Journal of Counseling Psychology
1996, Vol. 43, No. 2, 218–227

0022-0167/96/$3.00

The Relationship of Victimization Experiences to Psychological Well-Being Among Homeless Women and Low-Income Housed Women

Kathleen M. Ingram, Alexandra F. Corning, and Lyle D. Schmidt
The Ohio State University

Stressful experiences and their effects on the psychological well-being of 113 homeless women and 116 low-income housed women were investigated. Measures of victimization assessed multiple dimensions of this construct, including criminal victimization, sexual harassment, and sexual abuse. Measures of current daily environmental hassles and quality of family environment while growing up also were included. Additional measures assessed positive and negative interpersonal exchanges, sense of coherence, and overall psychological distress. Regression analyses indicated that victimization experiences were significant predictors of psychological well-being for both samples. Results also highlighted the importance of investigating both the positive and negative dimensions of interpersonal influences as well as internal resources, and suggested that these resources for coping with stress may be differentially perceived and utilized by these groups. These findings also suggest the need for specific preventive and remedial interventions to empower homeless and low-income housed women.

Homelessness has been viewed as a problem to which the resources available to psychologists are particularly applicable. The APA Council of Representatives (1991) stated that the problem of homelessness is in need of attention from psychologists for a number of reasons, including the fact that shelter is a basic human need on which other developmental processes rest; homelessness disproportionately affects underserved groups with decreased access to basic resources; homelessness may be a precursor to, as well as a result of, various types of mental distress; and psychologists possess the needed knowledge and skills to act on behalf of this diverse population. Accordingly, the APA Council of Representatives (1991) approved a Resolution on Homelessness that called for action on this problem, including the stimulation and dissemination of research and the recommendation of action strategies to policy makers at various levels.

Counseling psychologists are especially well-equipped to provide services to people who are homeless. In general, this underserved and understudied population contains persons in lower socioeconomic strata who disproportionately are racial minorities with few resources for breaking cycles of poverty and homelessness (Bassuk & Rosenberg, 1988; D'Ercole & Struening, 1990). Counseling psychologists have defined their practice to include the importance of environmental factors in assessing and treating psychological functioning (Gelso & Fretz, 1992) and have demonstrated leadership in providing training for persons working with underserved, diverse populations (Quintana & Bernal, 1995). Additionally, counseling psychologists' emphasis on preventive and remedial individual- and community-based strategies may be applied to interrupting the pattern of cycling in and out of homelessness so characteristic of many homeless persons, particularly women and families, who experience chronically unstable residential arrangements (Milburn & D'Ercole, 1991; Wood, Valdez, Hayashi, & Shen, 1990). Finally, a focus on the positive aspects of homeless persons' adjustment strategies may provide coun-

Kathleen M. Ingram, Alexandra F. Corning, and Lyle D. Schmidt, Department of Psychology, The Ohio State University. Kathleen M. Ingram is now at the Department of Psychology, Virginia Commonwealth University. Alexandra F. Corning is now at the Department of Counseling Psychology, University of Wisconsin—Madison.

This research was funded by a grant from The Ohio State University Committee on Urban Affairs and was supplemented by funds provided by The Ohio State University Department of Psychology. We wish to express our gratitude to staff at the following agencies and organizations where data were collected: Central Community House, Faith Mission, Friends of the Homeless, the Hilltop Civic Council, the Homeless Families Foundation, the Salvation Army, Southside Settlement House, Volunteers of America, the Women's Housing Collaborative, and the YWCA, all of Columbus, Ohio; ACCESS, Inc. and Harvest Home, both of Akron, Ohio; and the YWCA Shelter and Housing Network of Dayton, Ohio. We extend special thanks to Lee Blons of the Women's Housing Collaborative and Helen Hartnett of the Ohio Coalition for the Homeless for their invaluable assistance in helping the researchers to make contact with relevant agencies and to become more sensitive to the experiences of homeless women. Additionally, we thank Kim Christensen, Terri Davis, Eugia Littlejohn, Janet Olson Gay, and Neesha Patel for their help in the data collection and Daniel Myers for his critique of an earlier version of our article. We also express our deep appreciation to Sarah T. Boysen for having inspired the initiation of this project.

Correspondence concerning this article should be addressed to Lyle D. Schmidt, Department of Psychology, The Ohio State University, 113 Townshend Hall, 1885 Neil Avenue Mall, Columbus, Ohio 43210.

seling psychologists, in particular, with a solid foundation on which to build effective, personalized interventions.

The dramatic increase in the proportion of women among the homeless population from 25% in the late 1970s to 50% in the 1980s (Slavinsky & Cousins, 1982) has been referred to as the feminization of homelessness by Bassuk (1987). However, although women continue to constitute a growing proportion of the homeless population (Hodnicki, Horner, & Boyle, 1992), relatively little research has been concerned exclusively with homeless women (Hagen, 1987). The limited research that has been done on homeless women has focused primarily on descriptive characteristics such as history of homelessness (Hagen & Ivanoff, 1988), alcohol use (Anderson, 1987), history of psychological problems (Burt & Cohen, 1989), and number and type of social supports (Bassuk, 1990). In general, little study has been made of the experiences of homeless women and low-income housed women who may be at risk of becoming homeless.

One important experience in the lives of homeless women is that of victimization. Although the prevalence of victimization among homeless and low-income housed women has been documented (e.g., Bassuk & Rosenberg, 1988; Benda, 1991; Caslyn & Morse, 1990; Coston, 1989; Goodman, 1991; Simons, Whitbeck, & Bales, 1989), few studies have explored the psychological effects of victimization (D'Ercole & Struening, 1990; Simons et al., 1989) or the relationships among victimization, internal resources, and perceptions of the availability of social support.

Moreover, in most studies of victimization with samples of homeless persons, researchers have assessed only a narrow range of victimization experiences and have not distinguished between women and men in their analyses. In addition, instruments used in these studies typically have contained broad questions about sexual and physical abuse employing dichotomous response formats, rather than questions about individualized perceptions of abuse and level of severity. Finally, few studies of homelessness have included a low-income housed comparison group, thus making it impossible to determine whether their findings apply only to homeless persons or, more generally, to persons living in poverty.

Notable exceptions exist, however, particularly with regard to the variables of childhood and adult sexual and physical abuse as well as social support. For example, Bassuk and Rosenberg (1988) sampled homeless and low-income housed women and found that homeless women were much more likely than low-income housed women to have been abused as children, to have been battered by an adult partner, and to have fewer social supports. Wood et al. (1990) included a low-income housed comparison sample in their study of homeless women and also found among the homeless sample a greater frequency of having been abused as a child, a greater frequency of being battered in an adult relationship, and the presence of weaker social support networks. Shinn, Knickman, and Weitzman (1991) also studied homeless and low-income housed women and found higher incidences of childhood physical and sexual abuse and adulthood relationship abuse or threats among their homeless participants. In contrast to these studies, Goodman (1991) found no differences between low-income housed and homeless mothers with regard to childhood physical abuse and sexual abuse, and adult physical abuse, and, in fact, found higher rates of adult sexual abuse among the low-income housed women. Both the prevalence of victimization among homeless women and the coping resources perceived available to members of this group require further definition.

Also in need of further study is the relationship between victimization experiences and the psychological health of homeless women. Milburn and D'Ercole (1991, p. 1162) have proposed a model for understanding the relationships among victimization, social support, coping resources, and homelessness. These authors view stress as a "relational process that occurs through the interaction of a threatening circumstance . . . and the psychological and social resources that one calls on to address the threat." Milburn and D'Ercole have conceptualized victimization as a stressor that may lead to homelessness or maintain the process of cycling in and out of homelessness, and that external and internal resources, such as social support and personal coping skills, respectively, may serve as buffers between victimization and distress.

Although the relationship between victimization and homelessness is in need of clarification, Milburn and D'Ercole (1991) have suggested that the psychological effects of victimization may have a negative impact on a woman's ability to extricate herself from homelessness. D'Ercole and Struening (1990), for example, found significant positive relationships between various types of victimization experiences and levels of depression among homeless women. Milburn and D'Ercole have hypothesized that such psychological symptoms may hinder a person's ability to cope with additional stressors, and thus diminish an individual's ability to disengage from a cycle of homelessness. It also is possible that daily hassles in one's environment (e.g., dirt, bugs, and crowding), which have received little attention in the homeless literature, may serve as additive psychological stressors.

The presence of positive social support has been found to modify the relationship between stressors and distress across a variety of populations (Vitaliano, Maiuro, Bolton, & Armsden, 1987). Homeless women, compared to both low-income housed women and homeless men, have weaker and more frequently disrupted social networks (i.e., the loss of previous supports; Bassuk & Rosenberg, 1988; Crystal, 1984; Wood et al., 1990). In studying the potential buffering effects of social support for homeless women, it is also important, however, to assess negative or unsupportive aspects of social networks. In studies of other chronically stressed populations such as caregivers of persons with Alzheimer's disease, the elements of social support perceived by the individual as negative were more strongly and consistently related to psychological well-being than were the perceived positive elements (Fiore, Becker, & Coppel, 1983; Kiecolt-Glaser, Dyer, & Shuttleworth, 1988; Pagel, Erdly, & Becker, 1987; Rook, 1984).

Finally, the role of internal coping resources as buffers against distress has received empirical support (e.g., Pearlin, Lieberman, Menaghan, & Mullan, 1981). Among homeless women, however, there has been little study of the influence

of internal resources on perceptions of and reactions to stressful experiences (Milburn & D'Ercole, 1991), particularly victimization experiences.

Using the model proposed by Milburn and D'Ercole (1991), the present study extends previous research on victimization among homeless women. The purpose of this study was to better understand the relationship between stressful experiences and psychological well-being, and to examine the additive influence of social support and internal resources on well-being. Stressors examined in the present study were several types of adult victimization, including criminal victimization, recent sexual harassment, and sexual experiences, as well as current daily hassles in the environment and the quality of the childhood environment while growing up. Both positive and negative aspects of social interactions and internal coping resources were examined. Finally, four measures of psychological distress—anxiety, depression, somatization, and overall distress—were examined to further clarify the types of psychological symptoms found among homeless women experiencing victimization-based and environmental stress.

On the basis of previous research and the stress model proposed by Milburn and D'Ercole (1991), we hypothesized that there would be significant differences between the low-income housed and homeless samples regarding (a) the frequency of victimization experiences, (b) the number of environmental hassles, (c) the quality of the family environment while growing up, and (d) perceptions of positive and negative aspects of social relationships and available supports, as well as internal resources. Additionally, we hypothesized that poorer psychological health would be positively related to adult victimization experiences, problems in the family environment while growing up, daily environmental hassles, and negative social interactions, and inversely related to satisfaction with perceived positive social support and internal coping resources. To test the predictive utility of the stress model, we hypothesized that the stressors of victimization (criminal victimization, recent sexual harassment, and sexual victimization), daily environmental hassles, and problems in the family environment while growing up would account for a significant amount of the variance in psychological distress. Further, we hypothesized that the interpersonal influences of satisfaction with social support and negative social interactions and the internal resource of sense of coherence would account for significant increments of variance in psychological distress beyond that explained by the stressors, but differentially across the two samples. Specifically, it was hypothesized that the homeless women would perceive less social support in their environments than the housed women and, thus, rely more on their internal resources for coping with stressful life experiences, and that the low-income housed women would rely more on their perceived external supports.

Method

Participants

The mean age for the low-income housed participants was 31.92 years (SD = 13.17) and 33.68 (SD = 10.63) for the homeless participants. Ethnicity indicated by the low-income housed sample was 66% African American/Black, 25% Caucasian/White, 3% Native American, 3% Asian, 3% multiethnic, and 2% some other unspecified ethnicity. The ethnic composition of the homeless sample was similar, with 66% identifying themselves as African American/Black, 29% as Caucasian/White, 1% as Native American, 2% as Asian, and 3% as multiethnic.

Education level reported by both samples ranged from grade school to college graduate. In the homeless sample, 27% had completed Grade 11 or less, 31% had received a high school diploma, 37% had completed some college, and 5% had graduated from college. In the housed sample, 39% had completed Grade 11 or less, 25% held a high school diploma, 26% had completed some college, and 10% held a college degree. In terms of relationship status, 41% of the homeless women reported they were married or partnered, and 59% indicated they were not in a steady relationship. In the housed sample, 64% were married or partnered, and 36% were not in a steady relationship. The average number of children was 2.4 in both samples (SD = 1.88 for the homeless sample; SD = 1.94 for the housed sample). Of the homeless women, 16% had no children, 43% had one or two, 27% had three or four, and 14% had five or more. Similarly, 15% of the housed women had no children, 42% had one or two, 33% had three or four, and 10% had five or more. The average number of children living with the women was 1.06 in the homeless sample (SD = 1.28) and 1.81 in the housed sample (SD = 1.76). Fifty-two percent of the homeless women and 83% of the housed women reported they had one or more children living with them.

Measures

Victimization. Three measures were used to assess experiences of victimization. Criminal victimization was assessed by a 5-item instrument developed by Simons et al. (1989). Respondents report how frequently (ranging from 1 = *never* to 4 = *three or more times*) they had experienced particular criminal acts such as being threatened with a weapon, beaten up, or robbed. Scores obtained by summing across the 5 items can range from 5 to 20. Internal consistency reliability estimates for this scale have ranged from .78 to .85 (Simons et al., 1989; Whitbeck & Simons, 1993). In the present study, Cronbach's alpha was .85.

A second type of victimization, sexual harassment, was measured using a modified version of the 5-item Recent Sexual Harassment Scale developed by D'Ercole and Struening (1990). The modified version, which employs a continuum rather than dichotomous choices, asked respondents to indicate the extent to which they had experienced each of five behaviors (e.g., "pressure for sexual favors") on a 5-point scale ranging from 0 (*never*) to 4 (*very often*). Scores for the scale are obtained by summing across the 5 items and can range from 0 to 20. D'Ercole and Struening reported an internal consistency reliability estimate of .87. In the present study, coefficient alpha was estimated at .84.

The extent of sexual victimization by men was assessed using the Sexual Experiences Survey (SES; Koss & Oros, 1982). The 13 items on the SES are arranged in order of increasing severity and are designed to measure degrees of experienced sexual aggression and victimization ranging from having intercourse with a man because of his threats of leaving the relationship, to rape. For each item, respondents provide a *yes* or *no* answer to indicate whether they ever have experienced that type of sexual victimization. Scores for the SES are obtained by classifying respondents according to the highest number (most severe) item to which they responded *yes*. The five classifications for respondents are nonvictimized, sexual contact, sexual coercion, attempted rape, and rape. Koss and Gidycz (1985) reported an internal consistency

reliability estimate of .74, and a test–retest reliability coefficient of .93 using a 1-week interval. Evidence for the construct validity of the SES includes significant correlations between a woman's level of victimization based on the SES and her level of victimization based on responses to an interviewer several months later (Koss & Gidycz, 1985). For the present study, in addition to the severity classification, a total score was obtained by summing the individual's responses to the 10 aggressive sexual experiences items.

Environmental stressors. The respondent's dissatisfaction with her living arrangements was assessed by the Daily Environmental Hassles Scale (LaGory, Ritchey, & Mullis, 1990). The 10 items in the scale represent potential problems such as physical factors (e.g., "dirt or bugs") or social factors (e.g., "lack of privacy"). Respondents indicate whether each item was a problem with the place they stayed the previous night. Scores on the scale, which can range from 0 to 10, are the number of problems the respondent reported having experienced. Higher scores indicate greater dissatisfaction with the environment. Internal consistency has been estimated at .78 (LaGory et al., 1990). In the present study, Cronbach's alpha was .87.

Interpersonal influences. Two measures were used to assess interpersonal influence. One was an adapted version of the 6-item Social Support Questionnaire (SSQ-6) developed by Sarason, Sarason, Shearin, and Pierce (1987). The SSQ-6 measures global perceptions of available social support. The first part of each item asks the respondent to list the number of supports she believes she has for a particular situation (e.g., "How many people can you really count on to care about you, regardless of what is happening to you?"). Unlike the original form of the SSQ-6, which asks respondents to list the initials of each of those individuals, the adapted version asks only for the number of people. The second part of each item uses a 6-point scale ranging from 1 (*very dissatisfied*) to 6 (*very satisfied*) to assess the individual's degree of satisfaction with her supports for the situation described. Scores are the mean number of support persons (Number scale) and the mean level of satisfaction (Satisfaction scale) across the 6 items. Internal consistency reliability estimates for the two subscales have ranged from .90 to .93 (Sarason et al., 1987). Alpha coefficients for the present sample were .96 and .91 for the Number and Satisfaction scales, respectively.

The second measure of interpersonal influences, the Test of Negative Social Exchange (TENSE; Ruehlman & Karoly, 1991), assessed how often respondents experienced a range of negative social interactions and contained four subscales: Hostility/Impatience, Interference, Insensitivity, and Ridicule. Respondents indicated how frequently each of the exchanges occurred (e.g., "distracted me when I was doing something important") on a 5-point scale ranging from 0 (*not at all*) to 4 (*about every day*). Scores for each subscale are the mean of the four items making up that subscale. Internal consistency estimates for the four subscales have ranged from .70 to .83. Cronbach's alpha in the present study ranged from .74 for Ridicule to .88 for Insensitivity. Evidence supporting the construct validity of the instrument includes significant correlations between the TENSE and measures of anxiety, depression, and satisfaction with life (Ruehlman & Karoly, 1991).

Internal resources. Sense of coherence was assessed by the short form of the Sense of Coherence Scale (SOC-13; Antonovsky, 1987). Thirteen items measure the extent to which an individual sees his or her life as having meaning, comprehensibility, and manageability. Responses are made on a 7-point scale with anchors varying by item. An example of an item is "How often do you have the feeling that there's little meaning in the things you do in your daily life?" (1 = *very often*, 7 = *very seldom or never*). Five items are reverse scored. Scores can range from 13 to 91, with higher scores indicating a stronger sense of coherence. According to Antonovsky (1993), Cronbach's alpha for the SOC-13 has ranged from .74 to .91. In the present study, coefficient alpha was estimated at .80. Evidence supporting the validity of the instrument includes correlations between the SOC-13 and measures of self-esteem, anxiety, and self-reported health status (Antonovsky, 1993).

Psychological distress. Overall psychological distress as well as three subdimensions of psychological distress were measured by a 30-item version of the Hopkins Symptom Checklist (HSCL; Derogatis, Lipman, Rickels, Uhlenhuth, & Covi, 1974), an instrument designed to assess symptoms among psychiatric outpatients. Three of the five HSCL subscales, Anxiety, Depression, and Somatization, were used in the present study. Respondents rated how intensely they had experienced each symptom during the past few months on a 5-point scale ranging from 1 (*not at all*) to 5 (*extremely*). Scores for each subscale are the mean distress rating across the items contributing to that subscale. Because the subscales have been found to be highly correlated (e.g., Williamson, Borduin, & Howe, 1991), it is conventional that an overall psychological distress score be obtained by summing the respondent's subscale scores (see, for example, Good et al., 1995). Derogatis et al. reported internal consistency reliability coefficients ranging from .84 to .87 for each of the three subscales, and test–retest reliability estimates ranging from .75 to .82 over a 1-week interval. Alpha coefficients for the present study were .84 for Anxiety and Somatization, .87 for Depression, and .85 for Overall Distress. Evidence supporting the construct validity of the HSCL has been reported by Rickels, Lipman, Garcia, and Fisher (1972) in a study comparing patients' distress levels on the symptom dimensions with ratings by clinical practitioners.

Demographic information. The demographic questionnaire included questions concerning age, race or ethnicity, education, number of children, number of children living with the respondent, and relationship status. Additionally, a 7-item scale based on a measure developed by Whitbeck and Simons (1990) on runaway adolescents was included to assess the family environment in which the person grew up. Respondents were asked to rate how frequently they had experienced each of seven behaviors (e.g., "parents physically abusive") on a 5-point scale ranging from 0 (*never*) to 4 (*most of the time*). Scores can range from 0 to 28. In the present study, Cronbach's alpha for the Whitbeck and Simons scale was .87.

Procedure

Participants were sampled throughout summer and autumn 1993 from community agencies in three Midwestern cities. Low-income housed women were defined as women who were receiving governmental financial assistance at the time of the study, and homeless women were defined as women who were residing in shelters for homeless persons. Low-income housed women were sampled from community settlement houses, centers from which individuals received food vouchers, and a neighborhood health clinic. The participation of homeless women was sought at homeless mixed-sex and single-sex shelters.

Representatives from agencies in the three cities were contacted and the purpose of the study was explained. On-site meetings were arranged between the researchers and staffs of agencies agreeing to participate. Agency staff made practical suggestions as to appropriate means of compensation for their clientele (based on their knowledge of the most pressing needs of the groups they served), the extent to which the survey items were appropriate for their

clientele in terms of experiences and reading level, and the most efficient and respectful way to proceed with data collection.

At each site, announcements of the study inviting participation were made by agency staff in the week of or preceding the data collection. Each agency provided comfortable rooms for group administration of the research. As prospective participants arrived at the testing rooms, the purposes of the study were explained and informed consent was obtained. The researchers informed the women that the study was about the various life experiences of women, that the women's participation was voluntary, and that an individual's decision to decline to participate or to stop participating would have no effect on her receiving services from the agency through which she was contacted. It was explained that confidentiality and anonymity would be maintained by ensuring that no data from an individual respondent would be shared with agency staff, and by advising participants to withhold their names and identifying information from the researchers. None of the women who arrived at the agency testing rooms declined participation. Based on information from agency staff, it was estimated that approximately 65% of the women to whom the study was announced chose to participate.

Each individual was given a packet of materials that included a request for demographic information, and measures of victimization, daily environmental hassles, social support, negative social interactions, sense of coherence, family environment while growing up, and psychological distress. In only two instances did participants have difficulty responding to the questionnaire packet because of insufficient reading levels. In these cases, the participants chose to respond orally to the questions as they were read to them by a close relative or friend who recorded the answers. Additionally, all of the participants were encouraged to ask the researchers for assistance in reading any word or phrase that was unfamiliar.

Immediately following the testing session, participants were compensated for their time and effort in the research with either $5 in cash or the monetary equivalent in items suggested by agency staff (e.g., bus passes, grocery coupons, tissues, toothpaste, and soft drinks). Because of the potentially sensitive nature of some items, the debriefing statement included addresses and phone numbers of community mental health services in the local area for homeless and low-income housed women.

Of the 121 questionnaires completed by the low-income housed women, 116 were usable, and of the 119 questionnaires completed by the homeless women, 113 were included in the analyses. Questionnaires were deemed unusable if (a) during the testing process, mental illness was apparent and ultimately prohibitive of coherent responding to questionnaire items, or (b) responses appeared to be random.

Results

For the homeless women, the mean length of the current episode of homelessness was 19.71 weeks (SD = 29.21), and the mean number of times the homeless women reported having been homeless was 1.61 (SD = 1.27). For the low-income housed women, the mean number of years living at their current residence was 4.38 (SD = 7.28). Approximately 34% of the low-income housed women reported having been homeless at least once.

A one-way multivariate analysis of variance (MANOVA) was used to examine differences between the two samples on the measured variables. The independent variable in the MANOVA was sample (homeless or low-income housed) and the dependent variables were the measures of victimization, daily environmental hassles, the family environment while growing up, social support, negative social exchange, sense of coherence, and psychological distress. The results indicated a significant difference between the two samples on the variables (Wilks's Lambda = .75, $F(16, 133) = 2.74$, $p < .0001$), and univariate analyses were then conducted. Means, standard deviations, and t tests for the significance of differences between the homeless and low-income housed samples on the measured variables are shown in Table 1. Because 16 comparisons were made, Type I error was controlled for using Bonferroni's method of adjusting alpha (i.e., alpha of .05 divided by 16).

On the SES, homeless women reported they experienced significantly more types of aggressive sexual behavior than low-income housed women. When responses on the SES were analyzed according to the severity of sexual victimization, 23% (n = 26) of the homeless sample and 35% (n = 41) of the low-income housed sample were classified in the "nonvictimized" category. However, another 16% (n = 18) of the homeless women and 16% (n = 19) of the low-income housed women were classified in the "sexual contact" category; 3% (n = 3) of the homeless women and 3% (n = 4) low-income housed women in "sexual coercion;" and 7% (n = 8) of the homeless women and 6% (n = 7) low-income housed women in "attempted rape" categories. In addition, 51% (n = 57) of the homeless women and 39% (n = 45) low-income housed women were classified in the "rape" category. Finally, on the question explicitly worded, "Have you ever been raped?" 45% (n = 50) of the homeless women and 33% (n = 38) of the low-income housed women answered affirmatively.

For the measure of criminal victimization, both samples reported having experienced a moderate number of incidents of crime in the past 6 months. No significant sample differences were found on the measures of criminal victimization or recent sexual harassment. A significant difference was found on the measure of the family environment while growing up, with homeless women reporting more problems compared to housed women.

On the measures of psychological distress, homeless and low-income housed women reported moderate levels of overall distress. A significant difference was found across the samples, with homeless women reporting more psychological distress.

Correlations among the measured variables for the two samples are presented in Table 2, and results of the regression analyses are presented in Table 3. Regression analyses by sample contain six steps in which the predictor variables were entered in the following order: (1) victimization, including criminal victimization, recent sexual harassment, and sexual experiences; (2) daily environmental hassles; (3) quality of the family environment while growing up; (4) satisfaction with social support; (5) negative social exchange; and (6) sense of coherence. The criterion variable was overall psychological distress.

For both samples, victimization predicted a significant amount of the variance in overall distress, with higher levels

Table 1
Means, Standard Deviations, and t Tests for the Significance of Differences Between Homeless and Low-Income Housed Samples on Measured Variables

Variable	Homeless women		Housed women		
	M	*SD*	*M*	*SD*	*t*
Criminal Victimization Scale	7.76	3.79	6.87	3.10	1.93
Recent Sexual Harassment Scale	7.26	5.61	5.92	5.30	1.85
Sexual Experiences Survey	4.33	3.63	2.43	2.85	4.41***
Daily Environmental Hassles Scale	2.65	2.51	1.68	2.41	3.00
Family environment while growing up	8.50	7.83	4.33	6.35	4.43***
Social Support Questionnaire					
Number	3.68	5.88	5.85	17.69	−1.24
Satisfaction	4.65	1.18	4.72	1.24	−0.45
Test of Negative Social Exchange					
Hostility	1.79	1.22	1.60	1.09	1.23
Insensitivity	1.87	1.22	1.39	1.14	3.12
Interference	1.54	1.24	1.25	1.02	1.91
Ridicule	1.23	1.17	1.07	1.10	1.11
Sense of Coherence Scale	50.45	14.34	55.66	12.59	−2.93
Hopkins Symptom Checklist	7.62	2.39	6.45	2.16	3.89***

Note. Sample sizes across variables ranged from 100 to 113 for the homeless sample and from 108 to 116 for the housed sample. For all calculations, mean scale scores were inserted in place of missing data (Cohen & Cohen, 1983). Score ranges are as follows: 5–20 on the Criminal Victimization Scale; 0–20 on the Recent Sexual Harassment Scale; 1–10 on the Sexual Experiences Survey, with higher scores denoting more of these types of victimization; 0–10 on the Daily Environmental Hassles Scale and 0–28 on the measure of the family environment while growing up, with higher scores indicating more daily environmental hassles and more problems in the environment, respectively; 1–6 on the Social Support Questionnaire (SSQ) Satisfaction scale, with higher scores indicating more satisfaction with social support, 0–no upper limit on the SSQ Number scale, with higher scores indicating a greater number of perceived available supports; 0–4 on each of the Test of Negative Social Exchange scales, with higher scores denoting more negative social exchange; 13–91 on the Sense of Coherence Scale, with higher scores indicating a greater sense of coherence; and 3–15 on the Hopkins Symptom Checklist (Overall Distress), with higher scores indicating more distress.
*** $p < .001$.

of victimization being related to higher levels of distress. Current daily environmental hassles were incrementally predictive of distress for housed, but not homeless, women, and the quality of the family environment while growing up was incrementally predictive of overall distress for both samples, with more problems in the environment being related to higher levels of distress. Satisfaction with positive social support accounted for a significant amount of incremental variance in distress among the housed but not the homeless sample, with less perceived support being related to a greater number of signs of distress. Table 3 presents the results of the negative social exchange variables using, as an example, the hostility subscale. Although hostile-type social responses were not incrementally predictive of distress for the homeless sample, they were for the housed group. Across both samples, the only other negative social exchange subscale that was predictive of distress was the insensitivity subscale for the homeless sample. Finally, sense of coherence was incrementally predictive of distress among the homeless, but not the housed women, with higher levels of this construct being related to lower levels of overall distress.

Discussion

Several differences were found between the homeless and low-income housed women in this study. Homeless women reported significantly more sexual victimization, problems in the family environment while growing up, and overall psychological distress. No sample differences were found on the measures of criminal victimization, recent sexual harassment, daily environmental hassles, number of or satisfaction with social supports, negative social exchange, or sense of coherence.

That the homeless women in this study reported more sexual victimization than their housed counterparts is consistent with many, but not all, previous studies of this topic (Bassuk & Rosenberg, 1988; Goodman, 1991; Shinn et al., 1991; Wood et al., 1990). Many findings have indicated that homeless women are more likely to have histories of childhood and adolescent sexual abuse than are their housed counterparts (e.g., Pennbridge, Mackenzie, & Swofford, 1991). It has been asserted that childhood sexual abuse may predispose one to a higher incidence of this type of victimization in adulthood (Russell, 1986). It also may be that not having a home decreases a homeless woman's access to

Table 2
Correlations Among the Measured Variables for Homeless and Low-Income Housed Samples

	Age	Victimization			DEH	Growing Up	SSQ		TENSE				SOC	HSCL
Variable	1	2	3	4	5	6	7	8	9	10	11	12	13	14
1. Age	—	−.11	−.18	.01	.10	−.11	−.03	.12	−.30**	−.25**	−.09	−.19	.21	−.12
Victimization														
2. Criminal	−.09	—	.27**	.44***	.13	.06	−.08	−.09	.38***	.25**	.22	.42***	−.31***	.36***
3. RSHS	−.17	.38***	—	.56***	.10	−.05	.11	−.04	.26**	.20	.27**	.24**	−.39***	.33***
4. SES	−.17	.50***	.55***	—	.10	.12	.08	−.04	.23	.23	.18	.24	−.26**	.30**
5. DEH	−.21	.64***	.25**	.41***	—	.10	.03	−.01	.00	.02	.07	.04	−.10	.05
6. Growing Up	−.05	.35***	.26**	.42***	.33***	—	.03	−.19	.02	.07	−.07	.06	−.15	.22
SSQ														
7. Number	−.04	−.06	−.08	−.08	−.09	−.07	—	.25**	−.07	−.13	−.14	−.03	.18	−.04
8. Satisfaction	.13	−.30***	−.06	−.26**	−.48***	−.42***	.12	—	−.06	−.22	−.17	−.27**	.30**	−.12
TENSE														
9. Hostility	−.24	.37***	.12	.26**	.43***	.35***	−.14	−.46***	—	.77***	.63***	.64***	−.36***	.32***
10. Insensitivity	−.08	.38***	.15	.24**	.42***	.24	−.07	−.43***	.60***	—	.76***	.72***	−.44***	.36***
11. Interference	−.09	.36***	.23	.27**	.44***	.30**	−.06	−.39***	.62***	.73***	—	.64***	−.30**	.20
12. Ridicule	−.05	.45***	.17	.28**	.37***	.35***	−.09	−.48***	.61***	.57***	.59***	—	−.39***	.37***
13. SOC	.31***	−.31***	−.29**	−.26**	−.40***	−.25**	.08	.42***	−.42***	−.49***	−.37***	−.31***	—	−.62***
14. HSCL	.04	.40***	.10	.23	.41***	.38***	.01	−.54***	.48***	.43***	.45***	.50***	−.43***	—

Note. Sample sizes across variables ranged from 100 to 113 for the homeless sample and from 108 to 116 for the housed sample. For all calculations, mean scale scores were inserted in place of missing data (Cohen & Cohen, 1983). Correlations for homeless women (n = 113) are placed above the diagonal; correlations for low-income housed women (n = 116) are below the diagonal. Criminal = Criminal Victimization Scale; RSHS = Recent Sexual Harassment Scale; SES = Sexual Experiences Survey (sum of items 4–13); DEH = Daily Environmental Hassles Scale; Growing Up = Family Environment While Growing Up Scale; SSQ = Social Support Questionnaire; TENSE = Test of Negative Social Exchange; SOC = Sense of Coherence Scale; HSCL = Hopkins Symptom Checklist, Overall Distress Score.
** $p < .01$. *** $p < .001$.

Table 3
Hierarchical Multiple Linear Regression Models for the Prediction of Psychological Distress From Victimization, Daily Environmental Hassles, Family Environment While Growing up, Social Support, Negative Social Exchanges, and Sense of Coherence

Step and variable	Homeless women								Housed women							
	df	R^2	ΔR^2	*F*	*B*	*SE* B	β	*t*	*df*	R^2	ΔR^2	*F*	*B*	*SE* B	β	*t*
1. Victimization	3, 112	.19		8.32***					3, 115	.17		7.46***				
Criminal					0.17	0.06	0.27	2.79**					0.27	0.07	0.39	3.86***
RSHS					0.09	0.04	0.22	2.07*					−0.04	0.04	−0.10	−0.97
SES					0.04	0.07	0.07	0.60					0.07	0.08	0.09	0.84
2. DEH	4, 112	.19	.00	0.04	−0.02	0.08	−0.02	−0.20	4, 115	.21	.04	5.36*	0.23	0.10	0.26	2.32*
3. Growing Up	5, 112	.23	.04	6.41*	0.47	0.18	0.22	2.53*	5, 115	.26	.05	8.54**	0.64	0.22	0.27	2.92**
4. SSQ–Satisfaction	6, 112	.23	.00	0.25	−0.09	0.18	−0.04	−0.49	6, 115	.37	.11	18.94***	−0.70	0.16	−0.40	−4.35***
5. TENSE–Hostility	7, 112	.26	.03	3.60	0.34	0.18	0.18	1.90	7, 115	.41	.04	6.12*	0.44	0.18	0.22	2.48*
6. SOC	8, 112	.45	.19	35.97***	−0.09	0.01	−0.53	−6.00***	8, 115	.43	.02	3.68	−0.03	0.02	−0.17	−1.92

Note. Sample sizes across variables ranged from 100 to 113 for the homeless sample and from 108 to 116 for the housed sample. For all calculations, mean scale scores were inserted in place of missing data (Cohen & Cohen, 1983). Criminal = Criminal Victimization Scale; RSHS = Recent Sexual Harassment Scale; SES = Sexual Experiences Survey (sum of items 4–13); DEH = Daily Environmental Hassles Scale; Growing Up = Family Environment While Growing Up Scale; SSQ = Social Support Questionnaire; TENSE = Test of Negative Social Exchange; SOC = Sense of Coherence Scale.
* $p < .05$. ** $p < .01$. *** $p < .001$.

privacy and protection and increases her vulnerability to some types of sexual assault. In addition, it may be that some shelters for homeless women that use a hierarchical model of service delivery may inadvertently discourage a sense of personal efficacy that might serve as an effective tool against sexual victimization. Living environments that are collaboratively defined, wherein the residents take active, participatory roles in the decision-making surrounding their daily living may be one means of encouraging personal empowerment for women at greater risk of sexual abuse.

The finding that the homeless women in this sample were experiencing more overall psychological distress than their housed counterparts may be related to the trauma theory of Goodman, Saxe, and Harvey (1991), who have suggested that homelessness itself may be a precipitating factor in traumatic stress reactions among homeless persons. Goodman et al. contended that the loss of one's home, combined with shelter conditions and any prior trauma (e.g., sexual or physical abuse) that may have predated the person's homelessness, may contribute to elevated psychological distress among individuals in this group.

Results of regression analyses revealed that victimization accounted for a significant amount of the variance in psychological distress for homeless and low-income housed women. Social support accounted for a significant amount of variance in overall psychological distress beyond the variance explained by victimization for low-income housed women but not for homeless women. When the positive and negative dimensions of interpersonal influences were used as predictors, social support and some of the dimensions of negative social exchange accounted for a significant amount of the variance in distress for low-income housed women. Sense of coherence provided a significant amount of incremental predictive variance in psychological distress for homeless women but not for low-income housed women.

It may be that homeless women, compared to low-income housed women, are more reliant on their internal, rather than external, resources, and thus their psychological well-being may be more contingent on the presence of this resource. Members of this group may have developed the perception that they themselves are one of the few sources on whom they can depend for coping with their life situations. Similarly, it may be that the well-being of housed women is more dependent on their perceptions of the support available from others than on their internal resources, which perhaps are not relied on as heavily unless the external resources become depleted (Shinn et al., 1991).

A major finding of this study is that victimization was a significant predictor of psychological distress for both the homeless and low-income housed women. In addition, for researchers investigating the experience of women's victimization, the results highlight the importance of examining both the positive and negative dimensions of interpersonal influences as well as internal resources such as sense of coherence. Unlike much of the previous research concerning homeless women and women who may be at risk of becoming homeless, this study provided a comprehensive assessment of multiple victimization experiences including criminal victimization, sexual victimization, and recent sex-

ual harassment as well as an assessment of the various types of influences and resources called on by homeless and low-income housed women.

Several other findings from this study have implications for future research. For example, the results indicated that approximately 14% of the participants who were living in homeless shelters did not consider themselves ever to have been homeless. Several women told the researchers that they did not view themselves as homeless because they were not living on the streets. In future studies, investigators posing questions to participants should replace the term "homeless" with culturally sensitive language reflecting an operational definition of the term. Also, future research is needed to determine whether measures of sexual harassment are culturally biased. The scale used in this study to assess sexual harassment was the only such instrument the researchers found that was not limited to harassment in the workplace or in an academic setting. However, comments from participants suggested that the question about sexually suggestive looks could have been interpreted as not being limited to unwanted behavior.

This research suggests the need for preventive and remedial interventions to empower homeless women and low-income housed women, and counseling psychologists are especially well-positioned to offer a variety of needed individual and system-based services to these underserved groups. Counseling psychologists' emphasis on recognizing and appreciating cultural differences, focusing on people's strengths, and discerning the environmental influences that impinge on the individual are important to the empowerment of these groups.

Culturally sensitive efforts that address the particular experiences of homeless women and low-income housed women at both the individual and systems levels are needed. Examples of possible programs include the development of collaborative, participatory living environments; rape education training; self-defense training; social support programs (e.g., a "buddy" program that would match each of the women with a support person); programs to help service providers recognize cultural differences between themselves and their clientele and determine how they might enhance cross-cultural communication toward the improvement of services; environmental assessment programs designed to identify aspects of individuals' environments that contribute to cycling in and out of homelessness; programs to help service providers recognize the significance of negative interpersonal interactions; programs to facilitate women's ability to respond to negative interpersonal exchanges; and interventions designed to maintain or enhance the sense of meaning in women's lives.

Finally, helpers can capitalize on the strengths these women were found to exhibit, including the resilience of homeless women, and indications that members of this group may rely more heavily on internal, rather than external, sources of support. Individual and group counseling interventions thus might be aimed at helping homeless women articulate their strengths, including what internal mechanisms have helped them cope effectively with stressors previously encountered, and how such internal resources might be marshaled in dealing with present or future stressors.

References

Anderson, S. C. (1987). Alcoholic women on skid row. *Social Work, 32,* 362–365.

Antonovsky, A. (1987). *Unraveling the mystery of health.* San Francisco: Jossey-Bass.

Antonovsky, A. (1993). The structure and properties of the Sense of Coherence Scale. *Social Science and Medicine, 36,* 725–733.

APA Council of Representatives. (1991). Resolution on homelessness. *American Psychologist, 46,* 1108.

Bassuk, E. L. (1987). Feminization of homelessness: Families in Boston shelters. *American Journal of Social Psychology, 7,* 19–23.

Bassuk, E. L. (1990). Who are the homeless families: Characteristics of sheltered mothers and children. *Community Mental Health Journal, 26,* 425–434.

Bassuk, E. L., & Rosenberg, L. (1988). Why does family homelessness occur? A case-control study. *American Journal of Public Health, 78*(7), 783–788.

Benda, B. B. (1991). Undomiciled: A study of drifters, other homeless persons, their problems, and service utilization. *Psychosocial Rehabilitation Journal, 14,* 39–67.

Burt, M. R., & Cohen, B. E. (1989). Differences among homeless single women, women with children, and single men. *Social Problems, 36,* 508–524.

Caslyn, R. J., & Morse, G. (1990). Homeless men and women: Commonalities and a service gender gap. *American Journal of Community Psychology, 18,* 597–608.

Cohen, J., & Cohen, P. (1983). *Applied multiple regression/correlation analysis for the behavioral sciences* (2nd ed.). Hillsdale, NJ: Erlbaum.

Coston, C. T. M. (1989). The original designer label: Prototypes of New York City's shopping-bag ladies. *Deviant Behavior, 10,* 157–172.

Crystal, S. (1984). Homeless men and women: The gender gap. *Urban and Social Change Review, 17,* 2–6.

D'Ercole, A., & Struening, E. (1990). Victimization among homeless women: Implications for service delivery. *Journal of Community Psychology, 18,* 141–152.

Derogatis, L. R., Lipman, R. S., Rickels, K., Uhlenhuth, E. H., & Covi, L. (1974). The Hopkins Symptom Checklist (HSCL): A self-report symptom inventory. *Behavioral Science, 19,* 1–15.

Fiore, J., Becker, J., & Coppel, D. B. (1983). Social network interactions: A buffer or a stress. *American Journal of Community Psychology, 11,* 423–439.

Gelso, C. J., & Fretz, B. E. (1992). *Counseling psychology.* Fort Worth, TX: Holt, Rhinehart & Winston.

Good, G. E., Robertson, J. M., O'Neil, J. M., Fitzgerald, L. F., Stevens, M., DeBord, K. A., Bartels, K. M., & Braverman, D. G. (1995). Male gender role conflict: Psychometric issues and relations to psychological distress. *Journal of Counseling Psychology, 42,* 3–10.

Goodman, L. A. (1991). The prevalence of abuse in the lives of homeless and housed poor mothers: A comparison study. *American Journal of Orthopsychiatry, 61,* 489–500.

Goodman, L., Saxe, L., & Harvey, M. (1991). Homelessness as psychological trauma: Broadening perspectives. *American Psychologist, 46,* 1219–1225.

Hagen, J. L. (1987). Gender and homelessness. *Social Work, 32,* 312–216.

Hagen, J. L., & Ivanoff, A. M. (1988). Homeless women: A high-risk population. *Affilia, 3*(1), 19–33.

Hodnicki, D. R., Horner, S. D., & Boyle, J. S. (1992). Women's perspectives on homelessness. *Public Health Nursing, 9,* 257–262.

Kiecolt-Glaser, J. K., Dyer, C. S., & Shuttleworth, E. C. (1988). Upsetting social interactions and distress among Alzheimer's Disease family care-givers: A replication and extension. *American Journal of Community Psychology, 16,* 825–837.

Koss, M. P., & Gidycz, C. A. (1985). Sexual Experiences Survey: Reliability and validity. *Journal of Consulting and Clinical Psychology, 53,* 422–423.

Koss, M. P., & Oros, C. J. (1982). Sexual Experiences Survey: A research instrument investigating sexual aggression and victimization. *Journal of Consulting and Clinical Psychology, 50,* 455–457.

LaGory, M., Ritchey, F. J., & Mullis, J. (1990). Depression among the homeless. *Journal of Health and Social Behavior, 19,* 2–21.

Milburn, N., & D'Ercole, A. (1991). Homeless women: Moving toward a comprehensive model. *American Psychologist, 46,* 1161–1169.

Pagel, M. D., Erdly, W. W., & Becker, J. (1987). Social networks: We get by with (and in spite of) a little help from our friends. *Journal of Social and Personality Psychology, 53,* 793–804.

Pearlin, L. I., Lieberman, M. A., Menaghan, E. G., & Mullan, J. T. (1981). The stress process. *Journal of Health and Social Behavior, 22,* 337–356.

Pennbridge, J., Mackenzie, R. G., & Swofford, A. (1991). Risk profile of homeless pregnant adolescents and youth. *Journal of Adolescent Health, 12,* 534–538.

Quintana, S. M., & Bernal, M. E. (1995). Ethnic minority training in counseling psychology: Comparisons with clinical psychology and proposed standards. *The Counseling Psychologist, 23,* 102–121.

Rickels, K., Lipman, R. S., Garcia, C. R., & Fisher, E. (1972). Evaluating clinical improvement in anxious outpatients: A comparison of normal and treated neurotic patients. *American Journal of Psychiatry, 128,* 119–123.

Rook, K. S. (1984). The negative side of social interactions: Impact on psychological well-being. *Journal of Social and Personality Psychology, 46,* 1097–1108.

Ruehlman, L. S., & Karoly, P. (1991). With a little flack from my friends: Development and preliminary validation of the Test of Negative Social Exchange (TENSE). *Psychological Assessment, 3,* 97–104.

Russell, D. E. (1986). *The secret trauma: Incest in the lives of girls and women.* New York: Basic Books.

Sarason, I. G., Sarason, B. R., Shearin, E. N., & Pierce, G. R. (1987). A brief measure of social support: Practical and theoretical implications. *Journal of Social and Personal Relationships, 4,* 497–510.

Shinn, M., Knickman, J. R., & Weitzman, B. C. (1991). Social relationships and vulnerability to becoming homeless among poor families. *American Psychologist, 46,* 1180–1187.

Simons, R. L., Whitbeck, L. B., & Bales, A. (1989). Life on the streets: Victimization and psychological distress among the adult homeless. *Journal of Interpersonal Violence, 4,* 482–501.

Slavinsky, A. T., & Cousins, A. (1982). Homeless women. *Nursing Outlook, 30,* 358–362.

Vitaliano, P. P., Maiuro, R. D., Bolton, P., & Armsden, G. C. (1987). A psychoepidemiologic approach to the study of disaster. *Journal of Community Psychology, 15,* 99–122.

Whitbeck, L. B., & Simons, R. L. (1990). Life on the streets: The victimization of runaway and homeless adolescents. *Youth & Society, 22,* 108–125.

Whitbeck, L. B., & Simons, R. L. (1993). A comparison of adaptive strategies and patterns of victimization among homeless adolescents and adults. *Violence and Victims, 8,* 135–152.

Williamson, J. M., Borduin, C. M., & Howe, B. A. (1991). The ecology of adolescent maltreatment: A multilevel examination of adolescent physical abuse, sexual abuse, and neglect. *Journal of Consulting and Clinical Psychology, 59,* 449–457.

Wood, D., Valdez, B., Hayashi, T., & Shen, A. (1990). Homeless and housed families in Los Angeles: A study comparing demographic, economic, and family function characteristics. *American Journal of Public Health, 80,* 1049–1052.

Received February 22, 1995
Revision received November 22, 1995
Accepted November 22, 1995 ■