

RESEARCH & ADVOCACY REVIEW

Male and Female Rape Myths Affect Bystander Intervention

Bystander intervention strategies have become an important part of sexual assault prevention programs for military and college populations. A new study of students at the United States Naval Academy by Rosenstein and Carroll (2015) examines the effect of rape myth acceptance on the intent to intervene as a bystander. This study is notable for its close look at myths involving both men and women as potential victims of sexual assault, as previous studies have focused only on female rape myths.

The Study

Rosenstein and Carroll surveyed 1003 students entering the Naval Academy, about three-quarters of whom were male. Participants answered questions showing whether or not they accepted common myths about female victims, such as "She asked for it," and male victims, such as "If he was raped by another man he must be gay." They were also asked about how likely they were to intervene to help either someone they knew or a stranger at risk of sexual assault.

The Findings

- Men were more likely to agree with rape myths about both male and female victims.
- Participants said they were more likely to intervene to help someone they knew, rather than a stranger.
- Women indicated a greater willingness to intervene than men, both with acquaintances and strangers.
- People who had higher levels of acceptance of rape myths were less likely to intervene to help someone they knew. Acceptance of female rape myths was more strongly related to this reluctance than acceptance of male rape myths, especially among male participants.
- An unexpected finding was that greater acceptance of male rape myths was associated with lower intent to help a stranger.

Traditional Views of Masculinity May be a Key

The items that measured male rape myth acceptance may also reflect traditional views of masculinity, because they involve questioning the masculinity and sexual orientation

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of male victims, and minimizing the importance of rape. The researchers call for more study to determine whether acceptance of male rape myths is actually a factor distinct from accepting traditional views of men and masculinity. Previous research has shown that people with traditional views of masculinity are less likely to intervene in a potential sexual assault situation. The authors of the study also point out that it was conducted in a "hypermasculine military environment," and thus these results may not generalize to other settings and populations.

Practical Application

The authors state:

...the results from this study suggest that even if the focus of prevention education sessions is reducing female victimization, there is reason to also discuss male victimization and associated myths, particularly those related to masculinity. Moreover, these results may shed light on why hypermasculine groups, such as athletic teams and fraternities, face significant challenges in reducing sexual violence. Consequently, **discussion of male victimization and associated myths may be particularly useful in increasing bystander interventions** among these groups (p. 4).

Focusing on concepts of masculinity in primary prevention is consistent with addressing the sexual assault risk factors identified by the Centers for Disease Control and Prevention (2015), which include "hyper-masculinity" and "association with sexually aggressive, hypermasculine, and delinquent peers." The research at the Naval Academy suggests that debunking myths about male victimization may help people reconsider rigid gender roles and thereby increase their willingness as bystanders to intervene and possibly prevent sexual assault of both men and women.

References

Rosenstein, J.E., & Carroll, M.H. (2015). Male rape myths, female rape myths, and intent to intervene as a bystander. *Violence and Gender, 2*(00), 1-5. DOI: 10.1089/vio.2015.0027

Centers for Disease Control and Prevention. (2015). *Sexual Violence: Risk and Protective Factors.* Retrieved from the CDC website, http://www.cdc.gov/violenceprevention/sexualviolence/riskprotectivefactors.html