Risk and Resilience: The Family Experience of Adolescents With an Addicted Parent
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Risk and Resilience

The Family Experience of Adolescents With an Addicted Parent

Natti Ronel
Ronit Haimoff-Ayali
Bar-Ilan University, Ramat Gan, Israel

The family relationships of adolescents brought up by an addicted parent were studied in a qualitative research. The authors interviewed 19 adolescents, all of whom had a parent either actively addicted to drugs or else recovering addicts. The participants were assigned to one of two groups based on the degree to which they maintained normative lives or descended into addiction. It was found that the relative strength of the adolescents within the triad of forces (mother, father, self) had great significance for their development. Younger siblings awakened a desire to protect them from a life of addiction. The extended family was also found to have a potential to influence, in keeping with the significance the young people attributed to these relatives. The results indicate a definition, the first of its kind, of subjective risk and protective factors representing subjective perceptions of the reality of the lives of the participants.

Keywords: addicted parent; adolescents; phenomenology; protective factors; resilience; risk factors

The high prevalence of substance addiction and its lack of socioeconomic boundaries has created a situation in which millions of children and youngsters are growing up with an addicted parent (Werner, Joffe, & Graham, 1999). The National Association for Children of Alcoholics (2001) has estimated that 11 million children in the United States grow up with an alcoholic parent, and about 19 million children are exposed to alcohol abuse or alcoholism at home. In a summary of research, Fals-Stewart, Kelley, Cooke, and Golden (2003) cited even higher figures, estimating that 17.5 million children have an alcoholic parent and more than 12 million have at least one parent who used drugs during the previous year. Children and adolescents who are brought up in a home where one or both parents are addicted to drugs are the

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direct victims of inappropriate life conditions; they typically experience emotional, cognitive, social, and behavioral difficulties (Copello, Velleman, & Templeton, 2005; Peleg-Oren, 2002) and consequently are at risk to deteriorate into antisocial behavior (de Kemp, Scholte, Overbeek, & Engels, 2006) and substance abuse or addiction (Allen, Donohue, Griffin, Ryan, & Mitchell-Turner, 2003).

Notwithstanding the research in progress on children of addicted parents (e.g., Johnson & Leff, 1999), the issue of their unique subjective experience has not received due attention. To address this issue, this study was designed as a qualitative, hermeneutic–phenomenological investigation. The objective was to examine how adolescents raised in a home with an addicted parent experience some aspects of their family relationships and how, in their perception, this experience has influenced either their own deterioration in the footsteps of their addicted parent or, alternatively, their maturing to lead a normative life. This study thus joins a growing corpus of research on victimology that focuses on the experiential knowledge of the victims themselves regarding the relationships that damage or fortify their lives and their subjective meaning (Ben-David, 2000).

**Background**

A review of the existing research indicates objective genetic, personal, familial, social, demographic, and environmental conditions that serve as risk factors (Kaplan, Turner, Norman, & Stillson, 1996), which may be divided into three main spheres: constitutional predisposition, environmental factors (family and peers), and life events (Swadi, 1999). For example, the rate of drug use among young men is higher than that among women of the same age, and the period of major risk of initiation is between 16 and 18 for alcohol and marijuana and 18 for other illicit drugs (Beman, 1995). Psychological risk factors include depression, anxiety (Zapata, Katims, & Yin, 1998), low self-esteem, high motivation to engage in drug abuse (Silberg, Rutter, D’Onofrio, & Eaves, 2003), a history of posttraumatic stress disorder or victimization (Kilpatrick et al., 2000), and so forth.

A family history of substance addiction is known to be a strong risk factor (Biederman, Faraone, Mounteaux, & Feighner, 2000) both on its own and when associated with other visible risk factors. Substance abuse affects the family as a whole as well as each of its constituent members (Velleman, 1993). The family surrounding the addict is considered a closed social system, which often represents a significant source of chronic tensions and anxieties. It has been found that where the head of a family is addicted to drugs, characteristically there are frequent conflicts, meager family management skills, weak cohesion, and other vulnerabilities. These families often exist in poverty and want, and they cope with difficult circumstances including mental and physical illnesses, problems with the law, and low scholastic achievement. One of the principal problems arising from alcohol consumption or abuse of narcotics is that of violence (Velleman et al., 1993).
Members of a family in which one or both parents abuse drugs or alcohol tend to suffer from physical, psychological, and social problems. On occasion, there are also symptoms of anxiety accompanied by depression, psychosomatic complaints, and various behavioral or emotional disturbances (Velleman & Orford, 1999). The children of addicts have been reported to have behavioral problems, manifested in hyperactive and impulsive disturbances, as well as antisocial behaviors, which express themselves in physical and verbal violence, avoidance, a low level of ability for verbal expression, and so forth. In a study of children of 112 fathers addicted to drugs, a relationship was found between different variables of the addiction and the degree of the children’s psychological adjustment (Fals-Stewart et al., 2003). In a study of 78 school-aged children whose parents take drugs, a high rate of psychiatric problems was found (60%), including depression (20%) and attention deficit hyperactivity disorder (Weissman et al., 1999).

Exposure to risk factors that are related to the parents’ dysfunction increases the likelihood that children will eventually develop various behavioral problems, including the use of narcotics (Butler, Fearon, Atkinson, & Parker, 2007; Catalano, Haggerty, Gainey, & Hoppe, 1997). In addition, the level of drug use among young adults who were children of at least one addicted parent was significantly higher than that of children of nonaddicted parents (Flora & Chassin, 2005). The development of drug abuse in the children of such families has been understood as arising from the poor parenting qualities exhibited by the parents and from the nature of the family unit (Barnard & McKeganey, 2004; Blechman, 1982; Cermak, 1986; Hogan, 1998; Paolino & McGrady, 1977). Long-term exposure to parental drug addiction has been shown to have a more detrimental effect on children’s behavior than short-term exposure does (M. L. Kelley & Fals-Stewart, 2008).

According to the ecological approach, risk factors like being raised in a family where a parent is addicted do not inevitably bring about any specific given result (Fraser, 1997); they do, however, interact with the child’s developing in the world and have some influence in the direction of the development of substance abuse and addiction (Garbarino & Abramowitz, 1992; Kilpatrick et al., 2000). Research in other areas has shown that exposure to a pathogenic factor often has a negative influence; however, there are people who acquire a coping style in which the pathogenic factor is seen as a challenge. In such a situation, where the adolescent gives new direction and meaning to the pernicious circumstances of his or her life, the pathogenic factor becomes a salutogenic one, enhancing the personal well-being of the individual (Antonovsky, 1979; Cowen, 1994). Correspondingly, some research indicates that many of the grown children of addicts lead lives free of the problems of drinking and addiction or other psychological problems (Velleman & Orford, 1984). There are scholars who claim that the sweeping assessments and assumptions found in the literature are overstated and that alongside those who confirm the popularly accepted assumption there will always be children who reach adulthood without suffering
from these problems (Harford, Haack, & Spiegler, 1987; Rutter, 1990). The ability to resist the influence of the risk factors is explained by exposure to other conditions that operate as protective factors. In the case of drug abuse, personal factors include a positive orientation, high intelligence, a resilient temperament (Pollard & Hawkins, 1999), realistic appraisal of the environment, social problem-solving skills, sense of direction, and strong faith or interest (Kaplan et al., 1996). These and others may help individuals to resist the effects of their personal vulnerability and various social and environmental hazards (Bolognini et al., 2005).

To summarize, studies clearly show that living with an addicted parent is a risk factor associated with various problematic consequences, including substance abuse. However, other studies show that the objective circumstances of growing up in an addicted family do not necessarily lead to such negative consequences. Hence, there is a need for a different perspective, namely, investigating the subjective circumstances that combine with the more objective one to shape the individual’s development. More specifically, it is important to understand how children of addicted parents subjectively perceive the processes of risk and protection and to identify subjective experiences that may improve coping in the face of the objective conditions of risk to which they are exposed. This was the purpose of the current study.

Our aim in this study was to examine the adolescent children of parents addicted to drugs and alcohol as “persons-in-context” (Agar, 2003, p. 975) who were brought up against the background of a parent’s addiction. This method allowed us to learn directly from these adolescents, in their own words (Harman, Smith, & Egan, 2007). This article reports on a portion of a more comprehensive study of the children of addicts that also examined their relationships with the addicted parent, experience of self (the reflective perception of themselves within the world), relationships with peers, experience in school, and vision for their future. In this study, we examined the subjective influence of the risk and protective factors within major aspects of the family relationships to which the addicts’ children were exposed.

Method

This research is a qualitative–constructive study, emanating from the phenomenological–hermeneutic approach (Bryman, 1988; Carter & Little, 2007; Shkedi, 2003; Spinelli, 1989; Van Menen, 1997). The phenomenon studied is the subjective experience of adolescents who grew up with an addicted parent, the meaning they ascribed to this experience, their intentions when related to their experience, and their perceptions of social and personal processes concerning the parent’s addiction (Kockelmans, 1987; Polkinghorne, 1989). The methodology was chosen to describe these subjective constructs and also to provide an interpretation that is grounded in the subjective experiences of the adolescents (Aspers, 2004, p. 5)
Participants

The participants were 19 young people, all of whom had one or both parents (biological or stepparents) either actively addicted to or in recovery from addiction to drugs or alcohol. The participants belong in one of two principal groups:

1. Nine adolescents managed to maintain a normative life without drug abuse.
2. Ten adolescents abused drugs, eight of whom degenerated to addiction, delinquency, and violence but were in recovery when the interview was conducted; one who was still abusing drugs with a delinquent lifestyle; and one who used them on occasion and was leading a normative life. All the members of this group, with the exception of the last one mentioned, had experienced forms of street life while they were active drug abusers or addicts.

Table 1 presents individual background characteristics of the participants. The distribution of the gender, ethnic origin, and ages of the participants was as follows: 12 boys and 7 girls, 13 Jews (3 of them immigrants from the former Soviet Union) and 6 Arabs, between 14 and 22 years of age. The fathers or father figures of all 19 participants were drug addicts; 17 were biological fathers, 1 was a stepfather, and 1 was the partner of the participant’s mother. Three participants also had an addicted mother. At the time of the interview, the parents of 10 participants lived together, 7 lived separately, and 2 fathers had died; 3 participants lived in a youth shelter, 4 in a therapeutic community, 11 in their parents’ homes, and 1 with her boyfriend. At the time of the interview, 7 participants were still studying at school, 7 had dropped out, 1 had dropped out but resumed studies, and 4 had graduated.

Procedure

The sampling method was information oriented with strategic selection of extreme and paradigmatic cases (Flyvbjerg, 2006). The sampling was intended to obtain sufficient material to describe the various facets of the phenomena under study. Therefore, it included, inter alia, participants that clearly represent criminal and drug problems and participants that evidently represent normative development. The participants came from diverse backgrounds (Jews and Arabs; girls and boys; immigrants and veteran Israelis). We stopped recruiting participants when we felt the data obtained had fulfilled this goal and no new perspectives were gained from the interviews.

The participants in the study were in “problem experience” (Shaw, 2005, p. 841). Locating and recruiting them was a challenge that called for special means. Therefore, they were located and enlisted in a number of ways: on the basis of our acquaintance with their parents, with the assistance of coordinators of treatment for addicts, and by soliciting young people living in a therapeutic community and in a youth shelter. In the course of our search for participants in the research, we
<table>
<thead>
<tr>
<th>Name (False)</th>
<th>Gender</th>
<th>Age</th>
<th>Ethnic Origin</th>
<th>Residency</th>
<th>Delinquency and Drug Use</th>
<th>Addicted Parent</th>
<th>Do Parents Live Together</th>
<th>Education: Completed High School</th>
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<td>Arab</td>
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<td>Jewish</td>
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<td>Yes</td>
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</tr>
<tr>
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<td>In recovery</td>
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<tr>
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<td>Jewish</td>
<td>Treatment community</td>
<td>In recovery</td>
<td>Father</td>
<td>Yes</td>
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<tr>
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<td>In recovery</td>
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<tr>
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<td>Yes</td>
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</tr>
<tr>
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<td>18</td>
<td>Jewish</td>
<td>Parents' home</td>
<td>Never</td>
<td>Father</td>
<td>No</td>
<td>Dropped out</td>
</tr>
<tr>
<td>Doron</td>
<td>Male</td>
<td>20</td>
<td>Jewish</td>
<td>Youth shelter</td>
<td>In recovery</td>
<td>Father</td>
<td>No</td>
<td>Studying in school</td>
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<tr>
<td>Sigal</td>
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<td>Jewish</td>
<td>Parents' home</td>
<td>Never</td>
<td>Father</td>
<td>No</td>
<td>Studying in school</td>
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encountered a degree of typical suspicion and resistance (Harman et al., 2007; Shaw, 2005), whether on the part of the addicted parents that we approached or of the adolescents whose parents had agreed to their children taking part.

The participants were interviewed in depth, following interview guidelines constructed especially for the study. Each interview was conducted as an open conversation that proceeded primarily according to the data revealed during its course. The questions were all open and attempted to reveal the subjective perceptions, experiences, and understanding of the participants with regard to the topics under discussion. In this study, we report only the parts of the interviews that address these research questions.

All of the interviews were conducted at the places of residence of the participants. Most of the interviews were audio recorded and subsequently transcribed. For technical reasons, in five of the cases a written transcription (instead of audio recording) was made as the interview proceeded.

The data were analyzed according to the qualitative–constructivist method (Giorgi, 1975; Polkinghorne, 1989; Shkedi, 2003) and included a preliminary reading of all of the descriptive material to arrive at a sense of the whole experience of the children of the addicts. This was followed by a second reading in which we identified separate categories of meaning experienced by the participants. At this stage, we had a list of many different categories still unsorted and with no hierarchy among them. The list included categories such as personal background; background of the parent’s addiction; familial atmosphere; cold, noncaring home; wish for family stability; witnessing drug use by parent(s); hope; (non-)acceptance (of self and of the addicted parent); emotional abuse; experience of rejection; breakup of family; blaming the addicted parent; identification with the parents (addicted and nonaddicted); recovery of the parent; fear of relapse of the parent; expectation of change; a quest for familial connection; and many others concerning different life domains. The different categories were compared with each other, narrowed down to principal themes and subcategories, and linked with corresponding professional terms.

At the end of this stage we had a list of major themes, each consisting of corresponding categories and subcategories. The leading themes were relationships with the addicted parent, the meaning of family relationships, experience of self (the reflective perception of themselves within the world), relationships with peers, experience in school, and vision for their future. The meaning of drug versus normative career emerged as a central narrative and was present regardless of theme. This article describes only a portion of the entire research, focusing on one theme, namely, the meaning of the family relationship. Based on the categorization and analysis, we were able to integrate the insights we attained into a consistent description of the significance of the family relationships in the experience of growing up in a home with a parent who is an addict. This description and its interpretation are reported in detail in the Results section.
Validity

The process of validating the findings consisted of several phases. First, we analyzed the interviews independently so we could identify different themes of significance separately. Once we had identified the themes, we discussed the meanings of the different themes and their component parts; finally we arrived at a conclusion about the grouping of the themes, as reflected here. In the second phase, the draft of the study was submitted to two external readers for their perusal and opinions, to provide their perspective. In phase three, the draft was submitted to another external reader, this time a young woman who is the child of two addicted parents, for her comments. We then considered the comments of all the external readers and made modifications accordingly. Finally, to further reinforce the validity of the findings, we provide extensive quotations from the participants.

Ethics

This study is part of a larger research project that was supported by the Israel Anti-Drug Authority and the Interdisciplinary Center for Research in Policy and Treatment of Children and Youth, Tel Aviv University. Both organizations approved the ethics of the study.

Before interviewing, we received the informed consent first of the responsible adult (parent or the director of the youth shelter or therapeutic community) and then of the participants.

Any identifying item that might jeopardize the anonymity of the participants was carefully removed from this article. The names provided here are pseudonyms.

Results

Growing up in a home afflicted with addiction produces special family traits that influence the adolescent’s experience of self. As we stated in the introduction, this study is a portion of a wider one. We present three major themes that were raised by the participants concerning their experience of the relationships within their family.

One manifestation of the participants’ encounter with the destructive addiction is a yearning for a different kind of family life—envisioning or fantasizing about the idealized family that presumably almost was or that one day will yet be. Based on its significance for our participants, the first major theme discussed here is the vision of the ideal family and its significance. Within the gap between this vision and reality, the nonaddicted parent (the mother, in the case of our participants), if such exists, can play a major role. The second major theme is, therefore, the children’s perception of the role that their nonaddicted mothers played within the experience of the melodramatic family life and especially their perceived ability or inability to
provide protection for the participants. The third and last theme is the experience with other family members and its significance in protecting them from further deterioration.

**Yearning—The Vision of the Ideal Family**

My best friend—I used to spend more time at her house than here. Because for many years, it really wasn’t very pleasant to be here. . . . Her parents really get along so well together. . . . Today I’m thankful that I could see what a normal family looks like, how they function. . . . That was my greatest dream, that I would have a normal family. (Osnat)

The above quotation reveals one of the great focuses of pain within the experience of growing up in the home of an addict, expressed in the unrealized aspiration for a normal family life: a home that is stable, loving, care-giving, caring; a home in which the children’s place is clear and secure. The painful reality of the lack of such a home finds powerful expression in the description that some of the participants shared with us of their hidden longing for a different family life or in their description of how they would lead their family life in the future.

Like Osnat, Doron, who experienced a father who was violent and beat his mother in his early childhood, also returned continually to the importance of family for him, to his idée fixe of having a loving family.

You could see these feelings, like—“sit and eat, I’ll make you, are you hungry?”—so I had this feeling like I wish I had such a mother. . . . I can say that I was jealous, I wanted it too. I also want this love. (Doron)

Lately Doron’s father’s illness had brought the family members somewhat closer to each other but this was not enough for Doron, and in his vision, as he progressed in his own recovery, he would be the one to reunite his whole family. Doron and Osnat both described dysfunctional, vulnerable homes. In her childhood, Osnat wandered back and forth between her mother’s and her father’s homes, and in the severe strife between her parents, she was unable to find her place with either of them. Doron spent most of his childhood in institutions—residential care facilities, homes for delinquent youth, and finally juvenile prison. Both participants, like others with similar family experiences, yearned for a different kind of home, a normative one, that is, a nonaddicted home with caring, loving relationships and the maintenance of family rituals (such as dining together calmly). The experience they lacked existed strongly in their vision and had the utmost significance for them. Abed drew a direct connection between the lack of love in his childhood and his criminal and drug career. He further projected his vision for a better family onto the future, imagining how he would treat his own family one day:
Life showed me how important a parent is. Looking back a little, if I had received attention, warmth, and love, I wouldn’t have gotten to where I am. . . . The dream of being a father, raising a family, having a spouse, having children and giving them everything that I wasn’t given . . .

Analysis of participants’ stories shows that all of them emphasized the great importance of the need for supportive parents and family. However, the more intense the participants’ experience of their dysfunctional home was, the more they expressed their yearning for a stable home. The further their childhood experience was from the vision of a stable home, the more significant was the position of this vision in their lives—at least as it was reflected in the manner in which they told us their life stories, such as repetition of this narrative or the emotional impact associated with it in their descriptions. It seemed as though the persistent deprivation of a proper family burst into a vivid image straining to come true. Occasionally the longing focused, as we saw with Osnat, on the attention the individual paid to families maintaining a stable home. For example, Sasha, who came from an unstable home with his alcoholic, violent, criminal stepfather as its focal point, drew encouragement from the loving family life of his sister and her husband, and he also took his maternal grandparents, a stable couple married for more than 50 years, as an example of a happy marriage. These were vivid examples for Sasha in his dreams about the future:

I see this picture: To be with a wife and a child. . . . I’m going to give my children something completely different from what I got. (Sasha)

How elusive or how attainable is the fantasy of a stable family? It appears that the recovery of the addicted parent is, as we would expect, an important element in bringing the realization of the vision within one’s grasp, although in some circumstances this is insufficient. Osnat, for example, had been fortunate enough to experience the kind of family life she desired. Occurring after her father had begun his recovery and she and her sister followed the same path, this experience exemplifies the importance of the family relationship in recovery as well:

Thanks to the fact that my dad . . . cleaned up, and my sister and I followed in his footsteps, and the whole family went through recovery and did a complete about-face; my dream actually came true . . . of having family meals together sometimes. (Osnat)

Alon also had the good fortune to experience another home—close-knit, loving, and caring—thanks to both his parents’ commitment to recovery and to his own steps toward recovery:

I see my parents today like some young couple with a small child [Alon’s younger brother]. I swear, even if someone put a gun to my head, I would never be jealous of my brother. Sometimes, when I watch them laughing with him and horsing around on
the carpet, I get this feeling that I never had that . . . and I feel a kind of happiness for him, but sadness for me. (Alon)

But for others, the vision still seemed beyond reach, regardless of how much they desired it, because the realization of the dream also depended on other family members. Doron’s parents lived apart and his father was on his deathbed, so the father’s recovery from his addiction had come too late for a warm family life. Dima, a recovering addict whose father was still an alcoholic and whose mother had recently left his father, expressed pained frustration when he described his mother’s unwillingness to try and save something in their family life:

Today I could choose to rehabilitate my family with the help of [the therapeutic community] by talking together about everything that’s happened. They’re not so willing to do that, and it bothers me. (Dima)

Dima’s frustration, arising from his nonaddicted mother’s refusal to reunite the family, leads us to the discussion of the role of the nonaddicted mother in the child’s experience of self.

**Strong or Not There? The Role of the Nonaddicted Mother**

The first topic regarding the nonaddicted mother is related to the family vision presented above: What role, direct or indirect, does she play in the development of the participant’s fantasies about a “proper family life”? The findings show that the participants who described a strong, functioning mother whom they could depend on and who compensated for the father’s destructiveness described their aspirations only in terms of the father and his position in the home. They less often presented us with a strong, unattained desire for a stable family life because they felt the resilient mother figure fulfilled this wish. As expected, these participants did not succumb to a life of crime and addiction. In contrast, the adolescents who described a dysfunctional, weak mother who was unable to maintain the home on her own suffered more from their vulnerable homes and provided more descriptions of the idealized family vision. Here we should stress that our findings are based on subjective descriptions of how the children perceive their mothers rather than the mothers’ objective ability to function, a determination that it is beyond the scope of this study. Those children who grew up with a nonaddicted mother they perceived as weak and who did not provide them with at least a symbolic family framework sought and aspired to such a framework. Were these the same participants who succumbed to a life of crime and/or addiction? The answer to this question is more complex than a direct relationship between perception of the mother’s functioning and the individual’s personal decline.

For the majority of our participants, some relationship between their description of the nonaddicted mother and their own ability to lead a normative life and avoid...
personal deterioration was evident. On the face of it, it would seem that participants whose mothers were strong personalities who kept the family together, functioned well, and even filled the void created as a result of the father’s addiction were not dragged downward, whereas those with dysfunctional mothers stumbled into a life characterized by crime, drug abuse, and addiction. For example, Doron, whose mother left home and her 10 children when Doron was young and who, like his brothers, lived in residential care facilities, grew into a life of crime and addiction. In contrast, Tamir told us how he maintained a normative life and refrained from drug abuse:

My mother was very significant. Mom is Conan the Barbarian, she held the whole family together, all five of us kids. There was nothing she couldn’t do. She always used to help us and loved us very much. (Tamir)

However, this is a superficial analysis. For some participants, this is patently not the case. If we were to accept this distinction at face value, the following question would arise: Why did Doron succumb to addiction and delinquency when, according to him, all his nine siblings lead more or less normative lives? Therefore, a deeper analysis of the words of our participants shows a complex relationship between the individuals’ experiences of themselves and their respective experiences of their mothers and addicted fathers. This analysis does not relate to the perception of the mother as an entity in her own right but to the perception of the mother in relation to others, that is, as compared to the addicted father or to the participant’s self. When describing the division of forces within the family, our participants emphasized their experiences by using a dichotomous language. We, therefore, present it here as they intended. It appears that for the participants it is the division of forces within the triad (self–mother–father) that is more strongly related to their progress or decline than the perception of the mother as an entity in and of herself. Within this division of forces, the one the adolescent perceives as strongest has the most salient influence on his or her direction in life. This division of forces is subjective and differs from one person to another, even among siblings who have had similar experiences in the same family.

Ortal exemplified the complex dynamic of the perception of the parents relative to the perception of self. As a matter of principle, Ortal led a strictly normative lifestyle, keeping her distance from the world of drugs and delinquency. Yet she did not describe her mother as a strong woman:

My mother is weak. . . . As strong as she thinks she is, is she ever not! At least then she wasn’t. . . . My mom couldn’t keep us at home. . . . My mom couldn’t function. It was just too much for her. (Ortal)

It was not just her mother that Ortal perceived as being weak but also her addict father:
My dad is very weak. My dad is happy-go-lucky . . . a man it’s easy to influence, easy to budge, easy to play games with him. (Ortal)

In counterpoint to these two weak parents, Ortal perceived herself as strong, able to cope, completely different from her parents. The difference she felt between her parents and herself gave her confidence that she was able to cope with the world and function better than her parents did. As a child as well as during the interview, Ortal considered herself a survivor, someone who coped better than her parents did; therefore, their ability to influence her life was not great. As far as Ortal was concerned, her parents had relatively little significance. She did not identify with them, did not model herself after them, and had no aspirations to follow in their footsteps:

I was never especially close with my mother. I couldn’t stand being at home. I didn’t care about my mother or my father. (Ortal)

Osnat also described a weak, suffering mother but her story stands in sharp contrast to Ortal’s:

My mom is [completely] cut off. She doesn’t ever have . . . and she had a very hard life, my mom. Even before my dad [came into the picture]. (Osnat)

Osnat’s life story includes frequent examples of how her mother was incapable of standing up to her father or protecting the children from him. In light of the father’s powerful presence in the home, even when he was not actually living there, he—not the mother—was the object of Osnat’s admiration and adulation, her role model, the figure from whom she desperately sought approval and warmth. The result was a crisis that plagued her throughout her childhood and resulted in an abysmal deterioration and painful addiction. Throughout this process, the mother was unable to play any real protective role, and in fact her significance was relatively minimal. This is evident in the simple fact that through the entire course of the conversation Osnat spoke continually about her father, while her mother constituted a relatively marginal factor in the life story she presented. Even during Osnat’s recovery process, her mother does not represent a significant figure, and Osnat continues to identify with her father, who started his recovery before she did.

This point was reflected in other interviews we conducted as well. The participants chose to speak about the figure that was meaningful to them. Although the reason for the interviews was the addicted father, participants who came from homes where the mother was a more significant figure for them than the father chose to focus their descriptions on her more than the father. For example, Nadine, a girl leading a normative life, said,

Mom did everything in the house and was always tired. She was everything, both father and mother. (Nadine)
In Nadine’s experience, her mother occupied a more dominant position than the addicted father did; she was a mother whose children could rely on her and who gave them the support a child needs from parents. We can assume that the confidence the mother inspired and Nadine’s closeness with her as a strong authority figure constituted a protection from deterioration of the daughter’s condition.

The experience was very different in the case of George, who vacillated between a normative life and the occasional use of drugs but had not descended into delinquency or addiction. George described an interesting dynamic in his relationship with his parents. His depiction of home featured his mother, who functioned but was not particularly strong; his father, who was addicted and weak; and himself, the firstborn and the strong figure in the home:

My mom was depressed for a long time because of Dad. He’s really stuck on drugs. . . . I tried to support her and help her. . . . I ran the show at home. (George)

Sasha also tried to be the dominant figure at home, to counterbalance his stepfather, who had been a criminal, a violent man, and an alcoholic in the former Soviet Union. However, his mother made it impossible for Sasha to consolidate his position as the strong figure at home. In the power struggle, which even included an episode of physical violence, the mother chose in favor of the stepfather. Sasha presented his mother as a strong professional career woman but he considered her weak vis-à-vis the stepfather to the extent that she was afraid to let Sasha defy him and become the dominant figure in the home. In Sasha’s life story, when his biological father (who was not a significant figure for Sasha) left home and his parents divorced, a void was created that his mother could not fill because of her weakness vis-à-vis the stepfather. Sasha, feeling weak and defenseless in a hostile world, chose crime as a path of strength, and his mother was incapable of playing a significant role in guiding him. Although Sasha defined his stepfather as insignificant in his life, he actually chose a similar path in life—crime, violence, and addiction. We do not have enough data to determine unequivocally whether the choice of a similar life represents the continuation of Sasha’s competition with his stepfather over the mother’s affections but we cannot rule out the possibility that a child attempting to be dominant like his father will often follow in his rival’s footsteps.

The significance of a parent in the lives of the participants is expressed, among other things, in the role of that parent as a figure for emulation or identification. Osnat, who succumbed to addiction, did not identify with her mother but with her addicted father, whom in her childhood she had perceived as being supremely powerful. Osnat followed in the footsteps of the addicted father rather than those of her mother. Doron, who succumbed to a life of crime and active addiction and was now in the process of recovery, also identified with his addicted father, a violent criminal. Doron described a world in which the mother was weak and dysfunctional; the father was addicted, violent, and criminal and had spent the past several years in prison; he,
himself, was of weak character and, most important, similar to his father. In a sense, in his identification with his father serving a prison term, Doron took pride in benefiting from the protection provided by his father’s reputation among the other prisoners and in being “the son of...” In contrast with Doron and Osnat, for Sigal the nonaddicted mother was a figure worthy of emulation and identification, and we consider it no wonder that she chose a normative life for herself, staying well away from any traces of drug use and addiction. When asked whom she would like to resemble, Sigal answered without hesitation,

Mom. I don’t mean what her life was like with her husband, but that she was always happy. (Sigal)

To summarize, when the nonaddicted mother was perceived as a strong figure, even to the point of identification, this perception provided subjective protection for participants. When the nonaddicted mother was perceived as a weak figure but the addicted father was perceived as strong, sometimes to the point of identification, this perception constituted a subjective risk for participants. And when neither parent was perceived as a strong figure, the participant experienced a familial void, which was sometimes filled by the perception of self as strong. In any case, the father–mother–self triad also exists within a broader familial context, which is the next theme to be discussed.

**Seeking Support From Other Family Members**

As we have seen, the participants in our study repeatedly stressed the significance of family in their experience of self. Yet the father’s addiction and sometimes the mother’s weakness as well, almost to the point of her disappearance from the participant’s significant day-to-day experience, contributed to the creation of a void in the subjective world of the participants. It was natural that some turned to other relatives when they were able. In this family odyssey in search of support, reinforcement, and encouragement or out of a sense of personal obligation, two additional spheres of experience can be identified, that of the participants’ siblings and that of the extended family. We begin with a discussion of the former.

Participants who mentioned their siblings in their stories expressed a sense of responsibility, which is somewhat surprising in light of the personal example of irresponsibility set by their fathers and, sometimes, mothers as well. According to their descriptions, this sense of responsibility was natural and they embraced it without hesitation. Furthermore, some expressed a willingness to make considerable personal sacrifices for their brothers and sisters, particularly in the case of young siblings. In these instances, the participants perceived themselves as substitutes for the nonfunctioning parents. For example, Osnat related,
My sister was sort of my Achilles heel. . . . I protected her all her life. I was prepared to be her fall guy and to take all the fire [from our parents], but I wasn’t about to let her be in the middle of all that. . . . It was actually me that raised her. (Osnat)

Ortal also expressed this approach:

I always took care of my sister. I backed her up in her boarding school, too. . . . I’m happier that we both went to boarding school than if just she went, because she’s not as strong. (Ortal)

Doron, a middle brother in a family with 10 children, was critical of his older siblings, whom he perceived as not having taken sufficient responsibility for their younger siblings while he showed his own concern and responsibility toward them:

I used to prefer going without food myself, as long as the little ones had something to eat before me. . . . We don’t have any contact with our older brothers or anything; I have a lot more contact with my younger brothers . . . because if I don’t take responsibility for them, who will? (Doron)

Doron expressed his perception that being responsible for his younger brothers goes without saying, based on the absence of anyone else taking care of them. In this respect, Doron spoke for other participants who found themselves in a similar position—if not me, who will take responsibility for the little ones? This question expresses the experience of the lonely self that has to survive in a dysfunctional family. There were no participants who expressed indignation or a desire to evade the responsibility for their younger siblings. On the contrary, participants appeared proud of their position of responsibility and depicted it as a ray of light in their lives.

According to some participants, it was as if their younger siblings were more vulnerable than themselves. In the experience of self of these participants, including those like Doron who presented themselves as being weak, they were strong enough to be a substitute parent. Such a self-image is prevalent, regardless of whether the participants managed to avoid succumbing to crime or addiction themselves.

For example, Doron described a certain degree of ability to actively care for his younger siblings, taking full advantage of all the tools he had at his disposal, normative as well as nonnormative. This ability strikingly contradicts the destructive way in which he led his life. Osnat, who told about a great deal of self-destructiveness in her life, also described a different style of behavior when describing her responsibility and the need she felt to protect her sister. Hence, the vision of the united family and the existence of younger siblings to care for, the potential “island of love” between an older brother or sister and younger siblings served several of the participants as a sort of braking mechanism against the destruction or at least an area of their life that was free of the self-destructiveness, in which they demonstrated more normative behaviors. Thus, even if they took drugs, were addicted, or were
well on their way to becoming actively addicted, they wanted to spare their younger siblings the life of addiction to narcotics, with all it entails.

This seems to indicate the existence of an internal contradiction regarding drug abuse, which may be unconscious. On one hand, some of the participants were swept into a life of drug abuse and addiction, and in that period, they defended their way of life. On the other hand, they wanted to safeguard their brothers from such a life. This internal contradiction regarding drugs, resulting from their protective relationship with their younger siblings, may have clinical significance in that it may constitute an opening for recovery among the children of addicts who have succumbed to a life of crime or of drug use. Alon’s story provides a glimpse of this possibility. He followed both of his parents into addiction after they had both been in recovery for a relatively long period of time. Alon’s decision to change his ways and put himself on the road to recovery came when his mother was pregnant with his little brother. The figure of this baby brother still served to restrain and to strengthen him:

My little brother stops me from touching it. He’s two years old now. If I didn’t have a [little] brother, I suppose I’d still be taking drugs. (Alon)

The participants’ journey in search of support, stability, care, and perhaps even love met with partial success with their siblings, but in most cases they were still left with an inner void. The findings show that a number of the participants had the opportunity for a positive experience with another circle of family relationships, namely members of their extended family and occasionally a particular significant relative.

A number of the participants described a positive or at least a slightly caring relationship with a member or members of their extended family. The meaningful figures commonly cited by participants were grandparents, aunts, and uncles. In addition, there was one participant who spoke very positively about her relationship with her nonaddicted stepfather. Sofia, for example, described both the assistance she received from her relatives as well as her desire for still more help:

When Dad was here and there was yelling, we would call my aunt and they came and helped, but the help wasn’t really helpful enough, because Dad’s still taking drugs. (Sofia)

Sofia’s confidence that there was someone to turn to in times of crisis immeasurably helped her, as it did other participants who had such experiences, in contrast with those who had no relative to whom they could turn. Sofia also expressed her longing for full assistance from the family in solving the source of the family’s troubles, that is, the father’s addiction. Nadine described a similar experience, stressing the importance of material assistance:
Money we would get from Grandma and Grandpa [the father’s parents]. . . . They tried to talk him into stopping. (Nadine)

Sigal added another aspect to the support from the extended family when she mentioned their protection of the children and their mother from their father’s violent episodes. As she put it, her older brother would summon her uncles whenever the father would have an outburst, and they would come over to threaten the father and distance him. Sigal did not have fond memories of the violent confrontations but the powerful experience of a helpful, caring family remained with her.

Ortal described a deep level of emotional support that she enjoyed as a child, which was of the utmost significance for her. In her early childhood, Ortal lived in her grandmother’s home together with her mother’s younger brother. Later her sister and mother also came there to live, but she had a special closeness with her grandmother and her uncle:

I was very close with my uncle. . . . He was like a father to me. . . . So I didn’t feel the lack, because I had Grandma, who was there [for me] for a long time, and I called her Mother, and I had him. There was nothing I lacked. (Ortal)

Ortal described herself as strong opposite her weak parents. Her personal strength and her ability to navigate her life as she likes can probably be related to the loving, supportive relationship she experienced with her uncle and her grandmother. It is, therefore, possible to extend the dynamic described above, which exists between the addicted father, the nonaddicted mother, and the self (of the child) to include the component of the extended family. What she did not get from her parents, Ortal managed to get from her grandmother and her uncle. Her sister, in contrast, did not benefit from this support, despite the small age difference between them. Accordingly, Ortal described her sister as weak and at risk of succumbing to using drugs.

Sasha, on the other hand, described an ambivalent relationship with his grandfather, who is a significant figure for him today. In the past, the grandfather attempted to direct Sasha toward a normative way of life but Sasha resisted his efforts because he was drawn to the world of crime and the power it symbolized for him. Sasha did not want to live in the stable but restrictive home of his grandparents, preferring the absence of boundaries of his mother’s home. Yet with hindsight, Sasha was able to see the significance of his grandfather in his life and speak admiringly of him.

For some participants, the means of support chosen by the relatives turned out to be unsuitable, thus worsening the situation. When the extended family had the desire but lacked the emotional means to support the children, they keenly experienced the absence of love and there was no compensation for the emotional void they felt; moreover, the experience of alienation probably even intensified within them. Alon, for example, described how his extended family took responsibility for him as well as his addicted mother; however, the emotional support that Alon received was also
accompanied by emotional and physical violence, as a declared and permissible educational philosophy in that family:

At the age of 9-10 I would walk the streets barefoot, wearing an undershirt and shorts, till midnight. And Grandma and Mom’s sister, who was 16 and like a big sister and would take care of me, would come looking for me. I would say that my aunt would set boundaries for me, and sometimes she instead of Mom would spank me. (Alon)

Alon went on and demonstrated the risk inherent in being too close to an unstable extended family in which there are other addicts. When Alon and his mother lived with his grandmother, his mother’s brother, an active addict, lived with them. The result was as follows:

We lived with Grandma, and [Mom’s] brother, who takes drugs, lived there on the roof. . . . And Mom was up there and came back down all strung out. (Alon)

Being with other family members who are also addicts did not necessarily affect the children directly but it increased their risk. Abed, for example, described a family in which almost everyone was addicted. The only solution that could enable him to embark on the road to recovery was a near-total break from all his relatives, including the extended family.

**Summary and Discussion**

Our objective in this study was to describe and interpret major aspects of the family experiences of adolescents with a parent who is either actively addicted or in recovery and to examine how factors of that experience influence the direction of the child’s development. The participants described growing up in homes that were chaotic, unstable, unpredictable, lacking in vital attention to the children, in the shadow of violence between the parents and sometimes against the children and where there was extreme neglect, both emotional and physical.

The participants who opted for survival share an orientation toward finding a sense of belonging and security in the world. Regardless of the degree to which their past prevented them from experiencing a home that was normal, loving, caring, and sustaining, it appears that the ideal still existed in their vision. Some of the participants sought and succeeded in finding a solution for this drive in the noncriminal, no-drug world, in some cases following the recovery of the addicted parent and the rehabilitation of family life and in others with the support of the healthy family members or by becoming part of a substitute framework. Failure to hold onto a normative framework impelled other participants to seek and find their belonging, security, and acceptance on the street, in the world of crime and addiction.
It cannot be denied that street life does, at least temporarily, satisfy a keen inner need and serves for some of the participants, paradoxically, as a corrective experience of belonging, emotional identification, social environment, and security. This finding has clinical significance in that any intervention with the children of addicts, whether treatment or selective prevention, must assess what frameworks for belonging already exist in their lives. Such intervention should attempt to offer them a normative framework for belonging that will be sufficiently significant.

One of the questions that arose in relation to belonging, warmth, and security was the place of the nonaddicted parent in the experience of the child’s developing self. The answer to this question derives partially from the approach that focuses on the supposedly objective factors of risk and protection (Jenson, 1997). The phenomenological findings, however, clarify the subjective variables that reinforce these risk and protective factors. Although it is possible to consider the support of the nonaddicted parent, usually the mother, as a protective factor (Laser, Luster, & Oshio, 2007), our findings suggest that this view is too simplistic. Within the tangled relationship of the children of addicts with their parents, the children’s subjective perception of the strength of each parent, vis-à-vis both oneself and the other parent, and of their own strength as compared with their parents appeared to be the factor that determined the relative significance that these children attributed to the nonaddicted mother. The facts about the condition of the nonaddicted mother and her ability to hold the home together and support her children contributed to the subjective perception and were reflected in it, but the subjective perception of the forces (mother–father–self) was found to have greater significance for the participants. Hence, if we are to understand the nonaddicted mother’s impact on her children’s development of self, we need to probe deeply and analyze the subjective situation as perceived by the children. Our findings point us in this direction; further empirical research is necessary to verify this conclusion and evaluate the intensity and direction of the connection between the individual’s subjective perception of the balance of power and personal deterioration or resilience. In addition, the findings suggest that intervention with the children of addicts should assess the balance of power within the family as the child sees it. Apparently, the perception of an addicted father as strong and a mother and self as relatively weak constitutes a weighty risk factor, demanding suitable treatment intervention.

We found that the children of addicts cultivated a special relationship with their younger siblings within the family grouping. Those of our participants who stumbled in their own lives expressed a normative outlook in relation to their younger siblings, which rejected the use of drugs. We further found that having an opportunity, or at least aspiration, to give their younger siblings what had been denied them gave the participants an experience of tenderness and love that they did not exhibit elsewhere. For some of the participants, this produced a mechanism that curtailed their deterioration and self-destruction or at least expressed an area that the destruction had not yet penetrated, where the normative aspiration still held sway. In our estimation,
this finding indicates a possible direction for intervention with the children of addicts, particularly those who are already using drugs: the strengthening of the connection of the mature protector with his or her younger siblings.

In the modern world, in which the family experience has narrowed to include primarily the nuclear family, our findings indicate that the extended family can, in certain circumstances, support and protect. This corresponds to what other studies have revealed (Barnard, 2003; S. J. Kelley & Damato, 1995; Kolar, Brown, Haertean, & Michaelson, 1994). However, in some cases we found that the experience of the extended family had a negative impact, which again is consistent with the findings of earlier studies (Mckeganey, Barnard, & McIntosh, 2002). Therefore, having such an extended family constituted a subjective protective factor. In light of this subjectivity, future studies of the children of addicts that aim to characterize and assess factors of risk and protection should closely examine the role and significance of the extended family in the lives of the developing children.

According to the ecological approach (Allen et al., 2003; Garbarino, 1995), there is a unique interaction between the developing child and the environment. It is this interaction that ultimately directs the maturing child toward a career that is addictive, criminal, normal, or otherwise. This study identifies subjective perceptions related to the circumstances of their lives that constitute subjective risk and protective factors. These subjective perceptions are related to the appearance of behavioral disturbances as the child continues to develop or to their nonappearance despite an existing risk. Thus far scholars have related primarily to variables that are external to children and adolescents at risk (see, e.g., Jenson, 1997; Shader, 2003). However, based on the findings of this study, it is possible to define and even to map subjective risk and protective factors.

A subjective risk factor is a perception that, if existent, indicates a greater probability that a certain behavioral disturbance will appear. For example, the perception of weakness of self vis-à-vis the strength of the addicted father constitutes a subjective risk factor. A subjective protective factor is a perception that, if existent, can be a defense against the appearance of a behavioral disturbance despite existing risks. For example, the perception of self as strong vis-à-vis a weak addicted father constitutes a protective factor. As the literature about risk and resilience suggests (Fraser, 1997), risk and protective factors are not determinant causes but have a correlation with the behavioral results. Similarly, subjective perceptions are not necessarily the causes for negative or positive results but are associated with them. The causal relation, if it exists, warrants further exploration. In any case, the importance of these subjective factors of risk and protection for preventive intervention—primary, secondary, or tertiary—and for research has been illustrated above in the description of the subjective balance of power in the family. As this is a new, innovative definition, further in-depth research is needed to build a new corpus of knowledge with regard to the subjective factors.
Shoham and Adad (2004) argued that addiction to narcotics is an expression of an experience of existential emptiness. This view is consistent with the approach of the 12 Steps, according to which addiction is presented metaphorically as a disease with spiritual roots that expresses itself in an experience of existential emptiness (Narcotics-Anonymous, 1988; Ronel, 2000). The existential emptiness is experienced as the absence of a personality center; therefore, it results in a messy or chaotic life manifest in the deterioration of an individual to lead a nonnormative life (Timor, 2001). The experience of existential emptiness and the sense of mess and chaos express a subjective perception of the self being molded within the world. The process suggested is of a self that is experiencing a lack of support, care, and love within the family and that does not find a strong, positive significant figure with whom to identify. Perceiving this lack brings in its wake an experience of a weak self, apparently without a personality center, an experience of existential emptiness. Such a self may drift into drug abuse and other nonnormative behaviors such as crime and violence. However, if the self finds within its world points of strength, like those attributed to its personal resilience and/or to close significant figures, the process described here can be arrested and the adolescent may evolve in a normative direction. Of course, the model described here requires empirical examination and corroboration.

In this research we attempted to study participants from different backgrounds, including Arabs and immigrants who came to Israel from the former Soviet Union. The experiences of the participants regarding the addiction of a parent, neglect at home, chaos during childhood, and the sense of power of self versus others were quite comparable. Does this indicate that addiction at home creates an experience that goes beyond cultural differences, as suggested elsewhere (Ronel, 1997)? Our findings and methodology give no clear answer to this interesting question, which still warrants further exploration.

The strength of phenomenological research, which penetrates to the depth of the subjective experience, is also its weakness because it rests on the subjective. Our findings reveal the experience of the participants with whom we met, who constitute a small and not necessarily representative sample. The analysis reflects our understanding and explanation of the experience of the participants. Therefore, the ability to generalize from the findings and their applicability to all children of addicts is limited.

References


