

FAMILY ENVIRONMENT AND ADOLESCENTS' FEELINGS OF HOPELESSNESS  
AMONG LOW-INCOME, URBAN AFRICAN  
AMERICAN FAMILIES

BY

JOSHUA CHARLES WIMBERLY

CASSANDRA E. SIMON COMMITTEE CHAIR  
KATHLEEN A. BOLLAND COMMITTEE CO-CHAIR

JOSEPHINE G. PRYCE  
JOHN M. BOLLAND  
BRAD E. LIAN

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## ABSTRACT

Literature on the subject of adolescent development in high-risk, low-income neighborhoods has detailed negative consequences for mental health outcomes. These neighborhoods not only affect adolescents, but can increase stress and strain on families. Urban, African American families who reside in high-risk, low-income neighborhoods are not immune from the potential hazards of economic stress, strained familial relationships, social disorganization, and other negative consequences which impact optimal family functioning. Utilizing HLM techniques, this study examined the relationship between dimensions of the family environment and adolescent feelings of hopelessness. In general, a more supportive family environment resulted in lower scores of adolescent hopelessness. However, higher conflict in families also resulted in lower scores of adolescent hopelessness, indicating a need to further explore the nature of conflict in families who reside in high-risk neighborhoods. Directions for future research and implications for social work practice are outlined.

## DEDICATION

This thesis is dedicated to everyone who helped me and guided me through the trials and tribulations of creating this manuscript, especially my wife Kimberly.

## LIST OF ABBREVIATIONS AND SYMBOLS

<i>a</i>	Cronbach's index of internal consistency
<i>df</i>	Degrees of freedom: number of values free to vary after certain restrictions have been placed on the data
<i>p</i>	Probability associated with the occurrence under the null hypothesis of a value as extreme as or more extreme than the observed value
=	Equal to
SD	Standard deviation
HLM	Hierarchical Linear Modeling
SE	Standard error
COH	Cohesion dimension of Moos Family Environment Scale
EX	Expressiveness dimension of Moos Family Environment Scale
CON	Conflict dimension of Moos Family Environment Scale/Conflict factor loading for statistical analyses
IND	Independence dimension of Moos Family Environment Scale
ACH	Achievement orientation dimension of Moos Family Environment Scale
IC	Intellectual-Cultural orientation dimension of Moos Family Environment Scale
AR	Active-Recreational dimension of Moos Family Environment Scale
ORG	Organizational dimension of Moos Family Environment Scale
CONT	Control dimension of Moos Family Environment Scale
MR	Moral-Religious dimension of Moos Family Environment Scale
MYS	Mobile Youth Survey

SUP	Support
DPRSADLT	Adult depression
HPLSADLT	Adult hopelessness
ADLSCTHPLS	Adolescent hopelessness
ADLSCTAGE	Adolescent age
XSMOVED	Times moved
AGEADLT	Adult age
EDUADLT	Adult education level
NUMHSHLD	Number of household members

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This dissertation would not have been possible without the help of many supporters. I wish to take a moment to express my gratitude for this support and guidance throughout this process.

First, I say thanks to my beautiful wife Kimberly for never allowing me to take my eyes of my goals. She has stood beside me through this entire process and never let my frustrations win the battle. She has provided constant encouragement and love allowing me the assured confidence that I could see this through.

Secondly, I say thanks to my doctors. Having been diagnosed with Stage III rectal cancer at the beginning of my third year as a doctoral student, I was unsure I would make it to this point in my education. These friends have given me the most precious gift of life and strengthened me in my resolve to stare down difficulty with resolve and purpose. Without their assistance I know this dissertation would not exist.

Finally, to my committee I tip my hat in thanks. At times I may seem unappreciative of your suggestions and advice, but without your guidance I would not have finished this project. Cassie, you will never know the depth of my appreciation for all you have taught me and continue to show me about social justice and its place in our world. Thank you for giving me guidance and not giving up on me when my frustrations seemed overwhelming. To John I say thanks for your friendship and everything you have taught me about research, commitment to justice, and dedication to work.

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## Chapter 1

### **Introduction**

#### **Poverty**

Recent economic trends have re-ignited discussion about poverty in the United States. According to the 2009 American Community Survey, 14% of the population reported an income below the poverty threshold (Bishaw & Macartney, 2010). This percentage is the equivalent to almost 43 million people. Between 2008 and 2009, over half of the states reported increases in the number of people in poverty, while no state reported any decrease (Bishaw & Macartney, 2010).

Consequences of poverty for individuals and families are well documented. For individuals, some of these consequences include poor health outcomes, food scarcity and under-nutrition, increased stress, and poor mental health outcomes (Seccombe, 2000; Snyder, McLaughlin, & Findeis, 2006). For children, poverty can lead to lower academic achievement, behavioral problems, and problems with adjustment (Brooks-Gunn, Duncan, & Aber, 1997). For families, consequences include increased stressful communication patterns, increased likelihood of abuse and neglect, and less effective parenting styles (Conger et al., 2002). Research has documented that as a family's economic situation worsens, parents are less nurturing, more authoritarian, and use more inconsistent and harsh physical discipline (Cain & Combs-Orme, 2005; Conger et al., 2002).

## **African Americans and Poverty**

Although poverty affects all groups within the United States, African American families are at greater risk of having income below the poverty level (DeNavas-Walt, Proctor, & Lee, 2005). Despite the recent growth of the African American middle class, nearly a quarter of African Americans fall below the poverty line. That number increases to 39.4% for female, single-headed families (Snyder, et al., 2006).

Historically, African Americans left rural areas in search of better opportunities on the heels of a great labor shortage in large cities; this was the case from the beginnings of the industrial revolution until World War I. This migration held great promise for economic self-sufficiency, however, many families found that urban centers brought new challenges and similar barriers to personal success. Individual, organizational, and structural discrimination and racism, along with larger economic uncertainties, left many African American families part of a growing urban, low-income population (Tolnay, 2003).

Along with economic hardship came the reality of limited residential choice, which ultimately led to the increased centralization of low-income residents in geographically limited neighborhoods within urban centers (Tuckel, Schlichting, & Maisel, 2007; Tolnay, 2003). Although over time there have been policy efforts in housing and development to address this geographical distribution of poverty much remains unchanged. Presently, in the search for affordable housing, many low-income families find themselves with limited geographical choice within urban areas (McClure, 2008; Goetz, 2000).

Despite the historical transitions that African Americans have experienced, the importance of the family unit has remained a source of strength. Although researchers have explored the unique experiences of this group, there exists a gap in understanding how the

unique characteristics of impoverished families relate to the navigation of the life events and stressors they face. There remains a need to explore how the family environment for low-income African American families relates to adolescent mental health.

### **Poverty and Hopelessness**

According to a CDC report on mental health in the United States, in comparison to the overall population African Americans were more likely to report feeling that everything was an effort all, some, or most of the time in the past 30 days (Pleis, Benson, & Schiller, 2003). These feelings are indicative of depressive symptoms that have been conceptually linked with feelings of hopelessness. Moreover, according to this report, adults in families that were poor were two times as likely to report feelings of being sad, hopeless, and/or worthless compared to adults from families that were not poor (Pleis, et al., 2003).

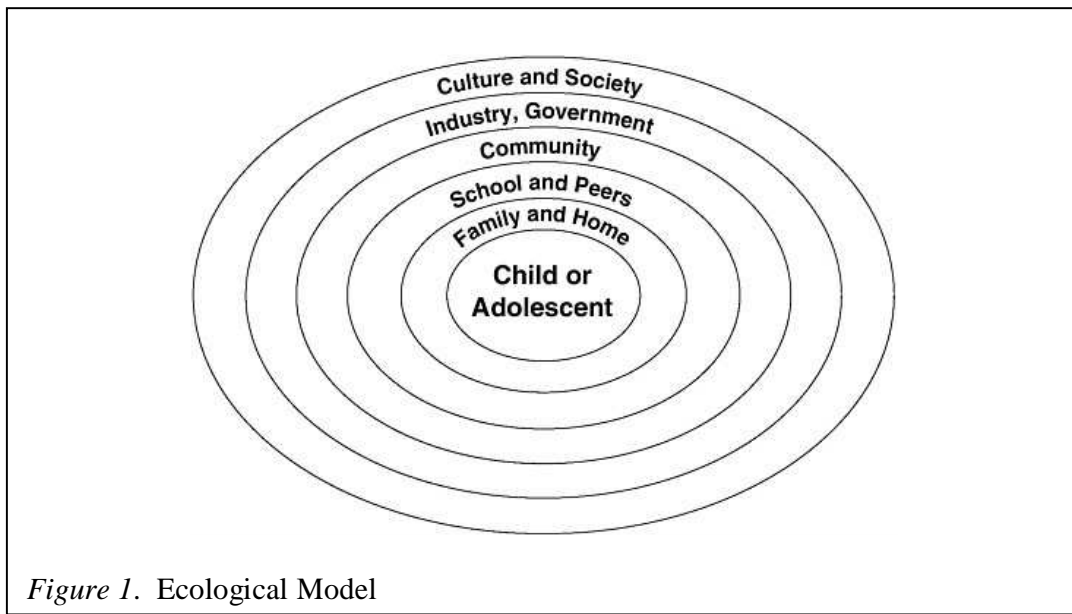
Adolescents also experience poor mental health outcomes as a consequence of poverty. According to Merikangas et al. (2010), over 11% of adolescents in the general population experience mood disorders along with severe impairment and/or distress. This research also noted that African American adolescents were at greater odds of developing a mood disorder. Odds for developing a mood disorder were also higher among adolescents who maintained a lower socioeconomic position. This study attempts to explore this relationship between low-income adolescents and mental health outcomes, with further consideration given to the effect of a family's household environment.

### **Ecological Systems Theory**

This study utilizes ecological systems theory as the primary means of conceptualizing and exploring the relationship between family environment and adolescent hopelessness among low-income, urban African American adolescents in this research. Ecological systems theory

frames adolescent development within the context of the system of relationships that form the adolescents' environment.

Ecological theory posits that environments are a context of development (Bronfenbrenner, 1994, Brower, 1998, Mason, Cauce, Gonzales, Hiraga, & Grove, 1994). Within the context of the present study, the adolescent is nested as the innermost structure with other systems expanding outward in proximity. This is best represented as concentric circles. Figure 1 represents the ecological model and its application to the conceptualization of this research project.



Adolescents reside within their respective family environments which are influenced by a variety of factors including, but not limited to, proximal relationships with family and friends; immediate neighborhoods and surrounding areas; and community social structures such as church, school, court system, etc., as well as larger societal and cultural systems. These varying systems are all interrelated according to ecological systems theory and, at least theoretically, have an impact on adolescent development and their individual perceptions about the future.

## **Research Overview and Application to Social Work Profession**

This research explores the association between family environment and mental health with a focus on hopelessness for economically stressed, urban African American adolescents. Understanding the characteristics of low-income, urban African American families and adolescents and how those characteristics relate to the adolescents' mental health will assist the social work profession in targeting interventions to address the issues these families face. Identifying which families are most susceptible to negative outcomes will assist in identifying to whom interventions can be most effectively targeted for addressing adolescent mental health outcomes. Also, identifying what aspects of family dynamics potentially buffer negative outcomes for family members, specifically adolescents, will assist in the conceptualization of effective interventions.

Another aspect of this study that will benefit social work is the furthering of knowledge regarding economically stressed, urban African American families. It has been noted that much research on economic stress and family dynamics has not been culturally specific to African American families.

Additionally, the utilization of the Moos Family Environment Scale for this research project offers a unique examination of its applicability with this specific population. The Moos Family Environment Scale has been normalized in a wide variety of population; however, little evidence exists of its use with a high poverty sample. The opportunity to examine its suitability for this sample will provide insight into needed adjustments for future research in this area.

## **Research Questions**

This research focused on better understanding the characteristics of African-American families who reside in low-income, urban neighborhoods. What are some demographic

characteristics of the families? What are some characteristics of their individual family environments? How do these characteristics influence individual family members? Specifically, how do characteristics of the family environment influence adolescent mental health? Further, what is the general picture of caregiver mental health and how do these traits impact adolescent mental health? Finally, does financial stress and poverty have an impact on these families and specifically adolescent mental health?

### **Personal Connection to Research**

This research is an extension of a longitudinal research project in Mobile, Alabama called the Mobile Youth Survey. This project has collected survey data from adolescents residing in low-income neighborhoods in Mobile since 1998. Every summer, research assistants canvass various neighborhoods to recruit adolescent participants to take the survey at established meeting locations (i.e. local school, community centers, Boys & Girls Clubs, churches, etc.). Beginning in 2004, adults who resided in these neighborhoods were added to the overall sample selection for the larger research project. Research assistants began recruiting adults to participate in a similar survey. The purpose of the adult recruitment was to sample all possible adults in the neighborhoods resulting in corresponding households where both adolescents and their respective caregivers were surveyed in a given year.

In the summer of 2000, I was employed as a research assistant for the Institute of Social Science Research at The University of Alabama. I was given the task of helping in the recruitment and administration of surveys for adolescents for the Mobile Youth Survey (MYS). I would later be employed throughout the year as a research associate and given the task of assisting in the recruitment and administration of surveys for adults who also resided in these neighborhoods.



The information represented in this dissertation has a special connection to me. I built relationships with many of the adolescents and their families. The process of conducting research in these neighborhoods brought with it many challenges, but also many opportunities for personal and professional growth. Often times in scientific research, the researcher must show due diligence in objectivity. Emerging paradigmatic perspectives on research have led to conclusions regarding the inherent strengths for researchers who are interested in exploring data deriving from a sample with which they are personally connected (Derrett & Colhoun, 2011).

I think that this personal connection will ultimately assist me in conceptualizing the context of the research. Although the data is derived from a more rigid, quantitative measurement instrument, there are many naturalistic qualities to the overall approach. I participated in recruiting participants, building community relationships, and administering face- to-face surveys; having this experience of understanding the foundation and context of the sample and data will assist me in the overall approach to the present research (Bolland, 2001).

## Chapter 2

### **Literature Review**

This research explores the association between family environment and mental health with a focus on hopelessness for economically stressed, urban African American adolescents. Framing this research within ecological theory requires an examination of literature regarding various sub-systems relevant to adolescent development within the environmental context. Some of the specific topics this chapter addresses are low-income neighborhoods, economic hardship, adolescent mental health, and aspects of family functioning.

#### **Low-Income Neighborhoods**

Over a decade of research has noted that low-income neighborhoods are marked by characteristics of social disorganization (Kim, 2010; Roche & Leventhal, 2009; Franzini, Caughey, Nettles, & Campo, 2008; Latkin, Curry, Hua, & Davey, 2007; Haney, 2006; Bolland, Lian, & Formichella, 2005; Sampson & Raudenbush, 2004; Geis & Ross 1998; Anenshensel & Sucoff, 1996). Research has documented that the social disorganization found in low-income neighborhoods is associated with multiple issues such as alcohol and drug use, high unemployment, limited resource availability, higher rates of crime and victimization, and higher levels of exposure to violence and traumatic events. These characteristics have been associated with individuals reporting a sense of isolation, chaos, and instability.

#### **Economic Hardship/Financial Stress**

For many low-income families, the central stressor revolves around financial instability and economic hardship. More specifically, Conger et al. (2002) developed a model for

conceptualizing economic pressure in low-income African American families. Their research found that economic hardship was positively related to economic pressure within families, and that economic pressure was directly related to emotional distress of family caregivers. This, in turn, was associated with problems in family relationships. Further, these stressed families experienced disrupted parenting practices, lower levels of positive child adjustment, and higher internalizing and externalizing of problems.

In a mixed-method analysis of low-income families (59% African American, 29% Latino, and 12% Non-Latino White), Mistry, Lowe, Benner and Chien (2008) found that families' qualitative experiences of economic pressure were associated with an inability to afford both basic needs and some modest, but highly valued extras (eating out for dinner, extra purchases while shopping, and/or goods or experiences similar to other families). Quantitative results indicated that economic pressure was related to the development of emotional problems for individuals. Further, economic pressure was shown to be related to parental depressive symptoms, which, in turn, were related to parental hostile behavior and physical abuse.

Economic pressure has also been linked to emotional problems in children and adolescents. Conceptualizing adolescent development within the context of low-income neighborhoods highlights the many challenges these adolescents encounter. Despite the low levels of significance regarding socioeconomic variables, Buu et al. (2009), in their comparison between families with reported alcohol abuse and those without, found that neighborhood ecological risks and residential instability predicted the development of psychiatric problems among parents and adolescents.

## **Exposure to Violence**

The presence of violence and the high probability of victimization for resident adolescents within low-income, high-risk neighborhoods present increased stress exposure and increase the potential for mental health problems (Bolland, Lian, & Formichella, 2005; Bolland, 2003; Bolland, 2001; DuRant, Getts, Cadenhead, Emans, & Woods, 1995; DuRant, Cadenhead, Pendergrast, Slavens, & Linder, 1994). Relevant literature regarding the impacts of exposure to violence for adolescents can be best understood in four major categories. Foster and Brooks-Gunn (2009) note that these categories are: (a) exposure to three forms of physical violence (child physical maltreatment, inter-parental violence, community violence); (b) multilevel correlates and causes of exposure to violence (neighborhood characteristics, family characteristics, family stresses); (c) range of consequences of exposure to violence (internalizing/externalizing mental health problems, role transitions, academic outcomes); and (d) multilevel and cross-domain mediators and moderators of exposure to violence (school and community factors, family social support, individual coping resources). Understanding the impact of violence on the adolescents who reside in neighborhoods characterized by violence is crucial when considering the potential association of the environment in the development of poor mental health.

Although few in number, there have been researchers committed to exploring low-income neighborhood and environmental correlates to adolescent adjustment and development (Brooks-Gunn et al., 1997; Duncan & Brooks-Gunn, 1997; Graber, Brooks-Gunn, & Peterson, 1996). Early in the 21<sup>st</sup> century, Tolan, Gorman-Smith, and Henry (2003) outlined an ecological model for urban youth violence which considers community structural characteristics, including concentrated poverty, ethnic heterogeneity, economic investment, and violent crime. This

research demonstrated a pathway of structural community characteristics to urban male violence within low-income neighborhoods via several social and psychosocial indicators including neighborliness, extent of neighborhood problems, parenting practices, and peer behavior.

### **Adolescent Mental Health**

The development of mental health problems is a probable consequence of the exposure to stressful life events for many low-income, urban African American adolescents. Safford, Alloy, Abramson, and Crossfield (2007) noted in their synthesis of the literature that knowledge regarding cognitive vulnerability for depression-prone individuals falls within two major domains. First, cognitive vulnerability is marked as a “tendency to attribute negative life events to stable and global causes, infer that further negative consequences will follow from a negative event, and believe that the occurrence of the negative event implies one is deficient and unworthy” (2007, p. 148). Secondly, they note that cognitive vulnerability for adolescents is “reflected by a set of dysfunctional attitudes according to which one’s happiness and self-worth are thought to depend on being perfect or gaining others' approval....which is related to depression” (2007, p. 148).

Despite the strong influence contextual variables have on the emotional well-being of low-income, urban African American adolescents, most research is theoretically guided by the conceptualization of cognitive vulnerability described above and focuses primarily on exploring the interpersonal characteristics of the etiology of poor mental health (see Pumariega, Winters, & Huffine, 2003). Although these models recognize the hazards associated with high-risk environments, the central focus remains concerned with components of development associated with attributional styles, vulnerabilities to mental illness, and lower levels of coping skills (Gibb & Alloy, 2006; Hankin & Abramson, 2002; Riley et al., 2009; Southall & Roberts, 2002;

Lewinsohn, Joiner, & Rohde, 2004). These approaches have provided much clarification regarding individual characteristics, but have offered a limited understanding of the relationship between ecological risks and the development of mental health problems in adolescents who reside within low-income neighborhoods.

### **Hopelessness**

A large body of research has noted higher levels of hopelessness in adolescents who reside in high risk neighborhoods (Bolland, 2003; Bolland et al., 2005; Bolland, 2001; DuRant et al., 1994; DuRant et al., 1995). Hopelessness involves negative expectations about oneself and one's future with these expectations including thoughts that desired outcomes will not happen and/or that negative outcomes will (McLaughlin, Miller, & Warwick, 1996; Joiner & Wagner, 1995). With the myriad challenges facing these adolescents, it is not hard to understand the relationship that has been noted between poverty and negative expectations about the future.

Bolland et al. (2005) noted in their sample of adolescents in low-income, high-risk neighborhoods, a susceptibility to hopelessness through various social and psychosocial indicators. The research found strong associations between adolescent hopelessness and variables conceptualizing disruption and connectedness. Disruption was conceptualized as a change in mother figure, exposure to violence, traumatic stress, and/or worry; while connectedness was conceptualized as sense of community, warmth toward mother, and religiosity. The results indicated that the more likely these adolescents were to experience thoughts of hopelessness, the more futile they felt in regards to planning for the future.

### **Family Functioning**

Positioned between the individual and community domains for conceptualizing adolescent adjustment and development within low-income, high-risk neighborhoods sits the

family. Generally speaking, there is well established research that has explored the context of the family system and the various components of family dynamics and functioning (Cain, & Combs-Orme, 2005; Walsh, 2003; McGoldrick, Heiman, & Carter, 2003; Bussell & Reiss, 2003; Beavers & Hampson, 2003; McCubbin & Patterson, 1983; Beavers & Voeller, 1983; Olson, 2003; Epstein, Ryan, Bishop, Miller, & Keitner, 2003). Further, research has established that low-income families often face unique challenges to optimal family functioning. In regards to adolescent development, poor family environment has been linked to the development of psychiatric symptoms (Buu et al., 2009; Street, Harris-Britt, & Walker-Barnes, 2009; Tracy, Zimmerman, Galea, McCauley, & Vander Stoep, 2008; Goebert, 2000; Shek, 1998 & 1997). Erikson and Jensen (2006) found that measures of family disorganization were the most significant predictors of sibling violence, overriding characteristics of children or particular family demands. In general, findings support the notion that within low-income neighborhoods, the family environment can further compound worry among adolescents through household distress and disorganization which in turn negatively affects adjustment and development for all family members.

With this in mind, research identifying the protective functions of families cannot be overlooked. Compton, Thompson, and Kaslow (2005) noted that better family functioning and social supports can be protective factors for low socioeconomic status African Americans in regards to emotional problems. Further, a positive ethnic identity and cohesive family environment is strongly related to psychological adjustment for African American adolescents (Street et al., 2009). Moore and Chase-Landale (2001) noted that stronger family relationships reduced overall adolescent risk while Shek (1997) found that improved family functioning was related to positive mental health for adolescents. In general, the quantity of research exploring

the negative impacts of family environment and functioning is greater than research examining familial protective factors.

### **Strengths of African American Families**

Given the importance of family in African American culture (Hill, 1971; Billingsley, 1968; McAdoo, 1998), research that explores all the possible pathways within which the family environment impacts adolescent adjustment is needed. More specifically, understanding the intersections between family functioning, race, economic pressure, and adolescent mental health is required to further our knowledge of low-income, African American communities.

In his seminal work on the strengths of African Americans, Hill (1971) noted five important resources including strong achievement orientation, strong work orientation, flexible family roles, strong kinship bonds, and strong religious orientation. In another seminal piece regarding African American strengths, Billingsley (1968) noted goals from which a strong black family might emerge. These included developing a set of values, strong religious convictions and behaviors, educational achievement aspirations, economic security, strong family ties, and community centeredness. Kinship ties, social support, and faith have all been noted as sources of strength for a culture that has historically faced hardship and continues to adapt to difficult circumstances and societal forces.

Afro-centric approaches to understanding African American families have conceptualized cultural experience as grounded in these strengths and emerging from history, culture, values, and adaptation (Freeman & Logan, 2004; Logan, 2001, McCullough-Chavis & Waites, 2004, Staples, 1999, McAdoo, 1998). These approaches have all noted the importance of family to African Americans and the protective function it serves for individuals and communities. Despite overwhelming research placing low-income family environments and functioning within



a perspective of pathology, there is considerable room to explore both the negative and protective factors of families among African Americans.

### **Resiliency**

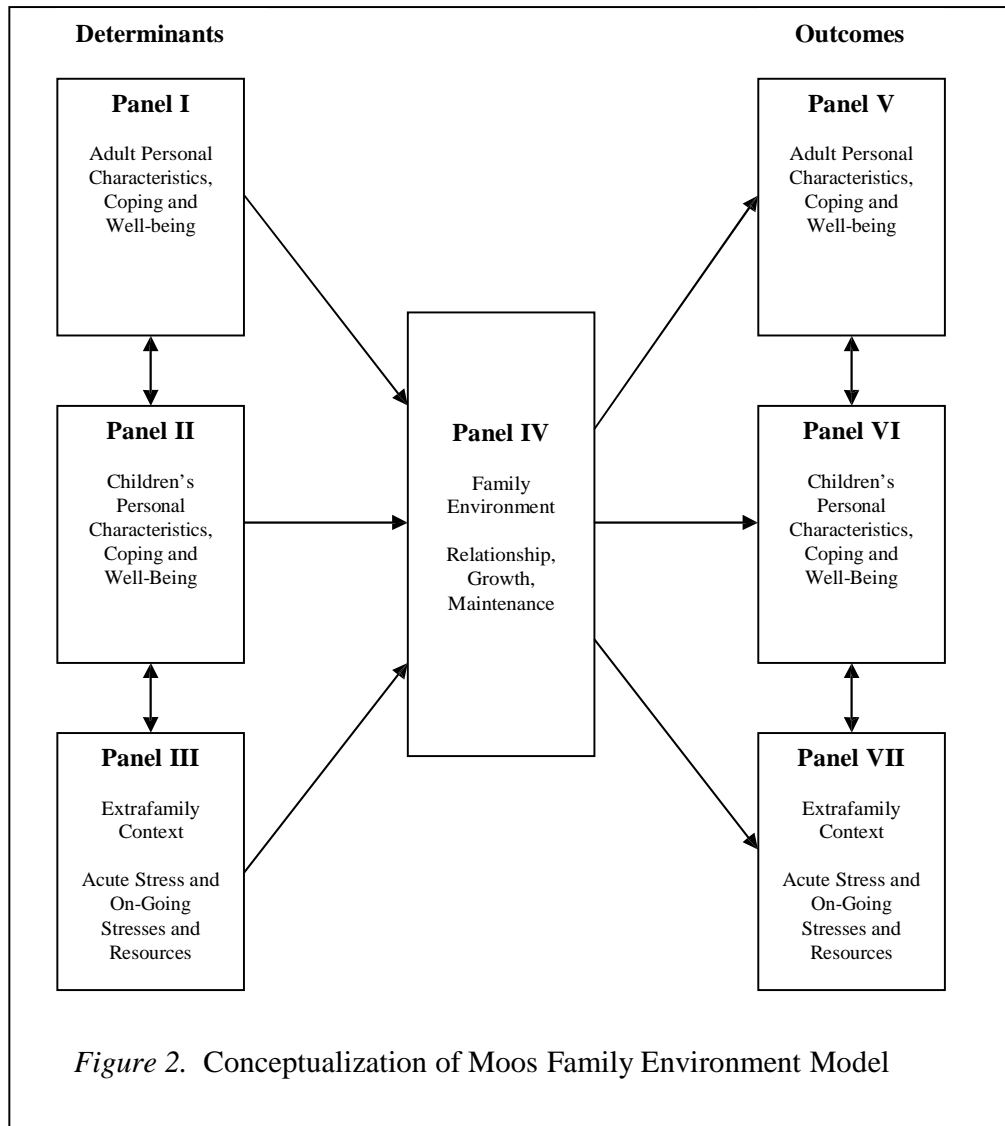
Research on resiliency has traditionally been relevant to exploring protective factors for adolescents residing in low-income, high-risk neighborhoods. In a meta-analysis of the subject, Olsson (2003) notes that adolescent resilience is defined as both “an outcome characterized by a particular pattern of functional behavior despite risk,” as well as “a dynamic process of adaptation to a risk setting that involves interaction between a range of risk and protective factors from the individual to the social” (p. 2). This definition incorporates both process and outcomes conceptualizations of resiliency.

The importance of resilience for adolescents residing in low-income, high-risk neighborhoods cannot be overstated. Within the discussion of resiliency for these individuals, the concept is seen as an aberration implying that the natural course for most adolescents is to fall victim to the environmental risks. Even if this implication was reality, exploration of resiliency within these adolescents is needed. Further, an examination of the mechanisms by which the family environment impedes or supports this process is also called for.

### **Conceptual Model of Family Environment**

Although much research has been devoted to exploring and explaining family dynamics and processes, this study utilizes one specific model of family environment, outlined by Moos & Moos (1994), which conceptually addresses a broader spectrum of family characteristics as compared to other contemporary models. This model will be utilized to guide this research and provide a framework for understanding the conceptual relationship between dimensions of the family environment and each individual family member. The conceptual model (Figure 2) is

informed by stress and coping theories which incorporate both life contextual components and individual functioning.



The model suggests that there is a mutual influence between family environment and family members' adaptation and adjustment. Each panel listed as a determinant (Panel I: Adult's Personal Characteristics, Coping, and Well-being; Panel II: Children's Personal Characteristics, Coping, and Well-being; and

Panel III: Extra-family Context) contains dimensions which influence family environment (Panel IV). In turn, family environment (Panel IV) has mutual influence on each panel listed as outcomes. The outcomes are the same concepts as the determinants, but have a separate function within the model.

With the present research, the focal point of analysis will be between Panel IV and Panel VI. Considering ecological theory, further proximal systems of community level characteristics were understood as relevant to the conceptualization of the population's context, but not included in this examination of the relationship between family environment and adolescent feelings of hopelessness. With this model, the interpersonal characteristics of adults and children are emphasized over the potential relationship of extra-family contextual factors. There are limited analyses of the determinant properties of Panels I (Adult Personal Characteristics, Coping and Well-being) and II (Children's Personal Characteristics, Coping and Well-Being) on the family environment, but the primary focus of analysis falls on the relationship between the family environment (Panel IV) and the outcome of adolescent feelings of hopelessness (Panel VI).

## Chapter 3

### **Methodology**

#### **Introduction**

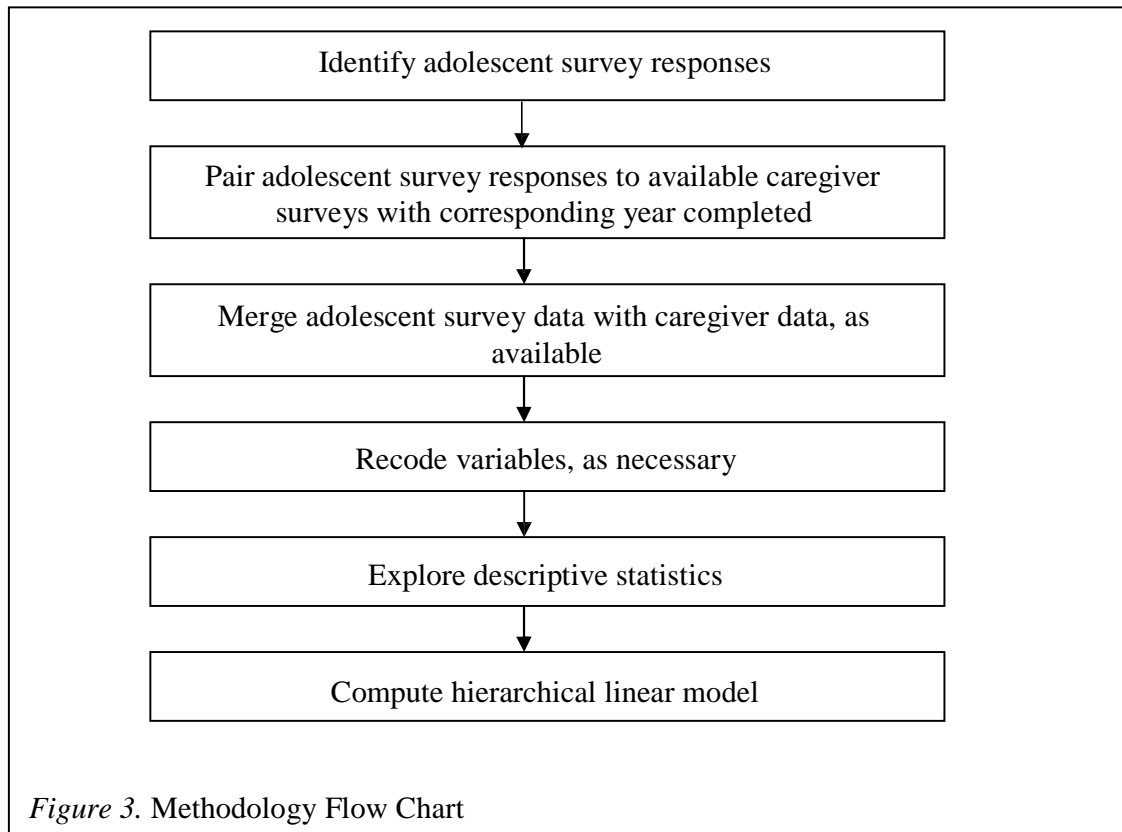
This research explores the association between family environment and mental health with a focus on hopelessness for economically stressed, urban African American adolescents. Specifically, this study utilized secondary data to examine how variables related to family demographics and family environments are associated with reported feelings of hopelessness among African American adolescents.

#### **Sample & Data Selection**

Selected data from the Mobile Youth Survey (MYS), a multiple cohort longitudinal study of adolescents living in the most impoverished neighborhoods in Mobile, Alabama, were analyzed in conjunction with corresponding adolescent caregiver surveys. These two sources of data were utilized to explore the association of family environment (as reported on the caregiver survey) and adolescent feelings of hopelessness (as reported on the MYS). Appendix A includes a timeline of data collection intervals for the two sources of data being utilized for this research.

The MYS originally selected 13 neighborhoods in Mobile, Alabama where median household income in 1998, when the study began, was \$5000. Over the course of data collection, many families experienced mobility within and across different neighborhoods. Despite mobility, most families remained in neighborhoods with a median household income below the median for the larger Mobile metropolitan area. In conjunction with the MYS, surveys were completed with adults in some of the neighborhoods from which a large portion of

the MYS sample was selected. This resulted in households with both adolescent and adult survey responses. A visual representation of the methodology can be seen in Figure 3.



Initially, merging of responses between the two data sources required choosing a cross-sectional set of adolescent survey responses from a set year in which both adolescents and adults from targeted neighborhoods had been surveyed. The next step was to find corresponding caregiver data from the adult data source with a matching address. Data from caregivers and adolescents were then merged together according to household address. Then, variables were recoded as necessary, descriptive statistics were explored, and regression modeling was completed.

## Variables

This study explored factors such as family dynamics, family environment, and adolescent feelings of hopelessness. A list of included variables and their data source can be seen in Table 1. Appendices B & C contain the survey questions used in data collection for adults and adolescents respectively.

<i>Variable Information</i>	
<u>Data Source</u>	<u>Assessment Instrument</u>
Caregiver	
○ Age	Adult Survey Demographic
○ Gender	Adult Survey Demographic
○ Education	Adult Survey Demographic
○ Number of Family Members	Adult Survey Demographic
○ Family Mobility	Adult Survey Demographic
○ Family Environment	Moos Family Environment Scale (Adult Survey)
○ Caregiver Depression	Radloff CES-D Scale (Adult Survey)
○ Caregiver Hopelessness	Beck Hopelessness Scale (Adult Survey)
Adolescent	
○ Age	MYS Demographic
○ Gender	MYS Demographic
○ Hopelessness	Brief Hopelessness Scale (MYS)

Various demographic variables were explored in the analysis. These variables include family composition, education level of caregiver, age and gender of both the caregiver and adolescent, and family mobility. These variables in the data analysis primarily functioned as statistical controls.

Age and gender of both the caregiver and the adolescent were included in the analysis. This information was collected as background/demographic information for each survey

instrument. The question, "How old are you?" was utilized to capture the age of adults.

Research assistants who were trained to administer the survey instrument were required to gather the gender to complete each participant's survey face sheet (see Appendix B). Adolescents were asked, (a) "How old are you now?" and (b) "Are you male (boy) or female (girl)?" (see Appendix C).

The numbers of family members in the household were included in the analysis and were reported in the adult survey. Adults were asked to identify who had resided in their household over the past three months prior to administration of the survey instrument (see Appendix B). Calculating the sum of responses to this question generated the variable for number of family members in the household. Family mobility was also included in the data analysis. This was collected in the adult survey by asking the question, "How many times in the last three years have you moved?"

There are two variables that were included in the analysis to examine caregiver mental health. Both of these variables were collected in the adult survey. Caregiver depression (see Appendix B) was collected in the adult survey utilizing the CES-D Depression Scale (Radloff, 1977). High internal consistency has been reported for this measure with Cronbach's alpha coefficients ranging from .85 to .90 across studies (Radloff, 1977). Response categories indicate the frequency of occurrence of each identified symptom of depression, and were scored on a 4-point scale ranging from 0 (rarely or none of the time) to 3 (most or all of the time). Total scores ranged from 0 to 60.

Caregiver hopelessness (see Appendix B) was collected in the adult survey utilizing the Beck Hopelessness Scale. The scale consists of 20 true-false statements. Nine of the statements were worded negatively and 11 were worded positively. Each response was assigned a score of 0 or 1 with the possible range of scores ranging from 0 to 20. Steed (2001) conducted an

analysis of validity and reliability of this measure on a nonclinical sample. The author noted Cronbach's internal consistency coefficient of .88. The author further determined that the measure had strong convergent validity as evidenced by strong correlations with two similar instruments designed to measure the same construct.

Family environment was examined by utilizing adult responses to the Moos Family Environment Scale. The Moos Family Environment Scale (Appendix B) measures the social and environmental characteristics of families (Moos & Moos, 1994). The scale is based on an attributional conceptualization of family environment, including relationship, personal growth, and system maintenance characteristics (Table 2). The measure has shown strong face and content validity across samples, including comparison measures between family members. Internal consistency measures range from .61 to .78, inter-correlations range from -.53 to .45, and test-retest reliabilities range from .52 to .91.



Table 2

*Characteristics of Family Environment (Moos & Moos, 1994)*

<u>Relationship Dimensions</u>	
1. Cohesion	Degree of commitment, help, and support family members provide for one another
2. Expressiveness	Extent to which family members are encouraged to express their feelings directly
3. Conflict	Amount of openly expressed anger and conflict among family members
<u>Personal Growth Dimensions</u>	
4. Independence	Extent to which family members are assertive, are self-sufficient, and make their own decisions
5. Achievement Orientation	Extent to which activities (such as school and work) are cast into an achievement-oriented or competitive framework
6. Intellectual-Cultural Orientation	Level of interest in political, intellectual, and cultural activities
7. Active-Recreational Orientation	Participation in social and recreational activities
8. Moral-Religious Orientation	Emphasis on ethical and religious issues and values
<u>System Maintenance Dimensions</u>	
9. Organization	Degree of importance of clear organization and structure in planning family activities and responsibilities
10. Control	Extent to which set rules and procedures are used to run family life

Six questions on the MYS were utilized to measure adolescent hopelessness. This scale is referred to as the “Brief Hopelessness Scale” (Appendix C) by Bolland et al., (2005) and consists of five selected items from a hopelessness scale detailed by Kazdin, French, Unis, Esveldt-Dawson, and Sherick (1983), as well as one additional item regarding feelings about future survival. The items from the Kazdin hopelessness scale were selected based on highest item-total correlations (ranging from .41 to .71) as reported by Kazdin, et al. (1983). For the

Brief Hopelessness Scale, Bolland et al. (2005) report consistent internal reliability across six waves of longitudinal data from adolescent survey responses. The authors note Cronbach's alpha ranges between .71 and .74.

### **Hypotheses**

The hypotheses for this research were primarily focused on three dimensional characteristics of the Moos Family Environment Scale and how they influenced adolescent hopelessness. The hypotheses for the research were:

1. Higher scores on family cohesion, as measured by the Moos Family Environment Scale, will be associated with lower reported feelings of hopelessness among adolescents, as measured by the Brief Hopelessness Scale.
2. Higher scores on family expressiveness, as measured by the Moos Family Environment Scale, will be associated with lower reported feelings of hopelessness among adolescents, as measured by the Brief Hopelessness Scale.
3. Higher scores on family conflict, as measured by the Moos Family Environment Scale, will be associated with higher reported feelings of hopelessness among adolescents, as measured by the Brief Hopelessness Scale.
4. Higher scores on independence, as measured by the Moos Family Environment Scale, will be associated with lower reported feelings of hopelessness among adolescents, as measured by the Brief Hopelessness Scale.
5. Higher scores on achievement orientation, as measured by the Moss Family Environment Scale, will be associated with lower reported feelings of hopelessness among adolescents, as measured by the Brief Hopelessness Scale.

6. Higher scores on intellectual-cultural orientation, as measured by the Moos Family Environment Scale, will be associated with lower reported feelings of hopelessness among adolescents, as measured by the Brief Hopelessness Scale.
7. Higher scores on active-recreational orientation, as measured by the Moos Family Environment Scale, will be associated with lower reported feelings of hopelessness among adolescents, as measured by the Brief Hopelessness Scale.
8. Higher scores on moral-religious orientation, as measured by the Moos Family Environment Scale, will be associated with lower reported feelings of hopelessness among adolescents, as measured by the Brief Hopelessness Scale.
9. Higher scores on family organization, as measured by the Moos Family Environment Scale, will be associated with lower reported feelings of hopelessness among adolescents, as measured by the Brief Hopelessness Scale.
10. Higher scores on family control, as measured by the Moos Family Environment Scale, will be associated with lower feelings of hopelessness among adolescents, as measured by the Brief Hopelessness Scale.
11. Higher scores on caregiver depression, as measured by the CES-D depression scale, will be associated with higher feelings of hopelessness among adolescents, as measured by the Brief Hopelessness scale.
12. Higher scores on caregiver hopelessness, as measured by the Beck Hopelessness Scale, will be associated with higher feelings of hopelessness among adolescents, as measured by the Brief Hopelessness Scale.

## **Revised Hypotheses**

The preliminary data analysis resulted in a revision of the major hypotheses specific to the Family Environment Scale. The original hypotheses assumed independence of the individual dimensions of family environment. Due to issues with inter-correlations between dimensions and low internal consistency scores, revisions were made in how the scale items were interpreted. As a result, not all the original hypotheses could be tested. Details about the preliminary analyses, the revisions in interpretation, and the new hypotheses are provided in the results and discussion sections.

## **Data Analysis**

The initial step of evaluating the data and exploring the hypotheses was examining descriptive statistics. This step explored all variables related to the study and provided an overview of demographic data represented within the sample. The next step was to explore any correlations between variables within the data. This step was necessary to understand the relationship between variables and to determine independence for the purposes of multivariate analyses.

The final step was to explore the relationship between the independent variables (dimensions of family environment) and the dependent variable (adolescent hopelessness) using multivariate statistical analyses. The primary data analysis included a hierarchical linear modeling technique to examine the research hypotheses. This modeling technique was best fitted for this study due to the ability to address issues of nesting and potential issues of non-independence.

## Chapter 4

### Results

#### Sample Description

The sample consisted of 908 adolescent/caregiver dyads. There were 432 separate households within the sample. The average household size was 5.44 with a standard deviation of 2.00. The household size ranged in number from two to 11 members. Caregivers reported that the 44% of the households had experienced one or more moves in the past three years with a range of one to five.

The average age of the caregivers was 39 with a standard deviation of 9.77. The average age of the adolescents was 14 with a standard deviation of 2.67. Ages for caregivers ranged from 20 to 78, while for adolescents they ranged from nine to 19. For adolescents, the gender was close to evenly split with 49% male and 51% female; while for caregivers, females made up 95% of the sample. The average educational level of the caregiver was 11 years with a standard deviation of 1.58. The range in educational level for caregivers was six to 18 years.

#### Low-income Financial Stress

The median family income for the sample was \$800 a month. The calculation of this variable was complicated by the fact that respondents often reported various amounts of information regarding household income. Respondents varied in how they reported amounts. Self reported figures included yearly, monthly, weekly, and hourly wages. This complicated the process of calculating a reliable measure for monthly income.

Other measures were utilized to gauge the environment of financial stress for these families. Seventy-six percent of the sample reported that over the last six months they did not have enough money to make it to the end of the month, with 67% stating in general that it was hard for their family to live on their income. Seventy-one percent of respondents indicated they were worried about money over the past six months, with 80% reporting money problems during that same time period. Eighteen percent of the sample reported that they were worried about becoming homeless over the last six months.

### **Adolescent Hopelessness**

Adolescent hopelessness was measured by the Brief Hopelessness Scale. Spirito, Williams, Stark, and Hart (1988) reported on the psychometrics properties of the Kazdin's Hopelessness Scale for a population of children. Five items from the Hopelessness Scale for Children with the addition of one item constructed by Bolland et al. (2005) were utilized to create the Brief Hopelessness Scale for this study. These items are noted in the legend in Table 3.

Table 3

*Brief Hopelessness Scale Item Legend*

- Item 1 All I see ahead of me are bad things, not good things
- Item 2 There is no use in really trying to get what I want because I probably won't get it
- Item 3 I might as well give up because I can't make things better for myself
- Item 4 I don't have good luck now and there's no reason to think I will when I get older
- Item 5 I never get what I want so it is dumb to want anything
- Item 6 I don't expect to live a very long life

The average hopelessness score for adolescents was 1.34 with a standard deviation of

1.82. The range of scores was 0 to 6. The correlation matrix for the items included in the Brief Hopelessness Scale can be seen in Table 4. The comparison of total-item correlations between Spirito et al. (1988) and the present study can be seen in Table 5. The reliability measure for the Brief Hopelessness Scale for this sample was .779 for all six items versus .762 when removing the item constructed by Bolland et al. (2005).

Table 4

*Inter-item Correlation Matrix for Brief Hopelessness Scale*

	Item 1	Item 2	Item 3	Item 4	Item 5	Item 6
Item 1	1	.350	.416	.391	.372	0.269
Item 2		1	.302	.449	.373	0.283
Item 3			1	.438	.391	0.36
Item 4				1	.463	0.412
Item 5					1	0.305
Item 6						1

Table 5

*Item-Total Score Correlation Comparisons for Hopelessness Scales*

	<u>Spirito (1988)</u>	<u>Present Sample</u>
Item 1	.52	.50
Item 2	.47	.49
Item 3	.56	.54
Item 4	.50	.63
Item 5	.47	.54
Item 6	N/A	.45

## Dimensional Correlations of Family Environment Scale

In regards to the Moos Family Environment Scale, each dimension was calculated separately. Table 6 shows a comparison between the reported mean and standard deviation scores reported by Moos & Moos (1994) and those from the present sample.

	Reported By Moos & Moos (1994)		Present Sample	
	<u>Mean</u>	<u>SD</u>	<u>Mean</u>	<u>SD</u>
COH	6.73	1.47	4.86	2.75
EX	5.54	1.61	4.66	1.51
CON	3.18	1.91	4.43	2.31
IND	6.66	1.26	4.78	2.11
ACH	5.47	1.62	4.79	2.19
IC	5.56	1.82	4.70	2.10
AR	5.33	1.96	4.61	1.74
ORG	5.47	1.90	4.61	2.70
CONT	4.26	1.84	4.62	2.30
MR	4.75	2.03	4.88	2.90

## Caregiver Mental Health

Mental health of the caregivers was also examined. The average CES-D depression score for caregivers was 17.97 with a standard deviation of 10.94. Radloff (1977) established that a score between 16 and 20 is a level indicative of moderate depression, while scores higher than 20 represent levels indicative of major depression. For the hopelessness scale, the mean score was 3.27 with a standard deviation of 3.20.



## Adjusted Family Environment Dimensions

Item inter-correlations and reliability analyses were examined for each dimension of the Moos Family Environment Scale (FES). The alpha levels reported for the original study (Moos & Moos, 1994) were higher than those calculated for the present sample (see Table 7).

	Moos & Moos (1994)		Present Sample	
	All Items	All Items	Negative Items Only	Positive Items Only
COH	.780	.805	.210	.932
EX	.690	.001	.282	.664
CON	.750	.663	.336	.720
IND	.610	.571	.568	.709
ACH	.640	.602	-.044	.828
IC	.780	.555	.328	.672
AR	.670	.326	-.086	.662
ORG	.760	.782	.495	.841
CONT	.670	.658	.131	.859
MR	.780	.832	-.411	.899

The FES consists of both positively and negatively worded statements for each of its nine dimensions. As Table 7 illustrates, for this sample, the internal consistencies of the negatively worded items in each dimension were much lower than the internal consistencies of the positively worded items. For this analysis, therefore, negatively worded statements were removed and only positively worded statements were utilized to examine the different dimensions of family environment. (Appendix D outlines both the positively and negatively worded items for each dimension for the FES). Tables 8-10 show the correlations between dimensions for (a) the unadjusted variables, (b) the adjusted variable excluding positively worded statements, and (c) the adjusted variables excluding negatively worded statements. Lietz (2008) outline some concerns with instrumentation with specific detail given to issues regarding

negatively worded items. The upper half of the matrix for Table 8 represents the correlation values for the present sample, while the lower half of the matrix represents the values for the Family Environment Scale reported by Moos and Moos (1994).

The discrepancy in these reliability statistics was assumed to be the result of response bias from respondents becoming accustomed to positively worded statements, thereby overlooking the cue to respond on the opposite end of the response category for negative statements. Further, it is possible that families had difficulty describing what their family is versus describing what their family is not, thereby increasing the possibility of response bias.

Table 8

*FES Dimensional Correlations for Unadjusted Variables*

	COH	EX	CON	IND	ACH	IC	AR	ORG	CONT	MR
COH	1	.41	-.69	.75	.73	.65	.40	.81	.66	.81
EX	.32	1	-.33	.40	.27	.27	.26	.37	.21	.33
CON	-.53	-.07	1	-.56	-.44	-.48	-.24	-.67	-.41	-.59
IND	.30	.32	-.13	1	.68	.54	.32	.67	.66	.78
ACH	.11	-.05	.07	-.01	1	.55	.29	.65	.71	.82
IC	.38	.25	-.09	.27	.05	1	.44	.66	.50	.64
AR	.28	.22	.04	.34	.12	.40	1	.38	.26	.34
ORG	.22	-.01	.07	-.10	.31	.10	.04	1	.60	.75
CONT	.38	-.05	-.33	.04	.31	.14	.12	.27	1	.82
MR	-.20	-.42	.22	-.36	.40	-.03	-.05	.35	.27	1

Table 9

*FES Dimensional Correlations Excluding Positively Worded Statements*

	COH	EX	CON	IND	ACH	IC	AR	ORG	CONT	MR
COH	1	.369	.028	.402	.224	.347	.325	.419	.209	.228
EX		1	.257	.270	.089	.116	.405	.395	.234	.081
CON			1	-.210	-.034	-.077	.247	-.091	.127	-.309
IND				1	.428	.470	.248	.556	.327	.520
ACH					1	.346	.153	.302	.262	.426
IC						1	.237	.448	.249	.350
AR							1	.342	.185	.099
ORG								1	.213	.402
CONT									1	.269
MR										1

Table 10

*Moos Dimensional Correlations Excluding Negatively Worded Statements*

	COH	EX	CON	IND	ACH	IC	AR	ORG	CONT	MR
COH	1	.752	-.456	.792	.845	.758	.658	.817	.809	.860
EX		1	-.246	.666	.702	.686	.553	.678	.685	.726
CON			1	-.243	-.229	-.291	-.219	-.359	-.227	-.328
IND				1	.825	.695	.571	.730	.824	.850
ACH					1	.733	.635	.781	.858	.885
IC						1	.680	.709	.703	.774
AR							1	.646	.600	.660
ORG								1	.760	.799
CONT									1	.885
MR										1

**Hierarchical Linear Regression Model**

To explore the hypotheses, a hierarchical linear regression modeling (HLM) technique was employed. Specifically, an HLM framework with repeated measures was utilized due to the possibility that some adults were interviewed on multiple occasions and that adolescents were nested within households. The dependent variable for the model was adolescent hopelessness, as

measured by the Brief Hopelessness Scale. The independent variables were dimensions of family environment, measured by the Moos Family Environment Scale, as well as measures for caregiver mental health. The remaining variables were included in the model as control variables.

The high correlations between the dimensions of family environment in the present sample (see Table 8) cast doubt on the factor structure of the FES used with the present sample. To empirically identify the structure of the scale items with respect to family environment, as perceived by the current sample, an exploratory principal components “factor analysis”<sup>1</sup> was conducted. The summed scores for each of the positively worded items in each of the 10 dimensions identified by Moos and Moos (1994) were entered into the analysis. The resulting scree plot suggested a two-factor solution for this sample. The factor loadings for the varimax-rotated solution are provided in Table 11. Nine of the Moos and Moos dimensions loaded on factor 1 and the conflict dimension loaded on factor 2. Together, these factors account for 80% of the variance. For purposes of the remainder of this study, the second factor was labeled family conflict and the first factor was labeled support.

It should be noted that the changes listed above led to the revision of some of the original hypotheses regarding the dimensions of the family environment. The one hypothesis regarding family conflict, as well as the two hypotheses regarding caregiver mental health, remains unchanged. However, the findings related to the factor structure require a revision to the remaining hypotheses. The new “support” factor consequently required collapsing nine of the original hypotheses into one and postulating that higher scores on support, as measured by the new factor, will result in lower scores of adolescent hopelessness as measured by the Brief

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<sup>1</sup> Although the technical term is principal components analysis, the term “factor” is widely used and will be used here because of its greater familiarity.

Adolescent Hopelessness Scale. This revised hypothesis is utilized to further the results and discussion sections.

	<u>Component 1</u>	<u>Component 2</u>
Moral-Religious Organization	.928	.187
Achievement Orientation	.926	.121
Control	.911	.272
Independence	.884	.093
Cohesion	.873	.358
Organization	.841	.272
Intellectual-Cultural Orientation	.831	.121
Expressiveness	.803	.141
Active-Recreational Orientation	.743	.121
Conflict	-.145	-.982

The correlations for all the continuous variables included in the model can be seen in Table 12. In the HLM with adolescent hopelessness as the dependent variable, both conflict ( $p = .04$ ,  $SE = .045$ ,  $df = 298$ ) and support ( $p = .04$ ,  $SE = .005$ ,  $df = 293$ ) were statistically significant. The slope estimate for conflict was  $-.0931$  indicating that as scores on the conflict factor for family environment decreased, scores for adolescent hopelessness increased. The slope estimate for support was  $-.0106$ , indicating that as scores on the support factor for family environment decreased, scores for adolescent hopelessness increased. Figures for the entire HLM can be seen in Table 13.

Table 12

*Correlations For All Variables*

	ADLSCT HPLS	CON	SUP	DRPS ADLT	HPLS ADLT	ASLSCT AGE	XS MOVED	AGE ADLT	EDU ADLT	NUM HSHLD
ADLSCTHPLS	1	-.508	-.074	.038	.000	-.088	.032	-.019	-.062	.054
CON		1	-.340	.104	.020	-.021	-.009	-.058	.029	-.081
SUP			1	-.101	-.019	.043	.044	-.030	.123	.054
DPRSADLT				1	.510	.002	.025	-.003	-.119	.054
HPLSADLT					1	-.013	-.012	.163	-.157	.173
ADLSCTAGE						1	-.089	.194	.075	-.033
XSMOVED							1	-.141	-.047	.009
AGEADLT								1	.002	-.039
EDUADLT									1	-.240
NUMHSHLD										1

Table 13

*HLM Results with Adolescent Hopelessness As Dependent Variable*

<u>Variable</u>	<u>Estimate</u>	<u>SE</u>	<u>DF</u>	<u>P-value</u>
Conflict	-.0931	.045	298	.040
Non-Conflict Factor	-.0106	.005	293	.038
Caregiver Depression	.0063	.008	343	.436
Caregiver Hopelessness	-.0043	.028	275	.876
Caregiver Gender	.1087	.317	361	.732
Caregiver Education	-.0232	.051	310	.650
Caregiver Age	-.0001	.007	354	.896
Adolescent Age	-.0254	.026	669	.332
Adolescent Gender	-.0550	.045	667	.223
Household Size	.0460	.038	212	.227

Additional analyses of caregiver characteristics were conducted to determine the predictors of the two family environment factors. With the conflict factor of family environment (the sum of the items in factor 2 [the positively worded items in the FES Conflict dimension]) as

the dependent variable, caregiver depression was the only statistically significant variable in the model ( $p = .01$ ,  $SE = .027$ ,  $df = 319$ ). The slope estimate for caregiver depression was .0270, indicating that as caregiver depression scores increased, scores on the conflict factor for family environment increased. Results of this model can be seen in Table 14.

Table 14

*HLM Results With CON as Dependent Variable*

<u>Variable</u>	<u>Estimate</u>	<u>SE</u>	<u>DF</u>	<u>P-value</u>
Caregiver Depression	.0270	.0097	319	.005
Caregiver Hopelessness	-.0131	.0350	311	.707
Caregiver Gender (Male)	-.6375	.3727	349	.088
Caregiver Gender (Female)	0			
Caregiver Age	-.0096	.0086	339	.263
Caregiver Education	.0380	.0621	339	.541
Household Size	-.0819	.0490	279	.095

With the support factor of family environment (sum of the items in factor 1 [the positively worded items for all the FES dimensions except Conflict]) as the dependent variable, caregiver depression was again statistically significant ( $p = .05$ ,  $SE = .0830$ ,  $df = 313$ ). The slope estimate for caregiver depression was -.1626 indicating that as scores for caregiver depression decreased, scores increased for the support factor for family environment. Household size was also found to be statistically significant ( $p = .02$ ,  $SE = .4156$ ,  $df = 269$ ). The slope estimate for household size was 1.007 indicating that as household size increased, scores for the support factor of family environment increased. Results of this model can be seen in Table 15.

Table 15

*HLM Results With NONCON as Dependent Variable*

<u>Variable</u>	<u>Estimate</u>	<u>SE</u>	<u>DF</u>	<u>P-value</u>
Caregiver Depression	-.1626	.0830	313	.051
Caregiver Hopelessness	.3620	.2990	300	.227
Caregiver Gender (Male)	6.206	3.249	352	.057
Caregiver Gender (Female)	0			
Caregiver Age	-.0396	.0741	345	.594
Caregiver Education	.6987	.5369	341	.194
Household Size	1.007	.4156	269	.016



## Chapter 5

### Discussion

#### Results Regarding Dimensions of Family Environment

The primary goal of this research was to examine hypotheses related to the association between ten dimensions of family environment (measured by the FES) and adolescent feelings of hopelessness (measured by the MYS hopelessness scale). The psychometric properties of the FES for this study, however, did not allow testing of the original hypotheses related to nine of the dimensions.

The factor analysis conducted to assess the factor structure of the FES for this sample identified two factors which represented conflict and support. As noted in the results section above, the measure for conflict was the positively worded items that composed the conflict scale in the original instrument, while the support measure was the sum scores for the remaining positively worded items of the FES.

The conceptual nature of the conflict dimension for this analysis stands on its own merit; however, there is some room for exploring the conceptual nature of the support dimension. At its core, the dimensions of the Family Environment Scale are related to perceived social support between family members and the relative perception of the extent family members feel cared for and valued (Timko & Moos, 1996). It is prudent to postulate that the dimension not affiliated with conflict represents the overall picture of family expressiveness, acceptance, and camaraderie typically not associated with conflicting relationships; this conceptualization was utilized to forward the discussion of the present results.

Contrary to the hypotheses regarding conflict, results indicated that lower family conflict was associated with higher feelings of adolescent hopelessness. In a recent study, McElvey and colleagues (2011) noted that lower conflict in families, as measured by the Moos Family Environment Scale, was seen as a protective factor for adolescents internalizing and externalizing behaviors in high violence neighborhoods. Repetti, Taylor, and Seeman (2002) found consensus in the literature that risky family environments marked with conflict were related to negative emotional outcomes for adolescents.

Street and colleagues (2009) came to similar conclusions as those seen in the present study regarding conflict in African American families. In their research, the association of family conflict with children's psychosocial adjustment was not easily decipherable. In their research, family cohesion was a stronger predictor of adolescent adjustment. The authors were careful to conclude that conflict was not protective; rather, conflict was perhaps a mediating or moderating factor in family cohesion.

Considering the present results in conjunction with the findings of Street, Harris-Britt, and Wilkes-Barnes (2009), the contemporary conceptualization of conflict as always being negative may not hold true in all cases. Therefore, in some families, the mere absence of conflict may not necessarily lead to more positive outcomes and overall better adjustment of family members. Conflict may have a distal effect upon other factors present in the family which have greater impact on adolescent adjustment. Further research is needed to explore the relationship of conflict with various other family characteristics.

The present findings about conflict further highlight the importance of understanding the fluidity of family processes. In congruence with the ecological model, perhaps these findings point to a need to progress the understanding of family adaptation as a process within the

family's larger social context. Families who reside in high poverty, low-income neighborhoods frequently confront violence, chaos, and disorder. In these environments, internal family conflict may not carry as much influence on adolescent psychological outcomes.

For better or worse, family conflict may be perceived as engaged parenting from adolescents who face the stresses of residing in these neighborhoods. Parental reports of family conflict may simply be reflective of parenting behaviors necessary for effective child-rearing in stressful environments. Research on parenting has often concluded that the relationship between parenting styles and childhood/adolescent development is contextual and not universally applicable. In fact, the consequences of authoritarian parenting styles generally associated with negative outcomes for children/adolescents have shown to have potential protective functions in low-income, African American samples (see Pittman & Chase-Landale, 2001).

Also, it is possible that adolescent perceptions of parental involvement are influenced by the presence or absence of conflict in the family environment. Such may be the case that conflict in the family environment could potentially be perceived by adolescents as parental engagement, and lack of family conflict perceived as distanced parenting. There is some evidence to suggest this conclusion regarding adolescent perceptions of parenting styles across cultural, socio-economic, and contextual boundaries (see Pittman & Chase-Landale, 2001). These conclusions, in congruence with the results of this study, would indicate the need for more in-depth evaluation of parenting styles/characteristics to better understand these concepts in relation with family environment and the characteristics of the larger social context.

In regards to the support factor, the results showed that as scores for this measure decrease, scores for adolescent hopelessness increase. The conclusions from these results further the conceptual premises for the Family Environment Scale which suggests that a positive family

environment results in positive outcomes for adolescent mental health and their overall adjustment. Specifically, when a family's environment is supportive of family members this has positive implications for adolescents' overall health outcomes (see Repetti, Taylor, & Seeman, 2002; and Taylor, Repetti, & Seeman, 1997).

### **Results Regarding Caregiver Mental Health**

In regards to the hypotheses regarding caregiver mental health, the results indicated that neither caregiver hopelessness nor caregiver depression are directly associated with adolescent feelings of hopelessness, although subsequent analyses point to a potential indirect relationship between caregiver depression and adolescent feeling of hopelessness, taking into consideration the two dimensions of family environment identified with this sample. Higher depression among caregivers was related to increased family conflict. Lower depression among caregivers resulted in an increased supportive environment as represented by the support factor.

Research has indicated that parental mental illness often results in lower levels of parent-child interactions, difficulty communicating, and parental reports of difficulty completing normal household and child care tasks (Kaas, Lee, & Peitzman, 2003; and Thomas & Kalucy, 2003). It might be that parents who experience such disruptions in daily activity are affected such that conflict with their children and families is increased, in turn impacting their ability to contribute to a supportive family environment.

Research has also pointed to neighborhood and residential environment characteristics, similar to those found within the present sample's environmental context, influencing mental health among parents (Mair, Roux, & Galea, 2008; and Mulvaney & Kendrick, 2005). These environmental influences impact parental relationships with family members, perhaps evidenced

by increased conflict, and their ability/inability to provide supportive family environments as reflected in the support dimension.

Overall, all the results support the understanding of adolescent development and family processes within the framework provided by ecological systems theory. This research has pointed to the potential impact a neighborhood context has on a family's household environment, which in turn impacts parental well-being. These systems ultimately influence adolescent development and mental health outcomes.

### **Insights on Psychometric Properties of Moos Family Environment Scale**

The present results indicated incongruence between the Family Environment Scale psychometric properties reported by Moos & Moos (1994) and the psychometric properties of the scale used with this sample. This leads to a number of conclusions. Specifically, the present reliability and factor analyses for the scale call into question the viability of using the instrument, without modification, for such an extremely high-poverty sample. Moreover, there may be room for a culturally and/or socio-economically specific reassessment of the unique characteristics of families who face the contextual issues of this present sample and how those characteristics are evaluated via the Moos Family Environment Scale. Finally, there is some present support for flexibility in the structure and wording of the family environment scale for particular populations and contexts.

There is a body of research which has supported a bi-factorial structure for the family environment scale (Boake & Salmon, 1983; Fowler, 1981 & 1982; Oliver, Handal, Enos, & May, 1988, Woodall & Matthews, 1989). (It should be noted that Moos and Moos [1994] report that various studies have found ranges of 2 – 7 factors.) Although there is lack of consistency regarding the conceptualization of the two dimensions, there does exist a general consensus that

these dimensions primarily fall within (a) conflict vs. cohesion and (b) organizational/relationship dimensions. The present analysis supports these conclusions despite the vast demographic differences in the above-mentioned studies.

There remains a tremendous need to further evaluate the effectiveness of this research for low-income, urban African American families. Despite the support across varying demographic characteristics for a bi-factorial dimensional structure, cultural and/or socioeconomic issues could potentially cause biased conclusions regarding the family environment as outlined by the Family Environment Scale framework. Moos & Moos (1994) warn that normative samples for African Americans were small and primarily drawn from middle-class populations. Subsequent research on low-income, urban African American families has been limited with most studies controlling for socioeconomic status rather than examining the unique characteristics of these families.

The unique characteristics of the families in this sample, as well as the unique environmental characteristics of their neighborhoods potentially create negative conclusions regarding their family environment. Taken within the context of a high-violence environment, necessary parenting styles and techniques, and familial interactions may be seen as indicative of a poorer family environment. Although these "less optimal" interactions and familial characteristics, as defined by the Family Environment Scale, are present, this might not be the entire picture of what a parent perceives as necessary for his or her family's well-being. In short, survival in high-violence, high-poverty neighborhoods on a daily basis is not necessarily conducive with the goal of a democratic model of family processes and interactions.

Finally, the reliability analysis conducted on the scale for this present sample suggests a need for flexibility in the structure and wording of the instrument itself. The higher reliability

scores for positively worded items for each of the dimensions in this scale support this conclusion. Potential problems might be alleviated by addressing the potential confusion of answering false to negatively worded statements about family interactions.

### **Limitations**

The results of this study should be taken with consideration given to the various limitations. Specific limitations for this research include areas such as the nature of cross-sectional analyses, sources of data, timing of data collection, and instruments utilized for analysis.

The cross-sectional nature of this data presents problems when evaluating results. When examining the conclusions about the variables included in the analyses, it is prudent to consider the point-in-time nature of the data. Although data were collected from various years, the study methodology remains cross-sectional. That is, data from caregivers and adolescents were grouped within specific years of survey completion. So, data represented collection points across multiple years with relationships between variables being examined as a single point-in-time analysis. This design limits the conclusions of cause and effect, increases the probability of measurement error, allows less control of the independent variable, and undermines the ability to measure and examine change in variables across time.

The two sources of data that were utilized for this research also present limitations. These sources were utilized to gather measurements for various variables for analysis; however, each source of data provided different measures for different variables. That is, there were no measures which were gathered from both sources of data which would have created the opportunity to examine issues of reliability and validity in more detail.

Although within the same calendar year, collections of the two data sources were not collected at the same point in time within that year. Adolescent surveys were collected primarily during summer months, while caregiver surveys were collected year-round. This presents a threat to validity by time, undermining the chances of truly capturing a point-in-time picture of the measures utilized for the analyses. For example, the assumptions that family environment scores reported by a caregiver in early parts of the year would remain stable and be analyzed with reported scores of adolescent hopelessness in late summer are questionable.

The self-report natures of the surveys are also a potential limitation. Time, again, is a specific limitation in this context. Self-report surveys are biased by how a particular respondent feels at the time the survey is completed. This is only compounded by the fact that two sources of self-report surveys constitute collected data in this research.

Also, self-report surveys are prone to limitations presented by respondent bias. In these instances, respondents may feel hesitant to reveal “correct” answers to statements about themselves which are not accurate but rather represent what the respondent feels the researcher wants to hear. Respondent bias may be particularly applicable in this situation since the subject matter of measurement relates to intimate details of mental health and family dynamics. For example, depressed caregivers may be burdened by the clinical nature of their illness such that negative perceptions may complicate the true picture of the family environment. Therefore, the depression may influence the perception of household interaction more than is actually occurring which would bias the measurements of family environment. Even though this limitation is being noted, there is evidence to support the reliability of self-report measurement and methodologies (Chan, 2009).



The detailed discussion of the Family Environment Scale contained in this writing also highlights a limitation to this research. Specifically, the discussion of whether the Family Environment Scale is a good fit for use with this sample begs the question of its choice in the analyses. Although other possibilities exist in regards to available instruments for future research, this research represents secondary data analysis and the Family Environment Scale was the only available measure gauging specific family dynamics and processes with which to explore the research questions.

### **Future Research**

The results of this study point to several directions for future research. First, there is a need to understand the true nature of conflict and its impacts on family life and adjustment for families who reside in high-risk neighborhoods. Secondly, future research should consider the development of culturally and socio-economically relevant instruments for gauging family environment of low-income families who often reside in high-risk settings. Finally, future research would be better served with longitudinal data to explore more effectively the etiology of adolescent hopelessness as it is related to a family's environment.

There is a definitive need to capture a clearer picture of the nature of conflict and its implications for families who reside in high-risk environments. The results of the present study suggest that conflict within families is associated with lessened feelings of hopelessness among adolescents. The varying possible explanations for this association point to the need to explore further specific types of conflict which exist in these high-risk settings.

Future research should attempt to explore typologies of conflict within these families and within their larger social context. Differing types of conflict, some perhaps detrimental while some perhaps protective, may be present and have varying influences on social adjustment for

families. Exploring these questions would potentially serve the purpose of developing relevant strategies for deciphering the relationship between conflict and adolescent mental health development and adjustment, as well as a re-conceptualization of the role of interpersonal conflict between parents and adolescents for high-risk families.

The discussion above regarding the applicability of the Family Environment Scale for this specific sample suggests the potential need for a culturally/socio-economically relevant instrument for families facing the realities of a high-risk environment. The assumptions of many instruments to gauge family functioning often undermine and minimize the necessary requirements for families which are not present for many families in the general population. A broadened framework of family life within these high-risk environments could be utilized to design a relevant instrument which highlights these different necessities that families face in high-risk settings and place them within a rubric of possibly impacting adjustment positively rather than automatically assuming they are detrimental qualities. At the very least, a broadened framework would lessen the likelihood of invalid conclusions about families in high-risk environments which are centered on a conceptualization of family environment not relevant to the realities these families experience.

Finally, future research in this area would be better served by the use of longitudinal data to provide a better understanding of the relationship between family environment and adolescent mental health for these families. The limitation of cross-sectional data, compounded with the methodological strategy for merging the two sources of data, calls into question the conclusions about the data which would be minimized or even eliminated with longitudinal analyses. Having longitudinal data on these families regarding family adaption and adolescent adjustment over time would only strengthen conclusions. Further, longitudinal data would provide opportunities

to explore mobility and neighborhood context as a factor in understanding these families, seeing that a large percentage of these families experience frequent mobility.

### **Practice Implications**

This research shines light on various implications for social work practice. There exists room to interpret these results as suggesting a need for practice innovations on both the micro and macro level. On a micro level, practice innovations should consider the importance of understanding a family's social context when developing intervention programs. This consideration of setting progresses the overarching notion that interventions on a macro level addressing larger neighborhood changes are necessary to influence positive outcomes for families.

Often, interventions to address adolescent mental health are specifically targeted towards the individual. These approaches to interventions for improving adolescent adjustment are short sighted and potentially minimize the importance of family life on adolescent well-being and adjustment.

The results of this research point to the impact that family environment has on adolescent mental health, specifically adolescent hopelessness. Practitioners developing interventions should consider the importance of designing programs which include the entire family in addressing poor mental health outcomes for adolescents. Including the entire family provides the opportunity for addressing family environment concerns and introducing positive change for maladaptive patterns of interaction. It stands to reason that this type of approach has the potential to impact all family members at one time and increase accountability for change from all family members across time.

Specifically, the results regarding familial conflict should indicate the need to have realistic, evidence-based conceptualizations of family functioning in high-risk neighborhoods. Of course, the argument being made is not suggestive of supporting conflict in families; however, understanding the nature of conflict as it relates to family relationships and parenting in high-risk environments should be central to possible interventions. Reducing conflict should only be a central goal in conjunction with introducing strategies for increasing family cohesion and raising adolescents' understanding of parental behavior within a framework of working towards their positive development in high-risk neighborhoods.

Also, in specific regards to African American families in low-income neighborhoods, particular detail needs to be given to identifying individual and familial strengths. The difficulty in deciphering results related to family dynamics for families who reside in low-income, high-risk neighborhoods underscores the importance of the careful nature that should be given to identifying strengths. What on the surface may appear as deficits or dysfunction may be reflective of overarching familial strengths that could serve as a foundation for building stronger families.

Practical applications of this research indicate the need to intervene on a macro level regarding neighborhood environment. Social workers should strive to develop strategies which work towards improving neighborhood conditions, thereby working towards providing safe, supportive environments for families. Borrowing from the social capital theories and strategies of community-building and community organizing, efforts should be made to identify existing strengths of communities and neighborhoods in hopes of developing necessary resources for positive growth.

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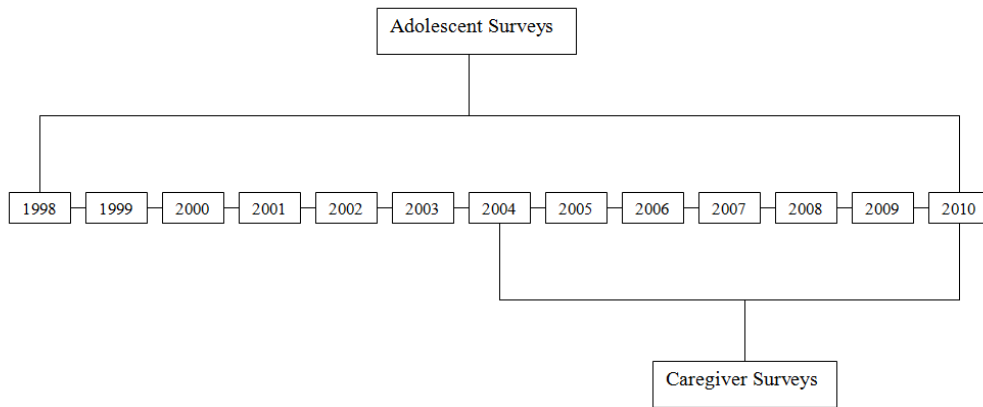
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Appendix A

**Original Source Data Collection Timeline**



Appendix B

**Adult Instruments**

**Demographics**

**ADULT QUESTIONNAIRE I**

Respondent's Name: \_\_\_\_\_

Respondent's Address: \_\_\_\_\_

Respondent's Date of Birth: \_\_\_\_\_

Respondent's Gender: 1 M 2 F 8 NA 9 DK

Respondent's Race: 1 Black 2 White 3 Mixed Race 4 Asian 8 NA 9 DK

Date of Interview: \_\_\_\_\_

Interviewer: \_\_\_\_\_

**I. Background and Household Composition**

In this first section, I want to ask you some questions about yourself.

1. How old are you?

\_\_\_\_\_ years

888 no answer  
999 don't know

2. How many years of education have you completed?

\_\_\_\_\_ years

88 no answer  
99 don't know

## Number of Family Members

6. Please tell me who has lived with you in your house or apartment during the past three months.

Name	Relationship	Age	Gender	Stays with you	
		Code	1=male 2=female	1=yes 2=sometimes 3=no 8=dk 9=na	current 1=yes 2=no 8=dk 9=na
a. _____	_____	_____	_____	_____	_____
b. _____	_____	_____	_____	_____	_____
c. _____	_____	_____	_____	_____	_____
d. _____	_____	_____	_____	_____	_____
e. _____	_____	_____	_____	_____	_____
f. _____	_____	_____	_____	_____	_____
g. _____	_____	_____	_____	_____	_____
h. _____	_____	_____	_____	_____	_____
i. _____	_____	_____	_____	_____	_____

7. How many times in the last 3 years have you moved?

\_\_\_\_\_ times

88 no answer  
99 don't know

## Financial and Economic Worry

During the past six months...	no	yes	na	dk
310. was there any time that you or your children needed to see a doctor or a dentist but you didn't go because you couldn't afford it?	1	2	8	9
311. have you been able to put any money in the bank for savings at the end of the month?	1	2	8	9
312. have there been times when you just didn't have enough money to make it to the end of the month?	1	2	8	9
313. has it been hard for your family to live on your income?	1	2	8	9
314. have you experienced money problems?	1	2	8	9
315. have you worried about financial matters?	1	2	8	9
316. have financial problems interfered with your relationships with other people?	1	2	8	9
317. have you worried about disappointing your <i>[child/children]</i> because you can't give them things they want?	1	2	8	9
318. have you worried about having money to celebrate holidays and other special occasions?	1	2	8	9
319. did you put off family activities, such as vacations, movies, or special events, because of the expense?	1	2	8	9
320. did you feel bad because you were unable to afford to buy your <i>[child/ children]</i> name-brand clothing that other children their age were wearing?	1	2	8	9
321. did you or your children go hungry because you couldn't afford food?	1	2	8	9
322. did you worry that you might become homeless?	1	2	8	9



## Depression

### II. Feelings

Now I am going to read a list of the ways you might have felt. Please tell us how often you have felt this way during the last week. If these feelings happened less than one day last week, indicate rarely. If they happened 1 or 2 day, indicate sometimes. If they happened 3 or 4 days, indicate occasionally. If they happened 5 or more days, indicate most of the time. Use Card RED A.

	rarely (<1)	sometimes (1-2)	occasionally (3-4)	most of the time (5+)	na	dk
8. I was bothered by things that usually don't bother me.	1	2	3	4	8	9
9. I felt like everything I did was an effort.	1	2	3	4	8	9
10. I felt that I was just as good as other people.	1	2	3	4	8	9
11. I had trouble keeping my mind on what I was doing.	1	2	3	4	8	9
12. During the last week, I felt sad.	1	2	3	4	8	9
13. During the last week, I felt afraid.	1	2	3	4	8	9
14. During the last week, I felt lonely.	1	2	3	4	8	9
15. During the last week, I had crying spells.	1	2	3	4	8	9
16. During the last week, I felt like not talking.	1	2	3	4	8	9
17. During the last week, I had trouble sleeping.	1	2	3	4	8	9
18. During the last week, I enjoyed life.	1	2	3	4	8	9
19. During the last week, I could not shake the blues, even with help from my friends and family.	1	2	3	4	8	9
20. During the last week, I thought my life had been a failure.	1	2	3	4	8	9
21. During the last week, I felt happy.	1	2	3	4	8	9
22. During the last week, I could not "get going."	1	2	3	4	8	9
23. During the last week, I felt hopeful about the future.	1	2	3	4	8	9
24. During the last week, I felt that people were unfriendly.	1	2	3	4	8	9
25. During the last week, my appetite was poor and I did not feel like eating.	1	2	3	4	8	9
26. During the last week, I felt depressed.	1	2	3	4	8	9
27. During the last week, I felt that people dislike me.	1	2	3	4	8	9

## Hopelessness

### IV. Feelings

Please tell me whether you disagree or agree with each of the following statements. Use Card RED D.

	disagree	agree	na	dk
76. I look forward to the future with hope and enthusiasm.	1	2	8	9
77. I might as well give up because I can't make things better for myself.	1	2	8	9
78. When things are going badly, I am helped by knowing they can't stay that way forever.	1	2	8	9
79. I can't imagine what my life would be like in 10 years.	1	2	8	9
80. I have enough time to accomplish the things I most want to do.	1	2	8	9
81. In the future, I expect to succeed in what is most important to me.	1	2	8	9
82. My future seems dark to me.	1	2	8	9
83. I expect to get more of the good things in life than the average person.	1	2	8	9
84. I just don't get the breaks, and there's no reason to believe I will in the future.	1	2	8	9
85. My past experiences have prepared me well for my future.	1	2	8	9
86. All I can see ahead of me is unpleasantness rather than pleasantness.	1	2	8	9
87. I don't expect to get what I really want.	1	2	8	9
88. When I look ahead to the future, I expect I will be happier than I am now.	1	2	8	9
89. Things just won't work out the way I want them to.	1	2	8	9
90. I have great faith in the future.	1	2	8	9
91. I never get what I want so it's foolish to want anything.	1	2	8	9
92. It is very unlikely that I will get any real satisfaction in the future.	1	2	8	9
93. The future seems vague and uncertain to me.	1	2	8	9
94. I can look forward to more good times than bad times.	1	2	8	9
95. There's no use in really trying to get what I want because I probably won't get it.	1	2	8	9

## Family Environment

Now, I would like to ask you some questions about your household. I will read you a number of statements about families, and I would like for you to tell me whether you think it is true or false for your household. You may feel that some of the statements are true for some household members and false for others. Indicate *AGREE* if it is true for most members of your household, and *DISAGREE* if it is false for most members of your household. If the members of your household are evenly divided, decide which is your stronger overall impression of your household. Remember, we would like to know what your household seems like to you. So don't try to figure out how other people see your family, or how you would like your household to be. Rather, give us your general impression of how your household is *NOW* for each statement. Use **Card RED D**.

Household members really help and support one another.	1	2	8	9
Household members are rarely ordered around.	1	2	8	9
We often seem to be killing time at home.	1	2	8	9
We say anything we want to around home.	1	2	8	9
Household members rarely become openly angry.	1	2	8	9
In our household, we are strongly encouraged to be independent.	1	2	8	9
Getting ahead in life is very important in our household.	1	2	8	9
We rarely go to lectures, plays, or concerts.	1	2	8	9
Friends often come over for dinner or to visit.	1	2	8	9
We don't say prayers in our household.	1	2	8	9
We are generally very neat and orderly.	1	2	8	9
Household members often keep their feelings to themselves.	1	2	8	9
There are very few rules to follow in our household.	1	2	8	9
We put a lot of energy into what we do at home.	1	2	8	9
It's hard to "blow off steam" at home without upsetting somebody.	1	2	8	9
Household members sometimes get so angry they throw things.	1	2	8	9

We work things out for ourselves in our household.	1	2	8	9
How much money a person makes is not very important to us.	1	2	8	9
Learning about new and different things is very important in our household.	1	2	8	9
Nobody in our household is very active in sports, Little League, bowling, etc.	1	2	8	9
We often talk about the religious meaning of Christmas, Passover, or other holidays.	1	2	8	9
It's often hard to find things when you need them in our household.	1	2	8	9
We fight a lot in our household.	1	2	8	9
There is one household member who makes most of the decisions.	1	2	8	9
There is a feeling of togetherness in our household.	1	2	8	9
We tell each other about our personal problems.	1	2	8	9
Household members hardly ever lose their tempers.	1	2	8	9
We come and go as we want in our household.	1	2	8	9
We believe in competition, and "may the best man win."	1	2	8	9
We are not that interested in cultural activities.	1	2	8	9
We often go to the movies, sports events, camping, etc.	1	2	8	9
We don't believe in heaven or hell.	1	2	8	9
Being on time is very important in our household.	1	2	8	9
We don't do things on our own very often in our household.	1	2	8	9
There are set ways of doing things at home.	1	2	8	9
We rarely volunteer when things have to be done at home.	1	2	8	9
If we feel like doing something on the spur of the moment, we just pick up and go.	1	2	8	9
Household members often criticize each other.	1	2	8	9
There is little privacy in our household.	1	2	8	9
We often strive to do things just a little better the next time.	1	2	8	9

We rarely have intellectual discussions.	1	2	8	9
Everyone in our household has a hobby or two.	1	2	8	9
Household members have strict ideas about what is right and wrong.	1	2	8	9
People change their minds often in our household.	1	2	8	9
We feel it is important to be the best at whatever we do.	1	2	8	9
There is a strong emphasis on following rules in our household.	1	2	8	9
Household members really back each other up.	1	2	8	9
Someone usually gets upset if you complain in our household.	1	2	8	9
Household members sometimes hit each other.	1	2	8	9
Household members almost always rely on <i>themselves</i> when a problem comes up.	1	2	8	9
Household members rarely worry about job promotions, school grades, etc.	1	2	8	9
Someone in our household plays a musical instrument.	1	2	8	9
Household members are not very involved in recreational activities outside work or school.	1	2	8	9
We believe there are some things you just have to take on faith.	1	2	8	9
Household members make sure their rooms are neat.	1	2	8	9
We often talk about politics and social problems.	1	2	8	9
Everyone has an equal say in household decisions.	1	2	8	9
There is little group spirit in our household.	1	2	8	9
Money and paying bills is openly talked about in our household.	1	2	8	9
If there's a disagreement in our household, we try hard to smooth things over and keep the peace.	1	2	8	9
Household members strongly encourage each other to stand up for their rights.	1	2	8	9
In our household, we don't try that hard to succeed.	1	2	8	9
Household members often go to the library.	1	2	8	9

Household members sometimes attend courses for some hobby or interest (outside of school).	1	2	8	9
In our household each person has different ideas about what is right and wrong.	1	2	8	9
Each person's duties are clearly defined in our household.	1	2	8	9
We spend most weekends or evenings together.	1	2	8	9
We can do whatever we want in our household.	1	2	8	9
We really get along well with each other.	1	2	8	9
We are usually careful about what we say to each other.	1	2	8	9
Household members often try to one-up or out-do each other.	1	2	8	9
It is hard to be by yourself without hurting someone's feelings in our household.	1	2	8	9
"Work before play" is the rule in our household.	1	2	8	9
Watching TV is more important than reading in our household.	1	2	8	9
Household members go out a lot.	1	2	8	9
The Bible is a very important book in our home.	1	2	8	9
Money is not handled very carefully in our household.	1	2	8	9
Household members attend church, synagogue, or Sunday School fairly often.	1	2	8	9
Rules are pretty flexible in our household.	1	2	8	9
There is plenty of time and attention for everyone in our household.	1	2	8	9
There are a lot of spontaneous discussions in our household.	1	2	8	9
In our household, we believe you don't ever get anywhere by raising your voice.	1	2	8	9
We are not really encouraged to speak up for ourselves in our household.	1	2	8	9
Household members often are compared with others as to how well they are doing at work or school.	1	2	8	9
Household members really like art and literature.	1	2	8	9
Our main form of entertainment is watching TV or listening to the radio or CDs.	1	2	8	9

Household members believe if you sin you will be punished.	1	2	8	9
Dishes are usually done immediately after dinner.	1	2	8	9
Activities in our household are pretty carefully planned.	1	2	8	9
You can't get away with much in our household.	1	2	8	9





100. When I am an adult, I expect to have a good job that I like and that will pay enough for me to live on.      (A)      (B)
101. When I am an adult, I expect to have good friends I can talk to and do things with.      (A)      (B)
102. When I am an adult, I expect to find a marriage partner who is right for me.      (A)      (B)
103. When I am an adult, I expect to have a long and happy marriage.      (A)      (B)
104. When I am an adult, I expect to spend time in jail or prison.      (A)      (B)

## Appendix D

### Item Description for Moos Family Environment Scale

#### **Conflict**

##### Positive

Household members sometimes get so angry they throw things.

We fight a lot in our household.

Household members often criticize each other.

Household members sometimes hit each other.

Household members often try to one-up or out-do each other.

##### Negative

Household members rarely become openly angry.

Household members hardly ever lose their tempers.

If there's a disagreement in our household, we try hard to smooth things over and keep the peace.

In our household, we believe you don't ever get anywhere by raising your voice.

#### **Cohesion**

##### Positive

Household members really help and support one another.

We put a lot of energy into what we do at home.

There is a feeling of togetherness in our household.

Household members really back each other up.

We really get along well with each other.

There is plenty of time and attention for everyone in our household.

##### Negative

We often seem to be killing time at home.

We rarely volunteer when things have to be done at home.

There is little group spirit in our household.

#### **Expressiveness**

##### Positive

We say anything we want to around home.

We tell each other about our personal problems.

If we feel like doing something on the spur of the moment, we just pick up and go.

Money and paying bills is openly talked about in our household.

There are a lot of spontaneous discussions in our household.

### Negative

Household members often keep their feelings to themselves.  
It's hard to "blow off steam" at home without upsetting somebody.  
Someone usually gets upset if you complain in our household.  
We are usually careful about what we say to each other.

### **Independence**

#### Positive

In our household, we are strongly encouraged to be independent.  
We work things out for ourselves in our household.  
We come and go as we want in our household.  
Household members almost always rely on *themselves* when a problem comes up.  
Household members strongly encourage each other to stand up for their rights.

#### Negative

We don't do things on our own very often in our household.  
There is little privacy in our household.  
It is hard to be by yourself without hurting someone's feelings in our household.  
We are not really encouraged to speak up for ourselves in our household.

### **Achievement Orientation**

#### Positive

Getting ahead in life is very important in our household. We believe in competition, and "may the best man win." We often strive to do things just a little better the next time. We feel it is important to be the best at whatever we do. "Work before play" is the rule in our household.  
Household members often are compared with others as to how well they are doing at work or school.

#### Negative

How much money a person makes is not very important to us.  
Household members rarely worry about job promotions, school grades, etc.  
In our household, we don't try that hard to succeed.

### **Intellectual-Cultural Orientation**

#### Positive

Learning about new and different things is very important in our household.  
Someone in our household plays a musical instrument.  
We often talk about politics and social problems.  
Household members often go to the library.  
Household members really like art and literature.

### Negative

We rarely go to lectures, plays, or concerts.

We are not that interested in cultural activities.

We rarely have intellectual discussions.

Watching TV is more important than reading in our household.

### **Active-Recreational Orientation**

#### Positive

Friends often come over for dinner or to visit.

We often go to the movies, sports events, camping, etc.

Everyone in our household has a hobby or two.

Household members sometimes attend courses for some hobby or interest (outside of school).

Household members go out a lot.

#### Negative

Nobody in our household is very active in sports, Little League, bowling, etc.

Household members are not very involved in recreational activities outside work or school.

We spend most weekends or evenings together.

Our main form of entertainment is watching TV or listening to the radio or CDs.

### **Organization**

#### Positive

We are generally very neat and orderly.

Being on time is very important in our household.

Household members make sure their rooms are neat.

Each person's duties are clearly defined in our household.

Dishes are usually done immediately after dinner.

Activities in our household are pretty carefully planned.

#### Negative

It's often hard to find things when you need them in our household.

People change their minds often in our household.

Money is not handled very carefully in our household.

### **Control**

#### Positive

There is one household member who makes most of the decisions.

There are set ways of doing things at home.

There is a strong emphasis on following rules in our household.

Rules are pretty flexible in our household.

You can't get away with much in our household.

Negative

Household members are rarely ordered around.

There are very few rules to follow in our household.

Everyone has an equal say in household decisions.

We can do whatever we want in our household.

**Moral-Religious Orientation**

Positive

We often talk about the religious meaning of Christmas, Passover, or other holidays.

Household members have strict ideas about what is right and wrong.

We believe there are some things you just have to take on faith.

The Bible is a very important book in our home.

Household members attend church, synagogue, or Sunday school fairly often.

Household members believe if you sin you will be punished.

Negative

We don't say prayers in our household.

We don't believe in heaven or hell.

In our household each person has different ideas about what is right and wrong.

Office for Research

Institutional Review Board for the  
Protection of Human Subjects

THE UNIVERSITY OF  
**ALABAMA**  
RESEARCH

June 22, 2011

Josh Wimberly, LGSW  
2827 Southwood Trail  
Bessemer, AL 35022

Re: IRB#: 11-OR-212 "The Relationship Between Family Environment and Adolescent Feelings of Hopelessness Among Low-Income, Urban African-American Families"

Dear Mr. Wimberly:

The University of Alabama Institutional Review Board has granted approval for your proposed research.

Your application has been given expedited approval according to 45 CFR part 46. Approval has been given under expedited review category 7 as outlined below:

(7) Research on individual or group characteristics or behavior (including, but not limited to, research on perception, cognition, motivation, identity, language, communication, cultural beliefs or practices, and social behavior) or research employing survey, interview, oral history, focus group, program evaluation, human factors evaluation, or quality assurance methodologies

Your application will expire on June 21, 2012. If your research will continue beyond this date, complete the relevant portions of IRB Renewal Application. If you wish to modify the application, complete the Modification of an Approved Protocol Form. Changes in this study cannot be initiated without IRB approval, except when necessary to eliminate apparent immediate hazards to participants. When the study closes, complete the appropriate portions of the Request for Study Closure Form.

Should you need to submit any further correspondence regarding this proposal, please include the above application number.

Good luck with your research.

Sincerely,

Carpantano T. Myles, MSM, CIM  
Director & Research Compliance Officer  
Office of Research Compliance  
The University of Alabama



338 Rose Administration Building  
Box 870127  
Tuscaloosa, Alabama 35487-0127  
(205) 348-8491  
fax (205) 348-7189  
toll free (877) 820-3096

IRB Project #: 11-OR-212

UNIVERSITY OF ALABAMA  
INSTITUTIONAL REVIEW BOARD FOR THE PROTECTION OF HUMAN SUBJECTS  
REQUEST FOR APPROVAL OF RESEARCH INVOLVING HUMAN SUBJECTS

I. Identifying information (to be completed by Principal Investigator):

Principal Investigator(s): Josh Wimberly, LGSW  
If PI is a student, Faculty Advisor: Cassandra Simon, Ph.D.  
Department/College: Social Work  
Address: 2827 Southwood Trail Bessemer, AL 35022  
Telephone: (205) 307-9381  
FAX:  
E-mail: wimbe006@crimson.ua.edu  
Title of Research Project: THE RELATIONSHIP BETWEEN FAMILY ENVIRONMENT AND ADOLESCENT  
FEELINGS OF HOPELESSNESS AMONG LOW-INCOME, URBAN AFRICAN AMERICAN FAMILIES  
Date Submitted: 04/2011  
Funding Source:

Type of Proposal:  New  Revision or  
supplemental material  Renewal  
(attach Renewal Application)

II. NOTIFICATION OF IRB ACTION (to be completed by IRB):

Type of Review:  Full board  Expedited

IRB Action:

Approved—this proposal complies with University and federal regulations for the protection of  
human subjects.

Approval is effective until the following date: \_\_\_\_\_

Items approved: \_\_\_\_\_ Research protocol (dated \_\_\_\_\_)

\_\_\_\_\_ Informed consent (dated \_\_\_\_\_)

\_\_\_\_\_ Recruitment materials: \_\_\_\_\_

\_\_\_\_\_ Other: \_\_\_\_\_

\_\_\_\_\_ Revisions requested—see attached pages for needed revisions.

\_\_\_\_\_ Disapproved—see attached pages for reasons for disapproval.

Approval signature \_\_\_\_\_ Date 6/22/2011

Revised 4/15/01