



All Theses and Dissertations

2016-03-01

Who is Helpful?: Examining the Relationship between Personality Factors and Supportive Responses and Attitudes toward Domestic Violence Victims

Christina Elisabeth Riley
Brigham Young University

Follow this and additional works at: <https://scholarsarchive.byu.edu/etd>



Part of the [Psychology Commons](#)

BYU ScholarsArchive Citation

Riley, Christina Elisabeth, "Who is Helpful?: Examining the Relationship between Personality Factors and Supportive Responses and Attitudes toward Domestic Violence Victims" (2016). *All Theses and Dissertations*. 6219.
<https://scholarsarchive.byu.edu/etd/6219>

This Thesis is brought to you for free and open access by BYU ScholarsArchive. It has been accepted for inclusion in All Theses and Dissertations by an authorized administrator of BYU ScholarsArchive. For more information, please contact scholarsarchive@byu.edu, ellen_amatangelo@byu.edu.

Who is Helpful? Examining the Relationship Between
Personality Factors and Supportive Responses and
Attitudes toward Domestic Violence Victims

Christina Elisabeth Riley

A thesis submitted to the faculty of
Brigham Young University
in partial fulfillment of the requirements for the degree of
Master of Science

Niwako Yamawaki, Chair
Bruce Brown
Robert Ridge

Department of Psychology
Brigham Young University

March 2016

Copyright © Christina Elisabeth Riley

All Rights Reserved

ABSTRACT

Who is Helpful? Examining the Relationship Between Personality Factors and Supportive Responses and Attitudes toward Domestic Violence Victims

Christina Elisabeth Riley
Department of Psychology, BYU
Master of Science

Domestic violence perpetrated by men against women persists as a major human rights issue in the United States and around the world with some estimates showing that one in four women will be victimized in their lifetimes. Victims face many obstacles when they try to leave their abusive partners. A major barrier faced by victims is secondary victimization. Secondary victimization is the process in which informal (e.g., family, friends, etc.) and formal (e.g., police officer, judges, etc.) supporters re-victimize the victim by questioning the validity of the abuse, excusing the perpetrator, and blaming the victim. Because most victims seek help from informal supporters first, predictive personality factors of supportive attitudes towards DV victims from informal supporters was the main focus of this study and a measure, the Support for the Victim scale, was developed for the current study based on a review of the literature and a consultation with a licensed psychologist. Using a sample of college students from Brigham Young University, an online survey was conducted to examine which factors are predictive of supportive attitudes towards DV victims.

Keywords: domestic violence, secondary victimization, personality factors

ACKNOWLEDGEMENTS

It is with my deepest gratitude to my chair, Dr. Niwako Yamawaki, for her continued support and dedication to helping me succeed that I present this thesis. Thank you for believing in me and for supporting me in my dream to help end violence against women. I would also like to thank the Department of Psychology at BYU for their support and patience with me as I have worked on my thesis. And a special thank you to my committee members, Dr. Bruce Brown and Dr. Bob Ridge, for their help and support.

I am especially grateful to my late father for his unconditional love for me and for his always encouraging me to pursue my dreams. I never once felt anything less than capable in my father's eyes. My father is very much missed and loved. I dedicate this thesis to him and to all the women in my family who survived domestic violence for generations. You are my inspiration, strength, and foundation.

TABLE OF CONTENTS

ABSTRACT.....	ii
ACKNOWLEDGEMENTS.....	iii
TABLE OF CONTENTS.....	iv
LIST OF TABLES.....	vi
Literature Review.....	1
Domestic Violence Prevalence and Implications.....	1
Ambivalent sexism and domestic violence.....	13
Gender-role traditionality and domestic violence.....	16
Right-wing authoritarianism and domestic violence.....	18
Social dominance orientation and domestic violence.....	19
The situation and domestic violence.....	20
Gender differences and domestic violence.....	21
The Current Study.....	22
Methods.....	23
Participants.....	23
Materials and Measures.....	24
Scenarios.....	24
Support for the victim measure.....	25
Right-wing authoritarianism (RWA) scale.....	26
Ambivalent sexism inventory (ASI).....	27
Social dominance orientation (SDO) scale.....	28
Victim blame attribution scale.....	28
Attitudes towards women scale.....	29
Procedure.....	30
Data Analytic Strategy.....	31
Data screening and demographic information.....	31
Factor analysis.....	31
Hypothesis testing.....	34
Results.....	35
Descriptive statistics.....	35

Hypothesis testing results.....	36
Discussion.....	44
Personality Factors, Victim Blaming, and Support for the Victim.....	45
HS, BS, victim blaming, and support for the victim.....	46
GRT, victim blaming, and support for the victim.....	47
RWA, victim blaming, and support for the victim.....	49
SDO, victim blaming, and support for the victim.....	50
Multiple regression analyses.....	51
Gender, Victim Blaming, and Support for the Victim.....	53
Situational Factors and Victim Blaming.....	55
Implications and Future Directions.....	56
Limitations.....	61
Summary and Conclusion.....	62
References.....	65
Appendix A.....	76
Appendix B.....	77
Appendix C.....	79
Appendix D.....	80
Appendix E.....	81
Appendix F.....	82
Appendix G.....	83
Appendix H.....	84
Appendix I.....	85

LIST OF TABLES

Table 1. <i>Factor loadings, communalities, and Cronbach's alphas based on a principal components analysis with a varimax rotation</i>	32
Table 2. <i>Descriptive Statistics All Measures by Gender and Condition</i>	35
Table 3. <i>Regression Models with Support for the Victim and Victim Blaming as the Dependent Variable and HS and BS as the Predictor Variables</i>	37
Table 4. <i>Regression Models with Support for the Victim and Victim Blaming as the Dependent Variables and GRT as the Predictor Variable</i>	38
Table 5. <i>Regression Models with Support for the Victim and Victim Blaming as the Dependent Variables and RWA</i>	38
Table 6. <i>Regression Models with Support for the Victim and Victim Blaming as the Dependent Variables and SDO as the Predictor Variable</i>	39
Table 7. <i>Multiple Regression Model with Support for the Victim as the Dependent Variable and HS, BS, GRT, and SDO as the Predictor Variables</i>	41
Table 8. <i>Intercorrelations between RWA, HS, BS, SDO, and GRT</i>	42
Table 9. <i>ANOVA Results for MANOVA Conducted for the Overall Model Using Gender as the Independent Variable and Victim Blaming and Support for the Victim as the Dependent Variables</i>	43
Table 10. <i>2 X 2 ANOVA for Victim Blaming by Condition and Gender</i>	44

Literature Review

Domestic Violence Prevalence and Implications

Domestic violence (DV) has been recognized as a human rights violation, a major health risk, and being of high cost and concern to society, yet it remains as a serious violation to the health, daily function, and the lives of women globally (Bostock, Plumpton, & Pratt, 2009; Krug, Mercy, Dahlbery, & Zwi, 2002; WHO, 2005). Although greatly underreported, some estimates suggest that over four million women are assaulted every year by either a spouse or a partner (Bosch & Begen, 2006). Another estimate that puts this issue in perspective is that one in four women will be victims of DV in their lifetimes (Bostock, Plumpton, & Pratt, 2009; Minsky-Kelly, Hamberger, Pape, & Wolff, 2005). Other estimates for the United States indicate that between one third and one half of all women will be victimized in their lifetimes (Plichta, 2007). DV accounts for more deaths in women between the ages of 15-49 years old than does malaria and traffic accidents combined (Alhabib, Nur, & Jones, 2010). Not only does DV place women at serious risk of losing their lives, it adversely impacts their physical, emotional, mental, and social well-being as well (Alhabib, Nur, & Jones, 2010; Bostock, Plumpton, & Pratt, 2009; Heise, Ellsberg, & Gottemoeller, 1999; Krug, Mercy, Dahlbery, & Zwi, 2002; Robinson & Spilsbury, 2008; WHO, 2005). As a victim of DV, a woman is placed at long-term risk for various health and mental health problems including serious bodily injury, depression, substance abuse, chronic pain, and physical disability (Alhabib, Nur, & Jones, 2010; Bostock, Plumpton, & Pratt, 2009; Heise, Ellsberg, & Gottemoeller, 1999; Minsky-Kelly, Hamberger, Pape, & Wolff, 2005; Plichta, 2007; Robinson & Spilsbury, 2008).

Despite the far-reaching effects of DV for both victims and society as a whole, focus on this social justice issue has only come to forefront recently. Feminists groups and other groups

concerned with the social welfare of women brought DV to the public sphere during the 1970s and the 1980s (Alhabib, Nur, & Jones, 2010; Cho & Wilke, 2005). Before DV became a public concern, it was viewed as a private matter to be dealt with in the home (Alhabib, Nur, & Jones, 2010). Such views still prevail in more traditional societies and even in societies where DV has been identified as a public issue (Alhabib, Nur, & Jones, 2010; Heise, Ellsberg, & Gottemoeller, 1999; Krug, Mercy, Dahlbery, & Zwi, 2002; Walker, 1999; WHO, 2005). Consequently, research on the prevalence, implications, effects of, and the causes of DV began recently and this body of research is growing. Additionally, researching DV is of the highest importance because regardless of race or ethnicity, socioeconomic status (SES), or the country that women reside in, the proportion of DV has increased at a startling rate (Alhabib, Nur, & Jones, 2010). A systematic review of 356 studies conducted between 1996 and 2005 revealed that the rate of DV has increased over time and has reached the highest proportions recently (Alhabib, Nur, & Jones, 2010). However, other reports indicate that the rate of DV is declining (Cho & Wilke, 2005). These discrepancies may be attributable to the underreporting of DV. In either case, as discussed above, DV remains a prevalent issue for many women today.

Not only does DV debilitate the victims, but it negatively impacts society as well. Some of the main ways that DV impacts society include increased medical costs and a large proportion of the workforce is compromised as a result (Alhabib, Nur, & Jones, 2010; Heise, Ellsberg, & Gottemoeller, 1999; Krug, Mercy, Dahlbery, & Zwi, 2002; Plichta, 2007; Robinson & Spilsbury, 2008; WHO, 2005). Because DV victims have repeated injuries, they make more hospital visits than non-victims, which increases general healthcare costs (Krug, Mercy, Dahlbery, & Zwi, 2002; Minsky-Kelly, Hamberger, Pape, & Wolff, 2005; Plichta, 2007; Robinson & Spilsbury, 2008). DV victims also suffer greatly as their ability to work and maintain employment is

greatly compromised (Krug, Mercy, Dahlbery, & Zwi, 2002). Women with a history of DV are more likely to suffer more mental and physical health issues (Minsky-Kelly, Hamberger, Pape, & Wolff, 2005; Plichta, 2007) that affect their job performance; they have a higher turnover rate in their jobs, and a higher rate of unemployment (Krug, Mercy, Dahlbery, & Zwi, 2002). All of these factors place an economic burden on societies due to reduced productivity in the labor force. Consequently, research and community efforts in identifying the factors that contribute to and/or cause DV are paramount. Specifically, identifying the social factors that bar victims from seeking and/or receiving the proper social services or resources necessary is essential in combating DV (Heise, Ellsberg, & Gottemoeller, 1999; & Walker, 1999). In addition to poverty and other economic inequalities (Alhabib, Nur, & Jones, 2010), negative social attitudes towards women and towards the victim, like blaming the victim for the abuse and excusing the perpetrator, contribute to DV (Heise, Ellsberg, & Gottemoeller, 1999; Krug, Mercy, Dahlbery, & Zwi, 2002; Walker, 1999; WHO, 2005). Negative attitudes toward the DV victim contribute to the cycle of violence – the pattern abusive partners follow in which they vacillate between showing affection to their victims and abusing them in which the abuse escalates over time (Coleman, 1997). This process in which outside observers’ negative attitudes contribute to DV is known as secondary victimization (Campbell, Raja & Grining, 1999; Williams, 1984).

Secondary victimization occurs when either informal or formal support systems, like family members or the police, respectively, refuse to provide aid and support to a DV victim (Barnish, 2004; Hattendorf & Tollerud, 1997). In cases of secondary victimization, members of formal or informal support systems question the substantiality of abuse claims, place blame on the victims, are unsympathetic to the victims, excuse the perpetrator and are unsupportive in the victims’ search for aid (Hattendorf & Tollerud, 1997; Campbell, Raja & Grining, 1999;

Williams, 1984). Not only is the victim victimized by the primary abuse from the abuser, but the victim also faces negative attitudes from those he or she has trust in for help and support such as judges, police officers, therapists, friends, family members, or religious and community leaders who turn her away and, thus, are unsympathetic and unsupportive of the victim, leading to the victim perceiving that he or she is victimized again (Campbell, Raja & Grining, 1999; Hattendorf & Tolloerud, 1997; Williams 1984). Oftentimes, victims report that the secondary victimization is more painful and traumatic than the primary abuse they endured (Hattendorf & Tolloerud, 1997).

Secondary victimization is a widespread issue and occurs in a variety of settings as both formal and informal support systems convey negative and unsupportive attitudes toward DV victims, which can re-victimize the victims even though this is not necessarily the intention underlying such attitudes (Barnish, 2004; Campbell, 2008). In the former, victims report secondary victimization caused by doctors and other medical health professions (Gremillion & Kanof, 1996; Hattendorf & Tolloerud, 1997; Robinson & Spilsbury, 2008; Yam, 2000), mental health professionals (Campbell, Raja, & Grinning, 1999; Hattendorf & Tolloerud, 1997; Postmus, Severson, Berry, & Yoo 2009), the justice system (Barnish 2004; Campbell, Raja, & Grinning, 1999; Hattendorf & Tolloerud, 1997; Hartley 2001; Parsons & Bergin 2010; Williams, 1994), ecclesiastical leaders (Shannon-Lewy & Dull, 2005), landlords, employers, and agents from child protective services as well (Lapidus, 2003). In the latter, victims report secondary victimization as caused by family and friends (Bosh & Bergen, 2006).

When victims report secondary victimization as stemming from formal support systems, these cases often occurs in medical settings for female victims (Hattendorf & Tolloerud, 1997; Robison & Spilsbury, 2008) and are especially prevalent among older women and ethnic

minorities (Robinson & Spilsbury, 2008). Hattendorf and Tolloerud (1997) assert that women are often victims of secondary victimization by medical health professionals because this field remains dominated by males and female DV victims may face traditional patriarchal attitudes. This assertion is corroborated by the fact that DV victims are more likely to disclose to female health care providers than to their male counterparts (Gremillion & Kanof, 1996). When healthcare providers minimize the severity of the victims' trauma, are insensitive to their need for privacy and respect, rush their patients, show a general lack of concern and humanness, and blame victims for the violence they endured, DV victims may feel abused for a second time (Hattendorf & Tolloerud, 1997; Gremillion & Kanof, 1996; Robinson & Spilsbury, 2008; Yam, 2000). Additionally, when healthcare professionals refer DV victims for psychotherapy or blame the violence on some personality trait or some issue with the victim's mental health thus, implying that the victim's trauma is not 'real,' DV victims may feel that they are abused a second time (Gremillion & Kanof, 1996; Hattendorf & Tolloerud, 1997; Robinson & Spilsbury, 2008). In doing so, health care providers mitigate the trauma experienced by the victim and further excuse the abuser by shifting the focus away from justice onto blaming the victim. Overall, there is evidence that victims of domestic violence find the healthcare system as unhelpful (Gremillion & Kanof, 1996) because of secondary victimization that they report occurring there. Although some DV victims report feeling satisfied with the medical care system (Gremillion & Kanof, 1996), the fact that there are reports of DV victims being victimized a second time by trusted health care providers is a critical issue in ending the cycle of violence. When victims feel re-victimized by healthcare providers and others they trust for help, they become less likely to seek help and do not heal as well mentally and emotionally from the abuse (Bosh & Bergen, 2006; Lapidus, 2003).

Similar to reports of being re-victimized by healthcare professionals, victims also perceived that some mental health professionals re-victimize them as well (Campbell, Raja, & Grinning, 1999; Hattendorf & Tolloerud, 1997). This occurs when therapists pathologize the abuse by assessing DV victims as ‘codependent’ thus, blaming the victim for the abuse endured (Campbell, Raja, & Grinning 1999; Hattendorf & Tolloerud, 1997; Postmus, Severson, Berry, & Yoo, 2009). Additionally, behaviors such as affiliation and commitment (typically defined as being feminine) can be pathologized, devalued, and used to hold the victim equally responsible for the abuse she endured (Campbell, Raja, & Grinning, 1999; Hattendorf & Tolloerud, 1997; Postmus, Severson, Berry, & Yoo, 2009). Additionally, some therapists have shown disbelief of the reported abuse and conveyed victim-blaming attitudes (Postmus, Severson, Berry, & Yoo, 2009). Some other barriers that DV victims encounter when they seek help from mental health professionals include mental health professionals conveying a lack of full understanding of the trauma caused by the abuse, focusing on mental health instead of the abuse and prescribing medication instead of providing support to the victims (Postmus, Severson, Berry, & Yoo, 2009).

Victims of DV most often report secondary victimization as occurring within the legal system (Barnish, 2004; Hattendorf & Tolloerud, 1997; Williams, 1984). Victims report feeling re-victimized by the police, judges, legal advocates and lawyers (Barnish, 2004; Hartley, 2001; Parsons & Bergin, 2010). Secondary victimization is far more common for female victims because women are seen as less credible than men (Hartley, 2001). Despite an increase in DV training for police (Hattendorf & Tolloerud, 1997), the police response to DV remains consistently inadequate (Barnish, 2004; Hartley, 2001; Parsons & Bergin, 2010). Despite the fact that perpetrator arrest dramatically decreases the chance of future violence against the

victims, reports show that police still hesitate in arresting DV perpetrators in spite of evidence and reports of abuse (Barnish, 2004; Hattendorf & Tolloerud, 1997; Hartley, 2001).

Similar to reports of police being unsympathetic and unsupportive, victims also report feeling re-victimized by judges in court (Barnish, 2004; Hattendorf & Tolloerud, 1997; Hartley, 2001). This occurs when judges convey views that DV is not a true crime, thus, invalidating the abuse endured (Barnish, 2004; Hattendorf & Tolloerud, 1997; Hartley, 2001). Victims also feel re-victimized because of the hesitation to prosecute DV perpetrators (Barnish, 2004; Hartley, 2001; Parsons & Bergin, 2010). Additionally, sentencing for DV perpetrators not only occurs infrequently but when they are delivered, they are often more lenient and shorter than for crimes of comparable violence perpetrated against strangers. (Barnish, 2004; Hattendorf & Tolloerud, 1997; Hartley, 2001). During some trials, defense lawyers who defend the DV perpetrator manipulate DV myths (i.e., the victim was asking for it or is at fault) and thereby excuse the perpetrator, blame the victim, minimize the abuse and shift the focus from the crime unto the character of the victim whom is painted as less credible, faulty and psychologically unstable (Barnish, 2004; Hartley, 2001).

When victims feel let down by those they trusted in the legal system, they suffer the primary trauma again and are harmed emotionally and mentally (Barnish, 2004; Campbell, Raja, & Grinning, 1999; Parsons & Bergin, 2010). Some victims report that the legal proceedings are more painful than the initial abuse (Barnish, 2004). When DV victims perceive that the legal system has failed them, they not only are less likely to seek help and to remain trapped in the cycle of violence, but they are also more likely to be severely injured or murdered by their abuser (Barnish 2004; Hattendorf & Tolloerud, 1997) or commit suicide (Hattendorf & Tolloerud, 1997).

Whether victims report feeling re-victimized by healthcare professionals, mental health workers, or those who work in the legal system, secondary victimization is a serious issue because it contributes to the cycle of violence. When victims seek help from formal support systems, they anticipate being validated, helped, and finally being able to escape the cycle of violence. As discussed above, when victims feel that their trust was betrayed by those within institutional systems they seek help from, they feel re-victimized, experience pain that is greater than the initial abuse, they are less likely to seek help in the future, are more likely to be abused by their abusers again, and are more likely to be murdered or to take their own lives. Consequently, in the effort of eradicating DV, it is society's duty to combat negative attitudes toward DV victims that plague the very institutional systems that are meant to help victims of abuse.

Like secondary victimization that is reported as stemming from formal support systems, some DV victims report feeling re-victimized by informal support systems that include family and friends (Chabot, Tracy, Manning, & Poisson 2009; Bosch & Begen, 2006; Kaukinen, Meyer, & Akers 2012; West & Wendrei, 2002; Wilcox, 2000). It is critical to address secondary victimization that is reported as occurring by informal support systems because most DV victims first seek their family and friends for help (Chabot, Tracy, Manning, & Poisson 2009; Kaukinen, Meyer, & Akers 2012; McCart, Smith & Sawyer, 2010; Postmus et al., 2009; Trotter & Allen, 2009; West & Wandrei 2002; Wilcox, 2000). In one study, rural women who sought their family for help to escape from the abuse they suffered felt they were treated in a judgmental and unhelpful manner (Bosch & Begen, 2006). The victims were questioned, blamed, turned away from receiving help, and sometimes threats were made against the victim from family members (Bosch & Begen, 2006). Other research shows mixed responses from informal supporters to

victims with some cases resulting in positive and supportive responses (McCart, Smith, & Sawyer 2010) and others with negative and harmful responses (Ferrararo & Johnson 1983; Goodkind, Gillum, Bybee & Sullivan 2003; Trotter & Allen, 2009; West & Wendrei, 2002). In the latter case, these responses include victim blaming, trivialization of the abuse and informal supporters threatening to harm the abuser, which puts the victim at more risk for serious injury or death (Ferrararo & Johnson 1983; West & Wandrei, 2002). In some cases, informal supporters simply refuse to help (Waldrop & Resick, 2004). Often times, informal supporters feel conflicted between wanting to help the victim while not wanting to betray the partner who is now identified as an abuser after disclosure (Wilcox, 2000). Overall, victims feel that informal supporters remain inconsistent in their being helpful to victims and are, in general, unhelpful (Wilcox, 2000). Some researchers postulate that informal supporters are unhelpful because they cannot identify if the DV situation is an emergency and because they feel incompetent in assisting (Chabot, Tracy, Manning & Poisson, 2009). Regardless of the reasons for the inconsistency in helpfulness provided from informal supporters, negative reactions are more salient than positive reactions to trauma and negative reactions are harmful to victims on many levels (Trotter & Allen, 2009). Additionally, Trotter and Allen (2009) conducted a study that examined DV victims' perceptions of helpfulness from informal supporters and found that perceived mixed and unhelpful and/or harmful responses occur regularly. Other researchers have confirmed their finding (Beeble, Post, Bybee, & Sullivan 2008).

Consequent to feeling re-victimized by trusted informal supporters, DV victims become much less likely to seek help from other sources and more likely to be re-victimized by their abusers, harmed mentally and emotionally, and to remain trapped within the cycle of violence (Bosch & Begen, 2006; Fugate, Landis, Naureckas & Engel, 2005; Policastro & Payne 2013;

Rose & Campbell, 2000). Additionally, female DV victims who perceive a more positive response from informal support systems are more likely to have greater confidence in their abilities to change their situations, and therefore, may be more likely to access formal support services in the future (Rose & Campbell, 2000; Waldrop & Resick, 2004). The responses from informal supporters, then, have an impact on the likeliness of a DV victim remaining in the cycle of violence.

Victims' perceptions of secondary victimization stemming from informal support systems have a severe impact on victims as these constitute a major barrier to DV victims in seeking help and contributes to the perpetuation of the cycle of violence. Without the support and aid that they seek after from family and friends, DV victims are much more likely to remain trapped in the cycle of violence (Rose & Campbell, 2000), to be harmed physically and emotionally, and are at increased risk of losing their lives (Fugate, Landis, Naureckas & Engel, 2005). Therefore, there is a need to recognize and investigate the significant role that informal support plays in the lives of DV victims (Fugate, Landis, Naureckas & Engel, 2005).

Specifically, researching ways in which negative attitudes toward DV victims that contribute to secondary victimization within informal support systems is paramount in helping end the cycle of violence (Chabot, Tracy, Manning, & Poisson 2009; Bosch & Begen, 2006; Kaukinen, Meyer, & Akers 2012; Policastro & Payne 2013; West & Wendrei, 2002; Wilcox, 2000). Increased focus on examining and educating informal supporters about DV is important not only because the majority of DV victims first disclose to informal support systems such as family and friends (Bosh & Bergen, 2006), but it is also crucial because informal support provides a long-term form of aid (unlike short-term, crisis-intervention centers) and because positive responses from informal support such as providing financial aid, material means, and

emotional support have been identified as main factors needed in ending the cycle of violence (West & Wendrei, 2002). Additionally, positive responses from informal supporters are predictive of DV victims seeking out formal support services and, therefore, in helping to end the cycle of violence (Rose & Campbell, 2000). Despite its importance, research on how informal supporters responses affect DV victims' well-being and contribute to the cycle of violence remains scarce (Beeble, Post, Bybee, & Sullivan 2008; Sullivan, Schroeder, Dudley & Dixon, 2010).

Whether victims feel re-victimized by formal or informal support systems, the secondary victimization they perceive is a major barrier in their escaping from the cycle of violence (Foshee & Linder 1997; Fugate, Landis, Naureckas & Engel, 2005; Lapidus, 2003; Policastro & Payne 2013). The examination of negative attitudes that contribute to secondary victimization such as victim blaming, then, is crucial in finding ways to eradicate secondary victimization in the effort to end the cycle of violence (Fugate, Landis, Naureckas & Engel, 2005; Lapidus, 2003; Policastro & Payne 2013). When victims perceive supportive reactions from those they seek help from, they are much more likely to escape from their abusers and to heal from the abuse both mentally and physically (Bosch & Begen, 2006; Campbell, 2008; Goodkind, Gillum, Bybee & Sullivan 2003; Coker, Smith, Thompson, McKeown, Bethea & Davis, 2002; Rose & Campbell, 2000). In one study, perceived positive social support reduced the risk of adverse mental health outcomes by almost half among abused women (Coker, Smith, Thompson, McKeown, Bethea & Davis, 2002).

Additionally, when victims perceive they are receiving supportive responses, they are more likely to seek out other services like taking legal action and are less likely to be re-victimized in the future (Finn & Stalans, 1995). Because of this, there is evidence that suggests

that better training and education regarding DV and appropriate and helpful responses toward victims' disclosures are necessary for ensuring that barriers to aid are removed for DV victims (Bosch & Begen, 2006; Campbell, Raja & Grining, 1999). One of the factors that needs to be addressed when better educating support systems about aiding DV victims is gender stereotypes (Bosch & Begen, 2006; Hattendorf & Tolloerud, 1997) as negative views against women and views that women are less credible than men, for example, contribute to secondary victimization and, ultimately, the cycle of violence (Foshee & Linder 1997; Lapidus, 2003; Policastro & Payne 2013). When DV victims perceive this type of discrimination, they are much less likely to receive aid and much more likely to have their lives put in danger (Lapidus, 2003).

Based on the evidence discussed previously that conveys the contribution of negative attitudes toward DV victims to secondary victimization, the main aim of this project is to identify the factors that contribute to negative and unsupportive attitudes toward DV victims. Unlike previous research that has focused on identifying predictors of negative attitudes toward DV victims, the identified factors from this project will assist DV victims effectively. This will be accomplished in several ways. First, personality factors that may contribute to negative and unsupportive reactions toward DV victims will be examined. The personality factors that will be explored in the present study include ambivalent sexism (AS), gender-role traditionality (GRT), and right-wing authoritarianism (RWA). These personality factors are selected based on previous research. This project will also investigate a situational factor. That is, the victim's decision to remain with her abuser is compared to the decision to leave her abuser. Another factor that will be examined is gender differences in attitudes toward DV victims. Last, since most DV victims disclose to and seek help from informal supporters first, this project will focus on which factors contribute to secondary victimization among family, friends, etc. Therefore, it

will also examine which factors contribute to negative and unsupportive attitudes to DV victims among informal support systems.

Ambivalent sexism and domestic violence. One of the most highly researched personality factors that contributes to DV victim blame attribution is ambivalent sexism (AS) (Barreto & Ellmers, 2005; Glick, Sakalli-Ugurlu, Ferreira, & de Souza, 2002; Yakushko, 2005; Yamawaki, Ostenson, & Brown 2009). According to Glick and Fiske (1996), sexism is a special case of prejudice which is characterized by ambivalence towards women unlike other forms of prejudice that are uniform in feeling. This ambivalence is comprised of hostile sexism (HS) and benevolent sexism (BS) (Glick & Fiske, 1996). They named this ambivalent sexism because HS and BS create opposing feelings towards women (Glick & Fiske, 1996). Additionally, although HS and BS are positively related, they have dichotomous evaluative implications towards women, and, therefore, are ambivalent (Glick & Fiske, 1996).

Hostile sexism. Characterized by its explicitly derogatory views of women, HS entails overtly negative views of women as incapable of holding positions of power and as a burden and/or nuisance to society (Barreto & Ellmers, 2005; Christopher & Mull, 2006; Glick & Fiske, 1996; Glick, Sakalli-Ugurlu, Ferreira, & de Souza, 2002; Yakushko, 2005). According to Glick and Fiske (1996), HS fits Allport's (1954) definition of prejudice as antipathy towards a particular group. HS, then, is an adversarial view of women who are perceived as seeking to control men, whether through their sexuality or by embodying feminist ideology (Flood & Pease, 2009; Glick & Fiske, 2001; Glick, Sakalli-Ugurlu, Ferreira, & de Souza, 2002; Yakushko, 2005). Like other forms of prejudice, HS is damaging for women because of the negative and adversarial feelings and views (Barreto & Ellmers, 2005; Christopher & Mull, 2006; Flood &

Pease, 2009; Glick & Fiske, 1996; Glick, Sakalli-Ugurlu, Ferreira, & de Souza, 2002; Yakushko, 2005).

Benevolent sexism. Although the feelings it emotes are not overtly negative like HS, BS also maintains gender inequalities (Barreto & Ellmers, 2005; Christopher & Mull, 2006; Flood & Pease, 2009; Glick, Sakalli-Ugurlu, Ferreira, & de Souza, 2002; Yakushko, 2005). BS is characterized by subjective positive feelings towards women held by the perceiver by viewing women within stereotypical and restricted roles (Barreto & Ellmers, 2005; Christopher & Mull, 2006; Flood & Pease, 2009; Glick & Fiske, 1996; Glick, Sakalli-Ugurlu, Ferreira, & de Souza, 2002; Yakushko, 2005). BS, then, limits women to the roles of ‘mother,’ ‘housewife,’ and any role that is traditional for women within patriarchal societies (Barreto & Ellmers, 2005; Christopher & Mull, 2006; Flood & Pease, 2009; Glick & Fiske, 1996; Glick, Sakalli-Ugurlu, Ferreira, & de Souza, 2002; Yakushko, 2005). Additionally, BS appears to elicit positive attitudes towards women, it characterizes women as subservient to men (Barreto & Ellmers, 2005; Christopher & Mull, 2006; Flood & Pease, 2009; Glick & Fiske, 1996; Glick, Sakalli-Ugurlu, Ferreira, & de Souza, 2002; Yakushko, 2005). Consequently, BS does not empower women, but contributes to prejudice against them (Barreto & Ellmers, 2005; Christopher & Mull, 2006; Flood & Pease, 2009; Glick & Fiske, 1996; Yakushko, 2005). Although BS creates positive feelings for the perceiver who endorses these views, it does not necessarily do so for women because its underlying ideology stems from masculine dominance and traditional stereotypes of women (Barreto & Ellmers, 2005; Christopher & Mull, 2006; Flood & Pease, 2009; Glick & Fiske, 1996; Yakushko, 2005). BS, then, is not positive for or enabling to women, but rather is negative, damaging, and comprises the other valence of AS.

The two valences of ambivalent sexism (AS), benevolent sexism (BS) and hostile sexism (HS) are associated with maintaining gender inequalities for women (Barreto & Ellmers, 2005; Christopher & Mull, 2006; Glick & Fiske, 1996, & 2001; Glick, Sakalli-Ugurlu, Ferreira, & de Souza, 2002; Yakushko, 2005). One way that AS maintains gender inequalities for women is that people with high AS attribute blame to DV victims more than those who score low on AS measures (Barreto & Ellmers, 2005; Glick & Fiske, 2001; Flood & Pease, 2009; Yamawaki, Ostenson, & Brown 2009). Individuals who score high on AS minimize the severity of the abuse, excuse the perpetrator, and attribute blame to the victim more than people who score low on AS (Flood & Pease, 2009; Yamawaki, Ostenson, & Brown 2009). Overall, individuals who score higher on both HS and BS measures are more likely to endorse condoning views of violence against women compared to those who score lower on these measures (Flood & Pease, 2009; Glick, Sakalli-Ugurlu, Ferreira, & de Souza, 2002).

The finding that people who score high on AS minimize the severity of abuse, excuse the perpetrator, and attribute blame to the victim more than people who score low on AS is true cross-nationally as well (Glick, Sakalli-Ugurlu, Ferreira, & de Souza, 2002; Yamawaki, Ostenson, & Brown 2009). In a recent study, Yamawaki, Ostenson, and Brown (2009) explored social attitudes and how they predict negative attitudes towards DV and DV victims cross-culturally by comparing an American sample with a Japanese sample. One factor investigated was AS. Both HS and BS predicted attitudes that minimize the severity of DV. This finding supports Glick and Fiske's (1996) claim that HS and BS are related and both contribute to the maintenance of gender inequalities for women. Specifically, both the hostile and benevolent valences of AS contribute to attitudes that minimize the severity of DV, blame the victim, and excuse the abuser (Barreto & Ellmers, 2005; Glick & Fiske, 2001; Glick, Sakalli-Ugurlu,

Ferreira, & de Souza, 2002; Flood & Pease, 2009; Yamawaki, Ostenson, & Brown 2009). Based on the discussed findings, it is hypothesized that individuals who score high on measures of HS and BS will react more negatively toward and be less supportive of DV victims compared to individuals score low on measures of HS and BS.

Gender-role traditionality and domestic violence. Similar to AS, individuals who score higher on measures of gender-role traditionality (GRT) endorse views that minimize the severity of DV, blame the victim, and excuse the perpetrator more compared to individuals who score low on GRT (Bryant & Spencer, 2003; Flood & Pease, 2009; Reidy, Shirk, Sloan, & Zeichner, 2009; Yamawaki, Ostenson, & Brown, 2009). GRT measures how rigidly one adheres to traditional gender roles (Bryant & Spencer, 2003; Flood & Pease, 2009; Yamawaki, 2007). Someone who scores high on a measure of GRT, then, would strongly uphold patriarchal views. Such views include endorsement of men as dominant figures in the home and society and women as subservient to men and fit for domestic roles (Flood & Pease, 2009). It is thought that strong adherence to GRT is related to more negative attitudes towards DV victims because DV victims are seen as doing something to have cause their abuser, which includes straying from their ‘rightful’ places and, therefore, deserving of their abuse (Capezza & Arriaga, 2008). Therefore, It is not the fulfilling of a traditional gender role itself that increases negative attitudes towards DV victims, but strict adherence to GRT where one views others as needing to fulfill these roles and straying from as causing negative consequences that creates the relationship between GRT and negative attitudes towards DV victims.

This differs from benevolent sexism in that benevolent sexism relates more to appropriate gender characteristics like women as docile while GRT emphasizes the roles in which men and women play. Individuals who score high on GRT measures are more likely to minimize the

seriousness of violence against women in both rape (Flood & Pease, 2009; Yamawaki, 2007) and DV paradigms (Flood & Pease, 2009; Yamawaki, Ostenson, & Brown, 2009). In relation to GRT, the violation of gender expected behaviors serves as a way for the aggressor to legitimize the intention of aggression toward the woman who defies traditional gender expectations (Flood & Pease, 2009; Reidy, Shirk, Sloan, & Zeichner, 2009). Strict adherence to gender roles, then, can help predict intentions for violence against women (Flood & Pease, 2009; Reidy, Shirk, Sloan, & Zeichner, 2009). Cross-national comparisons found that higher endorsement of GRT contributes to attitudes that minimize DV and blame the victim (Flood & Pease, 2009; Yamawaki, Ostenson, & Brown, 2009).

Yamawaki, Ostenson, and Brown (2009) found that victims who violated traditional gender norms received more blame for the abuse they endured. When the victim violated traditional gender behavior by going to a party, staying out late with friends, and drinking alcohol, more blame was attributed to her than to the abuser for the DV incident. The authors argued that the increase in blame attribution was because of the victim not adhering to traditional gender role expectations. Capezza and Arriaga (2008) also found that women who defied traditional gender roles, such as career women, or who retaliated against the perpetrator by yelling in DV scenario, received more blame for the abuse they endured compared to traditional women, such as homemakers, or women who did not react against the perpetrated DV. The authors reasoned that this difference is due to gender stereotypes (Capezza & Arriaga, 2008). Taken together, the data suggest that rigid adherence to GRT contributes to minimizing the severity of the abuse in DV, increased victim blaming, and less blaming for the DV perpetrator. Therefore, it is hypothesized that individuals who score higher on a GRT measure will convey

more negative and unsupportive attitudes toward DV victims compared to individuals who score lower on a GRT measure and hold more egalitarian attitudes.

Right-wing authoritarianism and domestic violence. Similar to measures of GRT that examine rigidity in thought toward gender roles, measures of right-wing authoritarianism examine rigidity in (1) conventional thought, (2) respect for perceived authority figures, and the (3) desire for a ‘normative’ worldview that includes sameness and punitive attitudes toward dissidents from the norm (Altemeyer, 2004; Stenner, 2009). When individuals convey unconventional thought, disrespect for authority figures, and diverge from the norm, those who score high on RWA convey punitive and aggressive attitudes toward these deviant individuals (Altemeyer, 2004; Haddock & Zanna, 2004; Stenner, 2009). Put another way, those who highly endorse RWA have a coercive sense of order and are aggressive in their views of keeping social order (Duckitt & Sibley, 2010). In fact, higher endorsement of RWA is related to higher prejudiced attitudes over time for groups perceived as ‘dissident’ and ‘dangerous’ (Asbrock, Sibley, & Duckitt, 2010).

In addition to holding more aggressive views toward divergent groups, those who score high on RWA measures were found to not only report being more likely to engage in sexual aggression, but they were also found to report committing sexually aggressive acts in the past (Walker, Rowe, & Quinsey, 1993). Therefore some argue that those high in RWA will endorse supportive views of violence against women (Walker, Rowe, & Quinsey, 1993). However, others have found contrary results for the finding that RWA correlates with or predicts endorsement of violence against women (Benjamin, 2006). Specifically, Benjamin (2006) found that although those who scored high on a measure of RWA endorsed punitive forms of violence like punishments for criminals, high endorsement of RWA was not predictive of supportive

views for violence against women. Despite these mixed results, others have found that RWA is predictive of benevolent sexism (BS) (Christopher & Mull, 2006). Specifically, those who scored high on RWA also scored high on BS and were more likely to minimize DV, attribute blame to the victim, and excuse the abuser than those who scored low on RWA and BS (Christopher & Mull, 2006). People who highly endorse RWA believe in traditional gender roles and are more likely to view a victim, especially one that violates traditional gender roles, as deserving of her abuse (Christopher & Mull, 2006).

Taken together, the above discussed results demonstrate that high scores on RWA predict more punitive attitudes and endorsement of certain forms of violence toward those who are perceived to differ from the norm. Additionally, high endorsement of RWA is predictive of high endorsement of BS. Consequent to the discussed findings, it is hypothesized that those who score high on RWA will be more likely to respond negatively and in an unsupportive and even punitive manner toward DV victims.

Social dominance orientation and domestic violence. Another personality factor of interest for the current study is social dominance orientation (SDO) (Whitley, 1999). Similar to RWA, SDO is a measure of forms of prejudice (Pratto, Sidanius, Stallworth, & Malle, 1994; Whitley, 1999). However, Whitley (1999) demonstrated that RWA and SDO are two distinct concepts that measure different forms of prejudice. SDO refers to the endorsement of views of the superiority of one's in-group and prejudicial and discriminatory attitudes toward members of out-groups (Pratto, Sidanius, Stallworth, & Malle, 1994; Whitley, 1999). Further, Whitley found that SDO acts as a primary factor underlying prejudice while RWA was found to play a secondary role. Additionally, SDO is a politically neutral measure while RWA has been considered by some as a measure with certain political undertones (Pratto, Sidanius, Stallworth,

& Malle, 1994; Whitley, 1999). To this author's knowledge, there have not been any studies done to examine the role of SDO in the endorsement of negative attitudes toward DV victims. Despite this, those who score high on measures of SDO also adhere to traditional roles (Whitley, 1999) and score higher on measures of chauvinism as well as opposing women's rights (Pratto, Sidanius, Stallworth, & Malle, 1994). These findings combined with Whitley's finding that SDO acts as a primary factor for prejudice against multiple groups such as Black and Homosexuals convey that SDO is to consider for the current study. Consequently, SDO will be included in this study in an exploratory fashion. That is, the current project will measure how endorsement of SDO relates to attitudes toward DV victims and these findings will be compared with RWA to see which acts as a primary factor in negative attitudes toward DV victims.

The situation and domestic violence. The situation in which the abuse occurs also contributes to how much blame is attributed to the victim. Although there are a variety of situational factors that can contribute to negative attitudes toward DV victims, one of central interest is if the victim decides to remain with her abuser. Compared to victims who decided to leave their abusers, victims who decided to remain with their abusers received more blame and their abuse was minimized more (Yamawaki, Shipp, Harlos, Pulsipher & Swindler, 2012).

Attitudes toward victims who remain with their abusers are critical to understand as almost all victims experience DV over several years and most attempt to leave the abuser about five times before they leave the abusive situation entirely (Heise, Ellsberg, & Gottemoeller, 1999; Okun, 1986, as cited in Yamawaki et al., 2012). Investigating this situation, then, is more realistic than situations where no history of abuse is presented and holds greater implications for helping to understand factors that contribute to DV as it better represents the dynamics of DV in society. Based on the findings discussed previously, it is hypothesized that victims who remain

with their abusers will be blamed more than victims who leave their abusers and that victims who stay with their abusers will receive more negative and unsupportive attitudes than victims who leave their abusers.

Gender differences and domestic violence. Gender differences also predict attitudes which minimize the severity of DV, blame the victim, and excuse the abuser (Beeble, Post, Bybee, & Sullivan 2008; Flood & Pease, 2009; Yamawaki, Ostenson, & Brown, 2009). Men are less empathetic with a female victim, assign more blame to a female victim, and condone the behavior of the perpetrator more so than women (Beeble, Post, Bybee, & Sullivan 2008; Bryant & Spencer, 2003; Flood & Pease, 2009; Reidy, Shirk, Sloan, & Zeichner, 2009; Yamawaki, Ostenson, & Brown, 2009). Bryant and Spencer (2003) suggest that this gender difference exists because women identify more with a female DV victim than men. This is why women, in contrast to men, tend to blame the abuser more, tend to not minimize the severity of the abuse, and also tend not to blame the victim as much as men (Beeble, Post, Bybee, & Sullivan 2008; Flood & Pease, 2009; Bryant & Spencer, 2003). Reidy, Shirk, Sloan, and Zeichner (2009) investigated the gender differences in predicting physical aggression toward a female confederate in an aggression laboratory paradigm. Specifically, the researchers were interested in finding if hypermasculine males (men who strongly adhere to traditional or stereotypical gender roles) are more likely to demonstrate physical aggression compared to low-masculine males. Similar to previous research, hypermasculine males were more likely than low-masculine males and women to convey aggression towards the female confederate in the paradigm (Reidy, Shirk, Sloan, & Zeichner, 2009). This was even more pronounced when the female confederate violated traditional gender role expectations in some way (Reidy, Shirk, Sloan, & Zeichner, 2009). The findings from Reidy, Shirk, Sloan, and Zeichner (2009) fall in line with previous

research that found that gender differences in blaming a DV victim were especially pronounced for men who strongly uphold traditional family values and gender roles (Bryant & Spencer, 2003; Flood & Pease, 2009). Hypermasculine males or men who highly endorse GRT, then, condone violence against women (Flood & Pease, 2009; Yamawaki, Ostenson, & Brown, 2009) and are more likely to convey intentions of violence against women (Flood & Pease, 2009; Reidy, Shirk, Sloan, & Zeichner, 2009). Based on previous findings regarding gender differences in attitudes toward DV victims, it is hypothesized that men will be less supportive of and react more negatively toward female DV victims compared to women.

The Current Study

As discussed above, negative attitudes toward DV victims and negative perceptions of DV contribute to secondary victimization. Therefore, the main aim of this project is to identify factors that contribute to negative and unsupportive attitudes toward DV victims. Additionally, the current study will focus on how these attitudes contribute to secondary victimization for female DV victims. The present study differs greatly from past research as the majority of previous studies related to others' attitudes toward domestic violence solely focused on others' tendency to blame victims, minimize the DV incident, and excuse the perpetrator. On the contrary, this study will focus on others' intention to effectively assist the victims. In particular, since both researchers and clinicians have identified some specific attitudes and behaviors to effectively assist and/or help DV victims, the present study focuses not only on blame attribution but will also examine attitudes and intentions that could be harmful and/or helpful to DV victims. Based on the findings discussed previously, the following are hypothesized to contribute to negative and unsupportive attitudes toward female DV victims:

Hypothesis 1: greater endorsement of hostile sexism (HS) and benevolent sexism (BS) will predict negative and unsupportive attitudes toward female DV victims;

Hypothesis 2: higher endorsement of gender-role traditionality (GRT) will predict negative and unsupportive attitudes toward female DV victims;

Hypothesis 3: higher endorsement of right-wing authoritarianism (RWA) will predict negative and unsupportive attitudes toward female DV victims;

Hypothesis 4: men will blame the victim more and provide more negative and unsupportive attitudes toward female DV victims compared to women; and

Hypothesis 5: female victims who remain with their abusers will experience more negative and unsupportive attitudes and victim blaming compared to victims who leave their abusers.

Additionally, the relationship between the endorsement of social dominance orientation (SDO) and negative and unsupportive attitudes toward female DV victims will also be explored. These findings will be compared with those of RWA in order to help determine which personality factor is a better predictor of negative and unsupportive attitudes toward female DV victims.

Methods

Participants

The participants in this study were undergraduate students who were recruited from introductory psychology classes at Brigham Young University. There were 187 total participants with 110 women and 76 men. The majority of the students in this study identified as White/Caucasian (85%), while only 5.3% identified as Hispanic/Latino, 1.6% identified as Asian, 4.8% identified as mixed race, and the remaining 2.7% identified as Other or did not specify their race/ethnicity. The average age of the participants was 21, with a range of 17-52 years. The participants were informed that the purpose of this study was to examine how

individuals view the interactions between intimate partners. Before conducting this study, the investigators sought approval from Brigham Young University's Institutional Review Board (IRB) approval and the experimenters treated all participants in accordance with the ethical guidelines of the American Psychological Association. Confidentiality and anonymity were maintained for all participants. Participants were compensated by receiving extra credit in their introductory psychology courses.

Materials and Measures

Scenarios. A fictional scenario was developed and used in this study. The scenario describes a victim who discloses about her abuse to a friend. The following is the scenario that was provided to participants:

Imagine that you have a close friend named Lucy and you have been friends for several years. One day, when you and Lucy are spending time together, she confides in you that her husband, Jacob, lost control of his anger during a recent disagreement. Jacob became so angry that he beat Lucy. This is not the first time that Lucy has confided in you about Jacob's anger and violent behavior; in fact, Lucy has discussed with you a similar situation several times in the past.

To manipulate the impact of the victim's decision to leave or stay with her abuser, participants who were assigned to the staying scenario read the following instructions: "Imagine that after she has told you everything about what happened with Jacob that Lucy has now informed you that she has decided to remain with Jacob." Likewise, participants who were assigned to the leaving scenario read the following instructions: "Imagine that after she has told you everything about what happened with Jacob that Lucy has now informed you that she has decided to leave Jacob." Participants were randomly assigned to leave and stay conditions with 46% of participants assigned to the stay condition and 54% assigned to the leave condition.

Support for the victim measure. To measure the degree to which participants support the hypothetical victim a scale was developed and implemented in this study; the support for the victim (SFV) scale. A clinician who works with DV victims was consulted in the creation of this scale. In addition to this consultation, the items on this scale were determined through findings from previous research (Chabot, Tracy, Manning, & Poisson 2009; Kaukinen, Meyer, & Akers 2012; Plitcha, 2007; Postmus, Severson, Berry, & Yoo 2009; West & Wendrei, 2002; Yam, 2000). These findings indicate that the following are important and recommended for appropriate and supportive responses toward DV victims: (1) provide emotional support; (2) advise the victim to leave the relationship (this does not mean demand or tell victim what to do, but it is the reverse of telling the victim to stay in order to ‘keep the family together’); (3) place blame on the abuser (not the victim); (4) offer help, including a place to stay or financial assistance (tangible aid); (5) directly asking if the partner is hitting or hurting her in any way – this has to be asked more than once for most cases because of the victims’ shame and reluctance to admit the situation; (6) establishing trust or warranting self as trustworthy; (7) choice: letting the victim know that she has choice in the matter is essential because it allows her to feel that she has power and is not helpless. Another facet of this is letting her know that she has the choice of how much or how little she chooses to share; (8) an element of safety – which is broken down into three sub-elements: (a) safety from abuser, (b) safety from shame, and (c) safety from institutional control. In total, the scale consists of 22 items.

The participants were instructed to imagine that Lucy is their good friend and were asked how likely they would do or say the following after reading the scenario: (1) I will do anything to help her,” (2) “I will insist that Lucy leaves Jacob (reverse scored),” (3) “This is in no way Lucy’s fault, but completely the fault of Jacob,” (4) “If Lucy doesn’t leave Jacob then she is also

at fault (reverse scored),” (5) “I will offer as many material resources as possible that she may need (reverse scored),” (6) “In order for me to support Lucy or help her, I need to know the details of this incident such as frequency of the incident (reverse scored),” (7) “If Lucy stays with Jacob, I will despise her decision (reverse scored),” (8) “If she doesn’t want this to happen again, she shouldn’t make Jacob angry (reverse scored),” (9) “I will not tell Lucy what to do,” (10) “This is a couple’s quarrel and no one else should be involved (reverse scored),” (11) “Lucy does not have any choice but to leave Jacob (reverse scored),” (12) “I will insist that Lucy and Jacob together should receive couple’s counseling (reverse scored),” (13) “Lucy should stay with Jacob because things will get better (reverse scored),” (14) “If Lucy leaves Jacob, she will break the sacred marriage covenant (reverse scored),” (15) “I will only provide support if Lucy leaves Jacob (reverse scored),” (16) “I will call her family, friends, and the police to report what happened (reverse scored),” (17) “I will tell Lucy, ‘I would never put up with that!’ (reverse scored),” (18) “I will tell Lucy to leave Jacob right away (reverse scored),” (19) “I will confront Jacob (reverse scored),” (20) “I will tell Lucy that she would experience PTSD and depression in the future if she does not leave Jacob (reverse scored),” (21) “I will ask Lucy why she does not make changes in her life? (reverse scored)” (22) “I will ask Lucy why she does not care about the effect this is having on her family and friends (reverse scored).” Participants rated all 22 items on a seven-point Likert scale that ranged from 1 (*extremely unlikely*), 2 (*somewhat unlikely*), 3 (*unlikely*), 4 (*neutral*), 5 (*likely*), 6 (*somewhat likely*), to 7 (*extremely likely*). Higher scores reflected a greater intention to support the victim while lower scores will convey less intended support for the victim.

Right-wing authoritarianism (RWA) scale. According to Benjamin (2006), the right-wing authoritarianism (RWA) scale was developed by Altemeyer (1996) to measure

conservative ideology. RWA is defined by Altemeyer as including three dimensions: submissiveness to authority figures, endorsing conventional thought, and a tendency to aggress in ways that are acceptable to authority figures (Benjamin, 2006). For the purposes of this study, the political orientation of the RWA scale that is sometimes implied was not of interest, but rather, the negative attitudes toward members of groups who are seen as acting unacceptable to authority figures was of interest. The version of the RWA scale that was implemented in this study consists of 22 items rated on a seven-point Likert-scale that ranged from 1 (*extremely unlikely*), 2 (*somewhat unlikely*), 3 (*unlikely*), 4 (*neutral*), 5 (*likely*), 6 (*somewhat likely*), to 7 (*extremely likely*). An example of the items on this scale is, “Women should have to promise to obey their husbands when they get married.” Higher scores reflected a greater endorsement of conservative ideology while lower scores conveyed less endorsement of conservative ideas. The reliability of the RWA scale used in this study was $\alpha = .87$.

Ambivalent sexism inventory (ASI). The Ambivalent Sexism Inventory is a 22-item inventory with two subscales—Hostile Sexism and Benevolent Sexism. It was developed by Glick and Fiske (1996) to measure the two subtypes of ambivalent sexism – benevolent sexism and hostile sexism. Benevolent sexism represents an endorsement of views of women in which women are “pure,” “submissive,” and require “protection” provided by men. Hostile sexism, on the other hand, represents the other subtype of ambivalent sexism in which negative stereotypes of women who defy traditional gender prescribed behavior are endorsed. These include ideas like “women are merely seductresses,” “women are trying to control men,” and “women do not deserve the same opportunities as men.” Participants responded to the items by using a 7-point Likert-type scale coded as 1 (*strongly disagree*), 2 (*moderately disagree*), 3 (*disagree*), 4 (*neutral*), 5 (*agree*), 6 (*moderately agree*), to 7 (*strongly agree*). Higher scores represented

greater endorsement of AS. An example of items on the Hostile Sexism subscale is, “When women lose to men in fair competitions they typically complain about being discriminated against”; an example of items on the Benevolent Sexism subscale is, “Women should be cherished and protected by men.” The reported reliability for Benevolent Sexism and Hostile Sexism subscales in this study were $\alpha = .84$ and $\alpha = .87$, respectively.

Social dominance orientation (SDO) scale. The social dominance orientation (SDO) scale measures the endorsement of stereotypical views that legitimize prejudice toward out-groups for a particular self-identified in-group (Pratto, Sidanius, Stallworth, & Malle, 1994; Whitley, 1999). The scale was developed by Pratto, Sidanius, Stallworth, and Malle (1994) and the version used in the current study is the 16-item version, which had a reported internal reliability of $\alpha = .90$. Participants rated their attitudes toward each of the 16 items on a seven point likert-type scale coded as very (1) *very negative*, (2) *negative*, (3) *slightly negative*, (4) *neither positive nor negative*, (5) *slightly positive*, (6) *positive*, (7) *very positive*. An example item from the 16-item SDO scale is: “If certain groups stayed in their place, we would have fewer problems.” Higher scores on this measure indicated greater endorsement of SDO.

Victim blame attribution scale. Another dependent measure in this study was the degree to which participants placed blame on the DV victim for being hit by her partner. This was measured by the victim blame attribution (VBA) scale which was developed by Yamawaki, Ostenson, and Brown, (2009). This measure was modified for this study by changing the names to Lucy and Jacob for the victim and abuser, respectively. The VBA scale is a five item scale designed to measure the degree to which participants blame a victim of DV for the violence she endures. It includes the following items: (1) Lucy had some fault in this incident, (2) Lucy deserved to be hit, (3) Lucy unconsciously wants to be in an abusive relationship, (4) Lucy has

some responsibility for creating the situation, and (5) Lucy should be blamed for being in the situation. Participants will rate these items on a Likert-type scale that includes, 1 (*strongly disagree*), 2 (*moderately disagree*), 3 (*disagree*), 4 (*neutral*), 5 (*agree*), 6 (*moderately agree*), to 7 (*strongly agree*). Higher scores on this measure indicated the degree to which the participant tended to blame the victim of DV. The internal reliability for the VBA scale used in this study was $\alpha = .83$.

Attitudes towards women scale. The attitudes towards women scale (AWS) was developed by Spence and Helmreich (1972) to measure attitudes about the rights and roles of women in six major areas in society (Loo & Thorpe, 2005) and is a common scale used to measure gender-role traditionality. These areas include: (a) vocational, educational, and intellectual roles; (b) the freedom and independence rights of women compared to men in society; (c) the acceptability of various dating and etiquette behaviors for men and women; (d) the acceptability of drinking, swearing, and joke-telling behaviors; (e) the issue of premarital sex; and (f) attitudes toward marital relationships and obligations. The version of the AWS used in this study consists of 15 items. Participants rated the items on a seven point Likert-type scale as follows: 1 (*strongly disagree*), 2 (*moderately disagree*), 3 (*disagree*), 4 (*neutral*), 5 (*agree*), 6 (*moderately agree*), to 7 (*strongly agree*). An example of the items included on the scale is: “Women should worry less about their rights and more about becoming good wives and mothers.” Higher scores on the AWS demonstrated a higher endorsement of traditional views of women while lower scores demonstrated a lower endorsement of traditional views of women. The internal reliability for the AWS scale used in this study was $\alpha = .85$.

Procedure

Participants were recruited from introductory psychology courses at Brigham Young University. Participants completed this study online through the SONA system and by using a Qualtrics survey. Participants were randomly assigned into approximately equal groups to the leave and remain conditions. Confidentiality and anonymity were maintained and students gave their informed consent online before they completed the online surveys. This study was divided into two parts. Participants were informed that in order to receive full credit, they must complete both parts of the study. In the first part of the study, all participants completed the following questionnaires in this order: (1) RWA scale, (2) ASI, (3) SDO, (4) AWS, and (5) a demographic survey which asked the following: age, gender, and race and/or ethnicity. After completing the first part of the study, participants were informed that they would receive an email link to complete the second part of the study within two days and that they must complete the second part of the study in order to receive full credit for their participation.

In the second part of the study, all participants initially read an identical fictional scenario regardless of which condition they are randomly assigned to. The fictional scenario included all of the information regarding Lucy and Jacob's DV incident and Lucy's subsequent disclosure, however, at this point in the study, the scenario did not include Lucy's decision to stay with or to leave Jacob. After reading the fictional scenario, all participants answered questions from the support for the victim measure. Then, participants assigned to the condition in which the victim decides to remain with her abuser were informed of Lucy's decision to remain with Jacob. After they were informed of Lucy's decision to remain with Jacob, participants were asked questions from the victim blame attribution scale. The same procedure took place for participants assigned to the condition in which the victim decides to leave her abuser. The only difference is that

participants in the leave condition were informed of Lucy's decision to leave Jacob. After this, these participants answered questions from the victim blame attribution scale.

Data Analytic Strategy

Data screening and demographic information. All data analyses were completed using the statistical package SPSS. Before the data was analyzed, it was screened for missing data. Little's MCAR test was conducted and the data was found to be missing at random. In addition to this, the data were screened visually to examine normality in their distribution. This analysis showed normality in distribution. After the data was screened for missing data and normality, demographic information provided by the participants was analyzed by descriptive statistics including the mean.

Factor analysis. The original support for the victim (SFV) measure created for this study contained 22 items. To determine if there were any subtypes of intentions to support the victim, to examine which items overlapped in what they measured, and to reduce the number of items on the scale, a principal components analysis was conducted with a varimax rotation. Factors were selected based on their eigenvalues being greater than one. Initial eigenvalues indicated that the first six factors accounted for the following respective variance: factor 1, 19%, factor 2, 15%, factor 3, 9%, factor 4, 7%, factor 5, 5%, and factor 6, 5% respectively. Solutions with four, five and six factors were conducted and examined with a varimax rotation. While the fifth and sixth factor solutions had eigenvalues greater than one and the leveling off of the scree plot indicated six factors total, the four factor solution was preferred. The four factor solution, which accounted for 50% of the variance, was the preferred solution because the items that loaded onto the factors in this solution theoretically matched and had a sufficient number of item loadings. The fifth and sixth factors from the fifth and six factor solutions, on the other hand,

contained an insufficient number of loadings which were difficult to interpret. Consequently, the four factor solution was selected. The eigenvalues for factors one through four were, 4.25, 3.24, 1.91, and 1.5, respectively. The four factors, their items, communalities, and respective Cronbach's alphas can be found in table 1.

Table 1

Factor Loadings, Communalities, and Cronbach's Alphas Based on a Principal Components Analysis with a Varimax Rotation

Factor & Item Loadings	Communality	Cronbach's Alpha
Judge (17, 20-22)		$\alpha = .74$
17. I will tell Lucy, 'I would never put up with that!'	0.53	
20. I will tell Lucy that she would experience PTSD and depression in the future if she does not leave Jacob.	0.76	
21. I will ask Lucy why she does not make changes in her life?	0.78	
22. I will ask Lucy why she does not care about the effect this is having on her family and friends.	0.76	
Leave (7, 11, 15, & 18)		$\alpha = .69$
7. If Lucy stays with Jacob, I will despise her decision.	0.52	
11. Lucy does not have any choice but to leave Jacob.	0.72	
15. I will only provide support if Lucy leaves Jacob.	0.60	
18. I will tell Lucy to leave Jacob right away.	0.63	

Stay (12-14)		$\alpha = .65$
12. I will insist that Lucy and Jacob together should receive couple's counseling.	0.73	
13. Lucy should stay with Jacob because things will get better.	0.81	
14. If Lucy leaves Jacob, she will break the sacred marriage covenant.	0.57	
Ignore (8-10)		$\alpha = .55$
8. If she doesn't want this to happen again, she shouldn't make Jacob angry.	0.62	
9. I will not tell Lucy what to do.	0.65	
10. This is a couple's quarrel and no one else should be involved.	0.78	

Note. Factor loadings < .5 are suppressed.

The factors and their items were grouped as the following: Judge (items 17, 20-22), Leave (7, 11, 15, and 18), Stay (12-14), and Ignore (8-10). The items that loaded on the Judge factor related to an outside observer judging the DV victim negatively. The items that loaded on the Leave factor related to an outside observer trying to force the victim to leave her abuser. The items that loaded on the Ignore factor related to ignoring the DV victim's situation and assuming that it would be ameliorated without the observer's help. The factors theoretically align with ways in which observers in informal support systems provide unsupportive and negative reactions to DV victims. The reactions include placing contingency on help (see items from Leave factor), placing judgment and blame on the victim (see Judge factor), providing suggestions for the victim to remain with abuser for the "sake of the family," or other traditional values (see Stay factor), and not knowing what to do or not providing adequate help and support (see Ignore factor). The factors and their respective item loadings from the four factor solution, then, were not only statistically sound, but they fit theoretically as well.

Despite the fact that the four factors were a good theoretical fit and all but the Ignore items had Cronbach's alphas in the acceptable range (.60-.80) (Cooksey, 2014), it was decided to compile the items together for a composite score rather than using the four subscales designated by the factor analysis as the outcome measure. This was because the original hypotheses of this study did not specify subtypes of victim support; rather, general supportive attitudes and intentions to help a victim of domestic violence were the focus and interest of this study. The SFV measure used in this study contained 14 items total that were specified by the factor analysis. The Cronbach's alpha for the SFV measure with the combined 14 items was $\alpha = .64$.

Hypothesis testing. Separate regression analyses were conducted to test how much of the variance in victim blaming and support for the victim could be attributed to the personality factors RWA, GRT, AS, and SDO. Additionally, multiple regression analyses were performed to determine how much of the observed unique variance in the support for the victim (SFV) and the VBA measures is attributable to RWA, GRT, AS, and SDO. The independent variables included AS, RWA, GRT, and SDO measured by the RWA scale, the AWS scale, the ASI scale, and the SDO scales, respectively. The dependent variables included victim blaming and support for the victim, measured by the victim blame attribution (VBA) and support for the victim (SFV) scales, respectively. To analyze the extent to which participants blame the victim as measured by the victim blame attribution scale (VBA), a one-way ANOVA was conducted. The ANOVA was conducted to measure how victim blaming varied by gender. Lastly, a MANOVA was conducted to determine how victim blaming and support for the victim varied by both conditions (stay vs. leave).

Results

Descriptive statistics. Below are display descriptive statistics for all measures, broken down by gender and condition (Table 2).

Table 2

Descriptive Statistics all Measures by Gender and Condition

Condition	Gender		N	Mean	SD	Range
Stay	Males	GRT	42.00	78.43	17.30	37.0-118.0
		RWA	42.00	85.43	19.22	43.0-116.0
		HS	42.00	40.36	11.43	15.0-62.0
		BS	42.00	52.95	10.08	16.0-90.0
		SDO	40.00	47.95	17.29	37.0-118.0
		SFV	40.00	42.80	8.72	27.0-63.0
		VBA	41.00	17.27	7.23	6.0-31.0
	Females	GRT	39.00	71.26	14.38	36.0-101.0
		RWA	42.00	83.45	18.49	31.0-122.0
		HS	44.00	44.48	10.34	22.0-62.0
		BS	44.00	43.11	8.54	21.0-60.0
		SDO	37.00	42.92	14.23	16.0-83.0
		SFV	42.00	40.95	9.17	17.0-60.0
		VBA	43.00	14.67	4.65	6.0-23.0
Leave	Males	GRT	31.00	79.81	13.46	51.01-105.0
		RWA	34.00	93.21	10.63	41.0-76.0
		HS	32.00	44.50	7.98	26.0-59.0
		BS	33.00	53.85	7.42	38.0-67.0

	SDO	31.00	46.90	13.39	19.0-75.0
	SFV	33.00	43.48	7.79	31.0-61.0
	VBA	33.00	14.33	5.89	6.0-25.0
Females	GRT	63.00	73.78	16.18	34.0-113.0
	RWA	63.00	88.92	13.75	45.0-115.0
	HS	61.00	44.64	11.60	11.0-68.0
	BS	64.00	45.77	9.03	19.0-63.0
	SDO	60.00	44.82	13.08	16.0-84.0
	SFV	61.00	41.33	9.52	18.0-60.0
	VBA	63.00	12.25	5.19	6.0-24.0

Note. GRT = Gender-role traditionality, RWA = Right-wing authoritarianism, HS = Hostile sexism, BS = Benevolent sexism, SDO = Social dominance orientation, SFV = Support for the victim, & VBA = Victim blame attribution.

Hypothesis testing results. To test hypothesis 1 that greater endorsement of hostile sexism (HS) and benevolent sexism (BS) would predict less support toward the female DV victim, regression analyses were performed. HS was predictive of less support for the victim, $F(2, 168) = 6.43, p = .001$. BS was not a significant predictor of less support for the victim, $F(2, 168) = , p = .4$. Similarly, HS was predictive of victim blaming, $F(2, 172) = 3.91, p = .04$, and BS was not predictive of victim blaming, $F(2, 172) = , p = .117$. Therefore, hypothesis 1 was partially supported in that HS was a significant predictor of less support for the victim and greater victim blaming, while BS was not.

Table 3

Regression Models with Support for the Victim and Victim Blaming as the Dependent Variable and HS and BS as the Predictor Variables

Variables	R^2	Adj. R^2	p -value	B (Std. Error)	Beta	p -value
DV: SFV	0.07	0.06	0.00			
HS				.21 (.06)	0.25	0.00
BS				.06 (.07)	0.06	0.40
DV: VBA	0.04	0.03	0.02			
HS				.09 (.04)	0.16	0.04
BS				.07 (.05)	0.12	0.12

Note. DV = Dependent variable, SFV = Support for the victim, HS = Hostile sexism, BS = Benevolent sexism, and VBA = victim blaming.

To test hypothesis 2 that higher endorsement of gender-role traditionality (GRT) would predict less support for the the female DV victim and more victim blaming, regression analyses were performed. The first regression analysis examined how much of the observed variance in support for the victim was accounted for by GRT. GRT was not predictive of less support for the victim, $F(1, 169) = 2.1, p = .163$. However, GRT was a significant predictor of greater blame placed on the victim, $F(1, 170) = 11.8, p = .001$. Consequently, hypothesis 2 was also partially supported as increased endorsement of GRT was predictive of increased victim blaming, but it was not predictive of less support for the DV victim (See Table 4).

Regression analyses were performed to test hypothesis 3 which posited that higher endorsement of right-wing authoritarianism (RWA) would predict less support for the DV victim and increased victim blaming. RWA was a significant predictor of less support for the DV victim $F(1, 170) = 9.56, p = .002$. However, RWA was not a significant predictor of victim blaming, $F(1, 175) = 3.06, p = .08$. Therefore, hypothesis 3 was only partially supported since

higher scores on RWA predicted less support for the DV victim as the hypothesis outlined. However, the hypothesis also proposed that higher scores on RWA would predict increased victim blaming and this was not shown in the results (See Table 5).

Table 4

Regression Models with Support for the Victim and Victim Blaming as the Dependent Variables and GRT as the Predictor Variable

Variables	R^2	Adj. R^2	p -value	B (Std. Error)	Beta	p -value
DV: SFV	0.01	0.01	0.16			
GRT				.06 (.04)	0.11	0.16
DV: VBA	0.07	0.06	0.00			
GRT				.10 (.03)	0.25	0.00

Note. DV = Dependent variable, SFV = Support for the victim, VBA = Victim blame attribution and GRT = Gender-role traditionality

Table 5

Regression Models with Support for the Victim and Victim Blaming as the Dependent Variables and RWA

Variables	R^2	Adj. R^2	p -value	B (Std. Error)	Beta	p -value
DV: SFV	0.05	0.05	0.00			
RWA				.13 (.04)	0.23	0.00
DV: VBA	0.02	0.01	0.08			
RWA				.05 (.03)	0.13	0.08

Note. DV = Dependent variable, SFV = Support for the victim, VBA = Victim blame attribution, and RWA = Right-wing authoritarianism.

Following the recommendation from Whitley (1999) to examine if social dominance orientation (SDO) is a better predictor of some forms of prejudice compared to RWA, regression analyses were performed using SDO as the predictor variable and support for the victim and victim blaming as the outcome variables. SDO was not a significant predictor of the observed variance in support for the DV victim, $F(1, 161) = 1.3, p = .26$. SDO, however, was a significant predictor of victim blaming, $F(1, 163) = 9.91, p = .002$. Interestingly, RWA was predictive of less support for the DV victim while SDO was predictive of increased victim blaming. Because the two measures, SDO and RWA, show different results for the dependent measures of victim blaming and support for the victim, respectively, it is possible that this finding falls in line with what Whitley's investigation revealed about RWA and SDO underlying different forms of prejudice.

Table 6

Regression Models with Support for the Victim and Victim Blaming as the Dependent Variables and SDO as the Predictor Variable

Variables	R^2	Adj. R^2	p -value	B (Std. Error)	Beta	p -value
DV: SFV	0.01	0.00	0.26			
SDO				.05 (.09)	0.26	0.26
DV: VBA	0.06	0.05	0.00			
SDO				.10 (.03)	0.24	0.00

Note. DV = Dependent variable, SFV = Support for the victim, and SDO = Social dominance orientation, and VBA = Victim blame attribution.

In addition to the individual regression analyses that were conducted to test hypotheses 1-3, multiple regression analyses were also performed to test these hypotheses. These hypotheses

predicted that higher endorsement of the independent variables HS, AS, GRT, RWA, and SDO would predict less support for and more blame placed on the DV victim. Although linear regression analyses were conducted on each predictor and outcome variable separately, multiple regression analyses were chosen also for analysis since there was more than one predictor variable of interest in this study.

In the first multiple regression analysis, RWA, SDO, BS, HS, and GRT were used as predictor variables and victim blaming was the outcome variable. The predictor variables together, RWA, SDO, BS, HS, and GRT accounted for 9% of the observed variance in VBA, $R^2 = .09$. The overall regression model was significant, $F(5, 142) = 2.81, p = .019$. None of the predictors were significant in accounting for unique variance in victim blaming. Consequently, no summary table is provided.

The second multiple regression analysis again used RWA, SDO, BS, HS, and GRT as predictor variables and support for the victim was used as the outcome variable. The overall regression model was significant, $F(5, 139) = 2.81, p = .005$, and accounted for 8% of the observed variance in SFV, $R^2 = .08$. RWA was a significant independent predictor of less support for the victim, $p = .014$. In addition to RWA, HS was also a significant independent predictor of less support for the victim, $p = .039$. All other predictors – SDO, AS, and GRT - were not significant predictors of less support for the victim.

Table 7

Multiple Regression Model with Support for the Victim as the Dependent Variable and HS, BS, GRT, and SDO as the Predictor Variables

Variables	R^2	Adj. R^2	p -value	B (Std. Error)	Beta	p -value
DV: SFV	0.11	0.08	0.01			
RWA				.13 (.05)	0.25	0.01
HS				.17 (.08)	0.21	0.04
GRT				-.06 (.06)	-0.1	0.35
SDO				.02 (.06)	0.02	0.8
BS				-.01 (.08)	-0.02	0.87

Note. DV = Dependent variable, SFV = Support for the victim, RWA = Right-wing authoritarianism, HS = Hostile sexism, GRT = Gender-role traditionality, SDO = Social dominance orientation, and BS = Benevolent sexism.

Because no single predictor variable emerged as accounting for unique variance for the dependent measure VBA in the first regression analysis, a test for multicollinearity was conducted because when this result occurs in a multiple regression analysis, one possible explanation is that the predictors are highly ¹related with one another and it is possible that multicollinearity has occurred (Cooksey, 2014). Pearson r correlations were conducted among the predictor variables to test for multicollinearity. The relationships between the predictor variables HS, BS, RWA, SDO, and GRT were all moderately weak (+.30 to +.39) to moderately (+.40 to +.69) related (Cooksey, 2014). For correlations among predictor variables to be considered as showing multicollinearity, their correlations are +.90/-.90 or higher (Cooksey, 2014) (See table 8). As such multicollinearity did not occur¹

¹ *Note.* In addition to testing the intercorrelations between the predictor variables, interaction effects were tested for between the predictors and the outcome variables. However, no interaction effects between the predictor variables and the outcome variables were found.

Table 8

Intercorrelations between RWA, HS, BS, SDO, and GRT

Measure	1	2	3	4	5
1. RWA	-				
2. HS	0.41**	-			
3. BS	0.45**	0.09	-		
4. SDO	0.35**	0.40**	0.26**	-	
5. GRT	0.52**	0.53**	0.34**	0.49**	-

Note. ** = Correlation is significant at the $p = .01$ level. RWA = Right-wing authoritarianism, HS = Hostile sexism, BS = Benevolent sexism, SDO = Social dominance orientation, and GRT = Gender-role traditionality.

To test hypothesis 4 that male participants would provide less support for the female DV victim and would place more blame on the victim compared to female participants, a MANOVA was conducted. The results of the MANOVA indicated a significant difference for male and female participants on the dependent outcomes of victim blaming and support for the victim, Wilk's lambda = .95, $F(1, 171) = 4.52$, $p = .012$, and partial $\eta^2 = .051$.

Separate ANOVA tests were conducted for each dependent variable for gender at the $\alpha = .025$ level. There was a significant difference between female and male participants on victim blaming, $F(1, 171) = 8.9$, $p = .003$, $\eta = .05$, with male participants ($M = 16$, $SD = 6.1$) scoring significantly higher than female participants ($M = 13.31$, $SD = 5.1$). There was not a significant difference between, males ($M = 43$, $SD = 8.3$) and females ($M = 41.24$, $SD = 9.4$), $F(1, 171) = 1.61$, $p = .21$, $\eta = .01$ for support for the victim. Therefore, hypothesis 4 was only partially supported as there were significant differences between males and females on victim blaming, but there was not a significant difference between these groups on support for the victim.

Table 9

ANOVA Results for MANOVA Conducted for the Overall Model Using Gender as the Independent Variable and Victim Blaming and Support for the Victim as the Dependent Variables

	Males (N = 72)		Females (N = 101)		F (1, 171)	P	Partial Eta Squared
	Mean	SD	Mean	SD			
VBA	16	6.1	13.31	5.1	8.89	0.03	0.1
SFV	43	8.3	41.24	9.4	1.61	0.21	0.01

Note. VBA = Victim blaming, and SFV = Support for the victim.

The final hypothesis, hypothesis 5, posited that the female victim who remained with her abuser would experience more victim blaming from participants than the female victim who left her abuser. Additionally, any gender differences in blaming between male and female participants were also tested for. To test this, a 2 (Condition) X 2 (Gender) ANOVA was conducted. Main effects of condition $F(1, 179) = 9.31, p = .003, \eta = .050$ and gender of the participants $F(1, 179) = 7.09, p = .008, \eta = .039$ were found for victim blaming. Participants in the stay condition blamed the victim significantly more than participants in the leave condition. Additionally, male participants blamed the victim significantly more than did female participants. There was no interaction effect for gender and condition on victim blaming, $F(1, 179) = .09, p = .770, \eta = .00$. Although there was no interaction effect, the original hypothesis posited that participants in the stay condition would significantly blame the victim more than participants in the leave condition. The original hypothesis, then, was fully supported by the results of the ANOVA because a significant difference on victim blaming was found by condition as predicted by the hypothesis.

Table 10

2 X 2 ANOVA for Victim Blaming by Condition and Gender

	Conditions			
	Stay (N = 84)		Leave (N = 96)	
	Mean	SD	Mean	SD
VBA	15.94	6.15	12.6	5.5

VBA	Gender by Condition			
	Males (N = 41)		Males (N = 33)	
	Mean	SD	Mean	SD
	17.27	7.23	14.33	5.89
	Females (N = 43)		Females (N = 63)	
	Mean	SD	Mean	SD
	14.67	4.65	12.25	5.19

Note. VBA = Victim blaming, Stay = Condition where the victim stayed with her abuser, and Leave = Condition where the victim left her abuser.

Discussion

The overarching goal of the current project was to further investigate observers' attitudes towards and intentions to help and support domestic violence (DV) victims. Specifically, female victims in heterosexual relationships were focused on in the current study as this represents the most common demographic of DV victims in the United States and worldwide (Alhabib, Nur, & Jones, 2010; WHO, 2005). Additionally, secondary victimization propagated by informal supporters (e.g., friends, family, etc.) was the specific focus of this study because the majority of DV victims first report to a member of an informal support system before they seek out formal support systems like the police, healthcare providers, etc. (Chabot, Tracy, Manning, & Poisson 2009).

Similar to previous research that investigated underlying personality and conditional factors that are predictive of negative attitudes towards DV victims, the current study also examined these factors which included the two poles of ambivalent sexism (AS), benevolent sexism (BS) and hostile sexism (HS), gender-role traditionality (GRT) along with gender and the situation (i.e., the victim deciding to leave or remain with the abuser). An additional goal of this study was to investigate which personality factors are predictive of intentions to help and support DV victims. Specifically, right-wing authoritarianism (RWA) and social dominance orientation (SDO) were selected in predicting others' intentions to support and help DV victims since it was thought that a more dominant orientation would lead to more conditions placed on help and support. Both were compared in the current study as recommended by Whitley (1999) who found that RWA and SDO predict different forms of prejudice.

The focus on predicting observers' intentions to help and support DV victims set the current study apart from previous research that focuses on others' attitudes towards DV victims. The overall goals of the current project, then, were to (1) replicate previous findings in situational and personality factors that contribute to secondary victimization (e.g., victim blaming) and (2) examine which personality factors are predictive in greater intention to help and support the victim.

Personality Factors, Victim Blaming, and Support for the Victim

One of the aims of the present study was to investigate the predictive roles of personality factors on negative and support for DV victims. Specifically, HS, BS, GRT, RWA, and SDO were examined in their relation to victim blaming and support for the victim. In the original hypotheses, it was predicted that higher endorsement of HS, BS, GRT, RWA, and SDO would be predictive of increased victim blaming and less support for the victim.

HS, BS, victim blaming, and support for the victim. In line with the hypothesis, higher scores on HS were predictive of increased victim blaming and less support for the victim. BS, on the other hand, was not predictive of either victim blaming or support for the victim. This makes sense as HS constitutes general, adversarial views towards women as trying to manipulate and take power away from men (Glick & Fiske, 1996). The victim in the scenario was a female and her abuser was male in a heterosexual relationship. Therefore, participants who endorse more adversarial views towards women viewed the victim as (1) deserving blame for what happened and (2) that she should be told what to do as she may be trying to manipulate the situation to gain attention or control. Consequently, higher endorsement of HS was predictive of both increased victim blaming and less support for the victim.

In contrast to the hypothesis, BS was not a significant predictor of victim blame attribution and support for the victim. In a previous study by Yamawaki, Ostenen and Brown (2009), BS was a significant predictor of victim blaming. However the crucial difference between this study and their study was that there was no gender role violation depicted in the scenario. That is, the scenario in the previous study showed that the victim was abused because she came home from a party late at night with smell of alcohol, and therefore, broke traditional gender expectations. When a woman breaks traditional gender expectations in some way, victim blaming increases (Glick, Sakalli-Ugurlu, Ferreira, & de Souza, 2002). Since the woman's status as either 'good' or 'bad' was not manipulated in the current study, this may explain why BS was not predictive of increased victim blaming. As such, it is possible that observers with high BS view a woman who stays with her partner as good by following a man's 'authority' and may blame her less than a woman who decides to leave and, therefore, as "bad" by breaking her prescribed gender role in some way. Additionally, views of a woman as good or pure are not

highly related to a need for control over the situation in instructing the victim what to do as measured by the SFV measure. That is, the SFV measure mainly focused on outside observers' intentions and perceptions of what is appropriate to do in a DV incident rather than focusing on the victim behaving outside of socially proscribed ways. Therefore, it is plausible as the study design and measure used did not manipulate qualities of the victim or the situation that have been found to elicit more negative attitudes towards DV victims for those who endorse BS.

GRT, victim blaming, and support for the victim. Participants who endorsed GRT more blamed the victim more than scored lower on the measure of GRT. Although gender roles were not explicitly manipulated in the current study (e.g., Lucy was not doing anything 'inappropriate' for her prescribed role as the woman in the heterosexual relationship), the fact that she was hit by her partner Jake may have indicated something to the participants that Lucy did something to 'deserve' what happened to her and may explain why these participants blamed her more than participants who scored lower on GRT. People who strongly adhere to traditional gender roles consistently have been found to show more negative attitudes towards DV victims (Berkel, Vandiver, & Bahner, 2004; Flood & Pease, 2009). Previous research also indicates that those who score higher on GRT view DV victims as straying from their "rightful" place, and therefore, blame the victim more (Hillier & Foddy, 1993). Additionally, external observers who hold negative attitudes towards DV victims often view the victims as 'deserving' the abuse because, they reason, the victim must have done something wrong or must have a 'bad character' (Valor-Segura, Expósito, & Moya, 2011). This line of thinking, then, may be compounded with adherence to traditional gender roles as those women with 'good characters' do not 'deserve' to be abused. Capezza and Arriaga (2008) investigated how attitudes towards a psychologically abused woman by her husband would vary when she was presented in a traditional role (i.e., a

housewife) compared to a non-traditional role (i.e., a lawyer). They found that the woman in the traditional role received more positive attitudes from participants than the career woman. They reasoned that when a victim fulfills a traditional role, she is viewed as less deserving of blame since she has not strayed too far from her prescribed role to warrant punishment.

Strict adherence to traditional gender roles and its relationship to attitudes towards violence against women can also be seen in following conservative and fundamental religious beliefs and their relationship with supportive attitudes of violence against women. Although previous research findings in this area have been mixed because of different measurement methods, some research shows that more fundamental religious views (e.g., inerrancy of the Bible, the importance of male authority in the home, etc.) are associated with DV incidents (Berkel, Vandiver, & Bahner, 2004). Ellison, Bartkowski, and Anderson (1999) surveyed a sample of heterosexual Christian couples about their religious views, activities, and violence within their relationships. The authors found that when the husband was more conservative and fundamental in his religious beliefs (e.g., belief in male authority over the household, the authority of scriptures, etc.), than his wife, he was more likely to abuse his wife compared to husbands whose beliefs matched that of their wives. One explanation offered by the authors was that more conservative husbands may view their wives as challenging their authority and this may exasperate conflicts between them wherein the husband may resort to violence to establish his authority over his wife. Additionally, adherence to more traditional religious views may instruct couples to stay together and work out their 'marital problems' instead of focusing on helping the female DV victim find safety (Ellison & Anderson, 2001) and this presents an obstacle to escaping the cycle of violence. Therefore, more conservative religious views that are used to justify gender-role traditionality provide an example of how strict adherence to

traditional gender roles is associated with more permissive attitudes towards violence against women. Therefore, these findings support this part of the original hypothesis, and fall in line with previous research. The finding that higher endorsement of GRT is associated with increased victim blaming has been replicated cross-nationally (Yamawaki, Ostenson, & Brown, 2009) and has been cited as one of the most consistent predictive factors of negative attitudes towards DV victims (Bryant & Spencer, 2003; Hillier & Foddy, 1993).

In contrast to the hypothesis, GRT was not predictive of less support for the victim. Similar to BS, GRT also examines the prescribed social role for one's gender, especially for women. GRT examines an observer's moral judgment of how well someone is fulfilling her proper role. This type of judgement is an external attribution about the victim rather than an internal attribution of one's own role in the incident. The SFV measure focuses mainly on what an external observer should do and how much control he or she wants over the situation surrounding the DV victim. Therefore, GRT with its external, moral judgement of the victim in the incident rather than an internal judgement of an observer's role in the situation should not be predictive of supportive attitudes towards the victim.

RWA, victim blaming, and support for the victim. As hypothesized, participants who highly endorsed RWA also showed less support for the victim, but increased victim blaming. The items on the RWA measure examine one's submission to established authority and how those who rebel against the established authority deserve to be punished. Past research shows that those who endorse RWA more view dissenters of established authority figures as deserving of punishment (Benjamin Jr., 2006). In one study, participants who were not familiar with the famous Milgram prison study were shown a brief documentary that included clips from the original experiment and were then asked to rate the responsibility of the teacher in the film for

delivering shocks to the student (Blass, 1995). Participants who scored higher on RWA rated the teacher as less responsible for delivering shocks to the student (Blass, 1995). The authors reasoned that this is because those who endorse RWA more convey more obedience to authority figures and view punishment given by established authority as justifiable (Blass, 1995). Therefore, it is possible that those who scored higher on RWA view themselves as staying within an established authority's guidelines through which entitles them in their giving of support and suggestions to the victim. As such, less support is given to the victim.

RWA was not indicative of increased victim blaming. However, this falls in line with what the RWA scale measures, which is an adherence to established authority figures and punishment of dissenting groups (Altemeyer, 2004). While RWA has been shown to capture support for punishment of dissenters in previous research, this does not mean that those who score high on RWA believe that DV victims deserve the abuse they endure. The participants who scored high on RWA may have seen themselves as being more correct in giving suggestions to the victim, however, this does not mean that they viewed the victim as deserving punishment or being at fault.

SDO, victim blaming, and support for the victim. As mentioned previously, by following the recommendation of Whitley (1999), SDO was added as a predictor variable to the current study to examine which measure, RWA or SDO, would better predict victim blaming and support for the victim. SDO was predictive of increased victim blaming, but not of less support for the victim. Because this finding is a different outcome than what RWA predicted (i.e., less support for the victim), these results may be supportive of Whitley's findings that RWA and SDO predict different types of prejudice.

SDO measures the justification of certain groups holding power over other groups in society (Pratto, Sidanius, Stallworth, & Malle, 1994). These groups are seen as having a rightful place over lesser groups, and therefore, their control over less empowered groups is seen as right and fair (Pratto, Sidanius, Stallworth, & Malle, 1994). Participants who scored higher on SDO also scored higher on victim blaming. Therefore, it is possible that participants who score higher on SDO see themselves as part of an in-group and DV victims as belonging to an out-group. If this is the case, then the participants who scored higher on SDO would view members of an out-group as deserving the place they are in and the implications that come with that place. With a DV victim, then, this would relate to placing more blame on the victim.

SDO, however, was not predictive of less support for the victim. This could be because the participants who scored higher on SDO saw themselves as belonging to an in-group that is deserving of good circumstances and a DV victim as someone belonging to an out-group, and therefore, deserving of poor circumstances. This would relate more to placing blame on the victim and less with intentions to help and support a DV victim, as measured by the SFV measure.

Multiple regression analyses. When the predictor variables, HS, BS, GRT, RWA, and SDO were tested in the multiple regression analysis for victim blaming, none of the predictor variables emerged as contributing to the unique variance in victim blaming. The overall model was significant, but separately these personality measures did not contribute to unique variance observed in victim blaming. As discussed previously in the results section, this was not due to multicollinearity. However, because the measures used for the predictor variables were related to one another, this may explain why when they are entered into a model together, all the

predictors were significant, but separately none of the predictors accounted for unique variance in victim blaming.

Many factors, such as sexism, beliefs in a just world, adherence to traditional gender roles and gender (i.e., being male versus female) contribute to an observer's attitudes towards a female DV victim (Valor-Segura, Expósito, & Moya, 2011). As such, it is understandable that no one predictor variable uniquely accounted for the observed variance in victim blaming. This may also explain why the model as a whole only accounted for 9% of the variance in victim blaming. Additionally, in the original hypotheses, all of the predictor variables were predicted to account for increased victim blaming and no one predictor variable was suggested to account for more variability over another. Therefore, these results support the original hypotheses in this regard. Future studies could use step-wise or hierarchical regression analyses to further test the predictor variables used here to determine if any contribute to unique variance in victim blaming.

HS and RWA emerged as unique predictors for the observed variance in support for the victim. These results support findings from the individual regression analyses that were conducted because in these analyses, HS and RWA were predictive of less support for the victim. However, the model as a whole only accounted for 8% of the observed variance in support for the victim. As mentioned previously, this could be because many factors contribute to an outside observer's attitudes towards a DV victim. It is possible that HS and RWA emerged as unique predictors of less support for the victim because the items on these scales involve content that differs greatly from the other measures in that both contain items related to political orientation (RWA) and power structure as it relates to gender (HS). That is, RWA measures, to some extent, one's political orientation and mainly measures one's adherence to established authority (Altemeyer, 2004). As such, RWA differs from SDO which focuses on the

justification of certain groups holding positions of privilege over other groups (Altemeyer, 2004).

While HS does not measure how one views authority figures and external attributions of dissenting groups, it does measure negative and adversarial views of women as trying to “steal” power from men and trying to “get attention” (Glick & Fiske, 1996). As such, HS relates more to power than BS and GRT, which examine perceptions of women’s proper place, behavior, and fulfillment of proscribed roles rather than general adversarial views of women as endangering male authority (Flood & Pease, 2009; Glick & Fiske, 1996). Therefore, both HS and RWA relate to views on power in some way and this may explain why they emerged as unique predictors of intentions to support the victim compared to the other predictor variables.

Gender, Victim Blaming, and Support for the Victim

Gender and its influence on observers’ perceptions of the DV victim were also investigated in the current study. It was predicted that male participants would blame the victim more than female participants. Following the logic of previous research that showed gender differences in victim blaming (Bryant & Spencer, 2003), it was predicted that there would be gender differences in support for the victim as well with females showing greater intention to help and support the victim than males.

A significant difference between males and females on victim blaming was found with male participants blaming the victim more than female participants. This finding is consistent with previous research (Bryant & Spencer, 2003; Flood & Pease, 2009). This may be because females can better empathize with the female victim in the situation and, therefore, place less blame compared to males (Beeble, Post, Bybee, & Sullivan 2008). While some studies have

shown a gender difference in victim blaming, this finding is not always consistent. In one study, when gender was tested along with GRT, endorsement of traditional gender roles emerged as a significant predictor of negative attitudes towards DV victims and the gender difference disappeared (Valor-Segura, Expósito, & Moya, 2011). Some researchers stipulate that the inconsistent findings may be more reflective of the endorsement of gender-role traditionality (GRT) (Bryant & Spencer 2003; Flood & Pease, 2009; Valor-Segura, Expósito, & Moya, 2011), with men more often endorsing more traditional gender roles than women (Levant et al., 2002; Levant et al., 2003). In the current study, a significant gender difference was found in victim blaming. As discussed above, this difference could be attributable to the participants' gender alone or to higher endorsement of GRT among male participants.

A significant difference was not found between males and females on support for the victim. The SFV scale is designed to assess respondents' intention to support the victim with conditions of their terms, such as providing support contingent upon the victim leaves her abuser, convincing the victim to remain with her abuser to keep her marriage intact, showing disdain for the victim deciding to stay with her abuser, etc. This may indicate that there are not significant differences between males and females in a need to control a situation's outcomes or one's intentions to help and support in a DV incident like the one in this study. That is, rather than gender, one's intention to help and support a DV victim may be more related to one's personality type, such as the need to control a situation or an authoritarian or dominant personality. For instance, if someone has a higher need to control a situation like a DV incident in telling the victim what to do and thinking one is justified in his or her thinking (e.g., an authoritarian orientation), this may explain one's intention to help and support the victim more than one's gender. This explanation was supported in the current study by the finding that RWA, which

measures respondents' adherence to established authority and views on others' adherence to authority, was a significant predictor of SFV, which is discussed in further detail in a later section.

Situational Factors and Victim Blaming

Another major focus of the current study was to examine the effect of the victim's decision to stay with her partner on victim blame attribution. As hypothesized and consistent with previous research (Yamawaki, Ochoa-Shipp, Pulsipher, Harlos, & Swindler, 2012), the victim's decision to stay with her partner was a significant predictor of increased victim blaming. That is, participants assigned to the stay condition in which the victim decided to remain with her abuser significantly blamed the victim more than participants in the leave condition in which the victim decided to leave her abuser. When a victim remains with her abuser, outside observers assume that she accepts the abuse she is enduring and, therefore, more deserving of blame than a victim who decides to leave her abuser (Anderson et al., 2003). Examining the victim's intentions to leave or remain with her abuser is an important area of focus as the majority of DV victims face numerous obstacles that constrain them from being able to leave successfully. Some of the common barriers include financial dependence, the presence of children, and lack of access to or knowledge about appropriate resources (Anderson et al., 2003; Griffing et al., 2002). Additionally, it is estimated that a DV victim will attempt to leave her abuser several times before she can successfully escape (Sullivan et al., 1992). But due to the previously mentioned obstacles along with the fact that female DV victims risk losing their lives with an estimate of 33% of female murder victims being killed by their intimate partners (Rennison, 2003), it is extremely difficult and dangerous for victims to leave their abusers. Despite this, outside observers who are uninformed about DV often misjudge the reasons why the victim remains with

her abuser (Anderson et al., 2003). Consequently, victims who remain with their abusers may face greater secondary victimization from their informal supporters, which prevents the victims from receiving proper aid and access to resources; thus, further contributing to the cycle of violence (Fugate et al., 2005). Therefore, understanding how the situation plays a role in outside observers' perceptions of DV victims is very important as it contributes to the likelihood of victims seeking out and gaining access to vital resources. This goal of showing that a situational factor, such as the victim's decision to stay, contributes to increased victim blaming was, therefore, achieved in the current study and adds to the growing body of evidence of how the situation affects observers' perceptions of a DV victim.

Implications and Future Directions

The current project has several implications for secondary victimization of DV victims. The first implication is related to the SFV measure created for this study. While many of the items on the SFV measure represent what one should not do when a DV victim discloses, these items may reflect what people often think they should do in this situation (e.g., "I will tell Lucy to leave Jacob," "I will only help Lucy if she leaves Jacob"). As such, it should be noted that this measure does not necessarily convey informal supporters' intentions to help or not; rather, it may capture what they think they should do in this situation. Therefore, it is important to mention that while most informal supporters may intend to help and support DV victims, it is likely that they do not know how to properly respond. Additionally, because many of the respondents endorsed items that are actually not helpful to a DV victim but may seem like the right thing to do, this conveys the need for community education about DV.

Therefore, informal supporters and formal supporters alike need better education regarding DV, its causes, and appropriate ways to help and respond to DV victims (Bosch &

Begen, 2006; Campbell, Raja & Grining, 1999). The scale that was developed for the current study could be used in helping to educate people as it contains many misconceptions of appropriate advice and action. Perhaps the items on the scale could be used as examples of what people commonly think is appropriate as a foray into educating about proper course of action. Outreach programs should include members of the community and programs designed for college students as well. In both instances, informal supporters would be the target group because, as mentioned previously, informal supporters are the first people a victim approaches for help and play an integral role in victims escaping the cycle of violence (West & Wandrei, 2002). An intervention program should focus on educating people about (1) domestic violence (DV), (2) myths surrounding DV and demystifying these myths, (3) teaching informal supporters the important role they can play, and (4) providing information about how to be supportive and which resources to direct DV victims. Intervention programs should also address how gender (i.e., gender differences between men and women), personality factors (e.g., ambivalent sexism, benevolent sexism, gender-role traditionality) and situational factors (i.e., the victim's decision to stay or leave the abuser) relate to attitudes towards domestic violence. In addition to this, intervention programs should provide alternative perspectives to the harmful views addressed so as to add practical solutions for informal supporters to follow. These could include egalitarian relationship views, healthy conflict resolution, views of women as empowered and equally deserving of respect and opportunities as men, and examples of masculinity that do not condone violence against women and actively work against this social issue.

Additionally, the current study used college students as a sample and this demographic experiences DV in mostly dating relationships. Some estimates show that 39% of college students experience some form of dating violence yearly (Bryant & Spencer, 2003).

Consequently, it is recommended that college campuses implement awareness programs for students. For example, during college orientations students are often advised against binge-drinking and other unhealthy habits. Similarly, students should be informed about dating violence, how to help, and proper resources to turn to in these situations during their college orientations.

The current study also only focused on a heterosexual relationship where the victim was a female. While this represents the most common dynamics in which abuse occurs (WHO, 2005), DV occurs in other types of relationships as well. Future research could investigate how this finding compares for different types of relationships like homosexual couples as DV occurs in same-sex couples as well (Peterman & Dixon, 2003). As much prejudice still remains against homosexuals (Herek, 2000), for example, it is important to investigate how potential intersections of homophobia and prejudice towards DV victims interact. Further, as GRT and RWA emerged as significant predictors of victim blaming in this study, these predictors are important to investigate with non-heterosexual couples as well since they relate to adherence to traditional gender roles and established authority, respectively, and these have been shown to predict negative attitudes towards homosexuals (Haddock, Zanna, & Esses, 1993).

The current study also contributed to previous research that shows a gender difference in victim blaming with males placing more blame on victims than females. However, as mentioned earlier, this finding has been inconsistent with some studies researchers concluding that such differences are more attributable to higher endorsement of adherence to rigid gender roles than to gender alone (Bryant & Spencer, 2003; Flood & Pease, 2009). While this study lends support to gender differences in victim blaming, future studies should explore gender differences in victim blaming in further depth to establish if gender alone or greater adherence to GRT contributes to

this observed difference. In addition to future research, intervention programs need to focus on males because of the replicated finding of males showing more negative attitudes towards DV victims and representing the highest percentage of abusers (Bryant & Spencer, 2003; WHO, 2005). Intervention programs should be included in primary education (i.e., elementary school, junior high, and high school) along with the programs students attend on stranger danger, illicit drugs, and other topics. Some topics these programs should include are (1) egalitarian and healthy relationships, (2) concepts of masculinity that do not include being overly aggressive, and (3) ways of showing respect and care for others in one's own family and outside of one's family.

In trying to assess which factors are predictive of increased victim blaming for the DV victim, no one factor emerged in the current study as being uniquely predictive of victim blaming. However, as an overall model, the predictor variables HS, BS, GRT, RWA, and SDO together were significant predictors of increased victim blaming and less intention to help and support the victim. This could be suggestive to the fact that DV is a multi-faceted and complex issue (Carlson, 1984). Many relationships and factors are involved even in a single DV incident (Heise, 1998). As such, it is recommended that education programs include more information than simply defining what DV is and temporary solutions for escaping from the abuser.

Education programs should inform about balanced and egalitarian relationships to help reduce the risk of DV. Public education programs can be implemented in elementary, middle, and high school settings. Currently in the US, programs about hygiene, stranger danger, illicit drug use and sex education are conducted in public schools. In addition to these important issues, education about DV and healthy and safe relationships should also be implemented. The findings from the current study suggest that programs like these should focus on challenging

adversarial views towards women, explaining that victims do not ‘deserve to be punished,’ educating that while more traditional gender roles are not always bad, it is important to not conflate traditional gender roles with the right to abuse a woman who serves in this role. Additionally, the findings from the current study convey that misconceptions about what are helpful courses of action for DV victims still persist. Therefore, educational programs should not only educate about the issue of domestic violence itself, but these programs should also discuss the role that informal supporters play and how they can be helpful to victims.

Although not a focus point of the current study, religious conservatism and its relation to DV incidents was discussed previously and as Ellison and Anderson (2001) note, it is a relatively new area of study. As such, religious conservatism’s relationship with DV proclivity warrants further investigation, especially because findings of religiosity’s correlation with DV incidents are mixed (Berkel, Vandiver, & Bahner, 2004). Religious attendance or activity alone is not a predictor of increased DV; however, it appears that extrinsic versus intrinsic motivations for religious involvement may be a better predictor of DV proclivity. This newer topic of focus in relation to DV requires further research in the future as it may hold key indicators of predictive factors of DV and it may also convey ways in which DV can be reduced (e.g., following religious teachings of harmonious ways to resolve marital conflict)(Ellison, Bartkowski, & Anderson, 1999).

Lastly, the current study’s findings surrounding which factors contribute to informal supporters’ intentions to help and support a DV victim should be interpreted cautiously since the scale created for and used in this study may be more of a reflection of what others think is appropriate to do, rather than their intentions to help. Consequently, future research should investigate further which factors contribute to an informal supporters’ intentions to help and

support a DV. To better determine what contributes to intentions to support and help a DV victim, step-wise or hierarchical regression analyses could be conducted in future studies to help clarify which factors are predictive of intentions to help and support DV victims.

Limitations

The current study is not without limitations. One limitation is the use of a convenience sample of college students in the current project and the real-world generalizability of the current findings. Even though the current findings may not be replicable in other populations, as mentioned earlier, a high percentage college students are at risk for dating violence (Bryant & Spencer, 2003). Therefore, this population is still important to investigate. At the same time, future studies should focus on responses from informal supporters in applied or real-world settings (e.g., neighbors, family members, member of religious communities, etc.) as informal supporters' responses are critical in DV victims seeking and receiving proper aid (West & Wandrei, 2002).

The support for the victim (SFV) measure, which was created for this study, has potential weaknesses and findings related to it should be taken with caution. Firstly, the measure may be more of a reflection of what observers think is appropriate to do to help rather than capturing their intention to help and support the victim. Additionally, the reliability for the composite scale that was created after the factor analysis was $\alpha = .64$. This reliability is considered an acceptable reliability score in the social sciences as it fits within the range of $\alpha = .60-.80$ (Cooksey, 2014). As such, the findings in this study related to the SFV measure should be interpreted cautiously. For future research involving observers' intention to help and support the victim, it is recommended that a different scale is developed with greater reliability.

Lastly, the current study also focused only on female victims in a heterosexual relationship. Future studies should examine predictive factors of secondary victimization of different types of relationships such as homosexual couples and female-to-male abuse as DV cuts across all demographics and is an international human rights issue (WHO, 2005).

Summary and Conclusion

Despite improvements in gender issues globally, DV remains a pressing issue mainly for women worldwide (Alhabib, Nur, & Jones, 2010; WHO, 2005). One major facet of DV victims receiving proper aid and resources is how their informal support systems (e.g., family, friends, neighbors, etc.) respond to them when disclose about their abuse (West & Wandrei, 2002). Unfortunately, the majority of DV victims face secondary victimization when they disclose which involves negative attitudes towards them, victim blaming, and overall discouragement of seeking proper resources and help (Hattendorf & Tolloerud, 1997). Secondary victimization, then, represents a major obstacle that DV victims face in breaking the cycle of violence and research and interventions related to secondary victimization are integral in helping alleviate DV.

The current study aimed to add to the literature investigating predictive factors of secondary victimization. Specifically, the aims of the current project were to replicate previous findings of predictive personality and conditional factors of victim blaming and to add to past research by investigating which factors are predictive of supportive attitudes towards the victim. Specifically, HS, BS, GRT, RWA, SDO, gender, and the situation (i.e., the victim leaving or staying with her abuser) were examined in relation to victim blaming and supportive attitudes towards a female DV victim in a heterosexual relationship. Additionally, qualities of the victim were not manipulated in the scenario utilized in the current study such as the victim drinking

alcohol or retaliating against her abuser. Victims of DV suffer greatly in their mental and physical health (Heise, Ellsberg, & Gottemoeller, 1999). As such, it is not uncommon for DV victims to use alcohol or illicit drugs as coping mechanisms (Heise, Ellsberg, & Gottemoeller, 1999). And in some instances, the DV victim will retaliate against her abuser (Johnson, 2011). All of these factors most likely will influence observers' judgments and increase victim blaming as these factors represent women breaking socially proscribed ways of behaving and previous research shows that those who highly endorse GRT hold more negative attitudes towards DV victims (Bryant & Spencer, 2003; Yamawaki, Ostenson, & Brown, 2009).

The current study's aims were mostly achieved with RWA, GRT, HS, gender (i.e., males) and the situation (i.e., remaining with the abuser) emerging as predictive factors for increased victim blaming. Likewise, SDO and HS were predictive of increased victim blaming. While all of the original hypotheses were not fully supported in the current study, the results from the analyses make sense given the underlying assumptions of and content of the items in the measures used. A unique contribution of the current project is the examination of predictive factors of informal supporters' intention to support the victim. Understanding what most people consider to be helpful advice and action when a victim discloses is vital to the development of effective educational and prevention programs related to DV. As the current study conveyed, one's orientation to established authority (RWA) may be related to the tendency to provide less support to a DV victim. One's understanding of and justification for certain groups holding positions of power and privilege over others (SDO), on the other hand, may be more related to victim blaming. These factors should be investigated in more depth in future research to further determine their relation to victim blaming and intention to support a DV victim. One take away from this study is that the potential underlying causes of secondary victimization are varied and

multi-faceted. As such, more research is required to further understand the factors related to this phenomenon so that proper prevention and educational programs can be developed to alleviate this issue.

References

- Alhabib, S., Nur, U., & Jones, R. (2010). Domestic violence against women: Systematic review of prevalence studies. *Journal of Family Violence, 25*(4), 369-382. doi: 10.1007/s10896-009-9298-4
- Altemeyer, B. (2004). Highly dominating, highly authoritarian personalities. *The Journal of Social Psychology, 144*(4), 421-448.
- Anderson, M. A., Gillig, P. M., Sitaker, M., McCloskey, K., Malloy, K., & Grigsby, N. (2003). "Why doesn't she just leave?": A descriptive study of victim reported impediments to her safety. *Journal of Family Violence, 18*(3), 151-155.
- Asbrock, F., Sibley, C. G., & Duckitt, J. (2010). Right-wing authoritarianism and social dominance orientation and the dimensions of generalized prejudice: A longitudinal test. *European Journal of Personality, 24*(4), 324-340.
- Barnish, M. (2004). *Domestic violence: A literature review: Summary*. London, UK: HM Inspectorate of Probation.
- Barreto, M., & Ellemers, N. (2005). The burden of benevolent sexism: How it contributes to the maintenance of gender inequalities. *European Journal of Social Psychology, 35*(5), 633-642.
- Beeble, M. L., Post, L. A., Bybee, D., & Sullivan, C. M. (2008). Factors related to willingness to help survivors of intimate partner violence. *Journal of Interpersonal Violence, 23*(12), 1713-1729.

- Benjamin, A. J. (2006). The relationship between right-wing authoritarianism and attitudes toward violence: Further validation of the attitudes toward violence scale. *Social Behavior and Personality: An International Journal*, 34(8), 923-926.
- Berkel, L. A., Vandiver, B. J., & Bahner, A. D. (2004). Gender role attitudes, religion, and spirituality as predictors of domestic violence attitudes in white college students. *Journal of College Student Development*, 45(2), 119-133.
- Blass, T. (1995). Right-wing authoritarianism and role as predictors of attributions about obedience to authority. *Personality and Individual Differences*, 19(1), 99-100.
- Bosch, K., & Bergen, M. B. (2006). The influence of supportive and nonsupportive persons in helping rural women in abusive partner relationships become free from abuse. *Journal of Family Violence*, 21(5), 311-320. doi: 10.1007/s10896-006-9027-1
- Bostock, J. A. N., Plumpton, M., & Pratt, R. (2009). Domestic violence against women: Understanding social processes and women's experiences. *Journal of Community & Applied Social Psychology*, 19(2), 95-110.
- Bryant, S. A., & Spencer, G. A. (2003). University students' attitudes about attributing blame in domestic violence. *Journal of Family Violence*, 18(6), 369-376. Retrieved from <http://web.ebscohost.com.erl.lib.byu.edu/ehost/search/basic?sid=08d0f6fe-af90-4d8b-b6ee-0662173fe663%40sessionmgr13&vid=1&hid=15>
- Campbell, R. (2008). The psychological impact of rape victims. *American Psychologist*, 63(8), 702-717. doi: 10.1037/0003-066x.63.8.702

- Campbell, R., Raja, S., & Grining, P. L. (1999). Training mental health professionals on violence against women. *Journal of Interpersonal Violence, 14*(10), 1003-1013. doi: 10.1177/088626099014010001
- Capezza, N. M., & Arriaga, X. B. (2008). Why do people blame victims of abuse? The role of stereotypes of women on perceptions of blame. *Sex Roles, 59*(11-12), 839-850.
- Carlson, B. E. (1984). Causes and maintenance of domestic violence: An ecological analysis. *The Social Service Review, 58*(4), 569-587.
- Chabot, H., Tracy, T. L., Manning, C. A., & Poisson, C. A. (2009). Sex, attribution, and severity influence intervention decisions of informal helpers in domestic violence. *Journal of Interpersonal Violence, 24*(10), 1696-1713. doi:10.1177/0886260509331514
- Christopher, A. N., & Mull, M. S. (2006). Conservative ideology and ambivalent sexism. *Psychology of Women Quarterly, 30*(2), 223-230. doi: 10.1111/j.1471-6402.2006.00284.x
- Coker, A. L., Smith, P. H., Thompson, M. P., Mckeown, R. E., Bethea, L., & Davis, K. E. (2002). Social support protects against the negative effects of partner violence on mental health. *Journal of Women's Health & Gender-Based Medicine, 11*(5), 465-476. doi: 10.1089/15246090260137644
- Cooksey, R. W. (2014). *Illustrating statistical procedures: Finding meaning in quantitative data* (2nd ed.). Prahan, Australia: Tilde Publishing and Distribution.

- Coleman, F. L. (1997). Stalking behavior and the cycle of domestic violence. *Journal of Interpersonal Violence, 12*(3), 420-432.
- Duckitt, J., & Sibley, C. G. (2010). Right-wing authoritarianism and social dominance orientation differentially moderate intergroup effects on prejudice. *European Journal of Personality, 24*(7), 583-601. doi:10.1002/per.772
- Ellison, C. G., & Anderson, K. L. (2001). Religious involvement and domestic violence among US couples. *Journal for the Scientific Study of Religion, 40*(2), 269-286.
- Ellison, C. G., Bartkowski, J. P., & Anderson, K. L. (1999). Are there religious variations in domestic violence?. *Journal of Family Issues, 20*(1), 87-113.
- Finn, M. A., & Stalans, L. J. (1995). Police referrals to shelters and mental health treatment: Examining their decisions in domestic assault cases. *Crime & Delinquency, 41*(4), 467-480. doi:10.1177/0011128795041004006
- Flood, M., & Pease, B. (2009). Factors influencing attitudes to violence against women. *Trauma, Violence, & Abuse, 10*(2), 125-142.
- Foshee, V., & Linder, G. (1997). Factors influencing service provider motivation to help adolescent victims of partner violence. *Journal of Interpersonal Violence, 12*(5), 648-664. doi:10.1177/088626097012005003
- Fugate, M., Landis, L., Riordan, K., Naureckas, S., & Engel, B. (2005). Barriers to domestic violence help seeking. *Violence against Women, 11*(3), 290-310. doi:10.1177/1077801204271959

- Glick, P., & Fiske, S. T. (1996). The ambivalent sexism inventory: Differentiating hostile and benevolent sexism. *Journal of Personality and Social Psychology*, 70(3), 491-512. doi: 10.1037/0022-3514.70.3.491
- Glick, P., & Fiske, S. T. (2001). An ambivalent alliance: Hostile and benevolent sexism as complementary justifications for gender inequality. *American Psychologist*, 56(2), 109-118. doi: 10.1037/0003-066x.56.2.109
- Glick, P., Sakalli-Ugurlu, N., Ferreira, M. C., & de Souza, M. A. (2002). Ambivalent sexism and attitudes toward wife abuse in Turkey and Brazil. *Psychology of Women Quarterly*, 26(4), 292-297.
- Goodkind, J. R., Gillum, T. L., Bybee, D. I., & Sullivan, C. M. (2003). The Impact of family and friends' reactions on the well-being of women with abusive partners. *Violence against Women*, 9(3), 347-373. doi:10.1177/1077801202250083
- Griffing, S., Ragin, D. F., Sage, R. E., Madry, L., Bingham, L. E., & Primm, B. J. (2002). Domestic violence survivors' self-identified reasons for returning to abusive relationships. *Journal of Interpersonal Violence*, 17(3), 306-319.
- Haddock, G., & Zanna, M. P. (1994). Preferring "housewives" to "feminists". *Psychology of Women Quarterly*, 18(1), 25-52.
- Hartley, C. (2001). 'He said, she said': The defense attack of credibility in domestic violence felony trials. *Violence against Women*, 7(5), 510-544. doi:10.1177/10778010122182587
- Hattendorf, J., & Tollerud, T. R. (1997). Domestic violence: Counseling strategies that minimize the impact of secondary victimization. *Perspectives in Psychiatric Care*, 33(1), 14-23.

- Heise, L. L. (1998). Violence against women an integrated, ecological framework. *Violence Against Women, 4*(3), 262-290.
- Heise, L., Ellsberg, M., & Gottemoeller, M. (1999). Ending violence against women. *Population Reports, 27*(4), 1-44. Retrieved from <http://web.ebscohost.com.eri.lib.byu.edu/ehost/search/basic?sid=08d0f6fe-af90-4d8b-b6ee0662173fe663%40sessionmgr13&vid=1&hid=15>
- Herek, G. M. (2000). The psychology of sexual prejudice. *Current Directions in Psychological Science, 9*(1), 19-22.
- Hillier, L., & Foddy, M. (1993). The role of observer attitudes in judgments of blame in cases of wife assault. *Sex Roles, 29*(9-10), 629-644. doi:10.1007/BF00289209
- Johnson, M. P. (2011). Gender and types of intimate partner violence: A response to an anti-feminist literature review. *Aggression and Violent Behavior, 16*(4), 289-296.
- Kaukinen, C., Meyer, S., & Akers, C. (2013). Status compatibility and help-seeking behaviors among female intimate partner violence victims. *Journal of Interpersonal Violence, 28*(3), 577-601. doi:10.1177/0886260512455516
- Krug, E. G., Mercy, J. A., Dahlberg, L. L., & Zwi, A. B. (2002). The world report on violence and health. *Lancet, 360*(9339), 1083. Retrieved from <http://web.ebscohost.com.eri.lib.byu.edu/ehost/search/basic?sid=08d0f6fe-af90-4d8b-b6ee0662173fe663%40sessionmgr13&vid=1&hid=15>

- Lapidus, L. M. (2003). Doubly victimized: Housing discrimination against victims of domestic violence. *American University Journal of Gender Social Policy and the Law*, 11, 377-392.
- Minsky-Kelly, D., Hamberger, L. K., Pape, D. A., & Wolff, M. (2005). We've had training, now what? Qualitative analysis of barriers to domestic violence screening and referral in a health care setting. *Journal of Interpersonal Violence*, 20(10), 1288-1309.
- McCart, M. R., Smith, D. W., & Sawyer, G. K. (2010). Help seeking among victims of crime: A review of the empirical literature. *Journal of Traumatic Stress*, 23(2), 198-206.
- Parsons, J., & Bergin, T. (2010). The impact of criminal justice involvement on victims' mental health. *Journal of Traumatic Stress*, 23(2), 182-188. doi:10.1002/jts.20505
- Peterman, L. M., & Dixon, C. G. (2003). Domestic violence between same-sex partners: Implications for counseling. *Journal of Counseling & Development*, 81(1), 40-47.
- Plichta, S. B. (2007). Interactions between victims of intimate partner violence against women and the health care system policy and practice implications. *Trauma, Violence, & Abuse*, 8(2), 226-239.
- Policastro, C., & Payne, B. K. (2013). The blameworthy victim: domestic violence myths and the criminalization of victimhood. *Journal of Aggression, Maltreatment & Trauma*, 22(4), 329-347. doi:10.1080/10926771.2013.775985
- Postmus, J. L., Severson, M., Berry, M., & Jeong Ah, Y. (2009). Women's experiences of violence and seeking help. *Violence against Women*, 15(7), 852-868. doi: 10.1177/1077801209334445

- Pratto, F., Sidanius, J., Stallworth, L. M., & Malle, B. F. (1994). Social dominance orientation: A personality variable predicting social and political attitudes. *Journal of Personality and Social Psychology*, *67*(4), 741.
- Reidy, D. E., Shirk, S. D., Sloan, C. A., & Zeichner, A. (2009). Men who aggress against women: Effects of feminine gender role violation on physical aggression in hypermasculine men. *Psychology of Men & Masculinity*, *10*(1), 1-12. doi: 10.1037/a0014794
- Rennison, C. (2003). Crime data brief: Intimate partner violence, 1993-2001. *National Center for Justice (NCJ)* no. 197838.
- Robinson, L., & Spilsbury, K. (2008). Systematic review of the perceptions and experiences of accessing health services by adult victims of domestic violence. *Health & Social Care in the Community*, *16*(1), 16-30. doi:10.1111/j.1365-2524.2007.00721.x
- Rose, L. E., & Campbell, C. J. (2000). The role of social support and family relationships in women's responses to battering. *Health Care for Women International*, *21*(1), 27-39. doi: 10.1080/073993300245384
- Shannon-Lewy, C., & Dull, V. T. (2005). The response of Christian clergy to domestic violence: Help or hindrance?. *Aggression & Violent Behavior*, *10*(6), 647-659. doi:10.1016/j.avb.2005.02.004
- Stenner, K. (2009). Three kinds of "conservatism". *Psychological Inquiry*, *20*(2-3), 142-159. doi:10.1080/10478400903028615

- Sullivan, C. M., Basta, J., Tan, C., Davidson, I. I., & William, S. (1992). After the crisis: A needs assessment of women leaving a domestic violence shelter. *Violence and Victims, 7*(3), 267-275.
- Sullivan, T. P., Schroeder, J. A., Dudley, D. N., & Dixon, J. M. (2010). Do differing types of victimization and coping strategies influence the type of social reactions experienced by current victims of intimate partner violence? *Violence Against Women, 16*(6), 638-657. doi:10.1177/1077801210370027
- Trotter, J. L., & Allen, N. E. (2009). The good, the bad, and the ugly: Domestic violence survivors' experiences with their informal social networks. *American Journal of Community Psychology, 43*(3-4), 221-231. doi:10.1007/s10464-009-9232-1
- Valor-Segura, I., Expósito, F., & Moya, M. (2011). Victim blaming and exoneration of the perpetrator in domestic violence: The role of beliefs in a just world and ambivalent sexism. *The Spanish Journal of Psychology, 14*(01), 195-206.
- Waldrop, A. E., & Resick, P. A. (2004). Coping among adult female victims of domestic violence. *Journal of Family Violence, 19*(5), 291-302.
- Walker, L. E. (1999). Psychology and domestic violence around the world. *American Psychologist, 54*(1), 21-29. doi: 10.1037/0003-066x.54.1.21
- Walker, W. D., Rowe, R. C., & Quinsey, V. L. (1993). Authoritarianism and sexual aggression. *Journal of Personality and Social Psychology, 65*(5), 1036.
- West, A., & Wandrei, M. L. (2002). Intimate partner violence: A model for predicting interventions by informal helpers. *Journal of Interpersonal Violence, 17*(9), 972-986. doi:10.1177/0886260502017009004

- Whitley Jr, B. E. (1999). Right-wing authoritarianism, social dominance orientation, and prejudice. *Journal of Personality and Social Psychology*, 77(1), 126-134.
doi:10.1037/0022-3514.77.1.126
- WHO, 2005. *WHO multi-country study on women's health and domestic violence against women: Initial results on prevalence, health outcomes and women's responses*.
Retrieved from http://www.who.int/gender/violence/who_multicountry_study/en/
- Wilcox, P. (2000). 'Me mother's bank and me nanan's, you know, support!': Women who left domestic violence in England and issues of informal support. *Women's Studies International Forum*, 23(1), 35-47. doi:10.1016/S0277-5395(99)00093-X
- Williams, J. E. (1984). Secondary victimization: Confronting public attitudes about rape. *Victimology*, 9(1), 66-81.
- Yakushko, O. (2005). Ambivalent sexism and relationship patterns among women and men in Ukraine. *Sex Roles*, 52(9-10), 589-596.
- Yam, M. (2000). Seen but not heard: Battered women's perceptions of the ED experience. *Journal of Emergency Nursing*, 26(5), 464-470. doi:10.1067/men.2000.110432
- Yamawaki, N. (2007). Differences between Japanese and American college students in giving advice about help seeking to rape victims. *The Journal of Social Psychology*, 147(5), 511-530. doi: 10.3200/socp.147.5.511-530
- Yamawaki, N., Ochoa-Shipp, M., Pulsipher, C., Harlos, A., & Swindler, S. (2012). Perceptions of domestic violence: The effects of domestic violence myths, victim's relationship with her abuser, and the decision to return to her abuser. *Journal of Interpersonal Violence*, 27(16), 3195-3212.

Yamawaki, N., Ostenson, J., & Brown, C. R. (2009). The functions of gender role traditionality, ambivalent sexism, injury, and frequency of assault on domestic violence perception: A study between Japanese and American college students. *Violence Against Women, 15*(9), 1126-1142.

Appendix A

Ambivalent Sexism Inventory (Glicke & Fiske, 1996)

1. No matter how accomplished he is, a man is not truly complete as a person unless he has the love of a woman.
2. Many women are actually seeking special favors, such as hiring policies that favor them over men, under the guise of asking for "equality."
3. In a disaster, women ought not necessarily to be rescued before men. **(Reverse Scored)**
4. Most women interpret innocent remarks or acts as being sexist.
5. Women are too easily offended.
6. People are often truly happy in life without being romantically involved with a member of the other sex. **(Reverse Scored)**
7. Feminists are not seeking for women to have more power than men. **(Reverse Scored)**
8. Many women have a quality of purity that few men possess.
9. Women should be cherished and protected by men.
10. Most women fail to appreciate fully all that men do for them.
11. Women seek to gain power by getting control over men.
12. Every man ought to have a woman whom he adores.
13. Men are complete without women. **(Reverse Scored)**
14. Women exaggerate problems they have at work.
15. Once a woman gets a man to commit to her, she usually tries to put him on a tight leash.
16. When women lose to men in a fair competition, they typically complain about being discriminated against.
17. A good woman should be set on a pedestal by her man.
18. There are actually very few women who get a kick out of teasing men by seeming sexually available and then refusing male advances. **(Reverse Scored)**
19. Women, compared to men, tend to have a superior moral sensibility.
20. Men should be willing to sacrifice their own wellbeing in order to provide financially for the women in their lives.
21. Feminists are making entirely reasonable demands of men. **(Reverse Scored)**
22. Women, as compared to men, tend to have a more refined sense of culture and good taste.

*Hostile Sexism Subscale includes the following items: 2,4, 5,7,10, 11, 14,15,16,18,21.

*Benevolent Sexism Subscale includes the following items: 1, 3,6, 8, 9, 12,13,17,19,20,22

Appendix B

Attitudes towards Women Scale (Spence and Helmreich, 1972)

1. Swearing and obscenity are more repulsive in the speech of a woman than of a man .
2. Women should take increasing responsibility for leadership in solving the intellectual and social problems of the day. **(Reverse Scored)**
3. Both husband and wife should be allowed the same grounds for divorce. **(Reverse Scored)**
4. Telling dirty jokes should be mostly a masculine prerogative.
5. Intoxication among women is worse than intoxication among men .
6. Under modern economic conditions with women being active outside the home, men should share in household tasks such as washing dishes and doing the laundry. **(Reverse Scored)**
7. It is insulting to women to have the "obey" clause remain in the marriage service. **(Reverse Scored)**
8. There should be a strict merit system in job appointment and promotion without regard to sex. **(Reverse Scored)**
9. A woman should be as free as a man to propose marriage. **(Reverse Scored)**
10. Women should worry less about their rights and more about becoming good wives and mothers.
11. Women earning as much as their dates should bear equally the expense when they go out together. **(Reverse Scored)**
12. Women should assume their rightful place in business and all the professions along with men . **(Reverse Scored)**
13. A woman should not expect to go to exactly the same places or to have quite the same freedom of action as a man .
14. Sons in a family should be given more encouragement to go to college than daughters. –
15. It is ridiculous for a woman to run a locomotive and for a man to darn socks.
16. In general, the father should have greater authority than the mother in the bringing up of children.
17. Women should be encouraged not to become sexually intimate with anyone before marriage, even their fiancés.
18. The husband should not be favored by law over the wife in the disposal of family property or income. **(Reverse Scored)**
19. Women should be concerned with their duties of childbearing and house tending, rather than with desires for professional and business careers.
20. The intellectual leadership of a community should be largely in the hands of men .
21. Economic and social freedom is worth far more to women than acceptance of the ideal of femininity which has been set up by men. **(Reverse Scored)**
22. On the average, women should be regarded as less capable of contributing to economic production than are men.
23. There are many jobs in which men should be given preference over women in being hired or promoted.
24. Women should be given equal opportunity with men for apprenticeship in the various trades. **(Reverse Scored)**

25. The modern girl is entitled to the same freedom from regulation and control that is given to the modern boy. **(Reverse Scored)**

Appendix C

Right-Wing Authoritarianism Measure (Altemeyer, 1996)

1. Our country desperately needs a mighty leader who will do what has to be done to destroy the radical new ways and sinfulness that are ruining us.
2. Gays and lesbians are just as healthy and moral as anybody else. **(Reverse Scored)**
3. Our country will be great if we honor the ways of our forefathers, do what the authorities tell us to do, and get rid of the “rotten apples” who are ruining everything.
4. Atheists and others who have rebelled against the established religions are no doubt every bit as good and virtuous as those who attend church regularly. **(Reverse Scored)**
5. The real keys to the “good life” are obedience, discipline, and sticking to the straight and narrow.
6. A lot of our rules regarding modesty and sexual behavior are just customs which are not necessarily any better or holier than those which other people follow. **(Reverse Scored)**
7. There are many radical, immoral people in our country today, who are trying to ruin it for their own godless purposes, whom the authorities should put out of action.
8. It is always better to trust the judgment of the proper authorities in government and religion than to listen to the noisy rabble-rousers in our society who are trying to create doubt in people’s minds.
9. There is absolutely nothing wrong with nudist camps. **(Reverse Scored)**
10. There is no “ONE right way” to live; everybody has to create their own way. **(Reverse Scored)**
11. Our country will be destroyed someday if we do not smash the perversions eating away at our moral fiber and traditional beliefs.
12. Homosexuals and feminists should be praised for being brave enough to defy “traditional family values.” **(Reverse Scored)**
13. What our country really needs, instead of more “civil rights,” is a stiff dose of law and order.
14. It may be considered old-fashioned by some, but having a normal, proper appearance is still the mark of a gentleman and, especially, a lady.
15. Everyone should have their own lifestyle, religious beliefs, and sexual preferences, even if it makes them different from everyone else. **(Reverse Scored)**
16. It is wonderful that young people today have greater freedom to protest against things they don’t like, and to make their own “rules” to govern their behavior. **(Reverse Scored)**
17. What our country really needs is a strong, determined leader who will crush evil, and take us back to our true path.
18. People should pay less attention to the Bible and the other old traditional forms of religious guidance, and instead develop their own personal standards of what is moral and immoral. **(Reverse Scored)**
19. The only way our country can get through the crisis ahead is to get back to our traditional values, put some tough leaders in power, and silence the troublemakers spreading bad ideas.
20. Our country needs free thinkers who will have the courage to defy traditional ways, even if this upsets many people. **(Reverse Scored)**

Appendix D

Social Dominance Orientation Scale (Pratto, Sidanius, Stallworth, and Malle, 1994)

1. It's probably a good thing that certain groups are at the top and other groups are at the bottom.
2. Inferior groups should stay in their place.
3. Superior groups should dominate inferior groups.
4. Sometimes other groups must be kept in their place.
5. To get ahead in life, it is sometimes necessary to step on other groups.
6. If certain groups of people stayed in their place, we would have fewer problems.
7. Some groups of people are just more worthy than others.
8. In getting what your group wants, it is sometimes necessary to use force against other groups.
9. Group equality should be our ideal. **(Reverse Scored)**
10. We should do what we can to equalize conditions for different groups. **(Reverse Scored)**
11. Increased social equality would be a good thing. **(Reverse Scored)**
12. It would be good if all groups could be equal. **(Reverse Scored)**
13. We would have fewer problems if we treated different groups more equally. **(Reverse Scored)**
14. All groups should be given an equal chance in life. **(Reverse Scored)**
15. No one group should dominate in society. **(Reverse Scored)**
16. We should strive to make incomes more equal. **(Reverse Scored)**

Appendix E

Original Support for the Victim Scale (developed for the purpose of this study)

1. I will do anything to help her.
2. I will insist that Lucy* leaves Jacob**(**reverse scored**).
3. This is in no way Lucy's fault, but completely the fault of Jacob.
4. If Lucy doesn't leave Jacob then she is also at fault.
5. I will offer as many material resources as possible that she may need (**reverse scored**).
6. In order for me to support Lucy or help her, I need to know the details of this incident such as frequency of the incident (**reverse scored**).
7. If Lucy stays with Jacob, I will despise her decision (**reverse scored**).
8. If she doesn't want this to happen again, she shouldn't make Jacob angry (**reverse scored**).
9. I will not tell Lucy what to do.
10. This is a couple's quarrel and no one else should be involved (**reverse scored**).
11. Lucy does not have any choice but to leave Jacob (**reverse scored**).
12. I will insist that Lucy and Jacob together should receive couple's counseling (**reverse scored**).
13. Lucy should stay with Jacob because things will get better (**reverse scored**).
14. If Lucy leaves Jacob, she will break the sacred marriage covenant (**reverse scored**).
15. I will only provide support if Lucy leaves Jacob (**reverse scored**).
16. I will call her family, friends, and the police to report what happened (**reverse scored**).
17. I will tell Lucy, 'I would never put up with that!' (**reverse scored**).
18. I will tell Lucy to leave Jacob right away (**reverse scored**).
19. I will confront Jacob (**reverse scored**).
20. I will tell Lucy that she would experience PTSD and depression in the future if she does not leave Jacob (**reverse scored**).
21. I will ask Lucy why she does not make changes in her life? (**reverse scored**).
22. I will ask Lucy why she does not care about the effect this is having on her family and friends (**reverse scored**).

*Lucy is the name given to the hypothetical victim in the study

**Jacob is the name given to the hypothetical perpetrator in the study

Appendix F

Support for the Victim Scale Post-Factor Analysis

7. If Lucy stays with Jacob, I will despise her decision. **(reverse scored)**
8. If she doesn't want this to happen again, she shouldn't make Jacob angry. **(reverse scored)**
9. I will not tell Lucy what to do.
10. This is a couple's quarrel and no one else should be involved. **(reverse scored)**
11. Lucy does not have any choice but to leave Jacob. **(reverse scored)**
12. I will insist that Lucy and Jacob together should receive couple's counseling. **(reverse scored)**
13. Lucy should stay with Jacob because things will get better. **(reverse scored)**
14. If Lucy leaves Jacob, she will break the sacred marriage covenant. **(reverse scored)**
15. I will only provide support if Lucy leaves Jacob. **(reverse scored)**
17. I will tell Lucy, 'I would never put up with that!' **(reverse scored)**
18. I will tell Lucy to leave Jacob right away. **(reverse scored)**
20. I will tell Lucy that she would experience PTSD and depression in the future if she does not leave Jacob. **(reverse scored)**
21. I will ask Lucy why she does not make changes in her life? **(reverse scored)**
22. I will ask Lucy why she does not care about the effect this is having on her family and friends. **(reverse scored)**

Appendix G

Victim Blame Attribution Scale (Yamawaki, Ostenson, and Brown, 2009)

1. [Victim name] had some faults in this incident.
2. [Victim name] deserved this incident.
3. [Victim name] has some responsibility for creating this situation
4. [Victim name] should be blamed for being hit
5. [Victim name] should be punished because she behaved badly.

Appendix H
Demographic Survey

1. Please indicate the following:
 - a. Age:
 - b. Gender:
 - c. Year in School (e.g., Freshman, sophomore, etc.):
 - d. Major:
 - e. Race/Ethnicity:
 - f. Marital Status:
2. On the following, please indicate where you would rate your political orientation: 1 (*extremely liberal*), 2 (*moderately liberal*), 3 (*liberal*), 4 (*moderate*), 5 (*conservative*), 6 (*moderately conservative*), to 7 (*extremely conservative*).
3. Please rate yourself on the following statements using the following scale: 1 (*strongly disagree*), 2 (*moderately disagree*), 3 (*disagree*), 4 (*neutral*), 5 (*agree*), 6 (*moderately agree*), to 7 (*strongly agree*).
 - a. Compared to the average person, I feel that I am very knowledgeable about domestic violence
 - b. Compared to the average person, I feel that I am very knowledgeable about how to help victims of domestic violence.

Appendix I

Implied Consent

My name is Christina Riley, I am a graduate student at Brigham Young University and I am conducting this research under the supervision of Niwako Yamawaki (Ph.D.), from the Department of Psychology .You are being invited to participate in this research study of “Others’ Perceptions of Intimate Partner Conflict.” I am interested in finding out about how individuals view the interactions between intimate partners.

This study is divided into two parts, both of which consist of an online survey. Your participation in this study will require the completion of the attached survey. This should take approximately 30 minutes of your time. This is only for Part I of the study. Once you complete Part I of the study, you will receive an email with a link to Part II of the study two days after completing the survey for Part I. Part II will involve a survey that is similar to Part I and will take approximately 15-30 minutes of your time to complete. The total participation time for this study, then, is approximately between 45-60 minutes total of your time. Your participation will be anonymous and you will not be contacted again in the future. You will not be paid for being in this study. This survey involves minimal risk to you. The benefits, however, may impact society by helping increase knowledge about how others’ attitudes towards intimate partner relationships affect the quality of those relationships.

You do not have to be in this study if you do not want to be. You do not have to answer any question that you do not want to answer for any reason. We will be happy to answer any questions you have about this study. If you have further questions about this project or if you have a research-related problem you may contact me, Christina Riley at criley011@gmail.com or my advisor, Niwako Yamawaki (Ph.D.) at niwako_yaamwaki@byu.edu.

If you have any questions about your rights as a research participant you may contact the IRB Administrator at A-285 ASB, Brigham Young University, Provo, UT 84602; irb@byu.edu; (801) 422-1461. The IRB is a group of people who review research studies to protect the rights and welfare of research participants.

The completion of this survey implies your consent to participate. Additionally, this completion of this survey implies your consent to provide your email to the Principal Investigator (Christina Riley) so that you may receive Part II of the study via email. If you choose to participate, please complete the attached survey within 24 hours of signing up for the study. Thank you!