A comparative study of the relationship between homelessness and aggression in preschool children

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ABSTRACT

SOCIAL WORK

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A COMPARATIVE STUDY OF THE RELATIONSHIP BETWEEN HOMELESSNESS AND AGGRESSION IN PRESCHOOL CHILDREN

Advisor: Dr. Sandra Foster

Thesis dated May, 1997

The overall objective of this study was to examine the effect of being homeless on aggression in preschool children. To attain this objective, thirty-one homeless four and five year old children living in Metro Atlanta shelters were compared to thirty-three four and five year old children who came from homes with low socioeconomic status and attended the Clark Atlanta University Head Start program. An explanatory research design was employed in this comparative analysis. The children’s aggression levels were examined through the use of an adapted Aggression Subscale taken from the Achenbach Child Behavior Checklist. This questionnaire was administered to care givers of these preschoolers during parenting meetings. The findings yielded from this study do not support the premise that there is a statistically significant difference in aggression between homeless and housed preschoolers.
A COMPARATIVE STUDY OF THE RELATIONSHIP BETWEEN
HOMELESSNESS AND AGGRESSION
IN PRESCHOOL CHILDREN

A THESIS
SUBMITTED TO THE FACULTY OF CLARK ATLANTA UNIVERSITY
IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR
THE DEGREE OF MASTER OF SOCIAL WORK

BY
DEWANDA YOUNG

SCHOOL OF SOCIAL WORK

ATLANTA, GEORGIA
MAY 1997
AKNOWLEDGEMENTS

First and foremost, I recognize God for benevolently granting me the strength to persevere in this trying endeavor. My parents, Thomas and Virgie Young, have truly been my greatest source of inspiration. Their unconditional love has supported me when I honestly felt that I could not succeed. I am everything that I am because they have loved me. I am grateful for the prayers and words of encouragement from my friends and family, especially Trevis Young, my brother. I would like to express my sincere gratitude to Eric Hill for his continued patience and understanding; he has been instrumental in this success by constantly believing in me and my abilities. Phenomenal is too humble a word to describe the guidance and wisdom received from my thesis advisor, Dr. Sandra Foster. She epitomizes the concept of a dedicated professional, mentor, and friend. I was blessed to have benefitted from her tutelage. The staff members of Atlanta Children’s Shelter, Moreland Avenue Shelter, and Clark Atlanta University’s Head Start program are to be commended for their generous cooperation. I would also like to express my appreciation to Mr. Wellington Bath for his assistance and generosity.
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CHAPTER ONE
INTRODUCTION
Statement of Problem

Does being homeless have an affect on aggression in preschool children? The significance of addressing this possible relationship is supported with the following alarming documentation. The social plague of homelessness is reaching epidemic proportions in the United States. The fastest growing segment of the homeless population is families composed predominantly of single mothers and their children who account for at least one-third of the approximate 2.5 million homeless people nationwide. It is estimated that as many as 800,000 children are included in this number and that at least 20% of all children currently living in poverty will experience homelessness at some point in their lives.

Though being homeless may be stressful for adults, its effects on young, developing children may be more devastating because they are placed in this situation at critical periods of their physical, social, emotional, and cognitive development. These children suffer from a lack of proper nutrition, medical care, and schooling. It has been noted that they experience developmental delays, severe depression and anxiety, and

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3Ibid.
learning disabilities.\textsuperscript{4}

Homelessness may alter the psychological development of these children through several different processes because profound chaos and high levels of anxiety are prevalent characteristics of the homeless families. Young, single mothers are typically overwhelmed and extremely stressed. Their emotional resources are sometimes depleted while meeting basic human needs; therefore, they often have little support and understanding to offer their children when they most need it. This parental stress may have a negative impact on the parent-child relationship. Due to high levels of stress, parents may tend to be more critical, less responsive, and less playful.\textsuperscript{5}

Another factor to consider is that homeless children must endure significant physical changes in their lifestyles such as leaving their homes, belongings, friends, relatives, and schools. Their routines are totally disrupted. The impact of these circumstances on children’s development is emotional deprivation and social isolation which may lead to insecure attachments to others, poor self-esteem, aggressive behaviors, and dysfunctional personality development. These children may also become withdrawn, depressed, and dependent.\textsuperscript{6}

Based upon the naturalistic observation of the researcher, aggression seems to be

\textsuperscript{4}Bassuk, “Psychosocial Characteristics of Homeless Children and Children With Homes,” 257.


\textsuperscript{6}DiBiase, “Some Effects of Homelessness on the Psychosocial Functioning of Preschoolers,” 784.
one of the most prevalent traits shared and exhibited by many homeless preschoolers. Research suggests that this early childhood aggression may be a contributor to future antisocial and problem behaviors among adolescents which may manifest itself in violent acts. It is believed that childhood aggression stimulates adolescent aggression which may result in a lack of social conformity, selection of deviant peers, and participation in socially unacceptable activities.\(^7\)

Hence, this observed aggressive behavior among homeless preschool children which may be warning signs signaling future antisocial or violent acts is worthy of being studied due to the current wave of violent culture among youngsters sweeping the nation.\(^8\) The statistics derived from this youth population are shocking. The number of children under eighteen years of age who have been arrested for murder has risen 55% in the last decade to 2,674 in 1990. More adolescents die from violence committed by peers than from any other illness. Arrests of juveniles for aggravated assault and forcible rape are increasing dramatically.\(^9\)

or other weapon on a regular basis. Twenty percent of all public school teachers reported being verbally abused, 8% being threatened, and 2% being physically attacked during the previous school year.\(^\text{10}\)

**Significance of Study**

With these two trends of an increasing homeless population of children and violent youth culture, it is imperative that social workers, teachers, parents, policy makers, and other concerned individuals recognize the need for early prevention strategies. By being able to identify aggressive behaviors when working with homeless preschoolers and teaching them appropriate ways to deal with their anger and frustration, an immense amount of progress may be made in ending the future cycle of violence and antisocial behavior that youth may willingly adopt. By arming these young children with proper problem-solving and communication skills, practitioners may be preparing them to engage in the battle of survival in nonviolent, socially acceptable ways. These children may be deterred from growing into angry, unremorseful youth who have no regard for their own lives or the lives of others.

If this aggressive, negative behavior of this constantly increasing population of homeless preschoolers is not addressed, then the field of social work may be allowing these children to become victims and perpetrators in this vicious cycle. Thus, social workers have a duty to become partners with educators and parents by learning and implementing special techniques for working with these young children. Creative ways

must be found to re-channel their aggression into positive actions.

Though the system continues to ignore many of the other needs of this particular population, it cannot afford to disregard the possible levels of aggression that these young children may possess. This issue must be acknowledged and addressed. Thus, this study will be instrumental in broadening the knowledge base on aggression in homeless preschool children. The insight gained from this research may increase an individual’s awareness of the special needs of this population. This knowledge may foster the social worker’s ability to engage in prevention as opposed to intervention which often proves futile.
CHAPTER TWO

REVIEW OF LITERATURE

Homelessness and Children

During the past decade, homelessness has emerged as one of the most significant and growing social problems in America. Public and private agencies, researchers, and the media report visible evidence of the rise in this phenomenon and radical changes in the circumstances and composition of the homeless population. In addition to the number of homeless people increasing sharply, the demography of homelessness has shifted dramatically.¹

Traditionally, the homeless population in this country consisted primarily of single, white, middle-aged men suffering from alcoholism and residing on "Skid Row" in large cities.² Another segment of this population was created in the 1970's with the de-institutionalization movement which left younger men and women with mental disorders on the streets.³ However, these stereotypes have been transformed by the growing proportions of homeless women. In the 1950's, an estimated 3% of the overall homeless population was female. Presently, this percentage has grown to an estimated 20%. Approximately one-half of these homeless women are currently caring for dependent


³Ibid.
A feminization of homelessness has occurred. It is believed that families comprise 34% of the overall homeless population. Seventy to ninety percent of these families are headed by females. On the average, these mothers are twenty-seven years old and have two to three children who are typically five years old or younger. 

Although there have always been homeless women on the streets in much smaller numbers, homeless families were virtually unheard of in earlier eras. Bassuk contends that the explosive increase in this subpopulation reflects the astounding growth of American families headed by women and increased risks of economic hardships incurred by single parent homes. The financial difficulties are linked to the 1980's which created more economic disparity between lower socioeconomic groups and the middle class. The poor became poorer and the result was a drastic increase in the homeless population.

Bassuk and Rubin maintain that the descent into poverty begins with single parenthood. When the family breakdown is coupled with the low income housing crisis

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and the inadequacy of welfare benefits, many families who are precariously housed become homeless.\textsuperscript{8} Citing similar causes for homeless families' dilemmas are Smith and North. Their contention is that mothers with their children present may be homeless due to the burden of having dependent children in the face of poverty related to the lack of gainful employment, racial barriers, a failing public assistance system, and a severe low-income housing shortage.\textsuperscript{9}

Regardless of the causes for each individual family's homelessness, the results appear to be the same. Homelessness among young children represents a larger, more devastating problem of long lasting childhood poverty accompanied by a lack of residential stability and social relationships.\textsuperscript{10} Homelessness paints a bleak picture of many negative events and conditions such as poverty, changes in residence, schools, services, loss of possessions, disruptions in social networks, and exposure to extreme hardships.\textsuperscript{11}

For preschoolers growing up in these dire circumstances during their formative years, the effects can be profound and detrimental. These children are often being forced


\textsuperscript{9}Elizabeth M. Smith and Carol S. North, “Not All Homeless Women Are Alike,” \textit{Community Mental Health Journal} 30, no. 6 (December 1994) : 604.

\textsuperscript{10}Carol Ziesemer, Louise Marcoux, and Barbara Marwell, “Homeless Children: Are They Different From Other Low-Income Children,” \textit{Social Work} 39, no. 6 (November 1994) : 658.

to survive without the emotional, social, or economic resources they need for basic development. Homelessness is identified as a risk factor compromising a child’s physical and psychological functioning.

In response to the crisis of homelessness, researchers have conducted various studies to examine its impact upon children. Rather than focusing solely upon aggression, a spectrum of the effects are explored. They target issues of behavioral symptoms, self-concept, emotional development, developmental delays, depression, anxiety, and learning disabilities. Aggression is included as a dimension of some of these constructs.

DiBiase and Waddell addressed the effects of homelessness on the self-concept, behavioral symptoms, and emotional development of preschoolers by comparing thirty homeless subjects to forty housed subjects. Through the use of the Pictorial Scale of Perceived Social Competence and Acceptance for Young Children and a teacher rated Child Behavior Checklist, it was determined that homeless children have lower self-concepts, significantly more problem or deviant behavior, and experience more depressive symptomology than housed preschoolers. They also tend to exhibit more aggression than their housed counterparts. Homeless males appear to be more aggressive

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Reiterating these findings are Rescorla, Parker, and Stolley who studied cognitive functioning and emotional-behavioral adjustment in homeless children in Philadelphia. By assessing these children and a comparison group of housed subjects from inner-city families, they concluded that homeless children have a higher prevalence of behavioral and emotional disturbance. The homeless sample appeared to have a higher proportion of maladjusted children. This study indicated that preschoolers living in shelters, particularly girls, showed increased amounts of internalizing symptoms of depression, anxiety, withdrawal, and fear. On the contrary, boys were more likely to externalize symptoms through acting out behaviors such as aggression, destructiveness, disobedience, and temper outbursts. This population also had more developmental delays.

Bassuk and Rosenberg further complimented these observations of the negative implications of homelessness on children. Interviewing mothers with the Simmons' Behavior Checklist, Child Depression Inventory, and Child Behavior Checklist, they explored the psychosocial characteristics of 86 children from homeless families and 134 children from housed families. The results suggested that one-half of homeless children needed psychiatric referrals and evaluations. One-half of these preschoolers also

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experienced developmental delays in the areas of language development, motor skills
coordination, and social development. Despite opposite expectations, the scores of the
homeless and housed children were similar on the Simmons’ Behavior Checklist;
aggression was actually rated higher for children living in homes.16

In a prior investigation of the characteristics of homeless children, Bassuk and
Rubin did not use a comparison group. Relying on parent interviews with 82 homeless
families, they discovered that developmental delays, severe depression, anxiety, and
learning difficulties were common among these children. Two-thirds of the boys and
almost half of the girls scored higher than the cut-off point on the Achenbach Behavioral
Checklist indicating a need for psychiatric evaluation.17

Several other studies also support the existence of a relationship between
homelessness and its adverse impacts on preschoolers. Molnar documented
observational and teacher accounts of distressing behaviors of homeless two and a half to
five year old preschoolers. Behaviors most frequently listed included aggression,
withdrawal, inappropriate social interactions, and immature peer interactions.18
Hausman and Hammen contend that homeless preschoolers experience emotional and
behavioral problems 3-4 times the rate expected in the general population and exceed the

16Ellen Bassuk and Lynn Rosenberg, “Psychosocial Characteristics of Homeless


cited in Norweeta Milburn and Ann D’Ercole, “Homeless, Women, Children, and
relatively elevated rates found in a comparison sample of housed, poor children.\textsuperscript{19} In an empirical examination of New York City’s sheltered families, the Citizen’s Committee for Children revealed that 66% of parents had observed negative behavioral changes in their children since becoming homeless. The changes included acting out, fighting, restlessness, depression, and moodiness.\textsuperscript{20} Molnar, Rath, and Klien also cited parent reports of exaggerated fears, disobedience, destructiveness, and withdrawal upon entering a shelter.\textsuperscript{21}

Other studies indicated that there are no significant differences between homeless children and children from low socioeconomic households. Ziesemer, Marcoux, and Marwell employed the Achenbach and Edelbrock Teacher Report Forms and the Horter Self-Perception Profile for Children to obtain information about academic performance, adaptive functioning, and problem behaviors. Their subjects consisted of 145 elementary school age children who had experienced homelessness and a matched group of mobile children with low socioeconomic status. No significant differences between these two groups were found. However, subjects in both groups were perceived by their teachers as having substantially more behavioral and socioemotional problems than other

\textsuperscript{19}Bonnie Hausman and Constance Hammen, “Parenting in Homeless Families,” \textit{American Journal of Orthopsychiatry} 63, no. 3 (July 1993): 364.


peers. Fifteen percent of males in both groups were identified as having severe behavioral deviance characterized by aggression and social withdrawal.22

To determine whether homelessness would predict compromised psychological and developmental functioning, Schteingart et al compared homeless preschoolers to sociodemographically matched, housed children and to a normative group. Contrary to anticipated expectations, homelessness did not appear to be a significant predictor of negative child outcomes. The lack of a difference may be partially attributed to similarities between the homeless group and the comparison group of low-income household children and their families. These two groups were not significantly different from one another on any of the outcome variables observed. However, the homeless children did not have more behavior problems than the normative group.23

In their comparative study on psychosocial characteristics of homeless and housed children in Boston, Bassuk and Rosenberg relied on personal interviews and standardized tests to collect data. Paralleling the previous two studies’ findings, the results concluded that these two groups did not differ statistically in the areas of withdrawal, demanding behavior, aggression, attention, or dependency. Interestingly, both the homeless and housed children had scores which were worse than those of


children in the normative population.\textsuperscript{24}

As indicated by these diverse findings, the picture is mixed as to whether preschool aged, homeless children are at a greater risk than children from low-income households.\textsuperscript{25} Bassuk and Rosenberg added that poor children with homes and homeless children each have problems.\textsuperscript{26} Schteingart et al. maintained the premise that life in a shelter is no different than living in substandard, subsidized housing. For housed families, living doubled up is a facsimile state of homelessness with many of the same stresses, disruptions, and instability as living in a shelter. These researchers attributed these comparable circumstances between the two groups as an acceptable explanation of why homelessness does not always emerge as a significant indicator of child maladjustment.\textsuperscript{27}

Milburn and D’Ercole emphasized similarities rather than differences between homeless and housed, poor children. They concentrated on measures of development and psychological problems. Both groups seemed to possess high risks. Because both populations performed poorly relative to the normative sample, they implicated poverty


and specific conditions of homelessness in the search for contributing factors in the development of psychological problems.\textsuperscript{28}

Similar results forced Ziesemer et al. to ask the question: do homeless children’s needs differ from those of other economically disadvantaged children? They insisted that although homelessness negatively affects a child’s development, it is relatively short in duration. However, poverty often lasts an entire childhood.\textsuperscript{29}

To understand the sources of the negative impact of homelessness, numerous issues relating to parenting have been explored. Hausman and Hammen provided the following incite. Homelessness impairs a mother’s capacity to nurture her children and to provide support and protection. These families experience a double crisis: the disruptive and traumatizing event of losing a home and impediments to a parent’s ability to function as a consistent and supportive care giver.\textsuperscript{30}

In essence, parenting behaviors and child outcomes are the result of a highly complex interaction between three factors: the environment, the mother, and the child. The environment sets resource constraints and generates stressors that affect the mother’s capacity to care for her family. There is a loss of autonomy that results from public mothering that seems to unravel the mother’s role. The chaos of the shelter environment


\textsuperscript{29}Carol Ziesemer, Louise Marcoux, and Barbara Marwell, “Homeless Children,” \textit{Social Work} 39, no. 6 (November 1994) : 667.

\textsuperscript{30}Bonnie Hausman and Constance Hammen, “Parenting in Homeless Families,” \textit{American Journal of Orthopsychiatry} 63, no. 3 (July 1993) : 358.
seems to diminish the mother’s confidence in relating to her children and her position as head of the household. Two damaging factors of the shelter experience upon parenting include a lack of privacy and opportunity to establish family routines.\(^3\)

Milburn and D’Ercole also contributed to the discussion on homeless parenting. They recognize the difficulties that these parents often encounter balancing their own physical, social, and personal needs and those of their children.\(^3\) Bassuk and Rubin agree that when a mother is preoccupied with issues relating to survival there is little energy left to give attention to anything or anyone else.\(^3\) Therefore, parents under multiple stressors associated with poverty and homelessness tend to be less emotionally available, less supportive, and less able to use child management techniques that require patience and negotiation.\(^3\)

DiBiase and Waddell maintain that a child’s emotional deprivation and social isolation lead to insecure attachments to others, poor self-esteem, and aggressive behavior.\(^3\) According to Hausman and Hammen, children deprived of the support of a

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\(^{31}\)Ibid., 360.


nurturing family are at a greater risk for psychological impairment. The mother’s level of psychological distress is correlated to a child’s emotional and behavioral adjustment.\textsuperscript{36} Schteingart et al. offer a solution to this population’s dilemma. They suggest that young, homeless children seek support from additional caregivers. Nurturance from a parental substitute appears to be an important buffer against stressful environments.\textsuperscript{37}

From Ziesemer et al.’s perspective, this suggestion may be unrealistic because children whose mothers lack social supports typically do not have social supports available to them and may not learn how to form mutually supportive, trusting relationships.\textsuperscript{38} Evidence suggests that homeless mothers and their children are generally isolated and alone without the benefit of social networks.\textsuperscript{39} In one study, Bassuk et al. documented that one-fourth of homeless mothers named their minor child as their primary source of support during periods of personal distress.\textsuperscript{40} Bassuk and Rubin supplemented this observation by noting that 24% of mothers in another study viewed

\textsuperscript{36}Bonnie Hausman and Constance Hammen, “Parenting in Homeless Families,” \textit{American Journal of Orthopsychiatry} 63, no. 3 (July 1993) : 359.


their children as their major emotional support.\textsuperscript{41}

Another issue explored is the effects of maternal depression upon homeless children. Schteingart et al. identify economic distress as a predictor of depression. Poor, isolated, single, young mothers are more susceptible to depression. Children of depressed parents possess a wide variety of emotional, behavioral, and developmental problems.\textsuperscript{42} Milburn and D’Ercole observe that maternal depression places children at increased risks for depressive disorders, behavior problems, anxiety, insecure attachment, and social incompetence.\textsuperscript{43} Hausman and Hammen present evidence of a lack of maternal responsiveness during periods of depression. Children of depressed mothers usually are not played with, talked to, or nurtured.\textsuperscript{44}

In the search for antecedents to behavioral problems of homeless children, exposure to violence has also been investigated. Violence appears to be cyclical in the lives of homeless mothers and their children. Bassuk, Rubin, and Lauriat report that one-third of homeless mothers were physically abused as children and frequently come from homes with a history of abuse. The homeless mothers identified the perpetrators of their


\textsuperscript{44}Bonnie Hausman and Constance Hammen, “Parenting in Homeless Families,” \textit{American Journal of Orthopsychiatry} 63, no. 3 (July 1993) : 363.
abuse as their own mothers. As a result of this abuse, they seem to have difficulty parenting their own children. Forty percent of these women also reported having been involved in at least one battering relationship.\textsuperscript{45}

Smith and North substantiated these findings with their study of 300 Boston families living in shelters. They concluded that 45% of these homeless mothers had experienced an abusive relationship with a spouse or partner. Twenty-eight percent of the respondents cited family conflict as the reason for their homelessness. A family background of violence was also prevalent among these mothers. Therefore, Smith and North insisted that the children are at risk for abuse.\textsuperscript{46} Based upon self-report measures, approximately 22% of homeless mothers are currently involved in investigations for child abuse and neglect.\textsuperscript{47}

Aggression and Children

There is a heated debate about the etiology of aggressive behavior. Some investigators feel that it is learned; others believe that it is biologically based. It has been established that cognitive factors and environmental stressors play an important role in


the learning and unlearning of aggression. Research suggests that aggression is the result
of interactions between individual traits of the child, parental issues, and the social
environment. Individual factors addressed include temperament, gender, socialization,
and information processing. Environmental factors include family structure, parenting
style, poverty, and exposure to violence and abuse.

A considerable amount of attention has been given to the relationship between
family structure and aggressive behavior in children. Pearson et al. assessed this
association using a sample of 393 fourth graders. Utilizing the Teacher Observation of
Child Adaptation, their findings indicated that boys were more aggressive. However,
girls in mother-alone families had rates of aggression similar to boys in mother-father
families. Children in mother-alone households were 2-3 times more likely to be ranked
in the top third percentile for exhibiting aggressive behavior when rated by teachers.

Replicating this study to investigate the longitudinal link between family
structure and children’s aggressive behavior were Vaden-Kiernan et al. Using the same
measures, results of the same subjects in the sixth grade were compared to the results
from the fourth grade. The implications were that fourth grade aggression was a
significant indicator of aggression in the sixth grade. The effects of family structure
were more significant for boys than for girls. Boys in single-mother families appeared to

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48Kate Keenan and Daniel Shaw, “The Development of Aggression in Toddlers,”

49Jane Pearson, Nicholas Ialongo, Andrea Hunter, and Sheppard Kellam, “Family
Structure and Aggressive Behavior,” Journal of the American Academy of Child
Adolescent Psychiatry 33, no. 4 (May 19994) : 547.
have more behavior disorders than girls. Vaden-Kiernan et al. assert that children in the custody of the same sex adapt better. Boys and girls living in mother-father families were rated as less aggressive than those children residing in mother-alone families. This observation may reflect single mothers being less able to provide the same amount of child supervision and monitoring than adults in two-parent homes.\footnote{Nancy Vaden-Kiernan, Nicholas Ialongo, Jane Pearson, and Sheppard Kellam, “Household Family Structure and Children’s Aggressive Behavior,” \textit{Journal of Abnormal Child Psychology} 23, no. 5 (1995) : 554.} According to Takeuchi, Williams, and Adair, children in single mother families are considered more at risk for behavior problems because their mothers often face greater financial stresses. The economic hardship is thought to result in maternal psychological distress which may disrupt the mother’s parenting practices.\footnote{D. Takeuchi, R. Williams, and R. Adair, “Economic Stress in the Family,” \textit{Journal of Marriage and the Family} 53 (1991) : 1031-1041, cited in Nancy Vaden-Kiernan, Nicholas Ialongo, Jane Pearson, and Sheppard Kellam, “Household Family Structure and Aggressive Behavior,” \textit{Journal of Abnormal Child Psychology} 23, no. 5 (1995) : 554.}

Dodge, Pettit, and Bates analyzed the impact of poverty on parenting and aggression in children by following and studying 585 children from preschool to third grade in Tennessee and Illinois. They concluded that economic hardship acts as a stressor on the parents, leading to relationship conflicts, lowered quality of parenting, and ultimately child maladjustment. Parenting in disadvantaged environments can be a lonely experience without the benefit of monitoring, feedback, and encouragement from other adults. They also found that children in lower socioeconomic classes were more likely than their peers to be the objects of harsh discipline, to observe violence in their
neighborhoods, to have more transient peer groups and fewer opportunities for stable friendships, and to receive less cognitive stimulation in their home environment. Their mothers tended to be less warm toward them, to experience a high rate of family life stressors, to receive less social support, and to have values of aggression being an appropriate and effective means of solving problems.52

Other investigators have also focused upon the role of poverty in parenting and aggression in children. Kelly, Power, and Wimbush have speculated that mothers with low-incomes may employ harsh disciplinary practices at a higher rate because of the urgent need of trying to prevent their children from involvement in anti-social activities as victims or perpetrators.53 Cummings et al. believe that harsh discipline promotes child aggressiveness through coercive cycles. They have observed that harsh and punitive parenting and a lack of parental warmth is associated with aggressive child behavior.54 Patterson, Cohn, and Kao have also stated that the stresses of socioeconomic disadvantage may render a parent less attentive to a child’s needs and less warm resulting in aggressive behavior.55


Hinde, Tamplin, and Barrett elected to validate the correlation between aggressive behavior in preschoolers and individual characteristics, aspects of the mother-child interaction, and the mother-child relationship. The sample was comprised of 119 four year olds from two-parent homes attending one of four preschool programs. The Thomas Self-Values Test and audiotapes with verbally coded behaviors were the instruments administered. Based upon the data, aggression towards peers was related to individual temperament in girls, but not in boys. Aggression was more situation-bound in boys. Boys who received aggression from peers seemed to have more tension-filled relationships with their mothers which involved frequent negative interactions. Aggression was significantly related to one aspect of the mother-child relationship with the least aggression being exhibited by those children whose mothers used warmth and control in a balanced manner. Influence attempts to control the child appeared to be counterproductive when parental pressure was not quite strong enough or was much too forceful.56

Rubin and Mills further contributed to the exploration of the connection between parenting and aggression in children. They investigated maternal beliefs about adaptive and maladaptive behaviors in 121 normal, aggressive, and withdrawn preschoolers and their mothers. The results revealed that mothers of aggressive children were more inclined to use indirect strategies or nothing at all to deal with aggression even though they felt angered by this behavior. However, these same mothers stated that they believed

in taking a direct approach to teaching their children social skills.\textsuperscript{57}

One reason cited for the discrepancy in these mothers’ proactive beliefs and reactive strategies was related to the mothers feeling intimidated by their children’s aggression. They seemed to choose less direct strategies to lessen their own anxiety and avoid further confrontation. These conflicting emotions of feeling angry and indifferent may have actually increased and prolonged the child’s aggression.\textsuperscript{58} Patterson supported this rationale that parents engaging in an erratic pattern of behavior of rewarding and ignoring undesirable and desirable behavior indiscriminantly increase a child’s aggression.\textsuperscript{59}

Maccoby, Snow, and Jacklin targeted the association between mothers’ roles and aggressive behavior in children. They identified significant differences in maternal responsiveness to difficult girls versus difficult boys during problem-solving tasks. Mothers of difficult girls seemed to be more responsive than mothers of difficult boys. They hypothesized that these mothers may have put more effort into controlling their difficult daughters’ behavior due to society’s lack of acceptance of aggression in


\textsuperscript{58}Ibid., 421.

females.\textsuperscript{60}

Keenan and Shaw conducted a study which further substantiated this hypothesis of a mother's responsiveness decreasing aggressive behavior in girls. They evaluated the correlates and stability of aggressive behavior in a sample of toddlers from low-income families. Consistent with previous findings, their data suggested that maternal response to aggression may be a significant correlate of aggression for girls.\textsuperscript{61}

Other studies have also commented upon the relationship between maternal depression and aggression in children. Weintraub et al. reported that children of depressed mothers were rated as more disturbed than children of normal controls on measures of impatience, defiance, and aggression.\textsuperscript{62} Patterson also linked aggression in children to maternal depression. He indicated that mothers of socially aggressive children were likely to show depressive symptoms. He challenged that the emotional unavailability and irritability which may accompany depression may produce parenting conditions in which caregivers have difficulty helping their children regulate their


emotions properly.\textsuperscript{63}

In direct contrast to these findings, Cummings et al did not find an association between maternal depression and aggressive behavior in their study of 43 children aged 3-5 years old and their mothers.\textsuperscript{64} In a study measuring the frequency of socioeconomically disadvantaged preschoolers’ aggressive, assertive, and play interactions with their mothers, Wall and Holden obtained comparable results. They found that boys actually demonstrated lower levels of aggressive behavior for higher levels of maternal depression.\textsuperscript{65}

In citing environmental factors contributing to aggressive behaviors in children, the impact of children’s exposure to violence and abuse cannot be ignored. In their examination of the relationship between physical abuse and aggression, Scerbo and Kolko assessed fifty-two, clinic referred children aged 7-15 years. They relied on ratings of parents, teachers, and clinic staff. They observed that physically abused children exhibited more aggression than non-abused children. Physical abuse seemed to be related to a heightened risk of aggression. The notation was made that the impact of physical abuse and the development of aggressive behavior can have adverse

\textsuperscript{63}G. Patterson, “Mothers: the Unacknowledged Victims,” \textit{Monographs of the Society for Research in Child Development} 45 : 5, serial no.186.


consequences for the children, their families, and society as a whole.  

Bousha and Twentyman reiterated that physically abused children show increased levels of physical and verbal aggression when interacting with peers and caregivers.

In addition to being victims of abuse and violence, Henkoff maintains that witnessing violent acts can inflict lasting psychological wounds in which children become withdrawn, mistrustful, defensive, and violent. Children exposed to a single act can suffer anxiety and depression for years. He shares that too frequently children witness violence in their own houses which sends a powerful message. They receive a personal endorsement about violence from someone that they love, trust, and respect.

Dodge, Pettit, and Bates argue that children learn aggressive behavior patterns through observations of aggressive models. They insist that the observation of adult conflict is associated with immediate adverse child affects and long-term child maladjustment. Disadvantaged children may observe violence more frequently and may live with parents who support aggressive values while advocating for the use of violence to resolve problems; this approval is thought to aid in the child’s development of

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aggressive behavior patterns.\textsuperscript{69} Fraser contends that children who are routinely exposed to violence and abuse often adopt a defensive, aggressive, and negative interpersonal style. The exposure to violence seems to create a hostile, angry world view.\textsuperscript{70}

Researchers have not merely examined the environmental factors of family structure, parenting styles, poverty, and exposure to violence as precipitating contributors to aggression in children. They have also targeted individual factors of temperament, gender, socialization, coping skills, and information processing. A few studies link temperament and personality to aggression. From their inspection of 89 mother-child dyads, Keenan and Shaw found that early noncompliance by a child was a primary precursor to future aggressive and delinquent behavior in school age children. Chronic noncompliance seemed to set the stage for later aggressive behavior by escalating the level of frustration for the parent and the child. Difficult child temperament elicited negative parenting and resulted in angry and aggressive parent-child interactions.\textsuperscript{71}

Using the coercive family interaction theory, Lee and Bates also reflected upon the relationship between difficult temperament and mother-child interactions. They discovered that mothers of temperamentally difficult children were more likely to use intrusive and negative control strategies which were often met with resistance by the


The roles of gender and socialization have also been debated when discussing aggression in children. Maccoby and Jacklin documented that there are sex differences in aggression that are established during the first six years of life. According to Fraser, boys generally engage in more delinquent and aggressive behavior than girls. They also appear to be more instrumental, confrontational, and physically aggressive. Girls are more indirect. In their study of aggressive behavior in preschoolers, Hinde, Tamplin, and Barrett agreed that males have a preponderance of aggressive behavior. In her longitudinal investigation, Sheryl Olson further validated these findings by observing that boys showed higher rates of physical and verbal aggression towards peers and tended to respond aggressively to nonaggressive peer interactions.

Fagot and Hagan’s concentration upon socialization and its relationship to

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aggression in toddlers yielded interesting results. Boys directed their aggression more towards other boys. Girls’ aggression was directed more equally towards both sexes. Boys and girls received very different responses to their aggression. Girls’ aggression was ignored 50% of the time and boys received responses to their initial aggression 70% of the time. Boys tended to receive responses which maintained their aggressive interchanges. Because girls were ignored, their aggression terminated quickly.77

Archer and Parker provided additional insight into the role of socialization and aggression in their study of 8-11 year olds. They concluded that physical aggression is a functional part of the masculine role in childhood because of the emphasis on status and toughness acquired through fighting and athletic competition. For females, more emphasis is placed on close friendships and sharing secrets; hostility is expressed through indirect verbal means such as spreading gossip, telling secrets, and ignoring. Therefore, the use of physical aggression is outside the female value system and is viewed as dysfunctional. For females, physical aggression is seen as an unfortunate lack of control. For males, it is a necessary means to attaining goals central to gender role aspirations.78

Recently developmental psychologists have begun to examine individual differences in cognitive mechanisms as important determinants of aggressive behavior in children. Dodge and Newman formulated a social information model of aggression. The steps of this model include: 1.) perceiving and decoding of cues, 2.) making attributions


about peers’ intentions, and 3.) choosing a response.79

They identified three types of processing deficiencies in aggressive boys which seem to contribute to their aggressive behavior. Aggressive boys collect fewer pieces of information about a peer prior to making a decision about intent. They also use fewer of the relevant cues needed to make a decision; this process is referred to as a cue utilization deficiency. Aggressive boys are more likely than nonaggressive peers to attribute hostile intent to others in ambiguous situations; this deficiency is labeled hostile attribution bias. Aggressive boys also tend to generate fewer alternative solutions to peer problems and their solutions are more aggressive, less efficient, and labeled response-decision bias.80

In her evaluation of the association between attention, social problem-solving skills, and aggression in preschool boys, Gauze substantiated these findings.81 Fraser’s premises are also consistent with these observations. He states that aggressive children make thinking mistakes by erroneously assigning hostile intent to neutral social cues because they have difficulty identifying others’ feelings. They commonly misinterpret neutral interactions as threatening and respond defensively. These children are also more likely to perceive hostility in others.


80Ibid.

One paradigm concerning this hostile attribution suggested that it is provoked by parental aggression and extreme socioeconomic conditions. Fraser notes environmental factors may condition children to expect abusive and coercive interactions with others. Aggressive children tend to ignore long-term consequences resulting from force-related solutions to social problems. Instead, they seem to focus on short-term material gains and fail to acknowledge the negative costs of their behavior.  

Minde also adds to the knowledge-base on information processing by noting that aggressive children apparently possess a delay in developing a sense of perspective taking. He aligns himself with the proponents of the theory of hostile attributional bias among aggressive children. Olson provides further insight by explaining that when children enter peer groups with impaired social skills, they are at risk for being rejected by playmates. Once a negative reputation is established, peers begin to provoke aggressive reactions from those children rejecting them. As a result, children begin to internalize their peers negative views of them and begin to perceive all social situations as potential threats to self-esteem. Hence, children identified by peers as being disliked and behaviorally deviant tend to have more frequent, aggressive interactions with peers.

After surveying the findings of the aforementioned studies, one is able to reach

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certain conclusions about the impacts of homelessness and aggression on children. These diversified results provide images of homelessness actually debilitating children in areas of developmental delays, problematic and emotional behaviors, self-concept, cognitive functioning, and academic performance. The research correlates aggression in children to environmental issues relating to family structure, parenting styles, poverty, and exposure to violence and to individual factors relating to temperament, gender, socialization, and information processing.

Theoretical Framework

The psychosocial theory employed by Erik Erikson provides a useful framework for explaining the possible relationship between being homeless and aggression in preschool children. Erikson has created a model focusing upon stages of psychosocial development. He reflects on the growth of a healthy personality as one moves through developmental stages and crises and masters life’s internal and external challenges. Erikson insists that each stage presents a unique developmental task and confronts individuals with a crisis which must successfully be resolved before progressing to the next stage.

Failure to resolve a crisis in a particular stage results in the personality’s development being negatively altered; the individual is then hindered from dealing effectively with reality. Erikson proposes that by adolescence a child must have completed each of the following stages and resolved the accompanying psychosocial crisis: infancy: trust versus mistrust; early childhood: autonomy versus shame;
preschool: initiative versus guilt; and middle school: industry versus inferiority.\textsuperscript{85}

Erikson’s model supports the premise that the maladaptive behavior of aggression in homeless children may be directly associated with their failure to establish trust, autonomy, and initiative due to their living circumstances. In the infancy stage, an infant is supposed to acquire trust through their basic needs being met, feeling nurtured, and being made to feel safe. On the contrary, when an infant’s child care is chaotic, unpredictable, and rejecting, children approach the world and others with fear and suspicion.\textsuperscript{86}

Research reflects that homeless children’s needs of food, clothing, and shelter are routinely not met and that they are exposed to profound chaos and high levels of anxiety in shelters. At times their mothers do not provide nurturing because they are emotionally drained from dealing with survival issues.\textsuperscript{87} Under these circumstances, a child may develop aggression as opposed to trust.

In the toddler stage, a child acquires autonomy as a result of his caretakers being patient, cooperative, and encouraging. He develops a sense of independence and competence. However, homeless children may develop shame and doubt because their


\textsuperscript{86}Ibid.

parents tend to be less supportive, more critical, and impatient. As a result, this shame and doubt may manifest itself in the form of defiant, aggressive behavior.

In the preschool stage of psychosocial development, initiative is learned and children begin to internalize the moral values of their families and communities. Parents must be willing to allow their children the freedom to explore things intellectually and physically through play and recreational activities. By having this freedom stifled, children may begin to feel that they are nuisances and incompetent intruders in an adult world.

Because shelter life is extremely stressful with stringent rules, parents may by unable to provide their children with adequate opportunities to run, play and explore their environments. Due to these parental limitations, children may experience a certain amount of guilt which is expressed in the form of aggression. By not progressing effectively through these stages, homeless preschoolers may develop inappropriate strategies for coping with reality. After having examined components of this psychosocial theory, it seems to be applicable to examining the relationship between homelessness and aggression in preschoolers.

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88Ibid.

Statement of Hypotheses

Hypothesis I: There will be a statistically significant difference in aggression between children who are homeless and children who have homes.

Hypothesis II: There will be a statistically significant difference in aggression between boys and girls.

Definition of Terms

Homeless: The extent to which a person is without a permanent residence and resides in a shelter.

Shelter: A place that provides free overnight sleeping space and meals for persons who have no other place to go.

Aggression: The extent to which a person acts verbally or physically hostile, injurious, or destructive.

Preschooler: A child who is four or five years old.

Gender: A person’s biological sex, distinguished by the categories of male or female.

Care Giver: A person who provides for a child’s emotional and physical needs on a daily basis.
CHAPTER THREE

METHODOLOGY

Design and Sample

In this study, the mode of observation used to collect data was survey research. A group interview format was adopted to measure the independent variable, homelessness, and the dependent variable, aggression. The study employed the pre-experimental design of a post-test only with non-equivalent groups.

The sample on which this present study is based consists of thirty-one, four and five year old homeless preschoolers. The sample was drawn from two local homeless shelters in Metro Atlanta. Atlanta Children’s Shelter is a day facility which provides free day care and lunch for homeless children ages two months to five years on weekdays. Moreland Avenue Shelter is a night facility located at a church which provides free beds, meals, and showers for homeless mothers and their children. A comparison group of thirty-three, four and five year old children who live in homes and attend the Clark Atlanta University Head Start Program was also used. Each subject in the comparison group had a low socioeconomic status which is a pre-requisite for participating in the Head Start program, which is a government subsidized, preschool education program.

Data was collected by administering a three page questionnaire to caregivers of the preschoolers at the three locations during parenting meetings. The instrument in the questionnaire packet was administered by the researcher at the homeless shelters and by the site manager at the Head Start program. Prior to distributing the questionnaire, the researcher and the site manager introduced themselves and passed out a letter about
participation to the potential participants. As the parents followed along silently, the researcher read the correspondence out loud. They were informed that the purpose of the study was to obtain information about aggression and homelessness in preschool aged children. The announcement was made that participation was entirely voluntary. The participants were also reminded that all information obtained would be kept confidential.

All questions and concerns were addressed. Pencils and questionnaires were distributed. Participants were then asked if anyone felt uncomfortable filling out the questionnaire themselves and if assistance was needed to complete it. The questions and response categories were read out loud as each participant followed along. They were instructed to circle only one response per item.

The questionnaire was administered in one, thirty minute session at each of the three sites. Each session occurred on different days and at different times and was contingent upon the schedule of the facility. All of the respondents were female except for one. Twenty-nine of the homeless respondents were African-American; one was Hispanic; and one was bi-racial. Thirty of the housed, Head Start respondents were African-American and two were White. All participants ranged in age from 18-45 years old.

Convenient sampling was used to acquire the sample due to the limited access to the population of homeless preschoolers and their caregivers. The sample appears to be representative of the homeless preschoolers in this geographical area since the subjects reside in different night shelters throughout Metro Atlanta. The subjects in the homeless and comparison groups are mainly African-American and from female-headed families.
because of the demographic composition of the sampling frame.

Data Collection Procedure

The instrument utilized in this study was a standardized, close-ended questionnaire. The questionnaire was designed to measure the variables of aggression and homelessness. The questionnaire packet consisted of three parts. Section one included eleven questions designed to elicit general demographic data about the respondent. The information included age, race, marital status, income, and homeless status. Section two consisted of five questions designed to obtain demographic information specifically about the respondent’s four or five year old child.

Section three was an adapted version of the Aggression Subscale of the Achenbach Child Behavior Checklist designed to gain information about the respondent’s four or five year old child. The subscale consisted of a listing of 20 items describing behavioral symptoms relating to aggression. The respondent was asked to select an appropriate response from these three categories: “not true,” “sometimes true,” and “very true.” The responses were pre-coded in the following manner: 0 = not true, 1 = sometimes true, and 2 = very true. Achenbach provides significant evidence of this instrument’s excellent reliability and validity.¹

Data Analysis

This study has used the parametric test of a t-test to analyze the data obtained from respondents in each group. The t-test was an appropriate statistical procedure to

analyze this study's variables at the interval level of measurement. The t-test was used to compare the mean scores of aggression for the two groups of homeless and housed subjects in this study and to determine the significance of the relationship between the two variables.
CHAPTER FOUR

RESULTS

Data for the following statistical analysis were collected from a sample of homeless and housed respondents. A comparative evaluation of the results was conducted utilizing descriptive analysis and t-tests. Frequency distributions with percentages were employed to describe demographic information of care givers and children. T-tests were used to analyze the relationships between homelessness and aggression and between gender and aggression. For this study, the .05 probability level was selected as the measure of statistical significance.

Table 1 presents the demographic data from the 31 homeless and 33 housed care givers. Of the homeless group, 94% were mothers, 3% were fathers, and 3% were aunts. For the comparison group, 82% were mothers, 3% were aunts, and 15% were grandmothers. The racial configuration for the homeless subjects included 94% Black, 3% Hispanic, and 3% other, meaning bi-racial. The majority of the housed respondents were also Black with only 6% being White. Out of 64 respondents, only one was male. On the average, housed and homeless participants tended to fall within the age category of 19-25 years. Twenty-six to thirty years represented the next grouping with the second highest percentages of 29% and 30% respectively for the homeless and the housed.

In response to marital status, 68% of the homeless and 64% of the housed subjects reported being single. None of the homeless were married while 27% of the housed were. The divorced and separated statuses represented 32% of the homeless responses and only accounted for 9% of the housed replies. Typically, homeless
participants had 2.6 children and housed subjects had 2.3 children. Thirty-five percent of the homeless families had four or more children and eighteen percent of the housed had four or more.

The major sources of income for both groups were paychecks and AFDC. Forty-eight percent of the homeless population and 55% of their counterparts received paychecks. AFDC was reported as the secondary source of income for 46% of the homeless and 33% of the housed participants. Of all the responses, child support was only identified by one respondent. On the average, the homeless monthly income ranged between $301-$600 and the housed ranged between $601-$900. Twenty-nine percent of the homeless and 21% of the housed subjects had incomes in the lowest bracket of $0-$300 per month. While 21% of housed participants reported incomes above $1201, only 7% of the homeless indicated income in this range.
Table 1. Frequency Distribution of Care Givers’ Demographics

<table>
<thead>
<tr>
<th>Variable</th>
<th>Homeless Number</th>
<th>Homeless Per cent</th>
<th>Housed Number</th>
<th>Housed Percent</th>
</tr>
</thead>
<tbody>
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<td><strong>Relationship</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother</td>
<td>29</td>
<td>94.0</td>
<td>27</td>
<td>82.0</td>
</tr>
<tr>
<td>Father</td>
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<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>Relative</td>
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<td>0.0</td>
<td>1</td>
<td>3.0</td>
</tr>
<tr>
<td>Other</td>
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<td>3.0</td>
<td>5</td>
<td>15.0</td>
</tr>
<tr>
<td><strong>Race</strong></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Black</td>
<td>29</td>
<td>94.0</td>
<td>31</td>
<td>94.0</td>
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<tr>
<td>White</td>
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<td>0.0</td>
<td>2</td>
<td>6.0</td>
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<tr>
<td>Hispanic</td>
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<td>3.0</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>Other</td>
<td>1</td>
<td>3.0</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>30</td>
<td>97.0</td>
<td>33</td>
<td>100</td>
</tr>
<tr>
<td>Male</td>
<td>1</td>
<td>3.0</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>1</td>
<td>3.0</td>
<td>1</td>
<td>3.0</td>
</tr>
<tr>
<td>19-25</td>
<td>10</td>
<td>32.0</td>
<td>12</td>
<td>37.0</td>
</tr>
<tr>
<td>26-30</td>
<td>9</td>
<td>29.0</td>
<td>10</td>
<td>30.0</td>
</tr>
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<td>31-36</td>
<td>8</td>
<td>26.0</td>
<td>5</td>
<td>15.0</td>
</tr>
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<td>37-older</td>
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<td>10.0</td>
<td>5</td>
<td>15.0</td>
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<td><strong>Marital Status</strong></td>
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<td>16.0</td>
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<td>9.0</td>
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<td>64.0</td>
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<td><strong>Children</strong></td>
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</tr>
<tr>
<td>One</td>
<td>5</td>
<td>16.0</td>
<td>8</td>
<td>24.0</td>
</tr>
<tr>
<td>Two</td>
<td>13</td>
<td>42.0</td>
<td>7</td>
<td>21.0</td>
</tr>
<tr>
<td>Three</td>
<td>2</td>
<td>7.0</td>
<td>12</td>
<td>37.0</td>
</tr>
<tr>
<td>Four or more</td>
<td>11</td>
<td>35.0</td>
<td>6</td>
<td>18.0</td>
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Table 1. Continued

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<thead>
<tr>
<th>Variable</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Percent</td>
<td>Number</td>
<td>Percent</td>
</tr>
<tr>
<td><strong>Income Type</strong></td>
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</tr>
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<td>AFDC</td>
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<td>11</td>
<td>33.0</td>
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<td>3</td>
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<tr>
<td>Other</td>
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<td>3.0</td>
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<td><strong>Monthly Income</strong></td>
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<td>29.0</td>
<td>7</td>
<td>21.0</td>
</tr>
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<td>301-600</td>
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<td>38.0</td>
<td>8</td>
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</tr>
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<td>601-900</td>
<td>6</td>
<td>19.0</td>
<td>7</td>
<td>21.0</td>
</tr>
<tr>
<td>901-1200</td>
<td>2</td>
<td>7.0</td>
<td>4</td>
<td>13.0</td>
</tr>
<tr>
<td>1201 or more</td>
<td>2</td>
<td>7.0</td>
<td>7</td>
<td>21.0</td>
</tr>
</tbody>
</table>

Table 2 reflects data pertaining to the respondents’ preschool children.

Demographic information is presented through the use of frequencies and percentages for both groups. The majority of homeless and housed respondents’ children are four years old. For the homeless sample, 55% of the children were four years of age and 45% were five. However, 4 year olds comprised 73% of the comparison group.

Females represented the majority gender in each group with there being 18 homeless and 20 housed girls. An equal distribution of 13 males was counted in each group. Most of the preschoolers in this study were Black. Only one respondent identified bi-racial as the race of her child. Because the housed sample was recruited from the Head Start program, 100% of these children attended day care. Seventy-one
percent of the homeless children were also identified as day care participants.

Table 2. Frequency Distribution of Preschoolers' Demographics

<table>
<thead>
<tr>
<th>Variable</th>
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<th></th>
<th>Housed</th>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Percent</td>
<td>Number</td>
<td>Percent</td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Four</td>
<td>17</td>
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<td>24</td>
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<tr>
<td>Five</td>
<td>14</td>
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<tr>
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<td>Male</td>
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<td>42.0</td>
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<td>39.0</td>
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<tr>
<td>Race</td>
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<td></td>
</tr>
<tr>
<td>Black</td>
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<td>97.0</td>
<td>33</td>
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</tr>
<tr>
<td>White</td>
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<td>0.0</td>
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<td>0.0</td>
</tr>
<tr>
<td>Hispanic</td>
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<td>0.0</td>
<td>0</td>
<td>0.0</td>
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<tr>
<td>Other</td>
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<td>Day Care</td>
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<tr>
<td>No</td>
<td>9</td>
<td>29.0</td>
<td>0</td>
<td>0.0</td>
</tr>
</tbody>
</table>

Table 3 depicts information concerning respondents' previous incidents of homelessness. Of the 31 individuals reporting current homelessness, 9% had previously been homeless. Of the housed families, only 3% reported prior homelessness. In response the total number of times of homeless episodes, 32% of the homeless sample selected 1-2 times and 7% indicated 3-4 times. One housed respondent replied 1-2 times.
Table 3. Frequency Distribution of Incidents of Homelessness

<table>
<thead>
<tr>
<th>Variable</th>
<th>Homeless</th>
<th>Housed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Percent</td>
</tr>
<tr>
<td><strong>Currently Homeless</strong></td>
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<td></td>
</tr>
<tr>
<td>Yes</td>
<td>31</td>
<td>100</td>
</tr>
<tr>
<td>No</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td><strong>Homeless Before</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>9</td>
<td>29.0</td>
</tr>
<tr>
<td>No</td>
<td>22</td>
<td>71.0</td>
</tr>
<tr>
<td><strong># of Times</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0</td>
<td>19</td>
<td>61.0</td>
</tr>
<tr>
<td>1-2</td>
<td>10</td>
<td>32.0</td>
</tr>
<tr>
<td>3-4</td>
<td>2</td>
<td>7.0</td>
</tr>
<tr>
<td>5 or more</td>
<td>0</td>
<td>0.0</td>
</tr>
</tbody>
</table>

Table 4 reflects the percentages of homeless and housed preschool children who had scores which exceeded the cut-off point on the Aggression Subscale of the Child Behavior Checklist. These elevated scores indicated a need for further clinical and referral and evaluation. The cut-off score was 17 for girls and 19 for boys; they varied to allow for gender differences. By scoring at or above these two points, children were at the 95th percentile for aggression in comparison to the normative population and were in the clinical range. If scores fell below the cut-off indicators, the child was considered to have aggression levels within the normal range. Scores varied from 0, which was the minimum, to 40, which was the maximum total obtainable.

Five out of thirty-one homeless preschoolers, 16%, scored within the clinical
range with their two highest scores being 38 and 40 respectively. In comparison, six out of thirty-three housed preschoolers, 18%, scored within the clinical range with their two highest scores being 23 and 28.

Preschool girls made up 22% of the homeless subjects with aggression scores in the clinical range. Homeless boys contributed 8% to the pool of individuals requiring further psychological evaluation. In the comparison group, girls comprised 20% of the population possessing elevated aggression scores. Fifteen percent of these boys had scores outside of the normal range.

Table 4. Comparison of Aggression Scores Exceeding Clinical Cut-Off

<table>
<thead>
<tr>
<th></th>
<th>Homeless</th>
<th>Housed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Percentage</td>
<td>16 (31)</td>
<td>18 (33)</td>
</tr>
<tr>
<td>Girls’ Percentage</td>
<td>22 (18)</td>
<td>20 (20)</td>
</tr>
<tr>
<td>Boys’ Percentage</td>
<td>8 (13)</td>
<td>15 (13)</td>
</tr>
</tbody>
</table>

* Numbers in parentheses represent the total number of subjects evaluated.

This study hypothesized that there would be a statistically significant difference in aggression between children who are homeless and children who have homes. A second hypothesis that was investigated stated that there would be a statistically significant difference in aggression between boys and girls. A t-test of group means was employed to determine if the mean differences of aggression scores for homeless and housed preschoolers and for boys and girls were statistically significant. As previously
stated, the .05 probability level was selected to determine whether to accept or reject these two hypotheses.

Table 5 presents the results of these t-tests. The data does not support the first hypothesis. Homeless preschoolers had a slightly higher mean of 13.45 for the aggression score than their housed counterparts who had a mean score of 11.24. However, this difference was not statistically significant with $t=1.23$, $df=62$, and $p=.519$. Therefore, it was appropriate to reject this hypothesis.

The second hypothesis which stated that there would be a statistically significant difference in aggression between boys and girls was also not supported by the findings in Table 5. Male preschoolers had lower aggression scores with a mean of 11.54 and female preschoolers had a mean score of 12.84. This minute difference in mean scores was not statistically significant with $t=-.71$, $df=62$, and $p=.051$. Consequently, this second hypothesis must also be rejected.

Table 5. Results of T-Tests Analysis of Aggression Scores

<table>
<thead>
<tr>
<th>Variable</th>
<th>Number</th>
<th>Mean</th>
<th>SD</th>
<th>Significance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Living Status</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Homeless</td>
<td>31</td>
<td>13.45</td>
<td>8.22</td>
<td>$t=1.23$</td>
</tr>
<tr>
<td>Housed</td>
<td>33</td>
<td>11.24</td>
<td>6.08</td>
<td>$df=62$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$p=.519$</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>26</td>
<td>11.54</td>
<td>4.85</td>
<td>$t=-.71$</td>
</tr>
<tr>
<td>Female</td>
<td>38</td>
<td>12.84</td>
<td>8.50</td>
<td>$df=62$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$p=.051$</td>
</tr>
</tbody>
</table>
CHAPTER FIVE

SUMMARY AND CONCLUSION

The finding that there is no significant difference between aggression in homeless preschoolers and aggression in housed preschoolers is incongruent with the majority of previous research. The lack of a relevant difference may be attributed to several factors. Circumstances in the lives of all of youngsters in each group are relatively similar. In both instances, poverty is a prevalent factor which dictates that they are exposed to inadequate, subpar environments which may compromise their emotional and physical development. Mirroring homeless children, poor housed children may also endure a lack of basic necessities of sufficient food, clothing, and shelter. Being able to label a dwelling, home, does not guarantee protection from other harsh realities caused by economic hardship.

Due to limited resources, homeless and housed impoverished parents must cope with stressors relating to survival which may alter or impair their relationships with their children. Thus, it may be more accurate to conclude that the striking similarities in the plights of all of the subjects may eliminate mere homelessness as the sole antecedent of increased aggression and behavior problems.

Instead, poverty should be identified as a co-conspirator contributing to the negative ramifications sometimes experienced by homeless children. Attention must be given to the fact that episodes of homelessness may actually last a relatively short period from a few weeks to a couple of months. Contrastingly, poverty tends to dominate individuals’ lives for longer time frames of several years or more. Thus, the impact of
homelessness may not be as traumatic for some children who are resilient and capable of adapting. Due to its increased duration, poverty may have more devastating, lasting effects upon youngsters. In essence, the parallel lifestyles of the two groups of subjects may actually provide the explanation of why there was no relevant difference in their aggression levels. For children who are impoverished, homelessness may merely be another temporary crisis that they must endure until it is eventually resolved.

In searching for explanations for this research’s departure from past findings, consideration should be directed towards the sources of data collection. In several previous studies, teachers frequently rated their students’ behaviors. These observations could have been biased to a certain extent. Ziesemer, Marcoux, and Marwell supported this premise that teachers who are not from the same social class or racial group may perceive children with low socioeconomic statuses who are homeless and housed as having substantially more behavioral and socioemotional problems than their peers. Therefore, ratings could have been biased and depicted an inaccurate image of these children being excessively aggressive and maladapted.

In a sense, teachers may have expected these children to exhibit negative behaviors. As a result of this labeling and these low expectations, they may have incited and contributed to inappropriate, unacceptable responses from the children. Thus, homelessness or poverty may have not caused maladaptive behavior; instead, teachers’ attitudes may have played a role. Basically, these adults may have possessed the same

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previously mentioned “hostile attribution bias” which resulted in their assigning negative intent to the students’ motives and actions. Neutral, non-threatening behaviors may have been interpreted and coded as aggressive. Hence, a frustrated child may have adopted a self-fulfilling prophecy mind set and responded in negative ways anticipated by the teacher. A non-ending cyclical effect may have been the final product.

Interestingly, the majority of the preschoolers did not receive aggression scores within the clinical range. Only 16% of the homeless and 18% of the housed children scored above the cut-off point. This finding may surprise people who tend to eagerly label children from impoverished communities with the ambiguous descriptor of being “at-risk.” Their behaviors are often stereotyped and erroneously described as hostile or aggressive. These labels allow entire groups of children to be categorized and deemed unreachable or maladjusted. Past researchers have tended to advocate the premise that these children are more behaviorally impaired than the so-called normative population.

In observing the small percentage of homeless children who scored in the clinical range, one may contemplate whether an opposite trend could have occurred. As opposed to acting out verbally and physically, these children may have adopted a depressed and withdrawn demeanor in response to their environment and circumstances. It would be incorrect to assume that most children respond by externalizing feelings related to adverse, stressful conditions. Perhaps the subjects in this study chose to internalize everything. They may have chosen to cope by isolating themselves, talking less, and becoming more passive. The same explanation may be offered to account for the relatively small percentage of housed, poor subjects who obtained rather low scores.
In discussing the scoring trends, attention should be directed to the fact that all of
the questionnaires were completed by care givers of the children, who typically were
mothers. Social desirability bias could have influenced the respondents to give lower
valued responses to statements. Though participants were assured that the information
would be confidential, they were still in a group setting completing them. Evidence of
this possible bias existing was exhibited several times as the questionnaire was read out
loud. Several respondents commented about how true certain descriptive behaviors were
for other respondents' children. Responses to these negative comments included
participants stating that their children were "not bad" and were not getting 2's which
represented a negative behavior being very true. Due to socialization, some respondents
may have not felt that a described behavior was excessive and opted to select the middle
score of 1 instead of the more appropriate, extreme score of 2.

Findings relating to the second hypothesis were not compatible with past research
which identified gender differences in levels of aggression in children and asserted that
boys were more aggressive than girls. Basically, no significant difference between the
genders on the variable of aggression may be related to the argument that the preschool
stage of development is too early to detect such variances. The assumption that males
are more aggressive may merely be an antiquated stereotype. Though differences were
not significant, girls in this study had higher aggression scores than boys. This finding
may be related to the growing trend in society of females becoming more assertive,
aggressive, and externalizing in nature. Traditional stereotypes of expected male and
female roles are being challenged. As a result, the mentality of females in general may
be transforming. Messages relayed from mother to daughter may communicate approval rather than contempt for girls displaying aggression.

Limitations and Recommendations for Future Research

The limitations of this study include several factors. The sample size was relatively small and convenience sampling was used. As a result, these findings may not be representative and may not be generalizable to other populations. Therefore, in replicating this study, the sample size should be increased and probability sampling should be employed to ensure that more participants are identified who are more representative of the general population of homeless preschoolers. More shelters should also be utilized because only two local Atlanta facilities were involved in this research endeavor.

Another noted limitation involved the difficulty in administering the questionnaire to the homeless respondents. The interview setting at the night shelter was not optimum because many parents had their children with them in the meeting as they completed the instrument. Therefore, interruptions and noise from crying infants interfered with the process a few times. At the Head Start site, children were not present and the atmosphere was less distracting for these respondents. These differences could have affected the manner in which participants answered and contaminated the results.

In future studies, researchers may opt to conduct one-on-one interviews to avoid the negative issues relating to the group-style interview. By not having all of the participants in the same room at one time, the social desirability bias may be controlled for and diminished. Other methods of data collection should be employed rather than
self-reporting via surveys.

The third limitation focused on the actual respondents’ comprehension of the instrument. They were asked if they needed someone to complete it for them and all declined. Despite having each item and response category read out loud, some individuals did not follow along and appeared not to read the statements. They merely seemed to be rapidly circling answers. Their understanding of the questionnaire’s instructions must also be addressed. Though there were only three response categories, they seemed to be confused and needed clarification.

In future replications, it may be more conducive to utilize naturalistic observations in observing aggressive behaviors among preschoolers. This method of data collection would combat the problem of reading impairments. Biases relating to the use of self-reporting would also be minimized.

Another possible limitation was that the researcher had to rely upon an independent evaluator, the Headstart site manager, to administer the instrument to the housed sample. Therefore, the administration and collection process may have been altered from its original format. To avoid data being impacted by deviations in instructions, one person, preferably the researcher, should administer the survey.

An improvement to this study would involve data being collected about the length of homelessness. This information would allow a correlation to be done about the association between the duration of homelessness and aggression levels in preschoolers. This present study did not consider this relationship. Data was only collected concerning the number of homeless episodes.
Another way to enhance this study would be to provide a specific definition of homelessness. Six participants in this study did not consider themselves homeless even though they lived in shelters. They responded "no" to the question about currently being homeless. The researcher had to alter their response to this item to reflect that they were homeless. This misunderstanding could have been avoided if the researcher’s definition was explained to the participants prior to administering the instrument.

Implications for Social Work Practice

The findings of this study should inspire social workers to become proactive at the micro and macro levels of practice. Contrary to previous schools of thought, it appears that homeless and housed, impoverished children do not have excessive amounts of aggression. Therefore, there is still adequate time to influence their thinking, development of values, and acquisition of social skills. With the escalating culture of youth violence, it is important that social workers network and create alliances to campaign for early prevention programs.

Typically, the prevention programs such as Second Step and D.A.R.E target children who are older and already engaging in targeted behaviors. By focusing upon preschoolers, energies will not have to be depleted with interventions instituted after a child becomes involved with systems that typically are unsuccessful with treatment and rehabilitation. Through teaching of life-skills such as non-violent conflict resolution, effective decision-making, and anger management, preschoolers may learn proper information processing skills which will contribute to their future successes.

In adhering to the humanistic values, practitioners have an obligation to
enlighten teachers and school staff about diversity in dealing with children from different racial and ethnic groups and social classes. Through the use of in-services and workshops, school social workers need to inform everyone about the detrimental impact that their negative, prejudiced labeling may have upon their students. In essence, they need to understand that they are co-conspirators in the demise of the very youngsters which they proclaim to be helping. Social workers have to convey the message that negative, judgmental attitudes on the parts of adults merely begets disturbing, inappropriate responses from children. Teachers must be trained to look beyond the disheveled outer appearances of these children and to tap into their reservoirs of tenacity and determination. After all, this resiliency has allowed them to persevere in the midst of numerous crises and disappointments infiltrating their young lives.

On a macro level, practitioners must become advocates for all impoverished children whether homeless or housed. Policy makers need to be confronted about the plight of America's poor children. Welfare Reform must be challenged because the meager safety net of AFDC, WIC, and food stamps has been destroyed. Unfortunately, young children are being made to suffer by having their basic needs which are being met through these government subsidies threatened. Without these minute supplements of benefits, an alarming number of children and their families are at an increased risk for becoming homeless.

In lobbying for the particular needs of homeless children, social workers need to demand that this population has access to safe, clean emergency shelters which provide adequate sleeping space and nutritional meals. Shelter managers and social workers
need to collaborate to make the shelter environment more stable and less chaotic.

Certain rules which impact family preservation should be challenged. For instance, families should not be forced to separate in order to secure shelter and adolescent boys should not have to seek shelter away from their sisters and mothers. Families should also not be mandated to leave shelters early in the morning and inclement weather.

Social workers have a great task before them in advocating for the needs of these homeless children. In an effort to maintain stability, children should be allowed to continue at the schools which they attended prior to becoming homeless. To attempt to diminish any negative, residual effects of being homeless, more day care and after-school programs need to be created and implemented. Practitioners could be instrumental in designing innovative service models to assist this population in coping with the dilemma of being homeless. In essence, social workers must operate on two fronts. They must simultaneously change conditions that lead to poverty and homelessness and assist families who are already poor or homeless. Though an arduous task, working on behalf of these populations should only prove beneficial.
Dear Participant:

I am a graduate student at Clark Atlanta University’s School of Social Work. I am inviting you to participate in a study about the relationship between aggression and homelessness in preschoolers. I would greatly appreciate your cooperation and help by completing the attached questionnaire as part of the study.

Please note that all information will be kept confidential. In order to further respect your privacy, I am asking you not to write your name or your child’s name on the questionnaire. Your anonymity will be maintained.

Please assist me by completing the attached questionnaire. Your participation is strictly voluntary. You will only be asked to fill out this questionnaire one time. By doing so, you are assisting me tremendously in my educational goals.

The information obtained from this study will be analyzed and placed in a research paper. The information requested in this study is important to the profession of social work. It will help to provide a better understanding of the effects of being homeless on aggression in preschool children.

Your time and participation in completing this questionnaire are greatly appreciated. If you have any questions or if you are interested in the results of this study, please feel free to contact me by telephone or letter at the following address:

Ms. DeWanda Young  
Clark Atlanta University  
School of Social Work  
James P. Brawley Dr. at  
Fair St., SW  
Atlanta, Georgia 30314  
(404)-880-8555

Sincerely,

DeWanda Young
APPENDIX B

QUESTIONNAIRE

The first section of this questionnaire is designed to get general information about you. Please circle the most appropriate answer. Remember that this information is confidential and your privacy will be protected. Please do not write your name anywhere on this form. Thank-you.

1. What is your relationship to the child?
   1. Mother
   2. Father
   3. Relative
   4. Other: (please write in) __________

2. What is your race?
   1. Black
   2. White
   3. Hispanic
   4. Other

3. What is your sex?
   1. Female
   2. Male

4. What is your age group?
   1. 18 years old or below
   2. 19-25 years old
   3. 26-30 years old
   4. 31-36 years old
   5. 37 years old or older

5. What is your marital status?
   1. Married
   2. Divorced
   3. Separated
   4. Single

6. How many children do you have?
   1. One
   2. Two
   3. Three
   4. Four or more
7. What is your main source of income?
   1. Paycheck
   2. Child Support
   3. AFDC
   4. SSI

8. How much is your total monthly income?
   1. $0-$300
   2. $301-$600
   3. $601-$900
   4. $901-$1200
   5. $1201 or more

9. Is your family currently homeless?
   1. Yes
   2. No

10. Has your family ever been homeless before?
    1. Yes
    2. No

11. How many times has your family been homeless before?
    1. 0
    2. 1-2
    3. 3-4
    4. 5 or more

The next section is asking questions about your **4 or 5 year old child only**. Please circle the most appropriate answer.

12. How old is your child?
    1. 4 years old
    2. 5 years old

13. What is your child’s sex?
    1. Male
    2. Female
14. What is your child’s race?
   1. Black
   2. White
   3. Hispanic
   4. Other

15. Does your child attend a day care program?
   1. Yes
   2. No

16. What is the name of this day care program? (Write it in the blank.)
This section is also about your 4 or 5 year old child. Below is a list of statements that describe children. For each statement, please circle the 0 if the statement is not true about your child. Circle 1 if the statement is sometimes true about your child. Circle 2 if the statement is very true about your child. Please answer all of the statements as well as you can, even if some do not seem to apply to your child.

<table>
<thead>
<tr>
<th>0=Not True</th>
<th>1=Sometimes True</th>
<th>2=Very True</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 1 2</td>
<td>1. Argues a lot</td>
<td></td>
</tr>
<tr>
<td>0 1 2</td>
<td>2. Bragging, boasting</td>
<td></td>
</tr>
<tr>
<td>0 1 2</td>
<td>3. Cruelty, bullying, or meanness to others</td>
<td></td>
</tr>
<tr>
<td>0 1 2</td>
<td>4. Demands a lot of attention</td>
<td></td>
</tr>
<tr>
<td>0 1 2</td>
<td>5. Destroys his/her own things</td>
<td></td>
</tr>
<tr>
<td>0 1 2</td>
<td>6. Destroys things belonging to his/her family or others</td>
<td></td>
</tr>
<tr>
<td>0 1 2</td>
<td>7. Disobedient at home</td>
<td></td>
</tr>
<tr>
<td>0 1 2</td>
<td>8. Disobedient at school</td>
<td></td>
</tr>
<tr>
<td>0 1 2</td>
<td>9. Easily jealous</td>
<td></td>
</tr>
<tr>
<td>0 1 2</td>
<td>10. Gets in many fights</td>
<td></td>
</tr>
<tr>
<td>0 1 2</td>
<td>11. Physically attacks people</td>
<td></td>
</tr>
<tr>
<td>0 1 2</td>
<td>12. Screams a lot</td>
<td></td>
</tr>
<tr>
<td>0 1 2</td>
<td>13. Showing off or clowning</td>
<td></td>
</tr>
<tr>
<td>0 1 2</td>
<td>14. Stubborn, sullen, or irritable</td>
<td></td>
</tr>
<tr>
<td>0 1 2</td>
<td>15. Sudden changes in mood or feelings</td>
<td></td>
</tr>
<tr>
<td>0 1 2</td>
<td>16. Talks too much</td>
<td></td>
</tr>
<tr>
<td>0 1 2</td>
<td>17. Teases a lot</td>
<td></td>
</tr>
<tr>
<td>0 1 2</td>
<td>18. Temper tantrums or hot temper</td>
<td></td>
</tr>
<tr>
<td>0 1 2</td>
<td>19. Threatens people</td>
<td></td>
</tr>
<tr>
<td>0 1 2</td>
<td>20. Unusually loud</td>
<td></td>
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</table>
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