CHAPTER VI

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Lack of affection, love, care and proper nurture from the parents and family members is one of the most important contributing factor for the increasing rate of many unwanted social problems. There had been unprecedented awareness of the effects parental addiction could play on the growth and developmental of their children.

Children of drug addicts or alcoholics who were commonly given minimum guidance in developing a socially approved pattern of behaviour leads to confusion and insecurity on the part of the child due to extreme leniency of the parents and also due to the wrong example set by the role model or the parental figure. As a result, he or she tended to be fearful, anxious, excessively aggressive, resentful and whimsical. It ultimately leads to a sense of dejection and frustration. Due to lack of proper and acceptable parental guidance, the child often indulges in activities, which, though permitted at home, were not approved by others outside his or her home.
Others often reject him for his or her immature, inadequate and deviant behaviour thus causing poor personal, social and emotional adjustment in later years which results in poor interpersonal relationships with others throughout. In the substance abusing family, the volatile and immature behavior of intoxicated parents creates confusion about appropriate boundaries in interpersonal roles. As there are no models of rational or predictable behavior, there is breakdown of honest communication, a lack of emotional stability and nurturing by the parents, and a lack of safety that would permit trust, self-disclosure and intimacy to develop.

These types of violations by the parents not only hampers the development of the child but also affects its socio-economic conditions, which leads to lack of proper education and deprivation of other needs of the child. This creates a marked contrast in the status between the child and others coming from families with proper economic conditions.

Emotional damage during the early stages has a far greater impact upon the character development than those inflicted at later stages when the personality of the individual is fully organized. Children of substance abusers are more prone to have emotional, educational, physical and mental health problem including psychosomatic illness, depression, and anxiety. They are at a
higher risk to be a victim of child abuse and neglect as found in [www.coaf.org or profess or effected.htm], 2002

Various studies have examined the specific psychosocial roles of intrafamilial factors in the etiology of drug use and associated problems in offspring. For example, Kandel and colleagues demonstrated the importance of parental substance use behavior and parent-child relations in predicting drug use in offspring. The salience of these factors was also confirmed in several later studies. Brook and colleagues evaluated theoretically relevant deficiencies in parent-child relations, such as low parental affection, low "child-centeredness," low involvement with children, and conflict oriented relationships and demonstrated their impact on substance use behavior among offspring.

Of importance, parental antisociality was found to predict drug use behavior, while prosocial parental behavior that is conventionality was associated with resilience. In adopted children, familial environmental factors such as divorce and the presence of psychiatric disturbance in the adoptive family have been found to be associated with a greater risk for drug abuse. This was revealed in several studies made in relating to the area that problematic parenting behavior is characteristic of families with substance abuse.
The process model of family functioning proposes that the overriding goal of the family is the successful achievement of basic developmental and crisis tasks that provide for the continued development of individual family members in a secure, cohesive, and effective environment. Successful accomplishment of these tasks requires the assumption of appropriate roles, engagement in effective communication, and appropriate expression of affect among family members.

Family members involved emotionally with each other and were able to influence each other’s behavior in a consistent and productive fashion. All of this occurred against a background of cultural norms and values that the family shares. Theoretically, children of substance-dependent parents were at a high risk for subsequent substance abuse, not only because of the transmission of some as-yet-unidentified heritable influence, but also because they grow up in dysfunctional families that negatively affect their capacity for normal development.

Patterson and colleagues were proponents of a developmental paradigm of antisocialism, which hypothesized that adolescent, and adult dissocial behavior is a consequence of poor parental family management practices interacting with the child’s aggressive and oppositional behavior. Deficits in family functioning,
such as harsh and inconsistent parent-child interactions, high levels of parent-child coercion, and poor parental monitoring result in a child’s greater affiliation with deviant peers which in turn ultimately placing the child on a developmental trajectory of deviancy. Thus, the child’s dispositional characteristics interact with the functional status of the family to increase the developmental risk for delinquency, antisociality, and problem behaviors, including the abuse of drugs.

A pertinent Question came up like, Why does one child from a particular neighbourhood, school, social class and ethnic background show deviant behavior, whereas another, apparently subject to the same general environmental influences, does not. In approaching this problem, the researcher had typically used a research design in which children who show deviant or characteristic or behavior are compared to those normal children with respect to personality characteristic and parent-child relationship.

The study being an attempt to investigate the influence of family environment on the personality development of children study had explored and analyzed all the problems by characterising it into six chapters. While studying any problem the background of the problem and its area need to be referred. As such, the first chapter referred to the background information including the geographical location, population, sex-ratio, literacy rate, school enrolment and
drop-out, family system, structure and its pattern with special reference to Imphal west District of Manipur. The District being located at the heart of the city was homogeneous in population. It included Meeteis, Tribals, Nepalese, Pangals (Manipur Muslim), Assamese, Bengalese, Marwaris, Punjabis, Biharis etcetera.

In the Second Chapter, the Investigator reviewed the relevant studies and literature concerned with the study, "Impact of family Environment on the personality Development of Child; A comparative study of children brought up or reared in Healthy family Environment and Unhealthy Family Environment".

The third Chapters covered the Definitions and Meanings of the present study; Hypothesis of the study that is "Children reared in a Healthy Family Environment developed more socially acceptable personality as compared to those reared in Unhealthy family Environment".

The Objectives of the present study included (i) to study the personality of children reared in a healthy family environment and unhealthy family environment; (ii) to study the correlation between personality development and family environment of children reared in healthy environment of Imphal West. (iii) to study the correlation between personality development and family environment of children reared in unhealthy environment of Imphal West; (iv)
to study the attitude towards oneself and with their age-mates, their development in the everyday used concepts and their development in conscience, morality and social values; (v) to study their attitude towards social group and institution and their achievement in personal independent.

This chapter included Sampling, Mechanics and Methods of Data Collections in order to enable to make a thorough and critical analysis of the problem. Accordingly a sample of 1500 children each reared in a healthy, normal supportive family and children reared by drug addict or alcoholic family were taken up along with their parents and teachers. These samples were designed on a random basis according to the convenience of the investigator. While designing the investigator included the three main aspects like personality of children, their performance in school and parent-child relationship. The investigator had done the comparative study of children brought up by normal parents or guardians and children brought up by drug addicts or alcoholics parents.

The whole problem was studied and explored in the fourth chapter covering two main aspects that is healthy and Unhealthy Family environment. The coverage was because of the fact that any child whether who has good personality, intelligence, adjustment, attitude etcetera all belong to a family. The
nature of brought up had nurtured and affected towards the development of child. The different type of child rearing practices in the family had been studied in this chapter. The different characteristic of child was discussed thoroughly for understanding the behavior of child. The possible psychological problem that could arise because of the unhealthy way of bringing up children was also put up in this chapter for understanding the impact of family environment on the personality development of child.

The whole finding of the present study were processed and analysed in the fifth chapter. In order to enable to analyse the problem accurately statistical application were made. Appropriate statistical devices like Mean value, Standard Deviation, t-test and Coefficient of Correlation were applied in understanding and assessing all the dimension of family environment, personality and performance. The study was Concluded in the Sixth chapter and suggestion were given.

From the obtained result, it had been found out that children who were brought up in an alcoholic or drug addict family had been largely influenced on their personality development. These children are not only deprived of parental love, care and support but they are deprived of financial assistance from their
parents, as their world revolves around the drug and not on any issue of the family or their children.

The study also revealed that these children are brought up in such an environment where there is lack of family cohesiveness, parental rejection, minimal guidance or inspiration while carrying out their creative activities. These parents are more or less neglecting and inclined to ridicule their children.

In some cases, they are overtly strict and involve maximum physical punishment rather than reasoning with the child about their misconduct. These children are hardly given enough space to develop or grow their skills, ability or talents. They are always a prey when there is any fight or conflict in the family. They always lack warm parental affection and love, as the parents themselves are involved physically or mentally in the drug taking behavior of their own or their spouse.

These children had poor adjustment in home and school, both socially and emotionally. They were aloof and isolated from their friends or peers as they have been stigmatized as the child of drug abuse or alcoholic parents. Apart from this, the drug taking behavior of the parent, makes them deprived in their socio-economic condition as maximum of their earning has been spend on their drug demands.
The study also show that poor parent-child relationship, rejection by parents, harsh parental punishment and erratic discipline, feeling of insecurity, frustration of needs of independence and self-expression, lack of guidance and inspiration in moral religious issues contributed in the development of maladjustment of children in home, school, social and emotional adjustment. The study also revealed that these children who are brought up in such environment are incompetent with their fellow schoolmates in intellectual and other creative activities.

The study found that Children of drug addict or alcoholic have high conflict in their family environment than those children who are brought up in a normal and supportive family environment. Whereas children reared in a normal and supportive family have more cohesion, expressiveness, moral religious emphasis, active recreational orientation, control and organization; they score more in the home, social, school and emotional adjustment; they have better achievement in schools and positive attitude or behavior towards their schoolmates and teachers too than those children of drug addict or alcoholic parents.

From the obtained result it can be concluded that family environment plays a very significant role in the personality development of a child, this in
turn support the framed hypothesis, “children reared in a healthy family environment developed more socially acceptable personality as compared to those children reared in an unhealthy family environment”.

One particular feature factor of this exploratory study, which can be more extensively looked into in further studies is that there is no comparison between the two cross section of population that is children of normal families and children of drug addict or alcoholic parents based on their economic status. It is also a fact that socio economic status of an individual plays an important role in affecting or impacting psychological factors at least in degrees if not differing in types. Families of drug addict or alcoholic parents are not just emotionally but also economically drained.

In Manipur more particularly in Imphal west district, it was found that drug or substance abuse or alcoholism largely affects the socio-economic conditions of the family in particular and the society in general. So, this clearly indicates that families of drug or substance addicts or alcoholic parents are comparatively more deprived or less advantaged in the socio-economic scale. So, it is felt that socio economic status being used, as a separate variable in the study will only be a reiteration as the two different cross sections of children clearly falls in two differing socio economic status.
SUGGESTIONS

In Manipur, there are many voluntary organizations and governmental organizations that address the problem of drug addict or alcoholic. These organizations or institutions provided services for the treatment of drug addicts or alcoholics but hardly address the issue of children of drug addicts or alcoholics exclusively. It’s high time for these voluntary organizations and governmental organizations to address the issue of the affected children of drug addict or alcoholic parents in a more intensive and exclusive manner.

Children living with drug addict or alcoholic parents often think that they are the only one in their school or community with such problems. Many get the idea that they themselves are to be blamed but feel hopeless and powerless to correct the situation. Often, this negatively affects the child’s ability to make decision or solve problems.

These children may understand very little about the disease of addiction. However, in these situations, they need to be encouraged to believe that their parents’ illness is not their fault. They can be taught in an appropriate way about relapse, denial and personality change and the effect of addiction on the mind.
Health awareness program should be taken up by the government or by the Non governmental organizations. Information on the impact of alcohol and substance abuse on families can give them a new perspective on what is happening at home. Through supportive methods, they will come to understand that the family problems are not their fault and they are not alone. Proper and systematic psychosocial supports from trained professionals can be one therapeutic measure for these children. In this regards family-counseling program should be taken up by the counseling centers, more particularly by the counselling center Police Headquarter.

Children of addicted parents need ‘safe persons’ to turn to for help in building a sense of belongings, reduce isolation and teaching them how to remain safe and resilient. We can assist these children by:

- Helping them to understand that it is all right to ask for help, and that doing so is a sign of strength not weakness.

- Explaining that using drugs is an unhealthy way for people to manage uncomfortable feelings. These drugs make uncomfortable feelings go away but only for a short time.
- Guiding the children to realize that they have options in handling life problems and taking good care of themselves.

- Assisting these children to identify, own and express their feelings in healthy ways.

- Helping these children to understand that people with addiction are ill and need help to recover.

Most of the children of parents addicted to drug and alcohol manage to survive. However, many lack positive role models for healthy living. They grow up too fast as a result assuming, too early, adult problems, worries and concerns. As a ‘safe persons’, we can help them to understand that they cannot fix their parents’ problems but must work on their own self-care. We need to encourage them to talk, trust and feel. Steps should be taken to save the child from fear psychosis and mental tension created by the drug addict or alcoholic parents.

Children of the drug addict or alcoholic hardly disclose about the drug taking behavior of their parents because of the fear of the stigma that will be attached to them by society. Identifying a child whose parents are addicted to alcohol or drug would not be an easy task.
However for intervening in school, classroom teachers, principals, administrators, counselors must rely on the basic ‘physical’ warning sign. Children who attend school looking malnourished, tired and unclean may be red flags for those involved. Children with parents who abuse drugs may have warning signs such as rebellious attitude, anger and have difficulties conducting themselves. Possible help and references can be provided for these children by the school authority.

Classroom teachers should also be aware of the behavioral patterns like: Absenteeism, Neglected physical appearance, Fluctuating academic performance, Psychological symptom, People pleasing behavior, Conflict avoidance, Problem controlling mood and behavior, Social isolation, Attention problems, Parental concerns and Physical symptoms

With any intervention that will take place, indication must involve confidentiality and discretion. There is a need to first build a bond of trust as the child may usually be fearful and unwilling to open up due to the breakdown of its faith, trust and beliefs which he or she placed on the parent. The loss of trust and faith need to be regained before the intervention takes place. The issue should be handled with delicacy and the underlying factors of the child’s behavior should be taken into accounts. Another very important necessity for the
intervening person is not to make any judgmental or biased decision in trying to help.

Once school personnel labeled the child of an addicted parent he or she must be cautious about labeling the child publicly. Often times, there may be perception and negative stereotype that go along with the label “child of an addict”.

Educationists play a huge role in helping children overcome their parent’s illness and setting personal goals of achievement. It is important for teachers to gain the knowledge of what to look for in at-risk children and know what to do when they are faced with this type of dilemma. Educationists must remain professional at all times and treat each and every case confidentially for the sake of child. Children living with an adult who has an addiction go through tremendous amount of stress and this can adversely affect everything that is going on in the child’s life, including his or her performance in school.

Teachers need to be aware of both the behavioral and psychological sign a child may be showing if living with an addicted parent. After correctly identifying if the child is living in a household of addicted parents, the teacher can begin the process of helping the children. Some of the things the teacher may want to do to be prepared for the situation is: have a list of referrals through
out the community, have current information on the addiction, remain open
minded and comfortable when the child ask for help, make sure to keep the issue
confidential telling only those who need to be told, don’t place too high
expectation on the child, try to get the child into some sort of routine, build on
the child strengths and work out on the child’s weakness, do not bring family
issues in front of peers or other teachers and assist the child in every way
possible to help them. The teacher should always show towards the child that he
or she is non judgmental and accepts the child as they are.

Voluntary organizations, concern governmental organizations and
institutions should take the initiative of taking up program for sensitization of
the community and the affected family of the drug addicts or alcoholics, the
negative impact of drug addict or alcoholic parents on the development of child
and for finding or identifying the possible effort the community can take up to
intervene this problem.

There should be a proper system of linkages between the community and
concern organizations to jointly address the issue. Policy makers and law
enforcers should take up this issue and look for the best remedial measure to
mitigate these problems. So also the civil societies, to see that these children are
not put on the acid test and not labeled or marginalized because of their parents’ habits.

Children of parents with substance dependence clearly have greater externalizing and internalizing problem behaviors than children of normal parents. From a developmental perspective, these children are at substantial risk for adolescent and adult antisocialist and substance dependence.

Thus, these children of fathers with antisocial personality disorder and substance dependence represent a group of well-defined, high-risk children who should be the vigorous target of prevention interventions. However, the nature and timing of etiologically appropriate interventions remain unclear. If the conceptualization of Patterson and colleagues was correct, then the appropriate timing for an efficacious family intervention would be when the child first manifests problem behaviors and temperamental difficulties.

Enhancing family functioning at this time point might impede the development of a coercive relationship between parent and child, rejection by normal peers, affiliation with deviant peers, and a life course trajectory of deviancy. Among children in the current 10–12-year-old age group, the strongest association with problem behaviors is the child’s affiliation with deviant peers. By this age, these children may already be on an adverse life trajectory.
Despite the application of a host of interventions designed to improve social skills and social information processing, reductions in actual aggressiveness or improvements in the social status of high-risk children has been largely resistant to change. More research is clearly needed to develop and evaluate onto genetically appropriate interventions that target a child’s problematic behaviors, the parents’ ability to cope and discipline appropriately, and the child’s acquisition of social peers.

It may be suggested that more studies should be carried out in this field in future to have better understanding and well equipped to fight the problem and try to bring a society where children are brought in a healthy way through appropriate strategies of information, education and communication.

The researcher would also like to suggest the future researches in this field to cover the other area of Manipur as the present study is confined only in the Imphal West district of Manipur.

In this study, the researcher address only those children reared in an alcoholic or drug addict family, for further research in this field, the researcher would like to suggest that there arise the need of addressing children reared in broken homes, orphan homes, single parents, mentally challenged parents and
other such environment which could contribute in molding the personality of the child in an unhealthy way.

The study has been confined only to the children of the age group of 6-12 years; an extensive study of analyzing the personality of children from these given age group to the adolescent period would give more appealing results.

The present study has the limitation of covering only the psychological impact of drug abuse or alcoholic family on their children. But there arise the alarming need of addressing the issue of HIV or AIDS through a holistic approach with intense research on its causative and interrelated factors. It is worth mentioning that Manipur has a dual epidemic of drug use and HIV or AIDS and a large section of the People living with HIV or AIDS in the state are amongst injecting or intravenous drug users. Apart from dealing with the psycho social problems of the children of drug users or alcoholic as affected population, it should be taken into account that there are some children with HIV or AIDS being transmitted from their parents who in turn acquired it while sharing drugs through injections.
As of October 2007, the number of reported cases of HIV positive children below 10 years of age is 1362. So, in the light of the above circumstances, there appeared a dire necessity to throw more lights on the issue of children in Manipur being affected not only psychosocially but also physically infected with blood borne infections because of their parent's drug using behavior. More intensive and extensive study need to be taken up to mitigate the problems being faced by these vulnerable populations.

On the line of actions Proposed to be taken up by the Cairo sitting, the present study recommends that the Government, in cooperation with employers, should provide and promote means to facilitate responsibilities, especially for single-parent household with young children. Such means could include health insurance and social security, day-care centers and facilities for breast-feeding mothers within the work Premises, Kinder-gardens, part-time Jobs, paid Parental leave, Paid maternity leave, flexible work schedules and reproductive and Child health services.

When formulating socio-economic development policies, special consideration should be given to increase the earning Power of all adult members of economically deprived families, including the elderly and women.

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183 Dr. Khomdon Lisham, AIDS need special mention in budget allocation, The Sangai Express, 21st Feb. 2008
who work in the home and to enabling children to be educated rather than compelled to work. Particularly attention should be paid to needy single parents, especially those who are responsible wholly or part for the support of children and other dependants, through ensuring payment of at least minimum wages and allowances, credit, education, funding for women’s self-help groups and stronger legal enforcement of male Parental financial responsibilities.

Governments should take effective action to eliminate all forms of coercion and discrimination in policies and practices. Assistance should be provided to persons with disabilities in the exercise of their family and reproductive rights and responsibilities.

The above suggestions are required as Families are sensitive to strain induced by social and economic changes. It is essential to grand particular assistance to families in difficult life situations. There are increasing members of vulnerable families, including single-parent families headed by women, poor families with elderly members or those with disabilities and displaced families and families with members affected by AIDS or other terminal disease, substance dependence, child abuse and domestic violence.

In many urban environments, millions of children and youths are left to their own devices as family ties breakdown and hence are increasingly exposed
to risks such as dropping out of school, labour exploitation, sexual exploitations and unwanted pregnancies.

The study suggest that there should be more counseling centers in almost all the districts. However, the number of counseling center in Imphal West district should be increased for counseling the child who suffers from psychological and socially at large. They should also be made effective in counseling their Parents irrespective of age, sex, caste or creed.

. The counseling center at Police Head-quarter Imphal has become most effective in counseling purpose however the number of staff engaged has been found too limited. In order to make more effective in its implementation, the existing two counselors in-charge of all the district of Manipur, which has been attached to the Police Head quarter, should be made more mobile by providing requisite infrastructure and facilities. In this regard, the government of Manipur, particularly the home department needs to pay special attention for the encouragement and efficient functioning of counseling center.

Although the counseling centers in each state has been under the Nodal counseling centers of the country, the Government can make suggestions for proper and effective functioning. Sometime the Nodal agency at Kolkata may or may not be able to look into each and every problem of the counseling center.
under the Node. Hence, special attention and care of the government need to be paid as they are helping in solving social issues and family problems.

The above suggestions relating to the counseling centers is felt extremely important because when problems occurred in the family which may cause social problems, it effects more particularly the psychology of the child. The period 6-11 years is a formative and melting period in their psychological and Physical development. A wrong step taken by parents or family members would have its impact towards the development of child. It would also affect their behavior pattern not only amongst themselves but also amongst the Peer groups. Sometimes it might affect the growth of their mental faculty too.

In Manipur more particularly in the Imphal west District there are many family related problems but still people do not discuss or consulted their problem to the family-counseling centre for the solution. Mostly many people do not like to expose their problem to others as well as they have no idea about their right.

As for instance, the organizer of the Association of Professional social Workers, Tera, Imphal West District aimed to work and contribute towards the growth of social work, to provide shelter to the abandoned and neglected
children, girls and women, to establish vocational-cum-production, to help in providing sustainable livelihood to the physically handicapped people.

The organizer of Nupi Meira Marup Keishamthong Elangbam Leikai, Imphal West district responded to bring peace in their locality, to solve the family problem, to solve the problem of drug addictions and alcoholics, to bring a sustainable livelihood by providing support to the self-help groups and to establish day care facility for working women’s baby.

Very few people in the Imphal West district are aware of the services provided by the family counseling center and have little knowledge about the importance of family counseling center in bringing a peaceful and harmonious society family. At this point of time, there is an urgent need of the family counseling center as well as concerned governmental organization and NGOs in sensitizing and bringing awareness of the services provided by the family counseling centers.

In order to elevate the poor social and physical environment of the children in our state it is imperative for policy makers, researchers, educationists, civil societies and the general communities to come forth and work on meaningful and practical linkages and work together to improve the overall psychosocial and economic conditions of Manipur.