoholism different from adult children of dysfunctional families without alcoholism? A look at committed, intimate relationships. <u>Journal of Counseling Psychology</u>, 44 (1), 102-107.

Holman, T. B., Busby, D. H., & Larson, J. H. (1989). Preparation for Marriage Questionnaire. Provo, UT: Marriage Study Consortium.

Holman, T. B., Larson, L. H., & Harmer, S. L. (1994). The development and predictive validity of a new premarital assessment instrument: The preparation for marriage questionnaire. Family Relations, 43, 46-52.

Holman, T. B., & Li, B. D. (1997). Premarital factors influencing perceived readiness for marriage. Journal of Family Issues, 18 (2), 124-144.

Isaac, S., & Michael, W. B. (1995). <u>Handbook in research and evaluation:</u>

A collection of principles, methods, and strategies useful in the planning, design, and evaluation of studies in education and the behavioral sciences (3rd ed.). San Diego, CA: Educational and Industrial Testing Services.

Jarmas, A. L., & Kazak, A. E. (1992). Young adult children of alcoholic fathers: Depressive experiences, coping styles, and family systems. <u>Journal of Consulting and Clinical Psychology</u>, 60(2), 244-251.

Kerr, A. S., & Hill, E. W. (1992). An exploratory study comparing AcoAs to non-AcoAs on current family relationships. <u>Alcoholism Treatment Quarterly</u>, 9 (1), 23-38.

Larson, J. H. (1988). Factors influencing college students perceived readiness for marriage. <u>Family Perspective</u>, 22(2), 145-157.

Larson, J. H., Benson, M. J., Wilson, S. M., & Medora, N. (1998). Family of origin influences on marital attitudes and readiness for marriage in late adolescents. Journal of Family Issues, 19(6), 750-768.

Larson, J. H., Holman, T. B., Klein, D. M., Busby, D. M., Stahmann, R. F., & Peterson, D. (1995). A review of comprehensive questionnaires used in premarital education and counseling. Family Relations, 44 (3), 245-252.

Larson, J. H., & Thayne, T. R. (1998). Marital attitudes and personal readiness for marriage of young adult children of alcoholics. <u>Alcoholism</u>

Treatment Quarterly, 16(4), 59-73.

Lawson, G., Peterson, J. S., & Lawson, A. (1983). <u>Alcoholism and the family: A guide to treatment and prevention</u>. Rockville, MD: Aspen Systems Corporation.

Martin, J. I. (1995). Intimacy, loneliness, and openness to feelings in adult children of alcoholics. Health and Social Work, 20(1), 52-59.

McLeod, J. D., & Eckberg, D. A. (1993). Concordance for depressive disorders and marital quality. <u>Journal of Marriage and the Family</u>, <u>55</u> (3), 733-746.

National Center for Health Statistics. (1999, July). Births, marriages, divorces, and deaths: Provisional data for 1998. <u>National Vital Statistics Reports</u>, <u>47</u>(21). Retrieved March 1, 2000 from the World Wide Web: http://www.cdc.gov/nchs/data/nvs47_21.pdf

National Institute on Alcohol Abuse and Alcoholism. (1996, November).

Alcoholism: Getting the facts. Retrieved March 1, 2000 from the World Wide

Web: http://silk.nih.gov/silk/niaaa1/publication/booklet.htm

Parker, D. A., & Harford, T. C. (1988). Alcohol-related problems, marital disruption and depressive symptoms among adult children of alcohol abusers in the United States. Journal of Studies on Alcohol, 49(4), 306-313.

Pilat, J. M., & Jones, J. W. (1985). Identification of children of alcoholics: Two empirical studies. <u>Alcohol Health and Research World</u>, *9*(2), 27-36.

Sandoz, C. J. (1998). The effects of parental alcoholism upon locus of control and intimacy of recovering alcoholics. <u>Alcoholism Treatment Quarterly</u>, <u>16</u>(4), 91-99.

Schafer, R. B., Wickrama, K. A. S., & Keith, P. M. (1996). Self-concept disconfirmation, psychological distress, and marital happiness. <u>Journal of Marriage and the Family, 58</u> (1), 167-177.

Stinnett, N. (1969). Readiness for marital competence and family, dating, and personality factors. <u>Journal of Home Economics</u>, 61(9), 683-686.

U. S. Bureau of the Census. (1975). <u>Historical statistics of the United States:</u>

<u>Colonial times to 1970, bicentennial edition, Part 1</u>. Washington, DC: U. S.

Government Printing Office.

U. S. Bureau of the Census. (1999, January). Table MS-2- Estimated median age at first marriage, by sex: 1980 to the present. Retrieved March 1, 2000 from the World Wide Web: http://www.census.gov/population/socdemo/ms-la/tabms-2.txt

Woititz, J. G. (1983). <u>Adult children of alcoholics</u>. Pompano Beach, FL: Health Communications, Inc.

Woititz, J. G. (1985). <u>Struggle for intimacy</u>. Deerfield Beach, FL: Health Communications, Inc.

Appendix A

Please answer the following questions by filling in the blank or circling the most applicable answer.

\	WP P
1.	Age
2.	My sex is: male female
3.	My race or ethnic origin is: a. African American b. Caucasian c. American Indian d. Asian American e. Hispanic f. Polynesian g. Multi-racial
4.	My religious affiliation is: a. Catholic f. Eastern Religion (Buddhism, Hinduism, etc.) b. Judaism (Jewish) g. Other c. Latter-day Saint (Mormon) h. None d. Moslem (Shiite, Sunnite, Druse, etc.) e. Protestant (Lutheran, Methodist, Episcopalian, Baptist, Presbyterian, etc.)
5.	I have lived most of my life in: a. Farm/Ranch b. Rural- not farm or ranch c. Town- 10,000 people or less d. Town- 10,000 to 55,000 e. Small city- 50,000 to 150,000 f. Large city- over 150,000
6.	My present relationship status is: a. Single- not dating b. Single- dating

c. Single- involved exclusively with one person (but <u>not</u> cohabiting)
d. Single- after being divorced or widowed and not going with anyone
e. Single- after being divorced or widowed and going with one person

f. Engaged

- g. Living with someone of the opposite sex to whom I am not married (cohabiting)
- h. Married
- 7. My parents are currently:
 - a. Married
 - b. Divorced
 - c. Separated
 - d. Father is remarried
 - e. Mother is remarried
 - f. Both parents are remarried
 - g. Other _____

Appendix B

The Personal Readiness for Marriage Scale

Please use this key to answer the following 34 questions:

1= Never Very Often			2= Hardly Ever	4= Fairly Often	5=	
1.	I am	able	to listen to my partn	er in an understanding	way. 1	2
	3	4	5			
2.	Мур	arent	ts try to run my life.		1	2
	3	4	5			
3.	I get	into	difficulties because	of impulsive acts.	1	2
	3	4	5			
4.	In mo	ost m	atters, I understand	what my partner is tryi	ng to say.	2
	3	4	5			
5.	I disc	cuss r	ny personal problen	ns with my partner.	1	2
	3	4	5			
6.	I feel	I am	a person of worth.		1	2
	3	4	5			
7.	I feel	usel	ess.		1	2
	3	4	5			
8.	3	4	pleasant things that 5 ny partner.	happen during the day	when I 1	2

9.	I feel	I have	a number of good qualities.	1	2
	3	4	5		
10.	I feel	depres	ssed.	1	2
	3	4	5		
11.	3	4	dency to say things to my partner that would 5 t unsaid.	1	2
12.	How	freque	ntly do I use alcohol?	1	2
	3	4	5		
13.	I'm in	clined	to feel I am a failure.	1	2
	3	4	5		
14.	3	e a tend 4 my par	5	1	2
15.	I have	e troub	le controlling my temper.	1	2
	3	4	5		
16.	All th	ings c	onsidered, I feel ready to get married.	1	2
	3	4	5		
17.	I feel	financ	rially ready to get married.	1	2
	3	4	5		
18.	I take	a posi	tive attitude toward myself.	1	2
	3	4	5		

1= N	lever	2= Hardly Ever	3=	Somet	times	4:	= Fairly Often	5= Ve	ry
Ofte	n								
3	4	ived (or will have li 5 efore getting marrie		away 1	from n	ny p	earents'	1	2
20	0. I fee	el sad and blue.							1
			2	3	4	5			
21.	I sit d	own with my part	ner a	nd jus	t talk	thir	ngs over.		1
			2	3	4	5			
22. I	feel e	motionally ready to	get n	narried	l .			1	2
3	4	5							
23. I	let my	partner know when	n I an	n displ	eased	with	h him/her.	1	2
3	4	5							
24. I	sulk o	r pout when I'm wit	th my	partne	er.			1	2
3	4	5							
25. I	get re	ally caught up in my	y fam	ily's pı	roblem	ıs ar	nd concerns.	1	2
3	4	5							
26. I	feel h	opeless.						1	2
3	4	5							
27. I	think	I am no good at all.						1	2
3	4	5							

28. 3	28. My parents encourage me to be independent and make 1 2 3 4 5 my own decisions.					
29.	I nag n	ny partner.	1	2		
3	4	5				
3	4	requently do I use illegal drugs (Marijuana, 5 e, Heroine, etc.)?	1	2		
31. 3	4	express disagreement with my partner because 5 raid he/she will get angry.	1	2		
32.	With re	egard to sexual intimacy, I feel ready to get married.	1	2		
3	4	5				
33.	How fr	equently do I smoke or use chewing tobacco?	1	2		
3	4	5				
34.	I under	stand my partner's feelings.	1	2		
3	4	5				
35.	How fr	equently do I attend religious services:				
	b. Fre	gular attendance (weekly) quent attendance (at least monthly) casional attendance (several times a year) ly on special occasions (once or twice a year) wer				

36. How many months will elapse between our engagement (or the time at which both of us had a definite understanding that we were to be married) and the date of our marriage?

- a. Less than 1 month
- b. 1 to 3 months
- c. More than 3 months but less than 6 months
- d. More than 6 months but less than 12 months
- e. 1 to 2 years
- f. More then 2 years
- g. Don't know or doesn't apply

Appendix C

The Children of Alcoholics Screening Test

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."

Yes	No	Questions
	1.	Have you ever thought that one of your parents had a drinking problem?
		Have you ever lost sleep because of a parent's drinking?
_		Did you ever encourage one of your parents to qult drinking?
_		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 around 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 dld 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?