HHS Public Access

Author manuscript

J Community Psychol. Author manuscript; available in PMC 2018 March 01.

Published in final edited form as:

J Community Psychol. 2013 November ; 41(8): 920–930. doi:10.1002/jcop.21573.

THE ROLE OF NEIGHBORHOOD COLLECTIVE EFFICACY AND FEAR OF CRIME IN SOCIALIZATION OF COPING WITH VIOLENCE IN LOW-INCOME COMMUNITIES

Wendy Kilewer

Virginia Commonwealth University

Abstract

The influences of public housing, caregiver fear of crime, and collective efficacy on messages caregivers relay to their offspring regarding coping with community and peer violence were examined using a 3-wave prospective design. Caregivers (N = 358; 92% African American/Black) living in moderate to high violence areas of a midsized southern city completed face-to-face interviews. Coping suggestions were coded at Wave 3 from audiotaped responses to a vignette measure depicting five neighborhood-based and five school-based situations involving violence or aggression. Path models indicated that residing in public or Section 8 housing was associated with greater fear of crime and lower collective efficacy. Fear of crime was associated with more suggestions to use active coping strategies for neighborhood-based situations involving violence; collective efficacy was associated with messages to use less aggression for school-based situations. These findings extend our understanding of caregiver socialization of coping processes in poor and underresourced neighborhoods.

Parents play a key role in socializing their children (Compas, Worsham, & Ey, 1992; Kliewer, Fearnow, & Miller, 2006; Kliewer, Sandler, & Wolchik, 1994). Further, coping has consequences for children's adjustment (Compas, Connor-Smith, Saltzman, Thomsen, & Wadsworth, 2001; Rosario, Salzinger, Feldman, & Ng-Mak, 2008), making it an important facet of development to study. Despite their importance in shaping coping in their children, we know relatively little about the coping messages parents relay to their children, particularly in poor and underresourced neighborhoods where coping challenges may be plentiful. Further, we know little about the personalities, resources, and experiences of parents that influence the intended and unintended messages they convey to their children regarding coping. Knowing how parents' own resources and experiences influence the coping messages they relay to their children is important because this knowledge can improve family-focused prevention and intervention efforts designed to enhance children's coping and adjustment.

Parents living in poor and underresourced neighborhoods are faced with significant challenges (Kliewer, Goodman, & Reid-Quinones, 2013). These include witnessing and being victimized by community violence; exposure to elevated noise levels, crowded

Please address correspondence to: Wendy Kilewer, Department of Psychology, Virginia Commonwealth University, PO Box 842018, Richmond, VA 23284-2018. wkliewer@vcu.edu.

housing, and poor housing quality; physical and mental health problems of family members; and low levels of education resulting in few job opportunities (Allison et al., 1999; Attar, Guerra, & Tolan, 1994; Evans, 2004; Furstenberg, Cook, Eccles, Elder, & Sameroff, 1999; Tolan, Guerra, & Montaini-Klovdahl, 1997). However, despite these challenges, many parents are able to provide a safe and nurturing environment for their children and to socialize their children in ways that promote engagement with the world. The present study extends prior work on socialization of coping with violence and aggression (e.g., Kliewer et al., 2006) by examining contextual factors affecting the messages parents convey to their offspring about coping with violence and aggression in school and in the community.

Many of the most disadvantaged families residing in urban environments live in public or Section 8 housing, and most families residing in public housing are headed by women (U.S. Department of Housing and Urban Development, 2000). Public housing often is characterized by concentrations of crime, including drug use and gang violence, and heightened fears related to safety (Ireland, Thornberry, & Loeber, 2003). Residing in public housing, therefore, may affect parents' perceptions of the environmental resources available to them as well as their own assessment of environmental risks. In the present study I chose to focus on collective efficacy and fear of crime as two factors that could potentially affect coping messages parents relayed to their children.

Recent work has highlighted the role of neighborhood collective efficacy in messages parents relay to their children about the acceptability of violence as a coping strategy (Johnson, Finigan, Bradshaw, Haynie, & Cheng, 2011). In their cross-sectional study conducted with 143 families living in a high-violence community, Johnson et al. (2011) found that a higher level of neighborhood collective efficacy was associated with less parental support for violence as an acceptable problem-solving strategy. In some of the most compelling evidence about the role of collective efficacy, Sampson, Raudenbush, and Earls (1997) demonstrated that collective efficacy affected perceptions of neighborhood violence, household victimization, and official homicide rates; these finding were replicated and extended by Maxwell, Garner, and Skogan (2011). However, aside from the Johnson et al. (2011) investigation, researchers have not examined how neighborhood collective efficacy is associated with messages parents relay to their children about use of violence and aggression.

There is little work on how fear of crime affects the coping messages parents relay to their children. However, researchers have investigated how parents' concerns about safety influence other aspects of parenting behavior. In a large study of Italian families, Vieno, Nation, Perkins, Pastore, and Santinello (2010) found that parents' concerns about safety were positively associated with solicitation by and support from parents, which in turn was related to lower levels of adolescent antisocial behavior. Other research has shown that parents with safety concerns restrict the physical activity of their children (see Carver, Timperio, & Crawford, 2008 for a review), and engage in heightened levels of monitoring to keep their children out of harm's way (Letiecq & Koblinsky, 2004).

Neighborhood Collective Efficacy, Fear of Crime, and Parental Coping Messages

Neighborhood collective efficacy and fear of crime are beliefs and qualities of caregivers that could reasonably affect the coping messages they relay to their children. Higher neighborhood collective efficacy may be associated with more proactive and adaptive coping suggestions and fewer aggressive coping suggestions because collective efficacy may represent a coping resource for parents. For example, Kliewer et al. (1996, 2006) found that that a higher level of maternal education was associated with more suggestions to seek support in the context of violence exposure. Conversely, Abaied and Rudolph (2010) demonstrated that parents with an insecure attachment suggested fewer engagement and more disengagement coping strategies to their children, both cross-sectionally and over time. Thus, parents with more perceived resources might do a more effective job of relaying coping suggestions that will keep their offspring out of harm's way (Garbarino, Kostelny, & Dubrow, 1991; Tolan et al., 1997).

Fear of crime may be associated with similar coping messages (i.e., more proactive coping suggestions and fewer aggressive coping suggestions) but for different reasons. Parents who are concerned about safety may suggest coping strategies that are unlikely to exacerbate the situation and likely to keep the child safe.

The Present Study

The present study extends prior work in this area by examining prospective associations of residence in public and Section 8 housing, neighborhood collective efficacy, and fear of crime with caregiver suggestions to manage violence in school and neighborhood contexts. The study is situated among families living in neighborhoods characterized by moderate to high levels of violence and low income, with just over 41% of the sample residing in official public housing projects or Section 8 housing. Drawing on three waves of data from a longitudinal study of exposure to community violence, coping, and adjustment, I tested a path model linking residence in a public housing or Section 8 community, neighborhood collective efficacy and fear of crime, and coping suggestions to manage situations involving aggression and violence. Data on collective efficacy and fear of crime were assessed one year prior to coping suggestions. I hypothesized that both neighborhood collective efficacy and fear of crime would be related to more suggestions to seek support and to engage in primary and secondary control coping, and with fewer suggestions to use aggression as a means of coping.

METHODS

Participants

Participants included 358 caregivers (92% African American/Black) who were parenting a child either in the fifth (n = 191) or eighth (n = 167) grade, 46% of whom were boys. Most (87%) of the caregivers were the child's biological mother, but grandmothers (6%), adoptive mothers (2%), stepmothers (1%), and other female relatives (4%) were represented in the sample. Most (41%) caregivers had never married; a third (32%) were married or

cohabitating, and 27% were separated, divorced, or widowed. As a whole, the sample was not well educated, with 23% of the caregivers having less than a high school education, 31% completing a high school degree or the equivalent, 24% with some college, and 22% with an associate's, vocational, bachelor's, or master's degree.

Measures

Public housing—Residence in an official public housing community or in a Section 8 property was recorded at Wave 1.

Neighborhood collective efficacy—At Wave 2 caregivers completed a measure of collective efficacy using a 10-item instrument developed by Sampson and Raudenbush (1997). *Collective efficacy* refers to caregivers' views of their neighborhood as cohesive and involving shared parenting. Caregivers were asked questions about the degree to which they could rely on neighbors to intervene in five situations (e.g., child skips school) using a scale ranging from 1 (*very likely*) to 5 (*very unlikely)*, and about the degree of social cohesion in five items (e.g., people around here are willing to help their neighbors) using a scale ranging from 1 (*strongly agree)* to 5 (*strongly disagree)*. Items were rescored and summed to create a total score where higher values indicate greater levels of collective efficacy. These measures have demonstrated adequate reliability and validity (Sampson & Raudenbush, 1997).

Fear of crime—At Wave 2 caregivers reported on their fear of crime using 4 items measuring fear of victimization from the *Perception of Neighborhood Safety* scale (Gorman-Smith, Tolan, & Henry, 2000). Items were rated on a scale ranging from 1 (*not fearful)* to 5 (*very fearful)*. Items were summed to create a total score with higher values indicating greater fear of crime. Validity was established by Gorman-Smith et al. and by the Multisite Violence Prevention Project (Miller-Johnson, Sullivan, Simon, & Multisite Violence Prevention Project, 2004).

Coping suggestions—A vignette measure designed to assess parental coping suggestions in situations involving violence or aggression was developed for the study and completed during Wave 3. Vignettes were created based on events mentioned by adolescent participants in the larger study. Importantly, these were not hypothetical events, but examples of real situations described by adolescents in the first two waves of the study. Five vignettes reflected violence in the youth's neighborhood and five vignettes reflected situations at school. For each event, the maternal caregiver was asked to imagine that her child was experiencing that situation. Following each vignette, the caregiver was asked four questions: (a) What do you think (*child*) would be thinking and feeling? (b) What do you think (*child*) would do in this situation? (c) What would you suggest to (*child*) to handle this situation? (d) Are there other things you would do as a parent in this situation? Caregivers' responses were audio taped by the interviewer, and transcribed and checked by an undergraduate research assistant. A coping suggestions coding system in response to questions 3 and 4 was developed based on prior work by the author (Kliewer et al., 2006).

Two teams of two undergraduate research assistants were trained to an inter-rater reliability (kappa) of .70 or above. Each member of the team coded the transcripts separately, and then

met together to determine the final code. A total of 49 coping suggestions emerged. The average kappa of the 13 most frequently used codes was .79 and .85 for the two coding teams. Responses were recorded in SPSS based on a code's absence or presence in each vignette (0 = absent, 1 = present).

Coping suggestions were collapsed into theoretically meaningful groups using a modified version of the framework developed by Compas and colleagues (Connor-Smith et al., 2000). These mutually exclusive groups of suggestions included: *primary control suggestions* (including problem solving, emotion regulation, and emotional expression suggestions, and suggestions that focused on harm reduction); *secondary control suggestions* (including positive thinking, cognitive restructuring, and acceptance); *support; disengagement* (including distraction and withdrawal); and *aggression*. In the framework developed by Compas and colleagues there is a major distinction between strategies that reflect active engagement with the stressor and those that reflect disengagement. Of the engagement strategies, primary control reflects more active attempts to directly deal with the situation, while secondary control typically involves changing one's perception of the situation without necessarily changing the stressor.

For the purposes of the present study, primary control coping suggestions included harm reduction strategies. This decision was made under the guidance of prior work (Kliewer et al., 2006) as well as that of others (Tolan et al., 1997), which argued for the inclusion of harm avoidance strategies as primary control coping for adolescents in high-crime environments, like those in the present study, as these suggestions have the intent of having the adolescent actively deal with the situation. In addition, support suggestions and aggressive suggestions were retained as a separate category given their centrality in our sample. Because of the low frequency of secondary control engagement and disengagement coping suggestions, these were not included in analyses for the present study. Thus, six coping suggestions were included in the analyses: (a) primary control suggestions for school-based and (b) neighborhood-based events, (c) support suggestions for school-based and (d) neighborhood-based events, and (e) aggressive suggestions for school-based and (f) neighborhood-based events.

Procedures

The institutional review board at the authors' university approved the project. Participants were recruited from neighborhoods in the greater (Richmond, VA) area that had high levels of violence and/or poverty based on police statistics and census data. Participants were recruited through community agencies and events, and by canvassing qualifying neighborhoods via flyers posted door-to-door. English speaking female caregivers with a fifth or eighth grader living in the home were eligible to participate. Interviews were conducted in participants' homes unless a family requested to be interviewed elsewhere. Sixty-three percent of eligible participants agreed to be in the study, which is consistent with studies using similar designs and populations.

Prior to initiating the interview, staff thoroughly reviewed the parental consent and student assent forms with the family and answered any questions. The parent received a copy of the signed consent form. After the maternal caregiver provided written consent, she and child

separated for the interviews. Youth assent was provided by the child before initiating this interview. A Certificate of Confidentiality was obtained from the National Institutes of Health (NIH) to protect families' responses. Information about Family Access to Medical Insurance (FAMIS) (discounted health insurance for children) and other community resources were distributed to caregivers at the time of the interview. Data for this study represent the first three waves of data collection. Face-to-face interviews using visual aids were used to collect the data, and all questions were read aloud. Tests for interviewer race and gender effects revealed no systematic biases, *p*s > .10. Interviews with the caregiver and child lasted approximately 2.5 hours and participants received $50 in gift cards per family at each wave.

RESULTS

Attrition Analyses

Participants who completed all three waves of interviews ($N = 271$ families) were compared with the families who did not complete all three waves ($N = 87$) using *t* tests and chi squares on demographic information, caregiver collective efficacy, fear of crime, and residence in public housing. There were no demographic or other differences across the two groups. Overall this suggests that systematic biases due to attrition were not present in the sample.

Descriptive Information on and Correlations Between Study Variables

Table 1 presents descriptive information on and correlations among the study variables. As seen in the table, residence in public or Section 8 housing was associated with lower levels of collective efficacy, greater fear of crime, fewer suggestions to seek support to cope with neighborhood situations involving aggression, and more suggestions to use aggression to cope with neighborhood situations. Neighborhood collective efficacy was associated with fewer suggestions to use aggressive as a strategy to cope with school-based victimization. Fear of crime was associated with more suggestions to use primary control coping strategies to manage neighborhood situations involving violence and aggression. Demographic variables (not shown in the table; adolescent sex and age, caregiver education, household income) were not significantly associated with coping suggestions, *p*s < .11.

Overview of Path Model

Version 6.11 of Mplus (Muthen & Muthen, 2010) was used to run the path model. Several goodness-of-fit indices were used to evaluate the path model, including the comparative fit index (CFI; values of .90 or greater indicate good fit), the root mean square error of approximation (RMSEA; values of .08 or less indicate good fit), and the χ^2 test (Brown & Cudeck, 1993).

As seen in Figure 1, the model was a good fit to the data, chi square (7) = 22.23, $p < .01$; CFI = .901; root mean square error of approximation = .082 (90% confidence interval .045, .122). As anticipated, participants living in public or Section 8 housing reported lower levels of neighborhood collective efficacy and more fear of crime. Neighborhood collective efficacy, in turn, was associated with fewer suggestions to use aggression as a coping

strategy in school-based situations, and fear of crime was associated with more suggestions to use primary control coping with neighborhood-based situations.

DISCUSSION

The purpose of the present study was to examine the influences of residence in public or Section 8 housing, caregiver collective efficacy, and caregiver fear of crime on the messages caregivers relay to their children to manage situations involving violence and aggression. Using a prospective design, our data suggest that living in public or Section 8 housing is associated with lower neighborhood collective efficacy and greater fear of crime. Neighborhood collective efficacy, in turn, is associated prospectively with fewer suggestions to use aggression in situations occurring at school, while fear of crime is associated with more suggestions to use primary control engagement coping strategies in managing events occurring in the neighborhood. These data add to the sparse literature on caregiver influences on socialization of coping in underresourced neighborhoods. In the discussion that follows we discuss potential reasons for these observed associations and suggest directions for future research in this area.

First, these data reveal that collective efficacy and fear of crime are associated with characteristics of the neighborhood of residence. Caregivers who resided in public or Section 8 housing reported more fear of crime and less collective efficacy, findings which mirror past research (Ireland et al., 2003). However, regardless of where caregivers resided, their beliefs about the extent to which they could rely on their neighbors (collective efficacy) and their perceptions of safety (fear of crime) affected at least some of the coping suggestions they relayed to their children.

As expected, neighborhood collective efficacy was associated with fewer messages to youth to use aggression in response to situations at school. This finding is consistent with Johnson et al.'s (2011) cross-sectional study, which found that parents' collective efficacy predicted their messages dissuading youth from engaging in violence. Caregivers who feel supported by and engaged with neighbors also may be more prosocial and less likely to support aggressive behavior in general than caregivers who are more isolated from others in their community. It is interesting, however, that collective efficacy was unrelated to aggressive suggestions for neighborhood-based violence. There are several potential explanations for this.

First, the violent events in the neighborhood were more serious than those situated at school. Thus, caregivers might have taken safety into account when thinking about their coping recommendations for their children. Second, caregivers made few aggressive suggestions for neighborhood events, and this low base rate may have contributed to this lack of association. Contrary to expectation, neighborhood collective efficacy was unrelated to primary control and support coping suggestions–either for school or neighborhood-based events. Perhaps caregivers did not believe that support seeking or direct efforts to solve the problem would be efficacious.

Further, there is some evidence that caregivers in public housing communities transmit "rules" about the conditions under which youth are to share any private information with neighbors (Venkatesh, 2008). For some this may be a safety issue, as neighbors may be engaging in illegal activity. In a qualitative study that focused on African American caregivers' reasons for the suggestions they conveyed to their children to cope with violence, Moore, Kliewer, Douglas, Hinton, and Ray (2005) found that safety was a key factor in caregivers' decisions to suggest particular coping strategies to their offspring, but training for independence also played a big role. This may account for the lack of association between collective efficacy and support-seeking coping suggestions in the neighborhood.

Fear of crime was associated with more suggestions to use primary control coping strategies (e.g., problem solving, emotion regulation, emotional expression, and harm reduction) with neighborhood-based events. There is substantial evidence that fear of crime motivates some parents to restrict their child's activity (Carver et al., 2008; Letiecq & Koblinsky, 2004), which is consistent with the association observed here. Fear of crime, however, was unrelated to suggestions in the school context and was not associated with support or aggressive suggestions in the neighborhood context. The lack of association with suggestions for school-based situations may reflect caregivers' assessment of contextual factors in the socialization process.

Study Strengths, Limitations, and Directions for Future Research

Strengths of the study included a difficult to recruit population who was followed over a 2-year period. Further, an open-ended assessment tool based on adolescents' real experiences of events that could lead to violence or aggression was used to elicit information about socialization messages. This method may have been less susceptible to self-presentation biases than other methods.

Despite these strengths, several study limitations should be noted. First, data were collected from maternal caregivers; data from social or biological fathers were not included in this report. Fathers are important contributors to adolescent development (King, 2006) and knowing how their coping resources and perceptions of the environment influence their socialization messages would be valuable. Work in our lab has found that the content of messages maternal and paternal caregivers relay to their offspring does not differ; however, we don't know if the same factors predict socialization messages for mothers versus fathers.

In summary, data from this sample of largely low-income caregivers demonstrated that housing context affected neighborhood collective efficacy and fear of crime, which in turn affected socialization messages for dealing with violence and aggression. Given that youth are influenced by parental implicit or explicit messages about coping (Farrell et al., 2010; Farrell, Henry, Mays, & Schoeny, 2011), understanding the factors that shape parental messages are important.

References

Abaied J, Rudolph K. Contributions of maternal adult attachment to socialization of coping. Journal of Social and Personal Relationships. 2010; 27:637–657. [PubMed: 21892245]

Allison KW, Burton L, Marshall S, Perez-Febles A, Yarrington J, Kirsh LB. Life experiences among urban adolescents: Examining the role of context. Child Development. 1999; 70:1017–1029. [PubMed: 10446733]

Attar BK, Guerra NG, Tolan PH. Neighborhood disadvantage, stressful life events, and adjustment in urban elementary-school children. Journal of Clinical Child Psychology. 1994; 23:391–400.

Brown, MW., Cudeck, R. Alternative ways of assessing model fit. In: Bollen, KA., Long, JS., editors. Testing structural equation models. Beverly Hills, CA: Sage; 1993. p. 136-162.

Carver A, Timperio A, Crawford D. Playing it safe: the influence of neighbourhood safety on children's physical activity—A review. Health & Place. 2008; 14:217–227. [PubMed: 17662638]

Compas BE, Connor-Smith JK, Saltzman H, Thomsen A, Wadworth ME. Coping with stress during childhood and adolescence: Problems, progress, and potential in theory and research. Psychological Bulletin. 2001; 127:87–127. [PubMed: 11271757]

Compas, BE., Worsham, NL., Ey, S. Conceptual and developmental issues in children's coping with stress. In: LaGreca, AM.Siegel, LJ.Wallander, LJ., Walker, CE., editors. Stress and coping in child health. New York, NY: Guilford; 1992. p. 7-24.

Connor-Smith JK, Compas BE, Wadsworth ME, Thomsen A, Saltzman H. Responses to stress in adolescence: Measurement of coping and involuntary stress responses. Journal of Consulting and Clinical Psychology. 2000; 68:976–992. [PubMed: 11142550]

Evans GW. The environment of childhood poverty. American Psychologist. 2004; 59:77–92. [PubMed: 14992634]

Farrell AD, Henry DB, Mays SA, Schoeny ME. Parents as moderators of the impact of school norms and peer influences on aggression in middle school students. Child Development. 2011; 82:146–161. [PubMed: 21291434]

Farrell AD, Mays S, Bettencourt A, Erwin E, Vulin-Reynolds M, Allison KW. Environmental influences on fighting versus nonviolent behavior in peer situations: A qualitative study with urban African American adolescents. American Journal of Community Psychology. 2010; 46:19–35. [PubMed: 20526663]

Furstenberg, FF., Cook, TD., Eccles, J., Elder, GH., Sameroff, A. Managing to make it. Urban families and adolescent success. Chicago, IL: The University of Chicago Press; 1999.

Garbarino J, Kostelny K, Dubrow N. What children can tell us about living in danger. American Psychologist. 1991; 46:376–383. [PubMed: 2048796]

Gorman-Smith D, Tolan PH, Henry DB. A developmental-ecological model of the relation of family functioning to patterns of delinquency. Journal of Quantitative Criminology. 2000; 16:169–198.

Ireland TO, Thornberry TP, Loeber R. Violence among adolescents living in public housing: A two-site analysis. Criminology and Public Policy. 2003; 3:3–38.

Johnson SRL, Finigan NM, Bradshaw CP, Haynie DL, Cheng TL. Examining the link between neighborhood context and parental messages to their adolescent children about violence. Journal of Adolescent Health. 2011; 49:58–63. [PubMed: 21700158]

King V. The antecedents and consequences of adolescents' relationships with stepfathers and nonresident fathers. Journal of Marriage and Family. 2006; 68:910–928. [PubMed: 18270551]

Kliewer W, Adams Parrish K, Taylor KW, Jackson K, Walker JM, Shivy VA. Socialization of coping with community violence: Influences of caregiver coaching, modeling, and family context. Child Development. 2006; 77:605–623. [PubMed: 16686791]

Kliewer W, Fearnow MD, Miller PA. Coping socialization in middle childhood: Tests of maternal and paternal influences. Child Development. 1996; 67:2339–2357. [PubMed: 9022245]

Kliewer, W., Goodman, K., Reid-Quinones. The urban family. In: Creasy, G., Jarvis, P., editors. Adolescent development and school achievement in urban communities: Resilience in the neighborhood. New York, NY: Routledge, Taylor and Francis; 2013.

Kliewer, W., Sandler, IN., Wolchik, SA. Family socialization of threat appraisal and coping: Coaching, modeling, and family context. In: Nestman, F., Hurrelmann, K., editors. Social networks and social support in childhood and adolescence. Berlin, DE: Walter de Gruyter; 1994. p. 271-291.

Letiecq BL, Koblinsky SA. Parenting in violent neighborhoods: African American fathers share strategies for keeping children safe. Journal of Family Issues. 2004; 25:715–734.

Maxwell, CD., Garner, JH., Skogan, WG. Collective efficacy and criminal behavior in Chicago, 1995–2004. US Department of Justice, National Criminal Justice Reference Service; 2011.

Miller-Johnson S, Sullivan TN, Simon TR. Multisite Violence Prevention Project. Evaluating the impact of interventions in the Multisite Violence Prevention Study: Samples, procedures, and measures. American Journal of Preventive Medicine. 2004; 26:48–61. [PubMed: 14732187]

Moore, MB., Kliewer, W., Douglas, S., Hinton, TS., Ray, MH. Caregivers' reasoning for their socialization of coping with violence: A qualitative study. Poster presented at the Biennial Society for Research in Child Development Conference; Atlanta, GA. 2005 Apr.

Muthén, LK., Muthén, BO. Mplus user's guide. Los Angeles, CA: Muthén & Muthén; 2010.

Rosario M, Salzinger S, Feldman RS, Ng-Mak DS. Intervening processes between youth's exposure to community violence and internalizing symptoms over time: The roles of social support and coping. American Journal of Community Psychology. 2008; 41:43–62. [PubMed: 18165895]

Sampson RJ, Raudenbush SW. Systematic social observation of public spaces: A new look at disorder in urban neighborhoods. American Journal of Sociology. 1999; 105:603–651.

Sampson RJ, Raudenbush SW, Earls F. Neighborhoods and violent crime: A multilevel study of collective efficacy. Science. 1997; 277:918–24. [PubMed: 9252316]

Tolan, PH., Guerra, NG., Montaini-Klovdahl, LR. Staying out of harm's way: Coping and the development of inner-city children. In: Wolchik, SA., Sandler, IN., editors. Handbook of children's coping: Linking theory and intervention. New York, NY: Plenum; 1997. p. 453-479.

United States Department of Housing and Urban Development. 2000. www.huduser.org/portal/picture2000/index.html

Vieno A, Nation M, Perkins DD, Pastore M, Santinello M. Social capital, safety concerns, parenting, and early adolescents' antisocial behavior. Journal of Community Psychology. 2010; 38:314–328.

Venkatesh, S. Gang leader for a day: A rogue sociologist takes to the streets. New York, NY: Penguin; 2008.

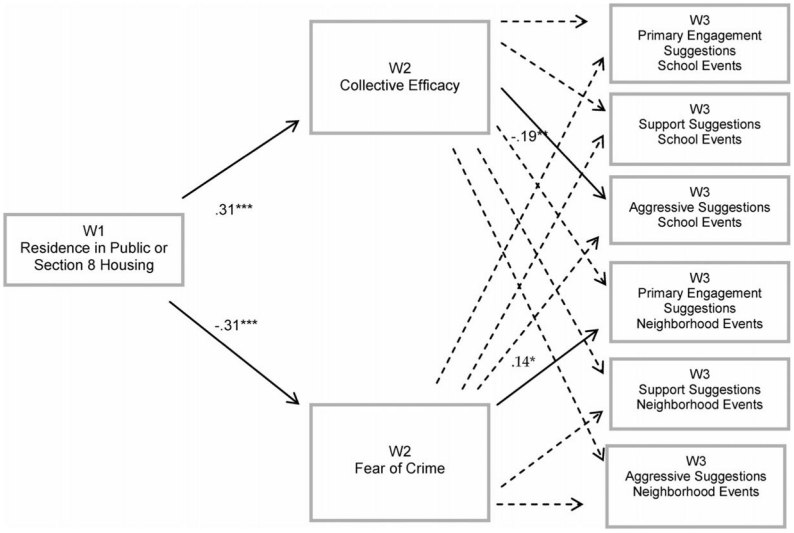

Figure 1.

Path model linking public housing status, collective efficacy, fear of crime, and coping suggestions to manage aggressive and violent school and neighborhood events.

Dashed lines indicate nonsignificant paths; solid lines indicate significant paths. $N = 358$. $X^2(8) = 22.23$, $p < .01$. comparative fit index = .901. root mean square error of approximation = .082. *$p < .05$. **$p < .01$.

Table 1

Descriptive Information on and Correlations Among the Study Variables

	1	2	3	4	5	6	7	8	9
1. Public housing (W1)	–	−.31***	.31***	−.06	.05	−.04	−.04	−.13*	.12*
2. Collective efficacy (W2)		–	−.24***	.09	.10	−.16**	−.05	.07	−.10
3. Fear of crime (W2)			–	−.03	0	−.05	.15*	−.04	.02
4. PRI – school (W3)[a]				–	.03	.04	.24***	.15*	.16**
5. SUP – school (W3)					–	−.12	.05	.37***	−.09
6. AGG – school (W3)[a]						–	.14*	.04	.04
7. PRI – neighborhood (W3)							–	.08	.08
8. SUP – neighborhood (W3)								–	−.03
9. AGG – neighborhood (W3)[a]									–
M		34.81	3.24	2.07	5.05	1.20	4.83	2.51	1.06
SD		9.43	3.37	0.48	2.45	0.29	2.30	1.72	0.15

Note. PRI = Primary Coping Suggestion; SUP = Support Coping Suggestions; AGG = Aggressive Coping Suggestion; M = mean; SD = standard deviation.

[a]log transformed; W1 = Wave 1; W2 = Wave 2; W3 = Wave 3.

*$p < .05$.

**$p < .01$.

***$p < .001$.