

The World Through Their Eyes:  
An Investigation into the Self-Concept  
of Abused and Neglected Children

A Thesis  
Submitted to the Faculty  
Of Saint Meinrad College of Liberal Arts  
In Partial Fulfillment of the Requirements  
For the Degree of Bachelor of Arts

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May, 1981  
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### Abstract

The purpose of this study was to determine if children who were adjudicated as being abused and/or neglected have a lower self-concept when compared to age matched control subjects. The experimental subjects [N = 16] resided at a group home located in a small city in north eastern Maryland. Ss were given the Self Social Symbols Tasks test and their scores were compared to control statistics provided by Street (1980) [N = 493]. A 2 x 3 (groups x variables) MANOVA was employed in order to test for overall discrimination between the groups. A significant difference ( $\alpha < .001$ ) was secured on two of the three variables. The self-esteem and social interest measures of the test indicated significant results ( $\alpha < .001$ ) while the self-centrality measure did not indicate a significant difference between the two groups. The study concluded that children from abusive and neglectful homes seem to have a significantly lower sense of self-esteem and social interest when compared with their peers.

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### Acknowledgements

The author would like to thank the following for their valuable contributions and assistance in the formulation of this research project: Thomas E. Holsworth, Ph.D., David C. Denz, Ph.D., Gary Shank, Ph.D., and Mr. Terry Chase for their constructive criticisms and insights; Robert C. Ziller, Ph.D., Sue Street, Ph.D., Ms. Carol Ann Mumma, Mr. G. M. Corrigan, Sr., Mr. Francis Corrigan, Ms. Mary Ellen Balbach, Ms. Hindey Singer, and Mr. Bret Bannon for their generous help and support. And finally, a special thanks to the staff and kids at the group home.

## CHAPTER I

### INTRODUCTION

It is the contention of the present study to establish that children taken from their parents, because of abuse and/or neglect, suffer from a poor self-concept when compared with their adolescent peers.

Recent estimates state that the number of child abuse cases in this country runs from 200,000 to 500,000 per year (Light, 1973). Nagi (1975) projects that the total number of child neglect cases in this country approximates 660,000. Three government studies (The federal survey, the Children's Defense Fund report, and the findings of the National Commission on Children in need of Parents) have projected that there are a total of 503,000 children in the foster care system. Of these, 109,000 live in institutions (housing 25 or more children) or in group homes with six or more children. (The Courier-Journal, March 2, 1980, p. G 18). A majority of these children have been placed there because of parental abuse or neglect. Sadly though, people seem alarmed and pragmatically concerned only in those cases of abuse and neglect where the child manifests the physical indices of such abuse. That is, people seem totally appalled at abuse when they witness a child whose battered body is bleeding or broken.

We are both repelled and fascinated by violence. We oppose it yet the mass media believe it provides the most compellingly interesting news (Kadushin,

1978, p. 22).

Physical child abuse is far more dramatic and much easier to identify than the emotional aspects of child abuse and neglect. But ironically, the broken bones and bruises of an abused child will heal. The emotional scars, however, may not. Much research and interest has been aimed at the physical aspects of child abuse. Far less has been done regarding the emotional aspects of child abuse. Obviously though, the emotional elements of abuse and neglect should be considered just as significant as the physical elements of abuse.

This research concentrates on the contrast between the self-concept of those children adjudicated abused and neglected with the self-concept of non-adjudicated children,, thus emphasizing the detrimental difference that distinguishes the two.

Through the review of the available literature this study will explore developmental aspects of self-concept (both positive and negative) and in particular it will concentrate on those three aspects of the self-concept (self-esteem, social interest, and self-centrality) which will ultimately be tested in this research project. The literature review will demonstrate why it is appropriate to study the abused and neglected child's self-concept in relation to significant others and more specifically it will cite those sources which have indicated that abuse and neglect propagate the development of a poor self-concept in a child.

### Definitions

Because this study involved working with abused and neglected children in the state of Maryland, the definitions of "child abuse" and "child neglect" are as documented by Title 07, Department of Human Resources, Chapter 07- Protective Services for Neglected and Abused Children; Authority: Article 27, sect. 35A; Article 88A, sections 3 and 13; Annotated Code of Maryland.

**Child Abuse:** By law an abused child is any person under the age of 18 years who has sustained physical injury as a result of cruel or inhumane treatment or as a result of a malicious act or acts, or any sexual abuse, meaning any act or acts involving sexual molestation or exploitation, whether physical injuries are sustained or not, by any parent, adoptive parent, or other person who has the permanent or temporary custody or care or responsibility of a minor child.

**Child Neglect:** Anyone under the age of 18 who is not receiving ordinary and proper care and attention, and whose parents, guardian, or custodian are unable or unwilling to give proper care and attention and supervision to the child and his problems.

**Self-Centrality:** Concerns the use of self as opposed to others as the key point of reference (Ziller, 1973, p. 64).

**Self-Concept:** The constellation of attitudes that a person has formed relating his body and his individuality to other persons, groups, objects, values, and activities in institutions (Sherif & Sherif, 1974, p. 459).

Self-Esteem: An individual's perception of his worth; the evaluative component of the self-concept (Ziller, 1973, p. 6). Note: Ziller states that up until the present time, the terms "self-concept" and "self-esteem" have been used interchangeably. Therefore, in the literature review of the present study, they will be used interchangeably on those occasions when the research being cited uses the terms "self-concept" and "self-esteem" equivalently.

Significant Others: Any person with whom the individual is in regular interaction; usually refers to parents, brothers, sisters, friends, and teachers (Travers, 1977, p. 228).

Social Interest: Involves inclusion of the self with others as opposed to being apart from others (Ziller, 1973, p. 30).

#### LITERATURE REVIEW

In assessing why it is appropriate to study the abused and neglected child's self-concept in relation to significant others, this study turns to the research that has been done by Ziller (1967, 1968, 1969, 1973). Ziller (1973) has found that self-esteem is "more concerned with social behavior and must be considered along with other self-other concepts such as social interest" (Ziller, 1973, p. 9). Self-esteem is considered to be one of the many facets in the overall personal-social system.

Self-esteem is a cognitive orientation



of the self in relation to significant others along an evaluative dimension chosen by the evaluator himself (Ziller, 1973, p. 9).

Ziller (1973) has also noted that previous research concerning self-esteem has not sufficiently emphasized the social nature of the self-system.

Travers (1977) has maintained that if children are not provided with kind and loving significant others who establish and maintain a warm relationship with them, they will suffer a need that will influence them throughout their life. Sullivan (1972) placed great emphasis on significant others and their effect on the developing self-concept. He felt that it is the significant others in our environment who are chiefly responsible for our feelings of anxiety. Williams & Williams (1970) similarly posited that a child's self-esteem develops through his primary prototype relationships (significant others).

Coopersmith (1967) contends that high self-esteem is the most crucial element of mental health. "It comes from the quality of the relationships that exist between the child and those who play a significant role in his life" (Briggs, 1970, p. 5). Coopersmith also contends that high self-esteem results when the child is successfully inducted into the social system supported by the parents. Staats (1971) has stated that the self-esteem of a child is greatly dependent upon his past behavior and the response that was given to the behavior. Coopersmith (1958) likewise hypothesizes that:

Persons whose (self-esteem) experiences have been preponderantly successful should generally tend to express confidence and assurance in both their behavior and perceptions, while those who have had more failure experiences should generally tend to express either caution and hesitancy, or attention-seeking and aggression in both their behaviors and perceptions (Coopersmith, 1958, p. 98).

Coopersmith (1958) constructed a Self-Esteem Inventory (SEI) from items selected from the Rogers & Dymond (1954) scale. The inventory consisted in 50 items. High self-esteem scores were discerned by totaling the number of items checked in the "Like-me" column while low self-esteem was scored by totaling the number of items checked in the "Unlike-me" column. Test-retest reliability after a five week interval was .88; also, Kokenes (1974) found empirical support for the sources of self-esteem in the SEI in a study of construct validity that he did using factor analysis. The SEI was administered by Coopersmith to fifth and sixth grade students [ $N = 102$ ], aged 10 to 12 years, attending public schools in a small eastern city. Iowa Achievement Test scores were obtained on each child from school records and used as indices of success experiences. Results obtained indicate significant correlations between self-esteem and achievement ( $r = .36$ ,  $p < .01$ ). This significance relates success experiences to both indices of self-esteem (i.e., both high and low), thus supporting his hypothesis on empirical grounds.

Maslow (1954) asserts that children who satisfy their

self-esteem needs develop a sense of self-confidence and adequacy. According to his hierarchical structure of human needs, lower needs (physiological needs, safety needs, etc.) must be satisfied before higher needs can be realized. Thus, when self-esteem needs are satisfied the individual develops a sense of self-confidence and adequacy.

Many children suffering from low self-esteem see their shortcomings as proof for personal inadequacy. These children view themselves as incompetent. Because they often are raised to expect perfection of themselves, anything that falls short of that perfection is personally regarded as failure. "Low self-esteem is tied to impossible demands on the self" (Briggs, 1970, p. 39). Staats (1971) believes that an individual's self-concept will also determine his actions. For example, a child who does not consider himself exceptionally capable or bright will often exhibit behaviors consistent with his poor self-image regardless of his true capabilities and intellect.

In a study done by Bingham (1980), the relationship between self-perception (self-esteem) and school performance was measured. Subjects were 120 males divided into two levels of development: preadolescent and adolescent. Half of the subjects had specific learning disabilities while the other half was a randomly selected control group. Coopersmith's Self-Esteem Inventory was administered and the data analyzed by comparing means by the use of the t statistic ( $\alpha = .05$ ). While there was no significant difference found in the adolescent

groups; Bingham claimed this difference is "...masked by the complex context of the adolescent milieu", a significant difference was found in the preadolescent groups ( $t = 2.90$ ,  $df = 58$ ,  $p = .05$ ). This significance indicates a positive relationship between self-esteem and achievement. This supports the results of the Coleman Report (1966) which upset much of the educational community when it showed that differences in pupil achievement could be attributed to self-concept.

Although relatively little research has been done specifically investigating the self-esteem of the abused and neglected child, there exists enough data to support the present investigation of this topic. Martin & Beezley (1976), in their study of personality in abused children [ $N = 50$ ], found that more than half had a low self-esteem. This finding was reaffirmed in a follow up study conducted by Martin & Beezley (1977).

Green (1978) has done an in-depth exploration of the psychopathology and psychodynamics of abused children. Spanning a three year period, Green worked with 20 abused children in outpatient individual psychotherapy. The children were aged 5 to 14 and most were seen twice weekly for at least one year. During the course of psychotherapy, the children were administered individual psychological test batteries which included the Wechsler Intelligence Scale for Children, Rorschach, Bender-Gestalt, Human Figure Drawings, Children's Apperception Test, and the Rosenzweig Picture Frustration Test. (Matched controls were also included for empirical correlation). Clinical find-

ings of the abused children indicate deviant psychological and constitutional endowment and a "rather typical pattern of depressive affect with low self-esteem, which was often accompanied by self-destructive behavior" (Green, 1978, p. 93). The self-destructive behavior was regarded as a transformation of low self-esteem into action. This self-destructive behavior was found to be significantly manifested ( $\alpha = .01$ ) in over 40% of the abused population when compared with the normal controls.

In a similar study done by Sandgrund, Gaines, and Green (1974), 60 abused, 30 neglected, and 30 non-abused control children were seen by the same psychiatrist and psychologist for interviewing and testing. The test battery administered was the same as that listed in the above study done by Green (1978). The concentration of this study was to measure the relation between child abuse and mental retardation. Significant results ( $\alpha < .05$ ) were secured indicating that cognitive impairment is closely related to abuse and neglect. The abused and neglected children exhibited poor self-image, self-destructive activity, and severe ego deficits when compared with the personality characteristics of the normal controls.

Thus, despite the fact that there are few investigations of this type, most research encompassing the emotional aspects of abuse and neglect have generally found personality characteristics of the following sort: impaired emotional development (Morse, Sahler, & Friedman, 1970); poor self-image and disturbed interpersonal relationships (Fitti & Gitt, 1975); low

self-esteem and impaired self-concept (Martin & Beezley, 1976, 1977); self-destructive activity, ego deficits and low self-esteem (Green, 1978; Sandgrund, Gaines, & Green, 1974).

Research conducted by Pollock & Steele (1972) indicated that the development of a positive self-esteem in a child is dependent upon loving and giving parents who have developed their own positive sense of self-esteem. Typically, however, this is not the case in the family life situation of abused and neglected children. Burgess (1978) posited that, on the whole, abusive and neglectful families have less interaction, less positive interaction, and much more negative interaction. Also, it has been shown that abusive parents have no basic, firm cushion of self-esteem which is necessary to carry them through periods of stress. Therefore, they teach their children the same inferior qualities that they themselves have. Abusive parents often place little value in themselves and in turn they teach the child to place little value in himself. This becomes the subsequent attitudinal structure that is passed on from generation to generation (Kempe & Helfer, 1972). In a study designed to characterize low parenting skills, Helfer, Schneider, and Hoffmeister (1976) found that the "single best predictive cluster" for abuse had to do with problems of the mother's self-esteem. Coopersmith (1967) supports this conclusion. Using his Self-Esteem Inventory, Coopersmith measured the self-esteem of 83 mothers. Children of these women [N = 83] were then given the SEI to measure their self-esteem. Of those mothers who

were classified as being below average in self-esteem, 63.3% of their children were also found to have low self-esteem ( $\alpha < .01$ ).

In a work done by Shorkey, (1980), abusing mothers [ $N = 14$ ] were matched with an equal number of control mothers on race, educational level, income, and marital status. The two groups were administered the Sense of Personal Worth Scale of the California Test of Personality. This 15 item test is designed to measure a person's feelings of capability and attractiveness based on the individual's perception of how other people rate them. In this study, the control mothers scored higher in the test indicating more positive feelings of personal worth. The difference between the means was assessed for the two groups by the  $t$  test and significance was found at  $\alpha < .05$ .

Ziller (1973) has noted that self-esteem, social interest, and self-centrality are all integral for a more complete understanding of the self-concept. His concern with social interest is secondary only to his emphasis on self-esteem and he considers this factor crucial in dealing with a self-other orientation. In relation to self-other orientation

social interest is assumed to involve inclusion of the self with others as opposed to being apart from others. To desire inclusion involves a willingness to be subject to the forces generated among others and the self. (Ziller, 1973, p. 30).

The notion of social interest constitutes a basic framework

from which evolves several other self-other concepts such as social trust, need-affiliation, extraversion-intraversion, and social desirability.

An Adlerian term, social interest centers around behaviors such as cooperation, other directedness, group identification, and empathy. Developmentally, Adler (1928) considers this factor very significant. Neglected children face life with a feeling of insecurity and inadequacy -- a feeling that is characteristic of all failures. The solution to this problem is dependent upon how well the individual is prepared to interact with other people. As Adler has noted

The greater the trained social interest acquired in childhood, i.e., the degree of readiness for cooperation, for joining in love, and for fellowship, the higher and more valuable the accomplishments to be expected from the mood of the inferiority feeling (Ansbacher & Ansbacher, 1964, p. 54).

Fromm (1955) has also posited that the development of an individual's self-esteem is dependent upon consistent ways of apprehending the social environment (social interest).

According to Ziller (1973), the third major aspect of self-concept (in a self-other orientation) is that of self-centrality. This feature, like self-esteem and social interest, has a dependent relationship with significant others and cannot be understood outside of that context. Self-centrality concentrates on how the individual sees oneself. The high self-cen-



trality individual sees himself or herself as the central figure in his or her social environment while the low self-centrality individual sees himself or herself secondarily in his or her social environment. Low self-centrality and high self-centrality have been related to Ausubel's (1952) concepts of sociocentrism and egocentrism. Considered a correlary to low self-esteem and low social interest, the high self-centrality individual often feels himself withdrawn from his social environment and isolated in his own private world.

Ziller considers the interaction among low self-esteem, low social interest, and high self-centrality to be of a cyclical and degenerative nature. In time, a person endowed with these characteristics becomes fully alienated. This alienation may possibly be characterized by the "flat affect" which Rohner (1975) has posited as an effect of child abuse. From a causal viewpoint, Newberger & Bourne (1978) have indicated that isolation may be a social antecedent for abusers. Starr (1979) similarly hypothesizes that abusive families he studied [N = 87] indicated differences in social isolation when compared to control families [N = 87].

Salient characteristics of the literature review established that a child's self-concept is adversely affected by abuse and/or neglect, yielding the following conclusions:

1. The child's self-concept needs to be examined in relation to significant others (Briggs, 1970; Staats, 1971; Sulivan, 1967; Travers, 1977; Williams &

Williams, 1970; Ziller, 1967, 1968, 1973).

2. The self-esteem of parents (as significant others) has a direct relation to the self-esteem of the child (Coopersmith, 1967; Kempe & Helfer, 1972; Pollock & Steele, 1972; Schneider, Hoffmeister, & Helfer, 1976; Shorkey, 1980).
3. High self-esteem is considered one of the most crucial elements of mental health (Briggs, 1970; Coopersmith, 1967; Maslow, 1954; Pollock & Steele, 1972; Ziller, 1973).
4. Low self-esteem (including personality traits such as poor self-image, ego deficits, and self-destructive activity) seems characteristic of abused and neglected children (Fitti & Gitt, 1975; Green, 1976, 1978; Martin & Beezley, 1976, 1977; Morse, Sahler, & Friedman, 1970; Sandgrund, Gaines, & Green, 1974; Warner, 1977).
5. Social interest has a dependent relationship with significant others and has a direct effect upon the individual's self-concept (Adler, 1928; Fromm, 1955; Ziller, 1969, 1973).
6. Self-centrality also has a dependent relationship with significant others and likewise has a direct effect upon the individual's self-concept (Ausubel, 1952; Newberger & Bourne, 1978; Rohner, 1975; Starr, 1979; Ziller, 1969, 1973).

Whereas it is the intention of this research to compare the abused and neglected child's self-concept with the self-concept of the non-abused and non-neglected child, there are three specific aspects of the research which list as testable hypotheses. They include:

1. The self-esteem of the abused and neglected child is significantly lower than the self-esteem of the non-adjudicated child.

2. The social interest of the abused and neglected child is significantly lower than the social interest of the non-adjudicated child.

3. The self-centrality of the abused and neglected child is significantly higher than the self-centrality of the non-adjudicated child.

## CHAPTER II

Hypotheses

The intent of this research project is to investigate three aspects of the self-concept of abused and neglected children, the results of which shall be compared to self-concept scores of 'normal' children. The experimental design for this study is a static-group comparison. Three hypotheses have been listed according to the three scales investigated in this paper. The following hypotheses are proposed for investigation.

$$(1) \quad H_0: \mu_1 \geq \mu_a$$

$$H_1: \mu_1 < \mu_a$$

$$(2) \quad H_0: \mu_2 \geq \mu_b$$

$$H_1: \mu_2 < \mu_b$$

$$(3) \quad H_0: \mu_3 \leq \mu_c$$

$$H_1: \mu_3 > \mu_c$$

where:

Research data

Street data

Description

$\mu_1$

$\mu_a$

=

Group mean-self-esteem

$\mu_2$

$\mu_b$

=

Group mean-social interest

$\mu_3$

$\mu_c$

=

Group mean-self-centrality

### Subjects

The subjects [N = 16] were children who, because of abuse and/or neglect, had been placed at a group home in a small city in north eastern Maryland during the months June, 1980 to August, 1980, inclusive. The name of the group home has been deleted from the present study so as to insure anonymity for the Ss. (For a brief summary of the group home program, see Appendix A). The subjects demonstrated the following demographic characteristics: 11 were caucasian, 4 were black, and 1 was mulatto. Eleven were girls and 5 were boys. None of the subjects came from intact families. Five of the children had one parent who was deceased, 2 of the children (and likewise, the social agencies representative of these children) had no knowledge of the whereabouts and/or existence of at least one of their parents, and the rest came from families whose parents were either divorced or separated. The children ranged in age from 12 to 17 ( $\bar{X} = 15.1$ ). Ten of the subjects were Protestant, 2 were Roman Catholic, and the remaining 4 had no religious affiliation.

### Instrumentation

Ziller's (1970) Self Social Symbols Tasks test was used. This test measures 10 components of the self-concept in relation to significant others. Those components include self-esteem, social interest, self-centrality, marginality, complexity, majority identification, identification, inclusion, openness, and power. The test is 70 pages long but is easy to administer

and requires only a low level of verbal skill and fluency to complete.

Most instruments dealing with self-concept have been largely based on verbal self-reports. But these instruments too often allow for defense mechanisms and self-deception in the reporting. Thus, the researcher often compiles a distorted view of the self. The SSST has been designed to eliminate such distortions. The test utilizes a phenomenological approach to personality measurement, thereby reducing the number of alternatives and avoiding verbal responses. This type of measurement is still in its embryonic stages and has been challenged (most notably by Wylie, 1974) regarding the convergent and discriminate construct validity of each type of score. However, the test (and in particular, individual and combined scales of the test) have become more and more widely used. Recent work done by Mann (1980) [N = 2,009] utilizing the self-esteem scale has indicated that "research reports of the operation of the measurement demonstrate impressive predictive validity and evidence for construct validity" (Mann, 1980, p. 253).

Ziller (1973) has assessed reliability and validity for each of the scales. They are as follows.

Self-esteem -- Reliability: Split half,  
corrected for length: .89.

Validity:

1. Sociometric stars indicated higher self-esteem than sociometric isolates (Ziller, Alexander, & Long, 1964).
2. Political candidates who won in an election for state legislature rose in self-esteem in contrast to those who

lost the election (Ziller, Goldberg, & Cunningham, 1968).

3. A positive relationship was found between self-esteem and frequency and consistency of verbal participation in group therapy (Mossman & Ziller, 1968).

4. A positive relationship was found between self-esteem and socio-economic status (Ziller, Hagey, Smith, & Long, in press).

5. Higher self-esteem was expressed by normals as opposed to neuropsychiatric patients (Ziller, & Grossman, 1966), as well as by normals as opposed to behavior problem children (Long, Ziller, & Barker, 1968).

6. Adolescents with a physical handicap (Turner's syndrome) show lower self-esteem than a control group (Golding & Ziller, 1968).

Social interest -- Reliability: Split-half reliability corrected for length: .90.

Validity:

1. Elementary school children locating the self within as opposed to without the societal triangle preferred more group versus individual activities (Long, Ziller, & Henderson, 1966).

2. Institutionalized behavior problem children showed less social interest than a control group (Ziller, 1969).

3. Children in an Israeli Kibbutz as opposed to children in an Israeli religious school show more social interest (Ziller & Goldschmidt, 1968).

4. Children with lower socio-economic status show lower social interest (Long & Kramer, 1966; Ziller, 1968).

5. Asian Indian adolescents (members of relatively closed and cohesive extended families) in comparison with a sample of American adolescents showed higher social interest (Ziller, Long, Ramana, & Reddy, 1967).

Self-centrality -- Reliability: Split-half reliability corrected for length: .66.

Validity:

1. Sociometric isolates in comparison with sociometric stars placed the self in a central position more frequently (Ziller, Alexander, & Long, 1964).
2. Children who moved frequently between communities placed the self in a central position more frequently than those who had remained in the same community throughout their life (Ziller, & Long, 1964).
3. Asian Indian adolescents in comparison with a sample of American adolescents were more self centered (Ziller, Long, Ramana, & Reddy, 1968).
4. Male neuropsychiatric patients in comparison with normals show higher self-centrality (Ziller & Grossman, 1967).
5. Institutionalized behavior problem children showed higher self-centrality than a control group (Ziller, 1968).
6. Children with lower socio-economic status show higher self-centrality (Ziller, 1969).

Examples for the different scales of the SSST can be found in Appendix D.

#### Procedure

The SSST, along with a brief explanation of the study and the measurement, was administered to the voluntary participants at the group home. Subjects were left alone in a private room while completing the test. However, the examiner remained close at hand in order to explain any sections that were confusing to the subjects.

Ethical dilemmas in research with human participants abound. This has been found to be especially true in any research involving the participation of children. From an ethical viewpoint, the A.P.A. has stated that an "ideal" research util-



izes subjects whose participation is "voluntary and informed". An asset to the present study is the fact that all participants were willing subjects who freely gave their consent to be tested. All participants were guaranteed anonymity and signed (and witnessed) consent forms were filed on each child after their having been fully informed of the nature of the testing and their rights as regards their involvement in the research (see Appendix B). The A.P.A. further states that the ultimate ethical and professional responsibility in the conducting of research with human participants lies with the investigator. To discern the sensitive and non-exploitive nature of the present study, a detailed prospectus of the intended study was reviewed by the acting administrator of the group home. Written approval to conduct the present research was given (see Appendix C).

#### Statistical Analysis

A 2 x 3 (groups x variables) Multivariate Analysis of Variance was employed in order to establish overall discrimination between the groups and thus to ascertain which of the hypotheses were to be accepted and at what level of significance. Age-matched control statistics used in comparison with the present study's results were provided by Street (1980). Street's data has been compiled from work she did which involved administering the SSST to students grades 9 through 12 [N = 493].

## CHAPTER III

Results

Table 1 comprises data summaries of a 2 x 3 (2 groups x 3 variables) Multivariate Analysis of Variance (MANOVA).

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Insert Table 1 about here

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The test for equality of dispersion indicated a lack of homoskedasticity between the two groups,  $F \frac{15}{492} = 722.227$ ,  $p < .001$ . The test for overall discrimination between the two groups  $F \frac{3}{504} = 653.334$ ,  $p < .001$ , indicated that the two groups were significantly different. In the MANOVA test there was evidence to account for the overall discrimination between the two groups, thus yielding sufficient criteria for re-examining each of the items individually to determine which items accounted for significant variation in the data.

In examining the univariate ratios, two variables exhibited univariate significance at  $p < .001$ . The self-esteem item obtained a univariate  $F \frac{1}{507} = 73.3087$ ,  $p < .001$ , thus indicating that the experimental group unilaterally maintained a lower degree of self-esteem than did the control population. The social interest item obtained a univariate  $F \frac{1}{507} = 41.3095$ ,  $p < .001$ , thus indicating that the experimental group unilaterally maintained a lower degree of social interest than did the control population.

The only variable not demonstrating significance to at least the  $p < .05$  level was the self-centrality item, which obtained a univariate  $F \frac{1}{507} = 1.0602$ .

### Discussion

The present study was undertaken in an attempt to discern the difference between the self-concept of abused and neglected children and the self-concept of non-adjudicated children. The MANOVA results of the data support two of the three predicted hypotheses indicating that children from abusive and neglectful homes seem to have a significantly lower sense of self-esteem and social interest when compared to their peers.

The significant difference between the experimental and control groups self-esteem scores supports Martin & Beezley's (1976, 1977) contention that low self-esteem is a trait that seems prominent in the personality matrix of abused children. The present study's results are also related to Green's (1974, 1978) findings which showed that abused children exhibit a poor self-concept as the "end result of chronic physical and emotional scarring, humiliation, and scapegoating" (Green, 1978, p. 99).

The significance of the experimental group's social interest scores relates to Ziller's (1973) contention concerning the relation between self-esteem and social interest. Ziller has noted that self-esteem and social interest "provide the foci from which the life space of the individual is defined" (Ziller, 1973, p. 32). A person with low self-esteem is unable to support himself (psychologically, and often physically) in times of

conflict. Likewise, an individual with low social interest is unable to draw from social support in times of conflict. Low social interest in its most progressed state (social isolation) has been clearly shown to be a major correlate of child abuse. Thus, the relation between low self-esteem and low social interest in abused and neglected children supports the established contention that children of abuse and neglect become parents who abuse and neglect their children (Gelles & Strauss, 1979; Kempe & Helfer, 1972).

A striking feature of the self-esteem and social interest results was the degree of their significance. Whereas the small sample size limits the generalizability of these results, their significance should bear impressive support for the antecedent theoretical discussion.

The results of the experimental group's self-centrality scores fell within the range of the control statistics indicating no significant difference between the two groups on this variable. Although this contradicts the predicted hypothesis, there are several possible explanations for its occurrence. Carrigan (1960) has noted that the evidence concerning the correlates of the self-centrality construct are unclear. Ziller (1973) has also noted that "inner as opposed to outer orientation of the self (self-centrality) has been a perennially controversial personality construct" (Ziller, 1973, p. 64). Given that a) the sample size was very small, b) determination of the variable itself is far from clear, and c) the behavior of a-

bused children more greatly fluctuates under "examining room" circumstances (Martin & Beezley, 1976), the present study suggests the need for further research utilizing the self-centrality scale with abused and neglected children, or at least further research so as to assess clarity of the construct itself.

A delimitation of the present study has been noted in that all of the experimental Ss came from broken homes. Granted, many authors have indicated various psychological and emotional anomalies exhibited by children of divorced parents. But the break-up of the nuclear family does not necessitate the development of a poor self-concept in a child. As it pertains to the present study, the relation between abuse and neglect versus environmental influences such as divorce is unclear.

### Conclusion

Given the small sample size and the delimitation previously mentioned, the generalizations that can be made from the present study are limited. However, two generalizations remain and are indicated as subjects for further research. First, as has been noted in the literature review, too little emphasis has been placed on the emotional and psychological aspects of child abuse and neglect. Hopefully, the significance of results obtained in the present study articulates the need for future work in this area. Second, the validity of the SSST was evidenced also by the significance of results. If these results are indicative of the severity and extent of deviance prevalent, particularly in the self-esteem and social interest of

abused and neglected children, then perhaps the SSST in its phenomenological approach is a more accurate self-concept measurement. This implication directs serious attention to the advantage of using the SSST more frequently in self-concept measurement. Wylie (1974) has noted that the potential contributions of this phenomenological approach warrants its being explored and more fully developed both as a collective measurement and through individual scale use. The degree of significance achieved in the self-esteem and social interest scales in the present study also support Mann's (1980) findings adding weight to the evidence for consistency and validity of the test as it is used in research application. Also, the fact that the test requires only a low level of verbal skill and fluency to complete indicates its advantage in work with abused and neglected children in that these children have typically been associated with "intellectual and cognitive deficits and a high incidence of delayed development and CNS dysfunction" (Green, 1978, p. 95).

The detrimental effects of child abuse and neglect are not only evidenced by their physical indices. The emotional and psychological scars are just as real also. But in order to treat and ultimately heal those scars we need an accurate understanding of their severity and destructiveness. What is called for is much more research in this area of abuse and neglect. Only then, can we as helpers in the human service profession adequately prepare ourselves to deal with the problem of abuse

and neglect in a holistic sense. Only then too, can the condition of the abused and neglected child be bettered to the point where they can face the world with a degree of self-esteem and social concern necessary for healthy and productive lives.

## References

- Ansbacher, H. L., & Ansbacher, R. R. Superiority and Social Interest. Northwestern University Press, 1964.
- Beckelman, L. Why the cry of the beaten child goes unheard. In: Garland, R. (ed.). Readings in child abuse. Connecticut: Special Learning Corp., 1980.
- Bingham, G. Self-esteem among boys with and without specific learning disabilities. Child Study Journal, 1980, 10, 41-47.
- Briggs, D. C. Your child's self-esteem, the key to his life. New York: Doubleday & Co. Inc., 1970.
- Burchinal, L. G. Characteristics of adolescents from unbroken, broken and reconstituted families. Journal of Marriage and the Family, 1964, 26, 44-51.
- Burgess, R. L. Social interaction patterns relating to child abuse and neglect. National Center on Child Abuse and Neglect (DHEW), Washington, D.C., 1978.
- Bybee, R. W. Toward further understanding and reducing violence against youth in families. Journal of Social Issues, 1979, 35, 161-173.
- . Violence toward youth: A new perspective. Journal of Social Issues, 1979, 35, 1-14.
- Carrigan, P. M. Extraversion-intraversion as a dimension of personality: A reappraisal. Psychological Bulletin, 1960, 57, 329-360.
- Campbell, D. T., & Stanley, J. C. Experimental and quasi-experimental designs for research. Chicago: Rand McNally College Publishing Company, 1963.
- Coopersmith, S. A method for determining types of self esteem. Journal of Abnormal Social Psychology, 1959, 59, 87-94.
- . The antecedents of self-esteem. San Francisco: W. H. Freeman & Co., 1967.
- Crowne, D. P., & Stephens, M. W. Self-acceptance and self-evaluative behavior: A critique of methodology. Psychological Bulletin, 1961, 58, 104-121.



- Fitti, R. M., & Gitt, A. Behavior profile of abused children. Child Guidance and Mental Health Clinic of Delaware County, April 1975.
- Fontana, V. J., & Robison, E. A multidisciplinary approach to the treatment of child abuse. Pediatrics, 1976, 57, 760-764.
- Fromm, E. The Sane Society. New York: Holt, Rinehart & Winston, 1955.
- Gelles, R. J., & Straus, M. A. Violence in the american family. Journal of Social Issues, 1979, 35, 15-39.
- Goldstein, J., Freud, A., & Solnit, A. J. Beyond the best interests of the child. New York: The Free Press, 1973.
- Goode, W. J. After divorce. Glencoe, Ill.: Free Press, 1956.
- Green, A. H. Psychopathology of abused children. American Academy of Child Psychiatry, 1978, 92-103.
- Hergehahn, B. R. Shaping your child's personality. Englewood Cliffs, N.J.: Prentice-Hall Inc., 1972.
- Johnson, O. G., & Bommarito, J. W. Tests and measurements in child development: A handbook. San Francisco: Jossey-Bass Inc., 1971.
- Kadushin, A. Neglect--is it neglected too often? In: Garland, R. (Ed.). Readings in child abuse. Connecticut: Special Learning Corp., 1980.
- Kempe, C. H., & Helfer, R. E. (Eds.). Helping the battered child and his family. Philadelphia: Lippincott Co., 1972.
- Kinard, E. M. The psychological consequences of abuse for the child. Journal of Social Issues, 1979, 35, 82-100.
- Light, R. J. Abused and neglected children in america: A study of alternative policies. Harvard Educational Review, 1973, 43, 556-598.
- Mann, D. W. Methodological, developmental, and sex biases in the social self-esteem test? Modest, no, and no. Journal of Personality Assessment, 1980, 44, 253-257.
- Martin, H. P., & Beezley, P. Personality of abused children. In: Martin, H. P. (Ed.). The abused child: A multidisciplinary approach to developmental issues and treatment. Cambridge, Mass.: Ballinger Publishing Co., 105-111, 1976.

- Maslow, A. H. Motivation and personality. New York: Harper & Row, 1954.
- Morse, C. W., Sahler, O. J. Z., & Friedman, S. B. A three-year follow-up study of abused and neglected children. American Journal of Diseases of Children, 1970, 120, 439-446.
- Mossman, B. M., & Ziller, R. C. Self-esteem and consistency of social behavior. Journal of Abnormal Psychology, 1968, 73, 363-367.
- Myers, J. L. Fundamentals of experimental design. Boston: Allyn and Bacon, Inc., 1979.
- Nagi, S. Z. Child maltreatment in the united states, a challenge to social institutions. New York: Columbia University Press, 1977.
- Newberger, E. H., & Bourne, R. The medicalization and legalization of child abuse. American Journal of Orthopsychiatry, 1978, 48, 593-607.
- Nye, F. I. The one parent child and his oedipal development. Psychoanalytic Study of the Child, 1957, 19, 356-361.
- Perkins, H. V. Factors influencing change in children's self-concepts. Child Development, 1958, 29, 221-230.
- Piers, E. V., & Harris, D. B. Age and other correlates of self-concept in children. In: Murray, J. B. (Ed.). Readings in developmental psychology. New York: St. John's University Press, 1965.
- Rogers, C. R. Client-centered therapy. Boston: Houghton Mifflin, 1951.
- Rohner, R. P. Parental acceptance-rejection and personality development: A universal approach to behavioral science. In: Brislin, R. W., Bochner, S., & Lonner, W. J. (Eds.). Cross-cultural perspectives on learning. Beverly Hills: Sage Publications, Inc., 1975.
- Sandgrund, A., Gaines, R. W., & Green, A. H. Child abuse and mental retardation: A problem of cause and effect. American Journal of Mental Deficiency, 1974, 79, 327-330.
- Schmidt, M. J. Understanding and using statistics, basic concepts. Lexington: D. C. Heath and Co., 1979.
- Schneider, C., Hoffmeister, J. K., & Helfer, R. E. A predictive screening questionnaire for potential problems in mother-child interaction. In: Helfer, R. C., & Kempe, C. H. (Eds).

Child abuse and neglect. The family and the community.  
Cambridge, Mass.: Ballinger Publishing Co., 393-407, 1976.

Sherif, M., & Sherif, C. W. Adolescent attitudes and behavior in their reference groups within differing sociocultural settings. In: Kraemer, H. V. (Ed.). Youth and culture: A human-development approach. Monterey: Brooks/Cole Co., 1974, 455-486.

Shorkey, C. T. Sense of personal worth, self-esteem, and anomia of child-abusing mothers and controls. Journal of Clinical Psychology, 1980, 36, 817-820.

Smith, S. M. (Ed.). The maltreatment of children. Baltimore: University Park Press, 1978.

Sorosky, A. D. The psychological effects of divorce on adolescents. Adolescence, 1977, 12, 123-136.

Staats, A. Intelligence and personality: Principles of a behavioral interaction approach. New York: Harper & Row, 1971.

Starr, R. H. Child abuse. American Psychologist, 1979, 34, 872-878.

Street, S. Social self concept in high school students. Unpublished Doctoral dissertation, University of Florida, 1980.

Sullivan, H. S. Personal psychotherapy. New York: W. W. Norton & Co., Inc., 1972.

Travers, J. F. The growing child, introduction to child development. New York: John Wiley & Sons, Inc., 1977.

Warner, S. L. Understanding the effects of child abuse. Radio-logic Technology, 1977, 49, 29-38.

Williams, N., & Williams, S. The moral development of children. London: Macmillan, 1970.

Wylie, R. C. The self-concept. Lincoln: University of Nebraska Press, 1974.

Ziller, R. C. The alienation syndrome: A triadic pattern of self-other orientation. Sociometry, 1969, 32, 287-300.

-----, The social self. New York: Pergamon Press Inc., 1973.

-----, Henderson, E. H., & Long, B. H. Developmental

changes in the self-concept during adolescence. The School Review, 1968, 76, 210-230.

-----, Henderson, E. H., & Long, B. H. Developmental changes in the self-concept during middle childhood. Merrill-Palmer Quarterly, 1967, 13, 201-216.

-----, The self social symbols task. Atlanta: Educational Testing Service, 1973.

-----, & Long, B. H., Ramana, K. V., & Reddy, V. E. Self-other orientation of indian and american adolescents. Journal of Personality, 1968, 36, 315-330.

Table 1

## MANOVA Results

## Univariate Ratios (Variables 1 through 3)

Variable	Group Means		Pooled Dev. Est.	$F \frac{1}{507}$	$\eta^2$	p
	Experimental Group [N = 16]	Control Group [N = 493]				
Self-esteem	12.125	25.22	6.02058	73.3087	.1265	<.001
Social interest	3.4375	1.03	1.47451	41.3095	.0754	<.001
Self-centrality	2.9375	2.57	1.06202	1.0620	2.0944	N.S.

Note

$$F (1, \infty, .05) = 7.88$$

$$F (1, \infty, .025) = 5.02$$

$$F (1, \infty, .01) = 6.64$$

$$F (1, \infty, .001) = 10.83$$

## Appendix A

### Group Home Information

The group home is a non-profit agency under the auspices of the Board of the (local) county Department of Social Services established for the purpose of serving neglected, and abused children who must be placed emergently.

The short term home is centrally located in the downtown section of a small city in north eastern Maryland. It operates 24 hours a day, seven days a week, year round. The Home accommodates 12 children, boys and girls, between the ages of 4 and 18 primarily. No child is excluded because of sex, race, color, creed, or national origin. Admittance is limited to County children except in inter-county placements as defined by foster care policy and emergency care of stranded children.

The Home serves a two-fold purpose: 1) provides shelter care for a child needing it, and 2) provides a diagnostic evaluation for a child needing such service.

The maximum time a child may remain in the Home is 90 days.

The in-house staff consists of an Administrator, a Social Worker, four Child Care Workers, an Office Assistant, and a Cook. The diagnostic team is composed of the administrator, the social worker, a psychologist, an educational diagnostician, and a nurse practitioner.

## Appendix B



Consent Form

I, \_\_\_\_\_, agree to complete the Self Social Symbols Tasks test as administered by Greg Corrigan. I give Greg Corrigan permission to use the results he obtains from this test in the research he is doing. I freely accept to complete this test and I understand that my personal identity will remain anonymous throughout Mr. Corrigan's research.

\_\_\_\_\_  
Signature (child)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (Corrigan)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (witness)

\_\_\_\_\_  
Date

Appendix C

June 19, 1980

Dear Mr. Corrigan:

I have reviewed your prospectus regarding the research you wish to conduct at this agency and more specifically with the children residing here from June 1980 to August 1980.

Your request to complete this research is approved under the condition that each child freely consents to participate and a signed consent form is filed in each participants record.

Sincerely,

  
Carol A. Minna

Acting Director

GAM/pjh

## Appendix D

## Social Orientation Tasks

The questions which follow are designed to provide an indication of the way you look at yourself and significant other people. In this description of yourself and others, words are avoided. This is a social psychological instrument designed for research purposes only. Hopefully, it will tell us something about differences among people in their perceptions of self and others.

This instrument has been approved by the Department of Health, Education and Welfare, Office of Education.

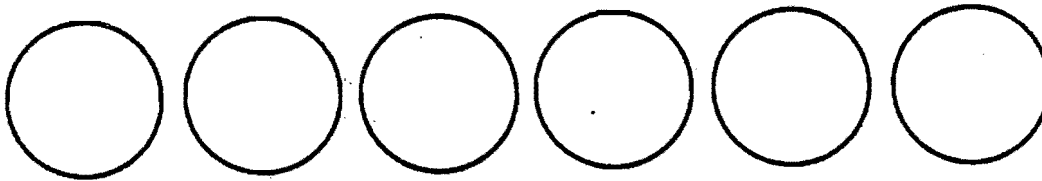
Please work as quickly as possible. It should require little more than forty minutes.

## Self-esteem scale

The circles below stand for people. Mark each circle with the letter standing for one of the people in the list. Do this in any way you like, but use each person only once and do not omit anyone.

F - Father  
B - your best friend  
D - Doctor

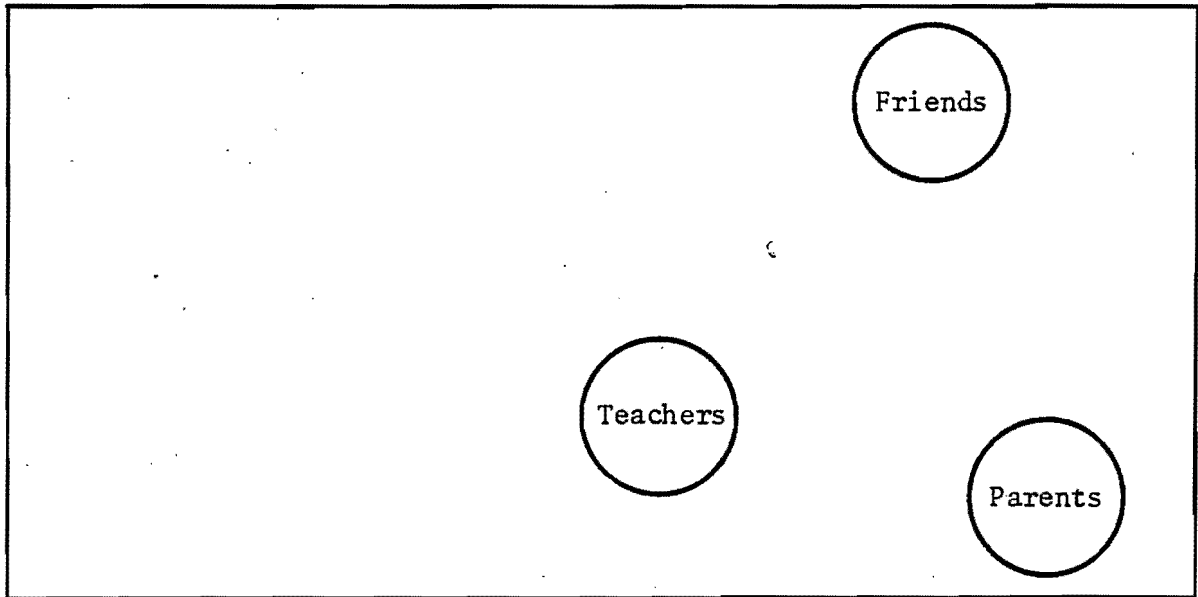
Y - Yourself  
K - a kind person  
M - someone who makes mistakes



## Social interest scale

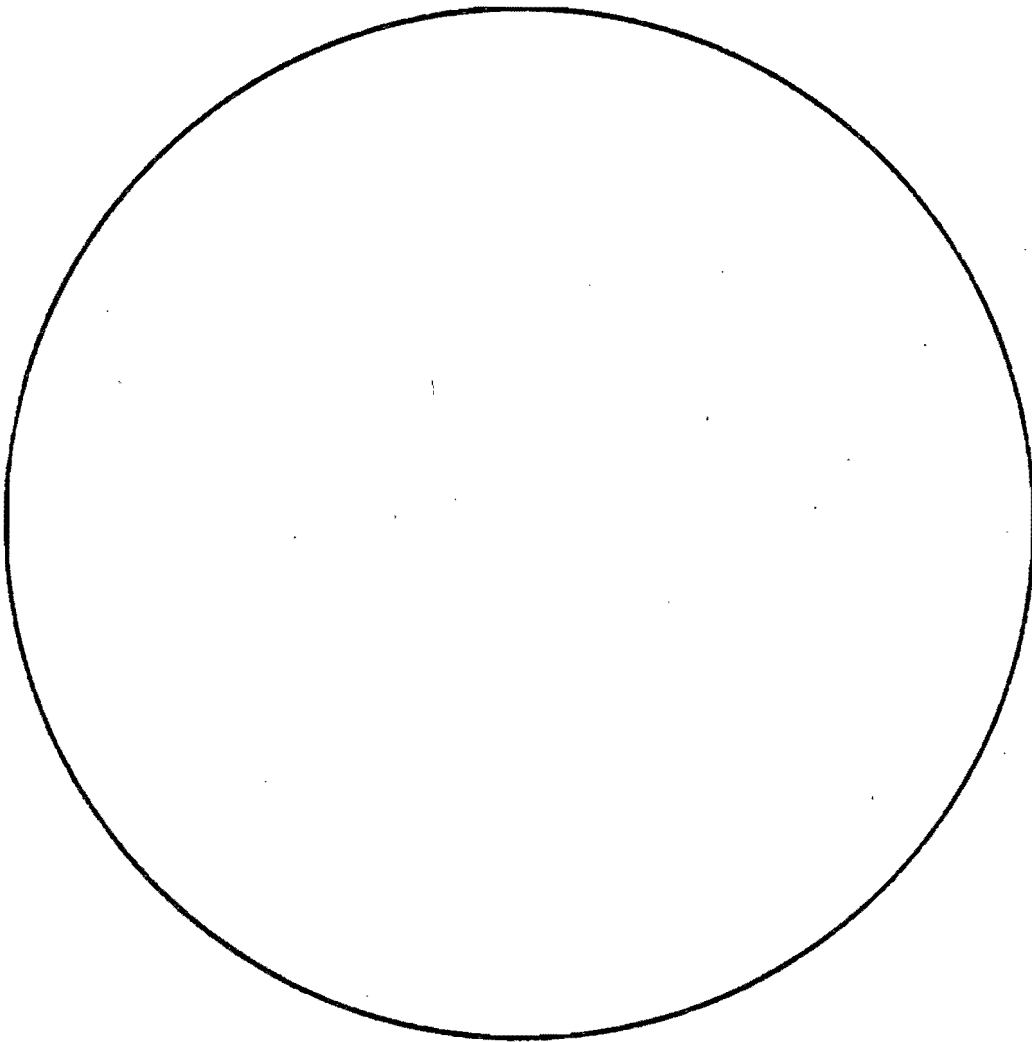
The circles below stand for your Parents, Teachers, and Friends.

Draw a circle to stand for yourself anywhere in the space below.



## Self-centrality scale

In the large circle below, draw two circles -- one to stand for yourself and a second to stand for a friend. Place an S in the circle for self and an F in the circle for your friend.





Identification scale

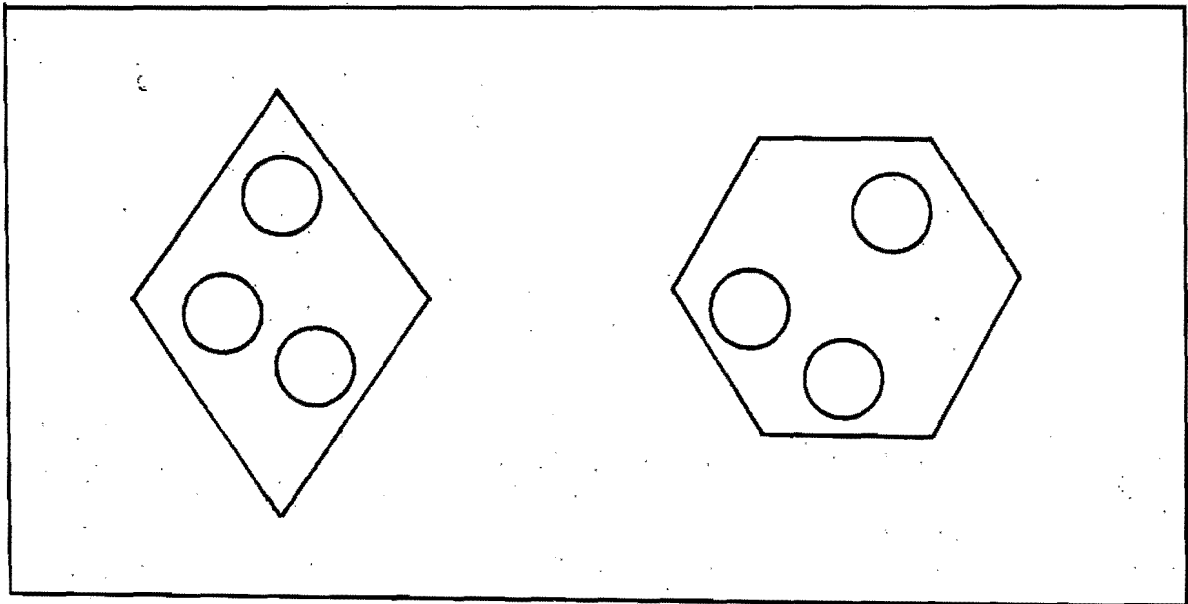
The "F" below stands for your Father. Choose one of the circles to stand for Yourself, and place a "Y" in it.

A horizontal row of nine circles. The first circle on the left contains the letter 'F'. The other eight circles are empty.

Marginality scale

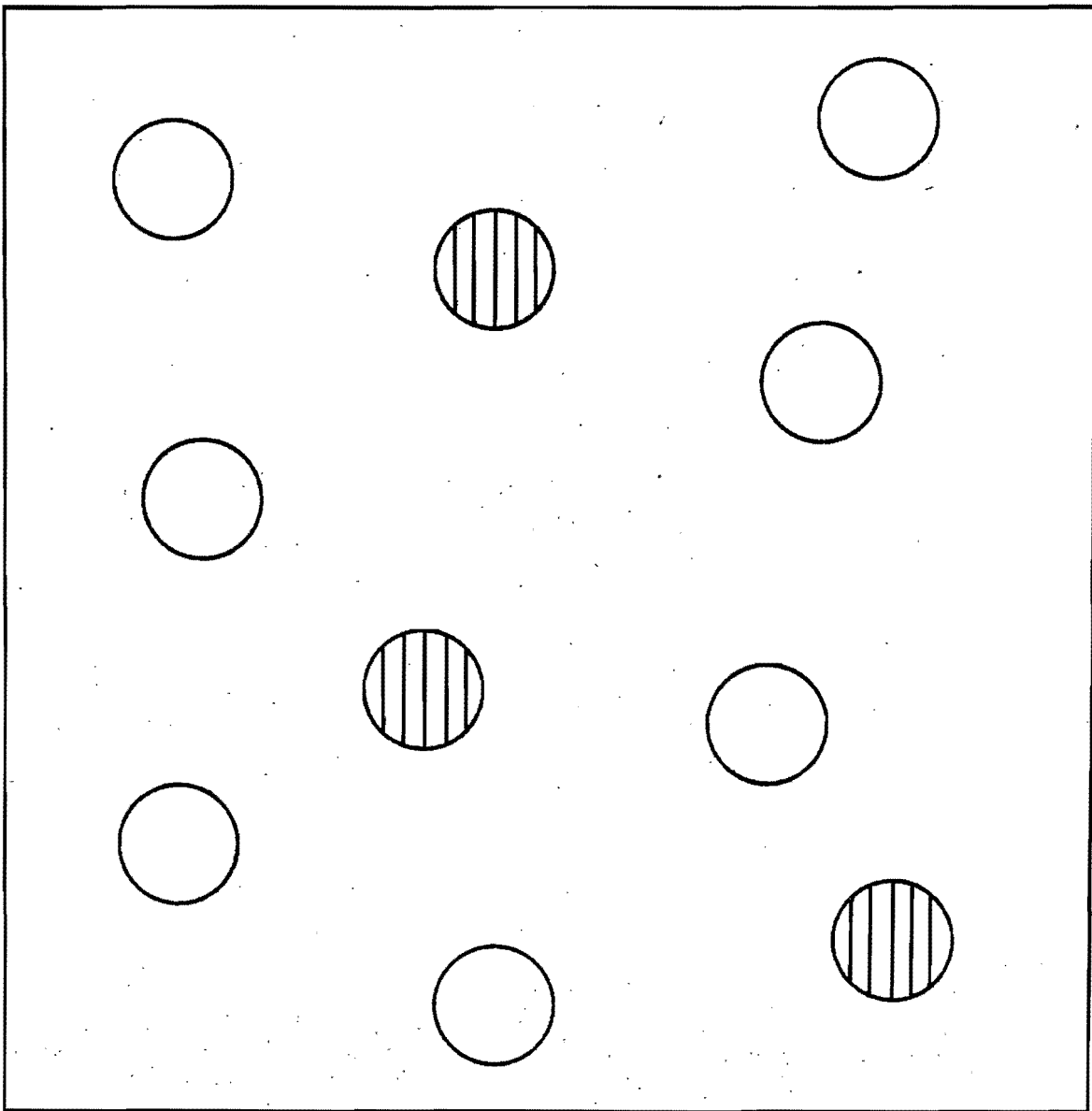
The two figures below stand for two groups of people you know.

The small circles stand for other people. Draw a circle to stand for Yourself anywhere in the space below.



# Majority identification scale

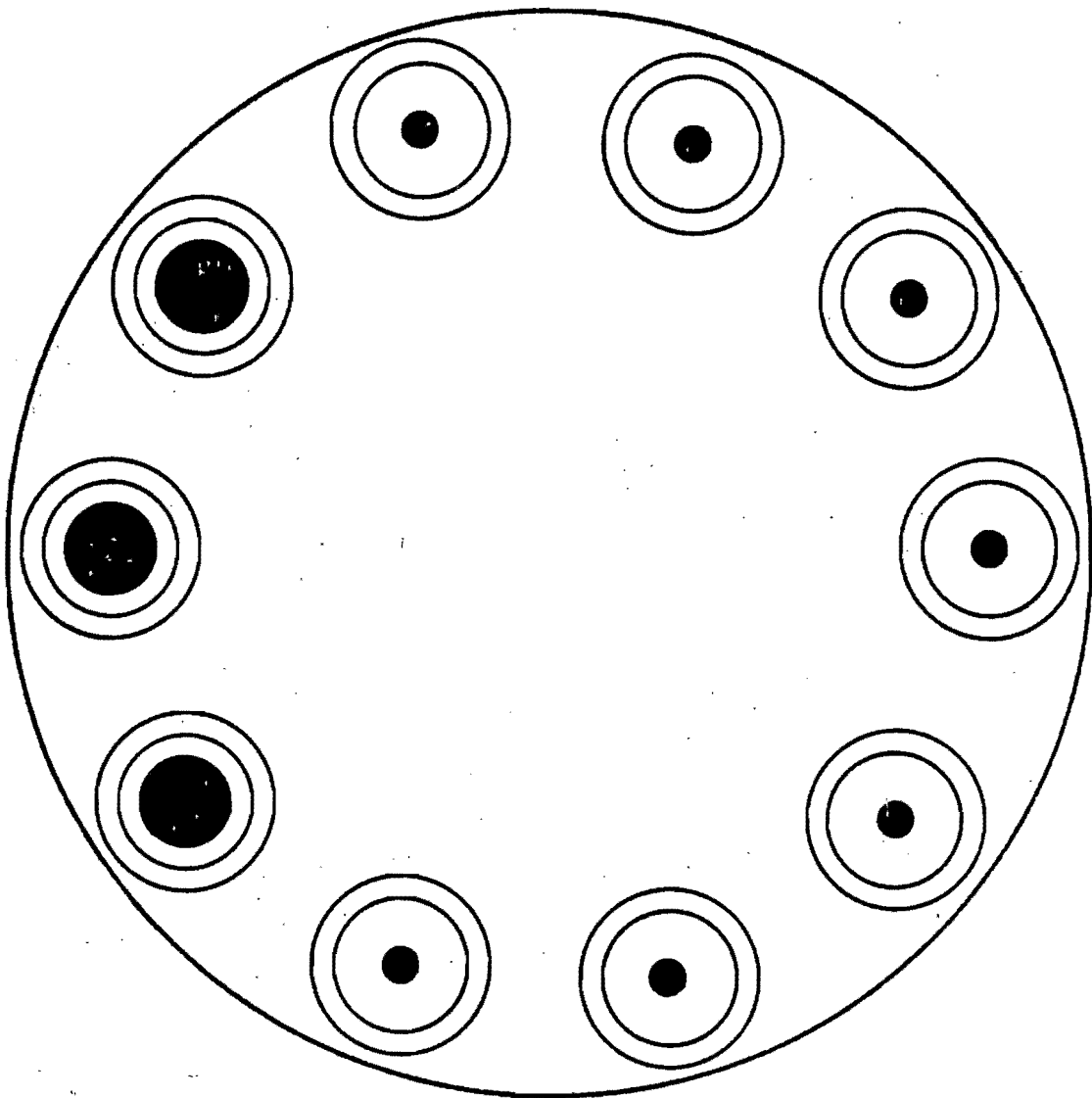
All of the circles within the square stand for other people. Put an X over one of the circles to stand for yourself.



Majority identification scale

The ten circles within the large circle stand for other people.

Choose any one of the ten circles to stand for yourself, and  
place an "X" over it.



# Grouping scale

(D) (F) (Fr) (H) (P) (N) (S) (Su) (U)

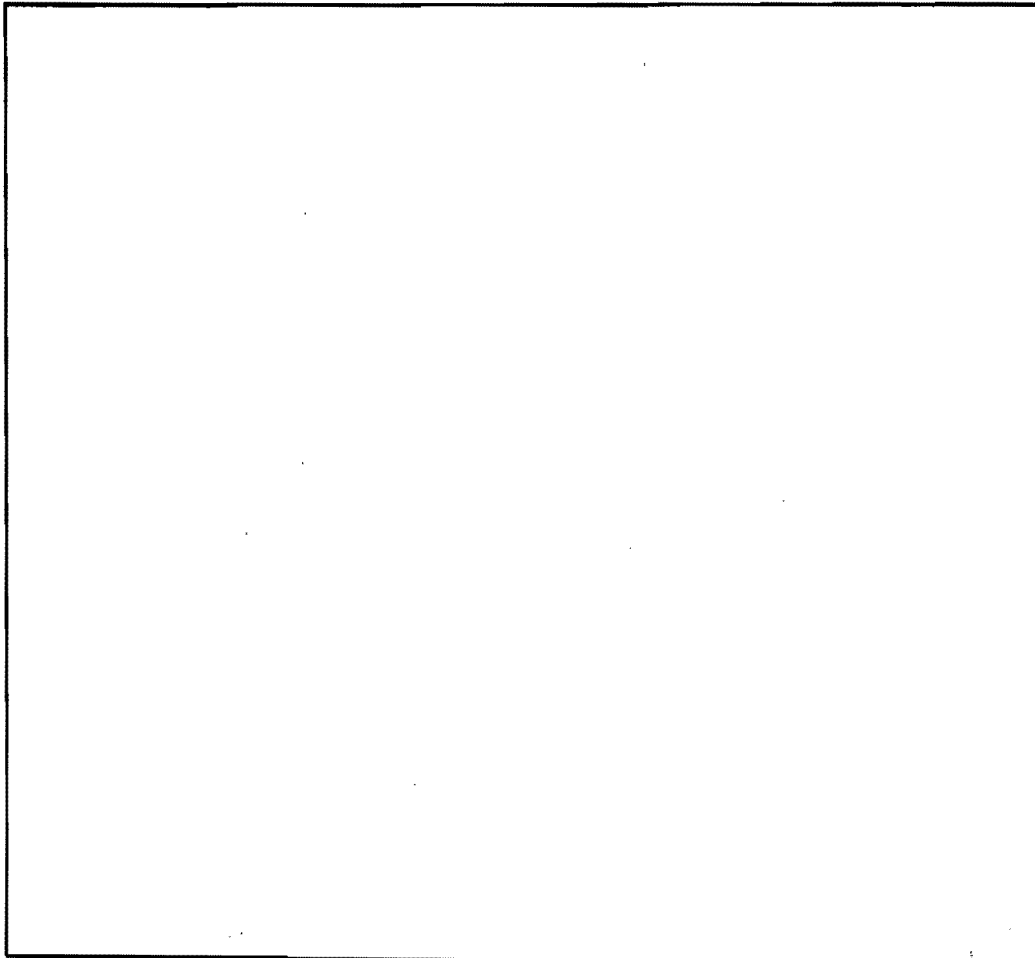
These letters stand for the following people: (D) Doctor, (F)

Father, (Fr) Friend, (H) someone you know who is happy,

(P) a politically active person, (N) a neighbor, (S) yourself,

(Su) someone you know who is successful, (U) someone with whom you are uncomfortable.

Your task is to arrange these people into as many or as few groups as you wish. In the space below, draw a circle around the letter to stand for each person, putting whichever ones you wish together. It does not matter how you arrange the people, but use each person only once and be sure to use all of them. If you think a person does not belong with any of the others, he may be placed by himself. When you have finished grouping the circles, draw a large circle around each of the groups in order to keep them separated.



Openness scale

The circle marked "Y" stands for Yourself. The other circles stand for other people. Draw as many or as few lines as you wish from the circle for Yourself to the circles which stand for other people.

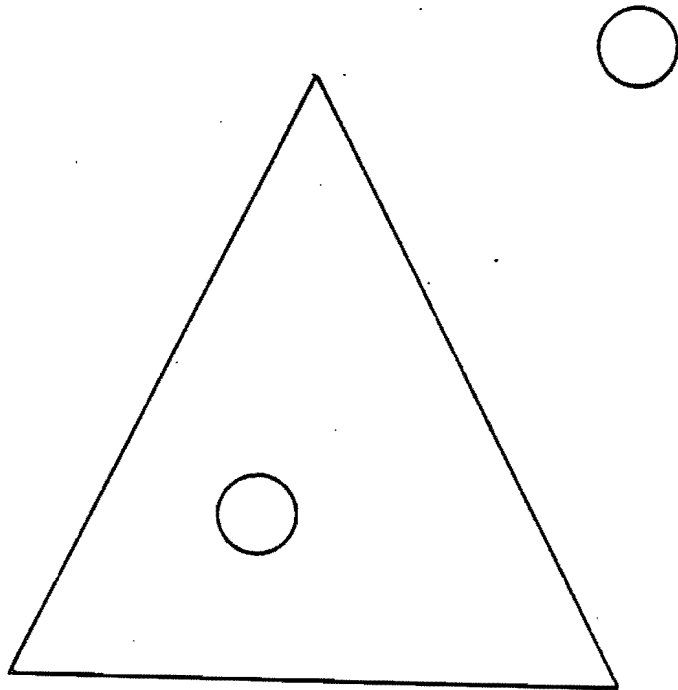
Y



Inclusion scale

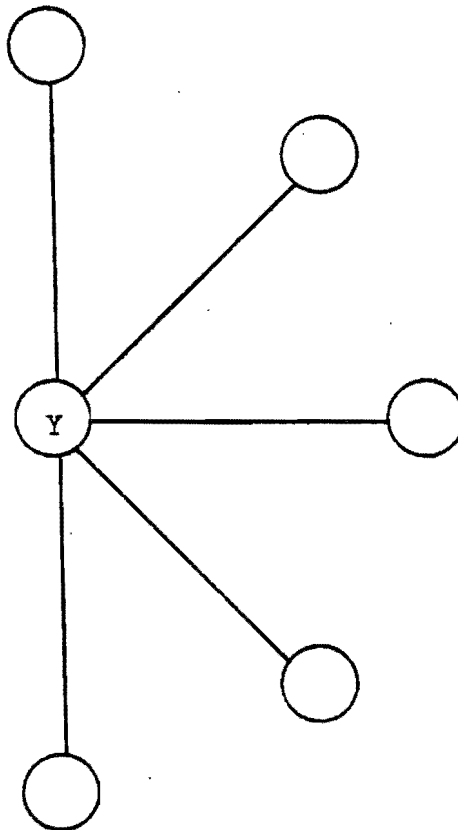
The small circles below stand for you and some other persons.

Put a "Y" in one of the small circles that stands for Yourself.



Power scale

The circle below marked "Y" stands for Yourself. Choose one of the circles to stand for a Friend, and put an "F" in it.





Complexity scale

Instructions: Here is a list of words. You are to read the words quickly and check each one that you think describes YOU. You may check as many or as few words as you like--but be HONEST. Don't check words that tell what kind of person you should be. Check words that tell what kind of a person you really are.

- |                     |                       |                    |
|---------------------|-----------------------|--------------------|
| 1. _____ able       | 18. _____ capable     | 35. _____ dumb     |
| 2. _____ active     | 19. _____ careful     | 36. _____ eager    |
| 3. _____ afraid     | 20. _____ careless    | 37. _____ fair     |
| 4. _____ alone      | 21. _____ charming    | 38. _____ faithful |
| 5. _____ angry      | 22. _____ cheerful    | 39. _____ false    |
| 6. _____ anxious    | 23. _____ clean       | 40. _____ fine     |
| 7. _____ ashamed    | 24. _____ clever      | 41. _____ fierce   |
| 8. _____ attractive | 25. _____ comfortable | 42. _____ foolish  |
| 9. _____ bad        | 26. _____ content     | 43. _____ friendly |
| 10. _____ beautiful | 27. _____ cruel       | 44. _____ funny    |
| 11. _____ big       | 28. _____ curious     | 45. _____ generous |
| 12. _____ bitter    | 29. _____ delicate    | 46. _____ gentle   |
| 13. _____ bold      | 30. _____ delightful  | 47. _____ glad     |
| 14. _____ brave     | 31. _____ different   | 48. _____ good     |
| 15. _____ bright    | 32. _____ difficult   | 49. _____ great    |
| 16. _____ busy      | 33. _____ dirty       | 50. _____ happy    |
| 17. _____ calm      | 34. _____ dull        | 51. _____ humble   |

- |                       |                       |                      |
|-----------------------|-----------------------|----------------------|
| 52. _____ idle        | 72. _____ pleasant    | 92. _____ special    |
| 53. _____ important   | 73. _____ polite      | 93. _____ strange    |
| 54. _____ independent | 74. _____ poor        | 94. _____ stupid     |
| 55. _____ jealous     | 75. _____ popular     | 95. _____ strong     |
| 56. _____ kind        | 76. _____ proud       | 96. _____ sweet      |
| 57. _____ large       | 77. _____ quiet       | 97. _____ terrible   |
| 58. _____ lazy        | 78. _____ quick       | 98. _____ ugly       |
| 59. _____ little      | 79. _____ responsible | 99. _____ unhappy    |
| 60. _____ lively      | 80. _____ rough       | 100. _____ unusual   |
| 61. _____ lonely      | 81. _____ rude        | 101. _____ useful    |
| 62. _____ loud        | 82. _____ sad         | 102. _____ valuable  |
| 63. _____ lucky       | 83. _____ selfish     | 103. _____ warm      |
| 64. _____ mild        | 84. _____ sensible    | 104. _____ weak      |
| 65. _____ miserable   | 85. _____ serious     | 105. _____ wild      |
| 66. _____ modest      | 86. _____ sharp       | 106. _____ wise      |
| 67. _____ neat        | 87. _____ silly       | 107. _____ wonderful |
| 68. _____ old         | 88. _____ slow        | 108. _____ wrong     |
| 69. _____ patient     | 89. _____ small       | 109. _____ young     |
| 70. _____ peaceful    | 90. _____ smart       |                      |
| 71. _____ perfect     | 91. _____ soft        |                      |

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