Montada, L.

Life stress, injustice, and the question "Who is responsible"?

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REFERENCES
1. **Prerequisites for the experience of injustice**

When analyzing victimization by stressful life events, several questions are to be answered: Who is responsible for the stressful event? Which entitlements are hurt? Is someone to blame? Who is responsible for restitution or compensation?

Answers to these questions are seldom given unanimously (they often change intraindividually, too, either as a function of external informations or of coping strategies). People have different and conflicting perspectives, beliefs, attitudes, value systems, ideologies. There are formal and informal negotiations about the answers, formal ones in trials, informal ones in everyday communication and interaction. The participants in these negotiations are victims, harmdoers, and observers.

Until now, research on this topic has pointed to some puzzling phenomena, e.g., blaming the victim or denying being victimized. Theoretical accounts have brought forth some fascinating hypotheses like belief in a just world where everybody gets what he/she deserves (LERNER 1977, 1980), or belief in a controllable world (WALSTER 1966; SHAVER 1970).

However, these concepts and hypotheses are often used post hoc for interpretation of observed phenomena. Perceived entitlements and responsibilities, as well as the needs for a just and a controllable world are not independently assessed. In many cases, it is open to question, whether persons after stressful events perceive themselves as victims of a blind fate, as victims of the actions and decisions of others (persons or institutions), or as losers in a fair play or a risky enterprise.

The race driver, who suffers an accident, the gambler in Monte Carlo, who loses all his money, the AIDS-patient, they must not necessarily experience any injustice. Whether they feel victimized or not, depends on their perceived entitlements, which are established with reference to various rules of injustice, e.g., the rules of proportionality, of equality, of need, of legal, political, and social rights, or rules of procedural
justice. Certainly, there are situational and individual differences in selecting and applying rules of justice when appraising a situation (DEUTSCH 1975; LEVENTHAL 1976; SCHMITT & MONTADA 1982). And that again depends on perceived responsibilities for the disadvantages.

Not every disadvantage or loss is judged as unjust, not necessarily because of repression of feelings or denial of injustice but because of a reasonable application of that very concept of justice. Some examples may illustrate this point.

Bad events may be seen (a) as a just punishment for moral or legal offences in the past (e.g. failure in an examination which was not prepared carefully or legal punishment), (b) as a just compensation for undeserved advantages in the past (e.g. paying an extra tax when the own house was not destroyed in the war), c) as a retribution provoked by own behavior, d) as a consequence of a freely chosen commitment to a dangerous and risky enterprise motivated by the expectancy of highly valued gains, e) as generally imposed by social norms, obligatory for all similar members of the society (e.g. retirement or all the examinations which are an awful stress).

2. **Causality, responsibility, and liability to blame**

At the core of the experience of injustice is the attribution of responsibility. This needs to be clarified. The problems caused by stressful events may be awful, yet they will only be perceived as unjust in cases where a person or institution is held responsible and liable to blame. The meanings of the concepts causality, responsibility, and blameworthiness, which unfortunately often are used interchangeably, were analyzed by HART (1968), FINCHAM & JASPERS (1980), SHAVER (1985), SEMIN & MANSTEAD (1983) among others.

Let us start with a real life event as an example. A truck with steel pipes drove through a village at high speed. In a curve some of the heavy pipes dropped down to the street. A bystander saw that a little child on the
sidewalk was in deadly danger. He jumped to the child and saved it by throwing it over a hedge into a garden. He himself got badly injured by the pipes. For months he had to stay in the hospital. His legs and feet remained crippled.

Who is to blame? The first candidate for blame is the driver of the truck. He caused the accident because he was too fast: Is he responsible?

The driver has excuses. Surely he did not wish or intend the accident. He drove at his usual speed. He did not foresee the outcome. The truck had been overloaded. This was done by other people. (Putting the blame on other people might not be accepted by everyone. The driver is responsible for his truck. This is strict (or role) responsibility according to HART (1968)). Excuses do not necessarily deny the causal contributions to the outcome, but they deny responsibility, and, if they are accepted, they cancel responsibility.

SEMIN & MANSTEAD (1983) following TEDESCHI & RIESS (1981) mention as excuses (1) denial of agency (It wasn't me. It was not me alone. I was under hypnosis. I was forced), (2) denial of foreseeability, (3) denial of intent or denial of volition (with reference to physical causes, fatigue, drugs, paralysis, lack of competence, lack of authority), (4) claim of mitigating circumstances (behavior was an automated response to the behavior of others, e.g., a provocation, or reference to a dismal past).

Maybe the driver does not deny his responsibility. Is he to blame in this case? Blameworthiness is not implied in responsibility. The driver may have justifications. Justifications do not deny responsibility, they reduce or deny blameworthiness.

a) The driver has a role responsibility only for the loading of the truck. In fact, he has no control over the weight or the stability of the load.

b) He was given the order to drive fast and, in general, he would risk his job if he would observe all speed limits.
In this special case the load was urgently needed to repair a pipeline.

With reference to SEMIN & MANSTEAD (1983), eight categories of justifications are distinguished (see also TEDESCHI & RIESS 1981).

1) Claim that the effect has been misrepresented or misinterpreted (denial or minimization of injury). (2) Reference to a principle of retribution (e.g., the victim deserves the injury because of his or her actions or qualities): This is a typical justification for blaming or derogating the victim. (3) Reference to equality (others do same or worse but go unnoticed, unpunished or even praised). (4) Reference to higher authority (other persons commanded, institutional rules stipulated). (5) Self-fulfillment (self-maintenance, self-development, action in accordance with one’s own conscience). (6) Reference to principles of utilitarianism (law and order, self-defense, or benefits outweigh losses). (7) Reference to values (political, moral, religious values which the action was in accordance with). (8) Reference to a need for face work (face maintenance and reputation building).

These justifications do not deny responsibility, they rather offer reasons to reduce or cancel blameworthiness and liability to blame.

Let us go back to the example. Liability for blame is one aspect of the affair, liability for compensation another. Legally, the driver is not liable for compensation but the insurance company. And ultimately, it turned out that the offer for compensation by the company was considered unfairly low by the victim, who was very upset and felt victimized for a second time. He found relief only in the knowledge that he had saved the life of a child.

What are the reasons for this lengthy discussion? When turning to empirical studies, we find statements about attributions of responsibility to oneself, to an inflictor of pain or losses, to bystanders, to victims, to the society, and so on. There are hypotheses connecting these attributions of responsibility to emotional and behavioral outcomes or to the health
status of the victim. In many cases it remains unclear what is meant or assessed: causal attributions, attributions of responsibility, liability for blame or blameworthiness. The implications of these various cognitions for coping with life stresses differ. Thus, it is not surprising that the empirical evidence is not consistent.

3. Life crises and the perception of justice

Critical life events can be described by several attributes. FILIPP (1981) offers a taxonomical scheme for analysis. There are several attributes of the event as well as of the victim that determine the outcome. Important attributes of events are unforeseeability, controllability, developmental aspects like in-time or off-time etc. Which attributes are relevant for the evaluation of the justice of life crises? Life crises caused by catastrophes, illnesses, crimes, changes in job requirements, social environments etc. imply losses of material goods, status, health, loved persons, securities, self-esteem etc.

(1) Often, losses are perceived as unjust. Why? I would like to refer to Moore (1984). Trying to answer the old question, why there is social peace despite of enormous inequalities in wealth or power, MOORE argues that people tend to justify given life circumstances, including given inequalities. When things are changing to the worse, especially when this happens suddenly and unexpectedly, these same justifications, which include own entitlements, lead to feelings of injustice and to social conflicts. MOORE gives a lot of historical examples, based primarily on the analysis of documents from Germany in the 19th century.

Many critical life events are characterized by the sudden, unexpected worsening of someone's life circumstances. The entitlements so far existing are not (not yet) given up. There was no opportunity for anticipatory socialisation including the construction or internalization of justifications for this new reality. Successful coping with stressful changes can be conceived as finding justifications for the new situation. Age normative events or transitions like initiation rites, leaving the
parental home for college or marriage, becoming a parent, or in later life
tirement, all are expected. Further events are foreseeable, e.g., the
death of a relative or friend after a long lasting illness. Foreseeability
of stressful events is a potent predictor of better coping and adjustment
(FILIPP 1981; FILIPP & GRÄSER 1982).

(2) Equity theory postulates that people experience justice or injustice in
comparison with similar others. Critical life events often lead to a
relative deprivation in comparison with similar others, who are not equally
affected. The distinction between normative and non-normative stressful
events bears on this point. Aside from age normative (age graded) events,
there are history normative (graded) events: natural or civilizatoric or
economic catastrophes, wars etc. affect a large proportion of the
population and one's own comparison group. In such cases, the experience of
injustice is less probable as it is in the case of non-normative events
(e.g. crimes, accidents, diseases), which usually happen to single persons
only.

However, this must not be true when one group of people is deprived
unequally or not equitably. Shared fate as compared to single fate does not
always prevent feelings of injustice. E.g., when unemployment is unequally
frequent with coloured people in the USA, Turkish people in Germany, women
in all nations, then fraternal deprivation (MARTIN 1984) is not unusual and
may motivate collective actions.

Reviews of the literature suggest that usually people cope more
successfully with normative events than with non-normative ones (FILIPP &
GRÄSER 1982). There are several hypotheses related to justice that explain
this observation. (a) Injustice is not obvious, if one compares oneself
with similar others sharing one's own fate. (b) There are more similar
others with an even worse fate to be selected for downward comparisons (see
TAYLOR et al., 1983, on cancer populations). (c) According to KELLEY's
analysis of causal attributions (KELLEY 1973), the observation of shared
fate does not suggest personal (internal) explanations. Compared with the
observation of a single, individual fate, situational (external) explanations, which do not affect self-esteem, are more probable:
Derogative attributions are unusual after normative events. Thus, a secondary victimization by others’ attributions is less probable. (d) Frequently, more public empathy, concern and support is offered when there are numerous victims. Thus, compensation or restitution is socially managed. However, the overall effect of normative events will not always be less problematic. High unemployment rates may ease coping with unemployment, yet they may also reduce the chance to get a new job dramatically.

Critical events may change one's reference group, hence, it must be redefined, who the similar others are. After separation a spouse may become a single. Losing the job may imply change of neighbourhoods and friends. Suffering an accident may turn a great sportsman into a handicapped person.

(3) Critical life events per se are not just or unjust. The very concept of justice implies that some agent or agency is responsible for the allocation of goods and charges. The experience of injustice is associated with resentment against an agent, whose freely chosen actions or omissions lead to "unjust" consequences (the freedom to make decisions is a crucial prerequisite for the attribution of responsibility). Resentment is directed towards those persons (or institutions), who are perceived as being responsible for disadvantages, which are not convincingly justified and – as MARK & FOLGER (1984) add – which have a "low likelihood" to improve in the near future.

A person, who suffers disadvantages caused by own decisions (actions, omissions), does not have a target for complaints over injustice. The race driver, who survives an accident as a handicapped, does not complain over injustice. If he perceives other persons (another driver or a mechanic) to be responsible, he may feel victimized. The donator of a kidney does not perceive himself as a victim but as a moral hero as long as he feels free to decide whether or not to donate his kidney. But if someone feels compelled by others, he/she is prone to reproaches. Feelings of own
decisional control over outcomes and feelings of injustice seem to be incompatible. Successful coping is possible by choosing discharging attributions of responsibility.

(4) But even in case another person is seen responsible for one's losses or disadvantages, justice must not be doubted. One might accept the losses as did Abraham, who did not doubt the justice of his god. He was willing to obey the demand to sacrifice his own son. Without understanding the reason of that demand, he seemed to take it for granted that his god had a reason.

This is one of several ways by which feelings of injustice are avoided.

4. Roads and crooked paths to subjective justice

The need for justice can be satisfied in several ways: (1) by the assertion and carrying through of one's entitlements, (2) by an adequate compensation for disadvantages, (3) by blaming and punishing the responsible harmdoer, (4) by apologies of the harmdoer to the sufferer.

In research on critical life events, these - let us say - "normal" ways to the restitution of justice have been rather neglected. I am not aware of studies on the effect of success or failure in law suits. Research was focussed on two other questions: How can victims avoid to perceive themselves as victims? How can it be explained that victims are often blamed instead of given support and help?

Both of these phenomena are interpretable as attempts to avoid cognitions or feelings of injustice by an apt choice of perspective or attribution of responsibility.

According to TAYLOR, WOOD & LICHTMAN (1983), subjects' reports on stressful events may lead to the impression that there are no victims at all. They argue that victimization is aversive and that, therefore, victims may tend to minimize their experience of injustice. Not only the primary effects of
stressful events are harmful, but also the implied loss of control, self-esteem and normality. Some victims intuitively fear to become stigmatized when they make their fate public, and, hence, they overpass their problems. Indeed, criminologists believe that a large proportion, if not a majority, of rape victims do not file a law suit (SCHNEIDER 1979).

What are the paths to avoid the feeling of being victimized? TAYLOR et al. (1983) mentioned five strategies apt to reduce feelings of victimization.

(1) Frequently, downward comparisons with people still worse off are suitable. Only two of 78 breast cancer patients, interviewed by TAYLOR et al. (1983), conceded that they had more problems than other patients. BURGESS & HOLMSTROM (1979) reported that rape victims drew comparisons to other victims suffering a greater loss of status, or to victims who died being raped.

WILLS (1981) reviewed the experimental evidence on downward comparisons and pointed to several signs of the preference, frightened subjects have for downward comparisons, including seeking contacts with fellow sufferers.

(2) Downward comparisons are affected not only by the selection of adequate reference groups or people but also by the selection of adequate referent attributes. One patient stated after mastectomy: "Sometimes I tell myself, it could be worse. I don't see as if you have lost a hand." (TAYLOR et al. 1983).

(3) Beside downward comparisons TAYLOR (1982) points to the strategy of building up functional illusions, e.g., imagination of a hypothetical still worse world. Some examples for this strategy are: A traffic victim states that he could have been dying in the accident. An elderly woman with cancer asserts that she is still lucky having cancer herself and not her daughter. Or a patient after apoplexia with left side paralysis says: "If I imagine that I could have lost my speech I feel that I am still well off.".
(4) Some benefit can be found in the (victimizing) event itself. 60% of the breast cancer patients in the TAYLOR et al. study reported positive changes in their lives as a side effect of their disease. Among others, a re-organizing of priorities was mentioned, giving the relationship with spouse, children, and friends a higher value. In his study on victims of concentration camps, FRANKL (1963) assumes that those survivors were better adjusted, who were able to use their experience to find meaning in their lives.

Similarly, cases may be subsumed to this category where the victimization happened on occasion of an action or enterprise which the actor is proud of or which he/she perceives as obligation, e.g. intervention in crimes, accidents or catastrophes. Wounded soldiers may feel as heroes if the war is perceived as a just one. Battered women often do not try to escape because of ethical responsibilities to help their victimizing husband or to take care of the children (FERRARO & JOHNSON 1983).

(S) A positive evaluation of one's coping with stress and one's adaptive abilities and efforts may lead to satisfaction and even pride. Here, too, downward comparisons may be helpful, because one's own coping efforts are put in a more favorable light. 21% of the cancer patients in the TAYLOR et al. study made such comparisons. A similar tendency was found in partners of the patients. Some of the husbands were proud of not having abandoned their wife "like some guys would do in comparable situations".

Not all victims accept the disadvantages imposed on them through actions and decisions of others, or the state, and its institutions, not all appease their feelings of injustice, but rather they resent them. Victims of crimes, of accidents, of unemployment, of illnesses caused by their job conditions, victims of pollution and noise and nuclear disasters fight for their entitlements. They bring their complaints to trial. They engage in political actions. They organize civil protests. They accuse their god.
Self-blame far stressful life events: adaptive and non-adaptive aspects

In several reviews evidence is reported that victims blame themselves for the occurrence of the stressful event even if there is no objective reason to do this. In some of the studies self-blame was associated with indices of better adjustment, e.g., the studies by CHODOFF et al. (1964) on parents, who lost a child, by RAPPAPORT (1971) on relatives of Nazi victims in concentration camps, by MEDEA & THOMPSON (1974), BURGESS & HOLMSTROM (1979) on rape victims, by MARTIN (1978), FRIEZE (1979), FERRARO & JOHNSON (1983) on battered women.

But there is growing contradictory evidence, too. In a well controlled German study on accident victims, FREY (1985) found that rehabilitation was retarded in patients, who perceived the accidents as avoidable and self-inflicted. MEYER & TAYLOR (1986) found self-blame by rape victims associated with poor adjustment (sexual dissatisfaction, depression, fear). Studies on the effects of unemployment evidence that self-blame was not adaptive compared with external and societal explanations (JASPERS et al. 1983).

Whenever there is contradictory evidence, one should think about differentiation within concepts. The core of the argument, that self-blame may be adaptive, is the following: Self-blame is thought to include beliefs of controllability: Victims, who blame themselves, seem to believe that they would have been able to avoid the event. They take responsibility for the event retrospectively. Does this imply that they are able to prevent the occurrence of the stressful event in the future meaning: they have prospective control beliefs? Maybe some victims make such (logically doubtful) inferences. Rationally, however, one has to distinguish between perceived responsibility for the occurrence of an event and controllability beliefs with respect to future events. There are studies showing that at least a significant proportion of the subjects distinguish between responsibility for past events and controllability of future events, but perhaps not all of them do. TAYLOR (1982) in her study on cancer patients made this distinction. Only 17% of the patients thought that they
contributed to the causation of the disease (see also Linn et al. 1982),
but a majority believed to have some control over the cure. This empirical
finding demonstrates that control beliefs are not bound to causation
beliefs. Already in an early study on rape victims Libov & Doty (1979) did
not find a correlation between self responsibility and the belief not to be
raped a second time.

JANOFF-BULMAN (1979) introduced another useful distinction between
characterological self-blame (with reference to stable attributes, which
are not controllable) and behavioral self-blame. Characterological self-
blame is seen as a symptom of depression and insofar as dysfunctional,
whereas behavioral self-blame may be functional and reduce perceived
vulnerability. E.g., if a student attributes his or her failure in an
examination to a lack of effort, he/she is not helpless and not hopeless
and may believe to be able to succeed in a second try. The attribution to
extreme test anxiety or lack of ability leads to more pessimistic
expectancies, as studies on the self-concept of ability prove (Meyer 1984).
Characterological self-blame may be interpreted as a case of helplessness:
the outcome is believed to be objectively controllable, but oneself is not
able to control it.

However, there is contradictory evidence, too. In the Meyer & Taylor
study on rape (1986), both kinds of self-blame were associated with poor
adjustment while external and societal explanation were uncorrelated with
adjustment scores.

How can such contradictory evidence be explained? So far perceptions of
justice are not yet considered in theory and in interpretations of
empirical evidence. Justice comes into play, however, when different
effects of controllability beliefs are analyzed.

Controllability may reduce feelings of injustice: If the student thinks he
or she was unfairly treated by the professor, feelings of injustice will
rise which can be reduced by attributing some amount of responsibility for
the outcome to oneself. This decrease in aversive feelings of injustice is
expected to have positive emotional and behavioral effects. But it may also be that the decrease is equalized by a proportional increase of aversive feelings like anger about an avoidable fault, or shame about lack of knowledge, or guilt about the careless preparation for the examination.

Consequently, controllability may increase negative feelings. The very concept of blame implies controllability of the outcome. Without control over the outcome, responsibility and blame are not to be attributed. To have control may be desirable, but it does not have to be. The accused person, e.g., may deny controllability as an excuse; perceived control may lead to feelings of guilt or anger over one's own fault.

The controllability component implied in self-blame may have positive effects on adjustment, provided it is generalized to the future, thus leading to hopes of being able to avoid the recurrence of the stressful event. If this is not the case, however, controllability beliefs may have negative effects like guilt or anger over oneself for instance. Insofar it is necessary to assess the different emotions that might be associated with controllability. Besides this, different levels of responsibility attribution should be observed. HEIDER (1958) distinguished five levels (association, causation, foreseeability, intention, denial of justification) only the last of these implying blameworthiness (in the logical sense of the concept). One should be cautious in speaking of "self-blame" if causal contribution to an outcome, foreseeability of, or even volitional control over the outcome is admitted. These beliefs do not necessarily imply self-blame. (Remember the above mentioned justifications of actions one is responsible for himself as means to refuse the liability for blame according to SEMIN and MANSTEAD!)

In order to illustrate the point, only one example shall be given: At times, when we did not have knowledge about the transmission of the AIDS virus, responsibility for an infection could not be attributed reasonably. However, retrospectively a patient may admit objective causal contributions
on his own to becoming ill. Since we now have a lot of knowledge about the transmission of the AIDS virus, homosexual AIDS patients, for instance, may feel responsible for the infection. Some may regret their careless behavior and blame themselves (if they do not prefer to blame their mate, e.g., for having been infected by a third person), others may accept the disease as risk of their sexual life which they do not want to change: Responsibility is not denied, but there is not the slightest sign of self-blame.

In empirical studies usually hypotheses of victims concerning their own causal contributions are assessed under the label "self-blame". Often, it is not assessed whether the effects of these contributions could have been forseen or not, whether they are perceived as avoidable or not, whether the victims feel responsible or not, whether the victim feels blameworthy or not. The socalled self-blame may often be kind of the statement: "If I had not done this or that, it would not have happened." Someone had an accident driving from his home to place X. Now he imagines that this might not have happened if he had not gone there or if he had not chosen this very route. MARK & FOLGER (1984) argue that the amount of dissatisfaction with the outcome increases with the growing ease to imagine a hedonically better (or "high referent") outcome. Concerning one's own responsibility for the outcome several different possibilities should be distinguished. It is reasonable to deny responsibility if the actor did have no freedom of choice to behave in another way. For instance, if the driver was on his usual way to work or to the pharmacy, because his wife was ill, he had less freedom of choice as if he had deliberately decided to go to a pub: carrying out duties reduces one's freedom.

Finally, another totally different adaptive function of self-blame should only be mentioned. Self-blame may be a strategy used to avoid social blame. The confessing child, who demonstrates signs of remorse, is seldom punished by his parents (ARONFREED 1968). In analogy to this: self-blame often helps to prevent being blamed by others. Of course, in this strategic function remorse or real self-blame is not necessarily implied. The mere demonstration of self-blame may prevent victimization.
Victimization after critical life events

People in crises, people with fears, pain and grief etc. need support: material, emotional, and appraisal support. Broad evidence on different critical events corroborates the view that in general social support is very useful (DUNKEL-SCHETTER & WORTMAN 1981).

Not always, however, do people in crises receive the support they need. Instead victims of crimes are derogated, the handicapped, severely ill, or dying people are avoided, people after bereavement are given advices not to show their grief, not to complain, but to look forward in a positive way.

Biases in interactions with disadvantaged people

Being confronted with people in need, there is to decide whether they are entitled to get support, and who is responsible for giving this support. There are biases that influence the answers to these questions. The two favorite hypotheses to explain these biases are (a) belief in a just world (LERNER 1970, 1977, 1980) and (b) belief in a controllable world (WALSTER 1966; SHAVER 1970).

Belief in a just and controllable world

(a) If there are doubts whether the observed disadvantages or losses are just or not, blaming the victim (RYAN 1971) as being responsible for his/her fate is a suitable way to deny any injustice. There are many arguments suitable to reject one's own responsibility for supporting the disadvantaged and there are many arguments suitable to justify the given inequalities as well. Some of the arguments may be rational and objective, others are not.

(b) Attributing responsibility to the victim may also have the function to defend one's view that the world and one's own fate are controllable, stabilizing the belief that one is personally able to avoid such bad luck.
The worse the harm or the loss (CHAIKIN & DARLEY 1973), and the less clear its objective causation (LOWE & MEDWAY 1976), the more likely an attribution of responsibility to the victim will be.

These hypotheses are fascinating, and many counter intuitive phenomena become understandable in the light of these theories. However, there are other hypotheses explaining why people do not help.

Research and models of pro-social behavior offer a lot of reasons, why someone does not help, reasons that are not mediated by these two motives (BIERHOFF 1980; STAUB 1979; SCHWARTZ 1977). A person may not feel able to help, may be convinced that other people are responsible to help, may be empathically too distressed to give any support, may have doubt whether the person in need of help wishes support from him/her, may fear the costs of helping etc.

There are reasons to give help or not which touch the question of justice: Helping is more probable, if the helper feels endebted to the needy, or if the needy seems to have a title for receiving help. Helping is less probable if the needy him/herself is seen responsible for his/her problems.

BRICKMAN et al. (1982) propose an interesting taxonomy of biases based on the distinction between the responsibility (a) for the occurrence of a problem (Who is responsible for a past event?) and (b) for the solution (Who is responsible for the future development?). They distinguish four models of helping and coping with different biases concerning the attribution of these two responsibilities. (It is open to question whether the preference of one of these models is mediated by a more basic motive for justice like belief in a just world.)

In the first model, called the moral model, actors are held responsible for both problems and solutions. Other persons only have to point the actor to this self-responsibility.
The second model is called the **compensatory model**: people are seen as being not responsible for the occurrence of problems but as being responsible for their solution. People are not derogated because of their problems but encouraged to take efforts in finding solutions.

In the third, the **medical model**, individuals are neither seen as responsible for the occurrence nor for the solutions of problems. They are believed to need support and treatment. In a sense, the person is put under tutelage of professional experts.

The fourth model is called the **enlightenment model**: actors are seen to be responsible for problems but unable or unwilling to provide solutions. They are believed to need discipline provided by authoritative guidance. The Alcoholic Anonymous communities are considered prototypical for that model.

These models have different normative implications. On the basis of the compensatory and the medical model, needy people are entitled to get support and help. On the basis of the moral model, such entitlement is denied. The enlightenment model, too, does not offer support and help, instead it is assumed that authority is needed to provide strict guidance.

Concerning the origin of the problems, the moral and the enlightenment model attribute responsibility to the needy person. The needy is answerable, maybe he/she is to blame. He/she is not ill, not a victim of external forces or blind fate. Instead, he/she is perceived as liable to blame because of avoidable faults.

From the perspective of needy people, the attribution of responsibility for their own disadvantages may be perceived as unjust. The needy may perceive him/herself to be victim of an informal sentence, a biased sentence. Because there is no formal negotiation in line with principles of procedural justice, there is perhaps no opportunity to correct this sentence. The disappointment over denial of help from others, because of questionable attributions of responsibility to the needy, may be a case of secondary victimization.
Secondary victimization

We call "secondary victimization" a second deprivation of a disadvantaged person that is inflicted by other persons or by institutions. Several categories can be distinguished.

(1) Refusal of victim's view of who is responsible: The victim blames a perpetrator, but the judge or other significant people come to a different attribution of responsibility. Especially, if the victim feels that principles of procedural justice are not observed, e.g., that his or her claims are not considered objectively, resentment may arise because of supposed biases (TYLER 1984).

(2) Ignoring claims for blame and punishment: The victim answers with resentment when obvious violations of laws are not prosecuted. A referee, who does not punish violations of rules, provokes hostility and resentment. There are legitimate claims that laws and rules have to be enforced, and that guilty people are to be punished. If this is not done it may be viewed as a kind of structural victimization (NAGEL 1979) which has been identified as one of the precipitating events leading to riots (LIEBERSON & SILVERMAN 1965). Michael Kohlhaas in Kleist's drama became a terrorist, fighting for a trial which was unjustly withheld. When there are rules and laws there is an entitlement to have them enforced. Especially the victim of a crime will call for law enforcement and restitution.

NAGEL (1979) reported that in 1973 the psychiatrist Dr. Bastiaans founded a hospital for victims of the Nazi occupation in the Netherlands. He had observed that many of the victims, who seemed to have overcome their traumatic experiences, developed psychic problems again. Many of them reported enormous (emotional) problems because of two facts which they had perceived as very unjust.

(a) All former collaborators with the Nazis, judges, policemen, clerks, politicians, who had participated in the persecution and degradation of the victims, now held their former positions again.
There was a collective denial of the crimes during that time and, therefore, a denial of the victimizations. Phrases as "One must be able to make an end." or "One must be able to forgive." represent this attitude. The victims suffered from being cheated of their status as victims. Forgiving the harmdoers by the society may hurt the victims and their claim for restitution by punishment. The victims may ask: "Who is entitled to forgive?" The observer? The society? Or the victims themselves? Many victims feel that only they are entitled to forgive.

Victims are more likely to forgive when the harmdoer has confessed his guilt and accepts a blame or punishment as just. GOFFMAN (1971) analyzed apologies by the harmdoer and their effect on the victim and the society. A complete apology is characterized by the following components: (a) emotional distress, (b) knowledge of the moral norms, (c) acceptance of responsibility for actions or omissions, (d) acceptance of liability for blame, and (e) willingness to observe the transgressed moral or legal rules in the future.

There are several resocialization programs in North America and Australia trying to bring together the harmdoer and the victim in order to negotiate on adequate restitution or compensation by the harmdoer (SCHNEIDER 1979). If the just mentioned components of apologies are acknowledged by the victim, these interactions can help to reduce the victimization.

Indifferences of the society, including police, against the victim's plight is a very common phenomenon (SYMonds 1975). Being victim of a crime, like mugging or rape, is an extraordinarily traumatic experience. For the police, this is daily routine work with low probability to apprehend and convict the perpetrator. Statements like "You aren't the only one, who has been mugged. We get plenty of other calls." are depriving the victim of the very status of being a victim.

In general, society is much more preoccupied with the perpetrator than with the victim, with a fair and objective trial, with the question of how to ensure that he or she will be treated justly, will not be stigmatized etc.
The victim himself and his entitlements get much less attention. In court the victim's role is that of a witness. In order to guarantee fairness to the defendant, the witness may be treated with skepticism, and doubts about his/her honesty are allowed. O'Hara's widely accepted book on criminal investigation techniques reflects this skepticism toward the victim/witness.

Correspondingly, the victim may develop doubts about the justice in society and the state that not only lacked to protect him or her against crime, but now fails to side with him or her.

(3) Ignoring or refusing victim's claims for compensation: Refusal of victim's claims for restitution or compensation is a second victimization provided the victim is convinced to be entitled to them. His or her claims for compensation will probably be refused if the disadvantages are perceived as self-inflicted. Judgments of responsibility may have tangible consequences.

(4) Stigmatization by attributions of responsibility to the victim: Bringing the rapist to trial, the rape victim not only risks the sentence "not guilty" and subsequently her belief in a just society, she also risks to lose her reputation and eventually her attractiveness (for a review KRAHE 1985).

The longer people are without employment, the more they will be stigmatized (as unable or lazy) (HAYES & NUTMAN 1981), a tendency seeming to depend on political attitudes and ideological convictions (FURNHAM 1982). (Left-wing voters tend to attribute more importance to societal factors, right-wing voters more to internal individual factors which is the typical observer bias for internal personal explanations ROSS 1977.)

Stigmatization leads to isolation and exclusion through notoriety. Some rape victims, who experienced this, had to move from their neighborhood (SYMONDS 1975).
Punishment and blame of the victim: Not only may support and help be withheld because of attribution of responsibility, the victim may even be punished. In World War II, Soviet soldiers with frozen feet were executed with the unproven assumption that they actively let their feet freeze hoping to become able to quit the army. A mother whose preschool child dies by an accident is usually blamed for negligence.

Blaming the victim or pointing to control against victimization

There is a lot of systematic and everyday evidence for a widespread tendency to blame the victim (RYAN 1971). Phenomena like these can be observed in cases of catastrophes, crimes, accidents, and illnesses, loss of jobs and other categories of bad fate (LERNER 1971, WALSTER 1966). They can also be observed in the laboratory when part of the participants seemingly are allocated to a more unfavorable experimental treatment than others (LERNER & SIMMONS 1966). There is an impressive amount of research describing and analyzing phenomena of blaming the victim (LERNER 1980, SHAVER 1985).

There is no doubt that these phenomena often occur, yet there is no doubt either that possibly a majority of victims get plenty of support by the family, their spouse, friends, neighbours, and social services. Therefore, we have cases of indifference, of supporting, and of blaming the victim. The scientifically, and practically important question is: Who reacts with support, who reacts indifferently, or with blame, to what victim in which situation, in which case of victimization. To answer this question, research has been focussed on two hypotheses: belief in a just world (LERNER 1977), and belief in a controllable world (defensive attribution, WALSTER 1966, SHAVER 1970). Empirical evidence corroborating Lerner's hypothesis is steadily growing, whereas there are contradictory data and some conceptual problems concerning the defensive attribution hypothesis (BURGER 1981, see also SEMIN & MANSTEAD for a discussion of these problems). But before explaining the phenomenon of blaming the victim, the fact of blaming should be validly evidenced. Perusing the literature, I
often doubt, whether everything called blaming really is blaming.

If blameworthiness is stated on the basis of merely causal contributions to an outcome, blaming will be very probable. All rape victims contributed causally to the crime: they walked alone through a street, they smiled to a colleague, they wore nice clothes, or they opened the door when the bell rang and let their acquaintance enter etc. Many diseases, as social medicine tells us, are contingent on behavior (SCHÄFER 1979), on too much eating, drinking, smoking, jogging, working, worrying, or on too little of all these. As stated above, causal contributions are not an adequate reason for blame. At least foreseeability of consequences must have been given when responsibility is to be attributed reasonably, and again, responsibility is not a sufficient reason for blame yet, justifications should be considered, too.

Thus, I doubt whether all reports of blaming the victim have validly identified a tendency or an intention to blame. Sometimes causal contributions are not meant to blame the victim, but to prevent further victimization. KIDDER & COHN (1979) make the point very clear in exploring everyday opinions on crime prevention. Asked for the causes of criminality, people mention distal causes like ineffective laws, unemployment, poverty, lax parental control of the children etc. Asked how to prevent crimes, they rather seldomly propose to change these distal causes, probably because their change is not easy to realize. Instead, they focus on proximal causes which are much easier to control and to change: escort services, avoidance of careless behavior, raising the number of police controls etc. Asked for crime prevention measures, people answer with victimization prevention measures, which are not directed to the (actual or future) delinquents but to the potential victims. The latter have the advantage that they are controllable by potential victims.

In line with this important distinction we should be cautious not to misinterpret statements concerning causality, controllability, and responsibility. Mentioning causal contributions of the victim, mentioning
victimization prevention measures not necessarily implies blaming the victim and discharging other causal agents, society, or fate.
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