

# Gender-Role Flexibility, Resilience, and Interpersonal Trauma

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## Introduction

Interpersonal trauma (IPT) effects a significant number of Americans each year and can have a number of negative outcomes for survivors, including increased risk for posttraumatic stress disorder (PTSD).<sup>1, 2</sup> The burden of IPT is not equally shared between genders, as women experience higher rates of IPT in comparison to men and are at an increased risk for developing PTSD following such traumas.<sup>3, 4, 5, 6, 7</sup> In addition, a disparity between genders has also been shown for levels of resilience, as men tend to score higher than women on such measures.<sup>8, 9, 10, 11, 12</sup>

Several factors may influence the gender disparity shown for PTSD prevalence and resilience levels, including rigid subscription to traditional gender-roles as they have been demonstrated to be beneficial to men and less beneficial to women during and following such experiences.<sup>6, 13, 14</sup>

Rigid adherence to these gender-roles may limit the choices of behavioral responses one may utilize during and following an IPT experience. Conversely, gender-role flexibility may allow individuals to respond more adaptively to situations by identifying and utilizing behavioral responses attributed to both men and women.<sup>15, 16, 17, 18</sup>

## Interpersonal Trauma

### Definition:

The term interpersonal trauma (IPT) describes traumatic events that are perpetrated by one human being against another and can include:

- psychological, sexual, or physical abuse;
- deprivation or neglect;
- violence related to property crimes;
- and mass interpersonal violence (shootings, bombings, and large-scale abuses of human rights).<sup>4, 19, 20, 21</sup>

### Prevalence:

Approximately 3.1 million U.S. residents experienced a violent crime falling under the category of IPV in 2017.<sup>2</sup>

The National Center for Injury Prevention and Control (2011) indicated a difference in the prevalence rates of PTSD for males and females:

Rape:	Stalking:	Abuse by an Intimate Partner:
Men - 1.4%	Men - 5.2%	Men - 28.5%
Women - 18.3%	Women - 16.2%	Women - 35.6%

However, these statistics are likely significant underestimations of actual rates of occurrences and the size of the disparity between the prevalence for male and female genders may be inaccurate due to a decreased likelihood that men will report such experiences.<sup>20, 22</sup>

## Posttraumatic Stress Disorder

### Prevalence:

Research consistently shows differences in the prevalence rates of PTSD for males and females:

- Men - 4%
- Women - 12%<sup>4, 6</sup>

### Reasons for Gender Disparity:

The research has indicated that this gender disparity of PTSD prevalence may result from women's increased risk for:

- IPT, especially the most damaging forms of IPT (IPT during childhood, betrayal trauma, and sexual assault)
- multiple experiences of IPT
- and for receiving invalidating messages from friends and family following IPT, compared to men.<sup>4, 5, 6, 7, 11, 20, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32</sup>

However, not every individual who experiences IPT develops PTSD and those who do not are described in the literature as *resilient*.<sup>33, 34, 35, 36</sup>

## Resilience

### Definition:

The ability to adapt and attain positive outcomes following stressful experiences.<sup>36</sup>

The construct is currently understood to be:

- both a process and an outcome;
- fluid, multidimensional, multifactorial, variable, and modifiable;
- and influenced by dynamic social contexts.<sup>11, 35, 37, 38, 39, 40</sup>

### Psychological and Social factors shown to contribute to resilience:

- disgust,
- anxiety sensitivity,
- growth and meaning,
- perceptions of autonomy,
- positive coping,
- social support,
- Social advocacy,
- hope,
- placing blame in the perpetrator,
- self-forgiveness,
- self-compassion,
- self-care,
- community involvement,
- personal goals,
- utilization of knowledge,
- compartmentalization,
- use of silence,
- and social functioning<sup>1, 35, 36, 39, 40, 41, 42, 43, 44, 46</sup>

### Gender Discrepancy:

An additional factor that has been found by some studies to predict resilience is male gender identity.<sup>8, 9, 10, 11, 12</sup>

### Reason for Gender Discrepancy:

- **Trauma type**—Research has shown a lack of discrepancy when trauma type is accounted for.<sup>11</sup>
- **Coping style differences**—Women more often employ emotion-based coping styles than men, which have been shown to have a negative impact on resilience, and men more often employ instrumental or action oriented coping styles, which have shown to have a non-significant to positive effect on resilience
- **Method of measurement**—PTSD symptom endorsement is utilized for measurement of resilience in some studies. In addition, a lack of gender sensitivity has been demonstrated by commonly used resilience measures. Specifically, social support, which has been demonstrated to be beneficial for the health and well-being of women, is a factor not included in many resilience measures.<sup>9, 11, 24, 35, 36, 38, 47</sup>

## Gender-Role Flexibility

### Traditional Gender Roles:

- **Masculine**— emphasize strength, power, leadership, confidence, agency, achievement, and independence.
- **Feminine**— emphasize submission, compassion, social connection, emotional expression, selflessness, and interdependence.<sup>6, 13</sup>

Roles for both genders include desirable aspects, such as agentic characteristics for men and communal characteristics for women.<sup>16</sup> However, socialization may teach women that they lack autonomy and control, which can:

- increase the likelihood that they will perceive trauma experiences as dangerous and out of their control,
- and cause women to underestimate their self-efficacy and ability to endure distress.<sup>14</sup>

Furthermore, during and following experiences of IPT, strict adherence to these gender-roles can limit the range of behaviors to choose from, which has been shown to have negative effects on psychological health.<sup>48</sup> Conversely, gender-role flexibility may allow individuals to respond with greater behavioral flexibility to experiences.

### Gender-Role Flexibility Definition:

The practice of employing behavioral responses based on the requirements of the situation as opposed to what may be considered appropriate for one's gender identity.<sup>16</sup>

### Early Studies:

Gender-role flexibility was first explored by Bem (1974) through the investigation of the benefits of a gender-neutral identity, androgyny, which describes individuals who display both feminine and masculine characteristics. Bem believed that androgyny presents opportunity for the most adaptive functioning as a result of behavioral flexibility.<sup>17</sup> However, initial studies revealed mixed results concerning the association between androgyny and mental health.<sup>18</sup>

### Flexibility and Well-being:

Flexibility and adaptation have long been accepted as important for health and well-being<sup>49</sup> and the research has demonstrated:

- psychological flexibility to be a protective factor against experiences of depression and PTSD for individuals who had experienced trauma;
- cognitive flexibility to be negatively associated with PTSD and guilt severity, as well as positively associated with posttraumatic growth and optimism in a veteran participant sample;
- and coping flexibility to be related to greater psychological adjustment following adversity.<sup>50, 51, 52</sup>

### Recent Studies:

More recent studies have supported the ability of gender-role flexibility to enhance psychological well-being. Specifically, gender-role flexible individuals have been shown to:

- possess greater resilience to life stressors,
- utilized more adaptive coping styles
- experience less severe depression symptoms,
- and to self-report greater life-satisfaction compared to gender-role adherent participants.<sup>16, 17, 48</sup>

## Conclusion

Further research is needed to investigate the ability of gender-role flexibility to offer opportunities for enhanced resilience of individuals who have experienced IPT and protection from the negative consequences that have been found for these experiences, such as PTSD.

## References

See addendum.