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THE AGGRESSIVENESS OF INSTITUTIONALIZED MINORS DEPENDING ON THE TYPE OF RESIDENCE

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The Aggressiveness of Institutionalized Minors Depending on the Type of Residence

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Abstract

This article presents the findings of a research study that sought to identify and compare the levels of aggression exhibited by institutionalised minors, contingent on the type of residence in which they are situated. To this end, the research was conducted on a sample of 200 minors residing in four different forms of care: foster care, traditional placement centre, and apartment. The Buss and Perry aggression questionnaire was employed to assess four dimensions of aggression: verbal, physical, anger and hostility. The results demonstrate the presence of all forms of aggression in the research subjects, albeit with varying levels contingent on the type of residence of the institutionalised minor. Based on these findings, it can be concluded that the child protection system requires reform, with an emphasis on developing the maternal care component and reducing the proportion of traditional foster care centres.

Keywords: foster care; placement centre; residential apartments; institutionalized minors; aggressiveness.

Introduction

The present study is concerned with the phenomenon of aggression among minors, with a particular focus on those who are subject to the protection system. The initial findings from our research were presented in an article published last year (Fedor, 2023). In our previous publication, we demonstrated that aggression is a pervasive phenomenon among institutionalized children, irrespective of gender. In the present study, we aim to elucidate the specific forms of aggression observed in this population, including verbal aggression, physical aggression, anger, and

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hostility. Additionally, we seek to quantify the prevalence and intensity of these behaviours, as well as to differentiate between different types of residential settings, such as foster care, placement centre and residential apartments.

Literature Review

We now resume our brief review of the literature on this topic. Thus, "Residing in foster care has been observed to result in a regression in the physical and cognitive development of institutionalized children (Naumova et al., 2016). Some authors employ the term «maltreatment» when discussing the institutionalization system (Sousa and Cruz, 2018). The experience of maltreatment affects how children deploy their emotional and social resources to navigate socio-moral conflicts. The findings of various studies on this subject have demonstrated a notable correlation between a history of maltreatment, the attachment style developed by children, and their behaviour (Katsurada, Tanimukai, and Akazawa, 2017). There is mounting evidence that attachment may even be compromised in institutionalized children (Lionetti, Pastore, and Barone, 2015). Adverse childhood experiences, particularly maltreatment, are considered to be significant risk factors for the development of antisocial behaviour in adolescence. The potential correlates have yet to be investigated after taking the institutionalization experience into account (Protic, Wittmann, Taubner, and Dimitrijevic, 2020). Furthermore, institutionalized children with elevated levels of externalizing problems may be indicative of disrupted psychosocial development. However, internalizing problems may not be immediately apparent (Ginige, Baminiwatta, and Jayawardana, 2020). In general, young people with a history of involvement in the child protection system have significantly greater and more complex needs than those with no such experience (Malvaso, Delfabbro, Day, and Nobes, 2019)." (Fedor, 2023: 52-53)

It can be stated that this is an additional point that can be included. The literature indicates that aggressive behaviour and a disregard for social norms appear to be typical characteristics of institutionalized adolescents (Surugiu and Moșoiu, 2013). In general, children's emotional and communicative development is particularly vulnerable to distortion in an institutionalized environment (Verza, Bratu, and Foloștină, 2012). As a general rule, institutionalized children are aware of where they are and why they are there, report understanding of basic care activities as positive points of the institution, but display aggression in the absence of family members (Furtado et al., 2021). It is imperative to investigate methods by which children can «self-adjust» following institutionalization. An institutionalized child is more prone to adopt a «negative path» that encompasses destructive, pessimistic, and mistrusting attributes of self-adjustment (Nsabimana *et al.*, 2021).

Methodology

Regarding the research methods, we will resume the presentation made in the previously mentioned paper (Fedor, *op. cit.*, 53-54). Therefore, "The research was conducted at the Directorate-General for Social Assistance and Child Protection of Iaşi County (Romania) on a group of 200 institutionalised children, with an equal gender distribution, aged between 12 and 18 years, residing in various social service centres. Following the approval of our research project, we were granted access to the host institution by the management. Participation was entirely voluntary, and all subjects gave their informed consent to take part in the research, with the option to withdraw at any time. The respondents were informed of the objectives of the research and of the role of the questionnaire. They were also assured of the non-disclosure of their identity. The questionnaires were completed in a familiar study room with the assistance of a trained professional. While the subjects were cooperative, their limited understanding of the tasks, lack of self-analysis skills, and time constraints posed challenges for some.

Aggressiveness was measured by the aggressiveness questionnaire developed by Arnold H. Buss and Mark Perry, which consists of 29 items designed to measure four dimensions of aggressiveness, namely physical aggressiveness, verbal aggressiveness, anger/rage and, last but not least, hostility. The applied tool uses a 5-step Likert scale (1 - very unsuitable for me; 2 - somewhat unsuitable for me; 3 - slightly suitable; 4 - somewhat suitable for me and 5 - very suitable for me). The four subscales of aggressiveness are measured by the 29 items of the questionnaire as follows: physical aggressiveness (PA: 1, 5, 9, 13, 17, 21, 24, 26, 28); verbal aggressiveness (VA: 2, 6, 10, 14, 18); anger/rage (A: 3, 7, 11, 15, 19, 22, 29) and hostility (H: 4, 8, 12, 16, 20, 23, 25, 27).

Total aggressiveness scores range from 29 to 145. The level of aggressiveness may be divided into three categories, namely: low aggressiveness (with scores between 29 and 68), medium aggressiveness (with scores between 69 and 107) and high aggressiveness (with scores between 107 and 145). The total sum of physical aggressiveness may range between 9 and 45. Thus, the levels of physical aggressiveness may be considered low (with scores between 9 and 21), medium (with scores between 21 and 33) and high (with scores between 33 and 45), respectively. With scores ranging between 5 and 25, verbal aggressiveness may be low (with scores between 5 and 11), medium (with scores between 11 and 18) and high (with scores between 18 and 25), respectively. With scores ranging between 7 and 35, anger/rage may be low (with scores between 7 and 16), medium (with scores between 16 and 25) and high (with scores between 25 and 35), respectively. Finally, hostility, the score of which may range

between 8 and 40, is low (with scores between 8 and 18), medium (with scores between 18 and 29) or high (with scores between 29 and 40)."

The following is a list of the 29 items as they appear in the questionnaire.

"1. Some friends tell me that I am impulsive; 2. If I have to resort to violence to defend my rights, I will; 3. When the others are kind to me, I wonder what they want to obtain from me; 4. I tell my friends exactly what I think; 5. Sometimes I get so angry that I start breaking things; 6. I cannot come up with arguments when the others do not agree with me; 7. I wonder why I am sometimes so fierce /aggressive; 8. Sometimes I cannot control my desire to hit another person; 9. I am a calm person; 10. I get suspicious when strangers behave very friendly; 11. I hurt many people I know; 12. I get wound up quickly, but I calm down just as fast; 13. When challenged I end up hitting people; 14. When the people around me upset me, I tell them what I really think of them; 15. I get jealous sometimes; 16. Sometimes I would hit a person for no reason; 17. Sometimes I feel that life is unfair to me; 18. I cannot control myself; 19. When I am frustrated, I show it; 20. I sometimes feel that people make fun of me when I am not present; 21. I often find myself in opposition / contradiction with the others; 22. If someone hits me, I hit back; 23. Sometimes I feel like a "powder barrel" ready to explode; 24. The others always seem to get the best; 25. There are people who have put me under so much pressure that we ended up fist fighting; 26. I know that my friends talk behind my back; 27. Friends tell me that I am a somewhat logical person; 28. I often get angry for no particular reason; 29. I get into conflicting situations faster than the others" (Fedor, 2023: 54-55).

Results and Discussions

Average scores by type of aggression - foster care

In the case of respondents who are in foster care (Table 1), the mean score was 13.07, indicating that the level of verbal aggression among this group is average.

VERBAL AGGRESSIVENESS Items Mean		SC	ERAGE CORE 3.07
		Sum	Standard deviation
2	2	28	1.52
6	2.64	37	1.55
10	4.07	57	0.83
14	3	42	1.30
18	1.36	19	1.08
TOTAL	2.61	183	6.28

Table 1. Average score for verbal aggressiveness - foster care

As evidenced in Table 2, the data suggests that the level of physical aggressiveness exhibited by the subjects in foster care is within the typical range.

Table 2. Average score for physical aggressiveness - foster care

PHYSICAL AGGRESSIVENESS		AVERAGE SCORE 23.5	
1	2.79	39	1.58
5	1.86	26	1.41
9	4.29	60	1.14
13	2	28	1.41
17	2.43	34	1.56
21	2.57	36	1.45
24	2.64	37	1.39
26	2.29	32	1.44
28	2.64	37	1.69
TOTAL	2.61	329	13.07

The respondents in foster care (Table 3) exhibited anger that was scored at a level indicating a medium level of aggressiveness.

Table 3. Average score for anger/rage - foster care

ANGER / RAGE		AVERAGE				
		SCORE				
			18.5			
Items	Mean	Sum Standard	lean Sum Stand	Standard deviation		
3	2.79	39	1.31			
7	2	26	1.35			
11	2	28	1.41			
15	2.64	37	1.39			
19	2.36	33	1.15			
22	2.5	35	1.56			
29	4.35	61	1.28			
TOTAL	2.66	259	9.46			

Furthermore, the data indicates that the level of aggressiveness, as represented by hostility (Table 4), is at an average level.

HOSTILITY		AVERAGE			
		SCORE			
			20.64		
Items	Mean	Sum Standard deviat			
4	4.43	62	0.76		
8	1.36	19	0.84		
12	3.57	50	1.16		
16	1.21	17	0.58		
20	2.5	35	1.51		
23	2.07	29	1.49		
25	1.64	23	1.15		

54

289

0.66

8.15

Table 4. Average score for hostility - foster care

Average scores by type of aggression - foster care

27

TOTAL

With regard to the respondents who are in the care of foster parents, it can be stated that, based on the recorded data, they are characterized by a low, almost average level of verbal aggressiveness (11.85).

Table 5 illustrates that the mean value characterizing item number 10 (*I get suspicious when strangers behave very friendly*) deviates from the overall mean by 1.55.

Table 5. Average score	for verbal	l aggressiveness	- foster care
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3.86

2.58

VERBAL AGGRESSIVENESS		AVERAGE SCORE 11.85	
2	1.5	18	0.67
6	3.31	43	1.49
10	2.92	38	1.55
14	3.15	41	1.46
18	1.08	14	0.28
TOTAL	2.39	154	5.46

With regard to the category of physical aggressiveness, the level of physical aggressiveness is moderate for individuals who are subject to foster care (Table 6). With regard to the mean values recorded for each item constituting the physical aggressiveness scale, it can be observed that the highest mean value is for item number 9 (*I am a calm person*), and the lowest value is identified for item number 5 (*Sometimes I get so angry that I start breaking things*). Table 6 also indicates that

the value most divergent from the mean is associated with statement 17 (*Sometimes I feel that life is unfair to me*).

Table	6. Average	score for p	hysical	aggressivenes	s - j	foster (car

PHYSICAL AGGRESSIVENESS		AVERAGE SCORE		
		2	2.69	
Items	Mean	Sum	Standard deviation	
1	2.62	34	1.19	
5	1.31	17	0.86	
9	4.31	56	1.18	
13	1.54	20	0.88	
17	2.23	29	1.42	
21	2.46	32	1.39	
24	4	52	1.29	
26	2.38	31	1.12	
28	1.85	24	1.35	
TOTAL	2.52	295	10.68	

The mean score recorded for respondents in the care of foster parents in terms of the type of aggression represented by anger is 19.23. This value indicates that respondents typically display a moderate level of anger.

Table 7. Average score for anger/rage - foster care

ANGER / RAGE		AVERAGE		
		SCORE		
			19.23	
Items	Mean	Sum	Standard deviation	
3	3.46	45	1.20	
7	2.08	27	1.32	
11	1.77	23	1.17	
15	2.85	37	1.68	
19	2.77	36	1.42	
22	1.85	24	1.28	
29	4.46	58 0.97		
TOTAL	2.75	250	9.03	

As demonstrated in Table 8, the data suggests that the level of aggressiveness, as manifested by hostility, exhibited by respondents under the care of foster parents is within the typical range.

Table 8. Average score for hostility - foster care

HOST	HOSTILITY		AVERAGE SCORE		
			9,62		
Items Mean		Sum	Standard deviation		
4	4,77	62	0,44		
8	1,31	17	0,86		
12	3,69	48	1,60		
16	1,31	17	0,86		
20	1,77	23	1,01		
23	1,85	24	1,35		
25	1,38	18	0,87		
27	3,54	46	1,27		
TOTAL	2.45	255	8.24		

Average scores by type of aggression - placement centre

The analysis is limited to respondents who are in the placement centre. The average score for verbal aggressiveness is 15.40, indicating an average level of verbal aggressiveness among respondents in this centre.

Table 9. Average score for verbal aggressiveness - placement centre

VERBAL AGGRESSIVENESS Items Mean		AVERAGE SCORE 15.40		
		Sum	Standard deviation	
2	3.02	139	1.58	
6	3.13	141	1.47	
10	3.17	146	1.54	
14	3.87	182	1.36	
18	2.47	116	1.59	
TOTAL	3.13	724	7.54	

The level of physical aggression exhibited by respondents residing in the placement centre is average. This is evidenced by the mean score value (26.79), which falls within the range of 22-33 (medium physical aggression). Item number 9 (*I am a calm person*) is rated the highest, while item number 5 (*Sometimes I get so angry that I start breaking things*) is rated the lowest.

Table 10. Average score for physical aggressiveness - placement centre

PHYSICAL AGGRESSIVENESS		AVERAGE SCORE 26.79	
1	2.67	123	1.62
5	2.3	106	1.67
9	4.11	193	1.31
13	2.62	123	1.48
17	3.55	167	1.40
21	2.87	132	1.39
24	2.7	124	1.50
26	3.53	166	1.65
28	2.66	125	1.51
TOTAL	3.00	1259	13.53

As evidenced in Table 11, the level of anger exhibited by respondents at the placement centre is of a moderate nature.

Table 11. Average score for anger/rage - placement centre

ANGER / RAGE		AVERAGE SCORE		
Items	Mean	Sum	Standard deviation	
3	3.64	171	1.22	
7	2.87	135	1.41	
11	2.7	127	1.63	
15	3.17	146	1.68	
19	2.85	134	1.47	
22	2.94	138	1.70	
29	3.44	162	1.65	
TOTAL	3.09	1013	10.76	

The level of hostility exhibited by the subjects is also moderate (see Table 12).

Table 12. Average score for hostility - placement centre

HOSTILITY		AVERAGE			
		SCORE			
		24.13			
Items	Mean	Sum	Standard deviation		
4	3.68	173	1.49		
8	2.74	129	1.58		
12	3.59	165	1.45		
16	1.94	91	1.33		
20	3.02	142	1.60		
23	2.74	129	1.55		
25	3.02	142	1.64		
27	3.47	163	1.38		
TOTAL	3.03	1134	12.02		

Average scores by type of aggression - apartment

With regard to the mean score for verbal aggressiveness among respondents residing in apartment-type accommodation, a value of 14.59 was recorded, indicating an average level of verbal aggressiveness.

Table 13. Average score for verbal aggressiveness - apartment

VERBAL AGGRESSIVENESS		AVERAGE SCORE		
		14.59		
Items	Items Mean		Standard deviation	
2	2.54	104	1.49	
6	3.44	141	1.32	
10	3.48	139	1.45	
14	3.2	131	1.50	
18	2.02	83	1.31	
TOTAL	2.94	598	7.08	

In light of the fact that the mean score value is 26.68, it can be posited that the respondents residing in the apartments in question exhibit a moderate level of physical aggressiveness.

Table 14. Average score for physical aggressiveness – apartment

PHYSICAL AGGRESSIVENESS		AVERAGE		
		SCORE		
		26.68		
Items	Mean	Sum	Standard deviation	
1	3.05	125	1.53	
5	2	80	1.49	
9	3.63	149	1.26	
13	2.41	99	1.40	
17	3.68	151	1.47	
21	2.83	116	1.61	
24	3.07	126	1.68	
26	3.56	146	1.27	
28	2.49	102	1.65	
TOTAL	2.97	1094	13.35	

The mean score for the respondents residing in apartments for the construct of anger is 22.41 (Table 15). This value allows us to estimate the average level of anger displayed by these respondents. With regard to the mean values for each item, a high value of 3.53 can be observed for item number 29 (*I get into conflicts faster than others*) and a low value of 2.61 for item number 19 (*When I am frustrated, I show it*).

Table 15. Average score for anger/rage - apartment

ANGER / RAGE		, , , ,	ERAGE CORE
		2	2.41
Items	Mean	Sum	Standard deviation
3	3.51	144	1.47
7	3.15	126	1.49
11	3.1	127	1.51
15	3.49	143	1.65
19	2.61	107	1.38
22	3.1	127	1.67
29	3.53	145	1.50
TOTAL	3.21	919	10.67

With regard to respondents residing in apartments, the mean score for hostility is 22.71. This value indicates an average level of aggressiveness, as represented by the hostility exhibited by individuals living in apartments.

Table 16. Average score for hostility - apartments

HOSTILITY		AVERAGE SCORE		
Items	Mean	Sum	Standard deviation	
4	3.85	158	1.20	
8	1.88	77	1.62	
12	3.9	160	1.28	
16	1.68	69	1.21	
20	2.93	120	1.47	
23	3.24	133	1.53	
25	1.93	79	1.15	
27	3.29	135	1.33	
TOTAL	2.84	931	10.78	

Summary of results

Table 17 presents a comparative analysis of the prevalence of different forms of aggression across different types of residential settings. It can be observed that the highest level of verbal aggression is found among children residing in placement centres (15.40), and the lowest level is found among children in foster care (11.85). A similar pattern is observed in the case of physical aggressiveness, with the highest level observed in children in placement centres (26.79), compared to those in foster care (22.69). Also, a similar pattern is observed in the case of hostility, with a mean score of 24.13 in placement centres and 19.62 in foster care. In all of these cases, we observe intermediate levels for children in the other two types of residence, in the order 'apartment' and 'foster care' respectively. The only exceptions are the highest level of anger (22.41) found in children living in apartments and the lowest level of anger (18.50) found in children in foster care.

Table 17. Comparative table

Type of	Average score				
aggressiveness	Placement centre	Apartment	Foster care	Foster care	
Verbal aggression	15,40	14,59	13,07	11,85	
Physical aggression	26,79	26,68	23,50	22,69	
Anger/rage	21,55	22,41	18,50	19,23	
Hostility	24,13	22,71	20,64	19,62	

Conclusion

It can be concluded that, despite the lack of optimal outcomes across all forms of residency, the most advantageous approach for the children in question is their placement with foster parents. This is followed in order of results by placing children in foster care. The last two options would be their placement in apartments or placement centres, in that order.

The rationale is straightforward. The level of aggression exhibited by institutionalised children can be interpreted as a reflection of the quality of the environment in which they are raised. Foster parents have undergone specialised training in parenting skills. They are involved in a system that employs continuous evaluation, and they are often parents themselves, enabling them to combine theoretical and practical knowledge. It is more common for childminders to care for the children in their charge alongside their own offspring. This is beneficial for children who have arrived from outside the family unit. The next most common arrangement is for children in foster care to be cared for by members of their extended family, namely relatives. However, these relatives often have their own family problems and lack the specialised knowledge that foster parents possess.

In the case of beneficiary children who have been placed in apartments or placement centres, despite the continued involvement of specialised social workers, it is not possible for them to receive the same level of care as that provided in the context of foster care or family foster care. The higher level of aggression observed among those in placement centres compared to those in apartments can be attributed to the density of living in a dedicated space. Consequently, there are far fewer children residing in apartments than in placement centres, in circumstances that are somewhat closer to normal family conditions. This reduces the potential negative influence of the surrounding environment.

The main recommendation that emerges from our research is to augment the number of certified foster parents for institutionalised minors.

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