PARENTAL ALCOHOLISM:
A STUDY OF RESULTANT COMMUNICATION
BREAKDOWN AND BEHAVIORAL HANDICAPS
AFFECTING THE CHILD

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Michele Frances Meister

Helena, Montana

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SIGNATURE PAGE

This thesis for honors recognition has been approved for the Department of Communications.

Director, Mr. Harry Smith

Reader, Dr. Allen Pope

Reader, Mr. Bill Huber

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INTRODUCTION

Through the stimulation of speech communication we are able to discover, explore, test, express and foster meaning. Oral communication is a unique process of symbolic communication which involves a transactional encounter between persons. Because of its predominance among the forms of communication, speech is almost the essence of our life as social beings. In Ruth Eissler's book, The Psychoanalytic Study of the Child, Rene Spitz calls the mouth the bridge between the inside and outside of the human personality:

The mouth as the primal cavity is the bridge between inner reception and outer perception; it is the cradle of all external perception and its basic model; it is the place of transition for the development of intentional activity, for the emergence of volition from passivity.

Early attempts of the infant to communicate are characterized by gross, uncoordinated sounds and actions, which become stabilized and less generalized as the child becomes aware that certain sounds and movements bring specific kinds of responses. The standards and the forms of the infants' language are developed through contact with those who respond to the communication efforts, in most instances, the parents. Children adopt those behaviors which have resulted in bringing them the greatest satisfaction of their needs and desires.
When the original standards of speech communication are below the accepted norms and do not provide for satisfaction on a wider social interaction, the child almost certainly will become socially inhibited, resulting in societal retardation. This social deprivation which has resulted from faulty speech-communication habits is more frequent and more universal than first suspected. Communicologists are now beginning to successfully correlate social avoidance with communicational limitations. Speech communication is the primary vehicle needed in our adaptation to the environment and our societal encounters. Spitz's reference to the mouth as the bridge between the inner life of the infant and the outer life of the older human species gives added significance to the conclusion that communication is the foundational base of human interaction.

Educators, psychologists and anthropologists agree, in general, that the primary mode of passing on knowledge about acceptable social behavior and social norms is through the family. It is here that a child learns how people relate to each other, how they share and do not share, how they compromise or do not compromise, how they communicate or do not communicate. The family forms the basic matrix of the child's education. The conscious and unconscious interactions between family members provides the child with criteria necessary to form desirable ideals of social controls, community relationships and interactional responsibilities.
A child learns primarily through models who provide the necessary and appropriate behavioral attitudes which the sibling then identifies with appropriate reactions. Within his living environment, he observes and absorbs his family's behaviors, beliefs, traits they display when interacting and the methods of successful interaction with their peers, their superiors or their inferiors. This model influence can only be effective if there exists a recognizable and viable communication system in the family society.

Communication is not bound by verbal expression but extends into non-verbal speech as well. It includes not only the symbolized language but the physical attitude of communicators; this and the entire scope of feeling so well expressed by upper torso complementation to the spoken word. This total concept is so often more meaningful than the limited confines of the word.

The home of an alcoholic parent provides communicational barriers between the afflicted and the child and most always the communicated message is distorted by attitudinal barriers. Communication by the non-alcoholic parent-victim may be clouded in half-truths, avoidances, and white lies because he feels a need to protect the siblings from the sad truth of the drinking parent and the adverse effects, psychologically, which will eventually collapse their community relation.

Communications in the alcoholic home-society because of semantic and psychological "noise" are cut adrift from a
more solid stimuli-response access to healthy relationships within the family because the defensive communicational scene fails to carry honest, important and stimulating meaning. The children learn to role play following their reaction impulses to the confused model of the alcoholic parent. They learn self-reliance and defensive postures only known to themselves and will in most cases develop a protective trust structure which can only handicap them as successful participants of any healthy society.

Children of the alcoholic environment quickly perceive that parents don't always place the message intent and message responsibility on the same level of honesty. They learn to associate certain symbols, certain tonal qualities, certain nonverbal clues, anger, guilt, hostility and defensive reactions. They learn the unsavory art of name calling, innuendo and defensive sarcasm. They are victimized by a guilt complex, and desire to trust the parents, particularly the one afflicted by alcoholism. The broken promises eventually take a heavy toll, a toll which will result in an unhealthy communication encounter. They begin to distrust any message, nonverbal or verbal, at face value and operate with a near zero trust factor and begin to depend only upon fully completed actions and deeds.4

Through communication within the family a child is taught to be a member of society. The very qualities which make possible a growth-producing family, tenderness, compassion, emotional maturity in parents, are in short supply in the
alcoholic family. It is not surprising therefore that few, if any children of alcoholics escape without emotional scars. The dependable supply of emotional nutrition which must be communicated to the child in order for a strong, resilient personality to be developed, is not available in most alcoholic families.
CHAPTER I
SELF-CONCEPT

Self-concept is crucial to interpersonal communication. Effective, wholesome interpersonal communication is directly associated with a useful and realistic perception of one's self. Self-concept can be defined as those physical, social and psychological perceptions that have derived from experiences and interaction. Self-concept is built almost entirely from the outcome of interpersonal relationships. Categorization derived from interaction enforces strict limitations upon the individual.

An individual's image of himself is an emerging, ongoing process; the result of all past experiences. At one stage the image consists of little else than an undifferentiated blur and movement. The moment life begins, there is a constant stream of messages entering the organism via the sensory stimulation arterials. The initial impulses more than likely are merely undifferentiated shades of color, intensity of lights and varying noise levels. The matura-
tion process allows the sensory system to become much more discriminatory and the human is able to distinguish the various impulses into people and objects. The conscious recognizable image of self in society has begun. Each time a
message invades the human senses, his conceptions are likely to be altered to some degree of intensity. As the image is transformed the patterns of behavior will be simultaneously altered. The message consists of programmed itemizations stemming from the framework of the structured experiences. The aim and intention of an innuendo can be interpreted from the change wrought in the species.  

Interpersonal communication is never irrespective of former behavior models: humans discover the art of communication throughout their developmental years. The acquisition of language occurs within a specific environment; people can never be freed from the confining bonds of the environmental factors which effect the assimilation of interpersonal communicational factors. The needs, fears, anxieties, desires, hopes and dreams an individual has at any given moment in his or her life are the product of previous influences.

The "what" and "who" an individual believes himself to be is critical to impersonal communication. It is the "what" he perceives himself to be that is disabling or enabling; he conducts himself in accordance with his self analysis and his final evaluation then is his mind's picture of himself.  

Self-image evolves as a consequence of our performance within society. More specifically, it comes about as a sequence to our being categorized by others. As an individual observes the way in which others react to him,
he is conscious of the process of systematic categorization infringed upon him. Predictions concerning how others will respond to him, and anticipation of how he will be labeled, become a segment in the process of communication. This merges into the entity of self-concept. Subsequently his conduct is in accordance with the conception he has of himself.  

Self-esteem is developed from our conscious performances with others; but it is not concerned with categorization. Self-image is either hindered or enhanced via the behavior motivation success; it is the being rewarded or not being rewarded, the being praised or demeaned, or the act of being accorded prestige that creates one's self-esteem.  

If one is to understand the concept of self then it follows that an understanding of attitudes, beliefs, and values be a necessary prerequisite.  

Attitudes are tendencies to pattern responses in a systematic manner. Attitude is the inclination to be supportive, to have a positive or negative orientation toward something. Attitudes are not unlike values except they seem to be more alterable and more specific than are values.  

Beliefs are not so much good or bad as they are true or false. Beliefs represent what is held to be true; they are not necessarily logical. Beliefs are more closely related to the perceptions of what is desirable to believe, what we are capable of believing, what we are instructed to believe.
The propositions making up a belief system are derived from firsthand experiences, from others regarded as authorities and to whom response is given without questioning and from the confirmation or reinforcement endowed from others.

Values are attributed to the fairly enduring conceptions of good and bad, of the worth of objects, events, persons and ideas or principles. Values define the parameters of our action or behavior while simultaneously indicating what is desirable and undesirable. Values cultivate from our basic human requirements and external conditions.\textsuperscript{12}

Attitudes, beliefs and values are acquired via active interpersonal communication amidst the company of significant influences which make up our environment. Being learned they are converted into one's self-concept and then manifest their influences upon the quality of performances in communication.

Self-identity is a substantial factor in interpersonal communication. When one questions his existence or is doubtful of his acceptability to society, or if he is unable to accept self, the confusion can only evolve into an identity crisis; the quality of effective communication suffers. Without an understanding and acceptance of individual feelings, beliefs, goals and relationships with others, no healthy, integrated self is possible. Consequently, there is no established, solid foundation upon which communication may be built.

Due to inconsistencies, deficiencies, the multiplicity
of roles, and numerous other factors, realization of self
constitution is frequently improbable. This results in an
identity crisis and a reliance on a defensive attitude has
its beginnings.

A collective generalization can be made equating the
child from the alcoholic home with a person who has lost
self reality and a positive goal structure. The crux of this
statement stems from the fact that the child lacks the
positive self-concept essential to both verbal and non-
verbal communication resulting in a loss of any constructive,
effective, and meaningful relationship between the confused
person and the communicating environment.

Presupposing that an individual's self conceptions are
an accumulation of all previous environmental messages, then
the offspring in the alcoholic family is cointantaneously
handicapped from producing effective, competent communication.
The constant influx of messages impressed upon the child are
predominately negative; permanent retardation of the
communication process results. Learning primarily originates
from the parental model. When the parent is the caterer
of a socially inadequate example the unsuspecting child
unconsciously mimics the adult illustration; assuming the
communication to be appropriate. Thus his ability to shape
meaningful relationships through the process of communica-
tion is virtually impossible, or at least seriously
retarded.

Much of the alcoholic's behavior is comparable to
that of a small child's; it is unpredictable and lacking logical thought development; it is as if he never grew up in the first place. The avoidance factor is extremely evident, they are as a child with unpleasant mental images, they return to earlier, more child-like ways. The model simply refuses to cope with problems, avoiding the stresses of adulthood. The alcoholic parent is likely to be a person of intense, if sometimes brief enthusiasm. He often tries to do too much too fast. He tends to demand perfection in himself and others. Frustrated, he may become painfully depressed or overly aggressive. There is a lack of inner stability with which to face life's problems in a realistic manner. He may also exhibit marked dependency. This is indicated by an unwillingness to face up to and be responsible for the consequences of uncontrolled drinking. The drinker leans on others most often his children as the source of his problem solving; later seeking repentence for his deviant behavior.

The children subjected to the unhealthy alcoholic environment will no doubt be the worse for their trials. The alcoholic parent being the primary source of information, communication is thus confined by the ineffective model. The self-concept of the alcoholic is sorely deficient and, as a consequence, there is absolutely no way that the parent can send positive, meaningful messages to his child. Thus the child begins to associate and evaluate his own action-response qualities with that of his parents'. He begins to
identify his sense of worthlessness with the example provided by his parent; thus thinking himself unproductive and ineffectual, he impersonates this reflection. He shies away from making friends and becoming socially engaged in expressive relationships. He severs his line with society and either refuses to communicate with anyone or, worse, transmits through spoken and unspoken communication the bitter anger and guilt locked within his short circuited analysis system.

W.R. Weir in his 1970 study found that children of alcoholic parents have fewer peer relationships and show a greater trend toward maladjustment than children from non-alcoholic parents. When children become aware of the social stigma surrounding alcoholism, they feel different, estranged, isolated and ashamed and often consciously choose not to interact with others. This apprehensiveness stems from a fear that they will not be accepted or will be associated with their parents' problem. The smaller children find it easier not to bring friends home. They are afraid to open the channels to communicate.

When a child in a family with an alcoholic parent grows older and meets children from other families, he begins to see the contrast between his family and theirs. He develops feelings of shame regarding his family and these often are communicated to others by anger, resentment and disgust which he in turn manages by becoming rebellious and impulsive following the adult model already communicated to him. He
tends to be unable to persevere because his model of identification is with an alcoholic parent whom he often loaths and yet experiences guilt for these feelings.

This in turn destroys the self esteem level of the child. Unable to receive the necessary praise and feeling of accomplishment from the alcoholic parent, the child becomes disabled by his own feelings of worthlessness. Children of all ages want the affection and praise of their parents, who still remain the center of love, respect and idolization. They may be irritated, sullen and seditious yet they still have a tremendous need for open, trustworthy and one-on-one communicational channels with their parents. This basic need and consequential loss creates an additional handicap. The affected offspring is naturally disgusted at the antics of the alcoholic's behavior, disappointed with the drinking and its personality-destroying effects leading to an overwhelming feeling of irritation toward the alcoholic parent. Because he is unable or afraid to communicate these feelings to anyone, his emotions are in turn handled through various negative or socially unacceptable avenues. One is self punishment which is often achieved through provoking status people or social institutions, as the police or school administrators to punish him. The action-punishment is associated with the pain and punishment inflicted upon him/her by the drinking parent and is designed to inflict discomfort in the guilty parent.
Children living in the alcoholic environment have quality and rational problems regarding attitudes, beliefs and values and these evaluation abilities are extremely questionable. The alcoholic parent communicates his defective value structure to the child and these in turn are incorporated into the child's self-concept. The child then can only communicate to societal inhabitants a set of attitudes, beliefs and values stemming from an emotional base which he has been given by his parent.

Because the alcoholic's behavior is so inconsistent, a son may become overdependent on his mother. His feelings and thoughts about both parents may become confused and ambivalent, resulting in his turning against them. The son may also come to blame his mother for his father's drinking, thereby associating masculine independence with drunkenness.15

The son generally has difficulty with his own masculine role, since the role model of an alcoholic father is inadequate. An over-identification with his mother can lead to serious problems in sexual adjustment, such as homosexuality. In her book, The Forgotten Children, Margaret Cork suggests that a son's awareness of the social stigma surrounding alcoholism leads to feelings of humiliation, estrangement and isolation. Ambivalent feelings about his role, coupled with a pervasive sense of worthlessness, may lead to cowering of conformity or rebellion.16

The son of an alcoholic father may also have feelings of helplessness and develop fear, hatred and revenge
fantasies toward his father. Afterward he may feel guilty and fear retaliation for his thoughts. Such anxiety-producing feelings can cause difficulties with authority figures in adult life.

The daughter of an alcoholic father may hate and fear him and side with her mother or continue to love him desperately and blame her mother for his drinking. Neither of these coping measures are satisfactory. Each time there is a drinking episode she may feel a deep personal rejection. She may also confuse independence with drunkenness.\(^\text{17}\)

J.R. MacKay in his article entitled "Clinical Observation on Adolescent Problem Drinkers", states that in girls, sexual acting-out which in turn reflected very poor impulse control was evidenced. In a study of the behavior of girls arrested for sexual acting-out, he found they had great difficulty in forming relationships that were not fraught with suspicion and lack of trust.\(^\text{18}\)

In both the sons and daughters of alcoholics the communication of anti or nonsocial behavior can be directly traced to an unsatisfactory family environment in which the communication process has deteriorated. The attitudes, beliefs and values which are impressed upon the child are patterned inconsistently and often express social deviant opinions and actions. The child then is apt to impersonate these behaviors considered unacceptable by the rules of societal norms. This includes poor work performance at school, truancy and runaway children. The child resorts to
such negative attention-getting devices in an attempt to communicate that the parent and his environment are not fulfilling the needs and expectations of the child. The equilibrium of trust and truth has been broken.

When the alcoholic parent has difficulty accepting society's rules and demands, he provides a poor model for the child's development of internalized rules and respect for authority. On the other hand, if the alcoholic is not help responsible for what he does, the child may adopt these coping mechanisms.

A higher incidence of alcoholism has been found in the children of alcoholics. In her article, "Treating the Alcoholic's Family", Ruth Fox has estimated that approximately fifty-two percent of alcoholics came from homes in which one or more parent had a drinking problem.¹⁹

According to the University of Alabama sociologist Gerald Globetti (1973), the children of alcoholic parents are twice as likely to become alcoholic as the children of non-alcoholic parents. Children of alcoholic persons in American today exceed twenty-eight million.²⁰

The child learns to communicate from his parents. When the model provided is deficient it is equally true that the child's learned processes will be thus inadequate.
CHAPTER II
ROLE PLAYING

An additional media of communicating within the family is through role playing. Role playing gives the child an understanding of the rights, privileges and responsibilities of each family member. The child's role is defined by the respect and power which the other family members give him.

An individual's role becomes an outgrowth of his interaction with his family and peer group in which the family, group, culture, the individual's sex and his abilities, create a role for the individual just as an actor has a role in a play. Our role, assigned or elected, defines what action we can and cannot perform, what ideas we can and cannot voice, what we are and what we might become. Roles are crucial in a society because they motivate people to behave in fairly predictable ways; effective communication thus becomes accessible based on our knowledge obtained from our field of experience.

Interdependent to the roles in which we participate are the requirements for consistency. The need for a harmonious environment refers to the essential condition of having our perceptions, attitudes, behaviors and values be compatible within the societal structure. Whenever we disapprove of
any action, then our behavior must be unified with that value. The individual who disapproves of stealing can never steal anything without being inconsistent with his own value system. The need for consistency relates to the requirement of prediction for survival. Communicating effectively has as a fundamental basis the ability to predict the behaviors of others as they function within society. When people are inconsistent and unpredictable in their actions-reactions to stimuli we would not know how to approach a stable, rational communicational encounter. Identifiable communicational procedure would be impossible to anticipate and without a degree of predictability the rational human loses perception of this process.

Family breakdown and disorganization caused by alcoholism creates a void in the family structure. The result being, children may attempt to meet the needs of the parents or siblings as they imagine them to be, thus encountering demands and stress factors which are inappropriate for anyone of their age.

The child in the family of an alcoholic is forced to function in a non-rational system where usual relationships have been lost and normal trust factors have broken down. If the mother, as an example, cannot obtain gratification from her spouse she looks elsewhere within the family system. The children are then forced to play roles and meet uncommon parental demands that children under normal circumstances do not have to assume.
Certainly it is not uncommon in the family of a male alcoholic for one child to be called upon to be the peer confidante of the mother. Nor is it unusual for one child to substitute in the parental role for the alcoholic mother and be assigned the role of surrogate mother. Only through the assimilation of these unusual roles within the family structure can the needs of love, gratification and acceptance be met. Both anger and guilt as well as anxiety are generated in the child forced to make these role changes. The emotional stability is lost as all too often mental maturity is lacking for rational understanding.

Kimmel and Spears have pointed out in their study of adolescents with alcoholic fathers that the head of the household is often relegated to the role of another child. A typical remark they quote is that of a seventeen-year-old boy's, "My father is either away from home working, drinking or at home sleeping off a hangover." The function of the father then is relegated to that of a person with no responsibility, generally a failure, if not in business at least at home. Consequently, it is the son of the alcoholic father who must "play" at being the head of the household, and this is assigned without benefit of proper modeling.

With home life in turmoil, some children develop an obsessive need to be in charge. Recalls one thirty-three-year-old son of an alcoholic father, "I could wake up and hear a faucet leaking. Suddenly, I'd feel rage---not at the
faucet but at myself for not being able to make it stop."

The feeling of responsibility and the need to control everything can be suffocating.

There are similar hazards for a girl whose mother is an alcoholic. The problem however is somewhat different from those experienced by male siblings. First, the alcoholic housewife can conceal her drinking problem from herself as well as her family for a longer period than a husband can. She doesn't have to consume as much alcohol as possible in a short span of time. She can sip constantly throughout the day and maintain a pleasant glow without ever becoming drunk. Of course, as time goes by and the problem worsens, there is a gradual slide into less and less control. For a long time a woman alcoholic can evade responsibility. As a result everyone in the family becomes accustomed to concealing the drinking. The oldest daughter is usually made responsible for younger children or for part of the household chores. She is forced to impersonate her mother who is incapable of accepting the responsibilities of the family circle.

In her research, social worker Claudia Black has found three roles that she believes allow children to survive in an alcoholic home. An only or eldest child is apt to be very responsible for others in the family. A child who takes on the role of the "adjuster" follows directions easily and is flexible. The third role is that of the placating child. This person often tries to make other family members feel good as if he feels guilty for the alcoholism. They are too
sensitive to other's feelings. The roles of these children become a life-long process because once they leave home, they continue these same roles. Responsible children may find their self-reliant nature leads them to be "too alone", making them unwilling to trust another person. Adjusting children will often marry an alcoholic, or someone with other problems so they can continue their reacting roles. The placating type will not respond to his or her own needs because they have lost their true identity with self and society. Their life becomes one of feeling guilty and even manipulating reality.

Professionals now contend that children of alcoholics who impersonate seemingly well-adjusted, overachieving roles find that these unreal characters fall apart in later life. "We've been missing the boat. There is an entire population of children who grew up looking so good, acting so perfect, achieving so much. Then in their twenties and thirties, things begin to fall apart. My research shows that more than half of them will turn to alcohol and perpetuate the problem from generation to generation."

To avoid upsetting their parents, children learn roles which inhibit the expression of their feelings at all costs. Since the unstable environment is non-predictable, the children can never be certain how their parents may react to a given set of stimuli; they learn to trust only themselves. Most common is the role of the over-achiever. The child always wants to please others who can give the needed
verbal and nonverbal stroking. When he excels he becomes the family's representative to the outside world. A sense of control and pride comes with achievement; fulfilling of one's lost esteem and demonstrating self actualization. These elements are an essential principle of human existence as demonstrated in Abraham Maslow's hierarchy structure of needs.

Contributing to the repressed and frustrated communications is the fact that the behavior of the alcoholic tends to be constantly suspect, and the loss of respect clouds every communicational movement. The focus on the family life is on the alcoholism; its effects and its distortions. Children are often ignored or neglected, disciplined inconsistently and given few concrete limits and guidelines for behavior.

The alcoholic may be alternately cold and rejecting and sentimentally overindulgent for reasons that are not apparent to the child. Attempts by the child to grasp the pattern of how to relate to the parent always hoping to obtain the security, approval and affection he needs are continually frustrated by the unpredictable nature of the alcoholic's responses. The child rarely knows what effect his communication will have on his alcoholic parent. Even when the alcoholic is not drinking, he is in some stage of withdrawal, so that his threshold of irritability is very low. A child can unsuspectingly dislodge the volatile temper, or be faced with accusations all used to maintain a sense of control.
An alcoholic mother who wants to be alone so she can drink undetected allows the children an excess of freedom. During sober periods, she feels guilty about her behavior and often takes total responsibility again for all the household chores but at the same time, allows the children less freedom. As a result, these youngsters are caught in a constant shift between the mother's varying moods; they begin to resent her, her inconsistencies, and her unfounded accusations.

During the mother's drunken periods, an older child who takes over the mother's role is in the unfortunate position of having to mother her own mother and try to control younger children who still consider her just a sister.

Role playing is a crucial part of communication. In order to convey messages, each person engages in a role which is suitable for their interactions. Associated with role playing is the need for consistency to avoid the confusing effects of dissonance, for survival, and for a communicational exchange to be free and open in their society. The alcoholic environment forces the child to accept roles unnatural for his age. These inconsistencies displayed by his parents confuse the child, making it very hard for him to set fundamental patterns of behavior consistent with those of the unpredictable family society. The communication process is disturbed because the child never knows which parent personality they are approaching. The major problem for the child then is to distinguish the
true self of the parent; the one he/she thinks they are, the one they really are, or the one the child senses or hopes they are.
CHAPTER III

NON-VERBAL COMMUNICATION

Not only the verbalized symbol but the unspoken message remains an intrinsic element and one that is essential to cognitive communications. Through nonverbal communication we manage to communicate emotions and subleties of meaning which would appear to be lost were we restricted solely to a verbal symbolization factor. The emotion of love is best expressed from one person to another nonverbally rather than through words. It has been estimated that as much as ninety percent of our messages concerning feelings are communicated in a nonverbal manner.

While some people may not be aware of the importance of nonverbal communication, A. Mehrabian in his article entitled, "Inference of Attitudes from Nonverbal Communication in Two Channels", suggests that the amount of liking we have for another person is primarily communicated by us via nonverbal communication. Mehrabian's formula indicated that of the total affection or liking which we communicate to another person, only seven percent is communicated by words. Thirty-eight percent is communicated by how we use our voice. Fifty-five percent is the result of facial expressions.
This identical formula with the same relative importance for words, vocal quality and facial characteristics would apply to the communication of any emotion or feeling. Whenever we indicate our liking or disliking of something---our acceptance or rejection of attitudes, behaviors and values---we are communicating feelings. Probably most of our communication at home is emotionally-oriented. When this exchange is occurring, nonverbal communication therefore is playing a major role in true messages we communicate.

The word paralanguage refers to those nonverbal characteristics associated with the production of words through speech. These characteristics include pitch, voice quality, rate, intonational patterns and rhythms of speech delivery. While some people do not think about vocal characteristics as nonverbal, the professional communicationalist is cognitive that it is a very important characteristic of the nonverbal communicational field. We employ variations in all of these paralinguistic factors to convey emotion some consciously and some unconsciously. Here then lies an important decoding problem, what is meant to be expressed and what is not.

Space also can be an important factor in a communication scene. It is possible to communicate a positive evaluation of another person simply by standing close to him. We stand closer to people we like and farther from people we don't like. It is as though we will permit people we value to invade our personal territory. Robert Ardrey has suggested
the existence of what he has termed "the territorial imperative in animals." According to him, all animals, including humans, have well-defined territories around themselves which they will defend rather than permit to be invaded.

Our use of space does vary from culture to culture, however, as the norms regarding distance between people during interpersonal communication are considerably different for various groups. Edward T. Hall indicated the existence of at least four different kinds of distance which middle-class Americans employ in communication. They are intimate, personal, social and public distance.

Intimate distance can range anywhere from no space between persons to eighteen inches. We use intimate distance with persons we like extremely well. Intimate distance implies an admittance to our personal territory; it is a positive evaluation of others. Intimate distance involves a great deal of physical contact with the other person and of course, the smells and feel of the other person are available to each, thus bringing into play senses in addition to sight and sound in the communicative process.

Personal distance is a noncontact distance which, in this phase, includes distances from one and one-half to two and one-half feet. Within the personal distance we have interactions with our friends and family.

Social distance prevails in such social interactions as parties. The voice level is kept at a normal level. In this phase the distance ranges from four to seven feet;
it is here that impersonal business occurs.

The public phase can range from twelve to twenty-three feet. Although it is possible for interpersonal communication to occur at this distance, it is rare. At this distance the principles of public communication becomes operative. Public speaking texts focus on public distance.

There are interpersonal situations involving all of these distances. The most important fact to keep in mind is that the distances mentioned are appropriate to certain kinds of communication behaviors in specific relationships and situations. We must use the appropriate distance for the situation or we may find the space we are keeping between us and the people with whom we are communicating will interfere with our communication effectiveness.

We all begin our lives as infants with the use of touch to communicate. This is the only kind of communication a mother has available with which to influence the child. Desmond Morris, in *Intimate Behavior*, suggests that we never get over the infant satisfaction with touching. He believes we learn to associate comfort with touching. This desire to be comforted by touch does not stop because we are no longer children.

Through nonverbal communication we manage to establish our roles, intent and affection. Most often it is through the nonverbal communicational patterns that parents communicate love and security to a child. Young children must be told verbally, with recognizable symbols that they are loved.
However, the symbols and sound qualities are only one avenue to sibling contentment. The youngster must be physically stroked, caressed if you will, through nonverbal communications to fully receive the total impact of the love message.

Many and sometimes most of the critical meanings generated in human encounters are elicited by touch, glance, vocal nuance, gesture or facial expression. From the very moment of recognition until the moment of separation, people observe each other with all their senses and we do know that people cannot not communicate so a message is always in progress. Every harmonious signal or disharmonious message confirms a need to evaluate your interpretation of the passing mood or the enduring attitude. Only through this type of evaluation, via the kinetic, vocal and verbal cues, can decisions be made to argue or not to argue, to laugh or blush, to relax or resist, to continue or terminate conversation.

Throughout the process of nonverbal communication, it is important to learn to express feelings effectively with an honest coordination between the verbal and nonverbal channels. One reason for this aspect of communicational encounters is that feelings expressed or repressed tend to elicit the same kind of behavior from the communicational counterpart. There is such a reciprocity that operates within communications: behavior of one kind elicits a reciprocal or like behavior. Michael Argyle, in Social Interaction, states: "During social interaction it is very common for an act by
"A" to be followed by a similar act from "B". This is called response matching. Similar response matching takes place within the emotional state, bodily contact and other elements of social behavior."29

Numerous studies, reviewed by Argyle in his discussion of reciprocity behavior have verified this. These studies found that length of utterances follow this rule, as do length and frequency of pauses. Feelings then have a dynamic and a transactional effect on communicational exchanges.

Another reason for the importance of expressing feelings in communication effectively and with sound perception is that such expression is the necessary key to the establishment of any meaningful relationships. To create an openness and trust, it is necessary to communicate feelings honestly and without fear. D.W. Johnson's research in "The Effects of Expressing Warmth and Anger Upon the Actor and the Listener", has indicated that a trusting relationship is significantly related to the nonverbal expression of warmth. He has stated:

The expression of warmth is one of the most powerful tools available for building and maintaining friendship with other individuals. In addition, the expression of warmth is crucial to building a climate of acceptance and support in a relationship as well as a high level of interpersonal trust.30

The child in the alcoholic environment is subjected to nonverbal communication which is greatly disturbed. And filled with defensiveness, the child learns not only from what
his parents say but from what he infers his parents mean. Within his living environment he observes and absorbs the feelings of his family. Much of the time these feelings are of anger and irritability depending upon the state of the alcoholic. These children in turn learn to use sarcasm and cutting, biting words to secure reactions as these are the tools of their models. The nonverbal cues that they are sending out all too often match the tempermental and uncoordinated messages of their alcoholic parent. The para-linguistic messages that the alcoholic parent sends to his child are most often negative messages filled with self pity and avoidance mannerisms. These confusing communicational patterns are very demanding to the child because he will naturally reciprocate what he has learned from his family environment in his communication with others, automatically making him a person unable to participate in a peer society.

For the alcoholic, the range of his territory is very narrow. Since most of the time he has closed himself off from everything except what he perceives is most important—his bottle—there is little or no space for anyone else in his world. Consequently, the child of the alcoholic is cut off from the affection he so desperately needs from his parent. He begins to feel quite naturally that he is not loved. Feeling rejected, and often building his/her own guilty territory, the child then decides to build his own walls thus sparing himself from further injury. Unconsciously, he follows the example of his parent and cuts himself adrift
interpersonally from others. By keeping to himself he nonverbally communicates to others his desire to be alone. Society in turn perceives this desire as a signal that they are disliked or that the other person is anti-social which can only result in social retardation. The communication process therefore stops; most of the time there is never anyone close enough to communicate with. The walls of protection are now in place and the defensive patterns are set.

Since the time of birth, infantile learning is strongly influenced by the physiological interchange between parent and child. The first learned communication behaviors of the parents are in the forms of "stroking" the acts of the child. The parents compensate the actions of the child with these strokes and the child soon learns which of his efforts will be rewarded. As the child grows older he still requires the touch from his parents which communicate that he is loved. For the child of an alcoholic, the necessary touching which nonverbally satisfies his need to be loved is missing. The alcoholic, engrossed only in his own needs and habits, is totally unaware of the needs of his child. Most of the children grow up in homes where the alcoholic and his problem is the primary focus of the family. When intoxicated, the alcoholic is incapable of displaying the love the child so desperately needs. During his sober periods he is more than likely recuperating from his/her physically abusive indulgences. His irritability level is low and the child soon learns that it is better to stay away than upset the volatile nature of the
parent. The non-alcoholic parent many times will not have time, because they try to assume the duties of their spouse, to touch and love the deprived children. This spouse is forced to make most of the decisions for the family, assume the responsibility for rearing the children, face creditors and perhaps take on extra work to make up for the deficiencies in the family income. This parent, even though he/she recognizes the needs of the child, all too often simply has not enough time for the child and the psychological requirements necessary for stable growth. The child is never held nor stroked resulting in no reward or patterns of behavior which are socially acceptable. He doubts his ability to be loved. In her book, The Forgotten Children, Margaret Cork interviewed one hundred and fifteen children of alcoholic parents. Most of the children said that they felt rejected by their parents; that they were never held or loved. The lack of touching from parent to child will affect the child later in life. Unable to feel loved by his parents, the child will also be unable to show love to another. He cannot nonverbally communicate to another through touch that he cares for them. Since he has not learned this from his parents he will not know how. Consequently, he is cutting himself off from other members of society, often even a loved one.

The concept of reciprocity can be directly related to the alcoholic and his child. The type of behavior which the parent displays will be followed by the child. If the parent
suppresses his feelings, never showing the child that he is loved or cared for, the child in turn will behave this way socially. He, too, will be unable to show his feelings and thus will be unable to form meaningful interpersonal exchanges. Without forming a meaningful relationship, his communication process will be in serious danger, and once this avenue of social exchange is destroyed or severely damaged, we can only conjecture that the child will become a socially inhibited human adult.
CONCLUSION

Through the process of communication, and only through this process are we able to express ourselves, and stimulate meaning; attempting to influence our environment. This is a unique process which starts to influence us from the moment of our birth and stays with us until our demise. Through our interaction with others we learn not only what messages mean but how they should be expressed. The primary center of our message comprehension is found in our earlier relations with our strongest behavioral models. Children quite naturally adopt those behaviors which they perceive in their parents, never fully understanding the positive or negative qualities of their perceived messages. When the original standards of communication are poor and do not provide for an adequate means of social interaction then the child will most certainly be deprived, inhibited, and can only end up by being a socially retarded human.

The atmosphere in the alcoholic home is almost certain to be one deprived of emotional stability and without understandable functions which create healthy communicational modeling for the siblings involved. A child follows the observable example of his parents and builds his/her own interactional patterns in the communicational encounters of
life. The child is almost certain to have a self-concept which constantly questions his own worth and will communicate this feeling in his interactions with others. Because he is forced to play roles demanding for his age, he hides his feelings; afraid to upset the delicate temperament of his parent. This is seriously damaging to communication since the child will then shy away from the establishment of meaningful relationships. The nonverbal process in the family is dominated by the angry, sarcastic, ego-demanding comments of the alcoholic. Children learn to communicate in this negative manner and at the same time feel inadequate, guilty, confused and unloved.

A strong case can be made from the fact that an alcoholic will pass on to his child his inadequate means of communication. There are an estimated nine million alcoholic persons in the United States and there is ample social research to indicate that they deserve all the help we can possibly muster. Beyond a doubt it is time society recognized that drinking also takes a direct toll among a much larger group---the estimated thirty-six million children of the alcoholics. Without learning an adequate and honest pattern of communication, the interaction between the affected child and his/her society will be inhibited to the point of being social misfits.
FOOTNOTES


4. Ibid.


8. Ibid.

9. Ibid.


11. Ibid.

12. Ibid.


16. Ibid.
17. Ibid.
22. Ibid.
24. Ibid.
25. Ibid.
BIBLIOGRAPHY

Al-Anon Family Group Headquarters, Living with an Alcoholic with the Help of Al-Anon (New York), 1978.


Hecht, Murray, "Children of Alcoholics are Children at Risk," American Journal of Nursing, 73 (10), 1978.


Stewart, John, Bridges Not Walls (Reading, Massachusetts: Addison-Wesley Publishing Company), 1977.