

TEACHERS' AWARENESS OF
CHILDREN OF ALCOHOLICS

By

Rachel J. Gilbey

A Research Paper

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

Mental Health Counseling

Approved: 2 Semester Credits

Anne Ramage, Psy.D.

The Graduate College
University of Wisconsin-Stout
August, 2001

The Graduate College
University of Wisconsin-Stout
Menomonie, WI 547i51

ABSTRACT

	Gilbey	Rachel	J.
(Writer)	(Last Name)	(First)	(Initial)
Future Teachers' Awareness of Children of Alcoholics			
(Title)			
Mental Health Counseling	Anne Ramage, Psy.D.	August, 2001	30
(Graduate Major)	(Research Advisor)	(Mo/Yr)	(Pages)
American Psychological Association (APA) Publication Manual			
(Name of Style Manual Used in this Study)			

The purpose of this study was to examine future teachers' knowledge of children of alcoholics. Knowledge was measured by future teachers' scores on the Children of Alcoholics Information Test (COAT). Fifty- seven students enrolled in the multiculturalism course at the university chosen participated in this study. The participants were administered the Children of Alcoholics Information Test and a

Demographic Questionnaire. Based on the results of the study, there appears to be no significant difference between future teachers and knowledge of children of alcoholics based on gender, major, grades planning on teaching, and having a parent with a drinking problem. However, the overall mean score for future teachers was 57.2 percent (11.44 correct answers), therefore being considered only moderately informed about children of alcoholics. Participants needed a 70 percent or higher (a minimum of 14.00 correct answers) to be considered very informed about children of alcoholics.

Table of Contents

	PAGE
CHAPTER 1.....	1
Introduction.....	1
Statement of the Problem.....	3
Hypotheses.....	4
Definition of Terms.....	5
CHAPTER 2.....	6
Review of Literature.....	6
General Information.....	6
General Roles.....	7
Behavioral Patterns of COAs.....	8
Psychological Patterns of COAs.....	10
Academic Performance of COAs.....	13
Rationale for Proposed Study.....	14
CHAPTER 3.....	16
Methodology.....	16
Participants.....	16
Instruments.....	16
Procedure.....	17
Data Analysis.....	18
Limitations.....	18
CHAPTER 4.....	19
Results.....	19
Introduction.....	19
Demographics.....	19
Statistical Analyses and their Relationship to the Null Hypotheses.....	20
CHAPTER 5.....	23
Discussion.....	23
Summary and Findings.....	23
Weaknesses.....	23
Recommendations for Future Studies.....	25

REFERENCES.....	26
APPENDICES.....	28
Appendix A.....	
Demographic Questionnaire.....	28
Appendix B.....	
Children of Alcoholics Information Test (COAT).....	29

List of Tables

TABLE	TITLE	PAGE
1	Parental Alcoholism.....	19

CHAPTER 1

INTRODUCTION

There are an estimated 28 million children of alcoholics in the United States – 7 million of whom are under eighteen years of age (Russell, Henderson, & Blume, 1985). Many of these 7 million children have few choices, living in a world of misery, despair, and neglect. They are psychologically wounded by mixed messages, inconsistency, unpredictability, betrayal, deception, and physical and sexual abuse. Children are the innocent victims of this raging illness. Too often the focus for treatment has been on the alcoholic parent, while children have been neglected. These children are considered the “unseen causalities” of alcoholism (Ackerman, 1978). By understanding the effects of alcoholism on children, teachers, counselors, and school administrators can intervene in childhood, before behavior patterns become rigid. A review of literature demonstrates that one in five kids in a classroom is a child of an alcoholic. Studies have also shown that only 5% of children of alcoholics are noticed and treated (Robinson, 1989). Therefore, one of the research hypotheses for this study is that teachers are unaware of the characteristics that identify children of alcoholics in the classroom.

Children growing up in alcoholic homes assume roles that help them survive the chaos and stress of the family. These roles are the hero, the scapegoat, the lost-child, and the mascot. These roles are used as defense mechanisms, providing protection inside and outside the family (Deutsch, 1982). These roles allow children, to one degree or another, not only to grow up successfully, but to seem as healthy as everyone else.

The hero is generally the oldest child, often taking over many parental responsibilities. Successful, self-motivated, and responsible are terms often used to describe the family hero (Seixas & Youcha, 1986). The scapegoat is often the second born child and is sometimes known as the troublemaker or misfit of the family. The lost child, also referred to as the angel, is quiet and never causes trouble. The mascot is tense, anxious, and often overactive, sometimes being known as the class clown (Seixas & Youcha, 1986). These roles provide comfort in childhood, but cause life-long behavioral and psychological problems.

Estimates show that only 5% of the seven million school age children of alcoholics are identified and treated (NIAA, 1981). This means that 95% of such children go unnoticed, left to survive on their own. Teachers are shocked to learn that one in five kids in the classroom is a COA (Robinson, 1989). These alarming statistics show that further studies need to be conducted on educators' abilities to identify children of alcoholics. Educators need to be aware of the difference they can make in a child's life by recognizing signs of a child from an alcoholic family.

The survival roles COAs develop are also taken to school with them. The family hero is the hardest child for teachers to recognize because they are excellent students, often overachievers. Teachers often reinforce their adult like behavior because they see these children as 'normal' good students. Educators should be aware of students that take their behaviors to extremes, such as the overachiever. COAs often go to extremes, whether that is becoming a super achiever or a total failure (Robinson, 1989). Increasing knowledge of these signs would be useful for educators to heighten their awareness of children of alcoholics.

Statement of Problem

The purpose of this study is to describe future teachers' awareness of children of alcoholics as measured by the Children of Alcoholics Information Test. Three education classes were surveyed to determine level of knowledge of children of alcoholics.

The participants in this study were all adults attending a medium sized state university in a small mid-western town and currently enrolled in multiculturalism (a required course for all education majors at this university). All participants completed the Children of Alcoholics Information Test, in addition to a demographic questionnaire. Students scoring a 70 or higher on this instrument, according to the test manual, were determined to be very informed about children of alcoholics.

The study is designed to establish whether future teachers are informed of the characteristics of children of alcoholics. This issue is essential because of the large number of COAs in the classroom. By identifying whether future teachers can recognize children of alcoholics, schools and universities can determine if there is a need to provide more education about students at risk, which includes children of alcoholics. The research hypothesis for this study is that future teachers will be uninformed of the characteristics of children of alcoholics.

Hypotheses

The null hypotheses for this study are descriptive in nature.

Null hypothesis #1

There is no statistically significant difference between future teachers with an alcoholic parent and future teachers without an alcoholic parent, as measured by a self defined demographics questionnaire, on knowledge from the Children of Alcoholics Information Test (COAT).

Null hypothesis #2

There is no statistically significant difference between future teachers of technology education and future teachers of early childhood, as measured by a self defined demographics questionnaire, on knowledge from the Children of Alcoholics Information Test.

Null hypothesis #3

There is no statistically significant difference between future teachers of K-6th grades and future teachers of 7th – 12th grades, as measured by a self defined demographics questionnaire, on knowledge from the Children of Alcoholics Information Test.

Null hypothesis #4

There is no statistically significant difference between future teachers who are male and future teachers who are female, as measured by a self defined demographics questionnaire, on knowledge from the Children of Alcoholics Information Test.

Definition of Terms

Children of Alcoholics (COAs): This term is used to refer to children of alcoholics.

Children of alcoholics are defined as individuals under age 18 who have an alcoholic parent or guardian.

Children of Non- Alcoholics (Non-COAs): This term is used to refer to individuals under the age of 18 who do not have an alcoholic parent or guardian.

CHAPTER II

LITERATURE REVIEW

This review of the literature will cover behavioral and psychological patterns as well as information related to academic performance of children of alcoholics. The behavioral and psychological patterns are common indicators of COAs of which teachers should be aware. The review of literature related to academic performance will be a comparison of academic success between COAs and non COAs.

Literature obtained to do this study on teachers' awareness of children of alcoholics in the classroom came from two main sources. The first source consisted of research and literature obtained from computer searches through the University of Wisconsin- Stout Library Learning Center. The second source involved a review of literature written by professionals in the field of children of alcoholics.

General Information

Alcoholism is one of this country's most serious and neglected health problems. Not only are alcoholics often left untreated, but the children of this population are neglected as well. There are approximately 28 million children of alcoholics in the United States with about seven million under eighteen years of age (Russell, Henderson & Blume, 1985). These seven million children are dependent on grownups, leaving them with few choices. They are like hostages of alcoholism, forced to live in misery and despair.

The 21 million adult children of alcoholics that have left home and survived the ordeal are finding that they live with scars, whether physical or emotional. The defense mechanisms they used to cope in the alcoholic home become problematic as they transition into adulthood.

General Roles

Every child in an alcoholic home takes on some role to survive. Since these roles are developed to survive the disease, educators are often unable to detect children from alcoholic families. The roles provide survival in childhood, however they often continue into adulthood and become barriers to further individual development. The family hero, the scapegoat, the lost child, and the mascot are four common roles for children of alcoholics to adopt (Robinson, 1989).

The hero is usually the oldest child in the family, being the responsible child that tries to make the family look “normal”. These children are the hardest to identify because they appear independent and well adjusted. They are often the most dependable, smartest, or the most popular child in school, excelling in academics, athletics, or both. Family heroes are often overachievers, trying to make up for everything the family lacks. Although such an achievement is commendable, these children never learn to relax and play. The oldest child often becomes a serious little adult while their childhood passes by. Even though these children grow up and move out of the alcoholic environment, the effects of this role remain with them. They often become workaholics, with an overdeveloped sense of responsibility. Socially, they have difficulty recognizing and expressing feelings. Since they cannot recognize feelings, trusting others is difficult.

Many family heroes feel the need to control people even in situations that are beyond their responsibility.. The lack of trust and need to control make it difficult for a hero to have an intimate relationship.

The scapegoat is usually one of the middle children. The family often makes the scapegoat the target of its problems and frustration. This is the outcome the scapegoat is looking for since they purposely get into trouble to take attention off the rest of the family. Children who take on the role of scapegoat are easier to recognize because they are often the disruptive ones that cause trouble. Scapegoats have a hard time keeping a job since they often cannot get along with their boss. Socially, they do not usually fit into any group, becoming outcasts.

The lost child is also usually a middle child. Children who take on the role of lost child usually do not draw attention to themselves. They often do not know their place in the world, keeping a low profile. These children often go unnoticed because they are not leaders or trouble makers. They are quiet and isolated, rarely expressing feelings or emotions. At work, these are often the children that keep to themselves, never becoming involved in work functions. Socially, they often have few friends and like to spend time alone. They tend to be shy and withdrawn.

The fourth role often played by the youngest child of an alcoholic is the mascot. These children tend to be the class clowns, making a joke out of every situation which occurs. Being the center of attention is important to family mascots. At work, “mascots” are not always viewed as taking their job seriously. Supervisors may make this assumption since they are always joking around; therefore, they may not receive as many

promotions as other employees. Socially, “mascots” are well liked since they always try to make people laugh.

Behavioral Patterns of COA’s

Children with behavioral disturbances are signaling to those around them that something is wrong. Behind the anger and aggression is often a frightened child. Children from alcoholic homes have twice the number of behavioral problems as those from non-drinking families (Rimmer, 1982).

Ten common behavioral signs of children of alcoholics in school settings include 1) difficulty concentrating 2) persistent absenteeism 3) poor grades and/or failure to turn in homework 4) low scores on standardized IQ and achievement tests 5) sudden behavior change 6) signs of neglect or physical and sexual abuse 7) compulsive behaviors 8) shyness and withdrawal from other children 9) quarrelsome and uncooperative behavior with teachers and classmates and 10) constant health problems (Robinson, 1989).

Behavioral patterns of COA’s sometimes become so disruptive they require professional intervention. One study (Fine, 1976) was conducted to find out if there was a difference in behavioral patterns between COAs and non COAs. Researchers in this study observed behavioral patterns of children in an inpatient mental health clinic. Results showed that children of alcoholics between ages eight and eighteen admitted to a mental health clinic were more disturbed in their behavior pattern than children of non COAs (Fine, 1976). The COAs were less likely to pay attention, less responsive, and more emotionally disturbed. These children also showed more signs of social aggression, anxiety, and dependency. Anxiety is common because many children blame themselves

for their parents' drinking, leading to strong feelings of guilt. These children were also more socially and emotionally detached from things around them, being preoccupied with their inner thoughts. This is often a result of all the attention being focused on the alcoholic parent at home, with the child's needs being ignored. The child may feel unloved, therefore becoming withdrawn. These inner thoughts are often the only thing that keeps these children going from day to day.

Children of alcoholics have mixed feelings about their alcoholic parents, including shame, embarrassment, disgust, love, and loyalty (Priest, 1985). Because of the anger associated with the parents' drinking, a child may love the parent one minute and hate him or her the next. When a parent is sober, the child may experience feelings of love, but feel shame or embarrassment when he or she is drinking.

Acting out is sometimes the only way children know how to tell others that something is wrong. Discipline problems at school and truancy are among the most frequently reported behavioral problems (Rimmer, 1982). Teachers and school administrators that are aware of these problems can intervene before problems become more severe.

Psychological Patterns of COAs

Some children's symptoms may appear behaviorally, thus being easily detected, while others may manifest more psychological, and thus more subtle, characteristics of family alcoholism. Ten psychological signs include: 1) low self esteem 2) anxiety 3) easily embarrassed 4) suppressed anger 5) perceive problems as beyond their control 6)

poor coping skills 7) prone to depression 8) unreasonably fearful 9) sad and unhappy and 10) difficulty adjusting to change in routines (Robinson, 1989).

Several studies have shown COAs have lower self esteem than non COAs. One study compared a group of adolescents from alcoholic homes, a group from recovering homes, and a group from nonalcoholic homes to see if there was a difference in self esteem level (O’Gorman, 1975). Participants were given the Tennessee Self Concept scale to measure self esteem in order to compare groups. The results showed that the children from alcoholic and recovering homes had lower self esteem than the group of children from nonalcoholic homes. Personal boundaries are set by the alcoholic parent, leaving the children without a clear sense of self and therefore unsure of their own identity. Children need to have their own identity and values in order to be independent from their parents. Without a sense of independence, children often feel helpless and out of control. Studies have shown that children raised in alcoholic homes lack a sense of control over their lives (Davis & Orenstein, 1984). These children believe they cannot change what happens to them. Teacher awareness of COAs is important in raising children’s self esteem so they know they are capable of changing their lives.

Low self-esteem is often an effect of the mixed messages children of alcoholics receive from their parents. When a parent is sober, they may be happy and easy to get along with, but as soon as they start drinking they may become angry and argumentative. Children become confused and do not always understand why their parent is acting in two different ways. The typical upbringing in an alcoholic family leaves children with many emotional wounds. Feelings often are not expressed in an alcoholic home. When

feelings are shown, it may be through rage or anger, considering that this is often how they see their parents express feelings.

Fear and anxiety are normal reactions of children of alcoholics. A child never knows what is going to happen next in the family, causing apprehension and fear. Most COAs have witnessed parents out of control or violence in the household. Because COAs live in fear of their parents, they often experience anxiety and lack of trust in their relationships with friends (Cork, 1969). Children of alcoholics are also more likely to generalize their anxiety to many situations, developing unreasonable fears for which there is no basis (Haberman, 1966).

Guilt is a common emotion felt by COAs. Children often feel that their parents' drinking is somehow their own fault, causing them to feel guilty and responsible. This guilt can become a problem in later life because COAs grow up trying to please everybody, thinking that will make things better. COAs usually are very responsible and do everything asked of them to try to keep peace in the family. Many COAs think if they help out a lot, things will be easier on their parents and then they will not drink as much (Robinson, 1989).

When parents do not change no matter what the child does, depression may occur. Children of alcoholics are more likely than children of non-alcoholics to describe their childhood as unhappy (Robinson, 1989). They are also twice as likely to become depressed as children of non-alcoholics (Black, 1986). Children from recovering homes show less depression than children from nonrecovering homes so there is hope that things can improve once parents get help (Black, 1986).

Academic Performance of COAs

Several problems related to academic performance have been associated with drinking parents. The typical chaos in an alcoholic home interferes with concentration in and out of school. Sleepless nights, stress, and depression lead to daydreaming and sleeping during class; therefore, children have trouble keeping up. School absenteeism, frequent changes in school attended, and preoccupation with problems at home lead to low scores on tests, bad grades, and failure (Robinson, 1989).

A study by McGrath, Watson, and Chassin (1999) tested whether adolescent COAs showed poorer academic performance than non COAs. Scores were compared on tests measuring cognitive and verbal skills. This recent study showed that COAs, particularly those whose parents are alcohol dependent as opposed to having a diagnosis of alcohol abuse, had lower academic outcomes as compared to non COAs. COAs tend to score lower on tests that measure cognitive and verbal skills. Their ability to express themselves may be impaired, impeding performance in many areas of life including school.

These academic difficulties may be due to impaired motivation and organization. Children living in alcoholic homes rarely receive recognition or praise when they do well. Parents are so consumed with their own problems that children's achievements go unnoticed. Teachers who are able to recognize COAs in their classroom can increase motivation, and thereby, possibly increase academic performance.

Research indicates that difficulty concentrating on school work is a common complaint of children with alcoholic parents (Cork, 1969). Poor concentration and low attention span result from lack of sleep or stress and worry about what is going to happen

next in the home. Children of alcoholics are more likely than non children of alcoholics to drop out of school, be truant, repeat grades, or be referred to a school counselor (NACOA, 1999). This may have little to do with academic ability; rather, it may reflect difficulty bonding with teachers, students, and school in general. An alcoholic home is like a volcano because no one knows when the next eruption will occur. Children often worry whether the family will be intact, physically and emotionally, when they arrive home from school.

Studies have shown that abstraction and conceptual reasoning skills are lower in COAs than non COAs (NACOA, 1999). Since these concepts are important for problem solving, many COAs may struggle with academics requiring problem solving skills. Very concrete explanations and instructions may be necessary for a COA to understand an abstract concept. Teachers recognizing this special need can enhance the quality of education for a COA by spending a few extra minutes giving specific directions. Research has shown that children who have coped effectively with the trauma of growing up in a family affected by alcoholism often relied on the support of a non alcoholic adult such as a teacher (Werner & Johnson, 2000). Such children, who rely on a teacher or other adult, have shown increased autonomy and independence, stronger social skills, better ability to cope with different emotional experiences, and better day to day coping strategies.

Rationale for Proposed Study

Although studies have shown that only 5% of children of alcoholics are noticed and treated for problems related to parental alcoholism, no research on teachers' awareness of

the characteristics of children of alcoholics was found in the literature. The current study was designed to establish whether students preparing to be teachers are informed about children of alcoholics. The researcher believes that by conducting studies on teachers' awareness of COAs in the classroom, more children will be identified and treated.

CHAPTER III

METHODOLOGY

The intent of this study was to examine future teachers' awareness of children of alcoholics. Awareness was determined by scores on the Children of Alcoholics Information Test. In conducting this study, the writer used a demographic questionnaire in addition to the Children of Alcoholics Information Test (COAT).

Participants

The population under investigation in this study consisted of students at a Midwestern, medium-sized, state university that is located in a city with a population of approximately 15,000. Individuals in this study were drawn from multiculturalism courses at the university. Since all education majors are required to take multiculturalism, participants should comprise a fairly representative sample of future teachers on the campus.

Instruments

Children of Alcoholics Information Test (COAT)

The Children of Alcoholics Information Test (COAT) was designed by Bryan Robinson in 1988 as an evaluation instrument for children of alcoholics information programs to gain a sense of the degree to which the program curricula are actually working. Short term programs can use the COAT as an evaluation instrument. This has been reported to be a reliable and valid measurement of alcohol knowledge although this researcher was not able to obtain any specific validity or reliability information on the instrument. The COAT is a 20 question true/false test to determine how much

individuals know about children of alcoholics. Each statement is worth 5 points. Results are scored in the following manner: a score from 0-30 indicates that you are uninformed about children of alcoholics; a score in the range of 35-65 reflects being moderately informed about children of alcoholics; and a score from 70-100 reports that you are very informed about children of alcoholics. A copy of the COAT can be found in Appendix B.

Demographic Questionnaire

A demographic questionnaire was given to each student. The information on the questionnaire included the following: age, sex, major, the grades the prospective instructor plans on teaching and whether or not one or both parents have or have had a problem with alcohol. A copy of the demographic questionnaire can be found in Appendix A.

Procedure

The students in the multiculturalism courses at the university were asked to participate in the study. Each student was informed that they had a choice about whether to participate in the study or not and that their decision would not affect their grade in the class. This researcher was the only person in charge of distributing and collecting the instruments. Students were given the Children of Alcoholics Information Test and the demographic questionnaire all on one sheet of paper, front and back. Students completed the COAT first and then the demographic information. After the form was completed, students were asked to put it into a manila envelope, which was placed at the front of the

classroom before the tests were administered. Use of the envelope was a way to ensure that confidentiality was not violated. When all students finished both sides of the instrument and handed it in, the envelope was sealed. The envelope was collected and students were thanked for their participation.

Data Analysis

Data gathered from the COAT will be used to determine teachers' awareness of children of alcoholics. Individuals scoring 70 or higher will be considered very informed. Those scoring 35-65 will be considered moderately informed and prospective teachers scoring less than 30 will be considered uninformed. The scores from the COAT will be analyzed using descriptive statistical procedures.

Limitations

All participants in this study were voluntary so they may not be representative of all students enrolled in the university. Also, participants were asked if one or both parents had a drinking problem instead of giving them a test to see if they are a child of an alcoholic. Since the instruments were all self-administered, the participants' responses have to be taken at face value.

CHAPTER IV

RESULTS

Introduction

This chapter will discuss the results of this study which has investigated future teachers' knowledge of children of alcoholics as measured by the Children of Alcoholics Information Test. In addition, this section will present data pertaining to differences in knowledge and four demographic variables. The four variables investigated were gender, major, grades planning to teach, and whether or not the future teacher had an alcoholic parent.

Demographics

The total number of participants in this study was fifty-seven. Of this total, 54.4 percent (31) were male, while 38.6 percent (22) were female. Four respondents did not check gender on the questionnaire. Of the fifty seven students, 47.4 percent (27) plan to teach grades 7-12, 14 percent (8) plan to teach K-6 while 24.6 percent (14) answered other and 14 percent (8) did not respond to the question. The sample was predominately students ages 18 – 20 years old, representing 43.9 percent (25) of the participants; 21-25 year olds numbered 35.1 percent (20), 26 – 30 year olds totaled 5.3 percent (3), 31 – 40 year olds were 3.5 percent (2) of the study, and 5.3 percent (3) were 41 years old or older. Seven percent (4) of the participants did not answer the question. The majority of future teachers, 42.1 percent (24), were majors other than the two being researched; the researched majors were technology education, 36.8 percent (21), and early childhood education, 14% (8). Of the 57 participants, 22.8 percent (13) reported having a parent

with a drinking problem, leaving 70.2 percent (40) having a parent without a drinking problem.

As part of the demographic data gathered, individuals identifying themselves as having a parent with a drinking problem were asked to provide information related to their parent's drinking. Based upon an N of 13, one identified their mother as having a drinking problem while 12 identified their father as the parent with a drinking problem. Table 1 presents the data related to the identity of the alcoholic parent.

Table 1

Parental Alcoholism

Categories	father only	mother only	both
Identity of parent	21.1% (12)	1.8% (1)	0% (0)
With a Drinking Problem			

() = number of respondents

Statistical Analyses and Their Relationship to the Null Hypotheses

The research objective of this study was to determine future teachers' knowledge about children of alcoholics. The following data was related to the independent t-tests and addressed the null hypotheses.

Null hypothesis #1 dealt with the difference between future teachers having a parent with a drinking problem and future teachers not having a parent with a drinking problem and their knowledge of children of alcoholics, as measured by the Children of Alcoholics Information Test (COAT). It was hypothesized that there would be no significant difference between scores of future teachers having a parent with a drinking problem and future teachers not having a parent with a drinking problem. The mean score of future teachers having a parent with a drinking problem, based on an N of 13 was 11.69 (SD=2.18), while the mean score of future teachers not having a parent with a drinking problem, based on an N of 40 was 11.33 (SD=3.09). There was only a slight difference in scores between these two groups; therefore, this null hypothesis could not be rejected.

Null hypothesis #2 dealt with the relationship between future teachers of technology education and future teachers of early childhood education and their knowledge of COAs as measured by the COAT. It was hypothesized that there would be no significant difference between scores of future teachers going into technology education versus future teachers studying early childhood education. The mean score for technology education teachers, based on an N of 21, was 10.81 (SD=2.54) which was not significantly different than the mean score of 12.00 (SD=2.62), based on an N of 8, for early childhood teachers. The difference is too small to be statistically significant; therefore, the null hypothesis could not be rejected.

Null hypothesis #3 dealt with the difference between future teachers of grades K-6th and future teachers of grades 7th – 12th on knowledge of COAs, as measured by the COAT. The mean score of future teachers of grades K-6th, based on an N of 8, was 12.00(SD=2.62) which was not significantly different than the mean score of 11.48

(SD=2.72) for those identifying themselves as future teachers of early childhood.

Therefore, this null hypothesis could not be rejected.

Null hypothesis #4 dealt with gender and future teachers' knowledge of COAs, as measured by their score on the COAT. It was hypothesized that there would be no statistically significant difference between the scores of males and the scores of females. The mean for males, based on an N of 31, was 10.94 (SD=2.79) which was similar to the females' mean of 12.00 (SD=2.93), based on an N of 22. While there is some difference between males and females, it is not statistically significant; therefore, this null hypothesis could not be rejected.

CHAPTER V

DISCUSSION

Summary of Findings

The main objective of this study was to investigate the relationship between future teachers and their knowledge of children of alcoholics. This objective was investigated by computing participants' scores on the Children of Alcoholics Information Test. For this final chapter, the research results have been summarized and recommendations have been presented for both changes in the design of the current study and for future studies.

Even though the results of this study did not statistically support the hypothesis that knowledge of children of alcoholics would be different based on gender, major, grades planning on teaching, or having a parent with a drinking problem, overall scores on the test were not very high. The average score was 57.20 percent (11.44 correct answers), indicating participants are only moderately informed about children of alcoholics. Participants needed to score 70 percent or higher to be considered highly informed. This finding indicates a need to continue educating teachers about children at risk, which includes children of alcoholics.

Weaknesses

There are several possible reasons why the results do not support the hypotheses. The first and most significant reason is because there were too few participants in some of the categories such as major and grades planning on teaching. Of the fifty seven participants,

only eight reported being early childhood education majors and only five identified themselves as planning to teach K-6th grades.

To improve the number of participants, it might be useful to include other education courses instead of solely using multiculturalism in this study. By increasing the number of participants in the early childhood education majors group, to more equal the numbers in the technology education group, statistically significant differences between the two groups might have been found. Similarly, if the group planning to teach K-6th was similar in numbers to the group planning on teaching 7th – 12th, significant differences might have been found, resulting in the rejection of the null hypothesis in this study.

Participants were asked on a self -defined demographic questionnaire if they had a parent with a drinking problem instead of being given the CAST to determine if they were a child of an alcoholic. In order to conceal their parents' drinking, some participants may not have answered truthfully to the question of whether or not they had a parent with a drinking problem.

Another weakness may have been that the participants were given the COAT and the demographic questionnaire at the same time and were told that the study was to test future teachers' knowledge about children of alcoholics. Participants may have tried harder than they would have if they did not know the study was to test their knowledge.

Two last weaknesses that may have affected the study relate to the COAT. The first one has to do with the questions on this instrument. Children in denial of their parents' alcoholism may have answered the questions differently than children that have dealt with the issue. The second weakness relates to the choice of the COAT itself. Although it is reported to be a valid and reliable instrument, because no specific validity or

reliability information could be obtained use of a different instrument may be a better choice and/or may produce different research results.

Recommendations for Future Studies

Although the results of this study were not statistically significant in supporting the hypotheses, they should not be disregarded. There is important information to be obtained from this study. The overall scores on the COAT were not very high, indicating future teachers are only somewhat aware of the characteristics of children of alcoholics. With a greater number of participants, there may have been a significant difference in the scores, indicating which groups of participants were more aware of children of alcoholics.

This researcher recommends that several follow-up studies be considered. It may be useful to replicate the present study with a population of current educators to see if teachers become aware of students at risk after teaching in the classroom. Students at risk cannot be helped if they are not recognized; therefore, this would be a useful study.

The “student at risk” is a large and growing population; therefore, awareness in recognizing these individuals is essential. Millions of students go unnoticed, and therefore untreated, every year, often leaving them with lifelong behavioral and psychological problems. By gaining a better understanding of children of alcoholics, teachers may be better equipped to help these individuals succeed in school and life.

References

- Black, C., Bucky, S.F., & Wilder-Padilla, S. (1986). The interpersonal and emotional consequences of being an adult child of an alcoholic. *The International Journal of Addiction*, 21, 213-232.
- Chassin, L., McGrath, C.E., & Watson, A.L. (1999). A comparison of academic performance and children of alcoholics. *Journal of Studies on Alcohol*, 60, 18-26.
- Cork, M. (1969). *The forgotten children*. Ontario, Canada: General Publishing Company.
- Davis, R.B., Johnston, P.D., DiCicco, L., & Orenstein, A. (1985). Helping children of alcoholic parents: An elementary school program. *The School Counselor*, 33, 357-363.
- DeZolt, D.M. & Natasi, B.K. (1994). *School interventions for children of alcoholics*. New York: The Guilford Press.
- Fine, E.W., Yudin, L.W., Holmes, J., & Heinemann, S. (1976). Behavioral disorders in children with parental alcoholism. *New York Academy of Sciences Annuals*, 273, 507-517.
- Gabe, J., Powell, R.R., & Zehm, S. (1994). *Classrooms under the influence: Reaching early adolescent children of alcoholics*. Virginia: National Association of Secondary School Principals.
- Haberman, P. W. (1966). Childhood symptoms in children of alcoholics and comparison group parents. *Journal of Marriage and the Family*, 28, 152-154.
- Priest, K. (1985). Adolescents' response to parents' alcoholism. *Social Casework*:

Journal of Contemporary Social Work, 66, 533-539.

Rimmer, J. (1982). The children of alcoholics: An exploratory study. *Children and Youth Services Review*, 4, 365-373.

Robinson, B.E. (1989). *Working with children of alcoholics*. Massachusetts; Lexington Books.

APPENDIX ADemographics Questionnaire

Age: (check one)

- 18-20
 21-25
 26-30
 31-40
 41 or older

Gender: (check one)

- Male
 Female

Major: (check one)

- Technology education
 Early childhood education
 other

Grades planning to teach: (check one)

- K-6
 7-12
 other

Did your parents have a drinking problem:

- No
 Yes
 If yes, who?
 mother
 father
 both

APPENDIX B

Children of Alcoholics Information Test (COAT)

- | True | False | |
|-------------|--------------|--|
| T | F | 1. There are an estimated two million children of alcoholics in the United States. |
| T | F | 2. While children can be affected by parental alcoholism, the effects generally are not long lasting. |
| T | F | 3. Children usually get better once their alcoholic parents stop drinking or enter a treatment program. |
| T | F | 4. Reared in homes fraught with problems, children of alcoholics tend to be repelled by overindulgence in drugs or alcohol, or overeating or overworking. |
| T | F | 5. It is not a bad idea for kids to help parents stop drinking if they are willing to take some stress off parents that may be preventing them from stopping drinking. |
| T | F | 6. It is easy to spot children from alcoholic homes because the effects of alcoholism are pretty much the same. |
| T | F | 7. It is unlikely that children would blame themselves for their parents' drinking problems. |
| T | F | 8. Upbringing in alcoholic households is not as inconsistent and unpredictable as most people think. |
| T | F | 9. Parent - child relationships are actually closer in alcoholic homes than in nonalcoholic homes. |
| T | F | 10. Because of a rough home life, children of alcoholics ordinarily look outside the home for close and trusting friendships and intimate relationships. |
| T | F | 11. A common myth is that alcohol abuse and child abuse usually go hand in hand. |
| T | F | 12. Poor school performance is unrelated to parental alcoholism. |
| T | F | 13. Given an opportunity, children of alcoholics are likely to talk to teachers or counselors about their parents' alcoholism, since they have few outlets at home. |

- T F 14. One helpful approach for children of alcoholics is to minimize the bad things at home and help them look on the bright side.
- T F 15. Generally, preschool children from alcoholic homes are easier to spot than older kids because they are less inhibited.
- T F 16. School personnel recognize most children of alcoholics because they have problems in school or become delinquent.
- T F 17. As grownups, children raised in alcoholic homes are likely to enter jobs that deal with things instead of people or their problems.
- T F 18. Alcohol and drug treatment programs in this country generally have special programs for children of alcoholics.
- T F 19. Adults brought up in alcoholic homes tend to abstain from alcohol and drug abuse and to avoid friendships and marriages where alcohol is involved.
- T F 20. Armed with proper information, practitioners can help children gain control over their parents' alcoholism.