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ABSTRACT

Cognitive appraisals are believed to influence how women judge or appraise risk in acquaintance interactions which lead to sexual assault. Ways in which men and women judge the presence of risk factors in scripted acquaintance rape scenarios, and whether alcohol was a significant factor in assessing risk, are examined in this paper. Participants were 132 undergraduate students at a large southeastern university. Two scripted rape scenarios were used which were identical, except in one the man and woman drank soft drinks and in the other they drank beer. Results indicate that alcohol did not play a factor in how participants judged risk factors, although differences did emerge between men and women in their appraisals of risk. Males held more negative attitudes toward rape victims than did women; women attributed increased risk for assault to situational factors in the rape scenario itself. Minority respondents showed more negative attitudes toward rape victims than did non-minority respondents. Three risk factors, related to violations of boundary, were revealed as significant indicators of risk; increased risk in a rape situation was associated with violations of personal boundaries by the perpetrator. Implications of these findings for increased prevention training for women and men are discussed. (RJM)

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Running Head: RISK IN ACQUAINTANCE RAPE

Risk Appraisal in Scripted Acquaintance Rape Scenarios

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Abstract

Cognitive appraisals are believed to influence how women judge or appraise risk in acquaintance interactions which lead to sexual assault. The current study examined how men and women judge the presence of risk factors in a scripted acquaintance rape scenario and if alcohol was a significant factor in assessing risk. Correlations between risk and attitudes toward rape victims were examined also. In the present study alcohol did not play a factor in how participants judged risk factors as was hypothesized. Differences between women and men in their appraisals of risk were found. Significant differences were observed in minority and non minority participants' attitudes toward rape. Three risk factors, related to violations of boundary, were significant indicators of risk. Implications of these findings are discussed in terms of increasing prevention training for women and men.

Risk Appraisal in Scripted Acquaintance Rape Scenarios

There is no question that sexual assault and all other crimes of sexual violence permeates American society and leaves a trail of pain, injury and trauma for victims, their friends and families. Sexual violence cuts across all racial, class, and economic populations of our society (Coley, & Beckett, 1988; Koss, 1988b). It is most likely to occur between individuals who have some acquaintance or familiarity with each other (Koss, Goodman, Browne Fitzgerald, Keita, & Russo, 1994). Moreover, whenever such rapes and sexual assaults take place they are likely to occur indoors, involve alcohol consumption by both the assailant and victim, and contain verbal threats (Bowns, O'Gorman & Sayers, 1991, cited in Koss et al, 1994).

While numerous research studies have examined the rape phenomenon, few studies have investigated just how victims determine risk. Cognitive appraisals are believed to play a significant role in a person's response to a risk or threat such as rape. Such cognitive appraisals arise out of a person's interpretation of events (Roseman, 1984) and involve the person's interaction with the environment (Lazarus, 1991b). Appraisals [of risk] are thought to be influenced by both individual and sociocultural variables including family history, prior trauma, sexual orientation, class, community attitudes, and gender related norms (Koss et al, 1994). Understanding cognitive appraisal suggests the need for scholars and practitioners to look at the trauma [rape], its antecedent events, and an individual's response to it along with the recovery process within the context of the survivor's personal meaning of those events and characteristics.

The present study examines the phenomenon of acquaintance rape as characterized in a

scripted scenario and investigates the relationship between the appraisal of risk and attitudes toward rape victims. It is posited the respondents who hold rape supportive beliefs or about women rape survivors will assign less risk to variables within the rape situation itself and more to individuals in those circumstances. Further, it is hypothesized there will be differences between male and female respondents in their perceptions of risk and attitudes toward rape victims. Alcohol is believed to affect how individuals perceive rape victims and appraise risk such that there will be differences between respondents in the alcohol vs. no alcohol treatment condition. Lastly there will be no differences between minority and non minority respondents in this study

Method

Participants

Participants were 132 undergraduate students at a large southeastern university. Students were recruited from kinesiology, mental health, criminology, and education courses and were given class credit for their participation. Of these participants, 70.5% were female and 28% were male students. Of the respondents, 61% were nonminority (Caucasian) while 39% were minority (African American, Asian American, Hispanic/Latino, Native American or Foreign National).

Rape Script

Two scripted rape scenarios were used in the present study. The scenarios described an acquaintance interaction in which a male college student forces a female student to have nonconsensual sexual intercourse. The assault occurs during a study session at the home of the female student. The two scenarios read the same except for one sentence concerning alcohol. In one scenario, the students were depicted as drinking two soft drinks while working on a class

project. The second scenario described students as consuming two beers. Participants were assigned to either Treatment scenario A (no alcohol condition) or Scenario B (Alcohol condition).

Prior to the onset of the study, three expert raters reviewed the two scenarios for content validity. Experts were rape counselors and one was a director of a rape crisis center. A consensus was obtained from the raters concerning the viability of these scripts.

Instruments

Participants were asked to complete two instruments, the Attitudes Toward Rape Victims (ARVS) scale (Ward, 1988) and the Risk Appraisal Inventory (RAI). The ARVS is a 25-item likert scale designed to assess favorable and unfavorable attitudes with particular emphasis on victim blame, credibility deservingness, denigration, and trivialization. The ARVS was internally consistent with Cronbach's Alpha = .86. and has held across cross cultural testings (Ward, 1988). Test/retest reliability for the ARVS showed moderately high test-test reliability of +.80. The ARVS is most significantly correlated with attitudes toward women, $r = -.61$, $p < .0005$ (Ward, 1988).

The RAI is a 20-item , author-created likert scale designed to assess the degree of risk associated with characteristics of a potentially risky situation. Respondents are asked to indicate the degree of risk of each attribute (e.g verbal threats, isolated from peers and support) as found in a scripted scenario presented to them. Respondents ranked each factor as "not applicable, No risk, some risk, Moderate risk, or Extreme risk" when asked to asses the degree to which each factor contributed to risk for the victims in the scripted scenario they were asked to read. No reliability /validity data is available for the RAI since it is a newly created instrument, designed

first for use in this study.

Procedure

Participants were handed research packets during a lecture class. Each packet contained one rape scenario, a demographic information sheet, one consent form and two research questionnaires. Participants received one of two treatment conditions, either Scenario A (no alcohol) or Scenario B (Alcohol). After reading the scenario, participants were asked first to complete the RAI and then the AVRS and the demographic form. The total time to complete the survey was approximately 20 minutes.

Results

An Analysis of Variance (ANOVA) found no significant differences between Group A (No alcohol) on either the ARVS or the RAI. However, scores on the ARVS showed a significant negative correlation with scores on the RAI ($R = -.35, p \leq .01$). The higher the ARVS score (indicating more negative attitudes toward rape victims), the lower the risk appraisal scores (which indicates less risk being attributed to these factors). Three factors on the RAI associated with violations of one's personal space or boundaries ("unwanted sexual touching", "being touched without permission", and "perpetrator ignored 'no'") showed a significant negative correlation with scores on the ARVS ($r = -.23, -.25, -.29, p \leq .01$). Thus, the higher risk attributed to each of these factors, the less negative were participants' attitude toward rape victims.

One way ANOVAs were performed to examine the differences between male and female, minority and nonminority participants on the two questionnaires. These analyses revealed that males had significantly higher scores than females on the ARVS, while females had significantly higher scores than males on the RAI. This finding suggests that males have more negative

attitudes toward rape victims than do women, and that women attribute more risk to various "situational" factors in a rape scenario than do men. Minority participants showed significantly higher scores on the ARVS than did nonminority participants, but there was no significant difference between minority and nonminority participants on the RAI scores.

Discussion

Research that acknowledges how characteristics of a victim (ie. perceptions) shape one's response to an assault is limited (Koss et al, 1994). Coping style, personality type, ethnicity, class, and sexual orientation are rarely examined in rape research. How a woman perceives an acquaintance situation and its environmental characteristics can impact her ability to judge risk and engage in risk reduction activities to lessen the opportunity for rape. The need to understand how women judge risk in situations which lead to rape is obvious. If women can be taught to recognize risk factors, they might recognize indicators of risk earlier thereby averting a completed rape from occurring. For this reason, understanding the process of risk appraisal is essential.

In the present study, males held more negative attitudes toward rape victims than did women, a finding consistent with existing literature. Women attributed increased risk for assault to "situational" factors in the rape scenario itself more frequently than did men. More difficult to explain is the finding that minority respondents showed more negative attitudes toward rape victims than did non minority respondents. There is no consensus in the literature concerning cultural differences in attitudes toward rape survivors. Clearly, more research needs to occur with minority populations to better understand their beliefs about rape survivors and general attitudes toward sexual assault.

The negative correlations between the three items on the RAI associated with personal boundary violations suggest that respondents associate increased risk in a rape situation with violations of personal boundaries by the perpetrator. In other words, respondents saw these factors as strong indicators of risk in acquaintance rape situations. The finding suggests that women can be taught to recognize these and other potential risk factors. These findings have important implications for rape prevention programs and services. With increased knowledge about boundary violations, women may be able to develop responses to such violations that will increase their safety. Females' scores on the risk appraisal inventory seemed consistent with findings in the literature.

The finding that minority participants held more rape supportive beliefs about women than did nonminority women is a concern for many service providers given that rape is becoming increasingly violent and deadly within racial and cultural minority communities (Department of Health and Human Services, 1991). More research is needed to best understand risk factors in minority communities and to examine how rape beliefs develop. Future research must be designed with prevention in mind so that minority communities can reduce sexual assault and sexual violence which are at epidemic portions within minority neighborhoods.

Despite the fact that the current study did not find any differences in the alcohol vs no alcohol treatment conditions, more research is needed in this area. One reason for this study's failure to find differences is that the rape script may not have been a powerful treatment. The script contained only one sentence describing alcohol consumption. Perhaps the script required a fuller description of alcohol consumption; a paragraph or two would provide a more complete description of alcohol. Future studies using a scripted scenario should consider such enhancement

to the rape script.

In closing, this study reaffirms the importance of early training to teach women how to recognize risk cues. Women may still be socialized to fear the stranger jumping out of the bushes. They are not socialized to recognize acquaintance risk factors and new rape prevention programs should emphasize those risk factors. Future research should continue to explore the cognitive factors and thinking processes which surround one's appraisal of risk in acquaintance interactions to determine ways to reduce acquaintance rape interactions.

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