

Family Violence in Wives of Alcoholic and Non Alcoholic Related to Socio-Economic Status and Age

Mamta Rani^{1*} Prof. Beer Singh²

¹ PhD Scholar, Department of Psychology, C.C.S. University (Campus), Meerut, Uttar Pradesh, India

² Professor, Department of Psychology, C.C.S. University (Campus), Meerut, Uttar Pradesh, India

Abstract – An alcoholic drink is one of the most significant components of the worldwide market for abuse. Alcohol use is typically a big issue in developing countries like India as a consequence of diverse social-cultural norms around the country, varying alcohol policies and activities in different countries, a lack of societal knowledge of alcohol-related issues, misleading mainstream media advertising on alcohol usage, multiple levels of alcohol use of alcohol users and so forth. Alcoholics in multiple countries require strict alcohol laws to limit alcohol use, and users need to be told of the common adverse consequences of alcohol intake and their mind, body, and soul. This review article focuses on alcohol use as a consequence of its numerous adverse effects on the mind and body, as well as on alcohol policy in the region.

Key Words: Alcoholic and Non-Alcoholic, Family Violence, Socio Economic Status

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INTRODUCTION

The co-occurrence of substance dependence and domestic violence in India, like coercive rape, is commonly known. In the Indian groups and regions domestic violence is common, but less well-educated children, women and women are more prominent in contexts that magnify gender inequality such as wealth, age and educational gaps. Domestic violence is profoundly embedded in culture, socialisation, cultural and discrimination-related structures that underlie, support or neglect the violent actions of men against women. There is a popular misconception that alcohol tends to disinhibit, increase morale and alcohol myopia in persons. Specifically, in terms to intimate relationship aggression, alcohol is used to prevent individuals from taking part in prohibitions in settings where verbal or physical harassment and unsafe sexual activities such as irregular usage to contraceptives and the involvement of numerous non-matrimonial sexual partners are socially and culturally appropriate. Indirectly, alcohol may intensify current emotions of indignation and dissatisfaction as a mood enhancer. Males will also intensify their view of women's inability to adhere to gender specific expectations in household activity and public success by alcohol myopia, which can centre emphasis on women as an urgent and fragile goal. Intimate partner abuse in conjunction with alcohol

use is growing. Review of the National Family Health Survey (NFHS3) statistics has shown that husband physical abuse coupled with sexual harassment has been linked with a higher prevalence of HIV infection among married Indian women. Although several findings have indicated that the interaction between romantic pair abuse, alcohol and HIV danger is more complex, has an influence on the amount of spouse sex, children's vulnerability to violence and drug usage, and gender and social decision making are more complicated. People who rely on themselves and their sexual partners socially, culturally and economically have little capacity to discuss whether or not they should have intercourse and/or use contraceptives or other means of security.

ALCOHOLISM IN FAMILY

In family systems alcoholism applies to the circumstances of households that render drinking inevitable and the consequences on the members of the family of intoxicated behavior. Alcoholism and addiction are progressively being viewed by practitioners in behavioral health as disorders that prosper and are activated by family systems.

Family members respond with different behavioral behaviors to the alcoholic. They will try to defend

the abuse from the harmful effects of their acts. Such activity is defined as codependence. The alcoholics are known to be suffering from addiction disorder, whereas the family members suffer from codependence disease. While addiction is recognized as a family condition that impacts the whole family group, "family is frequently overlooked and underestimated in managing addictive illness." Every Participant is impacted by addiction and should be seeking medication for the addictive disorder. "The prospects of rehabilitation are decreased dramatically without the ability of codependents to take up their own part in the addiction phase to commit themselves to treatment".

For instance, the "Primary Enabler" (the key enabler in the family) sometimes turns a blind eye to the usage of medicine / alcohol as this causes the enabler to continue to play the victim or martyr's position and causes the abuser to continue to behave destructively. Therefore, "the action, while still the costs and emotional effects for each, enhances and preserves each other".

Alcoholism is one of the major causes of unhealthy families. "About one-fourth of the US population is a family afflicted by first-degree addiction disorder." In 2001, there were reported to be 26.8 million intoxicated children in the United States and 11 million of them under 18.

According to the American Psychiatric Association, doctors have developed three requirements for diagnosing the disease: (1) medical problems such as hand shock and blackouts, (2) psychological problems such as excessive drinking appetite, and (3) behavioral disorders that interrupt social or job interaction.

People in alcoholic households are more concerned regarding condition and symptoms than people raised in non-intoxicated communities. In comparison, adult offspring of alcoholics may have poorer self-esteem, inadequate sense of duty, trouble in achieving oneself, a greater frequency of depression and an increased risk of being alcoholic.

Parental intoxication can influence the pregnancy even prior to the birth of an infant. In pregnant women alcohol is transported across the membranes, which divide the maternal and the foetal blood supplies, into all mother's organs and tissues, including placenta. When a pregnant woman takes an alcoholic drug, the urinary content is the same as her own. A pregnant woman who drinks alcohol during her pregnancy may give birth to a kid with FAS. FAS is known to create children with central nerve damages, general development and facial characteristics. The incidence of this disease type is estimated to vary from 2–5 per 1000.

Alcoholism would not impact all households equally. The rate of non-alcoholic parent addiction and tolerance are significant variables that influence

children in the household. Untreated dependent adolescents have poorer scores on family stability, intellectual-cultural outlook, active-recreational instruction and tolerance steps. They have greater tensions in the family and often other family members view them as isolated and non-communicative. The combined impact of family discord in households of untreated alcoholics will influence the capacity of children to grow developmentally stable.

MARITAL RELATIONSHIP

Alcoholism typically impacts marriage partnerships significantly. Separated and unmarried men and women were three times as likely to claim they were married to an addict, or problem-saving drinker than married men and women. About two-thirds of women who are split from and unmarried, and almost half of men under 46, who are separated or divorced, are often subjected to alcohol in the family.

Exposure among women (46.2%) was higher than among men (38.9%) and decreased with age. Alcohol consumption in the household was closely connected to marital status, regardless of age: among certain family members, 55.5 per cent of unmarried or divorced individuals were subjected to alcohol, contrasted with 43.5% of married people, 38.5 per cent of never-married individuals and 35.5% of widows. About 38 % of people separating or divorced were married to alcoholics but only about 12% of those still dating were partnered with alcoholics.

CHILDREN

Prevalence of abuse

More than 1 million children are reported nationwide as victims of child exploitation and neglect by state child welfare authorities. Drug misuse is one of the two major issues facing households in the USA, and in about four-fifths of recorded cases alcohol is a cause. Alcoholism is more prominent in parents who assault offspring. More profoundly than addiction and other illnesses, intoxication is linked with adolescent abuse.

Adoption plays a small part in family alcoholism. There was research compared children born into an alcoholic household, adopted by adoptive (non-alcoholic) parents, with children born to alcoholic parents adopted by adoptive alcoholic parents. Data (in US and Scandinavian studies) suggest that the adoptive children born to a non-alcoholic parent established alcoholism at higher rates than the adults.

Correlates

Alcoholic adolescents show more signs of depression and anxiety than non-alcoholic adolescents. COAs have less self-esteem than non-COAs from adolescence to early adulthood. Addicted adolescents show more signs than non-COAs with fear, stress, and behavioral dysfunction. Any of these signs are vomiting, loss of mates, school anxiety, insomnia, perfectionism, hedges and extreme self-awareness.

Most addicted adolescents have poorer cognitive and language abilities than non-COAs. The lack of skills to articulate oneself will influence academic success, relationships and work interviews. However, the absence of these abilities should not contribute to intellectual deficiency of COAs. CoAs have not demonstrated problems in inference and logical thinking, all of which play an significant role in the academic and other problem solving.

A variety of characteristics popular to people who had an intoxicated parent in her book Adult Children of Alcoholics. These characteristics, while not generally common or detailed, are adult children with alcoholic syndrome.

Coping Mechanism

- Suggested strategies to reduce the influence of maternal alcohol on their children's growth include:
- To promote good family rituals and activities, including celebrations, dinners and celebrations
- Allow COAs to establish strong, healthy interactions with other relevant individuals outside the family.
- Organizing non-drinking events that contend with drunken behavior and behaviors.

Resilience

The harmful impact of alcohol on the body and wellbeing are evident. But we cannot ignore, the most critical entity of our culture, that this impacts communities and adolescents. Prof. Dieter J. Meyerhof, psychiatrist and educator. The family is the key organization where the infant can be healthy and spiritual. If the infant is offered an appropriate starting point, it is less likely to be adult with psychiatric illness or to be addicted to narcotics or alcohol. According to the American Academy of Child and Adolescent Psychiatry (AACAP). The behavior of a parent is at the center of the issue, since those children have little help from their own families and do not deserve it. The children tend to believe that the explanation behind these shifts is that they see transitions from positive to unhappy parents. Self-

accusation, shame, indignation, rage stems from the child's intended perception of why such conduct occurs. Dependency on alcohol is particularly dangerous in adolescence and youth development in a family context the growth and actions of children in terms of the impact of maternal intoxication on youth. Alcoholic adolescents also experience issues with behavioral instability, violence, criminality and treatment performance disorder and are at increased risk for emotional symptoms, such as depression and anxiety. Consequently, they consume alcohol much often and are more prone to escalate from mild to serious alcohol use. Young people with parental neglect and parental violence are more likely to reside in wide areas of crime, which can adversely affect the standard of schooling and raise the incidence of violence in the region. Fatherhood alcoholism and the general mental and physical spirit of abuse in the parent observed the concerns of children and an internalization of behavior, enhanced risk of infant hostility and emotional misconduct. Study into alcoholism within communities has contributed to the discovery of issues which are not good or optimistic, but false in the community. Flawed nature of studies of intoxicated adult children (ACOA) research has found that ACOAs have sustained psychological damage. Several flaws of research designs involve the inclusion of ACOAs in the test group as contrasted with other ACOAs in the same sample. This may have induced such limitations not mentioned in the report. As matched with other ACOAs, reliable data that indicate those activities in the population analyzed are challenging to understand. Current study has used test groups of non-ACOA to assess if activity aligns of previous studies. This study has shown that conduct between non-ACOA and ACOAs is comparable. An 18-year research associated intoxicated children (COA) with other COAs. Failure to monitor non-COAs implies that we lack an opportunity to see if the negative characteristics of a child contribute to the behavior of an intoxicated parent or are merely a part of life. In his research, for example, Werner noticed that thirty percent of COAs perpetrated severe crime. In a study performed at a Midwest university, researchers observed that ACOA and non-ACOA students vary substantially. One of the biggest distinctions was how the students link their previous encounters to their present social and emotional functioning. ACOA students have demonstrated far more difficulties regarding their outlook on their behavioral conflicts than non-ACA students. However, this research shows that the family system has some structural issues that may suggest a feeling that existence is not well balanced.

Due to the misleading studies done in the past, ACOAs were accompanied by certain stereotypes. ACOAs have reported a host of mental and behavioral issues, including sleep disorders,

hostility and poor self-esteem. There is also hope for becoming COA or ACOA. Results suggest that a positive and caring association with one of the parents will mitigate the negative consequences of the alcoholic relationship. When an intoxicated adult is involved in the home, it improves if the infant is helped by other family members. They might be the second dad, siblings or family friends. The child may feel that he / she is not alone by getting other helpful family members. Younger ACOAs have become more optimistic in terms of coping strategies. This may be because drinking is often treated more as a disorder than as a mental deficiency. Parent dependence has been mostly documented as a disorder rather than as a behavioral issue. Findings indicate that while ACOAs are utilizing constructive coping strategies, they are linked to improved outcomes. When an ACOA addresses their dilemma, it is always related to maintaining a good mindset instead of ignoring it. Tests have shown that ACOAs and COAs have more compulsive habits and may contribute to higher output needs. Certain ACOAs also shown that the only way to live is to protect themselves. This provides a feeling of freedom that allows them more self-reliant. ACOAs acquire a sense of survival instinct and they consider their freedom and hard work as important.

NON-ALCOHOLIC: FAMILY VIOLENCE

Domestic violence (also defined as physical assault or family violence) is sexual harassment or other crime, such as in marriage or coexistence. Intimate partner abuse that exists in a spouse or partner in an intimate partnership with the other spouse or partner, which may take place in heterosexual or homosexual partnerships or between former spouses or partners, is sometimes used as a synonym for domestic violence. Domestic abuse often includes aggression against infants, parents or the elderly in the broadest context. It takes a variety of forms including physical, social, mental, economic, theological, reproductive and sexual harassment, varying from mild types of manipulation to domestic violence to extreme physical assault such as trauma, beatings, female genital mutilation, to acid casting, culminating in transformation or death. Domestic homicide involves stoning, wedding burning, honor murders, and dowry deaths (sometimes including family members not living together).

Overall, women are the victims of domestic abuse and women are more prone to encounter extreme acts of aggression. They are often more prone to use intimate partner violence to self-defense than men. Domestic violence is also deemed acceptable in certain nations, in particular in the event of woman's real or alleged infidelity and legally authorized. Research has found that there is a strong and significant link between the degree of gender representation in a society and rates of domestic violence in countries with lower gender equality with a higher prevalence of domestic violence. Domestic

violence is one of the most unreported crimes worldwide both for men and women.

Domestic violence also arises because the attacker feels the harassment is a privilege, appropriate, deserved or impossible to be recorded. The harassment of children and other family members may result in an inter-generational loop that will believe that the violence is justified or condoned. Many individuals may not identify themselves as perpetrators or as suspects, since their interactions may be perceived as out of reach family conflicts. Domestic violence knowledge, interpretation, meaning and reporting varies greatly from nation to nation. In the sense of coerced or child marriage domestic abuse also happens.

In dysfunctional marriages there will be a period of harassment in which stress rises and conflict takes place, accompanied by resolution and tranquilly. Victims of domestic violence may be stuck by alienation, power and influence, painful links to perpetrators of domestic violence by societal recognition, lack of financial support, anxiety, stigma or child safety. The violence will contribute to physical disorders, dysregulated aggressiveness, serious health conditions, psychiatric disorder, low earnings, and weak communication. Significant psychological symptoms such as post-traumatic stress disorder can occur to victims. Children who live in a household with violence often show psychological problems from an early age, such as avoidance, hypervigilance to threats, and dysregulated aggression which may contribute to vicarious traumatization.

Physical

Physical violence is a touch that is meant to produce anxiety, discomfort, disability, emotional distress or emotional harm. The complexities of physical assault in relation to authoritarian dominance are sometimes complicated. Physical assault may be the result of other violent behaviors, including the harassment, coercion and reduction of the self-determination of the perpetrator, through way of segregation, exploitation and other limitations on personal freedom. The lack of medical attention, loss of sleep and coerced intake of narcotics or alcohol may often include physical assault.

Strangulation in the sense of domestic abuse has gained a great deal of attention. It has also been recognized as one of the deadliest types of domestic abuse; nevertheless, strangulation has also become a secret issue because of its absence of visible harm, and lack of societal knowledge and medical expertise in relation to it.

Domestic abuse murder accounts for a higher percentage of women's murders than men. More than 50 percent of people murdered by previous

or real sexual partners in the USA 37 percent of women murdered were murdered by a private partner relative to 6 percent of men murdered by a private partner in the United Kingdom. About 40 and 70 percent of women murdered were murdered by an intimate partner in Canada, Australia, South Africa, Israel and the United States. The World Health Organization estimates that approximately 38 % of people in intimate relationships have committed murder worldwide.

During pregnancy, women have an elevated chance of being raped, or long-standing harassment can alter their nature, allowing the mother and baby to suffer detrimental health effects. In comparison, pregnancy can contribute to suspension in domestic violence if the attacker may not wish the unborn child to be hurt. The incidence of sexual abuse for pregnant women is higher shortly after birth.

Acid attacks are an intense act of abuse when acid is poured on, typically on, the victims' heads, causing serious harm to long-term paralysis or lasting scar. They are also an act of retaliation for a woman to refuse a marriage proposal or sexual advancement.

Sexual

Sexual abuse includes any sexual act, effort to procure a sexual act, unwelcome sexual commentaries, advancement or pornography or otherwise aimed towards a individuals' sexuality by violence, as described by the World Health Organization. Sexual abuse The Commission also requires required examinations of purity and women's genital mutilation. Apart from the introduction of sexual activity by physical force, sexual assault happens when an entity is physically forced to consent, unable to comprehend the purpose or situation, inability to participate or unable to engage in the sexual act. It could be attributed to mild immaturity, sickness, injury, or the impact of alcohol or other medications or to coercion or pressure.

Victims of rape are believed to have brought dishonor or shame to their communities in many cultures and experience extreme family abuse, including honor killings, particularly if the victim is pregnant.

The WHO describes female genital mutilation as "any operations requiring the reduction of external women's genitals or any non-medical damage of female genital organs," and has been practiced on over 125 million living people and is centered in 29 countries in Africa and the Middle East.

Incest or inappropriate intercourse between an adult and an infant is a type of intimate sexual violence. Certain traditions are ritualized models of child sexual exploitation, in which a child is inducted to participate with adults in sexual activities, likely in

return for money or objects, in the presence or approval of a family. For e.g., in Malawi, some parents plan to have sex with their girls, also referred to as 'hyana,' as an initiation. The Council of Europe Convention on Children Security from Sexual Harassment and Sexual Abuse was the first foreign treaty to discuss children's maternal or indirect sexual abuse.

Reproductive manipulation (also referred to as 'coercive reproduction'), involve threats or actions of aggression towards the fertility, wellbeing, and decision-making of a spouse, which involves a series of activities designed to threaten, or compel a spouse into a pregnancy or terminating a pregnancy.

Marriage puts a societal duty on women to replicate in many societies. Paying of the bride price in Northern Ghana, for example, means that a woman is obligated to give birth to children and that women in child care face the danger of abuse and reprisals. That includes coerced marriage, coexistence and breastfeeding, even wife inherits, under its concept of sexual harassment.

Emotional

Emotional abuse or mental abuse is the pattern of conduct which scares, intimidates, dehumanizes or consistently undermines one's own worth. Psychological violence is, according to the Istanbul Convention, "the deliberate action of seriously harming one's psychological dignity by manipulation or intimidation."

Emotional harassment includes minimization, violence, alienation, public humiliation, persistent ridicule, excessive devaluation of identity, and repetitive stonewalling and gas lighting. Stalking is a widespread type of emotional bullying that is more commonly carried out in former or current intimate partners.

Economic

Economic exploitation (or financial violence) is a type of harassment where a romantic partner has power of access to economic capital from the other spouse. Marital assets are used for leverage. Economic abuse may include restricting a partner from accessing services, controlling what a victim can use or even manipulating the victims' economic resources. Economic abuse decreases the victim's self-supporting ability, enhances their dependence on an offender, including reducing access to schooling, employment, career growth, and the procurement of capital.

A victim can obtain a rebate, encourage careful supervision of money spending, avoid spending, often without authorization by the attacker,

resulting in the accumulation of debt, or loss of the victim's savings. Disputes over money spent will result in more physical, psychological, or emotional violence. Abusive interactions between both mothers and infants have been linked with malnutrition. In India, for instance, food retention is a recorded type of family violence.

SOCIAL EFFECTS OF ALCOHOLISM

The consumption of alcohol has a variety of major emotional effects. Many individuals struggle from depression, fear, irritability and a variety of relationship issues. Alcohol may induce nearly all psychological effects at persistently elevated levels, including transient visions of acute depression, sensory disturbances, sleeplessness, and agitation in the face of coherent cognitive processes and extreme anxiety. The most prevalent compartmental conditions linked with alcohol abuse issues and dependency are stress, anxiety and antisocial behaviour in the population.

75 % of people have medical comorbidity and are more likely to develop schizophrenia. Also, low blood alcohol content will adversely impact driving capacity.

In addition to detrimental effects on physical health and appearance, persistent alcohol dependence often has a number of adverse psychosocial consequences, including legal troubles, psychological impact, relationship disruption, financial difficulty and alcoholic mental distress and a social isolation.

Excessive substance consumption was harmful but contributes to a lower sense of adequacy and meaning, poor judgement and a degradation in self-perception and general attitude. The intoxicated individual takes on progressively less accountability, sacrifices his or her personal dignity, disregards his or her partner and family and usually becomes touchy, irritable and unable to talk about the issue. When the vision becomes compromised, a heavy drinker can't keep a position and is usually unqualified to satisfy new demands. Disorganisation and degradation of the general personality could be expressed in work loss and marriage dissolution. Chronic alcohol usage can more usually contribute to hallucinating psychotic illness.

Alcohol-dependent people have substantially raised the levels of neuroticism and psychoticism. They are extremely hormonal, sometimes nervous, inglorious, moody, agitated and often unreasonable thoughts and feelings of remorse. They still have a poor degree of self-esteem and timidity. Moreover, they are far more violent, impulsive and antisocial and are self-centred and persistent in their minds. In human interactions they are often always harsh, unemphatic and impersonal in contrast to typical husbands.

So, alcohol abuse is a multifaceted issue that affects the whole society or country and not just the individual. Therefore, it must be recognised and addressed at different stages to support the addict and minimise damage.

CONCLUSION

Alcohol intake in India is a big public health issue, but non-alcoholic ingestion is often the same cause. In order to grasp the issue deeper, multi-centric empirical community-based study experiments must be carried out in separate nations. Different decision leaders, media, educators and public must be informed by educational projects and health education campuses regarding the impact of addictive drinking. Reasonable alcohol regulation legislation and precise goals such as alcohol pricing, development and promotion strategies is incredibly important.

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Corresponding Author

Mamta Rani*

PhD Scholar, Department of Psychology, C.C.S. University (Campus), Meerut, Uttar Pradesh, India

mamtaranimrt@gmail.com