

FOSTERING THE SUPPORT AND DEVELOPMENT OF RESILIENCE IN CHILDREN OF
ALCOHOLICS IN THE SCHOOL SETTING

A Record of Study

by

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ABSTRACT

Over the last century, the expected role of the classroom teacher has shifted dramatically. We have begun to move away from someone whose main purpose is to provide rote instruction to students, to a shift that educators are facilitators of learning that work to meet the needs of the whole child and not just their academic growth. An increased amount of contemporary research has yielded results that identify the urgency to support the social and emotional demands of students in addition to their intellectual abilities. Children who live in households with alcohol abuse face challenges and obstacles outside of school that necessitate a need for additional social and emotional support within the classroom.

The purpose of this multiple case study was to analyze the lived experiences of six self-proclaimed adult children of alcoholics in order to learn ways in which to help support current children of alcoholics in the elementary school classroom. Six adult children of alcoholics were identified and participated in open-ended and semi structured interviews about their lived experiences. Each participant was asked thirteen pre-identified questions that covered three sections including the participant's childhood experiences outside of school, their school experiences, and their adult life. Notes were taken during the interviews and follow up questions were asked based participant answers. The interviews conversations were transcribed and later coded and analyzed for themes surrounding potential areas of support that could be provided within the confines of a classroom setting while taking into account the limitations surrounding these children's unique and uncontrollable circumstances.

The findings of this multiple case study supported preceding research that identified children of alcoholics as having similar experiences to participants in this study and facing many of the same consequences as adults. Analyses revealed a variety of experiences and variable

traumas experienced by children of alcoholics outside of the school setting. Findings identified multiple themes and areas of support that teachers can provide to children of alcoholics in their classrooms, which could impact the quality of their school experience and influence their adult life. Among the themes identified were the provision of a safe place and basic needs, the acknowledgement and sharing of emotions, encouragement and support from a role model, and the development of personal connections and meaningful relationships. This study provides stakeholders with vital insight into the lived experiences of children of alcoholics as well as multiple methods for assisting these students within the context of the classroom.

DEDICATION

In loving memory and dedication to Tara and Elfriede Morningstar, who provided all the light I needed to find my way out of the dark. This ROS is also dedicated to my grandparents Cheryl and Gregory Beck, without whose support this journey would have been impossible. Finally, this ROS is dedicated to Matthew Barron, who got me through sobriety. Thank you to everyone in my life for showing me that family is exactly who you make it.

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CHAPTER 1

Introduction

Over the last century, the concept of education and the role of the classroom teacher has drastically changed and become a more intricate, complicated system. Classroom environments no longer consist of desks lined up in neat rows and teachers lecturing in front of a board. To be a teacher today means so much more than simply lecturing information that pupils are expected to absorb and regurgitate later. Moreover, skill based on rote memorization is simply no longer needed or valuable in today's increasingly virtually based world. These days, teachers are advocates for students, they are family, they are champions, they are protectors, and they are role models. Teachers strive to develop long lasting relationships with their students and fight to not just provide information, but to equip their students for long lasting success and the tools needed to improve and save our vanquishing humanity.

Unfortunately, an alarming number of students come to school with unseen burdens that prohibit them from reaching their full potential and often prevent them from feeling safe or comfortable enough to get the most basic fundamentals an elementary education has to offer. Many of these children are children of alcoholics, a disease that affects millions of adults around the world (NIAAA, 2020). These students are more likely to suffer from depression, low self-esteem, grapple with substance abuse, and struggle to make and maintain relationships and friendships (Park and Schepp, 2014). All these consequences can result in lower academic achievement, reduced attendance and participation, as well as contribute to the stigma of being a "bad kid." Poor performance in school can result in negative consequences that follow a student throughout their entire adult life (Barnard & McKeganey, 2004).

It is easy to make the argument that despite the unfortunate circumstances befallen on these children, teachers are in no way responsible for or capable of fixing this problem. I would say that this argument is mostly correct. However, the goal of this research is not to cure alcoholism or change the living situations these children face. The goal of this research is to support teachers in fulfilling what I believe is their number one goal and role as an educator: teaching and supporting the whole child so they have their best chance at obtaining a happy and fruitful future. Many students who suffer trauma need less instruction on long division and more guidance in the development of a sense of security, self-esteem, and social skills that will prove much more beneficial in their adult lives. What is more constructive to a human, the absorption of skills that will inevitably be calculator based as soon as exams are finished, or the ability to live and function happily while contributing positively to society with one's fullest potential? As we examine the types and effects of trauma associated with living in an alcoholic household, I have developed a clearer understanding of just how beneficial understanding the lived experiences of these children and how to help them can be to almost every child. The scope and capacity of this research along with my artifact will hopefully make a difference in the lives of children suffering from a myriad of traumas, not just children of alcoholics.

The National Context

The suffering experienced by children of alcoholic households is often overlooked and easily goes unnoticed in the school setting despite being a problem faced by children all across the United States. Regardless of alcohol being one of the most common types of substance abuse, it is extremely difficult to know which children suffer from and live in these types of homes without apparent physical signs. Moreover, being exposed to alcoholism and alcoholic

dependency has been shown to have long lasting, damaging effects on the young children exposed to it that often get in the way of both academic and life success.

It's often said that alcoholism is a family disease, because the entire family unit and every member who is part of it suffers. Alcoholism takes an especially high toll on children, who often carry the scars associated with an alcoholic parent's drinking well into adulthood. (Keller, 2018, p. 1)

According to the National Institute for Alcohol Abuse and Alcoholism (NIAAA) one in every four U.S. children will be exposed to family alcohol abuse, alcohol dependency, or alcoholism before the age of eighteen (NIAAA, 1999). That is an extremely significant percentage of the student population that I believe necessitates acknowledgement and attention. Wisdom and Hiller-Sturmhöfel (2001) have made connections between alcohol abuse and the increase in child abuse and neglect and the "relationship between childhood victimization and adult alcohol abuse," indicating that this has and continues to be a generational problem (p.52).

Despite family alcohol abuse being such a widespread and detrimental issue for thousands of children, minimal research is available on the extent to which these children are affected in school and the research that is available does not appear to be widely discussed. According to Keller (2018), children of alcoholic households are more likely to perform worse on tests, be retained, exhibit more behavioral problems, and drop out than their counterparts. The unpredictable and traumatic characteristics of an alcoholic household also increase a child's chances of being exposed to and experiencing violence as well as becoming a victim of physical, sexual, and emotional abuse. A study recently conducted by Bogosel et al. (2021) found alcohol consumption to be the number one risk factor of a child being physically abused at home.

As educators responsible for the growth and development of the whole child, we cannot expect children suffering from guilt, anxiety, embarrassment, confusion, anger, and depression (American Academy of Child and Adolescent Psychiatry, 2019) to be academically successful in school if they are not provided with resources and support to help combat the challenges they face at home. Considering the extremely high percentage of children living in alcoholically abusive households, it is imperative that educators (who often spend more time with children than their actual parents) are equipped with beneficial tools to help nurture and foster these unfortunate needs of so many children. Teachers should be provided with resources to help fill in the emotional and social gaps the children of alcoholic households are facing. The provision of a supportive and nurturing environment has the potential to have a dramatic impact on the academic success, livelihood, and future happiness of these children in their adult lives.

Personal Context

My interest in this study's topic stemmed from both a deep personal connection to the phenomenon of resilience in combination with a realization that my experiences growing up were far more ubiquitous with today's youth than I ever could have imagined. I have always been interested in the enigma of how individuals in the same home environment could grow up with such different outcomes. How is it that some people are resistant and fight to overcome and distance themselves from their trauma while others are completely consumed and overcome by it? What factors influence this resilience (or lack thereof) in an individual? As an adult child of an alcoholically abusive home myself, I am familiar with the mental hurdles that often prohibit many students from becoming successful, all because of existential factors completely out of their control.

I entered the education system ten years ago as a first grade teacher. Going in as a twenty-two year old with zero experience, I was completely unprepared for the depth of reality unrelated to teaching that I would encounter and observe with even the youngest students on campus. It was as if I had completely forgotten my own struggles and experiences as a child and had attributed them to being circumstantial and incidental to only my life. I expected the little sponges that entered my classroom to be ready to soak up knowledge of addition and subtraction facts and to learn to read without any outside hindrance to impede or setback their learning. As long as my instruction was good, they would be successful. I truly did not fathom and was not prepared for what I would now describe as the true meaning of being a teacher. I can ascribe some of this naivety to my degree program, who taught everything under the assumption we would be teaching “in a perfect world.” This education was far removed from reality and has minimal influence over how I teach and practice today. Discussions with other educators later on in my career revealed similar feelings of being completely ill prepared for the challenges we would all end up facing.

Over the years, I became very involved with my campus and ran clubs, helped coach and train teachers, ran and coordinated events, and participated in multiple after school tutoring and enrichment programs. I eventually obtained my Master’s in Educational Leadership and became a campus administrator for two years. My campus was a title one, low-income charter school with over 800 pre k through 12th grade students. This allowed me to build relationships with pupils of all ages. Over time and through observations, conversations, and experiences, I realized how much potential was failing to be fulfilled and how many students were being let down and were failing to have their most basic needs met. It was certainly nobody’s fault on campus. These students were dealing with situations outside of school that were completely out of their control.

There was nothing anyone could really do about it. The most streamlined and technologically advanced curriculum was not going to make up for the struggles these students were facing at home. Added school stress and pressure to perform well academically by teachers was not going to improve their situation.

In some instances, I was made aware of alcohol and substance abuse playing a role in students' home lives, be it through them sharing stories with me, interactions with intoxicated parents and family members, or discussions with various school personnel. In other instances, the cause of the imbalance and chaos at home could not be pinpointed to alcohol abuse specifically. However, considering the many forms of traumas that can be connected to alcohol dependency, it is reasonable to assume that many of these students were subjected to at least some form of substance abuse. Regardless of if alcohol abuse at home turned out not to be the case for some of these children, we will see in Chapter 2 how experiences lived by children of alcoholics are still felt in so many households. So arguably, despite the exact cause, these students were sharing comparable negative experiences and would likely benefit from similar types of support.

Over the last several years I have begun to wonder what we as educators could do, if anything, to help children who regularly experience trauma at home still turn out to be successful. What if there was something we could do? What if there was more action we could take to support these children in developing a sense of worth and drive? What if we could help them use their education as a tool to change the course of their lives and increase their chances of future success and happiness?

So far I have attempted to keep things very general in regards to the negative experiences and trauma children may be exposed to. You will notice that most experiences felt by children in an alcoholically abusive home are experienced by thousands of children in which alcohol is not a

factor. What makes alcohol dependency significant for this case study, however, is the acknowledgement that growing up in an alcoholically abusive household significantly increases your chances of experiencing a myriad of negative life events. The number of students that do face this reality at home is far too large to ignore and is a growing problem that I believe needs to be addressed. Woodside (1988) explains how these children live in homes of “tension and insecurity” and are made to feel “unwanted, unloved, and invisible” (p. 645). In what context could a student with these struggles be expected to successfully succeed? That is how beneficial I feel an intervention and/or curriculum program designed for children of alcoholics would be to the entire student population.

As a cohort of educators, I am sure that describing the responsibility of educational institutions as preparing children to be successful adults would be widely accepted. However, I still hear and see debate regarding whether this responsibility should extend far beyond the simple delivery of academics. While the idea of educating the “whole child” and providing social emotional support is gaining a lot of traction, there is still more to be understood and practiced by the educational community to truly recognize that the social emotional needs of students must be met before successful academic learning can even take place. Even in instances where the social emotional needs of students are acknowledged, it continues to remain a backburner issue in comparison to the pressure felt by all educators to maintain and improve test scores. Rather than being an extension or accessory of the typical curriculum, I believe that meeting student’s needs should be embedded within and become a part of the regular curriculum and are just as important, if not more so, than academic knowledge in preparing students for a successful future. Three years ago I finally switched campuses and transitioned from a charter school to a public elementary school and went back to teaching in the classroom. The recent Covid19 pandemic has

resulted in multiple transfers, and I have served three campuses in the last three years as a result. The socioeconomic demographics of my more recent campuses are considerably different from the charter school I served for seven years. However, I have still witnessed the same struggles by many of our students, which supports the understanding that this issue is prevalent everywhere. Through this research, I want to provide students in alcoholically abusive homes with the supportive environment they need to become successful adults, which I regard as the true role of an educational institution.

The present study is centered around resilience in children who become successful despite the circumstances aforementioned. I am one of these children. Growing up, I experienced foster care multiple times, went to 19 elementary schools, had my first job to help buy groceries at 14, regularly witnessed and experienced various types of abuse, and witnessed those around me battle mental illness that caused feelings of confusion and fear and uncertainty. Unfortunately for me and for many other children who go through the same things and worse, this was my normal reality. There were many moments I felt that my teachers assumed that I would just be one of those that “didn’t make it” and their assumptions nearly solidified that future in myself. I did not feel seen or important. Neighborhood rumors and quiet discussions about my home life just increased the feelings of guilt and shame that I experienced. Despite all of this, however, I was able to crawl out and decide that I wanted a different life for myself. Why is it that despite neglectful and difficult home lives, some students prevail while others barely stand a chance? What factors contribute to this success and what can we do to help create these factors for our students so that they can overcome their often generational fates? I have my own opinions of the factors and influences that helped me on this path, and the case study presented in the following chapters will hopefully identify those and other factors for other

people. With that knowledge, we can hopefully make a difference for others in the same position and become one step closer to making school a place that truly helps prepare and foster development in a meaningful way.

I think it is important to stop and periodically ask and remind ourselves why this topic is important for academia. Why does this issue need to be another weight on the shoulders of teachers who already carry so many burdens? How can we possibly ask such a wearied community to add yet another helping to their already overflowing plates? Without a doubt, helping students overcome these struggles will improve their academic success. School performance and test scores are important to schools and that factor needs to be taken into consideration. However, I believe that the more important answer lies within the heart of a teacher. I am sure most teachers would agree that they want to make a lasting impact on their students' lives. I believe that most educators today would agree that it is the responsibility of the educational institution to prepare students for the future. Helping students learn to deal with and respond to the stress and trauma they experience does exactly that. It supports the entire child. Why else are we teaching them if not to prepare them for life outside of our care?

There have been some materials and curriculum developed for children in these situations, but this material is mostly available to counselors who work with a small number of children who have been identified as struggling or needing support, and very little knowledge is shared with classroom teachers. What about the majority of these children that go unidentified, slip through the cracks, and are overlooked? I have had many personal conversations with teachers over the years, and a copious number of educators feel unknowledgeable and/or limited in their ability to help these students. In addition, teachers are already overwhelmed and face an unfair amount of pressure to meet academic requirements and improve test scores. Ironically, I

believe a more in tune and aware educational environment would result in students who are more confident, generally happier, and will be more academically successful.

Teaching is more than a job to me; it is a commitment and responsibility to make long-lasting effects on the lives of our world's children. It is my way to help make the world a better place and to make a difference in the lives of those I teach. I have confidence in the belief that this conviction is true for most of my fellow educators as well. While it would be the tiniest knick in the wall of our current educational practices, incorporating support for children of alcoholics would touch lives in ways that are difficult to see and understand, but have an impact more meaningful to these students than we could ever imagine. My personal experience with resilience has instilled my faith in this phenomenon and its ability to be transferable to youth it may not have had the power to reach independently before.

Situational Context

At the time of this study, I worked in a large school district that served a student population of 53,900 students across 72 campuses. Sixteen of these campuses were Title I, including my own. These campuses were divided up into 3 early childhood facilities, 44 elementary schools, 13 middle schools, 10 high schools, and 2 special programs campuses. The demographic breakdown of the district is 12.6% African American, 25.3% Hispanic, 33.6% White, 24.1% Asian, and 4.3% other. My campus had a slightly higher minority population, with 39% African American, 39% Hispanic, 10.9% White, and 5.4% Asian. In the district, 31.9% of students were considered economically disadvantaged and qualified for free and reduced lunch, 16.3% are limited English proficient (LEP) students, 15.8% are bilingual, and 11.5% of the population qualify for special education services.

At the time, the district employed 3,960 teachers and 159 counselors. This creates a ratio of nearly 339 students per counselor in the district. If one in four children suffer from having an alcoholic parent at home, that means there are potentially over 13,000 children in my current district who could benefit from extra support at school. Considering the number of students that potentially suffer from some type of abuse and neglect, including children of alcoholics, taking note of the number of counselors that work with such children helps put into perspective the need for teachers to be trained and educated in social emotional learning strategies that could potentially help support such children. There is no way that counselors can tackle this problem on their own.

At the time of this study, the district had a significantly lower than state average poverty rate, with only 7% of the population living below the poverty line, compared to the state average of 16%. In addition, one in every five children lived in a single-parent household. According to the United States Census Bureau (2010), only 12.3% of all residents in the district have health insurance.

Economically, it would seem as if the school district is considerably well off compared to many low-income areas of the state and country. What is important to keep in mind, however, is the degree to which substance abuse, particularly alcohol abuse, is able to reach all members of the population. Alcoholism and alcohol abuse cross all demographic and economic boundaries, and hurt far more than the alcoholic. In fact, according to the National Institute on Alcohol Abuse and Alcoholism (NIAAA), White populations are more likely to suffer from early onset drinking and alcohol abuse compared to African Americans, Hispanics, and Asians. “However, once alcohol dependence occurs, Blacks and Hispanics have a higher prevalence than Whites Of recurrent or persistent alcohol dependence” (Chartier & Caetano, 2020, p. 153). According to

Healthy North Texas and the DFWHC Foundation, 15% of adults in the area report regular binge drinking (2020). The NIAAA reports that over 15 million people in the United States alone suffer from alcohol use disorder.

Keeping the above statistics in mind, the case study presented in the following chapters has been constructed from the lived experiences of adults who identify as having been children of alcoholics. My personal awareness that I was not alone in my experiences as a child and the inferences I have since made regarding my own personal accounts helped set the stage for the development of a study that would use individuals with similar lived experiences to provide knowledge, insight, and understanding that could be used to help children currently living in similar situations.

Knowing how prevalent substance abuse is and how it manifests itself in negative consequences later on in life, I was mindful that there were probably many adults available that could contribute to this case study and share their lived experiences. Not only have I interacted with many just through my own personal interactions, but there are also multiple support groups in existence in which the sole purpose is to provide help and support for adult children of alcoholics. This case study revolves around the experiences of six individuals who have a connection (both direct and indirectly) to one of these support groups and who felt alone and unsupported as children.

The Problem

Considering the taboo reputation of alcoholism, there is no accurate way of identifying which children are affected by parents and guardians who suffer from it. A close examination of the stories experienced by adult children of alcoholics helps us understand the long-lasting consequences of living in an alcoholic household (Haverfield & Theiss, 2014). Children of

alcoholically abusive homes are more likely to struggle in school, suffer from low self-esteem, lack social skills, and suffer from life-long consequences that prevent them from living a successful and happy life (Woodside, 1988).

Children of alcoholics suffer from a hidden, often secret problem. However, as the number one advocate for children, it is important that schools and educators are aware of the degree of this “hidden” problem and be educated enough to identify children that may be suffering consequences of an alcoholically abusive home life and be able to respond appropriately. Even if the cause may be from something else, support for struggling children needs to be a priority for schools.

Schools need to be aware that children from alcoholically abusive homes are absent more often and are more likely to be retained and/or suspended from school (Barnard & McKeganey, 2004). They are also more likely to suffer from anxiety, depression, and low-self esteem; all of which can negatively affect school performance (Omkarappa & Rentala, 2019). All of these factors, in addition to affecting the children themselves, also play a role in a school’s performance and student achievement. Schools need a way to combat students who struggle with these issues and to provide support.

Relevant History of the Problem

As has been stated previously, the struggle of children of alcoholics is a “hidden” problem that is difficult to monitor and therefore challenging to support. Many children of alcoholics go unnoticed or simply get labeled as “problem” children, “struggling” children, “disturbed” children, or merely slip through the cracks. Children of alcoholics often struggle academically (Mangiavacchia & Piccolia, 2017), struggle to make and maintain relationships (Park & Shepp, 2014) and struggle to behave appropriately in school (Post & Robinson, 1988).

Despite these struggles and the challenges faced by educators to identify and support these children, many schools, including my current school district, have been devoting an increasing amount of resources towards providing support for the social and emotional needs of its students, notwithstanding the root cause of these obstacles. For the past several years my school district has become increasingly more focused on developing the social emotional needs of students through restorative practices and community circles. Restorative practices is defined by the district website as an “evidence-based, relational approach based on processes that build healthy communities and repairs harm and restores relationships within the community” (PISD, 2020). At our campus, students engaged in conflict with one another participate in a restorative circle that focuses on “repairing harm and restoring relationships”. This circle involves both those responsible for hurting others and those affected. At my campus, one of our three counselors, campus social emotional coach, or campus social worker conduct restorative circles with students on an as needed basis. It appears to be beneficial to students building relationships, one area that children of alcoholics regularly struggle with.

Another big component of the school district’s social emotional learning is community circles. Our campus participates in community circles in every classroom both at the beginning and end of the day, and they are intended to build relationships, foster a sense of acceptance and belonging and increase confidence. Community circles create a safe space for every student in the classroom to share their voice in a non-judgemental manner without crosstalk or interruption.

The campus is also extremely diligent at tracking student referrals and interpreting the data to make decisions about student and teacher needs. They keep a record of every student that is referred to the office, counselor, or social emotional coach and the reason for the referral. In the 2019-2020 school year, 62.6% of referrals were for African American students, 16% White

students, 13.7% Hispanic students, and 6.6% Asian students. Males were referred to the office or counselor 72.2% of the time, while female students were responsible for just 28.8% of the referrals. Interestingly enough, the counselors have discovered that Tuesdays are the busiest day of the week and are responsible for 27% of referrals compared to the other days of the week.

What is beneficial about the above data are that they help the campus counselors notice trends in student behavior and identify areas of need. The first month of school (August 2019), students were taken out of the classroom 68 times to calm down and twenty restorative circles were conducted. For comparison, only 25 students were taken out of the classroom the month of February 2020 and 14 restorative circles were conducted. This is a significant decrease in behavior and social emotional problems throughout the school year.

Other than these social emotional and restorative practices, the district's involvement with and ability to support children at potential risk is limited. Red Ribbon Week is a common initiative conducted by schools across the United States as an anti-substance abuse initiative, but its effectiveness cannot really be measured. Different campuses in the district do hold informational nights for parents and classes on different topics such as building relationships and trust. These happen 4 to 5 times a year but unfortunately the turnout is extremely low (between 10 and 20 parents a class). In the district, many professional development workshops are offered including a few social emotional training sessions. However, classroom teachers are not required to take any specific number of social emotional training hours, which means some teachers have extremely limited knowledge of how to support these children.

While there has been an increased awareness of the value of social emotional learning and development for children, the ability of a classroom teacher to effectively help support these

needs without the proper education and assistance is a daunting task. Despite the difficulty, I believe the benefits to children who receive such services would be overwhelmingly positive.

Significance of the Problem

For the 2019-2020 school year, I was employed at a North Texas elementary campus that is a recognized International Baccalaureate (IB) school that implements the Primary Years Program (PYP) of the IB curriculum. This program is highly focused on students' personal growth and development, student agency, and centered on developing students that are internationally minded, knowledgeable inquirers, and motivated to succeed and contribute to the world. In addition to this curriculum, the campus is still held to the same standards and has the same requirements as all other campuses in the district and the state of Texas. The combination of the rigorous and involved IB curriculum with state and district expectations has resulted in a campus that is highly centralized on the needs of every child.

This focus on educating the whole child is supported by all staff members. There is also regular reiteration by campus administrators that students cannot succeed academically if their social and emotional needs are not met first. However, looking at the number of student referrals to the office, social emotional learning coach and school counselors, there is a significant number of students struggling to focus on school because of issues and factors that they do not know how to handle or respond appropriately to. Despite the hard work of the SEL team, there is a limit to the amount of support they can provide to over 500 students. In addition, even though this campus is seemingly ahead of the curve when it comes to supporting students' social and emotional needs, like every other school in North Texas, the focus is on academic success and test scores. At the end of the day, student and school accountability remains at the forefront of focus of most educators. While the data are valuable and important, it needs to be continuously

reiterated that students cannot perform successfully in school if their other needs are not being met first.

As educators, we are told that we cannot control what goes on in a child's home and that we must do the best we can to support students with the time we have with them. In relation to my study, these thoughts are partially true. We cannot control which students struggle at home or the hardships they go through. Alcohol and substance abuse is a significant issue that thousands of adults struggle with. Between 2006 and 2010, it was estimated that an average of “88,129 excessive alcohol use–related deaths occurred annually in the United States” (Ricci et al., 2020, p. 580) and these adults pass these issues onto their families in the form of stress, neglect, emotional abuse, physical abuse, anxiety, depression, feelings of hopelessness, and many other ways (Breaking the Cycle: The Effects of Alcohol on Families, 1991). What we can control, however, is what we do with the knowledge we have of how these students are struggling. How do we actively support and respond to students living in trauma?

I am firm in my belief that social and emotional needs must be met first, and academic success will follow. In this study I have acknowledged that alcohol abuse in the home is still a taboo topic that is often silently acknowledged by the community, but its prevalence means it is approached with an attitude of “there isn’t anything we can do”. I believe that if educators are more understanding of this issue, then they can reach and meet the needs of a significantly larger group of students. Through this study I hope to provide this needed support for educators.

Research Questions

The purpose of this study was to investigate the lived experiences of adult children of alcoholics in order to determine common factors that may have contributed to the development of resilience in adulthood. These observed common factors were then used in order to provide

guidance and information for classroom teachers and educators on how to best provide support for possible children of alcoholics in their classrooms and how to foster an environment that can help support these children even if they are not clearly identified. For the purpose of this study, I sought to answer two central research questions:

1. What are the lived experiences of adult children of alcoholics?
2. What can educators do to help children of alcoholics develop resilience and become more successful adults?

Important Terms

Adult Child of an Alcoholic (ACOA), sometimes (ACA)- “Men or women who grew up in alcoholic or otherwise dysfunctional homes” (Adult Children of Alcoholics World Service Organization, 2018).

At-risk student- generally defined as “a student who is likely to fail at school” and includes children who may “fail to achieve basic skills before leaving school” (National Center for Educational Statistics, 1992, p. 2).

Child abuse- “Child abuse- according to the Child Abuse Prevention and Treatment Act, “any recent act or failure to act on the part of a parent or caretaker, which results in death, serious physical or emotional harm, sexual abuse or exploitation, or an act or failure to act which presents an imminent risk of serious harm” (CAPTA Reauthorization Act, 2010, p. 4)

Child of an Alcoholic (COA)- refers to a child who lives in a household with at least one parent who is dependent on alcohol.

Economically disadvantaged- defined as “one who is eligible for free or reduced-price meals under the National School Lunch and Child Nutrition Program” (Texas Education Agency, 2019)

Locus of control- According to Lefcote (1976), the locus of control refers to a feeling of “circumscribed self-appraisal pertaining to the degree to which individuals view themselves as having some causal role in determining specific events” (p. 141).

Middle childhood- In this paper early childhood refers to children between the ages of 6 and 12.

Negative life experiences- also called negative life events, these circumstances refer to “often sudden, dramatic experiences that have the potential to significantly alter one’s social world” (Cairney & Krause, 2008, p. 163).

Neglect- According to the Child Welfare Information Gateway, neglect is frequently defined as the “failure of a parent or other person with responsibility for the child to provide needed food, clothing, shelter, medical care, or supervision to the degree that the child's health, safety, and well-being are threatened with harm” (2018, p. 2).

Poverty line- According to the 2020 Annual Update of the Health and Human Services Poverty Guidelines, the poverty level for a household of 4 people is an annual income equal to or less than \$26,400. (Butt, 2020, p. 3060).

Resilience- Through the Rochester Child Resilience Project (1990), Cowen et al. identified several characteristics present in stress resilient children. These characteristics help drive the definition of resilience in this paper and include individuals who are “better adjusted overall” and exhibit better social skills and more school interest. These children are perceived to have better “school competence, social acceptance, physical appearance, behavioral conduct and global self-worth”. In addition, stress resilient children also have higher self-esteem, greater empathy, and are more capable of controlling their reactions to stressful events (p. 201-202).

Social Emotional Learning (SEL)- According to the Collaborative for Academic, Social, and Emotional Learning (CASEL), SEL is defined as the ability of a child or adult to apply the

“knowledge, attitudes, and skills necessary to understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions” (CASEL).

SEL Coach- A member of the “social emotional learning” team at our campus, whose primary role is to assist teachers, staff, and school counselors by providing targeted social emotional learning instruction to specific students on an as needed basis.

Significant Stakeholders

The stakeholders for this research include the campus administrators, campus teachers, the campus SEL team (made up of counselors, the campus social worker, and the SEL coach), and students. Campus administrators will benefit from the added knowledge and greater understanding of techniques and methods to help foster resilience in students on campus who may be victims of an alcoholic or dysfunctional household. This information will help them make responsive decisions regarding behavioral issues that many of these students face on a regular basis, as well as a tolerant understanding of possible causes for such behavior. Campus administrators will be better equipped to support and provide guidance for teachers who have these students in their classrooms.

The campus SEL team is also a significant stakeholder of this research. School counselors carry the burden of trying to help all students in need of social and emotional support at school, and this is simply an unrealistic expectation. By providing ways for classroom teachers to become more knowledgeable at providing this support, members of the SEL team can focus on the most in-need and at-risk students on campus. Their background knowledge in conjunction with new information from this study will allow them to make more informed decisions and provide more targeted support for classroom teachers and students.

As well as the individuals this research was designed to support, teachers are some of the most fundamental stakeholders to take into consideration. School-age children often spend more time with their teachers during the day than their own families and parents. This creates a unique opportunity for teachers to build long-lasting, meaningful, and influential relationships with their students. This sphere of influence creates the ideal opportunity for teachers to be at the forefront of providing support and help for children of alcoholics. The dysfunction of an alcoholic household is powerful and can interfere with all aspects of a child's life. Teachers are in a special position to become not only a good role model for these children but make a difference in the outcome of their adult life, including their overall happiness.

Finally, and most importantly, students are stakeholders for this research. This study revolves around identifying factors that contribute to resilience and success in adulthood and preventing or lessening the harmful effects of living in an alcoholically abusive home. The recommendations of this study will be beneficial to all children, regardless of the type of dysfunction at home they may experience. Through this study I hope to impact students over a lifetime and change their predictable and often generational trajectory.

Concluding Thoughts

As educators we are faced with the challenge of meeting our students where they are. We adapt our instruction, our approach, and our methods to give our students the individualized attention that they need to be successful. This research emphasizes that what many students need in order to be successful is not academic support, but emotional and social responses that equip them to survive their home environments and one day become adapted, successful, and happy adults. What is unique about children of alcoholics is that though each of their stories are

different, the similarities and patterns seen in their experiences are valuable in providing help and support so that the number of resilient adults that emerge from these households increases.

In the following case study, I have investigated the lived experiences of adult children of alcoholics to look for common factors and shared experiences that may have contributed to the development of their resilience and/or challenges in adulthood. I have used qualitative data in the form of interviews to analyze and evaluate this information. In Chapter 2, I take a deep dive into the depth and history of problems faced by children of alcoholics and examine the current literature on the consequences these children face both at home and in school. In Chapter 3, I discuss the solutions and methods used to conduct the case study. In Chapter 4, I review and analyze the results from each of the interviews. In Chapter 5, I discuss the findings and examine the possibility of future discussion and actions.

CHAPTER 2

LITERATURE REVIEW

Introduction

There has been a significant amount of research done on the damaging effects of living with a parent who suffers from substance abuse. Despite it being one of the most common types, alcohol abuse in particular has far less literature available. What the research does tell us is that children who grow up in alcoholically abusive households are more likely to become alcoholics themselves and will likely face a myriad of other long-term consequences including poor academic performance, depression, anxiety, social and relationship issues, and a variety of potential health problems. Although this research is less abundant, what is accessible focuses mostly on the negative consequences of either being an alcoholic or growing up in an alcoholic abusive household and provides limited guidance and information on how to best support children who grow up in these homes. Through this case study, I investigate the lived experiences of adult children of alcoholics to look for common factors that may contribute to resilience and success in adulthood to provide possible forms of support and intervention for these children. This chapter looks at current and historically valid research to demonstrate a significant need to support these children so that they do not fall victim to detrimental long-term effects on their mental and physical well-being.

This chapter considers the most compelling and valid literature available on the topic of children and adult children of alcoholics, including the most effective intervention strategies available to support these children. Throughout this literature review, I examine the lived experiences of children and adult children of alcoholics to gain an understanding of the implications associated with growing up with an alcoholic parent. I then look at the

consequences of living in an alcoholically abusive home including mental ramifications, the hardships of the environment, and lifelong disadvantages. Next, causes and examples of resilience to these negative consequences are examined. Finally, I pore over the need to support these children, as well as methods of support, treatment, and intervention strategies that can be used to provide assistance. I then conclude the chapter with a summary of the most important insights discussed and the significance of this research to the topic of developing resilience in children of alcoholics.

The Lived Experiences of Children and Adult Children of Alcoholics

Growing up in a household in which one or two parents are heavy drinkers is a unique experience for every child and a traumatic experience for nearly all of them. In an attempt to understand these distinct experiences, Cork (1969) interviewed 115 children of alcoholics and found that the majority suffered from low self-esteem, anxiety, and emotional irregularity. Cork asserted the necessity to help children of alcoholics individually, even if it means doing so without parental consent. He went so far as to assert that the belief parental consent is necessary is a dangerous “misconception” (p. 89). The majority of children who live with an alcoholic parent do not receive any outside support or help. In one study, one out of 32 children did not receive any type of psychological help and maintained that “the social security system seemed to regard the placement outside the family as solving the problem” (Christensen, 1997, p. 31). There was little consideration that children may suffer from long term emotional and mental damages as a result of living in these households. In the context of this study, it becomes necessary to consider the fact that children spend the preponderance of their time in school, and if we do not find ways to help these children, most of them will fail to find help elsewhere and will grow up with the odds stacked against them.

While the amount of research being done on adolescent children of alcoholics is growing, there is still minimal research available on children in middle childhood between the ages of seven and nine. Tinnfält et al. (2018) found that children in this age group suffer from an overwhelming sense of responsibility for their alcoholic parent and an overpowering “feeling of sadness” (p. 537). As a result of a feeling of helplessness over their home life, they frequently try to control situations more than their peers. Interestingly, these children shared frequent stories of good experiences with their alcoholic parents in their interviews despite harsh living conditions. This is a noteworthy revelation because it shows a desire for normalcy and familial bonding that many children of alcoholics do not regularly experience growing up.

In addition to understanding the lived childhood experiences of children of alcoholics, it is also important to have a clear understanding of what challenges they face in adulthood. Hall et al. (1994) looked at adjustment issues faced by adult children of alcoholics and discovered that they had overall lower life satisfaction, a lower locus of control, a higher sense of negativity, and expressed more difficulty in social situations and relationships. Haverfield and Theiss (2014) analyzed themes discussed by self-identifying children of alcoholics in an online support forum and identified seven themes commonly brought up including the “interference of parent in adulthood” (p. 117) the need to re-parent, low self-esteem, insecurity, resentment and problems with adult relationships and communication. A closer look at these themes demonstrates that many adult children of alcoholics struggle with situations that involve managing their emotions. When developing an intervention program for children of alcoholics in school, these themes help us understand that emotional regulation is an important area to focus on.

Consequences of an Alcoholic Home

Mentally, children of alcoholics are at a greater risk of suffering from depression, anxiety, low self-esteem, lack of motivation, and are more likely to become alcoholics themselves; perpetuating the generational curse of alcoholism. In a study comparing the cognitive functioning of children of alcoholics and non-alcoholics, Johnson and Rolf found that self-perceived cognitive abilities of children of alcoholics was generally negative and severely underestimated, which “may have some effect on motivation, self-esteem, and future performance” (1988, p. 354). These researchers also found that the alcoholic mothers of these children had lower perceived expectations of their own children’s abilities, which could play a significant role in student performance (Johnson & Rolf, 1988). The isolated life often experienced by children of alcoholics whose parents are the center of attention and whose households are characterized by “tension and insecurity”, with the simplest request having the potential to “trigger a family maelstrom” (Woodside, 1988, p. 645-646). In an exploratory study of alcoholic fathers, Thomas (2012) expounded on the garbled and unpredictable life lived by these children whose parents could be affectionate one second and angry and abusive the next, resulting in negative psychosocial and psychological adjustments including “guilt, embarrassment, confusion, anger, depression, poor peer relationships, school problems, and health problems (p. 64). Despite parents generally having right-minded intentions and attempting to do the best they can to care and love for their children, the negative effects alcohol can have on someone’s ability to parent in a nurturing way can be detrimental to a child’s perception of self and in many cases can enter the realm of being both traumatic and neglectful.

Parent and child bonding early in life has long been accepted as important for social and emotional development in children. In children of alcoholics, a lack of parental involvement and

support has shown to result in low self-esteem, a lack of motivation, depression, and a myriad of other issues (Hall et al., 1994; Cosci et al., 2018; Park & Schepp, 2014; Mangiavacchia & Piccoli, 2017; Post & Robinson, 1998). When interviewed, many children of alcoholics expressed the desire to participate in simple family bonding. Strong parental support can be a contributing factor to success and resilience in adulthood and particularly important for combatting the vulnerability of children of alcoholics (Lakshamma & Kalavati, 2018).

This susceptible group of children also struggle to manage their responsibilities and experience significantly more negative life events than children that do not grow up with an alcoholic parent and often experience a feeling of being “stuck” and unable to change their living situation, even once they are on their own and no longer reliant on the alcoholic parent. Peleg-Oren (2002) demonstrated that children of alcoholics suffer from a greater risk of developing emotional, social, cognitive, and behavioral problems and are more likely to become alcoholics themselves, which can contribute to an increase of negative life experiences. Roose et al. (1993) looked at the effects of mental health on children caused by family stress mediated by a problem drinking parent and found a correlation between “parent problem drinking and negative life events” (p. 115) which possibly caused mental health problems like depression and other factors later on in life. Iacopetti et al. (2018) found an increase in the number of negative life events experienced by children of alcoholic parents compared to children of non-alcoholic parents, and observed that children living with an alcoholic caregiver had less coping strategies and resilience in adulthood than their counterparts. These researchers noted that children who grew up with at least one parent who harmfully consumed alcohol would often have difficulty managing their lives and felt “unable to change or improve” their surroundings and exhibited a “poor sense of control” (p. 161). Having one problem drinking parent has also been shown to be negatively

associated with fewer years of educational attainment, resulting in access to fewer opportunities and resources later in life (Mangiavacchi & Piccoli, 2016, p. 144). Growing up with a parent who harmfully consumes alcohol puts these children in the category of being more at risk to fail academically and face more challenges and problems in adulthood.

Resilience

One area of research that is gaining increased traction as a resource for understanding how to help children of alcoholics is the phenomenon of the development of resilience in some adults despite their difficult living conditions during childhood. In the face of the overwhelming odds associated with living with a problem drinking parent, a significant number of children grow up to be well adapted and competent individuals notwithstanding living in harsh and discordant environments (Carle & Chassin, 2004). Identifying and encouraging these behaviors “may lead to increased emotional adjustment and decreased internalizing symptomatology, providing clinicians a route to combat the effects of children’s negative life experiences” (p. 578). Werner and Johnson (2004) and Hall (2007) both examined various factors that contribute to resilience in these children and found positive adult influences and kinship ties to be some of the most influential ingredients in the development of a resilient adult. In a qualitative study that interviewed over 50 adult children of alcoholics, researchers found competent adult children of alcoholics relied on “a significantly larger number or sources of support in their childhood” than non-resilient children and that they viewed a “good life” by its measurement of “in-tangibles” rather than “tangibles” (Moe et al., 2007, p. 392). The establishment of an understanding of the specific factors that contribute to resilience will help researchers better understand how to intervene and help children early on.

Identifying and providing support for children of alcoholics in early childhood (pre-adolescence) can help explain why some adult children of alcoholics exhibited resilience to the negative consequences experienced by so many others that grow up in the same situation. (O'Rourke, 1990; Palmer, 1997). "The group format discourages social isolation, fosters sound peer relationships, and affords youngsters an immediate sense of belonging" (O'Rourke, 1990, p. 110) and can have a positive impact in minimizing the harmful consequences of growing up with an alcoholic parent. Having positive adult influences to talk to during childhood can help explain the toughness of character and resistance to negative effects seen in some adult children of alcoholics.

Though the amount of research conducted on resilience in adult children of alcoholics has not been extensive, it has been significant in providing insight as to why some adults exhibit better adaptability and do not suffer from as many social and emotional consequences as other adult children of alcoholics. Walker and Lee (1988) discussed the importance of looking at positive influences rather than focusing on negative effects, "Therapists and clients should refrain from looking at children of alcoholics through a deficit framework and instead should look for evidence of relational resilience" (p. 521). Moe et al. (2007) identified three paths that can be used to help children build resilience. They mentioned helping children by "providing a venue in which to express their feelings, we can educate them, and we can show them that there are other ways to live" (p. 391). Early identification of children of alcoholics and intervention and prevention programs can help encourage healthier outcomes of adult children of alcoholics. Iacopetti et al. (2018) studied resilience in adult children of alcoholics and found coping skills to be a major factor in successful adulthood. Park and Schepp (2014), also examined the adaptability of children growing up with an alcoholic parent and provided insights and

understanding into what changes these children go through psychologically. Identifying these children early and having a better understanding of what they go through can help researchers better understand the best ways to provide early support and intervention for these at-risk children.

Positive family and community influence outside of the alcoholic parent can have a positive effect on student outcomes. Good role models and the presence of a favorable adult in a child's life may provide a cushion that could help develop resilience in adulthood by increasing self-esteem, adaptability to situations, and positive social emotional development (Davis et al., 1985; Hall, 2007; O'Rourke, 1990; Walker & Lee, 1998; Werner & Johnson, 2004). In two parent households when only one parent is a heavy drinker, the non-alcoholic parent may be able to "provide the warmth, cohesion, and consistency needed to buffer the impulsive and disinhibited behavior" of the alcoholic parent (Godleski, 2018, p. 84). Because of the variability of family environments and the undoubted adaptation undergone by their children, Mulry (1993) recommended further research that compares different factors including the family environment, social environment, and sibling relationships to find contributing ingredients to resilience in adulthood. Noddings (2013) described in detail the importance of "caring education" and the impact that feeling "cared for" by a teacher can have on a student's moral outcome (pg. 175). Understanding the common experiences shared by children of alcoholics is essential to understanding what factors may contribute to resilience or non-resilience in adulthood and can help researchers better understand the best ways to support children early on so they can overcome the all too common consequences of their vulnerable situations.

The research into the development of resilience in adult children of alcoholics is focused on understanding why some adults cope effectively with the traumatic childhood of growing up

in an alcoholic household and others do not. Werner and Johnson found that those adult children of alcoholics who became competent adults “relied on a significantly larger number of supports in their childhood and youth than did the offspring of alcoholics with coping problems” (2004, p. 700). If the critical care-taker bond is not present in the alcoholic home, then resilient children will often seek out an external caregiver outside of the immediate family such as an elderly member of the family, teacher, or other trusted adult (Mulry, 1993). The behavioral characteristics that differentiated adult children of alcoholics that successfully developed coping mechanisms in childhood with those that did not and found several distinguishing characteristics Werner (1986). She found that more resilient children generally sought out positive attention from alternative caretakers or adults, were goal oriented, responsible, and had a strong affirmation for self-help. These studies highlight the importance of caregivers and positive role models in the emotional development of children.

Certain cultural factors could also play a role in the development of resilience for some children of alcoholics. A mixed methods research study by Hall (2007) looked at the importance of kinship ties in African American adult children of alcoholics and found that the successful and resilient children relied heavily on extended family members for support and developed more positive responses to stressful situations. Understanding these coping strategies are significant because they could help create barriers to minimize the negative effects of parental heavy drinking on children’s self-esteem and confidence at an early age. She mentions that “the kin network is also a protective factor known to promote resilience in at risk populations” (p. 74). In the school setting, fostering a “community of kinship” is necessary to create a “long-lasting, relevant, and meaningful change” to help at-risk students in the 20th century (Parr & Richardson, 2006, p. 101). Understanding the factors that contribute to resilience in one way or another is

essential to understanding how best to help children of alcoholics before they develop these problems.

The need to help children of alcoholics develop resilience in adulthood is clearly there. On the other hand, figuring out the best ways to help these children is challenging. The circumstances that may impede the development of things such as depression, low self-esteem, and other emotional regulation issues are vague and difficult to pinpoint. Fortunately, researchers have been looking more and more at the development of resilience and trying to understand why “some are susceptible (and some are not) for developing shame-based psychopathology” (Hawkins, 1997, p. 228) associated with being an adult child of an alcoholic. Ackerman (1987) conducted a study of over 1000 adult children of alcoholics in which he examined the differences between siblings of alcoholics that grew up in the same household and discovered that many siblings view their childhood experiences differently. Finn et al. (1990) examined the prevalence of depression and related disorders in families with a multigenerational presence of alcoholism and found that the presence of depression and related disorders may be preexisting to the presence of alcohol. However, Hawkins’ study (1997) provided evidence supporting the hypothesis that interrupting the negative family rituals often associated with a family drinking parent may influence the development of these issues in adulthood. This could mean that outside factors that interrupt the regular negative patterns generally observed in households with alcoholism could play a part in the development of resilience. Regardless, early identification and the development of support for children that face a higher risk of developing emotional disorders later in life is valuable and necessary.

Lack of Resources and Need for Support

Understanding the type of trauma children of alcoholics go through and the potential consequences is not meaningful on its own without also providing ways to identify, prevent, and support these children so that they can beat the odds and experience more satisfaction, happiness, and success later in life. Many teachers agree that identifying and supporting these students is a necessary “job-related responsibility and viewed parental alcoholism as a matter to be openly addressed” (Knight et al., 1992, p. 370). Despite their willingness to help these children, most resources are intended for school counselors and are not readily available or accessible to classroom teachers and fall under the larger umbrella of at-risk students; there are limited resources available that focus on children of alcoholics. (Parr & Richardson, 2006). Helping and identifying children of alcoholics at an early age is a necessary and crucial step in helping these children “understand and cope with their familial problems” (Newlon & Furrow, 1986, p. 291) and can be a significant step in helping to prevent problems later in life. It is important for researchers to look at meaningful and effective examples of treatment for children of alcoholics so that more resources can be made available and applicable for classroom teachers.

Intervention and Support

Despite the increased risks faced by children of alcoholics, these children are often overlooked by the adults in their lives and need outside support. A quantitative comparative research study conducted by Omkarappa and Rentalala (2019) affirmed previous studies by demonstrating that children of alcoholics are more likely to suffer from mental health problems later in life, exhibit lower self-esteem, more anxiety, and are more likely to be depressed and point out that “these problems will go unnoticed by parents and teachers” indicating a need for early identification and support (p. 607-608). These research studies have demonstrated how

many negative life events are indirectly connected to a harmfully drinking parent through unstable and inconsistent discipline and parental involvement (Roose et al., 2019). Early intervention that focuses on providing students with ways to fill the gaps created by this inconsistent parenting can help increase their chances of success, motivation, and resilience in adulthood.

All children deserve to be cared for and taken care of. Unfortunately, many children of alcoholics feel alone, are alone, and painfully go unnoticed or are deemed lost and helpless by teachers and other members of the community (Lakshamma & Kalavati, 2018). Because of the embarrassing and shameful stigma often associated with alcoholism, “family members will work hard to cover this reality” (Lakshamma & Kalavati, 2018, p. 37) and children are regularly afraid to ask for help because they fear consequences or judgment from community members who learn about their parent’s drinking problems (Owen et al., 1985). As a result of this shame, they often work hard to pretend things are normal and happy at home (Cork, 1969; Tinnfält et al., 2018). A key goal of any intervention and support program for young children of alcoholics should be to remove the disgrace and judgement associated with alcohol and to educate children about the disease, showing them that their situation is not their fault and providing a safe space for them to share their thoughts and feelings.

Historically there has been minimal support intended specifically for children of alcoholics. However, there has been an increase of group support in the form of family therapy with the expanding acknowledgement that the families of the alcoholic are also in need of treatment and help. Traditionally, most support available to these children has been in the form of group and family therapy and many programs have shown prominent success. Lakshamma and Kalavati (2018) recommended teaching the “Seven Cs” (p. 40) to help children of alcoholics

subdue their feelings of guilt and teach children that they are not responsible for their parent's choice to consume alcohol or their actions. The Seven C's help to teach children of alcoholics that they did not **cause** the alcoholism, they cannot **cure** or **control** it, they can take **care** of themselves, make healthy **choices**, **communicate** their feelings and **celebrate** themselves (Lakshamma & Kalavatie, 2018, p. 40). Education in schools centered around boosting self-esteem, confidence, and social/emotional skills such as those taught using the Seven Cs tool would be beneficial to not just children of alcoholics, but all youth at risk of developing depression related disorders.

Further examination of current research also supports the need to provide services for the whole family while simultaneously providing targeted intervention for children of alcoholics rather than just the alcoholic parent themselves. Woodside (1998) described the importance of screening questionnaires that ask about family alcoholism and the importance of helping young children of alcoholics both accept and understand the nature of alcoholism. Thomas (2012) stressed the seriousness of identifying and providing assistance for children in alcoholic households by explaining that support and treatment is often centered around the alcoholic and not the family, despite the ability of alcoholism to reach far beyond the alcoholic. It is recommended that children be provided with early information about the effects of alcohol, as well as "help in developing an increased sense of responsibility for their own success," self-recognition of personal strengths, and the importance of cooperation and helping society (p. 67). It is important to understand the early childhood psychological effects of growing up in an alcoholic household in order to develop an in-depth understanding of the struggles these students may face in school and in life that will inhibit their success. Understanding how these students

think and feel is essential to educators identifying these students and providing them with support.

Research recommends a need for early identification and support for children who live in alcoholic households. Barnard and McKegany's (2002) showed that despite support for parents that suffered from addiction, children were still rarely the focus and center of that support and recommended a nurturing program that focused on the recovery of the entire family including home visits and therapeutic assistance. Other studies (Davis et al., 1985; Peleg-Oren, 2002; O'Rourke, 1990; Woodside, 1988) analyzed the effectiveness of group educational programs in early childhood that could help students understand that they are not responsible for their parent's actions and that they are "a person of worth that needs and deserves help" (Davis et al., 1985, p. 360). The earlier intervention and support can be provided, the greater the chances for these children to grow up to live meaningful lives.

Effective support for children of alcoholics will focus on helping them minimize their denial, develop self-acceptance of their problem, and foster an understanding of alcoholism as an illness so that they do not feel responsible for their situation. Woodside (1988) described how these children feel "unwanted, unloved, unimportant and invisible" and develop a "persistent inability to cope with life's problems, seek or accept help, trust others, and foster satisfying intimate relationships" (p. 646). Thomas (2012) further supported the education of youth about alcoholism through interventions and suggested that counseling should include information about the effects of over consumption of alcohol, assistance for children of alcoholics in the development of an increased sense of obligation, encourage belief in their ability to develop their own success in life, and the development of self-esteem by recognizing good qualities, accomplishments, and strengths. Children who attended group therapy were given an instant

sense of belonging (O'Rourke, 1990) and learned that they are not facing their situation alone. Lacy (2015) examined narratives of children of alcoholics and demonstrated how this literature offers "models for identity and models of courage" and shows that "children have agency" in their lives (p. 356). Group therapy provides children a way to share their feelings that they are not always able to do at home and helps reduce isolation and provide a safe environment for children to develop coping skills necessary to become competent adults (Owen et al., 1985). Group therapy and education about the effects of alcoholism can help students develop a sense of ownership and strength regarding their situation and provide a feeling of hope.

There have been a few examples of group therapy that have demonstrated positive outcomes in their attempt to provide support for children of alcoholics. In one study, Rosenbaum (1992) combined "individual and group counseling, drug and alcohol education, and family intervention" (p. 34) as well as teacher education in recognition of problems associated with parental alcoholism. Children that participated in the study developed confidence and kinships within the group setting and parental involvement also increased. Davis et al. (1985) posited that alcohol education presented by teachers in a non-intimidating and destigmatizing way could be an important first step in helping students feel comfortable and more open-minded. Peleg-Oren (2002) found the group setting to be highly effective in compensating for the gap in the parent-child relationship by serving as a "good enough mother" (p. 256) for the participants. Divento and Saxena (2017) conducted a successful group for adult children of alcoholics on a college campus that could provide an example of strategies for adolescents, but the strategy's application to younger children would have to be explored further. Lambie and Sias (2004) presented implications for school counselors with information that could possibly be presented to educators as well. They outlined indicators to help identify potential children of alcoholics and

recommendations to be used by counselors in the school setting. Their recommendations include increasing education about substance abuse in the school setting, the need for counselors and educators to be available and supportive listeners to these children, and providing referral services for families and children. Looking at current counseling methods shown to be effective in helping students with alcoholic parents can help researchers develop resources that can also be used by teachers and educators.

Conclusion

This literature review closely examined the lived experiences of children and adult children of alcoholics. The mental challenges faced by adult children of alcoholics, including anxiety, depression, and low self-esteem (Cork, 1969) as well as the lack of psychological help provided to these children, (Christensen, 1997) and their attempts to try and create a sense of normalcy in their homes despite harsh environments (Tinnfält et al., 2018) were discussed. Haverfield and Theiss (2014) analyzed seven common themes identified as struggles by adult children of alcoholics. Emotional, social, cognitive, behavioral and mental health consequences in children of alcoholic parents were also examined (Peleg-Oren, 2002; Roose et al., 1993). Surveying the literature demonstrated that despite overwhelming odds associated with living with a problem drinking parent, a significant number of children grow up to be well adapted adults (Carle & Chassin, 2004). A closer look at the factors that contribute to resilience highlights the significance of positive adult role models (Davis et al., 1985; Hall, 2007; O'Rourke, 1990; Walker & Lee, 1998; Werner & Johnson, 2004;) Finally, this literature review identified both the need for intervention and support (Parr & Richardson, 2006) as well as possible methods of support that have already been examined and tried. One of the most

effective forms of intervention discussed in the literature was various forms of group support (Davis et al. year; Peleg-Oren, 2002; O'Rourke, 1990; Woodside, 1988).

This review of the literature has shown that despite the risks faced by many children of alcoholics, there are a limited number of resources available to students (and their teachers) in the school setting. As educators, we are neglecting our responsibilities if we fail to meet all needs of students, including support for their social and emotional requirements. Children spend most of their time at school and with their teachers, so it only makes sense that help for these issues should be readily available and provided in the school setting. Providing students with academic content is futile if we do not provide them with the tools they need to effectively absorb and apply the academic content they are taught in schools. Students who have to go home and deal with the struggles of an alcoholic home need care, love, support, and strategies for future success. By looking at the literature, we can see that there are detrimental and long term consequences that can result from living with an alcoholic parent, but there is a gap in the literature for effective strategies and tools that classroom teachers and school personnel can use to help them both identify and support these children. By looking at the lived experiences of such adults and factors that contribute to their resilience, we can hopefully narrow our focus to strategies that can effectively help them be successful adults. The case study presented in the following chapters examine the lived experiences of adult children of alcoholics in order to provide schools, educators, and counselors with effective methods of support for these children so that their success in life can be maximized instead of becoming a repetition of history.

CHAPTER 3

SOLUTION AND METHOD

Introduction

The purpose of this multiple case study was to facilitate a better understanding of how teachers and school personnel can provide support for children in the classroom who are simultaneously dealing with various traumas as a result of living with at least one alcoholically dependent parent at home. My purpose in this record of study was to identify factors in childhood that may contribute to the development of resilience in adulthood in order to better provide support and help for children of alcoholic households. Through semi-structured interview sessions, I looked for common themes and factors that were experienced in childhood that may have influenced various parts of adulthood. With the identification of these common factors, I gained knowledge of what we can provide children currently living in these adverse situations so that they do not succumb to the fragility and vulnerability that so many children of alcoholics experience.

The adults whom I talked to were children, who grew up in neglectful and abusive situations as a result of parental and household alcoholism, who defied probable statistics and now exhibit signs of resilience as adults or are currently working towards becoming more resilient. Several of the participants interviewed still exhibited many emotional and mental challenges associated with growing up with an alcoholically abusive parent. The insight gained from the interviews highlighted what many of these adult children of alcoholics were missing in their lives and what (from their lived experiences and perspectives) they wished they had had as a child so that they could have had less of these struggles as an adult. With the information provided from their interviews, I have a better understanding of the needs of children in these

neglectful homes and what we can provide them with so that they can develop their own resilience to these circumstances and become more successful in school as well as happy and fruitful in their adult lives.

Outline of Solution

Voluntary participants of the study were identified through convenience sampling through both word of mouth and the attendance of local and online support groups for adult children and families of alcoholics. My personal experience as an adult child of an alcoholic has exposed me to various types of individuals through day-to-day conversation and experience, in person, and online support groups. Most support groups for these types of individuals do not typically allow solicitation of any type, so special requests were made to individual members of the group outside of the organization through word of mouth. Six individuals who met the criteria as identifying as an adult child of an alcoholic participated in a series of semi-structured and open-ended interviews.

Through these semi-structured and open-ended interviews, I investigated and learned about the lived childhood experiences of adult children of alcoholics. With the analysis of the data collected, I identified factors unique to the participants' experiences that might have contributed to their adulthood resilience (or lack thereof). Once common themes and factors were identified, I used the information gathered to develop a plan of support for children who currently live within alcoholic households to help them become more successful and resilient adults. As I identified what experiences were different for resilient adults, I was able to identify effective ways to provide support for struggling children that may be missing out on these essential and beneficial experiences.

Justification of Proposed Solution

Statistically, children of alcoholically abusive households are more likely to struggle academically and face more anxiety, depression, and low self-esteem (Omkarappa & Rentala, 2019). These problems have been shown to follow them into their adult lives and contribute to a lower quality of life. While we may not be able to change what goes on in a child's home, knowledge of the gaps these negative homelives are creating and how we can fill them can drastically change the trajectory of their lives. As educators we can implement all of the best teaching practices research has to offer, but none of these will make an impact for a child who is not able to receive the information because of emotional and social gaps caused by an alcoholically abusive home life. By providing these children with early intervention early on, more of these students will be able to have academic and lifelong success.

Study Context

I conducted this research through several semi-structured interviews. I interviewed six self-identified adult children of alcoholics. I recruited the participants through my online search and in person at my support groups in Dallas, TX. My membership and participation in these groups helped contribute to the identification of appropriate participants. Participants met a pre-chosen criteria by self identifying as an adult child of an alcoholic.

Research Design

The design of the present study was a multiple case study utilizing a constructivist epistemology (Creswell, 2017). The case under investigation was the lived experiences of adult children of alcoholics' and their acknowledgement of how their experiences shaped their reality. By looking at the unique lived experiences of adults who have faced a similar problem to the

children I am trying to help, I was able to learn from their experiences and make decisions about how to help those in similar circumstances within the parameters of an educational setting.

Data Collection Method

Data collection took place over several months. I conducted semi-structured interviews with each participant on several different occasions (Creswell, 2017). These interviews were conducted one on one. I designed a semi-structured interview protocol comprising fourteen open-ended questions along with several emerging questions (Stake, 2005) based on each participant's response (see Interview Questions below). The interviews were conducted with individual participants in their chosen environment. The conversations were audio recorded and were between 20 minutes and 1 hour 40 minutes in length. Four of the participants were interviewed in person in their chosen environment and two participants opted to conduct their interview virtually via Zoom. All interview questions were open-ended and allowed for individuals to share the uniqueness of their lived experiences. Emerging questions were asked based on the conversations had with the interviewees and their individual responses to the open-ended questions (Creswell, 2017). These interviews and conversations helped me understand the participants' lived experiences in more detail. In the semi-structured interview protocol the following questions were asked. These questions can also be found in Appendix B.

Section 1: Childhood experience outside of school

3. What makes you identify as an adult child of an alcoholic?
4. Can you share some of the challenges you and your family faced regarding your parent's alcoholism?
5. What are some important memories from your childhood?

Section 2: School experiences

6. Can you reflect on your attitude towards school as a child? Did you like school? Why or why not?
7. What are some positive memories you have from elementary school? Negative?
8. Can you tell me about a memorable teacher that had an impact on you?
9. Did you feel noticed or cared about by your teachers growing up? Why or why not?
10. Did your school provide any type of resources, support, or education for dealing with stressful situations?
11. What is something you wish your teachers or school had done more of?

Section 3: Adult life and impact

12. What are some things that happened in school as a child that you think has had an impact on you as an adult?
13. What long lasting effects do you think your parent's alcoholism has had on your adult life?
14. What accomplishments as an adult are you proud of? What do you think may have contributed to this success?
15. How do you typically handle and respond to stressful situations as an adult?

Participants and Their Selection

Participants were purposefully selected based on their experiences as children of alcoholics (Creswell, 2017). I recruited my study participants in person at the support groups meetings in Dallas, TX. My membership and participation in the support groups helped to contribute to the identification of appropriate participants. In my participant selection, I employed convenience, purposeful, and snowball sampling strategies (Creswell, 2017). I invited

the individuals whom I already knew and who were convenient for me to reach. I purposefully invited individuals who self identified as adult children of alcoholics and involved in their own recovery and self help. I asked my recruited participants to provide me the names of other individuals whom they knew were suitable for my study and willing to participate voluntarily. When I invited the study participants, I informed them that their participation was voluntary and they were not receiving any incentive. All participants volunteered.

Data Analysis Strategy

The interview sessions were audio recorded and transcribed verbatim (Creswell, 2017). I then merged my notes from the interviews with the transcriptions. I employed constant comparative methods (Corbin & Strauss, 1990) to analyze the transcriptions. In my analyses, I applied open, axial, and selective coding strategies (Corbin & Strauss, 1990). I read the transcriptions a minimum of three times each during which I generated codes, categories, and main themes. As needed, I contacted the participants to ask additional and clarifying questions to better understand the participants' lived experiences. These multiple meetings helped to saturate my data collection efforts. (Mason, 2010).

Because this is a multiple case study (Creswell, 2017; Stake, 2005), I first performed within case analyses and analyzed each interview individually. After completing the within case analysis, I performed the cross- case analyses in which I compared and contrasted the cases with one another. In chapter four, I reported on the commonalities among the cases and also the unique differences or interesting findings. Finally, I compared each of the individual experiences with one another and with my own personal experience as an adult child of an alcoholic and presented these data analyses in Chapter Four.

Limitations

This case study had some limitations. I shared a personal connection with the unit of analyses under investigation, that was, the lived experiences of adult children whose parents abused alcohol. Researcher is considered as instrumental in qualitative research (Creswell, 2017). My own lived experiences might have influenced the interpretation of the data. Another researcher whose lived experiences are substantially different from my experiences may generate different findings.

An additional limitation of the case study revolves around the sensitivity of the subject matter being shared by participants. Without a relationship being established between the researcher and interviewees, the participants may be reluctant to share their personal experiences, so the data shared may be skewed. Participants reflected on their experiences during childhood, which means that participants may unknowingly share incorrect information regarding their personal histories or may have difficulty remembering accurately.

Reliability and Validity Concerns

The researcher had a personal connection to the subject matter and her participation could have been influenced by her own individual experiences. In order to help mitigate the researcher bias, a predefined coding system was used to look for specific words and phrases mentioned by participants related to the subject matter. By having a set of semi-structured interview questions prepared ahead of time, the conversations maintained their focus. During the interview, the researcher participated as little as possible in the direction of the conversation and allowed the participant to share the thoughts that occurred to them with minimal influence from the researcher. While interviewing, I kept detailed notes including paying attention to any personal feelings and thoughts of connection I had to the participants' story.

Another concern regarding the validity of the data collected during interviews was the amount of time that had passed since the participants had lived the experiences they were sharing. It is impossible to assume that the memories they shared were entirely accurate or they were without flaws. However, the way that we remember things from our childhood and the realities we perceive for ourselves (regardless of inaccuracies) can play an important role in our present self and are still valuable data. The perceived realities of children need to be taken into consideration when developing ways to help and support them.

The interpretation of results was highly subjective. The definition of a resilient adult was subjective and could have had multiple definitions.

Closing Thoughts

There have been many quantitative studies on the negative effects of living and growing up with an alcoholically abusive parent and the negative consequences faced by children living in these environments (Cosci et al., 2018; Hall et al., 1994; Johnson & Rolf, 1988; Mangiavacchia & Piccoli, 2017; Park & Schepp, 2014; Post & Robinson, 1998; Thomas, 2012; Woodside, 1988). However, fewer studies look at the factors that contribute to children overcoming the odds and surviving these environments to become successful, resilient adults. The purpose of this record of study was to understand not just the experiences these children went through, but the experiences that helped some become successful while others did not. Interviews that allow participants to share their story is the best way to gain a personal understanding of this unique circumstance. With this knowledge I have learned to better understand how to help other children in the same situation.

CHAPTER 4

FINDINGS

Analysis and Presentation of the Data

The results from the case study analysis presented in this chapter provide guidance, insight, and understanding about individuals who grew up in those homes and make evidence-based assumptions on how best to support students living in similar circumstances.

A cross case analysis was selected as the research methodology to provide a detailed account of the real lived experiences of several of these individuals. Due to the sensitive topic and individual nature of each case study, I acted as the sole researcher and manually transcribed, coded, and organized the data throughout multiple stages of analysis. The research coding methods used were based on Creswell's (2017) phenomenological based approaches to understanding human experiences. After recording each interview, I manually transcribed my interaction with each participant and read each transcription multiple times. I examined each case individually and then conducted a cross comparison looking for similar feelings, thoughts, and responses as well as significant differences held by each participant. In other words, I first conducted with-in case analyses and then cross-case analyses (Creswell, 2017). I used a data analysis table to analyze common descriptors and place these descriptors into larger common concepts and themes based on their connection to the research questions. This table allowed me to examine data horizontally and examine commonalities and differences. I then looked for patterns to make my own research-based deductions and assertions based on the collected data. Finally, I compared the whole of the experiences to my own experience as the researcher and made connections to the themes that emerged from my previous analysis.

In the following pages, I provide a narrative summary of each participant's within case study with the inclusion of significant quotes providing context and connection to the research questions. Each summary begins with an outline of the participants' home lives during early and middle childhood, then moves to their attitude and experiences in school, and concludes with a reflection about how they feel they have been affected as an adult and what they wish their teachers or school had done more of. After the narrative summaries for each participant, that is, the findings from the within case analyses, I examine the findings of the research in more detail, that is called the cross analyses.

Participant 1

At the time of the interview, Participant 1 was a 38-year old white male who resided in the city in the Southwestern US. He was currently unmarried, had no children, and lived alone. He worked in the music industry and made a successful, middle-class income. Participant 1 grew up with an alcoholic father. The entire household suffered regular emotional and verbal abuse. He described the household as having routine “verbal altercations, slamming doors, and broken dishes.” Participant 1 shared that during his childhood he was in a constant state of anxiety from never knowing what type of mood his father would have been in from day to day. He described the entire household as living “on pins and needles,” all revolving around the mood of his father. There were many evenings when his father did not come home until 2 or 3 o'clock in the morning, and the participant would often stay awake with his worried mother awaiting his father's return.

One of the more significant topics that Participant 1 repeated throughout his interview was the emphasis on the family norm to “never speak” about a negative incident after it happened and to “never share” any sort of unfavorable emotion. He expressed wishing he had

learned that experiencing and sharing negative emotions were acceptable and they were part of the human experience. Instead, he grew up in a household in which showing those types of emotions were considered weak and were not acknowledged.

Upon discussing his school experience, Participant 1 had very little positive experiences to share and illustrated this by saying he “always hated school.” He did not find the experience conducive to how he liked to learn or interact with people and never felt cared about by any of his teachers. He described none of his teachers as memorable and felt none of them were ever aware (or at least never acknowledged) the stress he was experiencing at home. The most negative consequence of his childhood school experience was that it made him never want to go to college because of how negatively he felt about school.

Participant 1 shared that he became an alcoholic himself (but is currently 15 years sober), and was diagnosed with anxiety, depression, and obsessive-compulsive disorder early on. He always struggled to build relationships (both friendships and romantic partnerships) and has struggled with handling and responding to stressful situations his entire life. As a result, he developed several unhealthy coping mechanisms over the years including a food and sex dependency. He describes his current relationship with his parents as “decent but fractured” and explains that they still do not discuss anything negative or share emotions with one another, something he strongly wished they would have done.

Participant 1 had several strong opinions about things he wished his school had done more of and provided him as a part of his education as a result of his homelife experiences. He shared

I always thought it would be great if schools taught kids how to handle their emotions, how to deal with different emotions, and how to deal with problems in a healthy manner.

I know this is incumbent upon the parents, but I don't think a lot of parents even know how to do that. Looking at a vast majority of my friends, their parents certainly didn't either. I never knew it was okay to just be angry or sad. I don't think there could have been any type of intervention policy to stop me from drinking, but maybe if I had known how to deal with my emotions some things would have turned out differently.

He went on to explain that he thought substance abuse education was not nearly as important as learning how to deal with difficult emotions, problems, and challenges that one encounters throughout their life. Growing up in a family that did not acknowledge or discuss problems, he felt this was a key gap in his emotional development.

Participant 2

Participant 2 was a 36-year old Hispanic single mother of one child who resided in the north side of the same city in Southwest US. She worked as a claim adjuster and made a successful, middle- class income. Participant 2 grew up with an alcoholic single mother and the participant's twin brother. She described her childhood as unstable and her mother's behavior as unpredictable. Positive experiences from her childhood included her mother taking them on "random fun adventures," "making crafts," and being "jubilant and creative." Her mood swings were described by the participant as "very high and low." Negative experiences included basic needs not being met. Bills were often not paid, the heat was usually off (they lived in Chicago), and groceries were often not purchased. Participant 2 shared,

I needed support and positive encouragement, and to be pushed and challenged. And I didn't have that because I really didn't have her as a parent. The door was constantly rotating with different men, and they all did the parenting and the discipline. She just took a back seat and went along with whatever they wanted. She never stood up for us.

Participant 2 described a household in which her mother's emotional absence resulted in various partners that would physically and emotionally abuse her and her twin brother. Her mother would regularly watch the abuse happen and would fail to intervene or react. She said eventually her mother did start to feel guilty and would allow her to "host parties" at the house during which she would provide all of the children with alcohol to consume. She also described her mother as "mostly angry" and "always yelling" when she was not in one of her "extra happy" moods.

Participant 2 had a variety of experiences with her teachers and peers at school. She moved around multiple times and attended multiple schools in three different states. She described early elementary school as pleasant and then described the fourth and fifth grades as when things began to get challenging. Her grades slipped dramatically and by the fifth grade she decided she "hated" school. One significant incident that helped her develop this opinion of school were the required "daily reading logs" that parents were supposed to sign each night after reading together as a family. She became very angry and emotional describing how her mother would always forge her signatures and never actually read with her. This contributed to her becoming sullen and resentful towards the school experience.

In addition, she said she was often made fun of for wearing dirty and "cheap" clothing and was unable to participate in any event or field trip that required money. In the fifth grade she got into her first fight at school and from then on described her own behavior as "very disruptive and rebellious." In sixth and seventh grade she began skipping school and started experimenting with alcohol outside of her home.

My mom never asked us how school was going. She was always busy and angry. That's what elementary and middle school was. She was never involved. She never dropped us

off or picked us up. She had no idea what was going on in our lives. Quite frankly, nobody knew.

She eventually dropped out of school her sophomore year and began working multiple jobs. She moved out of her home at this point as well.

Participant 2 did have a few positive memories to share about her school experience that centered around specific teachers that meant things to her. Participant 2 described one teacher, by saying,

She seemed to know how to talk to us and be there for us. She could tell if we were having a bad day and would always acknowledge it. She would compliment us and encourage us and say that we were doing a good job. We felt like we could trust her. She was everyone's favorite teacher.

Her teachers described her as "standoffish" and she felt unliked and stereotyped as a "trouble maker."

When asked if she thought any of her teachers were ever aware or concerned about what was going on at home, Participant 2 said that "if they knew, they never let on or seemed concerned." She continued with "I'm sure there was a counselor at the school but I never saw them. I skipped school all the time and nobody ever asked me anything about what was going on."

Her childhood experiences had a significant impact on her adult life. The biggest impact being a mother herself and using her own mother as an "example of what not to do." She learned to rely solely on herself. She eventually befriended a girl whose mother treated her like a second daughter and convinced her to go back to school and graduate. She eventually graduated with honors and became determined to be the best mother possible to her son. She said her mother

was always angry and in a rush, so a focus of hers in her life now is slowing down and taking her time. Negatively, Participant 2 described battling alcoholic “issues” herself throughout her adolescence and adult life, alongside depression, anxiety, and the inability to have healthy relationships. She still regularly dealt with her mother, has had put her through rehab multiple times, and tried to shield her son from the “true character” of his grandmother. She wants him to experience having a grandmother but does not think it is emotionally safe for her son to be around her.

When asked what she was currently proud of she listed her adversity and her ability to keep going despite her guilt and insecurities regarding being a parent. Finally, she was proud of no longer feeling constantly angry. She described her response to stress as dramatically improved. She liked to assess solutions and steps in an analytical manner rather than emotionally reacting.

Finally, when discussing what she wishes her school or teachers had done more of, Participant 2 expressed that she would have loved more of a “school and home connection.” She did not like the compartmentalization of “this is your school life” and “this is your home life.” She wishes there was more acknowledgement of how “one affects the other” so you do not feel “so alone.

Participant 3

At the time of the interview, Participant 3 was a forty-year old, white, divorced, and single woman with no children. She worked as a CFO for a company making a successful six figure income. She grew up with an alcoholic mother who passed away from alcoholism at forty-seven. Participant 3 described enjoying the majority of her childhood and said that her mother

was a “kind and nice alcoholic”. She stated that there was never any violence, negativity, or drama.

“She was someone who always thought that we could be anything we wanted to be and that we were, you know, the most amazing children in the world. So she created this environment where you really did believe in yourself and so you know, you saw more possibilities than just closed doors.”

Participant 3’s childhood was not barren from negativity, however. Her parents divorced early on as a result of her mother’s alcoholism. Sleepovers were embarrassing and eventually not allowed because her mother would pass out and often fall off the bed. There were multiple occasions where she and a friend were left after school or late at the skating rink and never picked up, forced to walk home. This eventually led to her mother simply not being able to chaperone or assist in any evening activities.

Participant 3 also had an enjoyable school experience saying that she “loved school and always wanted to be the biggest achiever”. She attended a private school at which she thrived and participated in nearly every club and sport available. She seemed to get a lot of comfort out of her success and praise from teachers and developed the idea that...

“If I could just be the best kid, maybe things would be better. You know, like, if I got the best grades and didn’t cause trouble, that would make everything at home better, especially with my parents and everything.”

She felt very noticed and cared about by her teachers because “I felt like I was a student that they wanted in their class”. When describing a memorable teacher, she shared stories about a math teacher who would “really talk to me about anything and pushed me to be in an advanced math class. I don’t know, I just felt like she saw me a little bit more.”

Participant 3 did get the impression that at least some of her teachers and the school personnel were aware of her mother's alcohol abuse. Her mother did work at the school at one point and got in trouble for coming to the school drunk on multiple occasions. She was approached by the school principal at one point. But no teachers ever discussed anything with her or treated her in any way that felt different. She said her school (which was a Catholic private school) never taught students or had any type of curriculum related to dealing with emotions or stressful situations. We would "get talked to" if there were any altercations or drama, but nothing proactive ever occurred.

Participant 3 felt that her mother's alcoholism had an impact on her adult life. It made her extremely sensitive to alcohol and drinking and said she was "obsessive" about it at one point. As a result, she stopped drinking completely. She never had any type of alcohol dependency herself. This affected many social interactions and friendships for her because people were not understanding of her extreme sensitivity to the matter. She underwent an extreme depression in her mid 30s and was very unhappy with her work and marriage at the time. She eventually worked on assessing her priorities and making changes to her life in order to end her depression. This included building new relationships and friendships and making decisions that involved putting herself first, rather than pleasing everyone else.

Participant 3 listed her school and academic accomplishments as something she was very proud of. She was the valedictorian of her class, has multiple degrees including the completion of law school, and had a lucrative career.

"I made decisions toward my academics as opposed to socializing and partying and hanging out. I am proud of finally figuring out who I am and what matters to me. It took me a little while, but I feel like I finally got there."

In responding to stressful situations, Participant 3 would often turn to candy and sugar. She would also ruminate on different scenarios and would think about every possible solution or outcome before responding. This would sometimes also take the form of “freezing up”. Her healthy responses include exercising, walking, and spending time with her dog.

Finally, Participant 3 said she would not change or add anything to her school experience growing up and did not feel like she wished her school or teachers had done more of anything. She felt supported and successful at school and that it was conducive to how she learned and socialized.

Participant 4

At the time of this interview, Participant 4 was a white, single mother of 3 children who worked as a manager at a real estate company making a successful middle-class salary. Participant 4 did not have a lot of positive memories to share about her childhood. She grew up with her stepdad and alcoholic mother.

“Everything that ever happened, whether it was to me, my sister, or my stepdad, it was always about my mom. The entire house revolved around her. She was always angry and things were never good enough for her. I remember projects at school, we were never allowed to do them because she wanted them to be perfect. Then she would be angry at us for staying up all night working on them.”

Her mother was constantly drinking, constantly upset, and Participant 4 has no recollection of ever being told “I love you” by her mother. Her only positive memories were spent traveling and away from home with her biological father who did his best to be present for “every major event”.

Participant 4 also had a negative attitude towards school. She vaguely remembers enjoying the first couple years of elementary school but claims things just went downhill from there. Due to her mother's high expectations and her personal academic struggles, she never felt like she met expectations. She did, however, feel cared about by most of her teachers. One particular teacher would always "meet you where you were" and who "just took an interest in what I had to say". It was okay to have a differing opinion or to say a wrong answer.

She eventually began babysitting for a teacher who became one of her biggest role models. "Her house was a second home to me. There was never any judgement from her heart. I still have a relationship with her today."

She felt strongly that her teachers were aware of her mother's alcohol dependency and her stress outside of school. She was certain that her mother's attitude, condescension, and body language gave her away frequently. Nobody ever asked how she was doing it or acknowledged it, however, except for the previously mentioned teacher.

Participant 4 had a lot to say about things she wished her school and teachers had done more of:

"I wish they had talked to us more about real life. We had no real concept of what we would really need in life. They just assumed everyone would go off to college and be fine. But in reality a lot of us had no idea how to survive, how to budget, or even how to get an apartment. We should have had more real-life conversations instead of pretending everything was just fine and dandy".

As an adult, Participant 4's childhood impacted her in several ways. She struggled to develop relationships with friends and romantic partners. She sought out people with alcoholic dependencies and often tried to fix their problems. She also struggled with her own parenting and

would frequently yell at her children and treat them “the same way she used to handle us”. It was one of her children’s teachers, in fact, that told her “they will still hear you if you don’t yell at them. They will still hear what you have to say.” That had a huge impact on how she approached her children and she has recently started going to therapy to work further on these issues.

Handling stress of all types continued to be an issue for Participant 4. She would get very anxious and completely shut down and freeze when difficult things happen. She reacted based on her emotions and often cried uncontrollably. Participant 4 said during her interview that she continues to struggle every day, but that things are slowly getting better.

Participant 5

Participant 5 was a 31-year-old African American married mother of two. She worked a successful career as an OBGYN nurse. She recalled her childhood experiences as being overwhelmingly negative, and she described the only positive moments as “anything away from home” and not having to “face the reality of what was going on in our household. Participant 5 shared that her and her siblings grew up with an alcoholic mother but felt as if they didn’t have one at all. “We had nobody to help us with homework, to get us ready or take us to school. We were completely on our own and independent when it came to ‘growing up’ or taking care of ourselves.”

The most traumatic parts of Participant 5’s childhood were the regular physical and emotional abuse. The physical abuse was regular and happened most evenings as per mother got intoxicated. There were four siblings in the house, 3 girls and 1 boy. The girls were physically abused significantly more often than their brother. The girls were slapped in the face often, called degrading names, and were often forced to clean the house until 2 or 3 in the morning if it

wasn't deemed "clean enough". This resulted in lack of sleep and exhaustion. This type of abuse was described as consistent and regular rather than sporadic.

Participant 5 enjoyed elementary school because it was a "getaway" from the abuse going on at home. She loved the social interaction with her peers. It was sometimes difficult because her and her siblings received zero support at home with homework or projects because her mom was intoxicated and her dad was working three jobs.

As she got older, Participant 5 describes herself as becoming very rebellious. She would frequently get in trouble, get into fights, and had her own alcohol dependency by the age of 16.

"Like I said I liked school at the beginning but after a while I just felt like I didn't have anyone in the world who cared about me so I just kind of turned completely rebellious. I think the alcohol use was really bad. I was definitely an alcoholic and had cravings even way back then."

Participant 5 did not think any of her teachers were aware of the extreme trauma she was experiencing at home. She says her mother frequently talked to them and warned them about telling anyone or making them look like a bad mother. She regularly threatened them and said if CPS was called they would all be separated from each other and would never get to see each other again. This resulted in the siblings working very hard to seem as if everything was normal while at school.

She did describe one teacher who stuck out as memorable to her. This teacher "just made us feel really loved. Like the love from an adult that I wanted and was missing in my life. She really filled that gap for a little while." Other than this one teacher, however, they remained very closed off and insecure towards their teachers the older they got. She had no interaction with

school counselors and received no education within the school setting on how to deal with trauma, stress, or negative emotions and eventually dropped out of high school.

She wished that her school had implemented some sort of education or discussion to make kids feel

“more comfortable about coming to an adult if they are having an issue. Something to make them feel safe speaking up if they have trauma at home so they can get help and get out of that situation. Something to make our emotions and feelings seem more normal.”

This childhood had a profound impact on Participant 5 as an adult. She has been in therapy for multiple years and is currently getting treatment for PTSD. She takes medication for anxiety and has regular panic attacks. These have gotten so bad that she does not even drive herself to work or run errands. She struggles with building relationships and trusting people and cannot be around heavy drinking of any kind. She no longer has any contact with her mother and relies on her sibling and husband as a healthy support system.

Participant 5 was proud that she went back to school and was able to graduate and eventually get a nursing degree. She was extremely proud that she did not let her childhood keep her from getting a job in the medical field. She was proud of “breaking the cycle” and not becoming an alcoholic like her mother.

Participant 6

Participant 6 was a 25-year old single white female who works as an assistant in a law firm. She grew up with an alcoholic stepfather as well as an alcoholic older stepbrother. She described her childhood growing up with him as “full of constant rage”. She survived sexual abuse, physical, verbal, and emotional trauma on a regular basis. On top of this, she described her family as “living in poverty” with bills hardly paid, electricity frequently off, and most food

eaten at school. “We often did not have the things we needed for school and with no water sometimes I was often the ‘smelly kid’. Her positive memories were minimal and involved being away from home with her biological dad.

Participant 6 described school as awkward and uncomfortable. She had difficulty focusing because of her distractions at home that she was dealing with. Still, she became a “people pleaser” and sought attention from her teachers. As a result she describes herself as

“trying so hard to be the teacher’s pet and get attention but it is hard when you are the free lunch kid and the smelly kid and the poor kid and the dyslexic kid. We got lice frequently, so I was also the girl with the shaved head. School was just awkward.”

Despite that negativity, Participant 6 did love her teachers. She craved attention from them and as a result would work hard to show her teachers that she cared. As a result, she felt like they cared about her. Her most memorable teacher is described as “having a heart that filled the whole room” who would always make a point to ask every student how they were doing.

Still, she had opinions on the gaps she wished her school and teachers had filled. She wishes she was provided more education on dealing with stress and mental health issues.

“Everyone is going to deal with stress and difficult situations. It would have been good to know what to do when these things happened. Instead of just shoving school, school, school, and college, college, college down our throats. No matter what you end up doing you are going to have to deal with real life. I feel like there should have been more emphasis on that.”

These childhood experiences affected Participant 6 in several ways as an adult. The biggest effect she described was the impact of living with an alcoholic had on her ability to formulate healthy and sustainable relationships with people. Her focus on being a people pleaser

means that she has endured similar abuse as an adult with individuals on more than one occasion. She felt she grew up with very bad examples of what relationships are supposed to look like.

Participant 6 was most proud of her determination, citing the fact that she did join the military and graduate basic training to prove her independence to herself. This independence was extremely important to her adulthood. She also described herself in a very positive light as she responded to stressful situations. She said she is very good at examining situations analytically rather than impulsive or emotionally. She would take her time in responding to stress so that she could make the healthiest decision possible.

Horizontal Organization of Data

The life experiences of each participant are organized and displayed in Table 4.1 below. This table facilitated the separation of the experiences and beliefs of each participant and enabled me to compare them horizontally. This organization method allowed the researcher to easily compare experiences from each category of interview questions (found in Appendix B) simultaneously.

Table 4.1
Horizontal Organization of Data Collected from each Case

| Section 1: Childhood experience outside of school | | | | | | |
|--|--|--|---|--|--|---|
| <i>Q1: What makes you identify as a child of an alcoholic?</i> <i>Q2: Can you share some of the challenges you and your family faced regarding your parent's alcoholism?</i> <i>Q3: What are some important memories from childhood?</i> | | | | | | |
| | Participant 1 | Participant 2 | Participant 3 | Participant 4 | Participant 5 | Participant 6 |
| Experience | <ul style="list-style-type: none"> -alcoholic father parents fighting -verbal altercations -yelling -slammed doors/broken dishes -angry drunk -standoffish -not allowed to share emotions -not allowed to discuss negative incidents -frequently up late | <ul style="list-style-type: none"> -alcoholic mother (deceased from alcoholism) -dramatic positive/negative mood swings -slept in frequently -could not get us ready for school -unable to pay bills/buy groceries -heat frequently off -mother was spontaneous and dramatic -unstable -three jobs by age 15 -mom always angry -lots of yelling -physical abuse from multiple "step parents" -uninvolved in life/school -no clue what I was ever doing | <ul style="list-style-type: none"> -alcoholic mother -kind and nice alcoholic -always thought we could do anything we wanted -told us we were amazing -creative and imaginative -would pass out and be unable to pick us up from evening events -embarrassing behavior when friends were over - | <ul style="list-style-type: none"> -alcoholic mother -responsible for getting self and siblings ready for school/daycare -unpredictable mood swings -world revolved around mom and her comfort, how things affected/hurt her -children on backbumer -never said I love you -mom had condescending attitude -scary and uncomfortable body language -verbal abuse -emotional abuse -did not have what we needed | <ul style="list-style-type: none"> -alcoholic mother -no help with homework, getting ready for school, or day to day activities -independent and on our own -positive childhood memories include anything away from home -yelled/called us names -hit and slapped us regularly -degrade us -tell us we weren't good enough -make us clean until 3 or 4 in the morning | <ul style="list-style-type: none"> -alcoholic stepfather and older step brother -always alcohol around -pure rage -living in poverty -not enough food -not having things needed for school -traveled -periodic sexual assault -frequent physical assault -frequent emotional and verbal abuse |
| Feelings and beliefs | <ul style="list-style-type: none"> -constantly anxious -pins and needles -depression -OCD | <ul style="list-style-type: none"> -wanted positive support and encouragement -didn't have her as a parent -codependent -dependent on self only | <ul style="list-style-type: none"> -sought approval and recognition -believed good behavior would fix her sickness | <ul style="list-style-type: none"> -walked on eggshells -low self worth -never good enough -craved attention | <ul style="list-style-type: none"> -felt like we didn't have a mother | <ul style="list-style-type: none"> -desired attention - "missing parent" -lonely |
| Section 2: School experiences | | | | | | |

Q4: What was your attitude towards school as a child?

Q5: What are some significant memories from elementary school?

Q6: Who was a memorable teacher that had an impact on you?

Q7: Were you noticed or cared about by your teachers growing up?

Q8: Did your school provide any type of resources, support, or education for dealing with stressful situations?

Q9: What is something you wish your teachers or school had done more of?

| | Participant 1 | Participant 2 | Participant 3 | Participant 4 | Participant 5 | Participant 6 |
|------------|--|---|---|--|---|---|
| Experience | <ul style="list-style-type: none"> -no positive memories -bullying -lonely -did not participate | <ul style="list-style-type: none"> -struggled academically -dropped out at 15 -felt left out -couldn't afford to participate in extracurriculars or field trips -picked on/bullied for clothes -disruptive in class -in frequent trouble for fighting | <ul style="list-style-type: none"> -very involved -excelled academically -did multiple sports and clubs -valedictorian -close with classmates | <ul style="list-style-type: none"> -hated academics -was always behind -performance not good enough for mom -mom would never come get me if I was sick - | <ul style="list-style-type: none"> -frustrated academically -no help from a parent at home -became disruptive -often in trouble at school -very rebellious | <ul style="list-style-type: none"> -bullied -difficulty focusing -couldn't afford materials -free lunch -smelly kid -bullied for lice and short hair -always behind academically |
| Attitude | <ul style="list-style-type: none"> -hated school -boring -restless -was not conducive to the way I learn -too still -standoffish | <ul style="list-style-type: none"> -enjoyed early elementary -began hating school in 4th grade | <ul style="list-style-type: none"> -loved school -teachers pet -wanted to be the biggest achiever -school performance would fix home life | <ul style="list-style-type: none"> -loved school for the social life -loved getting away from home -was an escape | <ul style="list-style-type: none"> -enjoyed early elementary -did not like anything after 5th grade -very closed off -swept things under the rug | <ul style="list-style-type: none"> -loved social interaction with peers -desire to be teachers pet -wanted approval, didn't get it |
| Teachers | <ul style="list-style-type: none"> -not cared about -no memorable teachers | <ul style="list-style-type: none"> -most did not care, but a few stood out -patient, nice, spoke in low tone -took time for me that other teachers did not -would notice if we were having a bad day -complimented and encouraged us -we could trust her -were unaware of stress at home | <ul style="list-style-type: none"> -involved teachers -was a student they wanted to have in class -my favorite teacher saw me a little more than the others -encouraged me to excel | <ul style="list-style-type: none"> -felt majority of teachers cared about her -met you where you are -took an interest in what you had to say -one teacher became my "second home" and role model for life -one knew about my mom | <ul style="list-style-type: none"> -tried to provide me the motherly love i was missing -was afraid to share about problems at home | <ul style="list-style-type: none"> -They cared -were in my corner -most were really awesome -took time to check on me -heart filled whole room -very straightforward |

| | | | | | | |
|---------------------|--|---|---|--|--|--|
| Missing from school | -teach students how to deal with emotions -how to deal with problems -how to deal with stress -its okay to be angry or sad -substance abuse education not as important | -counselors were uninvolved -skipped school frequently and no one ever asked how I was doing or what was wrong -noone asked how I was feeling | -nothing, felt school was conducive to needs and learning style | -we had no concept of what we would need in life -they assumed everyone would go to college -teaching relationship skills -how to respond to challenges | -more education on handling stressful situations -normalize problems and stress -make kids feel comfortable speaking up or asking for help | -desire for more mental health education -less academic focus -teach how to deal with life |
|---------------------|--|---|---|--|--|--|

Section 3: Adult life and impact

Q10: What are some things that happened in school as a child that you think has had an impact on you as an adult?
Q11: What long lasting effects do you think your parent's alcoholism has had on your adult life?
Q12: What accomplishments as an adult are you proud of? What do you think may have contributed to this success?
Q13: How do you typically handle and respond to stressful situations as an adult?

| | Participant 1 | Participant 2 | Participant 3 | Participant 4 | Participant 5 | Participant 6 |
|-------------|---|---|--|---|--|--|
| Experiences | -alanon meetings -therapy -depression -anxiety -OCD -sleep disorder -did not want to go to college because of feeling towards school -poor and healthy coping mechanisms for stress (food, sex, journaling, group therapy) | -went back and graduated high school -friend's mom became role model and encouraged me | -extremely sensitive to drinking alcohol -obsessive about others drinking -made decisions towards accomplishments instead of having fun -depression in 30's | -have had zero healthy relationships -no interaction with mom presently -parented my children in a similar way until recently -yell at my children a lot -little patience | -suffer/get treatment for PTSD -therapy -anxiety -panic attacks -alcoholism -dropped out but returned to graduate -became a RN -zero contact with mother -have to stay home, cannot drive self due to panic attacks -horrible responses to stress -unhealthy relationships | -inability for healthy relationships -trouble with intimacy -people pleaser -struggle with school resulted in "always catching up" -thicker skin |

| | | | | | | |
|----------------------|-------------------------------------|---|---|---|---|---|
| Feelings and beliefs | -am a good son, brother, and friend | -negative and dark -wanted to better myself -wanted to be anyone but my mom -proud of adversity -handle stress analytically from outside looking i -can panic and freeze up -unhealthy relationships -people pleaser -anxiety | -friends did not understand -proud of taking school seriously and multiple degrees -responds to stress through food, exercise, walking, time with pet | -struggle to be a good parent -anxiety -depression -anger - respond to stress emotionally -struggle to manage emotions | -felt I broke the cycle of parenting and alcoholism (currently sober) | -determined -independent -try to fix people |
|----------------------|-------------------------------------|---|---|---|---|---|

Research Findings

This multiple case study was designed to provide the researcher and interested parties with a better understanding of the lived experiences of children of alcoholics as well as strategies or methods that teachers can implement in the school setting to a) become more aware of the challenges faced by these children and b) best support them in an academic setting.

Research Question 1

What are the lived experiences of adult children of alcoholics?

This question is significant because we cannot attempt to help provide support for current children of alcoholics in our classrooms without first painting a picture and developing a clear understanding of what experiences these individuals may potentially be experiencing outside of school. Understanding the challenges faced by individuals in potentially similar circumstances will make it easier to develop more accurate and targeted methods of support.

The researcher coded and analyzed data from each individual interview to identify experiences that may have a significant impact on an individual. These data were organized into

Table 4.2 which lists childhood experiences that could have a significant impact on both school performance as well as adult experiences that could have resulted from significant incidents in childhood. Table 4.2 also allows for one to easily identify commonalities between the experiences and beliefs felt by each participant. I used phenomenological lenses as I crafted the significant life events and the experiences conveyed by my participants in the interviews. These experiences were chosen by the frequency they were mentioned or the impactfulness cited by participants during their interviews.

Table 4.2
Occurrence of Significant Life Events and Experiences by each Participant

| <i>Research Question 1: What are the lived experiences of adult children of alcoholics?</i> | | | | | | |
|---|---|---|---|---|---|---|
| Participant | 1 | 2 | 3 | 4 | 5 | 6 |
| <i>Childhood experiences outside of school</i> | | | | | | |
| Verbal abuse | x | x | | x | x | x |
| Emotional abuse | x | x | | x | x | x |
| Physical abuse | | x | | | x | x |
| Sexual abuse | | | | | | x |
| Neglect | | x | | x | x | x |
| Childhood poverty | | x | | x | x | x |
| Positive encouragement from parent | | x | x | | | |
| Feelings of anger | x | x | | x | x | x |
| Loneliness | x | x | | x | x | x |
| Low self worth | x | x | | x | x | x |
| People pleasing | | x | x | x | | x |
| Childhood anxiety | x | x | x | x | x | x |
| Childhood depression | x | | | x | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| Regularly disrupted sleep | x | | | | x | |
| Single parent household | | x | x | x | x | |
| <i>Academic experiences</i> | | | | | | |
| Experienced bullying | x | x | | | | x |
| Enjoyed school overall | | x | | | | |
| Struggled academically | x | x | | x | x | x |
| Excelled academically | | | x | | | |
| Dropped out | | x | | | x | |
| Post high school education | | | x | | x | x |
| <i>Adult experiences</i> | | | | | | |
| Difficulty with healthy relationships | x | x | | x | x | x |
| Positive outlook on handling stress | x | x | x | | | x |
| Negative outlook on handling stress | x | x | x | x | x | |
| Struggled with alcohol dependency | x | x | | | x | x |
| Adult anxiety | x | x | x | x | x | x |
| Adult depression | x | x | x | x | x | |
| Other adult mental disorders (i.e. OCD or PTSD) | x | | | | x | |
| Attends/has attended adult support groups | x | | | | | |
| Attends/has attended adult therapy | x | x | | | x | |

Research Question 2

What can educators do to help children of alcoholics develop resilience and become more successful adults?

Research question 2 is significant because it takes the information gathered from each individual case and applies it to the researcher's practice in a way that is beneficial to all

stakeholders. To answer question 2, the researcher analyzed the data both independently and horizontally to locate significant themes, ideas, and events that could help in the development of a guide that teachers and school personnel can use to help children of alcoholics deal with their problems while in their classrooms. The sections that follow include this individual within cases analysis as well as the cross comparison.

Within Case Analyses

After coding and organizing the data, the researcher first analyzed each participant's individual experience, looking for key concepts and larger themes that would help answer the second research question. The analysis that follows is presented in the order in which the interviews took place. The events presented in the analysis are those that provide significant insight into themes that are applied to a guide for teachers (located in Appendix D) to use to support these children in their classrooms.

Case 1: Participant 1

The first participant had a major theme that was reiterated multiple times throughout his interview. On multiple occasions, he continued to circle back and express frustration at the lack of communication and expression of feelings his family exhibited. To this day, he struggles to share his emotions and how he is feeling with family, friends, and potential romantic partners. Additionally, he struggles to acknowledge his own feelings and emotions within himself. This was the most important thing Participant 1 wished he had received as a part of his school experiences.

Participant 1 acknowledges that teaching someone how to handle and deal with their emotions is compulsory upon parents. However, he also acknowledges, and I think it is important to note, that many children simply do not receive this type of training at home. Many

parents themselves simply do not have the knowledge, skills, or time required to properly teach their children how to share their emotions.

Reflecting on my own experiences both in my own classroom and in other teacher's classrooms, there is a significant gap that many children have when it comes to handling stress, calming themselves when they are angry, and conflict resolution. Teachers already spend a lot of their time dealing with the effects of these negative emotions felt by students. It seems reasonable to assume that a more proactive approach would benefit both the students, teachers, and classroom/school culture in ways that promote less negative reactions.

Another significant feeling expressed by Participant 1 was his complete disdain for the entirety of the school experience. He struggled academically, felt invisible and unimportant to his teachers, and felt the entire design of how the classroom was run was written for a different type of student. While we cannot change each teacher's practices and how they run their classroom, I do think it is important to acknowledge that he felt uncared about and unimportant to *all* of his teachers. In developing a guide for educators in dealing with these types of students, it seems as if it would be important to note that children do desire to hear and know that they are cared for and important. Developing an ethic of care is important and necessary for all students but especially those who are dealing with traumatic situations at home. Sometimes as educators it is easy to become consumed by the checklist of items to do that we forget the necessity of the human ethic of care connection.

Case 2: Participant 2

The school experiences of Participant 2 were very mixed. She went from enjoying school, to being completely rebellious, dropping out, and finally returning with a newfound determination and focus. We will look at each of these attitudes individually as part of her

analysis. Participant 2's worldview turns negative very early on. Considering the significant trauma and neglect she was experiencing at home, it is not a surprise that she felt lonely, unseen, and unimportant at school. She felt her teachers never knew what was going on and were oblivious to her pain and stress. Participant 2 felt unimportant to her mother whose desires and needs were put before her own more often than not. Her interview revealed an overwhelming lack of hope in her primary years, which eventually led to her dropping out of school and moving away from home.

The turning point for Participant 2 was the development of a kinship with a teenage friend's own mother, who worked hard to advocate for Participant 2 and fill many of the gaps her own mother left empty. This role model gave her the support, encouragement, and love she needed to eventually go back to school and become academically successful. The one teacher Participant 2 did share positive memories about was able to acknowledge her bad days, told her she was doing a good job, and helped her feel successful. These words of encouragement were highly desired and deemed very important by Participant 2. In addition, Participant 2 described the realization that if she wanted anything in life she would have to achieve it on her own. Through all her experiences she became intrinsically motivated.

How can these individual experiences apply to the modern-day classroom and assist children going through similar traumas? When developing a guide for teachers to use, words of affirmation seem to be a significant part of encouragement and motivation for children. In addition, Participant 2 felt she was viewed as the "bad kid" in school and assumed her teachers had negative opinions about her that could not easily be changed. When developing a guide for teachers in helping these children, one would establish the importance of not holding a student's past behaviors or reputation against them.

Case 3: Participant 3

The third participant in this case study could be considered the most conventionally “successful” of all 6 participants. She had the most positive childhood experiences, thrived academically, and had strong relationships and support from her parents and teachers. What is unique about Participant 3’s experience is the regular positive affirmations and encouragement she received from her alcoholic parent at home despite their illness. While she did experience some adverse effects later on in life, they were minimal and she was able to work to overcome most challenges.

I think the most significant theme present throughout the analysis of Participant 3’s interview data was the constant presence of encouragement and affirmations both at home and at school. Participant 3 responded particularly well to this type of encouragement and used it as motivation to better herself. This again supports the need for regular affirmations and specific encouragement from teachers.

Another significant theme present in her interview was her tendency to be a “people pleaser” and the belief that doing so would change things she did not have control over. For example, she believed that superior academic performance would improve her mom’s addiction at home. This is obviously not the case and unfortunately led to depression later in the participants' life. Reflecting back, I think this belief is likely mirrored in many children who have experienced trauma. I know firsthand it is one I notably relate to myself. What could this mean for teachers who want to motivate students to be successful? This sort of extrinsic and fabricated motivation will not be healthy later on in life. I think it means we need to instill and encourage intrinsic motivation in our students. Their success should be for nobody else but themselves. Outside motivation may work temporarily, but what are the long-lasting effects on someone’s

mental health? A guide for teachers to help children of alcoholics should be designed to acknowledge that these children who have experienced trauma need encouragement and motivation, they also need to develop practices that encourage the desire in them to want to put themselves first and be better for their own betterment, not anyone else's.

Case 4: Participant 4

Participant 4 spent a significant portion of their interview discussing the anger and resentment they held for their alcoholic mother holding narcissistic and self-centered characteristics and tendencies. This created a child who felt very lonely, had low self-esteem, and who wanted to please the adults in her life but felt nothing was truly ever good enough. She craved attention and often felt unheard and unseen at home.

Contrary to the majority of her childhood experiences outside of school, however, this participant did feel cared about and noticed positively by the majority of her teachers. This was juxtaposed by feeling like her academic struggles were always a disappointment. However, she felt these were her own thoughts and not opinions formed or projected by her teachers. She felt like she would not have survived school without one teacher who intervened and became a role model and mentor. She spent a lot of time babysitting and staying at this teacher's house which became close to a "home away from home" for her.

The culmination of experiences felt by Participant 4 include a myriad of both positive and negative incidents that I think provide significant insight on how we can help children who have experienced similar life events to Participant 4. Her desire to please people and do well was a result of negative influences and resulted in anxiety, depression, and low self-esteem. However, the energy she needed to make lasting and meaningful changes in her life came from a teacher who provided unconditional acceptance, regardless of her school performance or trouble she got

into. This illustrates the importance of accepting people for who they are and encouraging them to find their own strengths that they can be proud of. When developing a guide for teachers to use in their classrooms with these children who have experienced trauma one would need to include activities whereby teachers acknowledge different levels of ability and skill sets that will be encountered in the classroom and embrace what each and every child has to offer.

Another significant theme to highlight in Participant 4's interview was her disdain and disappointment with the ability of school to prepare her for life outside of the public school system. All students were treated like they were going to go off to college, and students were significantly ill prepared for how to be successful on their own as adults. My personal experience in four different elementary schools echoes a lot of the same sentiment. Four-year universities are highly encouraged and become the center of a lot of focus, even though this is not the path for every child in every classroom. I also believe an over emphasis on academics means that basic life skills are hardly ever addressed. A guide for helping teachers support children of alcoholics would include the acknowledgement that there are many different paths to take post high school graduation and would make time to emphasize how to respond and deal with challenges outside of school.

Case 5: Participant 5

Participant 5's experience at home was so overwhelmingly negative it was no surprise she failed to focus academically and eventually dropped out of school. She suffered from emotional, verbal, and physical abuse as well as pure exhaustion from being kept up until 2 or 3 in the morning on a regular basis. She received no support with her academics at home, was never asked how she was doing in school, and was never able to speak to a school counselor. She and her siblings went to school in constant fear they would be taken away and separated from

one another, so she spent a significant amount of her energy focused on seeming like everything was okay. She felt alone, uncared for, and unnoticed by all but a few standout teachers. The few teachers that did leave an imprint on her memory made her feel unconditionally loved and filled some of the gaps she was missing from her own parents.

Participant 5 is a great example of how schools, for many children, act as shields and providers of basic needs. For this participant, school was not a fountain of knowledge but served as a temporary escape from reality. That was its value and importance to her. Considering the circumstances she was dealing with at home, I do not think it could be expected to serve as anything else. Participant 5 shared how she wished her school had done a better job of making students feel more comfortable about sharing when things were wrong or when they needed help

When developing a guide on how to help children of alcoholics at home, I think this is very important to acknowledge. We cannot change or control what students deal with outside of school. All we can do is respond to the children that walk into our classrooms as best we can and make sure their needs are being met. For some students, this may not be a priority of a fact filled education. Instead, basic needs of simple nurturing may have to take precedent. In this instance, establishing a classroom as a “safe space” becomes vitally important.

Case 6: Participant 6

The last participant in the case study was also the victim of significant amounts of abuse at home. She experienced regular verbal, emotional, physical, and sexual abuse outside of school. As would be expected, she struggled to focus at school and was behind academically. Despite her academic struggles, however, she strongly craved and desired attention from teachers, was a “people pleaser” and worked hard to succeed academically. She recalled strong feelings of shame regarding her home life but remained determined to be acknowledged and

recognized by her teachers at school. She shared an overwhelmingly positive view of her teachers and felt like they cared about and supported her.

Despite these positive feelings toward her teachers, Participant 6 felt like the school failed to educate students on how to deal with real life and how to best respond to difficult situations. As a result, she felt like she was left to figure everything out on her own afterwards and she is still “behind” and “struggling to catch up”. Participant 6 is another example of “things we can’t control”. Her basic needs outside of school were not met, and as result, despite her best efforts, she failed to catch up.

Despite her desire to please and her positive feelings towards her teachers, she felt overwhelmingly alone in her fight to succeed in school. It was her failure to try hard enough and her responsibility to catch herself up. There were no feelings that she was part of a collaborative team for her academic success. In developing a guide to help teachers support these children, I think it is important that a collaborative mindset is established in the classroom so that students are part of a community of learners and do not feel alone.

Cross Case Analysis of Significant Commonalities and Differences

After examining each case individually for ways educators can help children of alcoholics, the researcher then compared each case horizontally to search for significant similarities and differences. A good portion of this analysis examined what each participant described as missing, necessary, or recommended portions of the school curriculum that they believe would have provided them more support and made their school experience more meaningful. The researcher organized these data in Table 4.3. These data were also compared to the individual experiences of each participant. With this information, the researcher made

inferences based on data and their own experiences to determine ways that may be useful in helping children of alcoholics within the modern-day classroom.

Table 4.3

Recommendation of School Intervention by Participants

| <i>Research Question 2: What can educators do to help children of alcoholics develop resilience and become more successful adults?</i> | | | | | | |
|--|---|---|---|---|---|---|
| Participant | 1 | 2 | 3 | 4 | 5 | 6 |
| <i>Participant Recommendations for School Education/Curriculum</i> | | | | | | |
| Help children feel comfortable sharing | x | x | | | x | x |
| Help children feel comfortable asking for help | | | | | x | |
| Access to resources to get out of abusive situations | | | | | x | |
| Less academic pressure/focus | x | | | x | | x |
| Discuss options after high school other than a 4 year university | | | | x | | x |
| Mental health/disorder education | x | | | | x | x |
| Dealing with “real” life | | x | | x | | x |
| How to respond to stress | x | | x | | | x |
| How to handle different emotions | x | x | x | | | |
| Deal with problems in a healthy way | x | | | | | |
| Parental education | x | x | | | | |
| Acceptance of negative emotions | x | | | | | |
| Educational support system | | x | | | x | x |
| Building connections through open casual discussions | x | x | | x | | |

A cross comparison of the cases reveal that each participant's experience was incredibly unique. Each participant experienced a variety of positive and negative scenarios throughout their childhood both in and outside of school. Each participant went through different traumas at home and had different interactions with their peers and teachers within their unique school settings. Clearly, the support each participant would need to improve their time in school was unique to that individual and what personal gaps and struggles their upbringing created.

Despite these unique differences, however, the data collected insinuate there are recommendations that could be made that would have benefitted several if not all of these participants growing up and would likewise be beneficial to many children of alcoholics (and children in general) sitting in classrooms today. When speaking with participants, several compelling themes stuck out and were present throughout the interview process. These themes came up through recommendations by participants for school curriculum and also through their own personal stories as they shared things in their life they were missing or that they longed for. In the following pages I describe the themes identified in the cross-case analysis.

Themes Identified in Cross Case Analysis

Safe Place/Basic Needs

The participants in this study experienced various degrees of trauma at home. Four of the participants, (Cases 2, 4, 5, and 6) failed to have even their most basic needs met before they were expected to perform well at school. Their families could not regularly afford to pay all of their bills, keep utilities on, or buy necessary things for school. In addition, all participants except for Participant 3 failed to have their emotional needs met.

When examining school performance of the participants, all but Participant 3 struggled academically and two participants eventually dropped out of high school. Coincidentally,

Participant 3 was also the only participant to not undergo regular verbal and emotional abuse and the only participant to not experience feelings of anger, loneliness, and low self-worth as a child. If we consider emotional needs part of a child's basic needs, the data clearly show a gap between the participants who had these needs met and their performance in the school setting. Further, Participant 3 enjoyed her overall school experience while the other participants possessed a negative view of their school experience overall.

Educators cannot expect children to come to school ready to learn without these basic needs being massed first. If a school's priority is to meet the needs of the *whole* child, then this responsibility becomes befallen on the school and teachers. The well being of students should be their number one priority. Children of alcoholics need this more than the average child. In addition, even an academically focused school would make these basic needs a top priority for students considering they cannot be expected to perform adequately while dealing with so much outside stress and dangers to their mental health.

I think the prevalence of these gaps signifies an imperative need for schools to spend more time considering what their students may be lacking emotionally, as well as the various levels of stress they could be enduring. A guide for educators on how to help students of alcoholics would both make teachers aware of the amount of stress and lack of emotional support these children may potentially experience outside of school as well as identify simple strategies teachers could use to help ease some of the emotional tension students may face.

Additionally, the lack of emotional security many of these children may feel identifies a demand for establishing the classroom as a clear safe space for students where they feel comfortable sharing and asking for help. The analysis of Participant 5 and 6's interviews showcased that students who lived in these households could have been fearful of asking for

help, even when they needed it. The abuse they were experiencing at home might have made them feel like they did not have any place that was safe. As pointed out by Participant 5, school was often an “escape from reality” but she was still afraid to ask for help.

Acknowledgement and Sharing of Emotions

Participants 1, 2, 5, and 6 stated that they wished their schools had helped students be more comfortable with sharing. Participants 1, 2, and 3 specifically mentioned that they wished they had help learning how to deal with various negative emotions. All participants except Participant 3 dealt with emotional abuse and were exposed to unhealthy coping mechanisms. As mentioned before, all participants except for Participant 3 struggled with feelings of anger, loneliness, and low self-esteem. All six participants dealt with childhood anxiety. As adults, all participants have experienced anxiety, and all but Participant 6 have experienced depression. All but Participant 6 felt that they responded to stress in multiple negative ways. Having dealt with so many negative feelings, it is no surprise that school was a struggle for all but one participant interviewed.

Abovementioned evidence makes it easy to discern that it would be beneficial to both students and educators alike to develop an educational environment that acknowledges that students may succumb to negative moods and feelings in the classroom unrelated to their school experience that may hinder their performance. In addition, students should be able to share these emotions without fear of a negative reaction or consequence. Emotions and feelings like these can easily overpower our brain and make it impossible to focus on anything else. As mentioned by Participant 1 in his interview, many children do not know how to deal with such overwhelming thoughts or how to respond. In developing a guide for teachers to support children of alcoholics who are more likely to have these feelings than a typical student, such a guide

should include emotional acknowledgement as well as education on how to respond to different types of stressors.

Encouragement/Role Model

When conducting the cross comparison of all six participants, one of the starkest discrepancies that stuck out was that only Participant 3 described her parent as motivational, complimentary, encouraging, and supportive. She was the only participant who enjoyed school, wanted to do well, and who experienced and was able to describe large amounts of motivation. Participant 2, who dropped out of school, only returned to graduate after being “taken in” by a friend’s mom and receiving support and encouragement that she did not receive from her own mother growing up. Participant 4 also described being practically “adopted” by one of her teachers whose house became a “second home.” Participant 5 shared how the teachers that were the most memorable to her were the ones that “filled the gaps” of what she was missing from a parent. Expressions of feeling “unloved” and “lonely” were present in multiple interviews.

I believe all of this helps to demonstrate that intrinsic motivation and our ability to love and believe in ourselves is not something we are simply born with. A nurturing environment can play a big role in how we view what we are capable of and how motivated we are to improve our situation. Even in a perfect environment full of love and support, school is difficult and demanding. For a child of an alcoholic experiencing trauma, this sort of pressure can be overwhelming. Support, words of affirmation, and encouragement from an outside individual can make a world of difference. Obviously, teachers cannot be expected to fill the role of a parent. However, in many cases for many children, teachers may be the closest person to a parent they will ever get.

In developing a guide for teachers to help children of alcoholics, teachers need to recognize how impressionable their presence in a child's life can be. They need to realize that the words they say matter, and that children hear them and carry these words with them into their adulthood. A guide for teachers would encourage positivity and would recognize student efforts on a regular basis, for things other than academics.

Personal Connections and the Development of Relationships

Finally, the data from these cases demonstrate a desire from nearly all participants to be able to share, to discuss, and to develop connections. All participants (except for Participant 3) expressed extreme difficulty maintaining both friendships and romantic relationships. Participant 1 discussed how he still could not share emotions or how he was feeling.

Most children spend the majority of their waking hours at school. School is where one learns the majority of their social skills and how to interact with others. In a healthy environment, much of this development may come naturally. However, it is safe to say that for a child of an alcoholic who is experiencing regular outside trauma, extra attention and guidance on how to build healthy relationships may be needed. A guide for teachers to help children of alcoholics will explain this need for extra guidance in relationship building and provide a resource to exercises that may help foster this development.

Comparison and Acknowledgement of Current SEL Implementation in Schools

It is important to acknowledge that the school experience is changing and is different for children today than it was for the participants of this study. In recent years, there has been a shift for many schools and districts to incorporate more social emotional learning (SEL) to help students cope with handling their reactions in the classroom. According to the Collaborative for Academic, Social, and Emotional Learning (CASEL), SEL is defined as the ability of a child or

adult to apply the “knowledge, attitudes, and skills necessary to understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions” (CASEL, 2021, p. 1).

In the last two school districts I have served, direct SEL instruction was delivered as a thirty-minute lesson either monthly or bi-monthly by the school counselor. However, a study conducted by Deli et al. (2021) found that while this type of delivery increased knowledge of social emotional skills for counselors more than classroom teachers, student anxiety and skill implementation was improved more if SEL skill instruction was delivered by their classroom teacher. This indicates that increased teacher knowledge and instruction of SEL skills for their students in conjunction with a school counselor model could be beneficial.

In a survey study there was nearly a nine percent increase in student test scores for students who attended a school that placed a higher emphasis on social emotional well-being than schools that did not, as well as an elevated probability that students would graduate, attend a four-year university, and have improved attendance (Jackson et al., 2021). Additional connections between SEL instruction in schools and the improved resiliency and mental well-being of students have been noted (LaBelle, 2019). These and similar studies highlight the significance of placing an emphasis on the social and emotional well-being of students for both their long-term success and the academic success of the educational institution.

All of these emotional coping skills are competencies that children of alcoholics often struggle with more than their peers. The increased push to implement strategies to teach these skills by school districts is definitely an improvement from prior years before. All six participants in this case study stated that they received no support or education of any kind on the development of any of these skills through their school’s curriculum. There is little information

out there to indicate the numbers of schools that are beginning to implement an SEL program into their curriculum on some level. It is even more difficult to determine how these practices are implemented in individual classrooms. I can only speak for my current and previous schools. As mentioned above, lessons are conducted monthly or bi-monthly throughout the year by a school counselor and teachers (at my current campus). Each lesson contains a few techniques to implement with students if they have the time, but it is not a regular practice, nor do many teachers place a high priority on it.

I included this section to place emphasis on the fact that while there has been increased awareness of social emotional instruction, there is little information on both the degree to which implementation is taking place or how it is being integrated into classrooms. Strategies seem to vary from campus to campus and district to district. In addition, I have found gaps between the recognition that students need and the benefits from engaging in lessons promoting social emotional skills. Additionally, teachers need to acknowledge the traumas such a high percentage of students face that make their need for these skills so much more essential and necessary than for the average student. Through this case study, I have worked on developing a guide for teachers that would assist in bridging this gap by making teachers more aware of the severity in which students need this support in their classroom, the benefits of it coming from a teacher, and ways of providing supplemental support beyond teaching skills and strategies. This guide can be found in Appendix D. I believe that children of alcoholics require attention beyond what generally serves as the basis for social emotional learning for the average child who does not experience regular trauma outside of school. As previously discussed in the literature review, this idea is expounded on by Noddings (2013) who describes the intangible effects caused by caring for a student's social and emotional needs. They describe the impact caring (or lack thereof) can

have on the “cared for” as well the impression of “moral education” through that of a teacher and places emphasis on the significance of the student teacher relationship (pg. 175).

Summary of Findings

The individual within case and cross case analyses of the six participants revealed a myriad of challenges, traumas, and unique life experiences that children of alcoholics may experience. Findings also showed a multitude of gaps in social emotional support that these children faced. In addition, analyzing the participants’ lived experiences showcased how the effects from their childhood traumas could have had a significant impact on one’s adult life.

Through the analysis of these experiences, I was able to identify various factors that may improve a child of an alcoholic’s school experience and mitigate some of these effects in adulthood. These strategies were then organized into the guide developed in conjunction with this case analysis and presented in the appendix of this study. Some of the strategies and recommendations emphasized in the guide include the significance of emotions and their acknowledgement, the advantage and value of positive encouragement and a role model on one’s motivation, the necessity of establishing an ethic of care within a safe classroom environment, and the need for teachers to be aware of the high percentage of students in their classroom that may be children of alcoholics as well as the variety of different traumas they may endure.

In addition to the individual within case analyses, I conducted a cross case comparison to provide guidance in answering the second research question. As a result of this analysis, the researcher identified four significant needs and gaps of children of alcoholics. These deficits need to be addressed by receiving supplemental support within the classroom setting. These four ethics of care themes are the establishment of a safe place, the acknowledgement and sharing of

emotions, positive encouragement from a role model, and the development of personal connections and relationships.

There is no way to prevent or change what we cannot control. As teachers and educators, we are severely limited in what we can do and how involved we can be. However, I believe that there is room for educators to become more aware of the percentage of children in their classroom potentially facing these types of traumas at home. Teachers can make simple subtle changes we can make to the classroom environment that could potentially make small changes in a child's life. My personal experience has instilled within me the belief that there are things we can do to help these children through building personal connections and relationships, openly discussing and sharing emotions, and becoming true role models.

CHAPTER 5

SUMMARY AND DISCUSSION OF FINDINGS

Summary of Findings

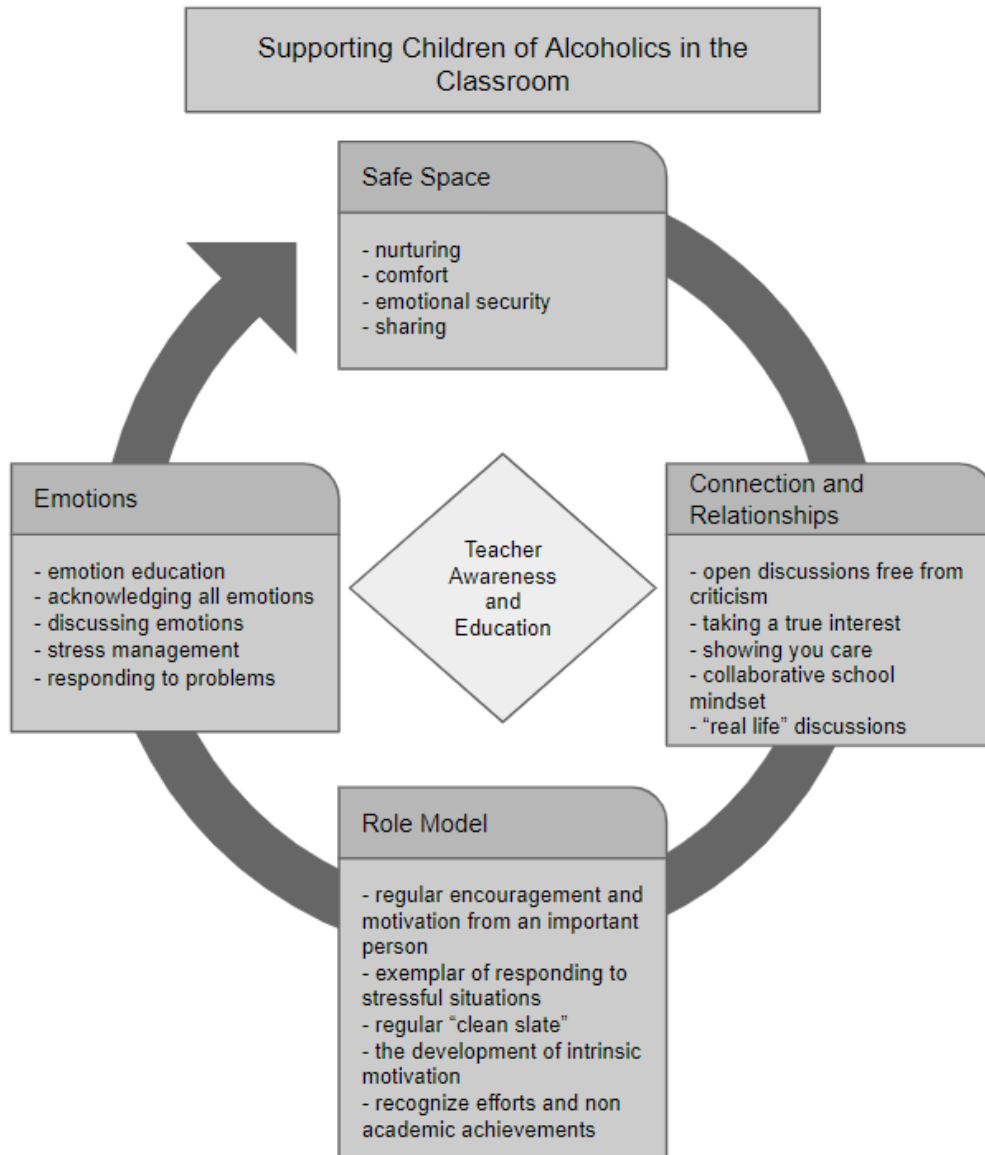
The purpose of this multiple case study was to examine the lived experiences of adult children of alcoholics utilizing phenomenological lenses to develop strategies and guidelines that would help assist teachers in supporting potential children of alcoholics in their classrooms, despite the inability to accurately identify which children may be suffering. With a better understanding of the nature and severity of potential traumas, as well as how these children may present themselves at school, educators may be better equipped to respond to struggling children in ways that provide support and understanding, which could result in improved attendance, an enhanced attitude towards school and life, better social and emotional skills, and more resilience when responding to stress. These solutions have the potential to make long lasting impacts on not only a child's academic outcomes, but their adult life as well.

Through an individual case analysis of six participants, a cross case examination and reflection, in conjunction with the researcher's own personal experiences and connection to the study, multiple recommendations for teachers to implement in the classroom were identified. These recommendations were organized under the umbrella of four key themes. These themes include the necessity of having basic needs met and the establishment of a safe place, the acknowledgment and sharing of emotions, regular encouragement from a positive role model, and the development of personal connections and relationships. The organization of these recommendations is displayed in Figure 5.1. While it is impossible to outline and develop an all-inclusive manual on how to improve a child's school experience, guidelines are provided to allow and encourage teachers to develop more insight and connection to their students. The

guide developed is included in the appendix of this ROS. The guide is meant to be simple to read and convenient to use for teachers in all classrooms. It is up to individual teachers to control the frequency and effort in which these guidelines and recommendations are implemented within their classrooms.

Figure 5.1

Teacher Awareness and Education



Connection to the Literature

There were many revelations in this study that connected to the literature previously discussed in Chapter 2. Many of the experiences the participants shared in their interviews have direct correlations to observations made in previous studies. Mental health and social emotional struggles, the amount of support provided, adult consequences of living with an alcoholic parent, and factors that potentially led to the development of resilience, all have connections to the literature.

Mental and Socio-Emotional Struggles

The participants of this study each had a unique childhood experience growing up with an alcoholic parent. Many of the stories shared by these participants, however, mirror and share similarities with children studies by previous researchers. Cork (1969) interviewed 115 children of alcoholics and found that the majority suffered from low self-esteem, anxiety, and emotional irregularity. Studies by Hall et al. (1994) and Haverfield and Theiss (2014) found children of alcoholics had lower life satisfaction, lower locus of control, were more negative, struggled more in social scenarios and with relationships, possessed low self-esteem, resentment, and anger. As the data analysis in this study showed, all participants exhibited childhood anxiety, and all but Participant 3 were angry, had feelings of loneliness, depression, and low self-worth.

Tinnfält et al. (2018) found a need by children of alcoholics to try and control things outside of their home environment (because at home they felt they had no control). In the current study, Participants 2, 3, and 5 all shared feelings of trying to control other people in relationships. All but Participants 1 and 5 identified as people pleasers in their childhood with feelings of “never being good enough”.

Childhood Support and Assistance Provided

While the literature available and discussed is limited, what is available showcased a very minimal amount of involvement, intervention, or support for these children. Christensen (1997) found that 1 out of 32 children of alcoholics did not receive any type of psychological help. Parr and Richardson (2006) pointed out the limited resources that are available and are generally only intended for the use by school psychologists and counselors and are not provided to teachers and are not for the majority of the student population. Not one participant in this study received any sort of support or educational training on dealing with the stress and trauma going on at home or with handling their emotions.

Education provided by my current and previous district is limited to school counselors and is only incorporated 1-2 days out of the month. This is an unfortunate realization considering that research indicates that early identification and intervention with children of alcoholics may help children better comprehend and know how to respond to their domestic issues at home (Newlon & Furrow, 1986).

Adult Consequences

Research has shown that there are a myriad of potential negative consequences an adult could face later in life as a result of living in an alcoholic home. Much of what the research tells us about these consequences are reflected in the real-life experiences of the six participants in this study. In addition to struggling with self-esteem and motivation, children of alcoholics are often perceived by others, family members, and themselves as having lower cognitive abilities than their normal peers (Johnson & Rolf, 1988). This is likely due to their inability to focus as a result of anxiety, depression, and other mental and emotional issues. This aligns with the fact that all participants in the study (except for Participant 3) struggled academically and is additionally

supported by the fact that Participants 2 and 5 initially dropped out of school. Because they both eventually returned and graduated indicated that their academic struggles were caused by outside factors rather than their academic ability.

As previously discussed, Peleg-Oren (2002) demonstrated that children of alcoholics are more likely to become one themselves (as did participants 1, 2, 5, and 6) as well as being more likely to develop emotional and social problems. As was discussed in this study, most participants struggle with handling stress in a positive way, as well as with depression, and adult anxiety. Patussi et al. (2018) found that children who had an alcoholic parent growing up demonstrate less resilience and coping strategies when placed in situations where they have to respond to stress. In their interviews, all participants except for Participant 6 described negative responses to stress as a regular way of responding.

The Development of Resilience

The correlation between what previous researchers have said in the literature reviewed contributes to resilience in children of alcoholics and what was shared and learned from the participants in this study is interesting. As discussed in the analysis portion of this ROS, only Participant 3 shared a love for school and a positive school performance. Much of what she shared was in tandem with what the research says about the development of resilience. Werner and Johnson (2004) and Hall (2007) both examined various factors that contributed to resilience and found positive adult influences and kinship ties to be a key factor in the development of a resilient adult. Participant 3 described her mother as a “happy and friendly” alcoholic who constantly encouraged and motivated her. In addition, she had strong relationships and support from her teachers who encouraged her academic focus. As discussed in the literature, Moe et al. (2007) found that having multiple systems of support were extremely important in the

development of resilience. Many of the factors discussed in these studies to influence resilience were also things the other five participants expressed having wanted, needed, or was missing from their lives.

Researcher's Personal Experience in Relation to the Context

An analysis of this study would not be complete without acknowledging my personal connection as the researcher of this study to the context as an adult child of an alcoholic. Having grown up in an environment with many similarities to the participants, I wanted to find a way to support children similar to myself. This study includes my passion and personal investment to children, like the participants in this study, who feel alone and unsupported who need more than what a typical education has to offer. Undoubtedly, my own personal experiences have influenced my thoughts and conclusions made in the data analysis portion of this study. In this section I will briefly compare some of my own personal experiences and beliefs to the experiences and beliefs of the participants to provide more context to the study.

Like the majority of participants, I grew up in a very unstable household. I encountered regular verbal, emotional, and sexual abuse that severely damaged my ability to interact with others in a healthy way, manage my emotions, and respond to stress. We moved 17 times before I started the sixth grade, and I felt completely uncertain of myself. My sister and I were taken away by the state a total of three times growing up and I had moments of feeling completely alone and unloved. I eventually took my parents to court and emancipated myself at sixteen. I developed severe anxiety and PTSD as a result of many of my childhood experiences.

Interestingly enough, while my homelife shares more similarities with the other five participants, my school experience and academic performance mirror most closely Participant 3's (experience). I loved school and was extremely determined to perform well for my teachers.

When analyzing each interviewee, it was easy to determine what challenges and obstacles the participants faced that would make them find school undesirable and cause them to struggle so much, academically. Contrary to what they experienced, Participant 3 had a more stable homelife and her mother, though she struggled with alcoholism, was very involved in her life and often motivated her to succeed.

Considering the trauma I experienced, it would seem more likely that my school experience would be closer to the other 5 participants than Participant 3. However, I do not think my school performance was unusual. While my mother's alcoholism and parenting created significant gaps in my emotional wellbeing, social development, and mental health, I had significant influences in my childhood that I think were responsible for filling many of those holes. In between my mom's struggles with alcoholism and the challenges it created for our family, I had three women that worked tirelessly to intervene and prevent me from succumbing to the trauma she would cause. My grandmother, great grandmother, and 5th grade teacher instilled every moral value, and belief I have in myself to this day. Every time they had an opportunity to be with me, they would. They showered me with affirmations, motivation, and life lessons that I never experienced at school. My fifth-grade teacher is still in contact with me and has provided me with guidance throughout my entire doctoral journey. I believe it was their influence that provided me with the support I needed to respond better and persevere in an academic environment in a way I would not have otherwise been able to do.

I want to acknowledge that though this love and support filled a lot of holes for me, I still felt the consequences of the childhood I was brought up in. I developed my own alcohol dependency (of which I am currently 5 years recovered), struggled tremendously to develop friendships and relationships, had immense struggles with trust, and have gone to therapy for the

last 8 years to deal with issues of anxiety, depression, and PTSD. Most of my early adult life was spent on reparenting myself to compensate for the gaps that still remained. In developing a guide for teachers to use to help children of alcoholics in their classroom, my personal experiences indicate a need for teachers to incorporate frequent encouragement and support, persistent and recurrent opportunities for bonding and relationship building, and to make it clear to students that they are important and matter.

Lessons Learned

Personal Lessons

The biggest lessons to reflect on in this multiple case study revolve and focus on the value and importance of the “unknown” when dealing with, responding to, and supporting children in the classroom. Before even beginning to conduct my research, I was aware that a multitude of factors related to the context were out of everyone’s control. We cannot identify all children of alcoholics in our classroom, we cannot know what trauma and stress they face outside of school, we cannot understand the full extent of their suffering, and we cannot control anything that happens once they leave our classrooms and go home.

I knew going in that I was examining a phenomenon that has no solution or cure. All I could aspire to do was develop a better understanding of the harsh reality many of my students may face after giving me a high five, fist bump, or hug at the end of the day in the hopes that this increased awareness would provide guidance on how to make their time at school even just the tiniest more valuable. To me, this acknowledgement and sensitivity to what we do not know about the children we are responsible for is a huge lesson in itself. All educators have a life outside of our practice with our own struggles and fight for happiness. However, when we walk through the door of our classroom our hat changes to the role of a teacher, and we become

focused on the job we are challenged to do. I think what these lived experiences can teach us, though, is that maybe it is okay to bring a little of our real world into the classroom with us so that we have a better way of seeing the real world of our students and remembering that they are just people too.

In addition to acknowledging what we do not know and what we cannot change, I think it is also important to realize that we will not be able to save or “fix” all children to set them up for a perfect, happy and productive adulthood. Even if we implement every recommendation on a regular basis with complete fidelity, there is no measurement to indicate our future success or money-back-guarantee. Every single student's lived experience will be unique to them and at the end of the day it will be up to them to advocate for the life they want for themselves. We are powerless to control the hand we are dealt; we can only choose what cards to play.

However, there is evidence to support that one's environment can impact one's outcome. For the participants in this study, it is their perception as well as my interpretation as the researcher that their environment as a child had a significant impact and direct correlation to many of their experiences. We cannot assume that we do not have the power or ability to impact the direction one's life will go. Sometimes all someone needs is a bump in the right direction. As teachers, we should not hold ourselves short and should be aware of and recognize the impact and influence we can have on our student's lives.

Case Study Lessons

This case study provided multiple lessons about the approach we should take to support children of alcoholics in the classroom. First, children of alcoholics cannot succeed academically unless their social and emotional needs have been adequately met. These data presented through this study would implore teachers to examine more closely students who may seem disinterested,

distracted, tired, possessing a “negative” attitude, or who just struggle to focus. The guide for teachers provided in the Appendix of this record of study offers suggestions and provides ideas for teachers to use to help them reflect on their individual students’ attitudes in the classroom to assist them in becoming more mindful as they think about what each and every child in their classrooms may be dealing with.

Additionally, through this case study I revealed the importance of developing a caring relationship with every student before expecting them to perform academically. This can be challenging for many teachers who feel the stress and pressure from their district to meet high academic expectations. But as multiple participants explained in their interview, it was these connections in their lives that motivated them to go back to school after dropping out and to succeed in life. Children are not guaranteed to walk into the classroom with the intrinsic motivation they need to be successful. For many of them, teachers will have to work to plant this seed within their students before they will be able to motivate themselves.

Finally, through this study I demonstrate that social emotional skills are an essential part of development that many children of alcoholics lack, in comparison to average children sitting in most classrooms. Classrooms and schools would benefit significantly from providing regular instruction, discussion, and practice for students to using these skills effectively in life situations. From the student’s perspective, this can possibly have considerably more long-term benefits than just implementing curriculum purely focusing on academic subjects.

Implications for Practice

Implications for the Context

Alcoholism is a widespread illness that thousands of people in the United States suffer from. What makes this illness even worse is that it has drastic potential consequences for not just

the alcoholic, but their entire family. For a vulnerable child, these consequences can change the course of one's life resulting in a myriad of mental ailments, relationship issues, and even long-term problems when attempting to establish a successful career. Historically, the support and treatment available for alcoholics has generally been limited to supporting the recovery of the alcoholic themselves, and very little help has been available for family members (Parr & Richardson, 2006).

The data presented in this case analysis demonstrated that for the six participants interviewed, they received little to no support or educational training throughout their adolescent lives to help them deal with the consequences of living with an alcoholic parent. In today's classroom, even in schools with an increased emphasis on social emotional development, alcoholism and the trauma it can cause is not an integral part of these programs. Through this case study, I attempted to demonstrate that there is a significant need for the children of alcoholic parents to receive support in managing and handling their emotions and stress, protecting their self worth, and learning about healthy relationships. The majority of these children have had to face and to figure things out on their own. Additionally, these individuals are often only able to receive help in adulthood, when and if they seek out this assistance. Even for those that do, it is not always easy to access or affordable. Through this case study, I illustrate children of alcoholics need specific guidance and support designed to help develop and fill the emotional and social gaps that they acquire as a result of living with an alcoholic. Access to this developmental assistance early on could potentially change the course of a child's life and significantly improve their future.

Implications for the Field of Study

The results from this case study highlighted a variety of feelings and attitudes by the participants that are significant to the researchers' field of study. The majority of participants had a negative school experience and several of them had feelings of anger, loneliness, and low self-esteem that interfered with their ability to succeed academically. Many of the participants experienced moments in which they felt unnoticed and unimportant.

The positive moments that were shared by the six participants indicate a desire for recognition, motivation, encouragement, respect, and love. Whenever the participants did reflect on teachers that made a positive impact, all descriptions shared focused on teachers who worked at making sincere connections, took the time to take an interest and get to know their students, and were understanding and did not hold things against them. They described teachers who wanted them there and who cared about them.

In addition, multiple participants shared that their time in school did not prepare them for the "real world" or life after graduation. From their perspective, the academic focus was not applicable or beneficial to the skills they needed to thrive as an adult on their own. In contrast to the majority, however, one participant did enjoy her academic experience and loved school. But unlike the other participants in the study, she regularly received positive affirmations and encouragement the others were lacking. I think these two juxtaposing realities demonstrate an important implication for schools to recognize as the importance of relationships and social emotional development towards student success. Schools need to make time for students to develop their social and emotional skills. Teachers need to realize the impact a true genuine caring relationship and connection can have on a student's life and academic success.

Recommendations for Future Study

This multiple case study provided a very small-scale sample of participants. Of the participants, five were women and only one was male. In addition, all but one of the participants interviewed were between the ages of thirty and forty. Two of the participants had an alcoholic father figure and four of them lived with an alcoholic mother. This limited sample size creates multiple limitations in this study and the data cannot be easily applied to larger groups of a similar population.

Additional research should attempt to gain perspectives from a more varied group of individuals. It would be beneficial to learn more from male perspectives and from a younger age bracket of individuals who have graduated more recently from school. This would help collect data that would more accurately represent current school experiences and possibly the effects of the newer social emotional curriculum.

It would also be beneficial for future researchers to gain data from a variety of voices, not just children of alcoholics. Interviews with school personnel, teachers, and counselors could provide information on experiences they may have encountered in dealing with children of alcoholics or their parents in the school setting. Interviews from children who did not have an alcoholic parent would also be useful in comparing experiences, mental health struggles, and social and emotional issues.

Concluding Thoughts

Children of alcoholics are an overlooked group of children in today's classrooms. The context of their homelife results in many emotional and social consequences that plague these individuals into adulthood. Our inability to accurately identify these children, however, should not deter our efforts or motivation to do so. Despite the challenges in confirming these children,

there are still things educators can do to make a potential difference in their lives. The phenomenal reality is that these methods of support should help improve the lives of all children in the classroom, not just children of alcoholics.

Through this Record of Study I have attempted to provide an insightful look into the lives of six children of alcoholics in the Dallas area. Their lives were each incredibly unique and it has been very interesting to see how each one of them was affected in different and unique yet common ways. What was even more telling, however, is how connected and intertwined their experiences were despite these differences. If the long-term effects of living with an alcoholic overlap so greatly then we must be able to reach and help these children in similar ways through the activities that I have provided in my Handbook for Teachers.

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APPENDIX A

DIVISION OF RESEARCH



NOT HUMAN RESEARCH DETERMINATION

February 18, 2020

| | |
|---------------------|---|
| Type of Review: | Initial Review Submission Form |
| Title: | Developing Resilience in Children of Alcoholics in the Elementary Classroom |
| Investigator: | Mary Margaret Capraro |
| IRB ID: | IRB2020-0116 |
| Reference Number: | 105877 |
| Funding: | |
| Documents Received: | IRB Application (Human Research) - (Version 1.0) |

Dear Mary Margaret Capraro:

The Institution determined that the proposed activity is not research involving human subjects as defined by DHHS and FDA regulations. Data gathering efforts are intended only for the student's record of study and will not yield generalizable data.

Further IRB review and approval by this organization is not required because this is not human research. This determination applies only to the activities described in this IRB submission and does not apply should any changes be made. If changes are made you must immediately contact the IRB about whether these activities are research involving humans in which the organization is engaged. You will also be required to submit a new request to the IRB for a determination.

Please be aware that receiving a 'Not Human Research Determination' is not the same as IRB review and approval of the activity. IRB consent forms or templates for the activities described in the determination are not to be used and references to TAMU IRB approval must be removed from study documents.

If you have any questions, please contact the IRB Administrative Office at 1-979-458-4067, toll free at 1-855-795-8636.

Sincerely,
IRB Administration

750 Agronomy Road, Suite 2701

1186 TAMU
College Station, TX 77843-1186

Tel. 979.458.1467 Fax. 979.862.3176
<http://rcb.tamu.edu>

APPENDIX B

INTERVIEW QUESTIONS

Section 1: Childhood experience outside of school

1. What makes you identify as an adult child of an alcoholic?
2. Can you share some of the challenges you and your family faced regarding your parent's alcoholism?
3. What are some important memories from your childhood?

Section 2: School experiences

4. Can you reflect on your attitude towards school as a child? Did you like school? Why or why not?
5. What are some positive memories you have from elementary school? Negative?
6. Can you tell me about a memorable teacher that had an impact on you?
7. Did you feel noticed or cared about by your teachers growing up? Why or why not?
8. Did your school provide any type of resources, support, or education for dealing with stressful situations?
9. What is something you wish your teachers or school had done more of?

Section 3: Adult life and impact

10. What are some things that happened in school as a child that you think has had an impact on you as an adult?
11. What long lasting effects do you think your parent's alcoholism has had on your adult life?
12. What accomplishments as an adult are you proud of? What do you think may have contributed to this success?

13. How do you typically handle and respond to stressful situations as an adult?

APPENDIX C

PARTICIPANT CONSENT AND INTERVIEW RELEASE FORM

Consent to Take Part in Research

- By signing this document I agree and consent to participate in a research study regarding the development of resilience in children of alcoholics.
- I have had the details of the study explained to me and I have had an opportunity to ask questions about the study.
- I understand that I will be answering questions regarding my upbringing and childhood experiences as a child of an alcoholically abusive home, and that some questions asked or topics discussed may be sensitive to talk about.
- I understand that I can withdraw from participating at any time and refuse to answer any questions.
- I understand that the interview will be recorded and the conversation will be transcribed.
- I understand that my identification will remain anonymous.
- I understand that I can contact the researcher at any time with questions about the study.
- I understand that results of this study may be published and used to further educate stakeholders related to the study.

Name of participant _____

Signature of participant _____ Date _____

Signature of researcher _____ Date _____

APPENDIX D

Helping and Supporting Children of Alcoholically Abusive Households in the School Setting

What is a child of an alcoholic (COA)?

A child of an alcoholic is any child that lives with at least one parent who abuses alcohol at home. These children often suffer from more abuse, experience more trauma, and suffer from more social and emotional issues than children who do not live with an alcoholic.

Why is this important to me as an educator?

Alcohol is one of the most common types of substance abuse. According to the National Institute for Alcohol Abuse and Alcoholism (NIAAA) one in every four US children will be exposed to parental alcohol abuse in their lifetime. In the wake of the recent COVID-19 pandemic, these numbers will likely continue to grow as depression and mental health issues among adults increase. This means that within your classroom, you will likely serve multiple children dealing with the consequences of having an alcoholic parent at home. These children are likely to face many challenges and obstacles that could significantly impact their ability to do well in school.

What does a child of an alcoholic look like in my classroom?

Children of alcoholics range from the people pleasers who crave attention and approval, to the quiet and uninterested, to the class clown who constantly needs redirection. However, there are common characteristics that are often associated with COAs. Oftentimes these students suffer from depression, anxiety, low self-esteem, may be frequently absent, struggle academically, be hesitant to participate in class, and struggle to make and keep friends.

Why is this so important?

As educators, our job is to educate and support the needs of the whole child. This includes their social and emotional needs. For many children in our classroom, especially COAs, their social and emotional needs are greater than other students'. We cannot expect them to be able to focus in class and perform well without first receiving support for their mental wellbeing. If this is important to you and you would like to learn more ways to help these children from within the walls of your classroom, then please explore the information on the following pages.

Connections to the Classroom

Identifying stress levels within your own classroom

Look at the list of ways COAs may present themselves in your classroom. For each bullet, think about whether you have anyone in your classroom that exhibits that characteristic. If you do, put a checkmark.

To take things even further, write the first names or initials of any students that come to your mind next to each item.

It is important to note that while we cannot confirm whether any of our students are a COA, this exercise can give us more insight into the stress levels present in our classroom and what support our students may need. Even if a child is not a COA, if they are struggling with any of these items then they may benefit from the suggestions within this handbook. You may notice that one or a few students come to mind in multiple bullets. Please note, however: *Just because a child has one or some of the characteristics below does not mean that they live in an alcoholically abusive household.*

Signs a child could be dealing with an alcoholic parent at home:

- Physical signs of neglect including dirty clothes, lack of materials or school supplies
- Unusually depressed or lethargic
- High levels of anxiety, may worry about unnecessary things
- Easily stressed by changes to the classroom routine or environment
- Struggles to share emotions
- Struggles to control emotions or respond appropriately
- Frequently absent
- Frequently “in trouble” or off task
- Frequently disappointed in themselves
- Reluctant to discuss/share about family activities or events
- Sleepy or low energy
- Few friends
- Struggles to get along with classmates
- Struggles with conflict resolution
- Failure to complete homework or get materials signed at home
- Low or very high academic achievement (low is more common)
- Low self esteem/insecure
- Low class participation

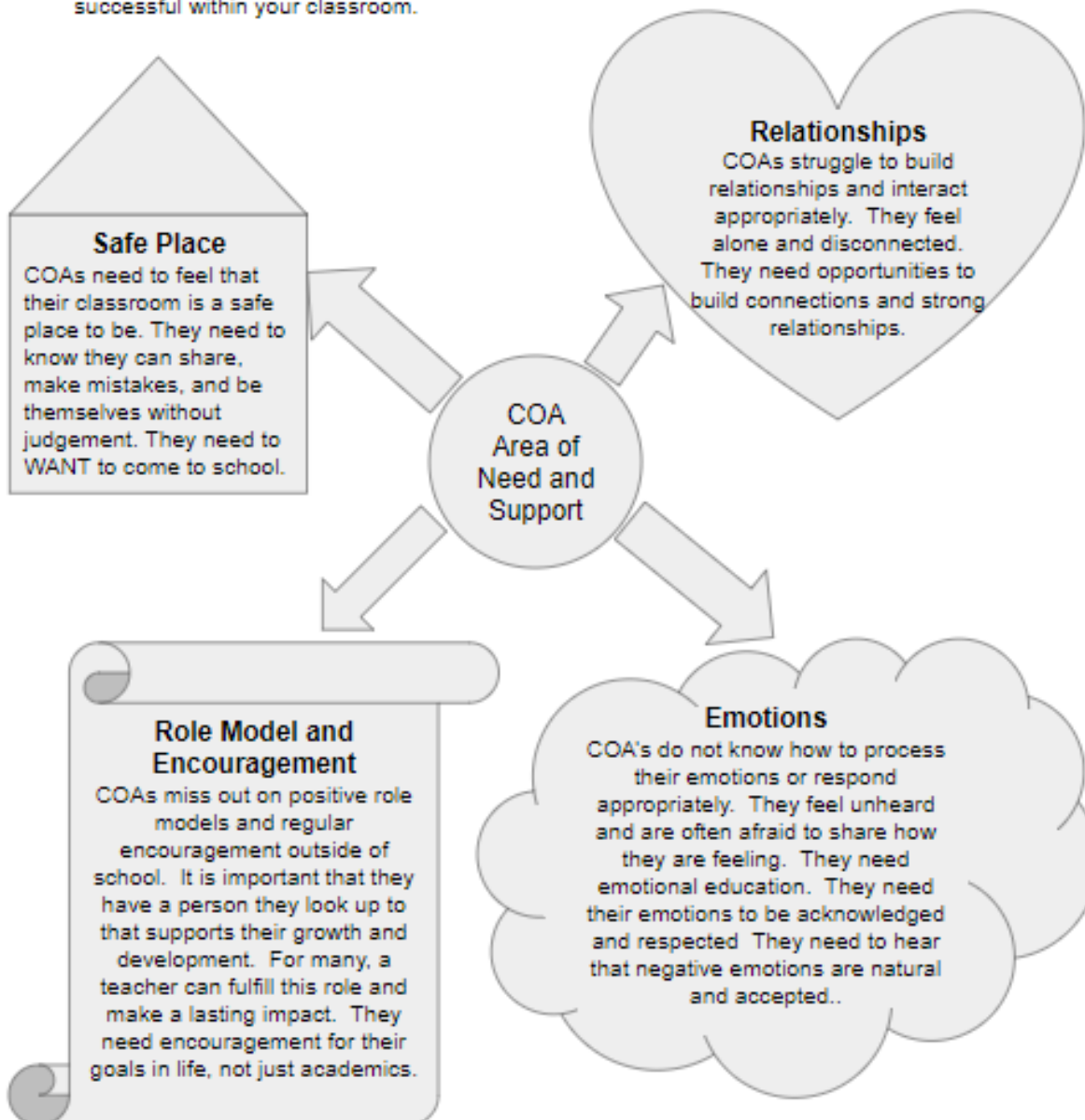
Reflection Exercise

By now, you may have one or more students at the forefront of your thoughts. Take a minute to really think about how you typically respond to this student in the classroom. Are you patient? Do you ever get frustrated at their behavior or lack of progress? Jot some thoughts below:

What COAs Need to Be Successful

Social and Emotional Gaps

COAs often need extra support in the development of their social and emotional needs to fill gaps that were created by their traumatic experiences outside of school. This page highlights four key areas that you can provide support for within your classroom. As an educator, you likely already work hard to support students in your classroom. This guide is intended to increase your mindfulness and awareness that these students typically need more patience, guidance, and support than the average student in order to be successful within your classroom.



Ways to Support COAS

Providing Support for Students Within Your Classroom

For each area, look at the recommendations and examples. Jot down ideas you believe may benefit specific students in your classroom, which you could implement without any further support. Remember that these suggestions would benefit all children, but COAs need these supports more often than the average student.

| Creating a Safe Place | How This Could Look in My Own Classroom |
|------------------------------|--|
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| <ul style="list-style-type: none"> ● Greet students by name, every day. ● Set reminders to intentionally check in with specific students and ask them how they are doing. Really listen. ● Set reminders to intentionally let students know you are glad they are here. Target specific students and do it frequently. ● Create a calm-down area or place students can be by themselves. ● Allow students privacy and space when they are upset or overwhelmed. ● Provide one-on-one feedback and avoid redirecting or confronting a student in front of peers. ● Use positive reinforcement. ● Make time to be silly. Incorporate jokes, memes, etc. ● Be mindful that not all students will want to share about their family. | |
|--|--|

Ways to Support COAS

Providing Support for Students Within Your Classroom

For each area, look at the recommendations and examples. Jot down ideas that you think of that may benefit specific students in your classroom that you could implement without any further support. Remember that these suggestions would benefit all children, but COAs need these supports more often than the average student.

| Building Relationships and Connections | How This Could Look in My Own Classroom |
|--|---|
| <ul style="list-style-type: none"> ● Great students by name each day. ● Conduct student interest and check-in surveys, ● Create a questions, comments, and concerns box. ● Ask students how they are doing, and really listen. ● Incorporate non-academic conversations with students about their interests. ● Share personal stories. ● Attend student events (plays, sport games, etc.). ● Have regular morning meetings to get to know students and their interests. ● Write individual encouraging notes. ● Give students choices. | |

Ways to Support COAS

Providing Support for Students Within Your Classroom

For each area, look at the recommendations and examples. Jot down ideas that you think of that may benefit specific students in your classroom that you could implement without any further support. Remember that these suggestions would benefit all children, but COAs need these supports more often than the average student.

| Being a Great Role Model and Providing Positive Encouragement | How This Could Look in My Own Classroom |
|--|--|
| <ul style="list-style-type: none"> ● Find ways to provide sincere compliments (academic and non-academic) to students, regularly. ● Share personal stories and “be real” with students. Show them you are vulnerable too. ● Acknowledge that sometimes bad things happen, and it is okay to be upset. ● Share (respectfully and appropriately) if you are tired, frustrated, or having a bad day. ● Find ways to show students that you care about them and that they are important, individually. ● Talk respectfully to students, regardless of how they are talking to you. ● Give examples of different futures they can work toward. | |

Ways to Support COAS

Providing Support for Students Within Your Classroom

For each area, look at the recommendations and examples. Jot down ideas that you think of that may benefit specific students in your classroom that you could implement without any further support. Remember that these suggestions would benefit all children, but COAs need these supports more often than the average student.

| <p style="text-align: center;">Acknowledgement of Emotions and Emotional Education</p> | <p style="text-align: center;">How This Could Look in My Own Classroom</p> |
|---|---|
| <ul style="list-style-type: none"> ● Include morning meetings that focus on specific emotions. ● Model lessons (even in older grades) of how to respond to and handle different emotions. ● Create a “chill zone” or calm-down area for students to be alone. ● Acknowledge students when they are upset or frustrated, and never make them feel badly about having those emotions. ● Incorporate role playing to model the correct and incorrect way to respond to different situations. ● Have students identify the emotions they are feeling (provide sentence stems). ● Provide quick “journaling” opportunities for students to privately and safely share how they are feeling. | |

Student Check-In

Regularly Checking in With Students

Checking in with students regularly is easier said than done. Think of the students you are most concerned about, who are the quietest, get into more trouble, or who you just haven't been able to reach or build a strong relationship with. Use this form and keep it somewhere easy to find, to remind yourself to check in with them on a regular basis.

| Student Name | | | | |
|---------------------|---------------------------------|-------------------------------|--------------------------------|---------------------------------|
| Week of | Ask “How are you doing?” | Positive Encouragement | Non-academic Compliment | Engage in a Conversation |
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| Student Name | | | | |
| Week of | Ask “How are you doing?” | Positive Encouragement | Non-academic Compliment | Engage in a Conversation |
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Student Check-In

Regularly Checking in With Students

Here is a blank version of the previous form in case you would like to customize it for your needs.

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Student Interest Survey

How well do I really know my students?

Use this form to jot down what you know about your students outside of academics. It can be eye opening to see how much you know about one student versus another. Use this to guide you in determining your weak and strong classroom relationships.

| Student Name | What do I know? (Interests, family life outside of school, etc.). |
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