STRATEGIES ENDORSED BY LESBIAN, GAY, BISEXUAL, AND TRANSGENDER (LGBT) TO COPE WITH CYBER BULLYING VICTIMIZATION

A Thesis

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Abstract

STRATEGIES ENDORSED BY LESBIAN, GAY, BISEXUAL, AND TRANSGENDER (LGBT) TO COPE WITH CYBER BULLYING VICTIMIZATION

by

Amanda Huynh

Although traditional bullying has long been an issue, it is no longer simply a problem isolated to face-to-face interactions. With technological advancements allowing increased accessibility to electronic devices, bullying has extended to the cyber platform. Minority groups, such as the lesbian, gay, bisexual, and transgender (LGBT) subgroup, are especially prone to cyber bullying victimization. Thirty-nine LGBT individuals were surveyed about how they would perceive and cope with hypothetical cyber bullying scenarios. The present study found that endorsement of active coping strategy was negatively correlated with depressive feelings, where participants were less likely to report feelings of depression. In contrast, the overall passive coping variable and specific strategies of substance use, behavioral disengagement, and self-blame were positively associated with feelings of depression.

Dr. Juliana Raskauskas

Date
DEDICATION

To my mom and dad; I would not have been able to achieve all that I have without your endless support and encouragement.
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Chapter 1
INTRODUCTION

With technology continually advancing, the accessibility of electronic devices has also continued to increase. According to the Pew Research Center (2015), 90% of American adults and young adults own a cell phone and 42% own a tablet computer as of October 2014. Furthermore, the ownership of cell phones and computers has been increasing exponentially since 2002. This consistently growing accessibility increases the opportunity for cyber bullying.

The long-standing issue of bullying has extended its platforms to various electronic avenues, including cell phones, social media websites, and other internet outlets (Rivers, 2013; Shariff & Churchill, 2010). Cyber bullying, as defined by Menesini et al. (2012), is a deliberate and aggressive behavior that is carried out against a victim through electronic avenues. Previous research suggested a positive relationship between bullying victimization and negative internalizing difficulties, such as depression (Bonanno & Hymel, 2013; Hinduja & Patchin, 2010). Kim and Leventhal (2008) also found that bully victims were more likely to consider and attempt suicide. Ybarra (2004) examined the relationship between feelings of depression and frequency of internet harassment. Participants who experienced cyber bullying victimization were found to exhibit and report feelings of depression and suicidal thoughts more so than their non-victimized peers (Fauman, 2008; Thomas, 2006; Ybarra, 2004). Hence, the negative
internalizing effects influenced by cyber bullying victimization may be reduced through the use of effective coping strategies (Perren & Sticca, 2012).

Research has found that youths who identify as lesbian, gay, bisexual, or transgender (LGBT) were more likely than their non-LGBT peers to be victims of bullying (GLSEN, CiPHR, & CCRC, 2013). Bias-based cyber bullying, which targets sexual orientation, gender expression, and real or perceived sexual identity, has serious consequences for these youth (GLSEN et al., 2013; Fong, 2013; Rivers, 2013). For example, a national study conducted by GLSEN et al. (2013) found that LGBT youths were almost three times more likely than their non-LGBT peers to experience cyber bullying victimization. The majority of LGBT youths report being depressed as a result of cyber bullying victimization (Ferlazzo, 2010).

Because bullying and cyber bullying puts youth at risk for internalizing problems and depression, and LGBT youths are more likely than their non-LGBT peers to experience bullying and cyber bullying, they are at greater risk for internalizing problems and depression (Bonanno & Hymel, 2013; Hinduja & Patchin, 2010; Kim & Leventhal, 2008). Therefore, research on the types of coping strategies employed by LGBT youths is needed to possibly reduce the psychological risks of cyber bullying on LGBT youth.

The present investigation compared active and passive coping strategies endorsed by LGBT youth in response to cyber bullying scenarios. While it is not always possible to avoid exposure to cyber bullying, use of effective coping strategies is one pathway by which victims may avoid negative internalizing difficulties (Perren & Sticca, 2012).
According to Lazarus and Folkman (1987), coping is defined as the cognitive and behavioral efforts made to reduce the consequences of stressful occurrences. Through this framework, Vollink et al. (2013) found that victims of traditional bullying experience victimization differently than victims of cyber bullying and utilize different strategies to cope with these stressful situations. The two main types of coping strategies include passive coping strategies and active coping strategies. Passive coping, as defined by Zeidner and Endler (1996), refers to individuals who feel helpless to deal with the situation and rely on submissive behaviors to resolve the stressful situation. Some types of passive coping strategies include behavioral disengagement, substance use, and self-blame (Carver, 1997). In contrast, active coping generally refers to psychological or behavioral coping efforts through use an individual’s own resources to deal with the stressful situation (Zeidner & Endler, 1996). Some types of active coping strategies include use of emotional support, use of instrumental support, and self-distraction (Carver, 1997).

Individuals who engaged in passive coping were found to be adversely affected by the stressful situation (Field, McCabe, Schneiderman, & Field, 1985). This finding is further supported by a more recent study from Greene, Britton, and Fitts (2014), who found that LGBT youth utilizing passive coping strategies predicted higher probabilities of experiencing negative psychological well-being. In contrast, while passive coping strategies were found to increase the risk of negative internalizing effects, Hinduja and
Patchin (2010) found that utilization of active coping strategies were more effective in dealing with cyber bullying victimization.

Although studies found that the utilization of active coping strategies may be more effective in mediating the negative psychological effects of cyber bullying victimization, Schenk and Fremouw (2012) found that victims more frequently utilized passive coping strategies, such as avoidance and disengagement, to cope with the stressful situation. Vollink et al. (2013) further supported this and found that victims of cyber bullying often utilized passive coping strategies, which have been found to be less effective than active coping strategies.

While cyber bullying victims have been shown to score significantly higher on depression and anxiety, not all youth who experience cyber bullying suffer from negative effects (Schenk & Fremouw, 2012). Previous research with the general population has shown that effective coping strategies mediated bullying or cyber bullying with negative outcomes (Vollink, Bolman, Dehue, & Jacobs, 2013). Although previous research has examined the types and effectiveness of coping strategies utilized by non-LGBT victims of cyber bullying, there is a deficiency in research that focus on the strategies specifically endorsed by LGBT youths to cope with cyber bullying victimization. Such information would have implications for interventions with this group.

To address this deficiency in current studies, the present study assessed coping strategies endorsed by LGBT individuals in response to cyber bullying. The present investigation compared active and passive coping strategies endorsed by LGBT
individuals in response to cyber bullying scenarios. These coping strategies were examined in relationship with depression feelings. The relationship between coping strategies and a depression measure provided information on the coping strategies that are most and least frequently utilized as well as its effectiveness in mediating depression feelings.

**Research Questions**

The purpose of this study was to examine the types of coping strategies endorsed by LGBT individuals to cope with cyber bullying victimization. Through a series of survey questions and hypothetical scenarios, this study examined the types of coping strategies that are most frequently endorsed by LGBT individuals. In addition, this study also identified the types of coping strategies that are least often endorsed by LGBT individuals. The relationship between coping strategies and internalizing difficulties, specifically feelings of depression, was also examined. Since previous research has examined the effectiveness of various coping strategies on the general population, the findings from this study were compared to the existing knowledge base. This knowledge can aid in raising public awareness and informing policy decisions about coping with cyber bullying. It also can be useful in intervention efforts to reduce the negative internalizing difficulties that LGBT youths face as a result of increased cyber bullying victimization.
Theoretical Framework

One of the most commonly used coping models is the Approach-Avoidance model (Roth & Cohen 1996). When presented with a stressor, an individual may either utilize the approach method (i.e., actively engaging in efforts to improve the situation) or the avoidance method (i.e., ignoring or giving up the attempt to cope) as a means of resolving the issue. The approach and avoidance methods of coping are equivalent to terminologies of active (approach) coping strategies and passive (avoidance) coping strategies that are used in the present study. In this model, an individual assesses their cognitive capabilities and resources before electing to utilize either the approach or avoidance method to cope with the stressor (Roth & Cohen, 1996; Fields & Prinz, 1997).

For the present study, the framework of the Approach-Avoidance model was referenced to analyze the active and passive coping strategies endorsed by LGBT individuals. In a cyber bullying situation, utilization of the avoidance method, or passive coping strategies, is described as ignoring the problem and not taking action to attempt to stop the victimization (Vollink et al., 2013). In contrast, utilization of the approach method, or active coping strategies, includes seeking social support in an attempt to directly confront the stressor (Vollink et al., 2013; Cerna, 2014).
Definition of Terms

Several terms related to coping and cyber bullying are used in the current study.  

*Coping* refers to cognitive and behavioral efforts made to reduce the consequences of stressful occurrences (Lazarus & Folkman, 1987). *Active Coping Strategy* refers to the utilization of psychological or behavioral coping efforts that are characterized by an attempt to use one's own resources to deal with a problem situation (Zeidner & Endler, 1996), while *Passive Coping Strategy* refers to the lack of effort in attempting to resolve the stressful event or situation (Zeidner & Endler, 1996).

*Cyber bullying* is deliberate and aggressive behavior that is carried out against a victim through electronic avenues, including cell phones, social media websites, and other internet outlets (Menesini et al., 2012; Rivers, 2013; Shariff & Churchill, 2010).  

*LGBT* stands for lesbian, gay, bisexual, and transgender. It is used to describe people's sexual orientation or gender identity (Pobal, 2006).
In 2010, 18-year-old college student, Tyler Clementi, committed suicide by jumping off the George Washington Bridge, as reported by Foderaro (2010). After openly acknowledging that he was gay, Tyler’s roommate in college recorded and shared a video of Tyler kissing another man. The video was shared amongst the online community and Tyler suffered from continuous teasing and ridiculing on social media platforms, including Twitter and iChat. This occurrence eventually led to his suicide. The event brought further attention to the issue of cyber bullying within the LGBT community.

Although bullying has been a serious problem in schools for years, the emergence of technological advancements has allowed for bullying to stretch beyond school to the cyber world. Cyber bullying is the deliberate and aggressive behavior that is carried out against a victim through electronic avenues (Menesini et al., 2012). Bullying has now extended to electronic avenues such as cell phones, social media, and other internet platforms (Shariff & Churchill, 2010). The use of technology has also influenced cyber bullying to extend past adolescence and into young adulthood, since it is not dependent on physical proximity (Schenk & Fremouw, 2012).

Previous research has found a positive relationship between cyber bullying victimization and negative internalizing difficulties of youth (Bonanno & Hymel, 2013; Hinduja & Patchin, 2010). Through self-reported data from participants, Bonanno and
Hymel (2013) examined the association between involvement in cyber bullying and depressive feelings and suicidal ideation. The results from this study found a positive relationship between cyber bullying victimization and negative internalizing difficulties in adolescents. In a similar study, Hinduja and Patchin (2012) surveyed adolescents and found that all forms of bullying, including traditional and cyber bullying, were significantly associated with increased suicidal ideation.

Machmutow, Perren, Sticca, and Alsaker (2012) conducted a longitudinal study on pre-adolescents in seventh grade to investigate whether cyber victimization poses as a risk factor for depressive symptoms and also explored the coping strategies utilized to moderate the impact of cyber victimization. The results indicated that victims of cyber bullying were reportedly more likely to experience depression than their non-victimized peers. This finding is further supported by the systematic review conducted by Kim and Leventhal (2008), who found that bully victims were 2 to 9 times more likely to contemplate suicide. Despite the varying methodological differences in cyber bullying victimization, they found that participation in bullying possessed a positive relationship to suicidal ideations.

Minority groups, however, have been identified to be more at risk for bullying victimization and, therefore, more at risk for experiencing negative effects (GLSEN et al., 2013). One of these groups more likely to experience bullying victimization is the LGBT minority group (GLSEN et al., 2013). The negative influences of cyber bullying can affect both the mental and physical health of its victims. However, these influences can,
to some extent, be reduced through the utilization of constructive coping strategies (Machmutow et al., 2012; Vollink, Bolman, Dehue, & Jacobs, 2013). Depending on the cyber bullying situation, different coping strategies may be utilized to deal with the stressor. The purpose of the present study was to examine coping strategies recommended by LGBT community members for responding to cyber bullying.

**Cyber Bullying**

Bullying has long been a prominent issue in school environments amongst students. In the past, bullying took on what many now refer to as the “traditional” form, which is collectively defined as an aggressive behavior that is repeatedly and intentionally carried out against a defenseless victim (Olweus, 1993). As a result of the continuous advancements in technology, a new form of bullying, known as cyber bullying, has recently emerged. According to Vandenbosch and Cleemput (2008), some forms of cyber bullying include mean text messages, sharing videos, and social media messages. Through a meta-analysis study, Bonanno and Hymel (2013) examined the association between cyber bullying involvement and both depressive symptomatology and suicidal ideations. Using self-reported data from participants between 8th grade and 10th grade, results suggested that cyber bullying involvement uniquely contributed to the prediction of depressive symptoms and suicidal ideation. Hence, although the two forms of bullying appear to share a similar foundation, the widespread use and availability of
electronic devices reckons that cyber bullying should be perceived as its own phenomenon, rather than merely a branch of the traditional face-to-face bullying (Bonanno & Hymel, 2013; Grigg, 2012).

The prevalence of cyber bullying victimization is increasing due to the continuous technological advancements. Nearly every one in three children have experienced cyber bullying victimization ("Cyber bullying statistics," 2013). The two most common technologies used for cyber bullying include internet and mobile phones, including mobile phone calls, text messages, pictures/video clips, emails, chat rooms, instant messaging, and websites (Slonje, Smith, & Frisen, 2012).

Cyber bullying allows for an increased potential for a larger audience, decreased time and space limits, and lower levels of adult supervision than traditional bullying (Perren & Sticca, 2012; Bonanno & Hymel, 2013; Hinduja & Patchin, 2010; Hoffman & Su, 1998). Hence, although both traditional and cyber bullying victimization are associated with increased depressive symptomatology, cyber bullying allows for an amplified platform for harassment. Although cyber bullying victims are often unharmed physically by their perpetrators, cyber bullying allows for the cultivation of emotional and mental maltreatment, which may be equally as traumatizing, if not more so, than physical harm (Rivers, 2013). Furthermore, our increasing reliance on electronic forms of communication allows for accessible information to be readily available to those who seek to discriminate and intimidate.
Because cyber bullying perpetrators often do not cause physical injury to their victims, they often act anonymously, and may be an extension of school bullying, it is difficult to effectively prevent or stop the occurrences of cyber bullying (Smith et al., 2008; Ybarra, Mitchell, Wolak, & Finkelhor, 2006). As such, cyber bullying victims often suffer great emotional stress due to feelings of helplessness to stop the interaction (Fong, 2013).

It was once believed that internet cyber bullying and cyber bullying on the cell phone were different, but the distinction between internet and cell phone bullying is blurred due to internet enabled mobile phones. A new dichotomy of approaches to cyber bullying was proposed by Vanderbosch and Cleemput (2009) – direct and indirect cyber bullying. Direct cyber bullying occurs when the victim is directly involved. An example of direct cyber bullying occurs when the perpetrator sends hateful or threatening messages to the victim. On the other hand, indirect cyber bullying is when the immediate victim is unaware. An example of indirect cyber bullying is when the perpetrator spreads gossip about the victim through cyber avenues.

**Consequences of Cyber Bullying**

Previous research has provided consistent evidence that cyber bullying possessed a positive relationship to psychological difficulties and suicidal ideations in victims (Bonanno & Hymel, 2013; Perren & Sticca, 2012). Recent studies examining internet harassment found that victims of cyber bullying exhibited and reported more depressive
symptoms, negative psychological well-being, and suicidal ideation than their non-victimized peers (Fauman, 2008; Thomas, 2006; Ybarra, 2004). Through assessing the data obtained through a telephone survey of young, regular internet users, Ybarra (2004) examined the linkage between internet harassment and depressive symptoms. Depressive measures for this study consisted of nine variables representing depressive symptoms and participants were asked to answer three dichotomous questions regarding their feelings and behaviors. This includes (1) recent difficulties in personal hygiene, (2) challenges doing schoolwork, and (3) decreased feelings of self-efficacy. The results from this study suggested that victims of cyber bullying reported higher levels of depressive symptomatology than their non-victimized peers. Furthermore, Perren and Sticca (2012) conducted a study where they presented hypothetical bullying scenarios to participants and asked them to rank the scenarios in terms of perceived severity. The results from this study demonstrated significant associations between youth victims of cyber bullying and their experiences with depressive symptoms.

In a similar study, Hinduja and Patchin (2010) surveyed 1,963 youths. The participants were asked a variety of questions relating to experiences with cyber bullying and peer harassment thoughts about suicide. The results from this study suggested that experience with cyber bullying is associated with an increase in suicidal ideation. Participants who experienced cyber bullying were found to possess an increased risk for suicidal thoughts, attempts, and completed suicides. Schenk and Fremouw’s (2012) study also supported this finding. They examined the psychological impact and coping
strategies of college victims of cyber bullying. These participants were surveyed online and the victims were found to have significantly more suicidal ideations than their non-victimized peers. Specifically, cyber bullying victims were approximately twice as likely to have attempted suicide compared to those who had not experienced cyber bullying.

While adolescents who were cyber bullying victims were found to possess higher levels of depressive symptomatology than their non-victimized peers, minority groups were found to be at an even higher risk for cyber bullying victimization (GLSEN et al., 2013). Specifically, the LGBT minority group are especially at risk for bullying and cyber bullying victimization (Schneider, O'Donnell, Stueve, & Coulter, 2012; GLSEN et al., 2013; River, 2013; Mishna, Newman, Daley, & Solomon, 2008). In addition to being more at risk for bullying, LGBT youth may also have fewer avenues to obtain support if they have not acknowledged their sexual orientation to friends and peers yet (GLSEN et al., 2013). As such, the distress induced by cyber bullying victimization may be more harmful among LGBT individuals.

**Cyber Bullying and LGBT Youth**

Although various studies have shown significant relationships between cyber bullying of youths and internalizing difficulties, there is a shortage of studies that specifically examine the impact LGBT youths face due to cyber bullying victimization (Bonanno & Hymel, 2013; Cassidy & Taylor, 2005; Fauman, 2008; Hinduja & Patchin, 2010; Kim & Leventhal, 2008). As suggested by Grabe and Holfeld (2012), LGBT youth
may also be more at risk for cyber bullying because regular access to and frequent utilization of electronic devices were one of the best predictors of cyber bullying involvement. LGBT youths reportedly spend, on average, five hours online each day using a variety of electronic devices. On average, this is approximately 45 minutes more than their non-LGBT peers (GLSEN et al., 2013; Hinduja & Patchin, 2010).

Hinduja and Patchin (2011) conducted a study surveying 396 students between the ages of 11 and 18 to examine whether LGBT students were more likely than their non-LGBT peers to experience cyber bullying victimization. The results from this study indicated that those who identified as LGBT were more often the targets of cyber bullying than non-LGBT youths. Furthermore, they also found that the LGBT minority is more likely than any other minority groups, such as Jews and Latinos, to be targets for cyber bullying and harassment. In a similar study, GLSEN et al. (2013) conducted a national study where they surveyed 7,898 students between the ages of 13 and 21. The researchers found that within youth groups, those who identified as LGBT were nearly three times as likely as their non-LGBT peers to have been cyber bullied (42% vs. 15%). Furthermore, LGBT victims of cyber bullying reported higher levels of depression and lower levels of self-esteem.

Bias-based cyber bullying, which targets sexual orientation, gender expression, and real or perceived sexual identity, has become a widespread issue (GLSEN et al., 2013; Mishna et al., 2008; Fong, 2013; Rivers, 2013). One in four LGBT youth (26%) were found to have been bullied online specifically because of their sexual orientation or
gender expression (GLSEN et al., 2013). In addition, LGBT youth were four times more likely than non-LGBT youth to have been sexually harassed online (32% vs. 8%).

Since LGBT individuals were more likely to experience cyber bullying victimization, they were also, unsurprisingly, found to be more at risk for the negative internalizing effects associated with cyber bullying victimization (Rivers, 2013). According to GLSEN et al. (2013), victimized LGBT individuals were more at risk of experiencing low self-esteem and higher depression than their non-victimized peers. As LGBT individuals are often targeted for cyber bullying harassment because of their sexual identity and expression, it is anticipated that LGBT individuals may experience higher levels of depressive symptoms in relation to cyber bullying victimization. Hence, victimized youth may experience cyber bullying differently due to the different strategies selected to cope with the stressful situation. The current study examined the types of coping strategies utilized by LGBT youths in response to scenarios about cyber bullying.

**Coping Strategies**

According to Kokkinos, Antoniadou, Dalara, Koufogazou, and Papatziki (2013), coping refers to an individual’s intentional efforts to regulate their psychological well-being to reduce negative internalizing effects, such as depression. Research indicated the negative influences of cyber bullying, to some extent, can be reduced through the
utilization of constructive coping strategies (Machmutow et al., 2012; Jacobs, Dehue, Völlink, & Lechner, 2014).

The Approach-Avoidance Model depicts a structure in which coping strategies are categorized into either the approach method or avoidance method (Roth & Cohen, 1986). In this model, coping strategies may be categorized into two categories of different names that will instead be utilized for the purpose of this study: (1) passive coping strategies and (2) active coping strategies (Sleglova & Cerna, 2011; Bijstra, Bosma & Jackson, 1994; Roth & Cohen, 1986). Active coping strategies, or approach coping strategies, are utilized when a victim attempts to cope with the victimization by tackling the problem directly. Some types of active coping strategies include seeking social support and self-distraction (Carver, 1997). A cyber bullying victim may, for example, seek advice from and talk with a peer regarding the situation. This is an example of how an individual may utilize the active coping strategy of seeking social support to cope with the stressful situation. This method is categorized as an active strategy because the victim is coping with the situation by attempting to address the issue directly (Sleglova & Cerna, 2011; Bijstra, Bosma & Jackson, 1994; Roth & Cohen, 1986).

On the other hand, victims who seek to avoid the stressor are instead utilizing passive coping strategies, or otherwise referred to as avoidance coping (Burton, Stice, & Seeley, 2004; Cassidy & Taylor, 2005). Some types of passive coping strategies are substance use, behavioral disengagement, and self-blame (Carver, 1997). An example of passive coping strategies is when a victim of cyber bullying avoids or disengages from
the situation and gives up on trying to deal with the stress. These methods of coping are categorized as a passive strategy because victims are not addressing the situation, but are instead seeking to avoid the stressor.

In a study conducted by Perren and Sticca (2012), participants were presented with a series of hypothetical bullying scenarios and asked to rank the scenarios from the most severe to the least severe one. Researchers found that victims often utilize different types of coping strategies depending on their perception of the severity of the stressor. Victims of bullying, whether cyber or traditional, were found to more often utilize passive coping strategies, such as self-blame or behavioral withdrawal (Lodge & Frydenberg, 2007; Vollink et al., 2013; Wilton, Craig, & Pepler, 2000). Vollink et al. (2013) asked participants, who were aged between 11 and 12 years old, to complete a mailed survey consisting of questions relating to the measures of coping strategies and depression. In examining the association between coping methods and depression, the researchers found that utilization of passive coping strategies was found to be less effective in mediating negative internalizing effects than active coping strategies. Results from this study further suggested that victims of cyber bullying who utilized active coping strategies experienced less negative internalizing effects than those who utilized passive coping strategies. Passive coping was found to be ineffective in dealing with cyber bullying victimization, as victims will consequently remain vulnerable to the effects of abuse.
Although active coping strategies were found to generally be more effective in dealing with cyber bullying victimization, research indicates that victims rarely utilize active strategies, such as seeking emotional support and confrontation (Skrzpiec et al., 2011; Waasdorp & Bradshaw, 2011). Waasdrop and Bradshaw (2011) explored the responses of children who were victims of bullying. The study examined the associations between behavioral responses and internalizing and externalizing symptoms. Results from this study indicated that children more often utilized passive methods of coping responses to deal with the victimization.

In a similar study, Schenk and Fremouw (2012) examined the psychological impact and coping strategies of college victims of cyber bullying by surveying students via an online questionnaire. Through a series of questions pertaining to the Symptom Checklist-90-R, which measures depressive symptoms, they found that some of the most frequently employed coping strategies of cyber bullying victims were avoidance, revenge, and disengagement. Vollink et al. (2013) further argued that the use of passive coping and the lack of use of active coping strategies may contribute to the negative psychological influences of cyber bullying.

Coping with bias-based cyber bullying, which targets sexual orientation, gender expression, and real or perceived sexual identity, has also been investigated (GLSEN et al., 2013; Fong, 2013; Rivers, 2013). Mishna et al. (2008) interviewed LGBT youths to identify and examine the methods of coping they would use to address bullying. A cross-sectional design was utilized to examine cyber bullying experience. Participants were
asked questions regarding their experience and how it made them feel. The researchers found that a common strategy the participants reportedly recognized as an effective method was support from a community, which may be categorized as the seeking social support coping strategy, an active coping strategy. However, Greene et al. (2014) conducted a study to investigate the mental health consequences resulting from school bullying in LGBT adults. They found that LGBT adult victims of traditional, face-to-face bullying more often reported utilizing passive coping strategies, which include self-harm, disengagement, violent behaviors, and avoidance. They found that the use of these strategies predicted negative psychological well-being and also contributed to continued bullying victimization. Although active coping strategies were found to be more effective than passive coping strategies, these studies suggested that victims more often utilized passive coping strategies.

Research indicated that victims respond to cyber and traditional bullying by expressing anger or annoyance and experiencing depressive symptoms, such as feeling angry or irritable and self-loathing (Kim & Leventhal, 2008; Machmutow et al., 2012; Vollink et al., 2013). As suggested by Vollink et al. (2013), this illustrated how victims of cyber bullying more often utilize passive coping strategies. However, they further suggest that passive coping strategies are ineffective in dealing with cyber bullying victimization. Correspondingly, victims of cyber bullying were found to rarely use active coping strategies, such as confiding in peers or parents and confronting the aggressors, which are generally found to be more effective. From these findings, they argued that the use of
passive coping and the lack of use of active coping strategies may contribute to the negative psychological influences of cyber bullying.

Given that previous studies have found cyber bullying victimization to be positively related with negative internalizing difficulties and that LGBT youths are more likely than their non-LGBT peers to experience bullying, the LGBT minority group is at greater risk for negative psychological influences (Bonanno & Hymel, 2013; Hinduja & Patchin, 2010; Kim & Leventhal, 2008). These negative internalizing difficulties, however, may be reduced or minimalized through utilization of effective coping strategies (Machmutow et al., 2012; Perren & Sticca 2012).

The current study examined the types of coping strategies utilized by LGBT youths who are victims of cyber bullying. Through a series of survey questions, this study further examined the types of coping strategies that are most frequently used by LGBT cyber bullying victims. In addition, the present study assessed the effectiveness of coping strategies in association with depressive feelings.

The Current Study

The purpose of this study was to examine the types of strategies endorsed by the LGBT subgroup to cope with cyber bullying victimization. Through a series of hypothetical scenarios and survey questions, this study examined the types of coping strategies that are most frequently and least frequently endorsed by LGBT individuals as
a means of coping with cyber bullying. In addition, this study also examined the relationship between coping strategies endorsed and prevalence of depressive feelings that the participants may experience through the various cyber bullying scenarios presented in the survey.

Previous research has found that the general population of bullying victims more often utilizes passive coping strategies, such as self-blame or avoiding the problem (Bonanno & Hymel, 2013; Hinduja & Patchin, 2010; Kim & Leventhal, 2008; Vollink et al., 2013). The current study examined the following research questions: (1) what are the types of coping strategies most often endorsed? (2) Which coping strategies are most frequently and least frequently endorsed? (3) What is the relationship between coping strategies and depression feelings? It is hypothesized that the utilization of active coping strategies will be a more effective coping method for LGBT individuals than passive coping strategies. Correspondingly, participants who endorse passive coping strategies will report experiencing higher depressive feelings. In contrast, participants who report utilizing active coping strategies will report experiencing little or no depressive feelings. However, it was further anticipated that the majority of LGBT youths will report more often utilizing passive coping strategies, which is positively correlated with feelings of depression.

By identifying and assessing the different types of coping strategies most and least commonly endorsed by LGBT youths to cope with cyber bullying victimization, this study further examined the relationship of the selected coping strategies to feelings of
depression. The design and methodology utilized in the present study is further discussed in the next chapter.
Chapter 3

METHODS

This study identified the types of strategies endorsed by LGBT youth for coping with cyber bullying victimization scenarios. This study also examined how the perceived depressive feelings were related to the types of coping strategies selected by the LGBT subgroup. Thirty-nine (n = 39) LGBT individuals participated in a study of coping strategies associated with different forms of cyber bullying. Participants were asked to respond to a series of hypothetical cyber bullying victimization scenarios.

Design and Research Questions

This study examined the responses of the LGBT subgroup to hypothetical cyber bullying scenarios. Firstly, this study examined the types of coping strategies most often perceived to be utilized. Secondly, it assessed the most frequently and least frequently endorsed coping strategies. Lastly, this study examined the relationship between coping strategies and depression measures.

Hypothetical cyber bullying scenarios were presented to the participants. Participants were asked to read and position themselves into the six hypothetical scenarios and then select the feelings most reflective of how they would respond from a list of emotions/actions provided. For each of the emotions/actions provided, participants
were asked to rate whether “yes” they would feel/act that way or “no” they would not feel or act that way. Subsequently, for each scenario, participants were asked to indicate how likely they would utilize a coping strategy in response to the hypothetical situation on a scale of 1 through 4, with 1 being the least likely and 4 being the most likely.

The use of hypothetical scenarios has previously been used in research on cyber bullying and is considered a valid way to collect data about coping with cyber bullying (Bauman, 2010; Frisén, Berne, & Marin, 2014; Machmutow et al., 2012; Monks, Robinson, & Worlidge, 2012; Pieschl, Porsch, Kahl, & Klockenbusch, 2013; Smith et al., 2008; Wong, Chan, & Cheng, 2014). While the hypothetical nature limits its generalizability, it exposes participants to less harm than experimental designs. This design also allows those who have not been cyber bullied to participate, increasing the potential sample size.

Participants

Participants were selected for this study based on two criteria: (a) self-identification as LGBT and (b) over 18 years old. Participants also did not need to have any prior experience with cyber bullying victimization to participate in the study, as the study examined responses to hypothetical cyber bullying scenarios. Participants for this study were recruited from the Pride Center at the California State University, Sacramento. Participants were recruited through distributing the survey link via the Pride
Center’s mailing list, as well as with a survey link posted on the Pride Center’s Facebook page. The strategy of snowball sampling was also utilized, where participants were encouraged to share the link with peers who identify as LGBT. The researcher’s peers were also encouraged to share the link with their communities who identify as LGBT.

A total of 71 responses were received. However, those who identified as heterosexual were automatically disqualified. In addition, participants who were under the age of 18 were also automatically disqualified from proceeding with the survey. Responses that were incomplete and did not respond to all the questions associated with at least one scenario were also disqualified. This left a total of 39 qualifying responses. Because this study focused on the participants’ identification of sexual orientation, gender identification was not collected. Of the 39 participants, 31% identified as lesbian, 26% identified as gay, 26% identified as bisexual, 5% identified as transgender, and 15% identified as other. Of the 39 participants, 64% reported an age range of 18 to 24 years, 31% were 25 to 30 years old, 3% were 30 to 35 years old, and 5% were above 35 years of age (see Table 1).
Table 1

*Participant Inclusion Selection Criteria*

<table>
<thead>
<tr>
<th>Orientation</th>
<th>18 to 24 years</th>
<th>25 to 30 years</th>
<th>30 to 35 years</th>
<th>Above 35 years</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lesbian</td>
<td>7</td>
<td>4</td>
<td>1</td>
<td>0</td>
<td>12</td>
</tr>
<tr>
<td>Gay</td>
<td>6</td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>10</td>
</tr>
<tr>
<td>Bisexual</td>
<td>8</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>10</td>
</tr>
<tr>
<td>Transgender</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Other</td>
<td>2</td>
<td>3</td>
<td>0</td>
<td>1</td>
<td>6</td>
</tr>
<tr>
<td>Total</td>
<td>25</td>
<td>12</td>
<td>1</td>
<td>2</td>
<td>39</td>
</tr>
</tbody>
</table>

Survey Measures

Demographics

A demographic survey was administered to measure participant age and sexual orientation. The possible responses for age included (a) under 18 years old, (b) 18 to 24 years old, (c) 25 to 30 years old, (d) 30 to 35 years old, and (e) above 35 years old. Participants who reported as less than 18 years old were automatically disqualified from the survey. Participants were then asked to select a sexual orientation that they best identify with. The possible selections include heterosexual, lesbian, gay, bisexual, transgender, and other. Individuals who identified as heterosexual were automatically disqualified from the survey.
Cyber Bullying Scenarios

Six hypothetical cyber bullying victimization scenarios were presented in the survey (see Appendix A). The participants were asked to carefully assess the situation and, placing themselves in the victim’s perspective, to evaluate their own feelings and possible selection of strategies to cope. The fictitious cyber bullying scenarios illustrated various different avenues of cyber bullying, including cyber bullying victimization through text messaging, social media, websites, and emails. Gender of victims in the scenarios was varied. Hypothetical scenarios were used in order to reduce the possibility of triggering distress for participants who have experienced cyber bullying. These scenarios were designed by the researcher for this study based on studies in the media about cyber bullying.

An example scenario is: After Benjamin came out of the closet, openly embracing his sexuality, his peers on Facebook would constantly write “GAY” or “FAG” on all of his pictures and posts. Although he deactivated his account, he later found out that some people made a Facebook page and added all of his high school peers. The page was dedicated to posting pictures of him that people at school snapped without him knowing and making fun of his hair, his style of clothing, etc.

To measure depression feelings, participants were given a list of emotional feelings and were asked to rate these feelings on a Likert Scale of 1 to 4, with 1 being least often and 4 being most often. To assess the coping strategies endorsed, participants were given a list of coping methods in response to the situation and asked to indicate
whether they would use each of the coping strategies by selecting either “Yes” or “No” for each of the given coping methods. Depressive responses to cyber bullying scenarios and coping strategies were assessed.

**Depressive Responses to Cyber Bullying Scenarios**

Participants were instructed to assess each of the six hypothetical scenarios and determine how it would make them feel using a list of depressive feelings derived from the Center for Epidemiological Studies Depression (CES-D) scale (Radloff, 1997; see Appendix B). Participants were asked to indicate “Yes” (scored = 1) if they would feel the identified emotion, or “No” (scored = 0) if they would not feel each the identified emotion listed. Only the first 20 items on the CES-D were appropriate to youth and peer relationships and were used in the current study. Some feelings that were given on the list to be chosen from include being bothered by things that usually don’t bother the participant and not feeling like eating.

**Coping Strategies**

This study utilized the Brief Coping Orientation to Problems Experienced (Brief COPE) measure, which was developed and validated by Carver (1997), to assess coping strategies. The measure requires respondents to rate their use of several types of coping strategies, which are categorized as follows: (1) self-distraction, (2) active coping, (3) denial, (4) substance use, (5) emotional support, (6) instrumental support, (7) behavioral
disengagement, (8) venting, (9) positive reframing planning, (10) humor, (11) acceptance, (12) religion, and (13) self-blame.

Nine of the 13 types of coping strategies from the Brief COPE measure were utilized for this study. The nine types of coping strategies were selected based on its applicability to the LGBT community. These nine coping strategies include self-distraction, denial, substance use, behavioral disengagement, self-blame, active coping, emotional support, and instrumental support. These types of coping strategies were categorized into either total passive coping strategies (denial, substance use, behavioral disengagement, and self-blame) or total active coping strategies (self-distraction, active coping, use of emotional support, and use of instrumental support). According to the Brief COPE measure, individuals who utilize the active coping strategy intentionally engage in positive action to make the situation better. The total active coping encompasses all the coping strategies that fall under this category, including self-distraction, active coping, use of emotional support, and use of emotional support.

After reading a hypothetical cyber bullying scenario, participants were presented with a list of strategies. On a Likert scale of 1 to 4, with 1 being the least often and 4 being the most often, participants were asked to rate the likelihood of the strategies they would use to cope with the situation. There were two items for each type of strategy. For example, the two items related to the denial coping strategy were (1) I've been saying to myself "this isn't real" and (2) I've been refusing to believe that it has happened.
The categorization into passive or active coping strategies is consistent with the distinctions explained in the Utrecht Coping List for Adolescents (UCL-A) (Bijstra et al., 1994). The English version of the UCL-A measure is currently unavailable for use. However, the active and passive coping strategy distinction was also utilized in the study conducted by Vollink et al. (2013), which also thoroughly explains the distinction between passive and acting coping strategies.

After assessing the hypothetical scenarios depicting cyber bullying victimization, participants were asked to measure the suggested coping strategies suggested by LGBT participants, they were asked to assess each scenario, evaluate their feelings, and then decide how they believe they will react from the given list of action items (i.e., “I use alcohol or other drugs to make myself feel better” and “I get help and advice from other people.”). Each of the Brief COPE action items list pairs with one of coping strategy scales as either passive or active coping.

**Procedures**

At the beginning of this study, the researcher met with the Sacramento State University’s PRIDE Center Program Coordinator to obtain approval of recruiting participants through the Center’s mailing list. Once the study was approved by the college institutional review board (IRB), the survey was distributed through the PRIDE Center’s mailing list. Subsequently, the survey link was also posted on the PRIDE
Center’s official Facebook page to recruit participants. As all participants must be 18 years or older, no parental consent was required. However, an informed consent was provided at the start of the survey to all participants, who completed consent forms in order to proceed with the survey.

Participants were also recruited via snowballing sampling. In addition to distribution through the PRIDE Center, the survey was also provided to the researcher’s acquaintances, who were encouraged to pass on the survey link to others that met the selection criteria. The selection criteria for this study required participants to be (1) over 18 years old and (2) self-identify as LGBT.

Although participants were asked to provide their age range and sexual orientation, no specific identifying information was asked. As such, participants were not asked to provide their gender. The survey was developed via SurveyMonkey. The researcher utilized the advanced version of the program to ensure data security and that IP addresses and other identifiers were not recorded or linked with participant responses.
Chapter 4

RESULTS

This chapter addresses the results found through the survey that was designed to examine the coping strategies suggested by the LGBT subgroup. The analyses were intended to (a) describe the types of coping strategies most often reported, (b) describe the most frequent and least frequent endorsed coping strategies, and (c) test the relationship between reported coping strategies and depressive feelings.

**Most Frequent Reported Coping Strategies**

In order to identify the types of coping strategies most often recommended, the percentage of people recommending each coping strategy was calculated. The survey consisted of six scenarios depicting cyber bullying situations. Participants were asked to assess each of the scenarios and report the likelihood certain coping strategies would be endorsed on a Likert scale from 1 to 4. The percentages of participants rating strategies as 3 or 4 on the 4-point scale were calculated for each of the six hypothetical scenarios. The rating of a 3 or 4 depicts the strategies that were most often endorsed, while ratings of a 1 or 2 depict the strategies that were least often endorsed. Table 2 illustrates the mean percentages of the coping strategies endorsed by the participants across all six scenarios.
Table 2

Mean Percentages Endorsing Coping Strategies across Scenarios

<table>
<thead>
<tr>
<th>Coping Strategy</th>
<th>Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Denial</td>
<td>28%</td>
</tr>
<tr>
<td>Behavioral Disengagement</td>
<td>32%</td>
</tr>
<tr>
<td>Substance Use</td>
<td>41%</td>
</tr>
<tr>
<td>Self-Blame</td>
<td>51%</td>
</tr>
<tr>
<td>Active Coping</td>
<td>70%</td>
</tr>
<tr>
<td>Use of Emotional Support</td>
<td>73%</td>
</tr>
<tr>
<td>Use of Instrumental Support</td>
<td>74%</td>
</tr>
<tr>
<td>Self-Distraction</td>
<td>78%</td>
</tr>
</tbody>
</table>

As seen in Table 2, the strategies that were most often to least often reported across all scenarios, on average, were: self-distraction (78%), use of instrumental support (74%), use of emotional support (73%), active coping (70%), self-blame (51%), substance use (41%), behavioral disengagement (32%), and denial (28%). All four of the most commonly endorsed coping strategies (i.e., active coping strategies, use of emotional support, use of instrumental support, and self-distraction) are categorized in the total active coping strategies group. The four least commonly endorsed coping strategies (i.e., self-blame, substance use, behavioral disengagement, and denial) are categorized in the total passive coping strategies group. As such, the results indicated that, on average, the coping strategies that fall into the total active coping category were
more often endorsed than the coping strategies under the total passive coping strategies category.

Coping strategies were also examined for each scenario individually. Table 3 illustrates the percentage of participants who highly endorsed each coping strategy (i.e., rated 3 or 4). The first hypothetical scenario depicted cyber bullying through creation of and harassment through a fake email account. In this scenario, the use of self-distraction to cope with the stressor was reported to be the most frequently utilized (80%). In contrast, coping through denial was reported as the least frequently used strategy (26%).

The second scenario illustrated cyber bullying through anonymous text messages. The use of emotional support strategy to cope with the situation was most frequently endorsed (94%), while behavioral disengagement was reported as least frequently endorsed (10%). In the third scenario, cyber bullying was depicted through social media harassment, specifically Facebook. To cope with this scenario, participants reported most frequently endorsing self-distraction as a method to cope (79%). Meanwhile, endorsement of denial as a coping strategy was least frequently endorsed (27%). The fourth scenario describes cyber bullying through text messages and online instant messaging. Results illustrated that participants most frequently endorsed the use of active coping (89%) and least frequently reported use of behavioral disengagement (14%) to cope with this scenario.

In the fifth scenario, cyber bullying was depicted through text messages, email messages, and instant messages. The results indicated that participants most frequently
endorsed the use of self-distraction (73%) and least frequently endorsed the use of denial (28%) to cope with this scenario. Lastly in the sixth scenario, cyber bullying occurred through video-sharing. In this scenario, participants most often reported using self-distraction (69%) and least often reported using denial (31%) to cope with the situation.

The average rating for each coping strategy was computed for each of the six scenarios. Table 4 shows that of the eight coping strategies, the use of instrumental support strategy was rated, on average, as the most frequently used coping strategy across the six scenarios. In contrast, the strategy of denial, which is a passive strategy, had the lowest rated use. As such, the use of instrumental support was reportedly most frequently utilized and the strategy of denial was reportedly least frequently utilized.

The eight coping strategies were categorized into two types – passive coping or active coping. The average ratings for these eight coping strategies across the six hypothetical scenarios were used to compute two composite scores: (a) total passive coping and (b) total active coping. Passive coping included ratings for denial, substance use, behavioral disengagement, and self-blame (alpha = 0.78). In contrast, active coping strategies include self-distraction, active coping, use of emotional support, and use of instrumental support (alpha = 0.82). On average, the use of active coping strategies ($M = 3.04; SD = 0.53$) was rated significantly higher than passive coping strategies ($M = 2.13; SD = 0.65$), $t(38) = 8.74, p < .001$. 
Table 3

Percentages of Participants Highly Endorsing Specific Coping Strategies

<table>
<thead>
<tr>
<th>Coping Strategies</th>
<th>Fake Email Account</th>
<th>Anonymous Text Messages</th>
<th>Social Media (Facebook)</th>
<th>Text &amp; Instant Messages</th>
<th>Text, Email, &amp; Instant Messages</th>
<th>Video Recording</th>
</tr>
</thead>
<tbody>
<tr>
<td>Denial</td>
<td>26%</td>
<td>25%</td>
<td>27%</td>
<td>31%</td>
<td>28%</td>
<td>31%</td>
</tr>
<tr>
<td>Substance Use</td>
<td>42%</td>
<td>33%</td>
<td>52%</td>
<td>16%</td>
<td>50%</td>
<td>52%</td>
</tr>
<tr>
<td>Behavioral Disengagement</td>
<td>42%</td>
<td>10%</td>
<td>34%</td>
<td>14%</td>
<td>38%</td>
<td>55%</td>
</tr>
<tr>
<td>Self-Blame</td>
<td>49%</td>
<td>39%</td>
<td>61%</td>
<td>27%</td>
<td>57%</td>
<td>73%</td>
</tr>
<tr>
<td>Active Coping</td>
<td>68%</td>
<td>81%</td>
<td>66%</td>
<td>89%</td>
<td>57%</td>
<td>47%</td>
</tr>
<tr>
<td>Use of Emotional Support</td>
<td>72%</td>
<td>94%</td>
<td>77%</td>
<td>78%</td>
<td>60%</td>
<td>59%</td>
</tr>
<tr>
<td>Use of Instrumental Support</td>
<td>76%</td>
<td>90%</td>
<td>75%</td>
<td>77%</td>
<td>67%</td>
<td>56%</td>
</tr>
<tr>
<td>Self-Distraction</td>
<td>80%</td>
<td>87%</td>
<td>79%</td>
<td>79%</td>
<td>73%</td>
<td>69%</td>
</tr>
</tbody>
</table>

Note. Highly endorsed refers to the selection of 3 or 4 on the rating scale.
Table 4

*Descriptive Statistics for Coping Ratings and Depressive Responses*

<table>
<thead>
<tr>
<th>Coping Strategy Rating</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Denial</td>
<td>1.92</td>
<td>0.83</td>
</tr>
<tr>
<td>Substance Use</td>
<td>2.23</td>
<td>0.90</td>
</tr>
<tr>
<td>Behavioral Disengagement</td>
<td>1.94</td>
<td>0.65</td>
</tr>
<tr>
<td>Self-Blame</td>
<td>2.45</td>
<td>0.86</td>
</tr>
<tr>
<td>Self-Distraction</td>
<td>3.12</td>
<td>0.63</td>
</tr>
<tr>
<td>Active Coping</td>
<td>2.98</td>
<td>0.69</td>
</tr>
<tr>
<td>Use of Emotional Support</td>
<td>3.00</td>
<td>0.79</td>
</tr>
<tr>
<td>Use of Instrumental Support</td>
<td>3.08</td>
<td>0.75</td>
</tr>
<tr>
<td>Total Passive Coping</td>
<td>2.13</td>
<td>0.65</td>
</tr>
<tr>
<td>Total Active Coping</td>
<td>3.04</td>
<td>0.53</td>
</tr>
<tr>
<td>Depression</td>
<td>12.45</td>
<td>3.05</td>
</tr>
</tbody>
</table>

**Relationship Between Coping Strategies and Depressive Feelings**

Correlations were used to examine the relationship between the measure of depressive feelings and coping strategy scores. For this analysis, the ratings for feelings of depression were summed for each of the six scenarios, and a mean score for endorsement of passive and active strategies across the scenarios was computed. Correlations were then computed between strategy scores and number of reported
depressive feelings. Table 5 reports the correlation coefficients. Results indicate a significant positive moderate correlation between passive coping strategies and the depressive feelings score, $r(37) = 0.52, p < 0.01$. Participants who endorsed passive coping strategies of substance use, behavioral disengagement, and self-blame reported significantly more depressive feelings in the hypothetical scenarios, $r(37) = 0.52, p < 0.01$. On the other hand, when relating the total active coping strategy subcategory, the relationship with depressive feelings failed to reach significance.

However, the specific endorsement of the active coping strategy was found to be significantly and negatively correlated with depressive feelings, $r(37) = -0.42, p < 0.05$. Participants who endorsed substance use, behavioral disengagement, and self-blame coping strategies reported more depressive feelings. Furthermore, the total passive coping strategy subcategory indicated a positive correlation with depressive feelings as well. That is, participants who endorsed the total passive coping strategy were more likely to report feelings of depression. The specific active coping strategy was negatively, but significantly correlated with depressive feelings such that those participants who used more active strategies scored lower on depressive responses. However, the correlations with individual active strategies failed to reach significance.
Table 5

*Correlations Between Coping Strategy Ratings and Depressive Feelings*

<table>
<thead>
<tr>
<th>Coping Strategy</th>
<th>Depressive Feelings $r$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Denial</td>
<td>0.11</td>
</tr>
<tr>
<td>Substance Use</td>
<td>0.52*</td>
</tr>
<tr>
<td>Behavioral Disengagement</td>
<td>0.53*</td>
</tr>
<tr>
<td>Self-Blame</td>
<td>0.52*</td>
</tr>
<tr>
<td>Total Passive Coping</td>
<td>0.52*</td>
</tr>
<tr>
<td>Self-Distraction</td>
<td>0.12</td>
</tr>
<tr>
<td>Active Coping</td>
<td>-0.42**</td>
</tr>
<tr>
<td>Use of Emotional Support</td>
<td>0.26</td>
</tr>
<tr>
<td>Use of Instrumental Support</td>
<td>0.30</td>
</tr>
<tr>
<td>Total Active Coping</td>
<td>0.10</td>
</tr>
</tbody>
</table>

*Note.* *p* < 0.05, **p** < 0.01
Chapter 5
DISCUSSION

This study examined the coping strategies endorsed by individuals who self-identify as LGBT. The type of coping strategies most often endorsed by LGBT individuals were active coping strategies. On average, the coping strategy most often perceived to be utilized was self-distraction, while the least frequently endorsed coping strategy was denial. Report of utilization of passive coping strategies was positively associated with report of depressive feelings in response to hypothetical cyberbullying scenarios. The findings from this study were consistent with prior research, which suggested that passive coping strategies are less effective in mediating negative internalizing effects stemming from cyber bullying victimization (Fauman, 2008; Thomas, 2006; Ybarra, 2004). Furthermore, the findings from this study also supports the hypotheses that participants who endorse passive coping strategies would report higher depressive feelings, and that participants who report utilizing active coping strategies reported lower depressive feelings.

**Most and Least Frequently Endorsed Coping Strategies**

Across the six scenarios, the active coping strategy of self-distraction was strongly endorsed by the participants who self-identify as LGBT to cope with cyber
bullying victimization. This method of coping includes engaging oneself in other activities in order to disregard the stressor. For example, a victim may plan and attend more social events and outings in order to not think about the stressful situation. In contrast, the strategy of denial, which falls under the total passive coping category, was least frequently endorsed by LGBT individuals to cope with cyber bullying victimization. Coping through denial involves an individual refusing to believe what has happened, and this strategy was not highly endorsed by the participants in this study,

Instrumental support, emotional support, and self-distraction were some of the more highly endorsed coping strategies. These strategies are categorized under the total active coping category. This is consistent with existing research on coping with the general population, which found that individuals were cognizant of the most effective ways to cope with cyber bullying victimization (Machackova, Cerna, Sevcikova, Dedkova, & Daneback, 2013; Machmutow et al., 2012; Kokkinos et al., 2013).

The findings in the present study are also consistent with those found by Cerna (2014). Cerna (2014) found that, when assessing hypothetical scenarios, participants often sought social support and self-distraction to cope with the stressful situation. Similarly, the present study also found that use of instrumental support, use of emotional support, and self-distraction were some of the more highly endorsed coping strategies. However, although research has illustrated that active coping strategies were more effective in mediating depression, Machackova et al. (2013) found that, when faced with
actual cyber bullying victimization, victims tended to respond to the stressful situation by utilizing avoidant, or passive, coping strategies.

Due to the use of hypothetical scenarios and participants not being required to have actual cyber bullying experiences, the coping strategies selected are merely endorsed. When actually faced with the situation, victims may respond differently and, therefore, utilize different coping strategies than what they merely endorsed in hypothetical situations.

**Relationship Between Coping Strategies and Depressive Feelings**

The results from this study indicate a moderate and significant relationship between report of substance use, behavioral disengagement, self-blame and total passive coping and depressive feelings in cyberbullying scenarios. Participants who indicated they would engage in substance use, such as drugs and alcohol, were positively related with depressive feelings. This parallels with the findings of previous research indicating that use of drugs and alcohol are risky behaviors that preceded feelings of depression, anxiety, and paranoia (Hoffman & Su, 1998).

Participants who indicated they would utilize behavioral disengagement (i.e., giving up the attempt to cope) were also more likely to report more depressive feelings. When an individual gives up the attempt to deal with the situation, it often reflects feelings of hopelessness, which is often associated with depression. Similarly,
participants who reported that they would engage in self-blame (i.e., criticizing one’s self or blaming self for situation) were also found to be positively associated with the depressive measures. Individuals who often self-blame and are frequently overly critical of themselves are insecure and lack self-confidence, which are also factors related to depression (Graham & Juvonen, 1998).

These three coping strategies that were positively associated with report of feelings of depression were categorized under the total passive coping strategies. Correspondingly, the total passive coping strategy category also indicated a moderately significant and positive correlation with the depressive feelings measure. That is, utilization of any of the coping methods under the comprehensive passive coping strategies category suggested more depressive feelings. This parallels previous findings that use of passive coping strategies were ineffective in reducing negative internalizing effects (Vollink et al., 2013; Hinduja & Patchin, 2010).

The results of the specific active coping strategy indicated negatively moderate significance to depressive feelings. The results suggested that participants who endorsed the active coping strategy (i.e., consciously taking action to improve the situation) were less likely to possess depressive feelings. Again, this finding aligns with findings from previous research, which suggested active coping strategies were found to be more effective in reducing negative internalizing effects than passive coping strategies (Vollink et al., 2013; Hinduja & Patchin, 2010; Wilton et al., 2000).
However, the remaining three strategies that fell into the total active coping strategy category did not indicate a relationship with the depressive feelings measure. Specifically, the active coping strategies of self-distraction (i.e., turning to other activities to take my mind off of things), use of instrumental support (i.e., getting help and advice from other people), and use of emotional support (i.e., getting comfort and understanding from someone) were not found to be associated with feelings of depression. When assessing the hypothetical scenarios, participants may not have recognized self-distraction, use of instrumental support, or use of emotional support to be an effective method of coping with the cyber bullying situation. This could be because LGBT youth may not feel safe confiding in peers or reaching out for social support. Due to the LGBT individuals being part of a minority group, they may find seeking social support from accepting peers and social circles to be more difficult. For example, an individual who self-identifies as LGBT may not have the support from family and friends after coming out and, therefore, have difficulty in seeking social encouragement.

**Implications**

This study provides relevant implications that are parallel to the current knowledge base in research. The findings from this study provide insight to the types of strategies most and least effective in coping with cyber bullying for LGBT victims. With the advancements in technology and our increasing dependence on cyber communication,
minority groups, such as the LGBT community, are at higher risk for cyber bullying victimization. The findings and information from this study are beneficial to LGBT individuals, families, peers, and school staff.

While many public institutions, such as post-secondary schools, possess policies and rules addressing the issue of bullying, the occurrence of cyber bullying often occurs outside of school. This may leave the victims feeling like they have to address and resolve the issue on their own. As such, the information and findings from this study helps to provide LGBT victims awareness as to how they may most effectively handle cyber bullying victimization. Furthermore, the information from this study may provide general awareness and understanding on effective coping methods as well as its relationship to depressive feelings. Educators and post-secondary school authorities may utilize this information to educate students on effective coping methods. Furthermore, families and peers may also use this knowledge to promote awareness of effective coping methods for cyber bullying victimization.

**Limitations**

Although participants reportedly endorsed active coping strategies more so than passive coping strategies, previous research found that victims were more likely to actually utilize passive coping strategies in the event of cyber bullying victimization (Lodge & Frydenberg, 2007; Vollink et al., 2013; Wilton et al., 2000). Because this study
utilized hypothetical scenarios and participants were not required to have had previous cyber bullying experience, the coping strategies endorsed are not reflective of real-life experiences. Unfortunately, the participants’ personal cyber bullying victimization experiences were not assessed. As such, there is no way to tell whether or not their personal experiences with cyber bullying influenced their responses. The age range provided is also ambiguous, as participants who are 30 years old could either choose the 25 to 30 years old age range, or the 30 to 35 years old age range. Future research should clarify this matter when seeking age specification and identify whether these endorsements differ by participants who have actually experienced cyber bullying victimization and participants who have not actually experienced cyber bullying victimization.

Furthermore, since this study employed hypothetical cyber bullying scenarios and participants were not required to have previous cyber bullying experiences, the endorsement of coping strategies may not reflect real-life situations. When actually faced with the situation in their personal lives, victims may respond differently and, therefore, actually utilize different coping strategies than what they merely endorsed in response to hypothetical situations.

This study was also limited in terms of its demographics and participant selection. The sample was small and not necessarily representative of the LGBT community as a whole in terms of gender, age, socioeconomic status, or ethnicity. Therefore, these findings are limited in their generalizability. Due to the sampling methods employed for
this study, only LGBT youths and individuals within the greater Sacramento area were recruited. These methods for participant recruitment further limited the representativeness of the sample. In addition, individuals who identify as LGBT and are a part of the Pride Center may already have a more active predisposition in terms of LGBT rights. Future research should expand recruitment to a larger demographic area in order to increase generalizability.

The utilization of snowball sampling also posed a limitation to the present study. Although this technique allowed for randomness in recruiting participants, the researcher lacked control of the age group. This study initially intended to study LGBT youths and young adults between the ages of 18 and 25. However, due to snowball sampling and the large number of participants above the age of 25, the sample criteria for this study was revised in order to accommodate these participants and for the purposes of a larger sample size. Future research should find a way to collect a larger, more representative sample of early adults.

Another limitation of this study is that it did not take into consideration whether the participants have come out in regards to their sexual orientation to family and peers. This factor may severely influence the participants’ assessment of the hypothetical cyber bullying scenarios and may also affect their endorsement of the coping methods. Future research should seek to identify whether each participant has come out to their family and friends. This information may be considered for the study’s design and results analysis.
The present study was designed with a correlational method of analysis. Due to the design method of this study, no cause can be inferred. Future research may seek to conduct a longitudinal study in order to examine the possible causal relationship between cyber bullying victimization and depressive feelings or depression.

Despite these limitations, the findings from this study show consistency with previous research. Findings from the present study supported previous research of LGBT cyber bullying victims, which suggested that utilization of active coping strategies were more effective in dealing with stressful situations. Furthermore, the present study also found the utilization of passive coping strategies to be positively associated with depressive feelings. These findings also supported previous research, which found that passive coping strategies were more likely to lead to feelings of hopelessness and anxiety.
Appendix A

HYPOTHETICAL SCENARIOS
**Scenario 1:**

Jimmy’s high school peers are making jokes about his sexuality in school. Later, Jimmy finds out that these male students created a fake email account of Jimmy and are sending love messages to other male students like they came from Jimmy.

**Scenario 2:**

Ever since Ana and her girlfriend have openly acknowledged their relationship, Ana has been receiving anonymous text messages shaming her orientation. Recently, the texts have escalated from words to fake, derogatory photoshopped photos of her. Although there are no signs that these photos have spread, Ana is constantly worried that they will be distributed.

**Scenario 3:**

After Benjamin came out of the closet and is openly embracing his sexuality, his peers on Facebook would constantly write “GAY” or “FAG” on all of his picture and posts. Although he deactivated his account, he later found out that some people have made a Facebook page and added all of his high school peers. The page was dedicated to posting pictures of him that people at school have snapped without him knowing and making fun of his hair, his style of clothing, etc.

**Scenario 4:**

Although Jenny has acknowledged and fully embraced her sexuality, Sarah is convinced that Jenny is lying about her sexuality in order to get attention and seduce Sarah’s boyfriend. Sarah has been sending Jenny threatening text messages and instant messages the past several weeks, warning that if Jenny doesn’t “stop lying,” Sarah will “beat her ass.”

**Scenario 5:**

After embracing his sexuality, Henry is not receiving the support he had hoped he would from his family and friends. Instead, Henry’s best friend begins sending him text messages, emails, and instant messages shaming him for his “choice” of orientation. His best friend tells him that he no longer wants to be associated with him and should kill himself to help rid of the world of “faggots.” He also begins ousting Henry from their social circle.

**Scenario 6:**

Fearful of being judged and ridiculed, Christopher keeps his sexual orientation a secret from his friends and family. After a party late one night, Christopher brings his boyfriend home and, believing that his roommate was asleep, engages in sexual activities with his boyfriend. His roommate, however, is awake and secretly video records the occurrence. Christopher finds out that the video was posted online and many people, including his friends and family, have seen it and have laughed, teased, and left offensive messages.
Appendix B

CENTER FOR EPIDEMIOLOGICAL STUDIES

DEPRESSION (CES-D) MEASURE
CES-D Measure

(Scale of 1 to 4, with 1 being the least often and 4 being the most often)

1. I would be bothered by things that usually don’t bother me.
2. I would not feel like eating; my appetite would be poor.
3. I would feel that I could not shake off the blues even with help from my family or friends.
4. I would feel that I was just as good as other people.
5. I would have trouble keeping my mind on what I was doing.
6. I would feel depressed.
7. I would feel that everything I did was an effort.
8. I would hopeful about the future.
9. I would think my life had been a failure.
10. I would feel fearful.
11. My sleep would be restless.
12. I would feel happy.
13. I would talk less than usual.
15. People would be unfriendly.
16. I would enjoy life.
17. I would have crying spells
18. I would feel sad.
19. I would feel that people disliked me.

20. I could not get “going” (or motivated).
Appendix C

BRIEF COPING ORIENTATION TO PROBLEMS

EXPERIENCED (COPE) MEASURE
Brief Coping Orientation to Problems Experienced (COPE) Measure

(Select “YES” or “NO” to indicate whether strategy would be used for each hypothetical cyber bullying scenario)

1. I've been turning to work or other activities to take my mind off things.
2. I've been doing something to think about it less, such as going to movies.
3. I've been concentrating my efforts on doing something about the situation I'm in.
4. I've been taking action to try to make the situation better.
5. I've been saying to myself "this isn't real".
6. I've been refusing to believe that it has happened.
7. I've been using alcohol or other drugs to make myself feel better.
8. I've been using alcohol or other drugs to help me get through it.
9. I've been getting emotional support from others.
10. I've been getting comfort and understanding from someone.
11. I’ve been getting help and advice from other people.
12. I’ve been trying to get advice or help from other people about what to do.
13. I've been giving up trying to deal with it.
14. I've been giving up the attempt to cope.
15. I've been criticizing myself.
16. I’ve been blaming myself for things that happened.
REFERENCES


GLSEN, CiPHR, & CCRC (2013). Out online: The experiences of lesbian, gay, bisexual and transgender youth on the Internet. New York: GLSEN.


