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Children in Recovery

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frequently the deciding factor and that little is known about appropriate intervention for caregivers that might influence the quality of life for both caregiver and patient. Further research is suggested.

Part IV. The Interplay between Formal and Informal Care

The balance that is needed between formal and informal care is addressed by Soldo, Agree, and Wolf, while Kane and Kane (based on the assertion that the health of the elderly and the care they receive is a dynamic system) suggest that a better means of transitions between these systems would benefit the patient. In the epilogue, written by Mechanic, future challenges are identified for those in the health care system that serves older adults. And, like most of the authors, he recommends future research.

The Reviewer's Conclusion

I know of no better way to express my own sentiments related to the text, and to show my appreciation to the editors and other authors, than to "borrow" a quote from the Foreword by Riley and Williams:

All too few studies have focused on the impact of health care on the numerous biological, psychological, and social changes that people experience as they grow older. Nor has adequate attention been paid to the different types of care available to people as they move along their own life course through the health care system. For its contribution toward filling some of this void, we salute this volume. (ix)

Children in Recovery, by Rosalie Cruise Jesse.

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What a daunting task Rosalie Cruise Jesse faced when she wrote *Children in Recovery*: to tell the story of the effects of alcoholism on the family. Alcoholism is of interest to clinicians and researchers from many disciplines. Investigators have looked at alcoholics and have seen different faces: a person with a genetically transmitted disease, one with an aculturally determined behavior pattern, a victim of ethanol molecules attacking liver cells or distorting central and

peripheral nervous system functioning, someone in need of medical treatment, or someone in need of the fellowship of peers and a new sense of values to overcome a self-destructive addiction (Steinglass, Bennett, Wolin, and Reiss, 1987).

The children of alcoholics variously have been described as forgotten children, hidden tragedies, unseen casualties, or as problems neglected by researchers and reviewers. One reason for this neglect seems to be the lack of a truly family-oriented interactional approach to alcohol problems.

This failure is not due to a lack of research. Numerous articles about children of alcoholics have appeared in the last decade. However, previous research has failed to develop a coherent picture of children in families with alcoholic problems that could inform and stimulate professionals to make an active and practical response. Also, professionals who specialize in alcoholism, such as psychologists, psychiatrists, counselors, social workers, and clinical sociologists, have been slow to recognize the needs of families traumatized by alcohol. Jesse's book fills this gap by developing a picture of the situation and provides the professional with guidelines to assess and respond to family needs.

Children in Recovery serves a number of important functions. It can help to stimulate theory building and focus attention on a neglected but crucial topic; it provides an organized search for data that allow the clinician to generate meaningful hypotheses; and it offers a theoretical model that distinguishes maladjustment from adjustment and a clinical model that provides a blueprint for intervention.

It is commonly observed by those who work in treatment programs for children with substance abuse problems that there is a disproportionately high percentage of family members—frequently parents—who abuse substances. Treadway (1985) estimates that 80 percent of children with substance abuse problems have parents who also have substance abuse problems. Jesse points out that parental alcoholism contributes to character disorders in the child. She implies that the parents' alcoholism also increases the child's propensity for alcoholism: "While a child may be genetically predisposed to develop alcoholism in later life, it seems that in many instances exposure to alcohol is the catalyst activating that predisposition."

The author aptly portrays many problems experienced by children of substance-abusing parents. An effort has been made to identify dysfunctional family dynamics that thwart healthy development of the children of chemically dependent parents. The book focuses on developmental and therapeutic needs of traumatized children between the ages of seven and eleven.

According to the author, recommendations for intervention and healthy restoration of self-esteem for children should begin with an assessment of the parents' addiction and should consider the child's subjective experience in the family context. The author advocates that treatment should consider the child's

subjective experiences and the child's developmental realities. *Children in Recovery* describes the disruption of the child's normal growth pattern due to parental substance abuse and discusses and identifies some maladaptive coping strategies used by these children. The author's strong advocacy for these children and for healing the parent-child relationship is a major strength of this book.

Jesse also points out that the child in recovery has generally been traumatized by such manifestations of the parents' chemical dependency as abusive environmental conditions, psychological or physical maltreatment, incest, exploitation, or neglect. She discusses the pathogenic family dynamics endemic to alcoholic and addictive families and provides useful case studies and descriptions of maladaptive behaviors displayed by child and parent. She gives examples of role reversals where the child takes on the parent role and vice versa. Jesse advocates treatment that considers the child's psychosocial milieu as well as cognitive, affective, developmental, and motivational factors. The role of the clinician is to help the child recover from isolation, alienation, incest, rejection, trauma, corrupting abandonment, and excessive use of defense mechanisms, and to facilitate life-affirming gestures in a world that borders on destruction. Emphasis is placed on empowering the child to sustain life and to regulate self, and thus to become a fully functioning autonomous person.

The author depicts the realities of childhood development and emphasizes long-term continuous treatment. She also emphasizes the importance of the post-traumatic stress disorder applicable when classifying the child of addicted parents. The trauma is a result of the traumatic family experience.

Many children of such families experience "the obvious stressors of child physical and sexual abuse, also witness violence, sexually protective interactions, and many other types of destructive family scenes outside the range of normal childhood experience." The resolution proposed by the author requires the clinician to restore balance and health to the family. According to the author, the entire family should be involved in the treatment—including the incestuous parent, if that is possible.

Before treatment can occur, the following prerequisites are necessary:

- Parents must acquire knowledge about the needs of the child in recovery.
- An assessment is conducted to determine the child's perceptual, cognitive, affective, motor, social, and motivational levels.
- The child's stress resilience and self-regulation should be determined.
- The family's problem solving capabilities and the family's support system should also be determined.

Throughout the book the author states that the therapeutic process provides the child with required individual and group intervention. The parents also function as therapeutic agents. The PACT (parent as co-therapist) enables parents to participate in the child's healing. The book provides excellent examples of cases, of groups in operation, and the behaviors and problems that the clinician may encounter. Other advantages are:

- The book is very readable and well written with excellent case studies. Theories are converted into observable behaviors of both client and clinician.
- The book provides guidelines that a skilled professional can use in treating children of dysfunctional families.
- The book enables the helping professional to understand the life experiences of the child in recovery.

Weaknesses noted are:

- The book is often redundant, though the repetition could reinforce the readers' learning.
- The book may generalize from alcoholic family symptoms and behaviors to other substances of abuse which may or may not be appropriate.

In summary, the book is recommended for professionals who deal with families and children.

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