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Multiple victimisation in socially excluded women: From prevalence to meanings

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Abstract

Studies about violence against women usually fail to account the multiple nature of victimisation. This study aims to characterize the phenomenon of multiple victimisation in a sample of 41 socially excluded women. In the quantitative study, results showed a high number of experiences of victimisation suffered throughout life, with a higher prevalence in adulthood perpetrated by partners. In the qualitative study, the aim was to explore the subjective understanding of multiple victimisation. The most significant experiences were victimisation in intimate relationships in adulthood. Even though some women label those experiences as growth opportunities.

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1. Introduction

Violence against women is a social and public health problem, defined as the physical and/or psychological abuse of women because of their biological condition and their social role (Löbmann, Greve, Wetzels, & Bosold, 2003). Studies have underlined that women are the preferential victims of violence (e.g., Linares, 2004). They have also pointed out that the isolated experience of only one type of victimisation is rare, as it is commonly associated with

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other types of violence, becoming a phenomenon of multiple victimisation (Finkelhor, Ormrod, & Turner, 2007a, 2007b; Scott-Storey, 2011).

Literature review shows that the majority of the studies on violence against women are quantitative and focused on domestic violence and interpersonal violence. In this sense, it seems important to characterize the phenomenon of multiple victimisation, as well as the meaning given by women victims and its' cumulative effect.

There is still not a consensus regarding the definition and terminology of multiple victimisation. In this work, it refers to the experience of two or more types of victimisation throughout life, in different contexts and/or perpetrated by different agents (Olsvik, 2010). This concept must be distinguished from polivictimisation, which includes four or more types of violence (Finkelhor et al., 2007a). Both of them are different from repeated victimisation and revictimisation, which are related to more than one episode of the same type of violence (Finkelhor et al., 2007b).

There has been an increasing concern for analysing the mechanisms that may potentiate the risk of multiple victimisations. Theorists agree that a previous victimisation experience may be a risk factor to other types of victimisation (e.g., Kimerling, Alvarez, Pavao, Kaminski, & Baumrind, 2007). Literature has revealed that, even though violence is a transversal phenomenon in all contexts, there are some sociodemographic characteristics that may influence that risk, such as socioeconomic status, gender, race, ethnicity, immigrant status, unemployment, educational graduation, lack of social support and working conditions (Sabina, Cuevas & Schally, 2011). Some studies have emphasised intersectionality issues (e.g., Crenshaw, 1991), proposing that the intersection of several types of oppression (e.g., gender, race, socioeconomic status) increase women's vulnerability to be targets of cumulative abuse (interpersonal, structural and institutional), which explains the high prevalence of multiple victimisation in social minority groups (Olsvik, 2010; Sabina et al., 2011). Thus, considering that intersectionality has been inefficiently captured by research, it is pertinent to study the multiple victimisation in socially prejudiced and vulnerable groups, specifically, in women.

Although the prevalence data are not unanimous, studies point out high and concerning levels of multiple victimisations in several samples, mainly in women who belong to ethnic minorities. For instance, in studies conducted with participants from universities, prevalence rates vary from 49,2% (Elliott et al., 2009) and 51,5% (Sabina & Strauss, 2008). Linares (2004) indicates a rate of 37% within ethnic minorities. Cuevas, Sabina e Milloshi (2012) present a rate of 66,2% in Latin immigrants.

Studies have also documented the multiple victimisation impact, and unanimously state that multiple victimised women have higher risks of developing psychological adjustment problems (e.g., Cuevas, Sabina, & Picard, 2010; Kimerling et al., 2007). However, the relation between multiple victimisation and impact is not linear. There are individuals that, despite having a life trajectory characterised by adverse experiences, do not evidence symptomatology (e.g., DuMont, Widom, & Czaja, 2007). Literature indicates that individual and social features may act as protective factors, such as intelligence, self-esteem, optimism, sense of mastery and social support (e.g., DuMont et al., 2007). Besides, active coping mechanisms/strategies might mediate and moderate the consequences of violence (Löbmann et al., 2003). Moreover, the meaning that the victims give to their experiences might also have a major role in the impact and risk of multiple victimisation (Draucker, 1997).

The present study intends to understand multiple victimisation on women associated with the social conditions of marginalisation and poverty. Being so, the research questions were: i) What is the prevalence of multiple victimisation throughout life? Which are the characteristics of multiple victimisation? ii) What meaning do women attribute to their experiences of multiple victimisation?

2. Method

This descriptive study follows a mixed method approach with a quantitative and a qualitative study in order to answer the research questions i) and ii), respectively.

2.1 Participants

41 women participated in this study, aged between 19 and 59 years old, with an average of 35.61 (SD = 9.95). Regarding nationality, 78% of the participants were Portuguese, 7.7% were Brazilian, 4.9% Angolan, 2.4% Guinean,

2.4% Cape Verdean, 2.4% French and 2.4% had double nationality. Concerning race, 80.5% of the women were Caucasian and 19.5% were Black. 63.4% of them came from urban areas and 36.6% from rural areas.

Regarding their educational graduation, 17.1% finished Secondary Education (12th Grade), 17.1% of the participants concluded Primary Education (4th Grade) and 14.6% the 6th Grade, 9.8% had a Degree and 2.4% stated they had never attended school. Concerning working conditions, 63.4% were unemployed, 12.2% had a temporary job and 2.6% were retired. Only 22% had a stable job. 46.3% of the participants were divorced/separated, 31.7% were single and 22% were married/had a civil union. The number of children varied from 0 to 4 ($M = 1.73$, $SD = .81$). 53.7% of these women were living in shelter houses when data were gathered.

2.2 Measures

Demographic information: participants' age, nationality, area of living, marital status, educational graduation, working conditions, socioeconomic level, number of children, and if they were, or not, in shelter houses.

Victimisation throughout life Questionnaire (Matos, Conde, & Costa, 2012), adapted from Lifetime trauma and victimisation history (LTVH, Widom, Dutton, Czaja, & DuMont, 2005): evaluates the types of victimisation that women have suffered during their lives. For each life stage (childhood, adolescence, adulthood), women were asked about their victimisation experiences (e.g., physical, psychological violence). The last part included exploratory questions on the most meaningful victimisation experiences and the way these women give meaning to them.

Marital Violence Inventory (Inventário de Violência Conjugal - IVC; Matos, Machado, & Gonçalves, 2000): has 21 items evaluating the violent acts suffered inside an intimate relationship and presents two sub-measures respectively related to physically abusive acts and emotionally abusive acts.

2.3 Procedures

Participants were chosen according to the following inclusion criteria: a) have multiple victimisation experience; b) have current (or during the previous year) victimisation experience (domestic and/or sexual); c) be dependent of institutions and being socially excluded (e.g., long periods of unemployment, poverty, marginality); d) not have received psychotherapy; and e) have basic cognitive abilities (in order to fill the instruments).

A convenience sample was used, as victim's support institutions referred them to the research. Besides, a snowballing strategy was also used, identifying interesting cases through participants who knew other potential participants.

Information about the aims and procedures of the research were given to the participants. Anonymity was guaranteed and they have stated their informed consent. Participants filled out self-report questionnaires (lasting about 40 minutes) and were interviewed (lasting about 90 minutes).

A semi-structured interview was used, from the Victimisation throughout life Questionnaire (Matos, Conde, & Costa, 2012), in order to encourage women to detail their experiences of multiple victimisation, its' impact and meanings. A thematic analysis was used (Braun and Clarke, 2006) on the interviews' transcripts, allowing a rich, detailed and complex description of data through the pattern analysis. Software Nvivo8 (QSR, 2008) was used to organise, codify and analyse data. Two coders individually codified themes in an inductive way and the same unit of analysis could be codified in several themes. Coders had a substantial agreement index of 0.87 (Vala, 1986).

3. Results

3.1 Quantitative Study

In terms of prevalence, all participants suffered several types of victimisation throughout their lives: in average, these women suffered 13.83 ($SD = 5.14$) types of victimisation. The age in which these women were victims for the first time varied considerably: between 2 and 20 years old ($M = 7.18$, $SD = 3.62$). Nevertheless, adulthood was the period of time in which there was a major frequency of the victimisation experience, with a mean value of 6.73 ($SD = 1.94$). During that period, all participants mentioned having suffered a minimum number of four different types of

victimisation. In childhood, the average of victimisation experience was 3.78 (SD= 2.49) and in adolescence 3.32 (SD= 2.42).

Table 1 presents the prevalence of the diverse types of victimisation suffered by the participants, during the different stages of life and throughout their lives. In childhood, psychological violence assumed a major role for most of the participants (79.5%), followed by vicarious violence (69.2%) and physical violence (56.4%). During adolescence, the most predominant ones were psychological (64.1%) and vicarious violence, as well as discrimination (41%). In adulthood, all women mentioned psychological violence, even though it is also relevant to underline the high numbers related to physical violence (87.2%) and discrimination (76.9%). Accordingly, the prevalence rates throughout life have shown that the most frequent types of victimisation were psychological (84.6%), physical (64.1%) and vicarious (59%).

Table 1 – Prevalence of the Types of Violence Suffered during Life Stage and Throughout Life

	Childhood	Adolescence	Adulthood	Victimisation throughout life ^a
Psychological violence	78%	63.4%	100%	82.9%
Physical violence	53.7%	39%	87.8%	61%
Vicarious violence	70.7%	56.1%	43.9%	61%
Discrimination	36.6%	39%	78%	41.5%
Sexual violence	24.4%	29.3%	61%	29.3%
Negligence	26.8%	19.5%	48.8%	24.4%
Institutional violence	2.4%	2.4%	58.8%	2.4%

^a Women who have suffered the type of victimisation during, at least, two periods of their lives.

During childhood and adolescence, the most recurrent perpetrators of the violence were the victims' mothers and peers, while in adulthood the intimate partner/ex-partner was the one responsible for the victimisation.

On what concerns other types of victimisation, 70.7% of the women suffered some sort of crime against property (e.g., property damages/destruction, theft), 61% were victims of stalking, 26.7% were kidnapped, 24.4% were discriminated and 24.4% were victims of mobbing.

During these victimisation trajectories, and in some specific period of their lives, the majority (90.2%) of the women felt their lives were in danger. Regarding intimate violence suffered during the last 12 months, 82.9% of the women stated they have suffered emotional maltreatments and 75.6% physical maltreatments.

3.2 Qualitative Study

Even though meaningful types of victimisation were identified in all the stages of lives, 70.7% of the participants highlighted victimisation in adulthood, being the intimate violence the most meaningful one for the majority of the participants.

Even though, 46.3% of the participants considered that the victimisation suffered during childhood was the most meaningful one; only 14.6% focused their attention in victimisation during adolescence. In all stages of life, participants emphasised the presence of physical maltreatments.

On what concerns childhood, participants reported physical maltreatments (14.6%), sexual abuse (9.8%) and the exposure to homicide (7.3%). In adolescence, they mentioned physical maltreatments (7.3%), bullying (7.3%) and social stigmatisation (4.9%). Finally, and regarding adulthood, women stressed intimate violence (61%), family violence (9.8%) and rape (2.4%).

Participants also mentioned victimisation impact. They have essentially identified emotional and psychological consequences (78%), such as: grief/sorrow (26.8%) ("I have lost some years of my life because of this, with a lot of

grief, sadness, I can't bring those years back"), unsafeness (26.8%) ("And I am afraid ... Unsafeness, that is what I constantly feel"), discouragement (21.9%) ("Yes, I am tired. It seems that the suffering absorbs everything inside us, there is no emotion, no will, nothing"), disgust (21.9%) ("I feel a lot of anger, he is a criminal and I was the one who had to run away, that completely disgusted me...") and trauma (19.5%) ("This is a mark that does not disappear, it does not mean that I do not forgive, but it is a mark"). Women have also mentioned interpersonal damages (36.6%), related to a higher distrust ("And thus I learnt to be more careful when dealing with people"), especially of men ("To be honest, nowadays, I do not trust any man").

It was also possible to understand how women dealt with victimization throughout their lives. They developed cognitive coping strategies (21.9%), as resignation (14.6%) ("And I went, it was horrible, I knew I did not like it, I felt repulsion, but I went, or else my mother would beat me, threatened me saying I would have to leave home") and avoidance (7.3%) ("I try not to think about those situations so that I do not damage myself, that is it"). Behavioural strategies (24.4%) were also developed: having sought for help (7.3%) ("There was a specific situation, when I had to seek refuge in the company he was working, and then they called the police"), maintaining silence (7.3%) ("During many years I did not talk about it"), getting out of the abusive context (4.9%) ("I run away, when I could, then a gentleman took me and married me") and having resort to confrontative coping (4.9%) as a way of self-defence ("I was only able to stop him when I broke his head with a stick... I did it because he just would not stop").

Participants have made several spontaneous reflections about their victimisation trajectories. On what regards causes (46.3%), there were self-blaming discourses (19.5%) ("I could have done better, I could have abandoned home earlier"), but also considerations about the perpetrator, such as the attribution of violence to abusive consumption of substances (4.9%) ("And then, of course, we know that it is not his guilty; alcohol is the one to blame for") and personal characteristics (12.2%) ("It's hard to think that your mother forces you to sell your body for money; she is greedy and mean"), psychopathology (12.2%) ("I knew that he was obsessive, it was obsession, it was a disease"), intergenerational violence (7.3%) ("His father also did that to his mother") and cultural features (2.4%) ("For them it is common that gypsies beat their women").

The participants tried to give meaning to the violence, and some reflected about the violence they have suffered throughout life (43.9%). They have highlighted self-questioning ("I frequently feel frustrated about it. I asked myself why? Is there anything that it is not good?"), incomprehension (9.8%) ("Nowadays, I still do not understand why people are cruel enough to harm others, why they do it"), feelings of unfairness (14.6%) ("I did not deserve to get through this; a woman is not born to be mistreated and discriminated") and the identity as martyrs (24.4%) ("I feel I am a martyr... At this point of my life, I am already a martyr").

Women reported also a post-victimisation growth (48.7%, from which 61.1% of those were in shelter houses), namely the understanding of the victimisation experiences as apprenticeships (24.3%) ("It is over, it was an apprenticeship, I have learnt to live, I have learnt to strive and fight"). There were also signals of resistance discourses (24.3%) when facing adversity ("It gave me more strength to live, to show that despite all this, I am a strong woman, I can surpass this and any other thing"), perseverance based on their children (9.8%) ("I try to think about my children and move forward") and a sense of recovery (4.9%) ("I do not consider myself a victim, I never allowed myself to be one, I have always overcome difficulties and fought to be on top").

4. Discussion

In the present study we tried to look for an integrated comprehension of the multiple victimisation phenomenon – from the prevalence to the meanings from the victims perspective.

Findings suggest that women suffered a large number of victimisation experiences throughout their lives, starting precociously. Finkelkor and collaborators (2007a) argue that victimisation may be a condition related to more than one event through life. The fact that these were socially excluded and poor women might have, in fact, potentiated the cumulative effect of other types of violence (e.g., institutional), leading them to a condition of extreme vulnerability.

The most common perpetrators during childhood and adolescence were women's mothers and peers, while in adulthood it was mainly the intimate partner/ex-partner. As literature suggests (Cuevas et al., 2012), violence can be adopted as an educational practice (Machado, Gonçalves, Matos, & Dias, 2007), which seems to occur with these participants, as they witnessed violence against their mothers and, at the same time, have been victimised by them.

During their life trajectories, there was a decrease of vicarious violence and an increase of direct violence, as they became victims of their partners. Previous victimisation experience can, in this sense, turn into a risk factor to other types of victimisation (Kimerling et al., 2007).

However, victims dealt with victimisation experiences through cognitive (e.g., avoidance) and behavioural (e.g., ask for help) coping strategies, activating mechanisms/strategies to re-establish themselves (Löbmann et al., 2003).

Probably because of the large amount of victimisation experiences in different stages, almost all participants have felt their lives in danger throughout their lives. Indeed, a harmful impact is evident in their discourse. However, when women reflected about victimisation, they reported a post-victimisation growth, somehow related to the “post-traumatic growth” phenomena (Tedeschi & Calhoun, 2004). Similar to what happens in a “traumatic event”, the participants identified positive changes in their lives and attempts to adapt themselves to negative events, which was associated with an increase in well being (Helgeson, Reynolds, & Tomich, 2006). These reflections seemed to guide them into several changes, such as life valorisation, the perception of personal strength and empowerment and a new line-up of personal priorities (Tedeschi & Calhoun, 2004). These reflections seem to be more common in institutionalised women. That can be related to the fact that institutions can effectively give a sense of security and continuity of life, supporting a new life project, minimising the harmful impact. On the other hand, the integration in a shelter house normally occurs in the most extreme violent cases, which may, paradoxically, be associated with the notions of “survival” and “growth”.

Women were more likely to understand victimisation in individual terms and did not report its cumulative nature. Yet, there were several significant reflections on victimisation and the need to give meaning to the experiences they had gone through. This may happen because such experiences change the personal understanding of the world and others, leading to a search for new schemes, aims and self-meanings (Tedeschi & Calhoun, 2004).

5. Conclusion

This study, based in a combined methodology, document that women who were multiple victimised in family and in the community report high negative impact (e.g., discouragement, grief), but also the possibility of “growing” after the victimisation (Tedeschi & Calhoun, 2004). So, it is important that psychological interventions do not focus their attention only on the deficit and symptomatology, but also on the resources and skills, potentiating “growth”.

Finally, this study has some limitations. Its’ retrospective nature increase the risk of memory deterioration. Data from self-report reflect the participants’ perceptions and may underestimate or overestimate the types of victimisation. Lastly, the majority of the sample is Portuguese and Causasian not allowing obtaining differences between the groups.

In further researches, it seems important to study elements that make women vulnerable to multiple victimisation, controlling variables such as race (Linares, 2004), social support and coping strategies (Löbmann et al., 2003). Besides, it is important to compare women who have experienced victimisation throughout their lives with the ones from women who have only experienced it in adulthood and also those we are “resilient” to those who are misadjusted.

References

- Braun, V. & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77-101.
- Crenshaw, K. (1991). Mapping the margins: intersectionality, identity politics, and violence against women of color. *Stanford Law Review*, 43(6), 1241-1299.
- Cuevas, C. A., Sabina, C. & Millosi, R. (2012). Interpersonal victimization among a national sample of Latino women. *Violence Against Women*, 18, 377-403.
- Cuevas, C. A., Sabina, C. & Picard, E. H. (2010). Interpersonal victimization patterns and psychopathology among Latino women: results from the SALAS study. *Psychological Trauma: Theory, Research, Practice, and Policy*, 2(4), 296-306.
- Draucker, C. B. (1997). Early family life and victimization in the lives of women. *Research in Nursing & Health*, 20, 399-412.
- DuMont, K. A., Widom, C. S. & Czaja, S. J. (2007). Predictors of resilience in abused and neglected children grown-up: the role of individual and neighborhood characteristics. *Child Abuse & Neglect*, 31, 255-274.
- Elliott, A. N., Alexander, A. A., Pierce, T. W., Aspelmeier, J. E & Richmond, J. M. (2009). Childhood victimization, poly-victimization, and adjustment to college in women. *Child Maltreatment*, 14, 330-343.
- Finkelhor, D., Ormrod, R. K. & Turner, H. A. (2007a). Polyvictimization and trauma in a national longitudinal cohort. *Development and Psychopathology*, 19, 149-166.

- Finkelhor, D., Ormrod, R. K., & Turner, H. A. (2007b). Poly-victimization: a neglected component in child victimization. *Child Abuse & Neglect*, 31, 7-26.
- Helgeson, V. S., Reynolds, K. A. & Tomich, P. L. (2006). A meta-analytic review of benefit finding and growth. *Journal of Consulting and Clinical Psychology*, 74(5), 797-816.
- Kimerling, R., Alvarez, J., Pavao, J., Kaminski, A. & Baumrind, N. (2007). Epidemiology and consequences of women's revictimization. *Women's Health Issues*, 17, 101-106.
- Linares, L. O. (2004). Social connection to neighbors, multiple victimization, and current health among women residing in high crime neighborhoods. *Journal of Family Violence*, 19(6), 355-366.
- Löbmann, R., Greve, W., Wetzels, P. & Bosold, C. (2003). Violence against women: conditions, consequences, and coping. *Psychology, Crime & Law*, 9(4), 309-331.
- Machado, C., Gonçalves, M., Matos, M., & Dias, A. R. (2007). Child and partner maltreatment: Self-reported prevalence and attitudes in the North of Portugal. *Child Abuse & Neglect*, 31, 657-670.
- Matos, M., Machado, C. & Gonçalves, M. M. (2000). IVC – Inventário de Violência Conjugal (Conjugal Violence Inventory). Braga: Universidade do Minho, Escola de Psicologia.
- Matos, M., Conde, A. R. & Costa, M. G. (2012). Questionário de vitimação ao longo da vida (Victimisation throughout life Questionnaire). Braga: Universidade do Minho, Escola de Psicologia.
- Olsvik, V. M. (2010). Multiple and repeat victimization of women with physical disabilities. Lillehammer: Østlandsforskning.
- QSR International (2008). Nvivo8. QSR International Pty Ltd.
- Sabina, C., Cuevas, C., & Schally, J. (2011). Help-seeking in a national sample of victimized latino women: the influence of victimization types. *Journal of Interpersonal Violence*, 27 (1), 40–6.
- Sabina, C. & Straus, M. A. (2008). Polyvictimization by dating partners and mental health among U.S. college students. *Violence and Victims*, 23(6), 667-682.
- Scott-Storey, K. (2011). Cumulative abuse: do things add up? An evaluation of the conceptualization, operationalization, and methodological approaches in the study of the phenomenon of cumulative abuse. *Trauma, Violence, & Abuse*, 12(3), 135-150.
- Tedeschi, R. G. & Calhoun, L. G. (2004). Posttraumatic growth: conceptual foundations and empirical evidence. *Psychological Inquiry*, 15(1), 1-18.
- Vala, J. (1986). A análise de Conteúdo (Content analysis). In A. S. Silva & J. M. Pinto (Eds.), *Metodologia das Ciências Sociais (Social Sciences Methodology)* (pp. 101-128). Porto: Afrontamento.
- Widom, C. S., Czaja, S. J., & Dutton, M. A. (2008). Childhood victimization and lifetime revictimization. *Child Abuse & Neglect*, 32, 785-796.