Gender Differences in Coping with Victimization

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Individuals who are victims of crimes cope differently to reduce, tolerate, or master the victimization and ensuing emotional distress. It is unclear whether there are gender differences in regard to the stress and coping process among victims of crime. The current study examines gender differences in victimization experiences. This article examines gender differences in coping strategies, levels of depression, posttraumatic stress disorder, anger, anxiety, social support, and well-being of victims of violent and nonviolent crimes. A community sample of 175 victims of different types of crimes were recruited and interviewed face-to-face. The findings suggest different relationships between types of coping strategies and well-being by gender. [Brief Treatment and Crisis Intervention 8:195–203 (2008)]

According to the United States Department of Justice (2006), over 23 million people experienced crime in 2005. Although murders were the least frequent violent victimization, recent reports indicate a rise in murders for 2005. In 2005, 3,12,470 personal crimes were committed against males, whereas 2,273,320 were committed against females. Consequently, there is currently a growing convergence of humane, scientific, and public policy concerns regarding the needs and consequences of crime on victims, and understanding the gender-specific differences in coping with victimization is important. In Helping victims of violent crime: Assessment, treatment and evidence based practice, Green and Roberts (in press) begin the process of understanding one of the most serious problems in our time enabling us to find more humane and effective ways to assist the thousands of crime victims in the country.

They state:

Currently, there is no generally-accepted paradigm that specifies the pattern of psychological correlates with coping strategies and levels of stress. Understanding the patterns of psychological correlates and how victims cope will inform the development of interventions designed to ameliorate the negative impact of crime and to focus on the successful coping strategies for victims of crime. Uncovering dynamic relationships within the stress and coping process for victims of crime may lead to more effective interventions with more successful adaptation for victims of crime (p. 2).

As such, the focus of the current study is to examine gender differences in coping strategies, depression, anxiety, anger, posttraumatic
stress disorder (PTSD), social support, and well-being of victims of crime from an intraindividual theoretical approach. The theoretical framework for the study is guided by Lazarus and Folkman’s coping theory. The central thesis of this study is that certain individual characteristics, appraisal choices, social support systems, and coping strategies can ameliorate distress and emotion outcome and help victims successfully respond to crime events.

Literature Review

Early coping research focused on the individual or personal factors related to coping patterns (Folkman & Lazarus, 1980). In the past two decades, coping research, while recognizing that individuals may have preferences for certain coping strategies, began to stress the importance of examining the situational context of coping choices (Billings & Moos, 1981; Folkman & Lazarus, 1988; Green, Streeter, & Pomeroy, 2005; Stone & Neal, 1984).

Folkman and Lazarus (1980) found very little differences between men and women regarding their coping strategies. These differences are highlighted below:

The most puzzling gender difference was the finding that men used more problem-focused coping than women in situations that had to be accepted. Perhaps men persevere in problem-focused coping longer than women before deciding that nothing can be done; and even when nothing can be done, men may be disposed to think about the problem more than women. (p. 235).

Pearlin and Schooler (1978) concluded:

There is a profound imbalance between the sexes in their possession and use of effective mechanisms. Men more often possess psychological attributes or employ responses that inhibit stressful outcomes of large problems; and, in two of the three instances where women more often employ a response, it is likely to result not in less stress, but in more. (p. 15).

Davis (1987) found that women exhibited more trauma than men initially following the crime but that over time this did not hold up. They identified socioeconomic status as a significant predictor of distress, and they concluded that the lower socioeconomic status victims had a slower recovery process.

Through research and media attention, both social scientists and the general public have begun to realize the emotional and psychological effects of crime on victims. Most violent crime victims experience psychological as well as physical harm (Green & Pomeroy, 2007a; Norris & Kaniasty, 1994; Roberts & Green, 2007). Previous research indicates that psychological problems including depression, anxiety, and posttraumatic stress disorder are the primary result of a crime. Although the negative effects of stressful situations are clearly documented in research, the stress and coping processes among victims of crimes remain unclear. In an attempt to gain an understanding of these processes, both distress and well-being need to be examined. The aim of the current study is to examine gender differences in regard to coping strategies, levels of distress, social support, and well-being among victims of violent and nonviolent crimes. Distress is defined as psychological suffering, and in the victim literature, PTSD, anxiety, anger, and depression are the most often cited symptoms. As such, level of distress is defined as the manifestation posttraumatic stress, anger and/or anxiety, and depression.

Multiple factors including PTSD, anxiety, anger, and depression have been related to having experienced a violent or nonviolent crime. The most prevalent classification of psychological
injury in crime victims’ cases is PTSD (Sabbagh, 1995), which is an anxiety disorder. The core relational theme of anxiety is facing an existential threat. Additionally, anxiety often results in the victim questioning their beliefs that the world is a safe place where people get what they deserve out of life (Janoff-Bulman, 1992). Many crime victims describe experiencing high levels of anxiety (Green, Streeter & Pomeroy, 2005; Kilpatrick & Falsetti, 1994) exhibiting physiological anxiety symptoms (rapid heart rate, hyperventilation) and/or cognitive anxiety symptoms (fear of crime, helplessness). These reactions are often considered “flight or fight” responses and have direct impact on coping strategies. An example of this can be seen in the following:

The disruptive effects of high levels of stress in circumstances requiring immediate productive activity are illustrated by the thoughtless action taken by a law enforcement agent during the race riot in Detroit in 1967, as described in the Report of the National Advisory Commission on Civil Disorders. A white National Guardsman believed that his own life was in immediate danger from snipers when he heard shots nearby after having been summoned by a night-watchman to investigate looting. Instead of taking cover and watching to see what was going on, he promptly decide to shoot to kill when he caught sight of a black man holding a pistol. The victim turned out to be the night-watchman, who had shot his pistol into the air to scare off the looters (Janis & Mann, 1977, p. 61).

Anger is another factor related to being a victim of crime. Although there is an absence of extant literature on anger, it has begun to receive attention within the victim literature. Anger reflects a pattern of emotional distress that is associated with depression, anxiety, and posttraumatic stress (Deffenbacher & Stark, 1992). Research further suggests that anger indirectly influences coping style and emotional outcome, in part by eroding social support (Green & Pomeroy, 2005; Houston & Vavak, 1991). Because anger is an emotion that occurs frequently in conflict-laden interactions (Averill, 1982), the nature of anger and its effects are critical issues in relation to the successful recovery for victims of crime. Victims tend to demonstrate feelings of vulnerability, frustration, injustice, and anger (Rando, 1993). The importance of anger can be seen in the relationship of anger and levels of distress.

An additional area of the victim’s mental health that is particularly salient in understanding their responses to the crime event is the amount of depression exhibited. Kilpatrick (1997) pointed out that virtually all victims of violent crime experience some level of depression. What factors account for some victims’ ability to cope effectively with the crime event, while others become overwhelmed and experience depression? The relationship between coping and depression has received increasing interest in empirical research (Endler & Parker, 1990). Several research studies demonstrate the association of emotion-focused coping and depression (Holohan & Moos, 1992; Stanton, Danoff-Burg, Cameron, & Ellis, 1994).

Furthermore, social support has been shown to play an important role in stress resistance and victims’ recovery from crime-related psychological trauma (Cohen & McKay, 1984; Green & Pomeroy, 2007c; Hanson, Kilpatrick, Falsetti, Resnick, & Weaver, 1995; Thoits, 1985). Most studies find that support from friends, family, and the community assists in recovery (Hanson et al., 1995; Hobfall, Freedy, Geller, & Lane, 1990; Kaniasty & Norris, 1992). Cutrona and Russell (1990) classify emotional support as most beneficial to victims because it fosters feelings of acceptance and comfort. Material or tangible support and informational support are also identified as helpful in the
recovery of crime victims (Cutrona & Russell, 1990). Green & Pomeroy (2005) suggest that social support functions as a deterrent in the experience of depression among victims of crime. Additionally, the interplay between social support and coping appears to have a critical role in successful recovery. Although social support has been shown to be an important protective factor among victims of crime, little is known about its differential effect, if any, for male and female individuals who experience different types of crimes.

Finally, another important factor among victims of crimes in coping with traumatic events has been well-being (Baumeister, 1991; Green & Pomeroy, 2005; McIntosh, Silver, & Wortman, 1993). Folkman (1997) has recently modified transaction coping theory to include the occurrence of both distress and positive adaptation or well-being. She postulates that stressful encounters eventually result in positive well-being and that research needs to incorporate this variable. Thus, assessing for the well-being of crime victims is an important variable to assess when comparing types of crime victims. More importantly, well-being measures do not force the victim to look solely at the negative effects of the crime.

On the basis of the literature review, this study examined gender differences in regard to coping strategies, levels of depression, anxiety, anger, PTSD, social support, and well-being of victims of violent and nonviolent crimes.

Method

Sample

Data were collected from 190 crime victims in communities in Texas. “Crime victims” included individuals encountering the crime event or an individual within the immediate family for crimes resulting in death. Violent crime victims were those adult individuals (18 years or older) who had encountered the following crimes, as categorized from offense codes recorded by the County Sheriff’s office in the incident report: homicide, assault, aggravated assault, sexual assault, aggravated sexual assault, elder abuse, manslaughter, intoxication manslaughter, aggravated robbery, family violence, and intoxication assault. Nonviolent crime victims were those adult individuals who experienced the following crimes: theft, robbery, burglary, domestic disturbance, and accidental death. For purposes of analysis, if victims report multiple crime categories, they were placed in the more severe category. Participants were recruited from the Texas County Sheriff’s Office and from Juvenile Court (only adult victims were asked to participate). The agencies worked in collaboration with the researcher in the recruitment of crime victims. Consequently, only those victims whom had reported the crime to a formal organization comprised the study population.

Measures

The Coping Inventory for Stressful Situations: Situation Specific Scale (Endler & Parker, 1994) was used to assess appraisal and coping strategies. The alpha reliability coefficients ranged from .74 to .85.

The Impact of Events Scale (Zilberg, Weiss, & Horowitz, 1982) was used to operationalize posttraumatic stress. The Impact of Events Scale is a 15-item self-report scale which measures emotional reactions, specifically avoidance and intrusion, following a traumatic event such as crime. Split-half reliability for the scale has been reported at .86. Internal consistency of the subscales has been reported ranging from .79 to .92, with the average for the avoidance (component or subscale) component reported at .86 and the average for the intrusion component reported at .90 (Horowitz, Wilner, & Alvarez, 1979).
The State-Trait Anger Expression Inventory (Spielberger, 1983) was used to assess anger. Only the State anger scale was used. This scale defines state anger as “an emotional state or condition that consists of subjective feelings of tension, annoyance, irritation, fury and rage, with concomitant activation or arousal of the autonomic nervous system” (Spielberger, 1996, p. 10). The State-anger scale consists of a 20-item, 4-point Likert scale. Respondents report the intensity of their feeling with 1 being “not at all” and 4 being “very much.” Based on studies of general medical and surgical patients \( (n = 913) \), prison inmates \( (n = 563) \), and military recruits \( (n = 1,868) \), the alpha coefficients have been reported at .93 (references).

The State Trait Anxiety Inventory (Spielberger, Gorsuch, & Lushene, 1970) was utilized to assess levels of anxiety. The State-anxiety scale has demonstrated test–retest reliability with correlations ranging from .16 to .62 in a 104-day interval (Spielberger, 1983). The relatively low correlations are expected due to the situation-specific nature of the scale. Alpha coefficients might demonstrate a more meaningful interpretation of the State-anxiety scale than the test–retest. The alpha coefficients for the State-anxiety scale range from .86 to .95.

The Center for Epidemiological Studies—Depressed Mood Scale (CES-D; Radloff, 1996) was used to measure levels of depression. The CES-D is a 20-item scale measured on a 5-point Likert scale, ranging from rarely (1) to most or all of the time (5), which assesses mood and level of overall functioning during the last week. The CES-D has been normed on various ethnic backgrounds, ages, and genders. It has good internal consistency with a reported coefficient alpha of .85 (references).

Social support was assessed using a 12-item scale developed by Kaniasty (1988) for use with victims of crime. The development of this scale was based on the Inventory of Socially Supportive Behaviors (Barrera, Sandler, & Ramsay, 1981). This is a 40-item scale that assesses the frequency that individuals actually receive specific supportive behaviors from people around them. Alpha coefficients have been reported to range from .58 to .80 and test–retest coefficients range from .46 to .65 over a 4-week period (Kaniasty & Norris, 1992).

Subjective well-being was measured by utilizing the Mental, Physical and Spiritual Well-Being Scale developed by Vella-Brodrick (1994). This is a 30-item scale that measures overall well-being through the incorporation of mental, physical, and spiritual subscales. Vella-Brodrick and Allen (1995) found the scale to have good psychometric properties. Over a 1-month interval, the Mental subscale has a test–retest reliability of .94, the Physical subscale has a test–retest reliability of .81, and the Spiritual subscale has a test–retest reliability of .97. Coefficient alphas are .75, .81, and .85, respectively.

**Data Analysis**

Preliminary analysis of the data consisted of basic descriptive statistics. Chi-square and one-way analyses of variance were conducted to identify between-group differences in demographic and background variables. Descriptive statistics allowed for a preliminary examination of underlying assumptions for multivariate techniques. Multivariate analysis of variance was the statistical technique used to examine differences between males and females. Statistical significance was found with the multivariate analysis of variance procedure; therefore, univariate analyses were performed to analyze the individual criterion variables.

**Results**

Descriptive results are displayed in Table 1. The sample was comprised of victims of crime \( (n = 190) \). The sample consisted of 105 females
and 85 males. Although most of the victims were Caucasian (46.8%), the sample also included African-Americans (34.7%) and Hispanics (18.4%). Approximately one-half (47.9%) of victims interviewed were married which is a reflection of the large number of family violence and family disturbance crimes that were reported.

Significant overall effects were found between male and female victims. The Pillai’s Trace yielded a value of .99 (F = 1288.16; df = 13; p < .001). Subsequently, separate analyses of variance were performed on each dependent variable. Significant gender effects were found among all the variables except for social support, problem-focused coping, avoidance-oriented coping, and physical well-being (see Figure 1, Table 2). Interestingly, although women had higher levels of depression, PTSD, anxiety, and anger, they also had higher levels of mental well-being and spiritual well-being. Women used emotion-focused coping more than men indicating that emotion-focused coping might possibly mediate levels of distress and well-being.

In summary, the multivariate analysis of variance established that the overall main effects between male and female victims of crime were significantly different. Subsequent ANOVA’s supported the significant difference between victims of violent crime and victims of nonviolent crime on measures with the exception of perceived social support, avoidance-oriented coping, physical well-being, and spiritual well-being.

**Conclusion**

This study contributes to our understanding of gender differences in the victim experience and recovery process. The evaluation of gender and coping is largely invisible in the stress and coping literature. Personality traits have become increasingly considered as having a major impact on coping; however, individual characteristics such as gender and ethnicity have not been fully examined (Kobasa & Puccetti, 1993).

Additional studies that examine stress and coping focusing on gender offer a view that differs from the traditional perspective that women are deficient copers (Billing & Moos, 1981; Pearlin & Schooler, 1978). Perhaps, the basis for this perception stems from the acceptance that emotion-focused coping results in higher distress levels and that women typically employ emotion-focused coping more than problem-focused coping. The findings of the
present study challenge this assumption and indicate the need for research to understand effective coping strategies over time in situation-specific environments.

Much research is needed evaluating existing theories of coping with careful examination of gender. Feminist theory may provide some answers in understanding the influence of effective coping strategies employed by women and their subsequent rebuilding of shattered assumptions after the crime event. It could be that women use emotion-focused coping as a way to clarify and pursue goals in stressful situations. Developmental research has revealed that girls are exposed to a wider range of emotion than boys (Brody, 1993). Harding (1991) provides a theoretical approach that may help in analyzing the costs and benefits of various coping strategies for women. This approach asserts that a new view starting from the lives and viewpoints of women must be taken into consideration in understanding their coping processes. It is suggested that women’s various roles in society and the family need to be taken into account. Women’s roles with regard to social support must be considered. Stress and coping research must incorporate a feminist lens through which to view the outlines of a revised theory, and future research is needed to fill the gaps in our current knowledge of how women cope with stressful events.

A key issue involves a fuller understanding of the dynamic relationships among the variables in the current framework. Social support and coping theories need to be incorporated in longitudinal research designs that encompass the complexity of the interpersonal, intrapersonal, and situational factors associated with well-being. More research is needed to examine the relational dynamics among different types of coping strategies, social resources, levels of distress, and well-being throughout the recovery process of victims of crime.

### References


### TABLE 2. Means and Standard Deviations

<table>
<thead>
<tr>
<th></th>
<th>Male crime victims</th>
<th>Female crime victims</th>
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</thead>
<tbody>
<tr>
<td>CES-D-depressiona</td>
<td>45</td>
<td>51</td>
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<tr>
<td>Mean</td>
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<tr>
<td>Standard deviation</td>
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<tr>
<td>IES-PTSDb</td>
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<tr>
<td>Mean</td>
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<td>10.6</td>
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<tr>
<td>Standard deviation</td>
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<td>6.4</td>
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<tr>
<td>STAI-anxietyc</td>
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<td>58</td>
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<tr>
<td>Mean</td>
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<td>20</td>
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<tr>
<td>Standard deviation</td>
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<td>5.1</td>
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<tr>
<td>Emotion focused copinge</td>
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<td>23</td>
</tr>
<tr>
<td>Mean</td>
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<td>31</td>
</tr>
<tr>
<td>Standard deviation</td>
<td>2.8</td>
<td>2.7</td>
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</tbody>
</table>

*Note. CES-D = Center for Epidemiological Studies—Depressed Mood Scale; IES = Impact of Events Scale; PTSD = posttraumatic stress disorder; STAI = State Trait Anxiety Inventory; STAXI = State-Trait Anger Expression Inventory.*

*ANOV A results $F = 10.79; df = 1, 189; p < .001$.  
*ANOV A results $F = 9.53; df = 1, 189; p < .002$.  
*ANOV A results $F = 24.56; df = 1, 189; p < .000$.  
*ANOV A results $F = 8.04; df = 1, 189; p < .005$.  
*ANOV A results $F = 3.95; df = 1, 189; p = .048$.  
*ANOV A results $F = 5.58; df = 1, 189; p < .002$.


