

Are Women at Higher Risk Than Men? Gender Differences Among Teenagers and Adults in Their Response to Threat of War and Terror

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ABSTRACT. The present study examined whether women are at higher risk of developing stress reactions in situations of war and terror. The study looked at gender differences within two samples—teenagers ($n = 353$) and adults ($n = 890$)—regarding the impact of stress that developed in response to a situation of threat of war and terror as a result of Israel's withdrawal from Lebanon. The study tested: (1) gender differences regarding cognitive appraisal of the stressor, coping styles, psychological symptoms, and life satisfaction; (2) whether cognitive appraisal and coping styles mediated gender differences in psychological symptoms and life satisfaction; and (3) whether the two age groups differed regarding the contribution of gender to the studied variables. The results revealed that among the teenagers, gender differences were found only in cognitive appraisal and psychological symptoms, while among adults, gender differences were found in all the studied variables. The results support the mediating hypothesis with regard to psychological symptoms, but not with regard to life satisfaction. The results also show a different contribution of gender in each of the age groups regarding psychological symptoms, but not regarding life satisfaction, which leaves some doubt regarding

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the assumptions that women tend to be more affected by stress than men. doi:10.1300/J013v43n03_01 [Article copies available for a fee from The Haworth Document Delivery Service: 1-800-HAWORTH. E-mail address: <docdelivery@haworthpress.com> Website: <<http://www.HaworthPress.com>> © 2006 by The Haworth Press, Inc. All rights reserved.]

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INTRODUCTION

This paper explores the widespread position that women are at higher risk of developing higher level of stress reactions than men in situations that involve threat of war and terror (Bar-Tal, Lurie, and Glick, 1994; Greenbaum, Erlich, and Toubiana, 1993; Tuval-Mashiach and Shalev, 2005). The study centered on the threat, which was created by the withdrawal of Israeli troops from Lebanon in May 2000. The withdrawal created political uncertainty for the Israeli population residing near the Lebanese border. It was a source of both hope and of fear, affecting individuals' level of stress, as well as their overall well-being (Kimhi and Shamaï, 2004; Shamaï and Kimhi, 2006). In the current study, we have defined the threat of war and terror as the threat of all potential violent activities from Lebanon directed against the civil population in Israel, such as terrorist infiltration, missile attacks, shooting incidents, and kidnapping. The type of stress created in such situations has been described by Somer and Bleich (2005) as similar to Type IV stress (Wilson, 1994), which is used to describe environments characterized by unordinary stressors that create high level of uncertainty. Such uncertainty raises a challenge for coping, since people cannot predict when the violent activity will occur. People who are exposed to this kind of stress tend to develop a high level of sadness, anxiousness, and alertness (Wilson, 1994). The paper describes two studies on the effect of gender in responding to the threat of war and terror, one among teenagers and the other among adults. An attempt has been made to compare the respective effects of gender in the two age groups.

Overall, the mental health literature has described populations living in situations of war and terror as being at high risk for developing symptoms of distress (Summerfield, 1997). These include generalized fear and anxiety, recurrent thoughts about a terror attack, avoidance behavior, physiological symptoms, depression, problems in daily functioning, and

difficulties in relating to and trusting others. In severe cases, such a distress reaction can result in Post-Traumatic Stress Disorder (PTSD) at different levels of severity (Gidron, Reuven, and Sa'ar, 1999; Solomon, Mikulincer, Waysman, and Marlowe, 1991).

In conceptualizing the impact of a stressor on human beings, Lazarus and Folkman (1984) claimed that cognitive appraisal of the impact of the stressor, as well as coping styles, mediated between a stressor and its outcomes. Along this line of thinking, Forsythe and Compas (1987) found that in situations of major events, rather than just daily hassles, a good match between appraisal and type of coping was a good prediction of adaptation. Beyond the differences between the various models regarding the impact of stress, almost all of them are similar in perceiving individual variables, such as gender, age, and coping styles as affecting reactions to the stressor.

Gender Differences in Response to Stressor

The findings regarding gender differences in response to stress have been complex. Studies that were conducted prior to the last decade generally reported that women expressed higher levels of stress than men did (Aneshensel and Pearlin, 1987; Kessler and McRae, 1981; Thoits, 1991). Two lines of explanation have been offered for these gender differences: (1) Women have been socialized to be expressive and to respond to stress openly, and, therefore, answer honestly when asked about it, while men tend to hide their psychological responses (Newmann, 1984), and (2) women face more stressors in general and possess fewer coping strategies (Aneshensel and Pearlin, 1987; Kessler and McRae, 1981).

In addition, research conducted in the 1990s emphasized coping strategies as a main source of gender differences in experiencing stress. Thoits (1991), for example, focused on coping strategies of men and women to explain the different perceptions of stressful events. She argued that in the face of stress, women tended to use more resources, such as social support, than men did; but it seemed that women's strategies for coping were less effective compared with those of men. However, Thoits (1991) emphasized the need for more detailed and longitudinal data to confirm this claim. Ben-Zur and Zeidner (1996) examined the patterns of response to stress and coping strategies among Israeli men and women during and after the Gulf War. Their findings showed that although women reported higher levels of anxiety than men during the war, they employed a greater variety of coping strategies, including more active problem-focused strat-

egies, than men did. This pattern was reversed when the massive stress ended and the situation returned to regular daily stress.

A meta-analytic review of recent studies (1990-2000) on gender differences regarding coping with stress (Tamers, Janicki, and Helgeson, 2002) revealed that the main differences were in the way both genders appraised the stress and used coping strategies. The authors claimed that women tended to estimate stressors as more severe and to use more verbal expression strategies to cope with the stress, while men tended to distract. Furthermore, some of the gender differences were suggested to be dependent on the nature of the stressor.

Studies of children's and teenagers' reactions to situations of war indicated that boys were troubled with nervous, regressive, and aggressive symptoms, while girls tended to experience more war-related anxieties (Chimienti and Abu Nasr, 1992). In contrast to these findings, various studies of Israeli teenagers during the Gulf War (Bar-Tal, Lurie, and Glick 1994; Greenbaum, Erlich, and Toubiana, 1993) showed that girls reported higher levels of war-related stress (fear, anxiety, and somatic complaints), as well as more behavioral problems than boys did. Despite the inconsistent results concerning the impact of gender on stress reactions, it seems that women and girls tend to report higher levels of stress; however, knowledge is still lacking regarding the source of these differences.

Gender, Stress, and Well-Being

According to some theoretical approaches, well-being can be perceived as the other side of the coin of measure of stress (Antonovski, 1991). Several studies have assessed subjective well-being on the basis of self-report of life satisfaction (Bradburn, 1969; Bradburn and Caplovitz, 1965; Campbell, 1976; Diener, 2000; Myers, 2000). Regarding the relationship between life satisfaction and gender, some studies have suggested that gender role, more than gender itself, is a predictor of life satisfaction (Benjamin and Holling, 1997; Herringer, 1998).

Studies among teenagers have not revealed a correlation between gender differences and level of life satisfaction (Huebner, Drane, and Valois, 2000; Shek, 1998). Nevertheless, as was found among adults, it seems that different resources affect the level of life satisfaction for each gender (Huebner, Drane, and Valois, 2000). Concerning the present study, it is reasonable to assume that if well-being is expected to be the opposite of stress, then some differences in life satisfaction between genders will be found, and women and girls will tend to report lower

levels of life satisfaction. The present study provided an opportunity to explore whether women and girls were at higher risk than men and boys in a specific situation of threat of war and terror.

Research Hypotheses and Question

In light of the above, it was first hypothesized that gender differences would be found in terms of cognitive appraisal of the stressor, coping styles, and stress outcomes (symptoms and life satisfaction). More specifically, women and girls would show higher concern regarding the withdrawal of troops than men and boys; women and girls would use more emotion-focused coping styles and less problem-focused coping style than men and boys; and finally, women and girls would show more symptoms and less life satisfaction than men and boys. Second, it was hypothesized that cognitive appraisal and coping styles would serve as mediating variables between gender and the stress outcomes of symptoms and life satisfaction. Finally, based on the inclusion of two age groups in the research, the study examined whether gender had an effect on stress outcomes when controlling for age (teenagers vs. adults), and whether an interaction effect of gender and age on stress symptoms was observed.

METHODS

Sample 1 (Teenagers)

The teenager participants were reached after receiving official permission from the Education Ministry as required in Israel. The sample included 353 teenagers (197 boys and 156 girls) from three different schools. All schools were located in Northern Israel, near the border with Lebanon. All three schools were considered by the Israeli army to be located in the high-risk area (within the range of Katyusha missiles and the possibility of terrorist infiltration). The participants were in the tenth grade, aged 15 to 16 years and the eleventh grade, aged 16 to 17 years. An informed consent was attached to the questionnaire that described the main goal of the study, assured the anonymity of the participant, and gave the student the right not to take part or to stop participating in the study at any time for any reason. After the students had read the letter, we asked them to sign it. All the students in these grades who were present at school on the day the questionnaires were distributed were asked to complete them; all but six students (1.7%) agreed.

Sample 2 (Adults)

The adult participants were contacted after the study protocol was approved by the research committee of Tel Hai Academic College. The sample consisted of 890 adults (400 men and 490 women), aged 18 to 85 years. The participants were all residents of the Northeastern part of Israel, near the border with Lebanon (within the range of Katyusha missiles and the possibility of terrorist infiltration). Two different methods of sampling were used: (1) In small communities, social work students went to every home, distributed the questionnaires to adults who were at home at the time of the visit after they agreed to participate in the project. They signed the informed consent which was attached to the questionnaire (the same informed consent that was given to the teenagers). When more than one adult was present at home, the questionnaires were given to every one. Most of the people who were approached cooperated willingly (about 75%). The questionnaires were collected a week later, with a response rate of approximately 90%. (2) In the one small town in this area, four different streets were randomly selected, and the sampling procedure closely resembled the one used in the smaller communities, with each house on the randomly selected streets being approached for participation.

Instruments

Cognitive Appraisal of Stress (Lebanon Stress and Lebanon Adult Stress)

In the present study, cognitive appraisal refers to the level of concern regarding the withdrawal from Lebanon. A short time before the withdrawal, school counselors and teachers were asked to report about the type of concerns expressed by the teenagers. One counselor was available for the higher grades (tenth and eleventh grades) in each school; a total of three counselors and fourteen class educators provided information. Based on content analysis that was performed independently by the two researchers, three main concerns were identified. Correlation between the two researchers in coding content was $r = .88$. Community social workers were asked to report the types of concerns expressed by the adults. Each of the small communities had one community worker, and the town had two community workers. Based on content analysis that was conducted independently by the two researchers, five

main concerns were identified. Correlation between the two researchers in coding content was $r = .89$. Content analyses of these reports showed different types of concerns. The teenagers expressed general concerns, while adults expressed specific concerns. Therefore, we had to construct two different inventories for measuring the cognitive appraisal of the two samples (referred to as Lebanon Stress for teenagers and Lebanon Adult Stress for the adults).

Lebanon Stress was calculated as the average score of three items (on a 5-point Likert scale): “How much does the withdrawal from Lebanon cause you feelings of uncertainty?,” “In general, to what extent are you concerned nowadays as a result of the withdrawal from Lebanon?,” and “Does the current situation along the Lebanese border cause you stress?” Cronbach’s Alpha for the three items was .70.

Lebanon Adult Stress was calculated as the average score of five items (on a 5-point Likert scale), representing the respondents’ evaluation of their level of concern about security conditions along the border, traveling on the roads along the border, ability to continue routine life, family safety, and the condition of the shelters in the community. The reliability of the five items measured by Cronbach’s Alpha was .83.

Coping Style. The respondents’ coping styles were measured by the short Hebrew version of the COPE scale (Carver, Scheier, and Weintraub, 1989). The scale includes 15 coping strategies, each represented by two items as translated from the original scale (Ben-Zur, 2002; Gilbar and Ben-Zur, 2002). Each item was scored on a 4-point scale, ranging from 1 (Not at all) to 4 (To a great extent). Average scores were computed for each strategy. Based on Gilbar and Ben-Zur (2002), who studied normative Israeli coping, the items relevant to alcohol and drugs were not included in the final analysis. It is important to note that in the current sample, this strategy had a marginal effect. Based on Gilbar and Ben-Zur’s research, the other strategies were grouped into two subscales:

1. A Problem-Focused subscale included the following strategies: Active coping, positive reinterpretation, planning, seeking emotional support, seeking instrumental support, and suppression of competing activities. Cronbach’s Alpha for this subscale was .86.
2. An Emotion-Focused subscale included the strategies of acceptance of the situation, mental disengagement, behavioral disengagement, denial, ventilation, restraint, use of humor, and turning to religion. Cronbach’s Alpha for this subscale was .70.

Stress Outcome (Symptoms). The outcome or symptoms of stress were measured by the short version of Brief Symptom Inventory (BSI, Derogatis and Spencer, 1982) comprised of 19 items, scored on a Likert scale of 1-5. The scale contains three subscales: anxiety (6 items), somatization (7 items), and depression (6 items). Since the overall Cronbach's Alpha reliability of the 19 items was very high (.93), we used it as one score composed of the average of the 19 items (referred to as Symptoms).

Life Satisfaction. Satisfaction with life is often measured by one question about life satisfaction, which respondents are asked to grade on a scale of 1-5 (Bradburn, 1969; Bradburn and Caplovitz, 1965). In the present study, life satisfaction was evaluated regarding two points in time, the present and a year ago. Cronbach's Alpha for these two items was .82.

Data Analysis

We analyzed the data in four stages:

1. In the first stage, we looked for gender differences in Lebanon stress, Problem-focused coping, Emotion-Focused coping, Symptoms, and Life satisfaction within each sample by using a t-test for independent samples.
2. In the second stage, Pearson correlations were computed between Lebanon Stress, Problem-Focused and Emotion-Focused coping styles, and the two dependent variables: Symptoms and Life Satisfaction.
3. In the third stage, we performed three-step hierarchical regressions for each of the samples to examine the contribution of gender to each of the dependent variables (Stress Symptoms and Life Satisfaction). Since one of the outcome variables (Lebanon Stress) was not identical for the two samples, we could not perform one regression equation in which both confounding variables (gender and age) as well as their interaction would be included. In the first step of the regression, only Gender was entered into the regression equation. In the second step, the cognitive appraisal stress (Lebanon Stress) was entered, and in the third step, the coping styles (Problem-Focused and Emotion-Focused) were entered.
4. In the fourth stage, we performed a multivariate analysis (MANOVA) to examine the effect of gender and age and the interaction between them on Stress Symptoms and Life Satisfaction. We per-

formed an additional MANOVA to examine the effect of gender and age (teenagers vs. adults) and the interaction between them on the two coping styles. Due to the large sample, we used a conservative approach, requiring $p < .01$ to indicate significance.

RESULTS

Teenager Sample. The teenagers reported a low level of stress and medium-to-high levels of life satisfaction (see Table 1). Both Lebanon Stress and Symptoms scores were lower than 3 and Life Satisfaction scores were higher than 3 on a 5-point scale. The girls had higher Lebanon Stress and Symptoms, while no gender differences were found in either coping style or in life satisfaction. Thus, with regard to the teenagers, our first hypothesis was only partially confirmed.

Adult Sample. The adults had a medium level of Lebanon Adult Stress, a low level of Symptoms, and medium-to-high levels of Life Satisfaction (see Table 1). The women had significantly higher levels of Lebanon Adult Stress, Problem- and Emotion-Focused coping style compared with men, while no gender differences were found in level of Life Satisfaction. Thus, in this sample of adults, our first hypothesis was confirmed.

Teenager Sample. Lebanon Stress and the two coping styles were positively correlated with Symptoms (see Table 2). Life Satisfaction was negatively correlated with Lebanon Stress and with the Emotion-Focused coping style. Step 1 of the hierarchical regression, which included gender, showed a significant effect (see Table 3), although explaining only 2.3% of the variance for Symptoms. In Step 2, when Lebanon Stress was added, the gender effect became insignificant, while Lebanon Stress had a significant effect. Overall, step two added 13% to the explained variance of Symptoms. In Step 3, when the two coping styles were added, Lebanon Stress remained significant, as did Emotion-focused coping. In accordance with our second hypothesis, Lebanon Stress and Emotion-focused coping style were mediating between gender and Symptoms. However, Problem-Focused coping style was not a mediator. Lebanon Stress made a greater contribution compared with Emotion-Focused coping style (see Table 3, Steps 2 and 3).

In Step 1, gender was the only independent variable in the regression equation for Life Satisfaction, and was not statistically significant (see Table 3). Thus, contrary to our hypothesis, Lebanon stress and coping styles were not mediating variables.

TABLE 1. Gender Differences in Lebanon Stress, Coping Styles, Symptoms, and Life Satisfaction Among Teenagers and Adults

Variables	Study	Female n = 156		Male n = 197		<i>t</i> ^a
		<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	
Lebanon ^b Stress	Teens	2.58	.87	2.13	.79	-5.53***
	Adults	3.55	.90	3.24	.89	-5.09***
Problem-Focused Coping	Teens	2.29	.68	2.20	.68	-1.38
	Adults	2.41	.71	2.11	.66	-6.42***
Emotion-Focused Coping	Teens	1.87	.49	1.92	.48	1.00
	Adults	1.89	.43	1.76	.47	-3.08**
Symptoms	Teens	1.60	.60	1.39	.57	-3.55***
	Adults	1.61	.70	1.40	.70	-4.79***
Life Satisfaction	Teens	3.38	.91	3.53	.97	1.59
	Adults	3.41	.91	3.49	.87	1.39

^aNegative *t* means that scores for female respondents are higher than those for male respondents.

^bDifferent measurements for teenagers (Lebanon Stress) and adults (Adult Lebanon Stress).

p* < .05, *p* < .01, ****p* < .001.

In sum, the findings suggested that among the teenagers in this specific situation—the withdrawal of Israel from Lebanon—the contribution of gender in explaining Symptoms was very limited and, in fact, disappeared when cognitive appraisal was added to the regression equation. Furthermore, gender did not make a significant contribution to explaining general well-being (Life Satisfaction).

Adult Sample. Lebanon Adult Stress and the two coping styles were positively correlated with Symptoms (see Table 2). Life Satisfaction was negatively correlated with Lebanon Adult Stress and with Emotion-Focused coping style. The first step of the hierarchical regression (see Table 4), which included gender, revealed a significant effect, but explained only 3% of the explained variance for Symptoms. In Step 2, when Lebanon Adult Stress was added, the gender effect remained significant. Overall, Step 2 added 7% to the explained variance of Symptoms. In Step 3, with the addition of the two coping styles, gender was still significant, as was Lebanon Adult Stress and the Problem- and Emotion-Focused coping styles. The third step added 14% to the explained variance. These results suggested that cognitive appraisal (Lebanon Adult Stress) and the two coping styles were partial mediating variables between gender and Symptoms.

TABLE 2. Correlations Matrix

	Study	Lebanon Stress	Problem-Focused Coping	Emotion-Focused Coping	Symptoms	Life Satisfaction
Lebanon Stress ^a	Teens	–	.24***	.16**	.38***	–.11*
	Adults		.15***	.21***	.30***	–.10**
Problem-Focused Coping	Teens		–	.60***	.22***	.09
	Adults			.60***	.19***	–.02
Emotion-Focused Coping	Teens			–	.31***	–.12*
	Adults				.42***	–.20***
Symptoms	Teens				–	–.30***
	Adults					–.36***

^a Different measurements for teenagers and adults.

* $p < .05$, ** $p < .01$, *** $p < .001$

When gender was the only independent variable in the regression equation Life Satisfaction, was not significant (see model, Table 4). Since gender and Life Satisfaction were not significantly correlated, Lebanon stress and coping styles were not mediating variables.

In sum, among adults, the contribution of gender in explaining Symptoms was significant, although it explained only a low percentage of the variance. Unlike the teenager sample, among the adults, the contribution of gender remained statistically significant when cognitive appraisal and coping styles were added to the regression equation. Similar to the teenager sample, gender did not contribute significantly to explaining general well-being (Life Satisfaction).

To examine the question concerning the effects of gender and age (teenagers vs. adults), and their interaction on Symptoms and Life Satisfaction, MANOVA was performed. The analysis revealed a significant main effect for gender ($F_{(2,1181)} = 12.65, p < .001$); neither age group nor the age \times gender interaction was significant. A univariate analysis showed that gender had a significant effect only on Symptoms ($F_{(1,1182)} = 25.18, p < .001$), but had no significant effect on Life Satisfaction. The above results add to our understanding regarding the contribution of gender and age group to Symptoms and Life Satisfaction and match the regression results.

Further analysis was conducted to increase our understanding of the contribution of gender and age to the two coping styles. Since the other mediating variable—cognitive appraisal of the stressor—was measured by different tools in each age group, it was not included in the multivariate

TABLE 3. Three-Step Hierarchical Regression: Symptoms and Life Satisfaction, Gender, Lebanon Stress, Problem-Focused and Emotion-Focused Coping Styles (Teenagers)

Variable	Step 1 ^a			Step 2 ^b			Step 3 ^c		
	B	SE(B)	Beta	B	SE(B)	Beta	B	SE(B)	Beta
Stress Symptoms									
Gender	.18	.07	.15**	.06	.06	.05	.10	.06	.08
Lebanon Stress				.26	.04	.37***	.23	.04	.33***
Problem-Focused							-.04	.06	-.05
Emotion-Focused							.38	.08	.28***
R ²	.02			.15			.21		
R ² change	.02			.13			.06		
F change	7.95**			50.62***			13.86***		
Life Satisfaction									
Gender	-.15	.10	-.08	-.11	.11	-.06	-.16	.11	-.09
Lebanon Stress				-.09	.06	-.09	-.12	.06	-.11
Problem-Focused							.42	.10	.30***
Emotion-Focused							-.60	.14	-.26***
R ²	.00			.01			.08		
R ² change	.00			.01			.07		
F change	2.14			2.26			11.63***		

^a Step 1 included Gender only.

^b Step 2 included Gender and Lebanon Stress.

^c Step 3 added Emotion-Focused and Problem-Focused coping styles to Step 2.

*p < .05, **p < .01, ***p < .001

analysis. Thus, MANOVA was conducted to test the effect of gender and age group on Problem- and Emotion-Focused coping styles. The overall analysis showed the following main effects: gender ($F_{(2,1216)} = 11.82, p < .001$); age (teenagers vs. adults) ($F_{(2,1216)} = 8.69, p < .001$). The interaction effect (gender by age) was $F_{(2,1216)} = 4.48, p < .01$. A univariate analysis revealed that gender had a significant main effect on

TABLE 4. Three-Step Hierarchical Regression: Symptoms and Life Satisfaction, Gender, Lebanon Stress, Problem-Focused and Emotion-Focused Coping styles (Adults)

Variable	Step 1 ^a			Step 2 ^b			Step 3 ^c		
	B	SE(B)	Beta	B	SE(B)	Beta	B	SE(B)	Beta
Stress Symptoms									
Gender	.21	.04	.16***	.15	.04	.11***	.13	.04	.10***
Lebanon Stress				.20	.02	.28***	.15	.02	.20***
Problem-Focused							-.10	.03	-.11**
Emotion-Focused							.64	.05	.43***
R ²	.03			.10			.24		
R ² change	.03			.07			.14		
F change	21.74***			70.80***			78.63***		
Life Satisfaction									
Gender	-.08	.06	-.05	-.06	.06	-.03	-.07	.06	-.04
Lebanon Adult Stress				-.09	.04	-.09**	-.05	.03	-.05
Problem-Focused							.21	.05	.16***
Emotion-Focused							-.59	.08	-.29***
R ²	.00			.01			.07		
R ² change	.00			.01			.06		
F change	1.69			6.68**			24.53***		

^a Step 1 included gender only.

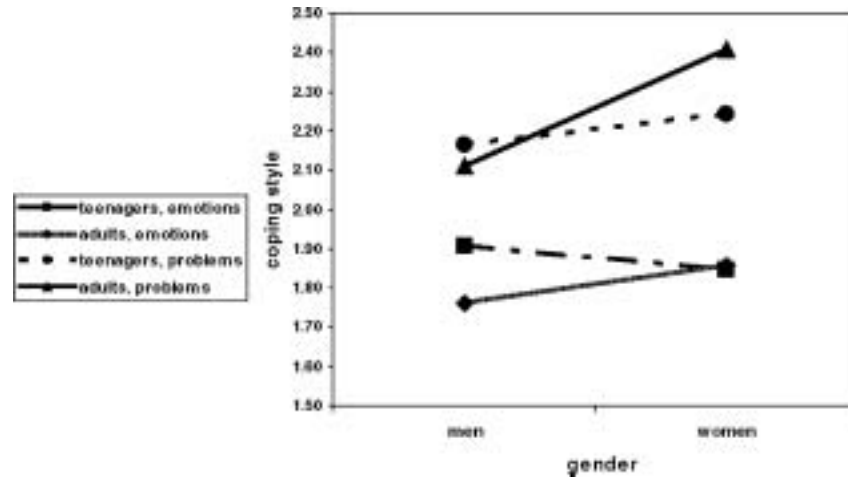
^b Step 2 included gender and Lebanon Stress.

^c Step 3 added Emotion-focused and Problem-focused coping styles to Step 2.

*p < .05, **p < .01, ***p < .001

Problem-Focused coping style ($F_{(1,1217)} = 19.20$, $p < .001$), and a non-significant effect on Emotion-Focused coping style. Age had a significant main effect on Emotion-Focused coping style ($F_{(1,1217)} = 6.53$, $p < .01$), and a non-significant effect on Problem-Focused coping style. The interaction effect was significant for both Problem-Focused coping style ($F_{(1,1217)} = 6.30$, $p < .01$) and Emotion-Focused coping style ($F_{(1,1217)} = 7.66$, $p < .01$) (see Figure 1). Thus, these results suggest that although gender and age contributed to coping style, the contribution was related to the type of coping.

FIGURE 1. Age Groups, Gender and Style of Coping



Coping style ranges: Emotion-focused: (1) Teenagers: men 1-4 ($M = 1.92$), women 1-3.19 ($M = 1.87$), (2) Adults: men 1-4 ($M = 1.76$) women 1-4 ($M = 1.89$). Problem-Focused: (1) Teenagers: men 1-4 ($M = 2.20$), women 1-3.75 ($M = 2.29$), (2) Adults: men 1-3.67 ($M = 2.11$) women 1-4 ($M = 2.41$).

DISCUSSION

This study examined the additive effect of gender in contributing to effects on stress, coping, and life satisfaction resulting from the threat of war and terror due to Israel's withdrawal from Lebanon. The results of the present study corroborated those of previous research indicating that women experience higher levels of stress compared with men (Ane-shensel and Pearlin, 1987; Kessler and McRae, 1981). Unlike the present study, other recent work has not dealt with situations of war or threat of terror, which constitute a threat to one's existence; this may be the source of the difference in results. However, it is possible to compare the findings of the present study with those of other studies, which have indicated that in severe situations, girls have reported higher stress relative to boys (Schraedley, Gotlib, and Hayward, 1999).

It is also noteworthy that, in spite of the significant contribution of gender to the explained variance of stress, gender explained only a very low percentage of the variance. Furthermore, gender did not contribute to general life satisfaction, as found in the two age groups. It should also be noted that when the teenagers were asked to report about an actual effect of stress on daily functioning—the effect of the withdrawal on their

learning functioning—we did not find significant differences between boys and girls, as well. Thus, we can conclude that, when examining general well-being, women and girls were not at higher risk than men and boys. However, there is still a need to explain even the small effect of gender on level of stress in situations of war and terror and why these differences were relatively low.

One way of answering this question is by claiming that the threat of war and terror may push both genders into their traditional roles and limit the flexibility of each. Regarding Israeli teenagers, war-like situations may be associated with army service. Although both genders serve in the army, only men serve in combat roles (Gal, 1986). One can assume that socialization processes in Israel prepare boys to be soldiers long before they actually join the army. Soldiers who are exposed to situations of war must control their fearful thoughts and emotions in order to be able to cope with the fighting (Dar and Kimhi, 2001, 2002). The teenagers who took part in this study had one and two years before they were due for army recruitment; therefore, it can be assumed that the boys had already been socialized to refrain from expressing stress in response to the threat of war or terror.

Regarding the relatively low contribution of gender in explaining level of stress, this was possibly a result of cultural changes, which have taken place in Israeli society over the last decade. Accordingly, both genders, and especially in the younger generation, have adopted somewhat more moderate gender roles. Boys and men have recently been encouraged to express their feelings and to seek help as a result of terror attacks, or even during army service (e.g., only during the last few years have soldiers publicly exhibited feelings, such as crying in military funerals). Girls and women, on the other hand, have been encouraged to pursue careers, which have traditionally been limited to men (Robbins and Ben-Eliezer, 2000). This line of explanation may also be relevant to the lack of gender differences in level of life satisfaction. It might appear that these two explanations contradict each other. However, it is possible that several social processes influence gender differences in situations of war and terror. One of these processes is local and depends upon the specific stressful situation, and the other is more general and relates to the culture and society in which the stressful situation takes place. This explanation fits Tamres, Janicki, and Helgeson (2002) who emphasized the importance of context in studying gender differences regarding coping with stress.

Based on the results of the present study, it appears that the most significant contribution of gender is to cognitive appraisal (Lebanon Stress

and Adult Lebanon Stress), which contributes to the coping strategies. These results are in accordance with Tamres, Janicki, and Helgeson's (2002) meta-analytic review of gender differences in coping behavior, which has indicated that, in the majority of studies, women appraise stressors as more severe than men do. Accordingly, stressor appraisal may be responsible for our finding that women engage in coping strategies more than men do (see Table 1, Adults). However, the absence of gender differences found among the teenagers supports Tamres et al.'s (2002) finding that age may moderate gender differences in coping. Tamres et al. (2002) have also indicated that the nature of the stressor should be taken into consideration when studying gender differences in coping styles. Accordingly, in a situation of war and threat of terror, where conservative gender roles may be more intense, gender may affect coping strategies.

One cannot ignore the relatively low level of stress reported by the teenagers and the adults. This contradicts studies conducted in other countries experiencing war, as well as studies conducted in Israel on the impact of the Gulf War (Bar-Tal, Lurie, and Glick, 1994; Chimienti and Abu Nasr, 1992; Greenbaum, Erlich, and Toubiana, 1993).

We suggest two possible explanations for the current results. One relates to the continuous stress experienced by the population living in the northern part of Israel. The entire population has lived in a situation of war and threat of terror for many years, and the participants from the teenager group were born into this situation. One core characteristic of the population living in this area has been its ability, for nearly 80 years, to cope and grow in spite of the ongoing situation of war and terror. They have developed heroic narratives and a sense of pride in being residents of this part of the country (Azaryauo, 1997). According to this culture, admitting personal weaknesses, such as symptoms related to the situation, would contradict the self-esteem of these people. The second explanation relates to the impact of war and terror on daily life, which, usually cause meaningful disruptions in daily routine. However, in the studied population, the daily routine within the families, communities, and schools has hardly been disrupted. As a result, most of the population barely lost resources, which, in accordance with Hobfoll's Conservation of Resources Theory (Hobfoll, 2001) has prevented an increase in the level of stress.

Some limitations of the study should be noted. First, the cross-sectional design precludes the deduction of causal relationships. Second, self-report of non-implicit data may have been affected by social desir-

ability, which might explain the lower level of concern (Lebanon Stress and Lebanon Adult Stress) and fewer symptoms reported.

Despite these limitations, the present findings may have implications for understanding the effect of gender on stress created by war and terror. However, further studies are needed to corroborate the present findings and expand the understanding of the gender effect in situations of war and terror. Other populations in different types of cultures, other wars, and threats of terror need to be studied, as well, to examine the explanations suggested for the present findings. Finally, it is important to explore whether the higher level of stress reported by women compared with men serves some social functions, what these functions are and how they are changing along with social changes regarding genders roles in society.

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