A DESCRIPTIVE STUDY TO ASSESS THE SELF-ESTEEM AMONG ADOLESCENTS OF ALCOHOLIC PARENTS, WHO ARE RESIDING IN SELECTED URBAN AREAS AT KOLHAPUR, MAHARASHTRA

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DOI: http://doi.org/10.47211/idcij.2021.v08i02.008

ABSTRACT

Alcoholism is seen as the world's highly prevalent public health problem and it is a matter of serious concern not confined to any group culture/country. Alcohol and drug abuse has been showing an increasing trend in India. Global states report on alcohol reported that annual prevalence of drinking among adult males in India is 21.4%. Report revealed that among the total drug uses alcohol (43%) was the most commonly used drug.

Alcoholism is also known as a family disease. Each member of the family may be affected by alcohol differently. Parental alcoholism also has severe effects on normal children of alcoholics. Many of these children have common symptoms such as low self-esteem, loneliness, guilt, feelings of helplessness, fears of abandonment, and chronic depression. Studies have shown that children of alcoholics feel that they are different from other people; they develop a poor self-image, in which they closely resemble their alcoholic parents and the teenage children of alcoholics may develop phobias. Hence there is a need to assess the Self-Esteem among adolescents of alcoholic parents, who are residing in selected urban areas at Kolhapur. The objectives of the study are to assess the self-esteem among adolescents of alcoholic parents and to determine the association between self-esteem among adolescents of alcoholic parents with selected demographic variables. Methods: The sample for the present study included 100 adolescents of alcoholic parents, who are residing in selected urban areas at Kolhapur. To select the samples, non-probability purposive sampling method was used. The reliability of the tool was established and the data was collected by using modified self-esteem scale with 35 statements and based on demographic data. Results: The result also reveals that majority (96%) of the adolescents had moderate level of Self-Esteem, 4% had poor level of Self-Esteem and no one had optimal level of Self-Esteem. The Chi-square values indicate that there was a significant association between the level of Self-Esteem scores of adolescents with family income (calculated value 33.297 is more than table value 12.838 at 0.05 levels). Interpretation and Conclusion: Overall findings showed that, majority (96%) of the adolescents had moderate level of Self-Esteem, 4% had poor level of Self-Esteem and no one had optimal level of Self-Esteem. The Chi-square values indicate that there was a significant association between the level of Self-Esteem scores of adolescents with family income (calculated value 33.297 is more than table value 12.838 at 0.05 levels).

***Key words**: Assess; Self-Esteem; Adolescents; Alcoholic Parents; Urban Areas*

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INTRODUCTION

Alcohol use may harm not only the individual drinker but also the lives of their partners, families, friends, work colleagues, and their communities. It has become a matter of global concern because of impact on social and economic burden in societies. The World Health Organization (WHO) estimates that there are around 3.3 million deaths worldwide per year because of harmful use of alcohol. Alcohol related deaths make up nearly 6% of global deaths per year.[1]

A considerable amount of research has examined the impact of parental alcohol misuse on children's development. Parental alcoholism was found to be statistically significantly associated with a child harm outcome measure in almost two of every three published studies.[2] It has been projected that 10% of US children is exposed to alcohol abuse or dependence in the family.[3] The 30% of children lived with at least one binge drinking parent in UK.[4] About 12% of parents/carers stated that one or more of their children had been physically hurt, emotionally abused, or exposed to domestic violence because of others' drinking in Australia.[5] The children of alcoholics (COAs) suffer from a wide range of psychosocial problems.[6]

In the life cycle of a homosapien organism, adolescence is a period of transition from childhood to adulthood. It is characterized by rapid physical, biological and hormonal changes resulting in to psychosocial, behavioral and sexual maturation between the age of 10-19 years in an individual. Adolescence is often described as a phase of life that begins in biology and ends in society. It means that physical and biological changes are universal and take place due to maturation, but the psychosocial and behavioral manifestations are determined by the meaning given to these changes within a cultural system. The experience of adolescents during teen years would vary considerably according to the cultural and social values of the network of social identities they grow in.[7]

The rapidly changing social, political and economical scenario in the world has not left Indian family untouched. It is going through structural and functional modifications that have a bearing on adolescent's socialization and parent child relations. The need for differential values, competencies and coping styles between parents and adolescents are a source of anxiety and stress both for adolescents and parents.[8]

Self-esteem refers to how much a person likes (esteems) herself or himself. Some behaviors strongly suggest high or low self-esteem; for example, a person with high self-esteem is unlikely to attempt suicide. Adolescents have varying levels of self-esteem, which appears to be influenced by such factors as gender, ethnicity, and social class. It can also vary within an individual an adolescent may have different levels of self-esteem in different domains such as social, scholastics, athletics, appearance, and general conduct and actions.[9]

Alcoholism in family systems refers to the conditions in families that enable alcoholism, and the effects of alcoholic behavior by one or more family members on the rest of the family. Mental health professionals are increasingly considering alcoholism and addiction as diseases that flourish in and are enabled by family systems.[10]

Children of alcoholics exhibit symptoms of depression and anxiety more than children of non-alcoholics. COAs have lower self-esteem than non-COAs from childhood through young adulthood. Children of alcoholics show more symptoms of anxiety, depression, and externalizing behavior disorders than non-COAs. Some of these symptoms include crying, lack of friends, fear of going to school, nightmares, perfectionism, hoarding, and excessive self-consciousness.[11]

A study conducted in U.K regarding parental alcoholism and child psychopathology revealed that adolescents also experience problems that have been assumed to be related to parental alcoholism, includes school related problems, problems with police and courts, early marriage and unwanted pregnancies, as well as high incidence of alcohol and substance abuse. Identified behavioral problems among adolescent offspring's in alcoholic families include running, impaired emotional functioning such as poor academic achievements and school problems and conduct problems such as aggression, lying, stealing.[12]

NEED FOR THE STUDY

Adolescence is also a stage when young people extend relationships beyond their parents and family. It is a time of intense influence of peers, and the outside world in the society. A desire to experiment and explore can manifest in a range of behaviors exploring sexual relationships, alcohol, tobacco and other substances abuse. The anxiety and stress associated with achievement failure, lack of confidence etc are likely to lead to depression, anger, violence and other mental health problems. Adolescents as they mature cognitively, the mental functioning process becomes analytic, capable of abstract thinking leading to articulation and independent ideology. These are truly the years of creativity, empathy, idealism and with bountiful spirit of adventure. Thus, if nurtured properly youth can be mobilized to contribute significantly to national development.[13]

Adolescents will feel better about themselves if they experience success in domains they care about and are praised for that success by people they respect. Relationships with parents and relationships with peers are two important sources of social support that contribute to adolescents' self-esteem . Another approach is to heighten adolescents' appreciation of domains in which they are successful, reducing the impact of disappointment in other domains.[14]

Parental alcoholism also has severe effects on normal children of alcoholics. Many of these children have common symptoms such as low self-esteem, loneliness, guilt, feelings of helplessness, fears of abandonment, and chronic depression Adult children of alcoholics (ACOAs) often don't relate their problems to having grown up in a family with an alcoholic parent. Many of them have problems of depression, aggression, or impulsive behavior. Some studies have shown that ACOAs have problems with abuse of different psychoactive substances, and difficulty in establishing healthy relationships with others. They are frequently failures as parents themselves, often make poor career choices, and almost all ACOAs have a negative self-image. Adult children of alcoholics often have feelings of worthlessness and failure. They also may have problems with family responsibility because their alcoholic parent was irresponsible and didn't provide them with basic children's needs.[15]

A study was conducted in India regarding the association between alcohol use of parents and offspring in data derived from a district based household survey on drug abuse. Data were collected from 4411 fathers paired with 6884 offspring. Alcohol use disorders were diagnosed based on DSM-III-R criteria. Analyses was conducted to contrast 1979 offspring of alcohol using fathers (AU+ [n=1246]) with 4885 offspring of non alcohol using fathers (AU− [n=3170]). The results revealed that 10% of offspring of AU+ fathers used alcohol compared to 3.7% offspring of AU- fathers. The offspring of AU+ fathers had higher odds for alcohol use (OR= 2.9, 95% CI=2.4 –3.6) and tobacco use (OR= 1.5, 95% CI=1.3–1.8) (past 30 days) compared to offspring of AU- fathers. The study concluded that Offspring of alcohol using fathers are a risk group for alcohol use.[16]

A study was conducted in U.K on children with alcohol misusing parents revealed increased risk of co morbidity for other psychiatric disorders and cognitive deficits as well as substance abuse. Neuropsychological effects of maternal alcohol consumption in pregnancy are more common than previously thought and paternal alcohol abuse may contribute to fetal damage. Family functioning is severely affected and COAs are at risk for child abuse though the strength of the association needs clarifying. Family drinking patterns are associated with teenage alcohol abuse and early induction increases the risk of addiction. COAs have raised morbidity rates for emotional and behavioral disturbance with impact on the developing child and separate prognostic significance for future adult morbidity other than alcoholism.[17]

A study was conducted in peru regarding the interpersonal and emotional consequences of being an adult child of an alcoholic. The study revealed that children's are also at risk when their parents have unrealistic child rearing attitudes or expectations for them. Alcoholic parents with little understanding of normal child development for instance, view naughty behavior as Childs deliberate attempt to get them. They may expect their child to respond in far more mature ways than is developmentally possible.[18]

In the present study the investigator would like to assess the self esteem of adolescents whose parents are alcoholic. In the field of preventive psychiatry as well as community mental health nursing there is presently a growing interest in research and issues concerning adolescents who are likely to be casualties due to constitutional or environmental reasons. Adolescents represent the most important assets and wealth of a nation, the wealth that need to be protected and nurtured. The family, community and country has an important responsibility in the well-being of adolescents, especially those who are at risk/vulnerable due to the irresponsible behavior of their parents.

Methods

The sample for the present study included 100 adolescents of alcoholic parents, who are residing in selected urban areas at Kolhapur. To select the samples, non-probability purposive sampling method was used. The reliability of the tool was established and the data was collected by using modified self-esteem scale with 35 statements and based on demographic data.

Results

The result also reveals that majority (96%) of the adolescents had moderate level of Self-Esteem, 4% had poor level of Self-Esteem and no one had optimal level of Self-Esteem. The Chi-square values indicate that there was a significant association between the level of Self-Esteem scores of adolescents with family income (calculated value 33.297 is more than table value 12.838 at 0.05 levels).

Part I: Description of demographic variables of adolescents.

Table 1: Frequency and percentage distribution of sample according to demographic characteristics

n = 100

Sr. No	Variable	Frequency (f)	Percentage (%)
1.	**Age**		
	16 yrs	19	19%
	17 yrs	22	22%
	18 yrs	34	34%
	19 yrs	25	25%
2.	**Gender**		
	Male	64	64%
	Female	36	36%
3.	**Religion**		
	Hindu	53	53%
	Muslim	28	28%
	Christian	12	12%
	Others	7	7%
4.	**Family Income Per Month**		
	Less than 10,000	11	11%
	10,000 – 20,000	38	38%
	20,000 – 30,000	48	48%
	Above 30,000	03	3%
5.	**Father's Education status**		
	Illiterate	14	14%
	Primary	16	16%
	Secondary	21	21%
	Higher Secondary	28	28%
	Undergraduate	15	15%
	Post graduate	06	6%
6.	**Mother's Education Status**		
	Illiterate	15	15%
	Primary	25	25%
	Secondary	36	36%
	Higher Secondary	17	17%
	Undergraduate	7	7%
	Post graduate	0	0%
7.	**Father's Occupation Skilled**		
	Skilled Labour	35	35%
	Business	19	19%
	Private Sector	25	25%
	Public Sector	16	16%
	Unemployed	5	5%
8.	**Mother's Occupation Status**		
	Skilled Labour	15	15%
	Business	4	4%
	Private Sector	5	5%
	Public Sector	12	12%
	House wife	64	64%
9.	**Types Of Family**		
	Nuclear	47	47%
	Joint	43	43%
	Extended	10	10%
10.	**Birth Order**		
	First Child	28	28%
	Second Child	58	58%
	Third Child	14	14%
11.	**History Of Mental Illness In Family**		
	Yes	15	15%
	No	85	85%

Part II: Assessment of the level of Self-Esteem among adolescents.

The assessment related to the level of Self-Esteem among adolescents was assessed using Modified Self-Esteem Scale.

Section A: Analysis of the level of Self-Esteem among adolescents.

In order to assess the level of Self-Esteem among adolescents, percentage scores were graded arbitrarily as follows: Poor Self-Esteem (35 - 70), Moderately Self-Esteem = (71 - 105), Optimal Self-Esteem = (106 - 140).

Table 2: Frequency and percentage distribution of the adolescents according to the level of Self-Esteem.

n = 100

Level of Self-Esteem	Range of score	Frequency (f)	Percentage (%)
Optimal Self-Esteem	106 - 140	-	-
Moderately Self-Esteem	71 - 105	96	96%
Poor Self-Esteem	35 - 70	04	4%

Data in Table 2 and Figure 1 show that majority (96%) of the adolescents had moderate level of Self-Esteem, 4% had poor level of Self-Esteem and no one had optimal level of Self-Esteem.

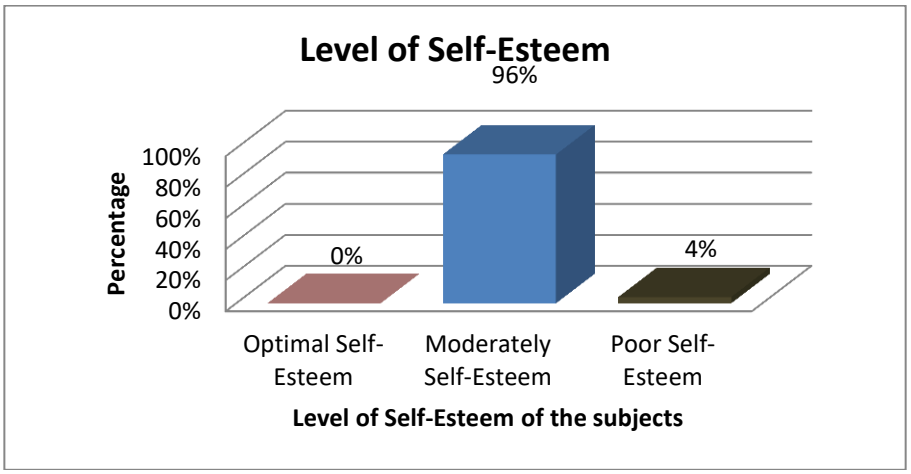

Figure 1: Bar diagram showing the distribution of the subject according to the Level of Self-Esteem.

Part III: Association between the level Self-Esteem scores with selected demographic variables among adolescents.

Table 3: Association between the level Self-Esteem scores with selected demographic variables among adolescents.

n = 100

Sr. No	Demographic variables	df	Calculated value (χ^2)	Table value	Inference
1.	Age	3	7.528	12.838	NS
2.	Gender	1	2.751	7.879	NS
3.	Religion	3	0.899	12.838	NS
4.	Family Income	3	33.297	12.838	S
5.	Father's Education	5	3.584	16.750	NS
6.	Mother's Education	4	1.995	14.860	NS
7.	Father's Occupation	4	7.826	14.860	NS
8.	Mother's Occupation	4	6.006	14.860	NS
9.	Type of family	2	0.472	10.597	NS
10.	Birth Order	2	1.350	10.597	NS
11.	History of Mental Illness	1	0.327	7.879	NS

NS = Not Significant S = Significant

The data presented in Table 3 shows that the obtained Chi-square values indicate a significant association between the level of Self-Esteem scores of adolescents with family income (calculated value 33.297 is more than table value 12.838 at 0.05 levels). But there is no significant association between the level of Self-Esteem scores of adolescents and other demographic variables such as age, gender, religion, father's education, mother' education, father's occupation, mother's occupation, type of family, birth order and history of mental illness. However, the above finding reveals that there was association between the level of Self-Esteem scores of adolescents with family income. So the hypothesis (H_1) was accepted.

DISCUSSION

The purpose of this study was to assess the Self-Esteem among adolescents of alcoholic parents, who are residing in selected urban areas at Kolhapur.

The findings of the study were discussed in the light of previous studies.

The results are discussed in relation to objectives of the study under the headings as indicated in the result chapter.

1. Description of demographic variables of adolescents.
2. Assessment of the level Self-Esteem among adolescents.
3. Association between the level Self-Esteem scores with selected demographic variables among adolescents.

1. Demographic Characteristics

Demographic characteristics reveal that the majority of respondents (34%) belonged to the age group of 18 years, whereas 25% belonged to 19 years, 22% belonged to 17 years and 19% belonged to 16years. With regard to gender, majority of respondents (64%) were male and 36% were female. Most of the Adolescents (53%) belonged to Hindu religion and 28% belonged to Muslim, 12% belonged to Christians and 7% belonged to others.

The majorities (47%) of adolescents were from Nuclear family, 43% from Joint family and 10% are from extended type of family. The Father's education status the majority (28%) is from higher secondary, 21% secondary education, 16% Primary education, 15% is undergraduate, 14% illiterate and 6% Post Graduate. The Mother's education status majority (36%) is from secondary education, 25% primary education, 17% higher secondary, 15% illiterate, 7% Undergraduate and no any post graduate education status of mothers.

In father's occupation status the majority of (35%) are skilled labor, 25% are from Private Sector, 19% from business, 16% from public sector and 5% are unemployed. In mother's occupation status the majority (64%) is from housewife, 15% skilled labor, 12% are from public sectors, 5% are from private sector and 4%from business sector. In birth order the majority (58%) of second child, 28% first child and 14% are third child & above.

The majority of adolescent's family income per month (48%) is 2000-30,000, 38% is 1000-20,000, 11% are less than 10,000 and 3% are above 30,000. The majority (85%) of adolescents is no of history of mental illness in family and 15% of adolescents have history of mental illness in family.

A study with similar findings was conducted in India regarding Depression and Self Esteem of Children of Alcoholics by Sex and Age The sample was drawn from a state college and a public elementary school. The groups were > 18 yrs and >18 yrs. Overall there were 30 >18yrs and 26 <18 yrs. There were 25 males and 31 females. The category of older than 18 yrs was almost twice as likely to be depressed; >18yrs = 5.20 where <18 yrs =2.73. The study concluded that Children of alcoholics 1.44 % points lower in self esteem than children of non alcoholic.[21]

2. Assessment of the level Self-Esteem among adolescents.

The result also reveals that majority (96%) of the adolescents had moderate level of Self-Esteem, 4% had poor level of Self-Esteem and no one had optimal level of Self-Esteem.

Similar finding was reported by the study to assess the Depression and Self Esteem of Children of Alcoholics by Sex and Age. The sample was drawn from a state college and a public elementary school. The groups were > 18 yrs and >18 yrs. Overall there were 30 >18yrs and 26 <18 yrs. There were 25 males and 31 females. The tools used were Beck Depression Inventory and the Rosenberg Self Esteem Scale. The result indicates that the category of older than 18 yrs was almost twice as likely to be depressed. The study concluded that Children of alcoholics 1.44 % points lower in self esteem than children of non alcoholic.[21]

A study with contradictory findings was conducted to assess the manifestation of self-esteem and adjustment in a group of fifty adolescent children of alcoholics (COAs) and a matched reference group of adolescent children of non-alcoholics (nCOAs).The scales used were The Self esteem Index and Adjustment Inventory were the instruments administered. The data revealed lower self-esteem and poor adjustment in all domains studied, in the adolescent COAs than the controls.[20]

3. Association between the level Self-Esteem scores with selected demographic variables among adolescents.

The present study finding reveals that there was a significant association between the level of Self-Esteem scores of adolescents with family income (calculated value 33.297 is more than table value 12.838 at 0.05 levels). But there is no significant association between the level of Self-Esteem scores of adolescents and other demographic variables such as age, gender, religion, father's education, mother' education, father's occupation, mother's occupation, type of family, birth order and history of mental illness. However, the above finding reveals that there was association between the level of Self-Esteem scores of adolescents with family income. So the hypothesis (H_1) was accepted.

A study with contradictory findings was conducted to investigate the influence of parental alcohol abuse on the self-esteem of secondary school students in Kosirai Division, Nandi North District, Kenya. The results of the study showed that students who reported parental alcohol abuse had significantly lower self-esteem than those who did not. The study therefore concluded that parental alcohol abuse negatively influenced the self-esteem of students. When comparisons were made on the basis of gender, the girls were found to be more negatively influenced more than the boys.[19]

CONCLUSION

The following conclusions are drawn from the study:

Majority of the adolescents participated in the study have gave free and frank responses regarding Self-Esteem. The study was based on the Self-Esteem of adolescents of alcoholic parents. It provides a comprehensive frame work for assessment of self-esteem among adolescents.

The research approach used is descriptive survey and the samples were selected by using non-probability purposive sampling technique. Data was collected by means of modified self-esteem scale and analyzed, interpreted by applying statistical methods.

The findings of the study are as follows:

Demographic characteristics reveal that the majority of respondents (34%) belonged to the age group of 18 years, whereas 25% belonged to 19 years, 22% belonged to 17 years and 19% belonged to 16years. With regard to gender, majority of respondents (64%) were male and 36% were female. Most of the Adolescents (53%) belonged to Hindu religion and 28% belonged to Muslim, 12% belonged to Christians and 7% belonged to others.

The majorities (47%) of adolescents were from Nuclear family, 43% from Joint family and 10% are from extended type of family. The Father's education status the majority (28%) is from higher secondary, 21% secondary education, 16% Primary education, 15% is undergraduate, 14% illiterate and 6% Post Graduate. The Mother's education status majority (36%) is from secondary education, 25% primary education, 17% higher secondary, 15% illiterate, 7% Undergraduate and no any post graduate education status of mothers.

In father's occupation status the majority of (35%) are skilled labor, 25% are from Private Sector, 19% from business, 16% from public sector and 5% are unemployed. In mother's occupation status the majority (64%) is from housewife, 15% skilled labor, 12% are from public sectors, 5% are from private sector and 4%from business sector. In birth order the majority (58%) of second child, 28% first child and 14% are third child & above.

The majority of adolescent's family income per month (48%) is 2000-30,000, 38% is 1000-20,000, 11% are less than 10,000 and 3% are above 30,000. The majority (85%) of adolescents is no of history of mental illness in family and 15% of adolescents have history of mental illness in family.

The result also reveals that majority (96%) of the adolescents had moderate level of Self-Esteem, 4% had poor level of Self-Esteem and no one had optimal level of Self-Esteem.

The Chi-square values indicate that there was a significant association between the level of Self-Esteem scores of adolescents with family income (calculated value 33.297 is more than table value 12.838 at 0.05 levels). But there is no significant association between the level of Self-Esteem scores of adolescents and other demographic variables such as age, gender, religion, father's education, mother' education, father's occupation, mother's occupation, type of family, birth order and history of mental illness. However, the above finding reveals that there was association between the level of Self-Esteem scores of adolescents with family income. So the hypothesis (H_1) was accepted.

Interpretation and Conclusion

Overall findings showed that, majority (96%) of the adolescents had moderate level of Self-Esteem, 4% had poor level of Self-Esteem and no one had optimal level of Self-Esteem. The Chi-square values indicate that there was a significant association between the level of Self-Esteem scores of adolescents with family income (calculated value 33.297 is more than table value 12.838 at 0.05 levels).

Implications of the Study

The findings of the study have implications for the nursing profession. The implications have been written under the following headings, nursing practice, nursing administration, nursing education, nursing research and general education in schools and colleges.

General Education in Schools and Colleges

1. Schools and colleges may include importance of self-esteem in the curriculum.
2. Seminars and discussions on importance of self-esteem need to be organized.

REFERENCES

1. World Health Organization. Global status report on alcohol and health-2014. Availablefrom:http://apps.who.int/iris/bitstream/10665/112736/1/9789240692763_eng.pdf. [Last accessed on 2018 Aug 22].
2. Rossow I, Felix L, Keating P, McCambridge J. Parental drinking and adverse outcomes in children: A scoping review of cohort studies. Drug Alcohol Rev 2016;35:397–405.
3. Substance Abuse and Mental Health Services Administration (SAMHSA). Children of alcoholics: A guide to community action, 2012. Available from: https:// store.samhsa.gov/shin/content/MS939/MS939.pdf. [Last accessed on 2018 Aug 22].
4. Manning V, Best DW, Faulkner N, Titherington E. New estimates of the number of children living with substance misusing parents: Results from UK national household surveys. BMC Public Health 2009;9:377.
5. Laslett AM, Room R, Ferris J, Wilkinson C, Livingston M, Mugavin J. Surveying the range and magnitude of alcohol's harm to others in Australia. Addiction 2011; 106:1603-11.
6. Geschiere ME, Spijkerman R, Glopper AD. Risk of psychosocial problems in children whose parents receive outpatient substance abuse treatment. Int J Child, YouthFam Stud 2017;8:11–36.
7. Sharma N. Identity of the adolescent girl. New Delhi: Discovery Publishing [serial online] 1996 November 28 [cited2010November20].
8. Available from URL: http://www.whoindia.org/LinkFiles/Adolescent Health and Development (AHD) UNFPA Country Report.pdf
9. Verma S, Saraswathi TS. Adolescence in India: An annotated bibliography. Rawat Publications Jaipur and New Delhi. 2002.
10. Kolins. Research facts and findings, Adolescents self esteem[serial online] 2009 June[cited 2010 November 23]
11. Available from URL: http://www.actforyouth.net/documents/june_self_esteem.pdf
12. Crnkovic A, Elaine, Delcampo, Robert L. A Systems Approach to the Treatment of Chemical Addiction. Contemporary Family Therapy. 1998; 20 (1): P:25–36.
13. Sher, Kenneth J. Psychological Characteristics. Children of alcoholics. United States: University of Chicago Press; 1991.
14. West MO, Prinz RJ. Parental alcoholism and child psychopathology. psychological bulletin. 102: p: 204-218.
15. Government of India. Indian country paper. Paper presented at the South Asia Conference on Adolescents. New Delhi, India; July 1998.
16. Harter S. Identity and self development. At the threshold: The developing adolescent. Cambridge , Harvard University Press. 1990.p: 352-387
17. Berger G. Alcoholism and the family. U.S Department of Health and Human Services and SAMHSA's National Clearinghouse for Alcohol and Drug Information. [serial online] 2003October15,[cited nov 16]:p:67.availiablefrom:URL:
18. http://www.health.org/nongovpubs/coafacts
19. Chopra A, Dhawan A, Sethi H, Mohan D.Association between parental and offspring's alcohol use – population data from India J. Indian Assoc.[serial online] 2008[cited Dec6]; 4(2):38-43.Available from :URL: http://www.jiacam.org/0402/
20. Zeitlin H, Bull M Children with alcohol misusing parents [serial online] 1994[cited 2010october28];50(1):139-151
21. Availablefrom:URL:http://bmb.oxfordjournals.org/content/50/1/139.abstract
22. Black C, Bucky SI, Wilder P. the interpersonal and emotional consequences of being an adult child of an alcoholic, International journal of addiction .2002; 2:p: 213-231
23. Evelyn Kanus. Differences in Self-Esteem Scores of Students Whose Parents Abuse Alcohol and Those Who Do Not in Kosirai Division, Nandi North District, Kenya. International Journal of Humanities and Social Science Vol. 4 No. 5; March 2014
24. Stanley S., Vanitha C. (2008). Psychosocial Correlates in Adolescent Children of Alcoholics Implications for Intervention. International Journal of Psychosocial Rehabilitation.2008: 12 (2):p: 67-80.
25. Kelly B, Hoecker BS. Depression and self esteem of alcoholics by sex and age
26. BJ Psych [serial online] 2004Feb[cited2010Dec3];157(2):p:25561. AvailablefromURL:http://www.psychosocial.com/IJPR_12/Psychosocial_Correlates_in_Alolescents_Stanley.html