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Power and Control in Families of Alcoholics

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The Theoretical Assumptions

For many sociologists, the basic and most fundamental unit of analysis is the social interaction. Everyday life is assumed to be composed of encounters which have a structure following a specific set of rules. Consider a conversation with someone you just met by accident on the street. Predictable dialogue follows: “How you doing,” “Fine, and you,” “Good. And the kids” “Fine” etc. Non-verbally, glances and touching protocols are also being followed, depending on the gender, age and prestige of the persons involved.

This is all to say that within any social interaction, whether as simple as a chance encounter in a shop or a formal presentation to a head of state, there exists any number of behaviors which occur in a routinized way, following social conventions and structured around both explicit and implicit definitions of the situation. The people involved in an interaction bring to it meanings, developed culturally over time and space, and evolve meanings about it as the interaction occurs.

However, the meanings involved, and the rules governing the interaction, tend to follow certain protocols of power and control. These meanings and rules are usually not equally or democratically introduced into the interaction. Often very explicit norms, such as etiquette rules or codified laws, as well as numerous implicit customs and conventions regulate the exercise of power and control in a situation. For example, social psychologists have found, in repeated research, that people, who wish to control an interaction when speaking, should avoid looking at the listener. This “allows speakers to ignore the role of the glance in turn-taking” and “to talk down verbal attempts to take the floor.” Speakers in control during an interaction look at others less, smile less, interrupt more and fill pauses. Dominance in an interaction is also affected by gender (men control more: touch but are not touched and pro-act rather than react) and by social status (higher status or prestige allows one to initiate interaction and select the tone, to use an informed style, and to terminate the encounter). Several studies, as quoted by Gahagan, demonstrate that women in interactions use a more hesitant verbal style, ask more questions, avert their eyes more, have more difficulty in getting their topics adopted, in short, are more unassertive and have less control of the situation than men.

Goffman has further pointed out that people of higher social position also control the physical space involved during an interaction. Lower status people are less likely to be allowed close proximity to higher status people, are more likely to wait before speaking, and control less of the space involved.

Finally, such social theorists as Homans and Thibault and Kelley have argued that all interactions can be viewed in terms of exchange theory. Those most in con-
trol have power over the others who are dependent on them. Power is potentially equalized when one wants what the other can give, but so long as power remains unequal, interdependency and balanced control cannot be achieved.

In short, the study of any form of human behavior is essentially the study of social interaction. And any analysis of social interaction basically is the examination of power and control. It is the shifts in power and the devices used to maintain power which social scientists study. Who has the power, who maintains control, how one loses power, and how it is exhibited are the questions focused upon. It is with these notions that we analyze the dynamics within a family affected by alcoholism.

The Alcoholic Family

One of the paradoxes of the alcoholic family situation is that as the alcoholic loses control over drinking and loses control over many family role responsibilities, the alcoholic, in fact, becomes a more powerful force in the lives of the other family members. That is, the alcoholic’s behavior, mood, and feelings begin to structure the family interactions. All their roles and relationships start to revolve around the alcoholic’s condition which is imperceptibly controlling everyone else’s condition.

But it is only one kind of social power being exhibited, for the more explicit power is also being lost. Decision-making, money-control, and often job-power are slowly being eroded, while the more implicit, more subtle kind of social power is being fortified. An almost unseen force is exerting itself on the family members as their lives begin to be affected by the alcoholic. Their psychological well-being and their social welfare are tampered with in many subtle and covert ways. And its source is the power of the alcoholic to control others’ lives. In short, as personal power is lost, as explicit social control is eroded, the implicit social power of the alcoholic is enhanced. The lives of the other family members exhibit signs of trying to regain their own personal and social power.

As Shapiro states, the relationship between the alcoholic and other family members is a competitive struggle among people driven by strong dependency needs. They usually seek to maintain the drinking pattern of the alcoholic in order to continue control. Family members adopt typically new roles and relationships in the family social system to accommodate the alcoholic. In so doing, they are, on one hand, acknowledging the alcoholic’s power and, on the other, creating new power and control roles for themselves.

It is common for children in alcoholic families to take on parental roles as their alcoholic parent increasingly adopts more child-like roles of dependency and non-responsibility. Normally, children in family systems have lower status roles. Based on age and social status, children are typically expected to be dependent and non-responsible. They are addressed to, react rather than initiate in interactions, and are expected to control less in space, dialogue, and non-verbal behaviors.

In the alcoholic family, however, much of this is reversed. More critically for mental well-being, is the observation that much of this new role playing is inconsistent and in conflict. In school by day they are typical children, that is, controlled, powerless, dependent, and talked to. At home, by night they become parental, that is, responsible, initiating, and controlling. This inconsistency between school role
and family role and between family role when parent is sober and when parent is drunk may be one of the major sources for later life adjustment problems in adulthood. The point, of course, is that power reversals are frequent and they depend on the alcoholic's condition. The alcoholic paradoxically loses the power of the adult, yet controls the entire situation of when others can take over.

Similar effects can be seen with the spouse or the significant other of the alcoholic. Again, gender differences may affect the power dynamics here. Evidence suggests that husbands are more likely to leave alcoholic wives than wives leave alcoholic husbands, underlining the basic sociological assumptions of power being unequally distributed according to gender in social interactions. Furthermore, women who gain new-found powers in the absence of the alcoholic husband often wish to maintain this power even after his sober return to the family system.

A special case can be made for same-sex relationships, such as gay and lesbian couples. In these situations, power is potentially equal since gender differences don't occur.11 Often, economic and age inequalities are also minimized when both partners are of the same sex, unlike more traditional heterosexual couples. For gay and lesbian couples when alcoholism becomes an issue, the power equality shifts, whereas in a heterosexual couple, power reversals are more common. What this means is that in a gay couple in which interdependency based on equality is more likely to occur, alcoholism could bring an imbalance where one partner now becomes more powerful and the other more dependent. This contributes additional tensions to a relationship which already faces some anxiety, given the values of the dominant culture. In traditional heterosexual couples, the source of power is reversed if the male is the alcoholic and exacerbated further if the female is the alcoholic.

Regardless of the type of couple, whether children are involved or not, all the members of the family social system experience altered dynamics of power and control. For many, this new power becomes comfortable and attempts are made to preserve it. In some cases, maintenance of the alcoholic's drinking behavior becomes a goal. By doing so, power is maintained. For example, children learn to manipulate the alcoholic parent and receive benefits when he or she is drunk (extra money, staying up later, using the car) that they wouldn't get when he or she is sober. Significant others also find they maintain control of important family decisions, money, and related items when the alcoholic continues to drink. The "enabling" behaviors the family members exhibit and the tensions that accrue from power shifts and reversals can lead to what is currently labeled "co-alcoholism" and "para-alcoholism."12 The family members — the spouses, lovers, and children — begin to show signs of their own mental and physical health problems. It is at this point that intervention programs become necessary and that the family members must be shown how much of their own lives is being controlled by the alcoholic. The apparent powerlessness and lack of control by the alcoholic must be unveiled to show it is merely an illusion: the alcoholic still remains in charge. And the effects of that power are exhibited already in the family members' behaviors. Unfortunately, some of the outcomes will not be identified until years later, as can be seen in adult children of alcoholics, many of whom become alcoholic themselves, show a high need for control, or become emotionally coupled with an alcoholic. It is only then that their own power issues emerge and specialized treatment is required.
Conclusions

The purpose of this paper has been to describe a theoretical perspective from sociology and how it could relate to the alcoholic family. My belief is that the quality and efficacy of alcoholic treatment and prevention programs depend on the quality of the theoretical assumptions brought to the program. Too often we see recovery plans or educational policies developed without any clear foundations or perspective. We assume that programs which work for white males will also be effective for women, blacks, and other minorities. We often fail to consider elementary social and cultural processes and differences in meanings.

It is for these reasons that this paper has focused on developing a theoretical viewpoint. By understanding the concepts of power and control and how they work in a social interaction such as an informal encounter or a larger social system, we begin to see more clearly the issues facing the family members of an alcoholic. It is through the dynamics of power and control that we uncover the underlying tensions and relationships in the family situation. And it is on these concepts that prevention and treatment programs should focus.

By analyzing family power struggles, the role of the alcoholic in controlling everyone else’s moods and behavior, the power shifts and reversals in the family system, and the attempts by children and significant others to maintain power, we can get a more comprehensive picture. In so doing, the potential for more accurate and more successful programs is increased. Furthermore, by encouraging family members to seek treatment, programs could get the children and significant others to discuss the power issues, to role-play different positions of control, and to develop strategies to overcome enabling behaviors to maintain control. Prevention programs would also benefit by educating young people to acquire self-esteem through cooperation rather than through power.

In short, power and control are basic elements of every social interaction. They can be used to manipulate or they can be used to cooperate. The family of an alcoholic is already in a vulnerable state of changing roles and of power reversals and shifts. It is important, then, for everyone involved to understand these basic elements of power and control and how they relate to the social interactions within families of alcoholics.

References


