



Impact of Paternal Alcoholism on Achievement Motivation and Self-Efficacy of Adolescents

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Abstract

Alcoholism is a disease that affects millions of individuals from every social class and racial background and unfortunately those who suffer the worst are the family especially the children. Parental alcoholism has been reported to have a significant negative impact on psychosocial functioning of their children. Since till today there is not much research on this field among Mizo, there is a strong need for doing research on this topic as many families are being influenced by the problem brought about by parental alcoholism. The study is expected to provide foundations for behavioural interventions and further extended studies. It was undertaken with the aim to find the effect of paternal alcoholism on achievement motivation, self-efficacy and psychological well-being of adolescent children within Aizawl city. It incorporated a 2X2 factorial design to highlight the impact and relationship of paternal alcoholism on psychosocial dimensions under study. The result showed significant differences between children of alcoholics (COAs) and children of non-Alcoholics (nCOAs) on achievement motivation ($p < .01$) and self-efficacy ($p < .01$) which means COAs have relatively lower achievement motivation and lower self-efficacy than non-COAs.

Keywords: *Paternal Alcoholism, Behavioural Interventions, Achievement Motivation, Self-Efficacy, Adolescent.*

Introduction

Alcoholism, also known as alcohol use disorder, is a broad term for problems with ethanol (commonly referred to as alcohol), and generally refers to alcohol addiction, which is the compulsive and uncontrolled consumption of alcoholic beverages, usually to the detriment of the drinker's health, personal relationships, and social standing. It is medically considered a disease, specifically an addictive illness. There are two main types of alcohol abuse, alcohol dependence and alcohol misuse has the potential to damage almost every

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organ in the body, including the brain (Hasin, Deborah, 2003). The effects of chronic alcohol abuse can cause both medical and psychiatric problems and one who has alcoholism is called an alcoholic (Caan, Woody; Bellerocche, Jackie de, eds., 2002). Diagnosis of alcohol misuse, problem use, abuse, and heavy use refer to improper use of alcohol which may cause physical, social, or moral harm to the drinker. In professional and research contexts, the term "alcoholism" sometimes encompasses both alcohol abuse and alcohol dependence, and sometimes is considered equivalent to alcohol dependence. Alcoholism in the classical disease model follows a progressive course: if a person continues to drink, their condition will worsen and this will lead to harmful consequences in their life, physically, mentally, emotionally and socially (Thombs, Dennis L, 1999).

Living with alcoholic parents is particularly devastating on young children. Youngsters often show symptoms of depression and anxiety such as being afraid to go to school, bed-wetting, having nightmares, crying, and not having friends. Also, during adolescence which has been globally accepted to be a period of turbulence and a significant developmental milestone. Parental alcoholism could further compound and create a not so conducive domestic environment significantly impacting the adjustment and personality of the adolescent as he tries to come to grips with this tumultuous phase in his developmental career. Studies have indicated that Teen COAs may begin to show depressive symptoms and extremely self-consciousness.

Achievement Motivation

Achievement motivation, also referred to as the need for achievement (and abbreviated n Achievement), is an important determinant of aspiration, effort, and persistence when an individual expects that his performance will be evaluated in relation to some standard of excellence and such behaviour is called achievement-oriented (McClelland, 1961). Motivation to achieve is instigated when an individual knows that he is responsible for the outcome of some venture, when he anticipates explicit knowledge of results that will define his success or failure, and when there is some degree of risk, i.e., some uncertainty about the outcome of his effort. The goal of achievement-oriented activity is to succeed, to perform well in relation to a standard motive to achieve excellence or in comparison with others who are competitors (Atkinson, 1964).

The academic performance of COAs has been found to be relatively poor (Miller & Krop, 1985). COAs also demonstrate adjustment problems in academics, where they exhibit learning difficulties, reading retardation, conduct and aggressive behavior problems, poor school performance, and loss of concentration (Velleman, 1992).

Self-Efficacy

Self-efficacy is the extent or strength of one's belief in one's own ability to complete tasks and reach goals (Ormrod, J. E., 2006). Psychologists have studied self-efficacy from several perspectives, noting various paths in the development of self-efficacy; the dynamics of self-efficacy, and lack thereof, in many different settings; interactions between self-efficacy and self-concept; and habits of attribution that contribute to, or detract from self-

efficacy. This can be seen as the ability to persist and a person's ability to succeed with a task. Self-efficacy affects every area of human endeavour. By determining the beliefs a person holds regarding his or her power to affect situations, it strongly influences both the power a person actually has to face challenges competently and the choices a person is most likely to make. These effects are particularly apparent, and compelling, with regard to behaviours affecting health.

Statement of the Problem

Of late there has been an increasing focus on children of alcoholics seeking to understand the adverse impact of parental alcoholism on their growth and psychosocial functioning. There is a vast body of literature both in India and the West devoted to understanding the dynamics involved in alcoholism and ascertaining the deleterious impact that alcoholism could have on the personality and functioning of the family. Indian literature from this perspective is scanty and there is a need for more comprehensive investigation to explore the consequences of parental alcoholism particularly on adolescent children. As of date no research on children of alcoholics (COA) has been conducted on the population under study, the Mizo. And there is a strong need for doing research on this topic as many families are being influenced by the problem made by parental alcoholism, and many families are being devastated by alcoholism in the family. The present study is an attempt to explore and highlight the psychosocial correlates of paternal alcoholism and their children. This study aimed to focus and seek to understand the adverse impact of paternal alcoholism on the growth of their children and their psychosocial functioning and to explore implications for therapeutic intervention for adolescent COAs.

Objectives of the Study

1. To explore the impact of parental alcoholism on psychosocial functioning.
2. To elucidate study and compare the achievement motivation and self-efficacy in adolescent children of alcoholics and those of non-alcoholics.
3. To explore the relationship between the measures in the study i.e. self-efficacy and achievement motivation on male and female participants.

Hypotheses

Following the review of literature pertaining to psycho- social correlates in adolescent children of alcoholics and the research objectives put forward, it is hypothesized that:

1. It is expected that adolescent children of alcoholics (COAs) will have lower achievement motivation as in comparison to adolescent children of non-alcoholics (nCOAs).
2. It is expected that adolescent children of alcoholics (COAs) will have lower self-efficacy as in comparison to adolescent children of non-alcoholics (nCOAs).
3. There will be significant gender differences on the dimensions under study.
4. There will be a significant relationship between achievement motivation and self-efficacy in adolescent children of alcoholics.
5. There will be a significant relationship between achievement motivation and self-efficacy in adolescent children of non- alcoholics.

Methods and Procedures

Sample

To achieve the objectives, 200 (M= 100; F= 100) Mizo adolescents with age ranging between 14 to 20 years from Aizawl city served as subjects for the present study. Paternal alcoholic status was determined by AUDIT (Alcohol Use Disorders Identification Test) and the two groups- (i) children of alcoholics (50 M and 50 F= 100) and (ii) children of non-alcoholics (50 M and 50 F= 100) were thus categorized for the conduct of the study. The socio-demographic background information of the subjects such as age, gender, education, occupation, permanent residence, family structure etc. were recorded to match the subjects in order to maintain the homogeneity of the sample. The sample characteristics are depicted below:

Design of the Study

The study incorporated a 2X2 factorial design as depicted above to highlight the impact and relationship of paternal alcoholism on psychosocial dimensions such as achievement motivation and self-efficacy.

Procedure

The Alcohol Use Disorders Identification Test, AUDIT (*Babor TF, Higgins-Biddle JC, Saunders JB, Monteiro MG*) 2001, was implemented to identify paternal alcoholism following which the subjects were categorized into two groups “the alcoholics and non-alcoholics groups” and sample for the study was randomly selected from the two groups. This is a comparative study based on the presumption that the effect, if any, of living with an alcoholic (study group) or non-alcoholic (reference group) father would have already manifested itself on both groups of respondents. The groups being matched on key socio-demographic variables, the study is only an attempt to determine and compare the psychosocial functions of achievement motivation and self-efficacy in these children at the point of data collection. After obtaining the necessary consents and careful explanations of instructions for completing the questionnaires, subjects filled out the questionnaires.

Psychological Tools Used

1) Alcohol Use Disorders Identification Test (AUDIT), *Babor TF, Higgins-Biddle JC, Saunders JB, Monteiro MG*; *The Alcohol Use Disorders Identification Test, Guidelines for Use in Primary Care, Second Edition, Department of Mental Health and Substance Dependence, World Health Organization, CH-1211 Geneva 27, Switzerland*. It has three questions on alcohol consumption (1 to 3), three questions on drinking behaviour and dependence (4 to 6) and four questions on the consequences or problems related to drinking (7 to 10).

2) Deo-Mohan Achievement Motivation Scale (Deo, P. & Mohan, S., 2002): The Deo-Mohan Achievement Motivation Scale (n-Ach) is a questionnaire consisting of 50 items where responses are to be made to one of the five categories ranging from (1) always, (2) frequently (3) sometimes, (4) rarely, (5) never. It is a self administered test designed to measure achievement motivation including academic areas, general and social interests. The

range of scores is from a minimum of 50 to a maximum score of 250. High score indicates high achievement motivation and low score indicates low achievement motivation.

3) Generalized Self-Efficacy Scale (R. Schwarzer and M. Jerusalem, 1995): The GSE is a 10-item scale designed to assess optimistic self-beliefs used to cope with a variety of demands in life. The scale was designed to assess self efficacy, i.e., the belief that one’s actions are responsible for successful outcomes. The scaled score for each question ranges from 1 to 4. Higher scores indicate stronger patient’s belief in self-efficacy.

Result and Discussion

The reliability and predictive validity of the scales for Deo-Mohan Achievement Motivation Scale (n-Ach) and Generalized Self-efficacy Scale (GSS) were ascertained by the Cronbach’s Alpha for each of the scales to ensure the psychometric adequacy of the scales. The overall internal consistency (Cronbach’s Alpha) for the entire n-Ach scale was .85. The overall internal consistency (Cronbach’s Alpha) for the entire Generalized Self-efficacy scale was .74. The results revealed that the total coefficient of correlation and reliability coefficient of the scales emerged to be satisfactory over the levels of analysis for the whole sample.

Table 1: Reliability coefficient of the scales

SCALES	CRONBACH’S ALPHA
n- Ach Scale	.85
GSS	.74

The inter scales correlation is employed to elucidate correlation between the two scales used and the result indicated that the Achievement Motivation Scale (n-Ach) and Generalized Self-efficacy Scale (GSS) has a significant correlation at 0.01 level (2 tailed).

Table 2: Inter scales correlation

	n- Ach Scale	GSS
n- Ach Scale		.40**
GSS		
** Correlation is significant at the 0.01 level (2- tailed), List wise N= 200		

Normality and Homogeneity of Data

After ascertaining the reliability of the test scales, the normality and homogeneity of the collected data was tested. Table 3 shows the Mean, Standard Deviation, Skewness and Kurtosis of all the variables under study. The Mean n- Ach score is found to be 10.7 and 1.02 SD. For GSS, the mean score is 5.17 and SD 0.5. The analysis of the skewness and kurtosis of the variables showed that all the variables were skewed. The Hartley test (Hartley Critical values df=200-1) was employed to ensure homogeneity and the Hartley test scores for the variables which were skewed were analyzed by the Hartley test scores for all the variables and have been found to be normal.

Table 4: Hartley's table of Fmax

Variables	SD diff. value	Sig.	Df.
n- Ach Scale	0.265	1.00	199
GSS	0.6	1.00	199

Descriptive statistics on the behavioral measures used in the study have also been analyzed for both male and female children of alcoholics and non-alcoholics. The results of this analysis are shown in tables 5(a) to 5(d).

Table 5(a): Descriptive statistics on behavioural measures for male children of alcoholics

Descriptive statistics	N	Mean	SD
n-Ach Scale	50	10.11	.829
GSS	50	5.00	.426

Table 5(a) shows the Mean and Standard Deviation of all the variables under study for male children of alcoholics. The Mean n- Ach score is found to be 10.11 and .829 SD. In Self-efficacy scale, the mean score is 5.00 and Standard Deviation is .426.

Table 5(b): Descriptive statistics on behavioural measures for female children of alcoholics

Descriptive statistics	N	Mean	SD
n-Ach Scale	50	10.43	1.06
GSS	50	5.04	.954

Table 5(b) shows the Mean and Standard Deviation of all the variables under study for female children of alcoholics. The Mean n- Ach score is found to be 10.43 and 1.06 SD. In GSS, the mean score is 5.04 and SD is 0.96.

From tables 5(a) & (b), it is seen that male COAs scores are M= 10.11 and S.D= 0.83 while female COAs scores are M= 10.43 and S.D= 1.06 in n-Ach scale which indicated that female COAs were higher in achievement motivation than male COAs. For GSS male COAs scored M= 5.00 and S.D= 0.43 while female scored M= 5.04 and S.D=0.96 which indicated that female COAs were higher in self-efficacy than male COAs.

Table 5(c): Descriptive statistics on behavioural measures for male children of non-alcoholics

Descriptive statistics	N	MEAN	SD
n-Ach Scale	50	11.02	.967
GSS	50	5.28	.356

Table 5(c) shows the Mean and Standard Deviation of all the variables under study for male children of non-alcoholics. The Mean n- Ach score is found to be 11.02 and 0.97 SD. In the Self-efficacy scale, the mean score is 5.28 and SD 0.36.

Table 5(d): Descriptive statistics on behavioural measures for the female children of non-alcoholics

Descriptive statistics	N	MEAN	SD
n-Ach Scale	50	11.28	.779
GSS	50	5.36	.352

Table 5(d) shows the Mean and Standard Deviation of all the variables under study for female children of non-alcoholics. The Mean n- Ach score is found to be 11.28 and 0.78 SD. In Self-efficacy scale, the mean score is 5.36 and SD 0.36. From table 5(c) & (d), it can be seen that the score for male nCOA was (M=11.02 and S.D=0.97) and for female nCOA (M= 11.28, S.D= 0.78). Indicating that female nCOA were higher in achievement motivation than male nCOA, this finding is consistent with the study conducted by Salili in 1996 among the British students. Male nCOA scored 5.28 mean and .356 SD while female nCOA scored 5.36 and .352 SD which indicated that female nCOA were higher in self-efficacy than male nCOA. This finding is consistent with the finding of McKenzie (1999).

Table 6: Gender differences/comparison of Male and Female children of alcoholics and children of non-alcoholics (whole sample) on Achievement Motivation Scale and Generalized Self-efficacy Scale

Gender		n-Ach	GSS
Male	N	100	100
	Mean	10.57	5.14
	SD	1.00	.42
Female	N	100	100
	Mean	10.85	5.20
	SD	1.03	.734

The mean score of male participants in Achievement Motivation scale is 10.57 with a standard deviation of 1.00 while the mean score of female participants is 10.85 with a standard deviation of 1.03. This shows that female scored higher than male in n- Ach scale which indicated that females were higher in achievement motivation than male. The mean score of male participants in Generalized Self-efficacy Scale is 5.14 with a standard deviation of .42 while the mean score of female participants in Generalized Self-efficacy Scale is 5.20 with a standard deviation of .734. This show that female scored higher that male in generalized Self-efficacy scale which indicated that female were higher in self-efficacy than male. The analysis of the gender difference (male/female) of children of alcoholic and non-alcoholic revealed that females were higher than male in achievement, motivation and self-

efficacy. This finding is consistent with the findings such as Salili (1996) and McKenzie (1999).

Table 7: Comparison between children of alcoholics and non-alcoholics on n-Ach and GSS

Parental condition		n-Ach	GSS
Alcoholics	N	100	100
	Mean	10.27	5.33
	SD	.961	.74
Non- Alcoholics	N	100	100
	Mean	10.71	5.01
	SD	1.02	.35

COA mean score in n-Ach scale is 10.27 with a standard deviation of .961 while nCOA mean score is 10.71 with a standard deviation of 1.02. This shows that children of non-alcoholics (nCOA) scored higher than children of alcoholics COA in achievement motivation. This finding is consistent with a study on ‘Academic Achievement in Adolescent’ which confirmed that COAs, particularly those whose parents are alcohol dependent as opposed to having a diagnosis of alcohol abuse, achieve relatively lower academic outcomes in comparison to non-COA peers. Adolescent task orientation partially mediated the relations between parent alcohol dependence and academic achievement, indicating that academic difficulties in COAs may be partly due to impaired motivation and organization (Mc Grath CE, Watson AC, & Chassin L, 1999 Jan).

The COA mean score for GSS is 5.01 with a standard deviation of .74 while nCOA mean score in GSS is 5.33 with a standard deviation of .35. This shows that the nCOA scored higher than COA in self-efficacy. This finding is consistent with Cole et al. (1980) which observed that emotional maturity manifests in high self-esteem and enhances one’s interpersonal ability. Thus the low self-esteem seen in COAs is indicative of poor emotional maturity and may diminish their interpersonal competence. This perhaps is reflected in the poor adjustment scores obtained by the COAs across several domains seen in the study. The finding is in contrast with Churchill et al. (1990), who found no significant relationship between parental alcoholism and self-esteem of their children. But the results are congruent with that of Morey (1999), who reports that self-esteem ratings for COAs were significantly lower in comparison to ratings for nCOAs.

Table 8(a): 2X2 ANOVA for children of alcoholic and children of non-alcoholic X gender for achievement motivation (n-Ach Scale)

Source	Sums of Squares	Df.	Means	F	Sig.	Partial Eta Squared
Alcohol condition	38.65	1	38.65	45.52	.000	.19
Gender	4.0	1	4.0	4.71	.031	.023
Interaction	.03	1	.03	.04	.85	.000

The difference between children of alcoholic parents (COA) and children of non-alcoholic (nCOA) on achievement motivation was analyzed using 2x2 ANOVA and the results shown

in Table 8(a). Results show significant differences between COA and nCOA on achievement motivation ($p < .01$). This finding is consistent with a study on academic performance which indicated that COAs repeatedly score lower on verbal scales, reading and writing tasks, and standardized college test scores while also having lower GPAs and class rank than control nCOA (Murphy, O'Farrell, Floyd, & Connors, 1991; Sher, Walitzer, Wood, & Brent, 1991; von Knorring, 1991).

The gender difference of adolescents on achievement motivation was also analyzed using 2x2 ANOVA and the results shown in Table 8 (a). Results show that there is no significant gender difference on achievement motivation.

Table 8(b): Post Hoc test on Achievement Motivation (n-Ach Scale)

Variable 1	Variable 2	Mean Diff.	SE	Sig.
Male COA	Female COA	-.308	.184	.428
	Male nCOA	-.904**	.184	.000
	Female nCOA	-1.16**	.184	.000
Female COA	Male COA	.308	.184	.428
	Male nCOA	-.596*	.184	.017
	Female nCOA	-.854**	.184	.000
Male nCOA	Male COA	.904**	.184	.000
	Female COA	.596*	.184	.017
	Female nCOA	-.258	.184	.582
Female nCOA	Male COA	1.16**	.184	.000
	Female COA	.854**	.184	.000
	Male nCOA	.258	.184	.582
** $p < .01$, * $p < .05$				

Post Hoc analysis was further conducted to examine the differences between male COA and female COA on achievement motivation and the results shown in Table 8(b). Results show that there is no significant difference in achievement motivation between male COA and female COA. However, male COA have been found to score significantly lower than male nCOA on achievement motivation ($p < .01$). Results also show that male COA scores significantly lower than female nCOA on achievement motivation ($p < .01$). Further, female COA have been found to score significantly lower than male nCOA ($p < .05$) on achievement motivation. Significant difference has also been found between female COA and female nCOA on achievement motivation, with female COA scoring higher than female nCOA ($p < .01$).

From the results obtained in table 8(b), it can be seen that in achievement motivation, male COA and female COA have no significant difference. Male COA scored lower than male nCOA which indicated that male nCOA are higher in achievement motivation than male COA. Male COA scored lower than female nCOA which indicated that female nCOA are higher in achievement motivation than male COA. Female COA scored lower than male nCOA which indicated that male nCOA are higher in achievement motivation than female

COA. Female COA scored lower than female nCOA which indicated that female nCOA are higher in achievement motivation than female COA.

Table 9(a): 2X2 ANOVA for children of alcoholic (COA) and non-alcoholic (nCOA) X gender for self-efficacy (Generalized Self-efficacy Scale)

Source	Sums of Squares	Df.	Means	F	Sig.	Partial Eta Squared
Alcohol condition	4.67	1	4.67	13.90	.000	.066
Gender	.161	1	.161	.481	.489	.002
Interaction	.025	1	.025	.075	.785	.000

The difference between children of alcoholic (COA) and children of non-alcoholic (nCOA) on self-efficacy was analyzed using 2x2 ANOVA and the results shown in Table 9(a). Result shows a significant difference between COA and nCOA on self-efficacy ($p < .01$). This finding is consistent with the research on behavioral problems which demonstrated that children of alcoholics have revealed some of the following traits: lack of empathy for other persons; decreased social adequacy and interpersonal adaptability; low self-efficacy; and lack of control over the environment (Jones, M.C., 1968).

The gender difference of adolescents on self-efficacy was also analyzed using 2x2 ANOVA and the results shown in Table 9(a). Result shows that there is no significant gender difference on self-efficacy.

Table 9(b): Post Hoc test on self-efficacy (Generalized Self-Efficacy Scale)

Variable 1	Variable 2	Mean Diff.	SE	Sig.
Male COA	Female COA	-.034	.115	.993
	Male nCOA	-.283	.115	.117
	Female nCOA	-.362*	.115	.023
Female COA	Male COA	.034	.115	.993
	Male nCOA	-.249	.115	.206
	Female nCOA	-.328*	.115	.049
Male nCOA	Male COA	.283	.115	.117
	Female COA	.249	.115	.206
	Female nCOA	-.079	.115	.926
Female nCOA	Male COA	.362*	.115	.023
	Female COA	.327*	.115	.049
	Male nCOA	.079	.115	.926

*= $p < .05$ **= $p < .01$

Post Hoc analysis was further conducted to examine the difference between male COA and female COA on self-efficacy and the results shown in Table 9(b). Results show that there is no significant difference in self-efficacy between male COA and female COA, male COA and male nCOA, female COA and male nCOA. Results also show that male COA score significantly lower than female nCOA on self-efficacy ($p < .01$). Significant difference has

also been found between female COA and female nCOA on self-efficacy, with female nCOA scoring higher than female COA ($p < .01$).

From the results obtained in table 9(b), it can be seen that there is no significant difference between male COA and female COA which indicated that there is no gender difference between male and female COA in self-efficacy. And there is no difference between male COA and male nCOA which indicated that male COA and male nCOA have no significant difference in self-efficacy. Again, there is no difference between female COA and male nCOA which indicated female COA and male nCOA have no significant difference in self-efficacy. However, male COA scored lower than female nCOA which indicated that female nCOA have higher self-efficacy than male COA. Female COA also scored lower than female nCOA which indicated that female nCOA have higher self-efficacy than female COA.

Summary and Conclusion

Hypothesis 1 predicted that adolescent children of alcoholics (COAs) will have lower achievement motivation and self-efficacy as in comparison to adolescent children of non-alcoholics (nCOAs). The findings of the present study revealed that COAs have lower achievement motivation than nCOAs.

Hypothesis 2 predicted that adolescent children of alcoholics (COAs) will have lower self-efficacy as in comparison to adolescent children of non-alcoholics (nCOAs). The findings of the present study revealed that COAs have lower self-efficacy than non-COAs.

Hypothesis 3 predicted that there will be significant gender difference on the dimensions under study. In regards to the hypothesis, there is no significant difference between COAs and non-COAs on the dimensions of achievement motivation and self-efficacy under study.

Hypothesis 4 predicted that there will be a significant relationship between achievement motivation and self-efficacy in adolescent children of alcoholics. The findings show that there is a significant relationship between achievement motivation and self-efficacy in adolescent children of alcoholics.

Hypothesis 5 predicted that there will be a significant relationship between achievement motivation and self-efficacy in adolescent children of non-alcoholics. The findings indicated that there is a significant relationship between achievement motivation and self-efficacy in adolescent children of non-alcoholics.

Conclusion

The findings of present study indicated that COAs, particularly those whose parents are alcoholics have lower achievement motivation in comparison to nCOA peers. Also, COAs have lower self-efficacy in comparison to nCOA peers. Thus, having an alcoholic parent may affect the achievement motivation and self-efficacy of adolescents in Aizawl. The finding of the present study across all domains studied in COAs is consistent with the literature on the issue under study. The findings of the present study are corroborated by research evidence that suggests that paternal alcoholism has an impact on the psychosocial functioning of adolescents. In summary, the findings of the current study are that COAs have relatively lower achievement motivation and academic achievement in comparison to non-

COA peers. Adolescent self efficacy/ self esteem is impacted by parental alcohol dependency.

Thus, one can conclude drinking may negatively influence the children's psychosocial functioning that children of alcoholic parents are at a greater disadvantage than those children who come from families of non-alcoholic parents. Conclusively, the evidence in the literature review as well as the aims of this research project effectively illustrate that the hypothesis that paternal alcoholism impacts psychosocial functioning of adolescent children and the Family Systems Theory offers a possible explanation for these results which states that the family unit is the source of dysfunction because alcoholism becomes so intertwined with family operation that it cannot be separated from the rest of family functioning (Wolin, Bennett & Noonan, 1979).

Limitations of the Study

Research on COAs is still in its adolescence. Many studies suggest that a variety of differences exist between children of alcoholics and children of non-alcoholics and these differences occur at all ages. However, because of the limitations of the methodology and the inadequate number of comprehensive studies, research findings cannot be generalized to all children who grow up with alcoholic parents. (National Institute on Alcohol Abuse and Alcoholism, 1990) Although much has been learned over the last two decades, a number of controversial research areas remain. The present study being the first in the population under study has methodological and technical challenges which may imply a further study to address the challenges to present a more comprehensive research finding.

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