Sociology 4099: Victimology

Lecture Notes Week 4: Social Reactions to Victims of Crime: Victims as Deviants?

Now that we have examined the direct impact of crime on crime victims, we will move on to consider the indirect social impact. In this regard, there is evidence that the social response to victims of crime varies widely, and many times is not what these individuals expect. Today we will examine the range of social responses to victimization, and look at how victims respond to these.

First, to introduce a helpful framework for looking at this topic, we will review the theoretical work of Candace Clark on sympathy. Next, we will briefly address a recent empirical study by Holman and Silver addressing the relative impact of social response on victims of incest. Finally, the remainder of this class will integrate these, along with other theoretical and empirical materials, into my own research illustrating varying social reactions to the families of homicide victims - and their impact. In the end, this contributes to a comprehensive theoretical account on the social reaction to victims, and their responses thereto.

Candace Clark: Sympathy Biography and Sympathy Margin:

Clark begins by asserting that people may either consider crime victims to be "sympathy worthy" or "blame" them for their plight (1987:298). She proposes a theoretical model for distinguishing individuals who receive sympathy from those who are blamed which revolves around the concept of "*sympathy margin*" (i.e. the amount of leeway a given individual has for which s/he can be granted sympathy and not blamed). Describing this concept, Clark writes:

> One's moral worth and network ties affect how many emotional commodities, including 'units' of sympathy and compassion, can be claimed from others and that others feel they owe...(This margin) must be *ascribed by others.* Since we all interact with a variety of others, we may speak of people as having many margins of various widths - one with each specific other in one's network...Each group member has...what amounts to an 'account' of 'sympathy credits'...A certain number of sympathy credits are automatically on deposit in each of the sympathy accounts of the ordinary group member, available for cashing in when they are needed. They are a right of group membership (1987:300-1).

Clark notes that those involved in close relationships have an *obligation* to create wider sympathy margins for each other than do mere acquaintances, but notes that anyone who has been *ascribed* margin has the right to sentiment, empathy, and display of sympathy. Nevertheless, sympathy accounts or margins do not remain constant, but are *continually negotiated*. According to Clark, in this process, these may be "increased, decreased, replenished, or used up entirely" (1987:302). A person may cash in the credits built up throughout his or her "sympathy biography" in a difficult situation, but should not drain the account completely. In such cases, the potential sympathizee may not only lose sympathy, but have to look elsewhere.

Indeed, Clark's identifies four rules of 'sympathy etiquette," which include:

(1) Don't make false claims to sympathy (e.g. exaggerating claims/ "crying wolf");
(2) Don't claim too much sympathy (e.g. continually complaining or whining about something);
(3) claim some sympathy in appropriate circumstances (e.g. don't brush it off as demeaning);
(4) reciprocate to others for gifts of sympathy (e.g. if you received it from somebody on one occasion, provide it to them on another when appropriate). (1987: 303-13).

As well, Clark identifies what she calls "deviant sympathizers," who either "underinvest" by not recognizing others' rights to sympathy, or "overinvest" by giving sympathy to others who are not worthy, whose plights are not worthy, or who do not adhere to the rules of sympathy etiquette (1987:313-16).

Clark's theory is clearly relevant to the social responses experienced by victims of crime, as some are treated with sympathy, some not, and the degree of sympathy expressed often varies over time. Indeed, as we will see ahead, her rules of sympathy etiquette may help explain these variations to some degree.

Holman and Silver: Is it the Abuse or the Aftermath?:
A Stress and Coping Approach to Understanding Responses to Incest:

In this recent piece, Holman and Silver (1996) note that between 15 and 25% of American women experience some form of sexual abuse before age 18, and nearly half of the child sexual abuse cases reported each year involve abuse by a family member. They note that the long term impact of familial sexual abuse on a child's long-term psychosocial functioning has been of great interest to researchers in recent years, with reports of high levels of anxiety, depression, low self-esteem, sleep problems, dissociative disorders, interpersonal and social isolation, and sexual difficulties among many survivors.

However, they note that little of this prior research really gets at the *processes* underlying the development of these long term problems, simply *assuming* that the more severe and ongoing the abuse, the more severe the long-term impact. This ignores the fact that previous studies are split on this, with some showing that less invasive, less frequent abuse leads to greater long-term impact. Added to this, it is often hard to compare issues of severity as previous studies combine intra and extrafamilial abuse victims in the same sample, making it difficult to control for closeness of relationship between victim and perpetrator.

Holman and Silver attempt to take on these inconsistencies by first looking to factors other than actual characteristics of the abuse. They look to stress and coping theory which suggests examining: (1) victims' cognitive processes (e.g. whether they use interpretive processes to alter the meaning and impact of the event or suffer intrusive thoughts and ruminations); and (2) social responses to victims (e.g. whether they become socially isolated, or have supportive relationships enabling them to successfully adapt to stressful experiences.

Holman and Silver next go on to conduct a study taking all of these factors into account. They assess the relationships between abuse characteristics, cognitive processing, social integration

and long-term adjustment of women who were sexually abused during childhood by a father figure. Advertizing for respondents in Southern Ontario, they distributed 96 surveys, of which 77 were completed (an 80% response rate). Factors such as various abuse characteristics, rumination, social integration and long-term psychological adjustment were measured on quantitative scales, coded, and subjected to multiple regression analysis. Two separate analyses were conducted, with long-term distress and self esteem being the dependent variables in each.

Holman and Silver discovered that in order to understand the long-term psychological adjustment of adult women who experienced childhood incest, researchers may need to focus more attention on the cognitive and social aftermath of the experience.

Of the four abuse characteristics measured, only abuse-related violence was significantly related to long-term distress (but *not* frequency, duration or invasiveness). They explain this by considering the potentially confusing nature of sexual abuse when not associated with "obvious" violence. Moreover, with regard to the second regression, none of the abuse characteristics were associated with self-esteem scores.

On the other hand, they discovered that women who were more socially integrated tended to have higher self-esteem and suffer lower levels of current psychological distress. However, women who were more socially isolated suffered more frequent ruminations and were associated with lower levels of self-esteem. Thus, they argue that maintaining involvement in social relationships is related to better adjustment after incest, as higher levels of social integration were associated with lower levels of distress and higher self-esteem.

Holman and Silver argue that there are many ways social ties may encourage successful adjustment. For example, by helping individuals identify cognitive and behavioral means for managing threatening experiences, by providing opportunities to ventilate feelings and work through the event, by choosing to spend time together so as to convey mutual respect, and by reinforcing the view of a secure interpersonal world. Indeed, this may help promote the rebuilding of assumptions about interpersonal safety and trust, while simultaneously providing an important source of coping support.

In closing, Holman and Silver suggest that identifying the specific positive and negative responses offered by the social environment, and the victim's interpretation of these responses, is an important area of future research.

Keeping Clark's theoretical statement on sympathy in mind, along with Holman and Silver's data illustrating the disproportionate impact of social response to victims, we will now combine these approaches and the labeling theory of deviance in a more comprehensive work looking at the social response to those suffering the murder of a loved one (**see overheads for this part**).

<u>Quotes:</u> (a) Extended Family and Friends:

I've always had people really look after me. I've never been left to do this alone - and that made a huge difference. My family and friends were there morning, noon and night for at least 2 years, which made me feel good - to know that they were there for me (Survey #19: Female, age 45).

The only thing I remember is that I was alone - all the time. All the time. There was nobody came around. My family hasn't been supportive. I haven't seen any of my family. None of them have come, and *that hurt*...It's been two years, and I think you are the third person that's been in this house. (Interview #10: Female, age 60). (Emphasis added).

We were *ostracized* in a sense. In our own minds we felt ostracized anyway by everybody we knew (Interview #14: Male, age 54). (Emphasis added).

This was a time for me to find out who my real friends were, and it sometimes *hurt a lot* to see that you friends are not always the one that you had considered. It is a shock. (Survey #3: Female, age 58) (Emphasis added).

I know that my family just damn well didn't know how to cope and how to deal with me (sounds angry). They were scared. In fact we talked about it. We went home and it was discussed - and they said that they had no idea. They really didn't know how to deal with me, and were afraid to even phone me (sounds tearful). (Interview #15: Female, age 49).

Like my friends are afraid to keep bringing it up, and they shy away because they're afraid you're going to bring it up, 'cause they're afraid they're going to 'Say something that's going to hurt you.' So they shy away. Maybe they don't know that you want it. That its alright to talk about it. So they're afraid to. I think that's what happens with a lot of them, they're afraid to start...Cause, I had a few people that I've bumped into, and I've said: 'Oh, you haven't been around.' 'Well _____ (respondent's name), it's not that we didn't want to. It's just that we just don't know what to say, and we didn't want to say the wrong thing and hurt your feelings.'" (Interview 21: Female, age 45).

My family, for the most part, kept their distance. And, occasionally when *we'd* come by, they would just sob and cry, and they'd be so upset. The few that *did* came by, they'd just break down. Horrible. I think they felt they were just upsetting us more and would be all apologetic. Then they wouldn't come by. (Interview #31: Female, age 46). (Emphasis added).

Our friends? It varied. I think that the reason why some of them kind of were standoffish, was because they couldn't handle it themselves. I figure that because they knew _____(the deceased) personally, they just couldn't handle it. It was too close to reality for them, so they kind of backed off. I was a little bit taken aback by that and I was very hurt. It's been difficult because you really do need your friends at a time like that. (Interview #1: Female, age 47).
We had some very close friends who came out to visit us, but after a while their recommendation to us was, 'You've got to put this in the past, like, bury this right now.' (Sarcastically) The closest

friends we had! He'd say to me '____ (survivor's name), You've got to put this behind, get back to work, and you've got to get on with your life.' You know, 'You've got to maintain your business, you've got to...' and I'm not thinking any of this! (Interview #14: Male, age 54).

They started changing the subject a lot, so we would just pick up on it that 'OK, we won't talk about this any more.' We caught the vibes, right? Bad vibes. Some pulled back from us, and this continues right up to the present. Nobody really wants to talk. (Interviews #8: Female, age 45).

I think if I'm showing signs of emotion, I mean showing tears or emotional stress to others, they don't feel very comfortable, because they don't know how to handle it. And so, if you are at a stage where you can't speak about your son or daughter clearly, openly, and without showing an awful lot of undue stress, it drives people away. (Interview #5: Male, age 50).

The rest of my relatives were worthless and acted like a stigma attached to us, like something about us caused us to have a murder victim. (Survey #7: Female, age 38).

Some asked me 'How could you let him kill the kids?' A few other people I counted as close friends suddenly were distant. The press had picked up that when _____(the offender) was arrested he shouted that I had done it. Some of these 'friends' seem to have doubts about my involvement. (Survey #6: Female, age 37).

(b) Acquaintances, Strangers and the Community:

It was really strange because you found out who you could lean on. You know, and sometimes it's the people you least expect. (Interview #16: Female, age 56). (Emphasis added).

We found some friends that we considered to be close friends never showed up again. Yet, there were other people that came out that we had sort of considered acquaintances, and we became very close. (Interview #24: Male, age 47).

_____(the deceased) had a lot of friends. She was a very popular girl. She had a lot of friends from school. And I was very active in the community. I belonged to the Optimist Club, I coached baseball, I coached hockey, and so on - so I was very active, as far as that goes, with kids and all that all the time. I worked in other various organizations, working bingos and fundraising. So, I mean, there were a lot of people that it stunned too. Then, as the trial went on, they were reading the newspaper and they were getting upset with what was being said, and most of the people got together, and they wanted to do something. So, basically that's how it started. (Interview #23: Male, age 49).

It was not until the Saturday that it made the papers. The local paper did a good story, and people started coming to the door then, and we had literally hundreds of total strangers just arriving at our door in tears, very upset. It was obviously that their prayers were with us. Food started arriving in trays, flowers, baskets of fruit, it was just incredible. From 10AM to 10PM there was just a steady stream of traffic, and probably thirty to forty people at all times. (Interview #31: Female, age 46).

I went on the radio (to thank the community search teams). A policeman phoned in and said 'I searched for (the deceased), now what are you going to do?' And that's how I started. I wrote a petition, and this whole thing kept going and kept going. So that is how _____ (this survivor's organization) happened. People just kept coming to us and saying 'what are you going to do?' There was never a day when the phone didn't ring thirty times. (Interview #17: Female, age 50).

Why isn't our daughter being talked about? (Field Notes: Female, age 50).

The publicity made it worse. The fact that the murder had to deal with drug dealing made it much worse, as there was no sympathetic community support. It was almost 'like AIDS.' (C.I.C.B. #91: Testimony of Female, age 46).

Like, we got obscene phone calls to the house. The minute that we became public, I got phone calls that 'If you and your family had belonged to the right religion, these horrible things wouldn't happen to you. God is punishing you.' We'd get phone calls like that. One day this guy phoned and asked if I was the mother of one of these children that had been murdered. I said I was, and he says 'Well, would you stay on the line while I masturbate?' And like this is for real! This is going on like every hour around here. Like - not just sporadically days apart - this is for real! And it's going on constantly. (Interview #15: Female, age 49).

One young girl came to the funeral home. I think when you have that type of thing, some come just to be nosy, like, to see what they can see. She had just come with these other girls, and said 'Well, the little slut got what she deserved.' People had to hold us back! (Interview #21: Female, age 45).

You know, you're a bit of a freak for a while because people don't really understand: 'Oh, that's the woman that lost her daughter.' People point you out. When they hear the name, they say, 'Oh, are you *the* _____?' (respondent's first name). Like, that kind of thing. And you go 'No, I'm just me.' I kind of lose it there. (Interview #16: Female, age 56). (Emphasis in Original).

We went on a cruise, a company cruise. When we'd come down to dinner, we'd be the last, so everyone's sitting around their tables are laughing and having a good time. Whatever table we'd pick, Whew! Dead silence. In the end we sat by ourselves in the corner. Cause when you sit at a table with people who are feeling that way, I had to start the conversation, and you know what it's like to try and talk...I mean its bullshit that you have to come up with these little weak things to keep the conversation going. (Interview #26: Male, age 61).

(c) Subjects' Responses:

I did go to a psychiatrist on a regular basis, because (sighs) after a while your friends don't want to hear about it any more. They just don't want to talk about it, or they're uncomfortable talking to you about it. (Interview #16: Female, age 56).

If it wasn't for the group, I would be so isolated, and I wouldn't have a network, and I wouldn't have...soul companions...Because our families won't let us talk about it, cause they're dealing

with guilt or something of their own, and they won't allow us to really express ourselves and hear this stuff, you know? So we do it amongst ourselves. (Interview #19: Female, age 53).

We didn't require any counselling. We've got good family around us, and that's how we've dealt with it. (Interview #24: Male, age 47).

A few times I thought I should've gone to the hospital, but I didn't want to. I'm lucky I have friends. It's nice to have a support system behind you. You know, a support system is very important to mental health. (Interview #1: Female, age 47).

I have a friend who lost his son - I guess it was some sort of cancer. Well, because of his loss, he had sought help with (a self help group). So, knowing what had happened to us, he says 'I'd like to talk to you for a minute.' We talked a bit, and he went on to tell me about the group, and he told me about himself, and how his grief had been helped. He highly recommended it, saying that he wouldn't have survived without them. It was interesting, so I approached my wife. (Interview #4: Male, age 56).

There were so many people that wanted us to go (to a support group), and sit down and tell these people all your problems, and they're going to tell you all their problems. No way! (Interview #26: Male, age 61).

I had people there who I could talk to, and that was good for me. In fact, right or wrongly, I made the *decision* that that would be the only place I'd ever talk about this. I would not talk to my friends or family unless I had to. But fortunately, you know, *a survivor will find a way - and that's exactly what I did*. I felt 'Hey, who needs them?' (Interview #18: Female, age 55). (Emphasis added).

She didn't go back home at all during the entire four months - and remember she's got a child at home. She was dreading going home. I encouraged her to, but she didn't - she went to the psychiatric ward instead. She came out once, and I was talking to her on the phone, and I said 'How are you?' 'Oh,' she said '*You know, I've just come out of (the psychiatric ward*).' And I said 'Yes, I know.' I mean, *I didn't even comment to her*. (Interview #17: Female, age 50). (Emphasis added).

Let's face it. It's the women who are getting killed mostly. (In an angry tone) It's the children that are being assaulted and sexually assaulted and being killed by men. You don't see that many women doing that type of thing, right? So, I mean, us women are just trying to protect what is right. Working as part of a group to change the justice system makes you feel like you are doing something about it. At least you aren't sitting around doing nothing. (Interview #22: Female, age 46).