

ALCOHOL, DRUGS AND THE FAMILY: AN OVERVIEW¹

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The task I have been asked to take on in presenting this overview is large, and the time is short. Accordingly, the coverage will necessarily be selective. I must add at the outset that my viewpoint on the issues in the relevant literatures is to a degree that of an outsider, and that full reviews of the relevant literatures must be sought elsewhere (e.g., Orford, 1990). My primary base of empirical work over the years has been survey research on drinking patterns and problems in the general population. And survey research technology usually starts from a strong methodological individualism: to limit clustering effects and potential cross-contamination of respondents' answers, surveys usually interview only one person per household. In the usual population survey, family members other than the respondent thus appear, if at all, only in terms of the respondent's perceptions of and reactions to them. Most commonly, the family appears only as implied by aspects of an individual's demographic status -- by the respondent's marital status, and by the household composition, in terms of family and other relationships to the respondent. Much clinical work, too, is marked by a parallel methodological individualism: the focus is on the client, and other family members are present only as images in the client's mind. To focus on the family, first of all, is to turn our attention away from the isolated individual and from snapshots of status and to refocus our attention on relationships and on processes in time -- on the continuing interactions that occur among people related to each other and often also living together.

My main emphasis in this overview is on the importance of the imagery we carry around with us of alcohol and other drugs, on the one hand, and of the family, on the other. The images we carry with us of the family as a culture complex and as an institution are extremely powerful, influenced not only by our own experience from our earliest memories onward but also by strong cultural themes and understandings. Images of alcohol and drinking and of drugs and drug use are also strongly embedded from a relatively early age. In each case, we may, in fact, talk of them as governing images (Room, 1978), in that the imagery often predetermines our understanding of the relationships between the family and alcohol and drugs, and guides our actual behaviour. Equally, these governing images of the family and of alcohol and drugs have shaped our research and knowledge on the interplay between alcohol and drugs and family life.

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THE MANYSIDED NATURE OF THE FAMILY

Any consideration of alcohol, drugs and the family must start from what we mean by family. The term "family" encompasses a very wide range of arrangements. In terms of people living together, a family might range from two adults or an adult and child, on the one hand, to many people from three or more generations, on the other. "Family" also encompasses groups of related people not living together -- my sisters and myself, for instance, who live in Auckland, London and Toronto -- and even, in its broader meaning, relatives who may never have lived together.

In its more restricted sense, Steinglass and Robertson (1983) have suggested that there is general agreement among family researchers that

the family is a group determined primarily by kinship relationships; that the family group develops its own interpersonal and interactional characteristics (in addition to the characteristics of individual family members); that the group has a social organization reflected in ... structural components [such as] role distribution; and that it has certain primary functions, including the fulfilment of the emotional needs of its members, responsibility for child rearing, and the preservation of social and behavioral values.

Most family groupings of people living together last for a considerable period of time, and members spend a good deal of their time in the family. To form or join a family is thus a considerable investment of self by the individual member, an investment which is usually not lightly or easily abandoned.

CONTRASTING FRAMINGS OF THE RELATION OF THE FAMILY TO ALCOHOL AND DRUGS

The mansided nature of the family relationship is reflected in the diversity of ways in which the family comes into thinking and writing on alcohol and drugs. Some parts of the literature focus only on the biological side of the family: on the genetic recombination and transmission involved in having a child, or on teratogenic effects during pregnancy. In some studies, the focus is on factors in family history which predict drug use by adolescents. Other studies focus on the effects of drinking or drug use on the distribution of family roles, and on family functioning. A related set of studies examines the responses of family members to the problem drinker or drug user. And still other studies examine the role of drinking or drugs in family violence and other pathologies of family life.

The emphases in the literature on drugs and the family are remarkably different for different types of drugs. For alcohol, there has been a major emphasis on family processes and adjustments to the heavy drinker. For illicit drugs, the emphasis has been on factors in the family which predict initiating drug use (Kandel, 1980). The literature on psychopharmaceuticals is much less developed, but pays attention to difficulties in family roles as causes of misuse.

These different emphases may be seen as reflecting who is presumed to be the prototypical misuser of the drug and the user's stereotypical family role. The alcoholic is seen as adult, and usually male; the literature's emphasis on family process and adjustments reflects such an alcoholic's presumed power position in the family. The misuser of prescription psychopharmaceuticals is presumed to be adult, female, and often elderly, and the drug use is accordingly presumed to reflect a lack of control over life circumstances. The illicit drug user is

seen as adolescent; the literature's main agenda has been to show what kind of family functioning can prevent drug use in the first place.

That stereotypical thinking about family roles and drugs seems to underlie these different emphases in the literature is symptomatic of the fact that, more even than other alcohol and drug literatures, research on families has been influenced and constrained by ideological presuppositions about and governing images of what is being studied. Researchers since Jackson (1954; see Ablon, 1976) have pointed out the extent to which the psychodynamic literature of the 1950s tended inappropriately to blame the drinking of the male alcoholic on the perceived bossiness of his wife. But ideological presuppositions are by no means limited to this older literature. Research on alcohol in family violence, for instance, tends to downplay the role of the perpetrator's drinking in the violence, and to ignore any role of drinking by the victim, out of concern that giving attention to the drinking may tend to excuse the perpetrator and bring blame to the victim. The large literature on determinants of youthful drug use tends to assume that a "good" family life will be a protective factor against drug use, and conversely that presumed imperfections in family life will lessen its protective power.

Built into much of the literature is a set of assumptions about what an ideal family would look like, and that the effects on the personal behaviour and experiences of its members from such a "good" family can only be positive. Rare in the literature is the recognition that good can sometimes lead to bad: that bad behaviour can indeed be a reaction to and dissociation from too much of a good thing.

The dominant image in the alcohol and drug literature is thus of the family as a "haven in a heartless world", in the words of Christopher Lasch's booktitle. In this imagery, the temptations to drug use or problematic drinking come from outside the family, and family life is a protective factor against these. This imagery has a long history; for Frances Willard and the women's movement of a century ago, the slogan of "home protection" epitomized the threat to family life from the evils of the saloon (Levine, 1980).

But the opposite image of the family as potentially toxic, of the evil as coming from within, does underlie some parts of the modern literature. The popular literature around the adult children of alcoholics (ACOA) movement presents behaviour and process in the family as the source of dysfunctions in its children -- and extends this to cover nearly all families with the frequent claim that 96% of American families are dysfunctional (e.g., Glendinning, 1994:x). Building on this literature, Anne Wilson Schaefer (1987) offers an explicitly feminist analysis of addiction as the prototypical male disease and codependence as the prototypical female disease in a patriarchal family and social system. From another perspective, child welfare workers in the U.S. have frequently seen it as their duty to protect a baby by removing it from its family where the mother is a drug user.

Images and presuppositions about the family, and about alcohol and drugs and the family, are not necessarily misplaced. When they are made explicit, they can serve as hypotheses to be tested. But the testing needs to be critical, against one or more competing hypotheses, and the analytical methods need to take into account the likelihood that what is true for some families in a particular time and place may not be true for all.

If we continue building literatures around testing hypotheses derived from commonplace cultural assumptions, however, it is unlikely that we will be able to bring together the disparate

strands in the literature. In my remaining time, I want to offer a couple of suggestions on general themes which might well be developed in future work.

INDIVIDUATION AND THE EXPECTATION OF SELF-CONTROL: ALCOHOL AND DRUGS AS AN ARENA OF FAMILY CONTEST

One theme is of the symbolism attached to drinking and drug use, and the relation of this to two major issues in family life: individuation and self-control. In the cultures I know best, the family of upbringing is the primary collectivity from which the child must separate him- or herself in the process of individuation. This does not mean, however, that issues of individuation disappear in adult life. For adults in a marriage or partnership, again it is the family bond which is the primary collectivity against which individuation is calibrated.

In particular cultural circumstances, drinking and drug use may offer a wonderful symbolic arena for these issues of individuation versus collective interests to be fought out. I have written elsewhere of how well alcohol and drug use can serve as symbols of generational rebellion in a society at large (Room, 1984; 1992). In a cultural frame where use is forbidden to youngsters (or at all), drinking or drug use can also offer a readymade and powerfully symbolic behaviour in the more intimate struggle over teenage or young adult emancipation in the family. While this is, of course, hardly a new idea, it does offer an alternative frame of reference for thinking about the relation between family functioning and youthful drug use, suggesting that there may be circumstances in which parenting strategies which emphasize the evil of drugs and thus magnify the symbolic power of drug use may backfire.

Heavy drinking or drug use is also potentially a heavily symbolic arena for struggles over individuality or coupledness in spousal relations in adult life. Heavy drinking males in Finland described their life histories to Alasuutari (1986) in terms of an alternation between sober times of settling down with a good woman and outbursts of heavy drinking which ruptured the relationship. Ablon (1985) describes a less cataclysmic version of this dynamic among middle-aged Catholic families in San Francisco. For Ablon's men, stuck in middle-level jobs in hierarchical workplaces, and married for life to childhood sweethearts, heavy drinking seemed to serve as a kind of protest, as "rattling the cage".

In our societies, along with individuation goes the expectation of self-control. For more than a century, the compulsive use of alcohol and other drugs has been emblematic of loss of self-control (Levine, 1978). Conversely, in the culture at large, the loss of control of alcoholism or addiction has always been double (as in AA's First Step) -- not only a loss of control over drinking or drug use, but also a loss of control over one's life because of the alcohol or drug use. From the first, a major signal of this loss of life-control has been a failure to perform expected family roles. The case reports of Steinglass and his colleagues (1987) are a rich source of concrete examples of drinking-related failures in family roles. In intimate struggles over behavioural expectations in family roles, the rise of the disease concept of alcoholism and of a treatment system for it put new weapons in the hands of the members of the drinker's family to define previously accepted behaviour as aberrant and as needing therapeutic or other reform.

ALCOHOL AND DRUGS AND THE STATE'S INTERVENTION IN FAMILY LIFE

This brings me to the issue of the role of drugs in relations between the family and the

state. Of all social institutions, the family is perhaps the most impervious to state action. As Samuel Johnson put it, "How small, of all that human hearts endure,/That part which laws or kings can cause or cure!" Attempts by the state to interfere in customs and rituals carried by and located in the family have frequently failed. Whatever their internal dynamics, families tend to band together against an external pressure. These inherent tendencies are reinforced in our societies by the privileged legal position of the family; for instance, spouses cannot be forced to testify against each other, and behaviours which would be illegal in other circumstances are often legal between family members.

In the early decades of this century -- in the Progressive Era, in American political terms -- English-speaking and European states took on unprecedented ambitions with respect to regulating the internal life of the family. Forces behind these ambitions included temperance movements and women's movements. Where previously the state had usually backed patriarchal power within the family, the state now quite often took on the role of protecting the weak from the more powerful within the family. As it was put by a supporter of the Swedish Temperance Boards, which had specific jurisdiction over drunken behaviour affecting family life, the Boards had taken "energetic action ... against wife tormentors and house tyrants" (Kinberg, 1940-41).

In the postwar era, governments retreated somewhat from these ambitions. The present era, however, has seen a resurgence of governmental intervention in family life. Under the impetus of the modern women's movement, violence and assault within the family have been criminalized, and government employees have been retrained to take a proactive role in prosecuting such cases. As part of the modern state's "war on drugs", child welfare workers have been given the duty to protect children from drug-using parents, and particularly mothers.

The rise of a specific alcohol and drug treatment system (Klingemann et al., 1992) has put a new and potentially potent tool against a powerful family member in the hands of the less powerful. In the U.S., in particular, encouraged by an entrepreneurial environment, treatment agencies have offered their services to family "interventions" designed to pressure the alcoholic into treatment (Storti and Keller, 1988). In the new environment of the Adult Children of Alcoholics movement and of these treatment system-backed family interventions, it is likely that many of the family histories of the "alcoholic family" recounted by Steinglass and colleagues (1987) would read quite differently.

CONCLUSION

I have tried to lay out in these few minutes some of the ways in which alcohol and drug use and misuse interplay with fundamental aspects of family processes -- with processes of individuation, with struggles over control and self-control of behaviour, and with potential outside interventions in family life. Whereas in much of the literature alcohol or drug use is seen as something alien to or outside family processes, I have suggested ways in which alcohol and drug use and issues can be intrinsic parts of family processes. I should note that these thoughts are not based on detailed empirical work, but rather are suggestions for lines of further work. This may, indeed, be a field in which we need for a while to do less ideologizing and do more observing.

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