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Perceptions of, and Assistance Provided to, a Hypothetical Rape Victim: Differences Between Rape Disclosure Recipients and Nonrecipients

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Abstract

Objective—Undergraduate rape disclosure recipients and nonrecipients' sociodemographic and life experience variables, attitudes towards rape and responses to a hypothetical rape disclosure were compared to determine differences between them.

Participants—One-hundred-ninety-two undergraduates at three universities participated in this online survey between November 2011 – April 2012.

Methods—Participants reported on their rape myth acceptance (RMA) and personal direct and indirect (i.e., disclosure receipt) experiences with sexual assault. Participants also responded to a hypothetical rape disclosure.

Results—Disclosure recipients were more likely to report a victimization history, and less confusion and perceived ineffectiveness in helping the hypothetical victim. RMA and nonrecipient status predicted perceived victim responsibility; these variables and childhood victimization predicted confusion about helping. RMA also predicted perceived ineffectiveness of one's helping behaviors. Victimization history and female gender predicted victim empathy.

Conclusions—These findings can inform sexual assault-related programming for undergraduates through the provision of targeted assistance and corrective information.

Keywords

college; disclosure; rape; sexual assault; social support

Sexual assault is a notable problem on college campuses. In a national survey, one in 20 female undergraduates reported a rape experience in the previous year,¹ and 41.5% reported receiving a rape disclosure (i.e., being told by a victim about an experienced rape),² indicating the substantial impact of rape in this setting. Although sexual assault is associated

with a number of possible serious consequences (e.g., physical injuries, posttraumatic stress disorder, depression),³⁻⁴ victims' outcomes may be improved by disclosing the assault to others. Over two-thirds of victims surveyed reported that they told at least one person about their assault,^{1,5-6} most often informal support sources like friends and family.^{5,7-9} This rate of disclosure is heartening, as the act of disclosure can provide victims numerous benefits (e.g., medical services, support, decreased likelihood of revictimization).¹⁰⁻¹¹ Importantly, though, victims may also receive negative reactions to disclosure from others (e.g., blame, disbelief, encouragement of avoidance), which can worsen their post-assault outcomes.⁷⁻¹⁰

Given the importance of disclosure for post-sexual assault outcomes, it is surprising that little research to date is conducted with disclosure recipients. Among the limited extant findings, research comparing college disclosure recipients and nonrecipients identified some factors associated with receipt of a disclosure, including a personal history of sexual assault, a history of mental health concerns (i.e., PTSD, substance use, seeking assistance for coping with emotional concerns) and current employment.² There may be a number of reasons why these factors are associated with disclosure receipt, including the victims' awareness of the recipient's personal experiences with sexual assault and/or mental health symptoms and treatment, or shared risky behaviors (e.g., binge drinking).² However, as noted by the authors, the cross-sectional design of the research does not allow for exploration of why these factors are associated with disclosure receipt.

Similarly, research has identified variables associated with positive and negative reactions to disclosure, but again, methodological limitations prevent the drawing of causal conclusions about these variables, and differences in the methodologies used result in some mixed findings. Among those factors associated with negative reactions to victims are characteristics of the assault (e.g., prior relationship to the perpetrator, victim intoxication)¹²⁻¹⁴ and characteristics of the victim (e.g., prior rape history, prior sexual history, poor perceived respectability).^{13,15} Factors associated with the disclosure recipient also play a role, and female gender and personal rape history¹⁶⁻¹⁷ are generally associated with more positive reactions to victims. Yet, as reviewed by others, the findings regarding gender are mixed (i.e., some studies show no differences between men and women),^{12,18} reflecting varied methodological approaches through both the population studied (e.g., undergraduates, therapists, country in which the study was conducted) and outcome variables assessed (e.g., responsibility vs. blame, dichotomous vs. continuous assessment).

One possible explanation for gender differences when they are found is sexual assault-related attitudes. A review shows that men, in general, report more negative reactions to victims than women,¹⁹ and thus, these beliefs may influence how the recipient responds to the victim. One particular attitude that is frequently assessed is rape myth acceptance (RMA), or the degree to which a person endorses false, often stereotypical, beliefs about rape, its victims, and its perpetrators (e.g., inviting a man into one's home after a date is an invitation for sex).²⁰⁻²¹ Not surprisingly, greater RMA is associated with more negative attitudes towards rape victims²²⁻²³ and actual sexual aggression and intent.²⁴⁻²⁵ Consistent with the aforementioned findings, men generally endorse greater RMA than women.¹⁸

Taken together, there is some research assessing factors associated with disclosure receipt and subsequent reactions to disclosure, but this area of the literature is under developed. Given the scope and importance of the problem of sexual assault on college campuses, it is important to better understand this facet of the victim's post-assault environment, including disclosure recipients' role in supporting victims post-assault, and awareness of the factors that may affect their responses to victims. Expanding the available knowledge about disclosure recipients, including who they are and how they respond to victims, can help to optimize the disclosure experience by helping recipients learn how to best support victims.^{26–27}

The current study addresses gaps in the literature by using a multi-site sample of undergraduates to examine factors associated with perceptions of the victim and their perceived ability to help her. Previous research in this area is often acontextual (i.e., general perceptions of victims), and by focusing on a disclosure interaction, this study provides valuable information about this important post-assault interaction. This study also includes important life experience variables that are unfortunately common among undergraduates (i.e., personal victimization history, disclosure receipt). Although research has evaluated the influence of some of these variables, history of disclosure receipt – an experience that is more common than victimization – is rarely assessed. Three specific hypotheses are tested. First, consistent with previous research,² disclosure recipients will be more likely to have a personal sexual assault history than nonrecipients. Second, consistent with previous research,^{16–17} female gender and victimization history will be associated with more positive reactions to a hypothetical victim. Third, consistent with previous research,^{12,16} male gender and RMA will be associated with more negative reactions to a hypothetical victim.

METHODS

Participants and Procedure

Participants were 192 undergraduates at three universities, with 42.2% ($n = 81$) of participants attending a university in the Midwest, 32.8% ($n = 63$) in the West, and 25.0% ($n = 48$) in the Southeast. The majority of participants were female (79.2%, $n = 152$) and identified as White (85.9%, $n = 165$). Approximately half of participants were underclassmen (54.7%, $n = 105$); the average age was 20.92 ($SD = 3.69$, range 18–40). The majority was part- or full-time employed (61.5%, $n = 118$) and single (61.5%, $n = 118$). Childhood victimization (i.e., before age 18) was reported by 18.2% of participants ($n = 35$) and adulthood victimization was reported by 16.7% of participants ($n = 32$).

Participants responded to advertisements in their psychology classes and via the online study sign-up system (i.e., Sona Systems) used at their university for a study of sexual assault disclosure and differences between disclosure recipients and nonrecipients. Two secure online surveys were used for the study, with recipients and nonrecipients directed to different surveys; separate recruitment was done to balance group sizes. Of study completers, 85 students self-identified as recipients and 107 self-identified as nonrecipients. All measures were completed in approximately 30–45 minutes.

After reading the informed consent form, participants checked a box to indicate their consent to participate. They were then presented with the text of a hypothetical disclosure of an acquaintance rape victim (adapted from previous research).²⁸ Participants were asked to imagine that the female victim was a close friend and to think about how they might react in response to her disclosure. Participants then completed measures of disclosure-related responses, RMA, sociodemographic characteristics and sexual assault history. Self-identified disclosure recipients also reported on their actual disclosure experiences, although these findings are not addressed in this manuscript. Participants were given \$10.00 to an online retailer and course credit at applicable universities. The study was approved by the Institutional Review Board of a major medical university and at all participating universities.

Sociodemographic and Life Experience Measures

Sociodemographics questionnaire—Participants' sociodemographic characteristics were dichotomized for study analyses: gender, race, employment status and relationship status.

Sexual assault history—Three behaviorally specific questions from the Stressful Life Events Screening Questionnaire (SLESQ)²⁹ assessed for a history of rape, attempted rape, or sexual assault. A fourth question distinguished between childhood (prior to 18) and adulthood victimization.

Responses to Victims

Participants completed four measures – comprised of subscales – developed to assess the disclosure experience.¹⁶ Nonrecipients completed all four measures with respect to the vignette, and recipients completed all four of them with respect to their actual disclosure experience; recipients only completed two of the measures with respect to the vignette. Only the two measures completed by both groups in response to the vignette are presented here. All items were rated on a 5-point Likert scale (1 = *strongly disagree*, 5 = *strongly agree*) and have adequate reliability for the subscales (range: $\alpha = .64-.88$).¹⁶

Friends' perceptions of the victim and the assault (FPVA)—Higher scores on the 4-item Victim Responsibility Scale represent greater blame of the victim for the assault ($\alpha = .77$ in this sample). Higher scores on the 3-item Empathy Scale indicate greater empathy for the victim ($\alpha = .75$ in this sample).

Friends' perceptions of their assistance (FPA)—Higher scores on the 6-item Confusion Scale represent greater confusion about how to best respond to the victim ($\alpha = .83$ in this sample) and higher scores on the 6-item Ineffectiveness Scale represent increased perceptions that one's help was not useful to the victim ($\alpha = .80$ in this sample).

Attitudes about Victims

Rape myth acceptance—The 30-item Acceptance of Modern Myths about Sexual Aggression scale (AMMSA)²¹ was used to assess participants' rape myth acceptance. Participants responded using a 7-point Likert scale (1 = *completely disagree*, 7 = *completely agree*), with higher scores representing greater endorsement of rape myths. It has strong

psychometrics, including a high level of internal consistency ($\alpha = .90-.95$ across four studies; $\alpha = .91$ in this sample) and test-retest reliability over 3–13 weeks ($r = .67-.88$ across four studies).²¹

RESULTS

Statistical Analyses

Descriptive and bivariate analyses were used to assess for differences between disclosure recipients and nonrecipients with respect to sociodemographic characteristics and life experiences, as well as rape- and disclosure-related attitudes and perceptions. One multivariate outlier ($> 3 SD$ from the mean) was removed from the dataset. To address the primary study hypotheses, four linear regression analyses were conducted to assess the influence of gender, victimization history, disclosure receipt and RMA on participants' perceptions of the hypothetical rape victim, as well as their ability to help her.

Descriptive and Bivariate Analyses Between Groups

Differences between schools—Bivariate analyses revealed differences in race (White vs. non-White) between schools, $\chi^2 (2, N = 192) = 9.67, p = .008$, but no other differences with respect to dichotomous sociodemographic variables or life experiences, all p 's $> .10$. One-way ANOVAs revealed a difference between schools on FPVA-Victim Responsibility, $F(2, 183) = 6.46, p = .002$; no other differences between schools were detected, all p 's $> .10$.

Differences between disclosure recipients and nonrecipients—Disclosure recipients were more likely to report a history of both childhood, $\chi^2 (1, N = 177) = 6.65, p = .009$, and adulthood victimization, $\chi^2 (1, N = 176) = 8.03, p = .004$, compared to nonrecipients (62.9% vs. 38.7% and 65.6% vs. 38.2%, respectively). There were no differences between recipients and nonrecipients on other sociodemographic variables, all p 's $> .05$.

With respect to attitudinal measures, an ANCOVA controlling for school was used for FPVA-Victim Responsibility. This analysis showed that school, $F(1, 183) = 5.58, p = .02$, but not disclosure receipt history, $F(1, 183) = 2.75, p = .10$, nor the interaction between these variables, $F(1, 183) = .85, p = .36$, was responsible for this difference. School was controlled for in further analyses involving FPVA-Victim Responsibility. Correlations between study variables are presented in Table 1 and differences between recipients and nonrecipients on outcome measures are presented in Table 2. Of note, recipients reported less perceived victim responsibility, and less perceived ineffectiveness and confusion with respect to helping the victim, compared to nonrecipients.

Multivariate Analyses for Disclosure Recipients and Nonrecipients

Perceptions of the victim and the assault—Hypothesized variables (i.e., gender, victimization history, disclosure receipt, RMA) were entered into regression equations separately predicting the perceptions of, and perceived reactions to, victims. Given that FPVA-Victim Responsibility differed significantly between schools, this variable was controlled for in this regression. The full model was significant, $F(6, 157) = 5.29, p < .001$,

and explained 17.4% of the variance in responsibility attributed to the victim. RMA accounted for 9.5% of the variance ($sr^2 = .09$), school accounted for 2.3% ($sr^2 = .02$) and disclosure receipt accounted for 2.1% ($sr^2 = .02$). With respect to FPVA-Empathy, the full model was significant, $F(5, 155) = 7.71, p < .001$, and explained 20.4% of the variance in victim empathy. A history of adulthood victimization accounted for 7.7% of the variance ($sr^2 = .08$), childhood victimization accounted for 4.0% ($sr^2 = .04$) and gender accounted for 2.6% ($sr^2 = .03$). See Table 3 for the full model.

Perceptions of one's assistance—With respect to FPA-Confusion, the full model was significant, $F(5, 146) = 6.65, p < .001$, and explained 19.1% of the variance in perceived confusion about how to best help the victim. Disclosure receipt accounted for 8.1% of the variance ($sr^2 = .08$), RMA accounted for 6.2% ($sr^2 = .06$) and childhood history of victimization accounted for 2.5% ($sr^2 = .02$). With respect to FPA-Ineffectiveness, the full model was significant, $F(5, 147) = 5.53, p < .001$, and explained 16.3% of the variance in perceived ability to help the victim. RMA was the only significant predictor in this model, and it uniquely explained 11.2% of the variance in ineffectiveness scores ($sr^2 = .11$). See Table 3 for the full model.

COMMENT

The results of this study address a gap in the literature with respect to disclosure recipients and nonrecipients, and their perceptions of, and responses to, sexual assault victims. Given the valuable role that disclosure recipients can play in helping victims post-assault,^{10,30} it is important to better understand the factors that are associated with receiving, and responding to, a disclosure. Information of this nature is critical in informing university interventions to address sexual assault for both victims and their peers who may receive a disclosure.

Consistent with the first hypothesis, participants with their own history of victimization were more likely to have received a disclosure. Possible explanations include reciprocal sharing following a disclosure, or intentional disclosure to a known victim.² Although this study cannot speak to the reasons for victims' decisions to disclose to a given person, further research regarding disclosure-related decisions is warranted. Given that recipients did not differ on any other individual difference variables, it appears that anyone may receive a disclosure, and thus, should be prepared to respond supportively to victims.

It appears that disclosing to other victims is a wise choice, as victimization status predicted greater victim empathy, consistent with the second hypothesis and previous research.¹⁶ Victimization history was not a predictor of perceived victim responsibility, contrary to the second hypothesis, but the relations were in the expected direction and consistent with theoretical work regarding victim blame. Shaw and McMartin³¹ described two types of observer-related avoidance: blame (i.e., minimizing the perceived likelihood that one would be blamed if she herself were victimized) and harm (i.e., minimizing the perceived likelihood of one's own risk for sexual victimization); the type of avoidance enacted is influenced by identification with the victim.³¹ Because victims are more likely able to identify with the hypothetical victim, and thus assign less blame to her, this reaction is consistent with blame avoidance. Although this relation was in the correct direction, but not

significant, for childhood victimization, it is possible that this more distal experience does not translate as directly into beliefs about, and perceived similarity to, the victim. Harm avoidance may have influenced nonrecipients' greater levels of attributed responsibility for the rape to the victim, as they may not strongly identify with her. Similarly, RMA predicted perceived victim responsibility, consistent with the third hypothesis and previous research;³² participants who reported more negative beliefs about rape victims – and thus, were likely less readily identifying with the hypothetical victim – may have assigned more blame to her to minimize their perceived risk of victimization.

It is interesting then that, as predicted by the third hypothesis, men reported less empathy towards, but not significantly more responsibility assigned to, the victim. Thus, even though men seemed to not identify as strongly with the victim, and male gender was correlated with perceived victim responsibility, consistent with most previous research,¹² RMA may play a stronger role in determining perceptions of responsibility for the assault. However, these results should be assessed in further research, given the limited power to assess for the influence of gender and the need for assessment of a range of variables that may impact responses to victims, (e.g., perceived similarity).

Consistent with the third hypothesis, RMA predicted both confusion about, and perceived ineffectiveness of, the help one could provide to the victim. Individuals who endorsed negative and stereotypical views of rape victims reported feeling less prepared to respond supportively and effectively to her. It is possible that preexisting negative beliefs about rape victims and one's ability to help may compound the frustrations that may arise in this potentially-distressing process, leading to poorer support provided to victims, and greater distress for recipients. The finding that disclosure recipients reported less confusion about how to help the victim is consistent with this explanation. Although reporting less confusion does not necessarily translate into the provision of effective help, it highlights the role that previous experiences may have in how one responds to rape victims. Importantly, research with disclosure recipients showed that those who doubted their ability to help were often distressed by the disclosure experience which, for some, affected their ability to support the victim,¹⁶ making this an important area to address in sexual assault-related interventions.

Limitations

Limitations of this study include its cross-sectional design, which prevents understanding the directional nature of the relations reported, small obtained effects for some differences, and limited power for some analyses. Additionally, the findings reported here are with respect to a hypothetical victim and disclosure, and participants' responses may be affected by this analogue format and not translate into actual beliefs and behavior. Despite this tempering of the study's results, these findings provide important avenues for future work regarding disclosure.

Taken together, it is clear that a number of factors affect perceptions of, and reactions to, rape victims, including gender, direct and indirect experience with sexual assault, and related attitudes. Although much research in this area assesses responses to hypothetical vignettes, the translation of reported responses to hypothetical victims and actual behavior is not well studied. Given the number of ways in which people may learn of an assault (e.g.,

newspaper article, told by someone who knows the victim), and contexts in which they may interact with victims (e.g., receipt of a disclosure, jury trial), further assessing contextual factors and a range of outcome variables (e.g., perceived responsibility, actual responses to victims) is important. Finally, inclusion of larger multi-site samples is warranted, given the general reliance on smaller single-university samples in this area of research.

Conclusions

This work adds to the limited body of research regarding disclosure recipients, showing that both life experience variables and sexual assault-related attitudes appear to influence perceptions of victims, and one's ability to help them. The identification of individual difference variables that influence perceptions of, and responses to, sexual assault victims, is important for prevention and response efforts. Although the victim cannot change the nature of her assault or personal history, she can be encouraged to seek support from those most likely to help her within her peer and campus communities. Thus, this information can inform university interventions by identifying groups that may be more likely to respond negatively to victims and provide content for programming efforts (e.g., dispelling rape myths), thus increasing the likelihood that others will respond supportively to victims. Importantly, research shows that tailored interventions are more effective,^{33–34} and the findings presented here indicate groups that may be of particular need of intervention; such efforts can be targeted to these, and other, groups (e.g., resident advisors, fraternities and sororities, sexual assault victims) to optimize their effectiveness.

The provision of corrective information about sexual assault and its possible effects may be useful for counteracting false and negative beliefs among those who may receive a disclosure.^{19,27,35} It is hoped that a more accurate understanding of sexual assault and its impact would increase the likelihood that victims receive a positive response from those to whom they disclose. Additionally, such information is also likely to help those who have been, or may in the future be, victimized by facilitating an accurate understanding of sexual assault and rape, as well as providing information about available resources for post-assault services and support.²

Potential disclosure recipients can also be helped through the provision of information about how to best respond to victims of sexual assault, including managing one's own distress related to this potentially-upsetting experience. The findings presented here, as well as those in the existing literature,^{16,26–27} show that, although recipients are generally supportive of victims, some recipients experience disclosure-related distress and do not always know how to best help victims. Thus, it is important to include skills-based training to assist people in learning how to best support victims and manage their own distress.^{16,26–27,35} Program content can include instruction in listening skills, such as encouraging the victim to freely express her feelings without asking excessive questions or expressing doubt or blame,^{27,35} giving examples of language that one can use to express concern and support,^{26–27} and providing information about local resources and options (e.g., medical and mental health care, formal reporting) to which the recipient can refer the victim.^{27,35–36} Of note, such efforts dovetail with current college programs that focus on empowering bystanders and allies to create more supportive campus environments for victims,²⁶ and preliminary support

exists for supportive listening skills training interventions for undergraduates, demonstrating the feasibility of these efforts.³⁷ Finally, including information about personal self-care strategies to manage any distress that may arise following receipt of a disclosure is also useful, given the emotional experience that recipients may have following receipt of a disclosure.^{26–27,35}

Such programming is warranted on a wide scale at the college level. Although the mean scores on the outcome measures assessed in this study were generally in the neutral or somewhat victim-favorable range, there was not clear expressed disagreement with rape myths or strong positive responses to victims. Further, given the prevalence of sexual assault victimization and disclosure receipt on college campuses,^{1,2} as well as notably higher rates of victims' disclosure to friends and family,^{5,7–9} the scope of sexual violence is unfortunately broad in this environment. Yet, by continuing to expand our knowledge about disclosure recipients and the disclosure experience, including how to best support victims and recipients through college-level interventions, we may be able to improve post-disclosure outcomes for victims and recipients alike, thus mitigating the impact of sexual assault on college campuses.

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Table 1

Correlations between study variables.

	1	2	3	4	5	6	7	8	9	10	11	12	13	14
1. Gender (male)	---	-.02	.17*	.06	.08	-.15*	.16*	.16*	.10	-.03	.24***	.06	-.14	-.16*
2. Race (White)		---	-.10	-.06	.10	-.29***	.06	-.07	-.12	.12	.04	-.02	.00	.05
3. Employed (no)			---	.19**	.04	.24***	-.09	.03	.11	-.00	-.08	-.13	-.14	-.12
4. Relationship (no)				---	-.19**	.40***	.06	.16*	.11	-.10	.17*	-.16*	-.19**	-.22**
5. Greek (no)					---	-.09	-.07	-.06	.07	-.04	.00	-.06	-.11	-.11
6. Age						---	-.06	.23**	.11	-.13	.05	-.22**	-.13	-.31***
7. Child victim (no)							---	-.23**	.19**	-.04	.16*	.09	-.06	-.02
8. Adult victim (no)								---	.21**	-.15*	.29***	-.17*	-.14	-.20**
9. Disclosure (no)									---	-.14	.07	-.31***	-.20**	-.03
10. FPVA – VR										---	-.04	.17*	.19**	.31***
11. FPVA – E											---	-.19*	-.21**	-.25**
12. FPA – C												---	.66***	.26**
13. FPA – I													---	.37***
14. AMMSA														---

Note. Terms in parentheses represent the control condition (i.e., set to zero) for the dichotomous variables. FPVA = Friends' Perceptions of the Victim and the Assault Scale; VR = Victim Responsibility; E = Empathy; FPA = Friends' Perception of Their Assistance Scale; C = Confusion; I = Ineffectiveness; AMMSA = Acceptance of the Modern Myths about Sexual Aggression Scale.

* $p < .05$,

** $p < .01$,

*** $p < .001$

Table 2

Differences between disclosure recipients and nonrecipients on outcome measures.

Outcome Measure	Recipient Mean (SD)	Nonrecipient Mean (SD)	t-value	df	d
FPA-Victim Responsibility	9.06 (3.30)	10.02 (3.22)	1.97*	182	.29
FPA-Empathy	10.52 (3.09)	10.10 (2.90)	-.93	179	.14
FPVA-Confusion	12.50 (5.27)	15.88 (4.92)	4.27***	168	.66
FPVA-Ineffectiveness	11.19 (4.10)	12.90 (4.18)	2.68**	171	.41
AMMSA	100.56 (24.92)	102.20 (23.50)	.43	162	.07

Note. FPVA = Friends' Perceptions of the Victim and the Assault Scale; FPA = Friends' Perceptions of Their Assistance Scale; AMMSA = Acceptance of Modern Myths about Sexual Aggression Scale.

* $p < .05$,

** $p < .01$,

*** $p < .001$

Table 3

Linear regressions predicting perceptions of a hypothetical rape victim and one's responses to her.

FPVA-Victim Responsibility		FPVA-Victim Empathy						
Variables	b	Std. Error	β	95% CI	b	Std. Error	β	95% CI
$R^2 = 0.02$								
<i>Model 1</i>								
School	.58	.34	.14	[-.09, 1.25]				
$R^2 = 0.16^{***}$								
$R^2 = 0.20^{***}$								
<i>Model 2</i>								
School	.66*	.33	.15	[.02, 1.31]				
Gender	.48	.71	.05	[-.92, 1.89]	1.31*	.59	.17	[.14, 2.47]
Child history	-.09	.68	-.01	[-1.44, 1.26]	1.59**	.58	.22	[.44, 2.73]
Adult history	-.92	.71	-.11	[-2.32, .48]	2.28***	.60	.31	[1.10, 3.46]
Discl receipt	-1.03*	.53	-.15	[-2.10, .01]	-.26	.45	-.05	[-1.15, .62]
RMA	.04***	.01	.32	[.02, .07]	-.02	.01	-.14	[-.04, .00]

Table 4

	FPA-Confusion				FPA-Ineffectiveness		
	R ² = .19***				R ² = 0.16***		
Gender	1.78	1.14	.12	[-.47, 4.03]	-.61	.87	[-2.34, 1.12]
Child history	2.28*	1.10	.17	[.10, 4.46]	.43	.90	[-1.35, 2.22]
Adult history	-.42	1.20	-.03	[-2.79, 1.94]	-.31	.91	[-2.10, 1.48]
Discl receipt	-3.32***	.88	-.31	[-5.07, -1.58]	-1.27	.68	[-2.61, .07]
RMA	.06***	.02	.26	[.02, .09]	.06***	.01	[.03, .09]

Note. FPVA = Friends' Perceptions of the Victim and the Assault Scale; FPA = Friends' Perceptions of Their Assistance Scale; Discl = disclosure; RMA = Rape myth acceptance.

* p .05,

** p .01,

*** p .001