



Open Access Original Research

# The Role of Female Rape Myth Acceptance, Homophobia Towards Gay Men, Age and Gender as Predictors of Male Rape Myth Acceptance

Georgia A. McIntyre<sup>1</sup>, PhD, Sophia Tkazky, PhD<sup>1,2\*</sup>

**Citation:** McIntyre, G.A., Tkazky, S. (2023). The Role of Female Rape Myth Acceptance, Homophobia Towards Gay Men, Age and Gender as Predictors of Male Rape Myth Acceptance. *Journal of Concurrent Disorders*.

**Founding Editor-in-Chief:** Masood Zangeneh, Ph.D.

**Editor:** Dean Fido, Ph.D.

**Received:** 11/23/2022  
**Accepted:** 06/07/2023  
**Published:** 06/24/2023



Copyright: ©2023 McIntyre, G.A., Tkazky, S. Licensee CDS Press, Toronto, Canada. This article is an open access article distributed under the terms and conditions of the Creative Commons Attribution (CC BY) license (<http://creativecommons.org/licenses/by/4.0/>)

<sup>1</sup>College of Health, Psychology and Social Care, School of Psychology, University of Derby, UK

<sup>2</sup>ORCID: [0000-0002-5479-9845](https://orcid.org/0000-0002-5479-9845)

\*Corresponding author: Sophia Tkazky, [s.tkazky@derby.ac.uk](mailto:s.tkazky@derby.ac.uk)

**Abstract.** Sexual assault and rape is a worldwide problem. Rape myth acceptance has been identified as one of the factors associated with rape and sexual aggression, with rape myth acceptance aiding in the perpetrator's justification while simultaneously placing the blame on the victim. However, the vast majority of studies on rape myths has been exclusively dedicated to rape myths about female victims (female rape myths). The current study aimed to investigate male rape myth acceptance (MRMA) and the factors which can influence it, such as female rape myth acceptance (FRMA), homophobia towards gay men (HTGM), age, and gender, to determine if there was a significant correlation. A sample of 84 UK residents between the ages of 18 and 67 years (35.7% males, and 64.3% females) were recruited through opportunity sampling. The Male Rape Myth Acceptance Scale (MRMAS), the Illinois Rape Myth Acceptance Scale-Revised (IRMA-R), and the Negative Attitudes Towards Gay Men Scale (NATGM) were used to assess the acceptance of male rape myths, female rape myths, and homophobia towards gay men. Standard multiple regression analysis indicated that together FRMA, HTGM, age, and gender significantly predicted a greater acceptance of male rape myths. Individually, only FRMA, HTGM, and age were found to be significant predictors of MRMA. The findings support the idea that sociocultural factors could have a stronger influence of rape myths than gender. This can inform the development of appropriate education and awareness programmes and adjustment of prevention programmes and interventions that are aimed at decreasing male rape myth acceptance.

**Keywords:** Rape Myths, Male Rape Myths, Female Rape Myths, Homophobia Towards Gay Men.

## Background

In the United Kingdom, it is estimated that 1.6 million people aged 16 to 74 have been sexually assaulted: 71% of the victims were women, 0.5% were men, and the 28.5% chose to remain anonymous (Office for National Statistics, 2020). However, the prevalence of sexual assault may be higher as many incidents go unreported, possibly due to feelings of guilt, shame, embarrassment, self-blame, or humiliation (Crown Prosecution Service, 2020). And also due to COVID-19's impact on reporting rates (Crown Prosecution Service, 2020) as many individuals were confined to their homes and may not have felt comfortable to report, especially if they were confined with their abuser. Sexual assault is a serious global problem (Labhardt et al., 2017). In the Sexual Offences Act of 2003, it was defined as 'non-consensual touching or penetration of the vagina, anus, or mouth by a penis or object (Home Office, 2020). Although UK legislation has changed in recent decades, more can be done to adopt a gender-neutral definition of rape (Lowe & Rogers, 2017) as under current UK law penetration is required for the offence to be classified as rape, which means that a woman cannot legally rape a man (Fisher & Pina, 2013). Potentially this can isolate male victims who have been sexually assaulted by women as they are not seen as victims of a crime as serious as rape and are not protected under UK law equally to victims of sexual assaults perpetrated by males.

Male rape has been linked to a variety of long-term psychological issues, including post-traumatic stress disorder (PTSD), depression, low self-esteem, alcohol/drug abuse, and suicidal tendencies (Walker et al., 2005). Rape has a detrimental impact on more than just victims; it can also have a negative impact on family, friends, and significant others, as well as those who help rape victims, such as therapists, rape victim advocates, and sexual assault researchers (Campbell & Wasco, 2005). Male victims are less likely to report rape or sexual assault to the police in fear of not being believed or blamed for their victimisation (Sable et al., 2006). Due to this many men have instead sought assistance from organisations such as Rape Crisis England & Wales, Mankind UK, Safeline and Male Survivors Trust. Safeline (2020) determined that at least 5 million (1 in 6) men have been sexually assaulted or raped at some point in their lives (Phillips, 2021), far more than the Office for National Statistics (2020) estimated. Despite the fact that these organisations have helped male victims there are still few organisations that are equipped to deal with male rape victims, as some male rape victims have reported that the organisations they visited for help were unable to provide support tailored to their gendered needs (Widanaralalage et al., 2022). At the same time, men who did report and had their cases progress through the Criminal Justice System (CJS) have regularly reported being treated unfairly and that the process has traumatised them further (Haskell & Randall, 2019). As a result, it is not uncommon for men to withdraw their cases; this also explains why the reporting rate for men is so

low, as they have a legitimate fear of being blamed or re-victimised by the CJS (Adolfsson, 2018).

One of the factors associated with rape and sexual aggression is the acceptance of rape myths (Edwards et al., 2011). Burt (1980, p. 217) defined rape myths as 'prejudicial, stereotyped, or false beliefs about rape, rape victims, and rapists', which can create hostile attitudes towards victims. Although there has been a substantial amount of research and literature on the attitudes, perceptions, and judgments of rape victims (Eyssel & Bohner, 2011; Frese et al., 2004; Sleath & Bull, 2010), it has primarily focused on female victims. Little consideration has been given to situations where men are the victims which has led to misconceptions about male rape victims and potentially fuelled false beliefs (Javaid, 2015). Rape myth acceptance (RMA) research has also primarily focused on female rape myth acceptance (FRMA), leaving male rape myth acceptance (MRMA) under-studied (Davies, 2002). As estimated by some, the research on MRMA is more than 20 years behind its female counterpart, an increase in research and literature will help reduce the stigma and rape myths surrounding male victims (Rogers, 1998; Spruin & Reilly, 2018).

### **Rape Myths**

Rape myths are strongly connected to other deeply held and prevalent attitudes, such as gender role stereotyping, cultural beliefs, and religious beliefs (Burt, 1980). Rape myths help to shape public perceptions of rape victims; they are essentially a form of victim-blaming in that they help to minimise and/or justify acts of sexual violence while simultaneously shifting the blame to rape victims (Lonsway & Fitzgerald, 1994). Hinck and Thomas (1999) highlighted the significant role that rape myth acceptance has on victim perception, as well as a victim's perceived vulnerability to rape and sexually aggressive behaviour. Individuals who support rape myths are more likely to believe that the sexual aggressor is not responsible for their actions, and it is instead the fault of the victim for the way they were dressed, acted, or presented themselves (Sawyer et al., 2002).

Rape myths about women have been well documented; for example, McMahon and Farmer (2011) concluded that there are four common rape myths about women: 'She asked for it,' 'He didn't mean to,' 'It wasn't really rape,' and 'She lied.' The first myth, 'She asked for it,' emphasises the victim's responsibility for the rape, implying that her actions precipitated the sexual assault. The second myth, 'He didn't mean to,' demonstrates the belief that the perpetrator did not intend to rape. The third myth, 'It wasn't really rape,' denies the sexual assault occurred and either blames the victim for not fighting back physically or justifies the offender. The fourth and final myth, 'She lied,' conveys disbelief that the rape occurred and assumes that the victim made up the assault (Rollero & Tartaglia, 2019). These rape myths have been used to justify sexual violence against women; additionally, the majority of the literature on sexual assault and rape has focused on instances with female victims and male offenders (Barn &

Powers, 2021; Campbell et al., 2001; Edwards et al., 2011), which limits the researcher's understanding of male victim perceptions.

Male rape myths are generally based on gender norms in which men are expected to conform to heterosexual masculine ideals (Turchik & Edwards, 2012), and have the ability to defend themselves from victimisation or to be the aggressor in the situation. Some male rape myths include: 'Men are less likely to be overpowered/forced to have sex because of their size and strength,' 'Men cannot be raped because they are instigators,' 'Male rape is rare,' 'Men should be strong enough to cope with the experience of being raped,' and 'Male rape only occurs in prison' (Kassing et al., 2005). Male rape myths repeatedly dismiss sexual violence against men as rape, where 'homosexual reactions' are used to justify the rapist's actions, feeding into the false belief that 'gay men cannot be raped' (White & Yamawaki, 2009). Situations in which a man gets an erection or ejaculates in response to an assault have been labelled as a "homosexual reaction," and have previously been interpreted as the victim enjoying their victimisation (Bullock & Beckson, 2011), rather than being interpreted as a natural reaction to sexual stimuli which can occur even when unwanted. These beliefs minimise the impact that male rape can have on victims, which can have devastating repercussions on male victims, in addition to perpetuating sexual violence against men (Turchik & Edwards, 2012).

### **Attribution Theory**

Attribution theory has been applied to rape myths in an attempt to understand why someone might blame another for their own victimisation. This theory focuses on how individuals perceive external information about other people's behaviour in order to form judgments and assign responsibility and blame in a situation (Crittenden, 1983; Grubb & Turner, 2012). Attribution can be influenced by a range of cognitive and motivational biases (Grubb & Turner, 2012), as well as both cultural and personal differences (Maddux & Yuki, 2006). According to Attribution theory the degree of responsibility and blame can vary depending on how the individual identifies with the victim. For example, individuals have been found to reduce the amount of blame attributed to victims with whom they identify, while increasing the amount of blame attributed to those who they perceive to be different from them (Idisis et al., 2007). It has been speculated that high levels of rape myth acceptance will be endorsed by traditional, masculine, heterosexual males due to their "culture prescribed" position of strength and power (e.g., hegemonic masculinity, Connell, 2020). In such case they do not identify with those who are perceived as "weak" in the traditional masculine paradigm (Connell, 2020): such as female victims, homosexual victims, or heterosexual victims with female perpetrators (Shaver, 1970). For instance, Davies and Rogers (2006) found that men supported more traditional views about masculinity and male sexuality than women due to societal norms. It was also found that male victims were more likely to be blamed for their own victimisation when compared to women

(Davies et al., 2001), and that homosexual male rape victims were blamed more than heterosexual victims due to traditional male roles (Wakelin & Long, 2003).

### **Factors Influencing Male Rape Myth Acceptance**

A variety of factors can influence MRMA. For example, while both men and women can support rape myths, it has been repeatedly indicated that men are more likely to endorse both male and female rape myths compared to women (Chapleau et al., 2008; Davies et al., 2012; DeJong et al., 2020; Grubb & Turner, 2012; Struckman-Johnson & Struckman-Johnson, 1992). Furthermore, when compared to men, women were more likely to respond to victims with empathy and were less likely to blame the victim for their own victimisation (Grubb & Harrower, 2008). This could be explained by the qualities assigned to genders in the traditional hegemonic masculinity paradigm: men are strong, dominant and cannot be victimised (as victimisation immediately puts them into marginalised and stigmatised position), while women are subordinate, gentle and must support others (e.g., Connell, 2020).

Age has also been investigated in relation to the acceptance of rape myths, however, the results have been inconsistent, and the relationships differ depending on which study is examined (Longsway & Fitzgerald, 1994). According to some studies (e.g., Kessing et al., 2005; Walfield, 2021) older men are more likely to endorse rape myths compared to younger men and women while others found no difference (Carmondy & Washington, 2001) or the opposite effect was found (e.g., Beshers & DiVita, 2021). This could be attributed to a variety of factors, including different populations, limited age differences, difference in sample size or even social and cultural changes between the generations in the society.

Female rape myth acceptance (FRMA) has also been shown to influence male rape myth acceptance (MRMA). Davies et al. (2012) determined the acceptance of female rape myths positively predicted the acceptance of male rape myths, indicating that individuals who adhere to female rape myths are more likely to adhere to male rape myths. Negative attitudes towards gay men were also found to be a significant predictor of MRMA (Davies et al., 2012). However, the ecological validity of this study was somewhat compromised by the use of a hypothetical scenario while the specifics of the sample (students only) could have impeded the findings' generalisability (Davies et al., 2012). The recent study by Spruin and Reilly (2018) supported the findings by Davies et al. (2012), but has the same sample issue (university students only). As pointed out by Longsway and Fitzgerald (1994), university populations have been shown to be more aware of social issues than the general population. In both studies the Struckman-Johnson and Struckman-Johnson (1992) MRMA scale was used, which might have influenced the findings as this scale was based on heterosexual interactions exclusively and may be ineffective for measuring male rape myths (Spruin & Reilly, 2018).

Negative attitudes towards gay men can influence negative attitudes towards male rape (Davies et al., 2001; Davies et al., 2012; Kassing et al., 2005; Walfield, 2021). Sexual orientation has also been linked to an increased risk of secondary victimisation, particularly among gay men and transgender people (Spiker, 2022). In rape and sexual assault situations, it has been determined that individuals are more likely to judge and blame gay victims than heterosexual victims (Davies et al., 2006). Additionally, homosexual rape situations (where the victims is gay) has influenced homophobic attributions (he must have caused his own victimisation as he is gay), which contributes to victim blaming, negative attitudes towards male victims, and male rape myths (Davies & Rogers, 2006). Negative attitudes towards gay men have been shown to predict MRMA (Davies et al., 2012; Kassing et al., 2005). It was also found that older participants with lower levels of education were more likely to adhere to male rape myths and have negative attitudes toward gay men (Kassing et al., 2005). Despite an increase of interest in male rape victims and the impact of male rape myths, research in this area remains limited and scarce (Walfield, 2021).

### **The Current Study**

The aim of the current study is to investigate whether male rape myth acceptance (MRMA) is correlated with female rape myth acceptance (FRMA), homophobia towards gay men (HTGM; rape myths about gay women will not be explored in this study), age, and gender. These factors were outlined in previous studies as positive predictors of MRMA (Chapleau et al., 2008; Davies, 2012; Davies et al., 2012; DeJong et al., 2020; Grubb & Turner, 2012; Kassing et al., 2005; Spruin & Reilly, 2018; Struckman-Johnson & Struckman-Johnson, 1992; Walfield, 2021)

#### *Hypothesis 1:*

H<sub>1</sub>: There will be a significant correlation between lower levels of FRMA and higher levels of MRMA, so it is expected that individuals with low acceptance of female rape myths will demonstrate higher acceptance of male rape myths.

#### *Hypothesis 2:*

H<sub>1</sub>: There will be a significant correlation between higher levels of HTGM and higher levels of MRMA, so it is expected that individuals who highly endorse homophobia towards gay men will highly endorse and accept male rape myths.

#### *Hypothesis 3:*

H<sub>1</sub>: Older participants will be more accepting of male rape myths compared to younger participants.

#### *Hypothesis 4:*

H<sub>1</sub>: Male participants will be more accepting of male rape myths in comparison with female participants.

## Methodology

### Design

This study had four predictor variables: female rape myth acceptance (FRMA), homophobia towards gay men (HTGM), age, and gender. There was only one outcome variable in this study which was male rape myth acceptance (MRMA). Multiple regression, a correlational design, was used to test all hypotheses of this study.

### Participants

The Qualtrics sample size calculator was used to determine the number of participants needed for the current study; it was established that a minimum of 60 participants would be required. This study had 95 participants, which was more than the required number. However, 11 of the 95 data sets collected were removed due to incomplete surveys, leaving 84 data sets to be used in the analysis. All participants lived in the UK at the time of their participation. There were 30 (35.7%) male participants and 54 (64.3%) females participants ranging from 18 to 67 years old with a mean age of 26.76 (SD=9.64).

### Materials

Three questionnaires were distributed to participants using Qualtrics (an experience management software). The Male Rape Myth Acceptance Scale (MRMAS) by Hine et al. (2021) was used to assess the levels of male rape myth acceptance (MRMA). This scale consisted of 48-items ranked on a 7-point Likert Scale which ranged from 1 (strongly disagree) to 7 (strongly agree), with higher scores indicating higher levels of MRMA for that participant. The items in this questionnaire addressed six different aspects of male rape myths: Context ('Male rape occurs only in prison'), Pleasure ('A male victim who ejaculates during the altercation has not been raped'), Perpetrators ('A man would not rape another man if he was being sexually satisfied elsewhere'), Effect ('Men should be strong enough to cope with being raped'), Sexuality (Male rape only occurs among homosexual men'), and Masculinity ('Men are less likely to be overpowered/forced to have sex due to their size and strength') (Hine et al., 2021; Kassing et al., 2005). These myths were later divided into two subscales, with the 'Blame' subscale accounting for items that either blame the victim or claim that only certain groups of men are raped, and the minimisation/exoneration subscale accounting for items that either exonerate the perpetrator or minimise the incident (Hine et al., 2021). Cronbach Alpha scores for this scale showed strong internal reliability ( $\alpha=.97$ ), and the subscales showed strong interval reliability for blame ( $\alpha=.96$ ) and minimisation/exoneration ( $\alpha=.89$ ) (Hine et al., 2021). Furthermore, this scale showed strong correlations with proximal measures such as traditional rape myths, previous measures of male rape myths, and other attitudes, indicating excellent construct validity (Hine et al., 2021).

McMahon and Farmer's (2011) Illinois Rape Myth Acceptance Scale-Revised (IRMA-R) was used to assess female rape myth acceptance (FRMA). This scale consisted of 22-items ranked on a 5-point Likert Scale which ranged from 1 (strongly agree) to 5 (strongly disagree), with higher scores indicating a greater rejection for FRMA. The items in this questionnaire were separated into four subscales to address the four main female rape myths, such as: 'She Asked For It' (The victim precipitated the assault and was therefore responsible for the rape), 'He Didn't Mean To' (The perpetrator did not intend to rape), 'It Wasn't Really Rape' (The rape did not occur as the victim did not resist), and 'She Lied' (The victim lied about the assault) (McMahon & Farmer, 2011; Rollero & Tartaglia, 2019). Cronbach Alpha Scores for this scale indicate strong internal reliability ( $\alpha=.89$ ), as well as moderate to strong internal reliability for the following subscales: 'She Asked For It' ( $\alpha=.82$ ), 'He Didn't Mean To' ( $\alpha=.75$ ), 'It Wasn't Really Rape' ( $\alpha=.88$ ), and 'She Lied' ( $\alpha=.85$ ) (McMahon & Farmer, 2011). Furthermore, this revised scale was rigorously tested for construct and criterion validity, with results indicating that the scale's validity was supported (McMahon & Farmer, 2011). McMahon & Farmer (2011) highlighted that the IRMAS is written in updated and relevant language, which helps to grasp subtle rape myths.

The acceptance levels of homophobia toward gay men (HTGM) were measured using Davies' (2004) Negative Attitudes Towards Gay Men Scale (NATGM). This scale consisted of 13-items ranked on a 7-point Likert Scale which ranged from 1 (strongly disagree) and 7 (strongly agree), with higher scores indicating more negative attitudes towards gay men. The items of this questionnaire were separated into three subscales in order to address different aspects of homophobia, including: Attitudes Toward Homosexual Individuals ('Homosexuality as a threat to the respondent, those close to the respondent, and strangers, and the management of homosexuality through social restrictions'), Attitudes Toward Homosexual Behaviour ('Homosexuality as a deviant sexual act and lifestyle is morally abhorrent'), and Attitudes Toward Gay Men's Rights ('Free speech, parental rights, and other legal and constitutional concerns') (Davies, 2004; Kite & Whitley, 1996). Davies (2004) labelled these subscales as factor 1 'affective reactions,' for attitudes toward homosexual individuals and homosexual behaviour, and factor 2 'civil rights,' for attitudes toward gay men's rights. Cronbach Alpha scores for factor 1 indicated strong internal reliability ( $\alpha=.95$ ) and Cronbach Alpha scores for factor 2 indicated moderate internal reliability ( $\alpha=.87$ ) (Davies, 2004). NATGM (Davies, 2004) is currently the only scale which can measure these subcomponents of attitudes towards gay men.

Out of the three questionnaires used in this study only the MRMAS and the IRMA-R were tested for validity and yielded significant results (Hine et al., 2021; McMahon & Farmer, 2011). The validity of the NATGM scale has yet to be tested, however, this scale is currently the only scale available to measure attitudes toward gay men. The Cronbach Alpha scores



of the NATGM scale indicated good internal reliability (Davies, 2004). The use of self-reported questionnaires allows researchers to collect large amounts of data from a variety of individuals with minimal effort and financial cost (Demetriou et al., 2015). However, it has been argued that self-reported measures of sexual violence and behaviour can be limited due to participants being influenced by social desirability bias (McCallum & Peterson, 2012). This is especially important for the current study - self-reports of rape myth acceptance and homophobia can be subjected to the pressure of social desirability bias (McMahon, 2010). However, self-reported measures, have been regarded as the best instrument available when investigating sexual violence because they provide an actual measure of violence and have a higher external validity for identifiable risk factors (Yapp & Quayle, 2018).

### **Procedure**

Participants were recruited online via Facebook through different dissertation survey exchange groups, these participants were not known to the researcher and could not be identified in any way, except through their unique code. The link to the information sheet was provided on the online recruitment leaflet. The participant information sheet provided all necessary study details as well as information about the participant's right to withdraw and the GPDR statement. Then the potential participants were presented with the consent form, and if they decided to sign it they had to confirm that they read the information sheet and were aware of the topic of the study, what will be required from them, and about their rights, including the right to withdraw. Then participants were given three questionnaires to complete. Upon completion, the participants were automatically directed to the debrief, in which they were thanked for their participation, reminded about the study's purpose, their right to withdraw up to 14 days after their data was collected, the researcher's contact information, and a list of national mental health organisations that they could contact if necessary.

### **Ethical Considerations**

Before gathering data for this study, ethical approval was obtained, BPS guidelines were followed, and participants were informed about the study's purpose and signed their informed consent to participate. No personally identifiable information was collected, only participants' age and gender were requested and recorded. The right to withdraw was explained to the participants before they signed a consent form and reminded about after they completed the study; the instructions how to withdraw were provided both times. Although male rape myth acceptance is a sensitive topic, no significant risk of physical, psychological, or emotional harm for the participants were expected in this study. However, the debriefing form included a list of mental health organisations to which they could reach out if they needed assistance after participating.

## Results

### Data Screening

The mean (M) and standard deviation (SD) for MRMA, FRMA, and HTGM scores, as well as age and gender are presented in Table 1.

**Table 1.** Means and Standard Deviation for participants' Age, Gender, MRMA, FRMA, and HTGM scores

	M	SD	Skewness	Kurtoses
Age	1.30	.53	6.878	4.687
Gender	1.70	.50	2.308	3.225
Male Rape Myth Acceptance	97.73	39.90	6.890	5.752
Female Rape Myth Acceptance	91.00	18.30	-6.840	7.642
Homophobia Towards Gay Men	25.50	11.90	9.100	10.794

Multiple Regression was used to determine whether FRMA, HTGM, Age, and Gender could significantly predict MRMA. The scores for skewness and kurtosis were not within the range of -1.96 and +1.96, however, this was not a major concern for multiple regression. The correlations between the variables are shown in Table 2.

**Table 2.** Correlation Coefficients between MRMA, FRMA, HTGM, Age and Gender (Significance values are in brackets).

	Gender	Age	Homophobia Towards Gay Men	Female Rape Myth Acceptance
Age	.289 (.004)			
Homophobia Towards Gay Men	-.302 (.003)	.063 (.286)		
Female Rape Myth Acceptance	.179 (.052)	-.221 (.022)	-.468 (.001)	
Male Rape Myth Acceptance	-.263 (.008)	-.094 (.198)	.835 (.001)	-.551 (.001)

The data was analysed using Standard Multiple Regression using the Enter Method and the results of the Durban-Watson test and Variance Inflation Factor (VIF) were all within acceptable levels. The regression equation produced a large effect size (Cohen, 1988) ( $R^2 = .770$ ,  $R^2_{adj} = .758$ ) indicating that, together, Female Rape Myth Acceptance, Homophobia Towards Gay Men, Age, and Gender significantly predicted Male Rape Myth Acceptance,  $F(4,78) = 65.212$ ,  $p < .001$ .

There was a significant negative relationship between Female Rape Myth Acceptance and Male Rape Myth Acceptance  $t = -4.040$ ,  $df = 82$ ,  $p < .001$ , with the model predicting that a one unit increase change in FRMA would correspond with a decrease of MRMA by  $-.555$ . There was also a significant relationship between Homophobia Towards Gay Men and Male Rape Myth Acceptance  $t = 11.087$ ,  $df = 82$ ,  $p < .001$ , with the model predicting that a one unit increase change in HTGM would correspond with an increase of MRMA by  $2.377$ . As well as there being a significant negative relationship between Gender and Male Rape Myth Acceptance  $t = -1.093$ ,  $df = 82$ ,  $p = .008$ , predicting that males will have lower male rape myth acceptance in comparison to females. However, Age was not a significant predictor of Male Rape Myth Acceptance  $t = -3.679$ ,  $df = 82$ ,  $p < .198$ . The results indicated that individuals who have a lower adherence for FRMA and are Male will have a lower adherence of MRMA, whereas an individual who has a higher adherence for HTGM and are Female will have a higher adherence for MRMA. Age was not found to have an effect on MRMA.

### Discussion

The current study sought to determine how female rape myth acceptance (FRMA), homophobia towards gay men (HTGM), age, and gender influenced male rape myth acceptance (MRMA). It was hypothesised that a higher acceptance of female rape myths and homophobic attitudes towards gay men would predict a higher acceptance of male rape myths. It was also hypothesised that people who were older and male would be more accepting of male rape myths. Standard Multiple Regression using the Enter Method was used to examine the relationships between MRMA and the other variables (FRMA, HTGM, age, and gender) as measured by the MRMAS, IRMA-R, and NATGM (Hine et al., 2021; McMahon & Farmer, 2011; Davies, 2004).

The hypotheses were partially supported. The large effect size indicated a strong relationship between the variables and that FRMA, HTGM, age, and gender could all significantly predict MRMA. There was a significant negative correlation between FRMA and MRMA, with higher FRMA scores indicating a greater rejection of female rape myths, implying lower levels of FRMA predicted higher levels of MRMA. These results were consistent with previous research (Chapleau et al., 2008; Davies et al., 2012; Spruin & Reilly, 2018), which determined that FRMA would predict MRMA. It can be concluded that this correlation is stable across various Western samples (e.g., Chaplau et al., 2008; Spruin & Reilly, 2018, and the current study) and across decades (Davies et al., 2012 and the current study).

A significant positive correlation was found between HTGM and MRMA; participants with higher levels of HTGM also had higher levels of MRMA. These results are in line with previous findings obtained with different measurements (e.g., Kassing et al., 2005, Walfield, 2021) and on a demographically different sample (Walfield, 2021).

A significant negative relationship between Gender and MRMA was determined, predicting that males will have a lower adherence of male rape myth acceptance compared to females. These findings contradicted that vast majority of previous studies (Grubb & Turner, 2012; DeJong et al., 2020; Chapleau et al., 2008; Struckman-Johnson & Struckman-Johnson, 1992; Davies et al., 2012) that have consistently shown that men are more likely to endorse both male and female rape myths, as well as have more homophobic attitudes when compared to women, who were found to be more empathetic in their responses. No significant correlation was found between age and MRMA. This is supported by Carmondy & Washington's (2001) study who suggested that there are no differences in ages. However, these results differed from other studies (e.g. Kassing et al., 2005; Walfield, 2021) which demonstrated that older males were more accepting of male and female rape myths or that younger males were more accepting of rape myths (Beshers & DiVita, 2021).

The disparities between the current study and previous research findings for age and gender could be attributed to differences in sample sizes between studies. Most of the studies previously mentioned (Kassing et al., 2005; Walfield, 2021; Chapleau et al., 2008; Struckman-Johnson & Struckman-Johnson, 1992; Davies et al., 2012) had larger sample sizes, relatively equal in gender proportion and wider age range than the current study, as the majority of participants were women in their 20s. At the same time, it could be suggested that the sample in the current study represents the new generation – as a majority of the previous studies were conducted 10 or more years ago (e.g., Grubb & Turner, 2012; Chapleau et al., 2008; Struckman-Johnson & Struckman-Johnson, 1992). That raises an interesting question of the generational change, which could be explored in future research.

### **Implications of Findings**

In this study it was determined that gender, female rape myth acceptance, and homophobic attitudes towards gay men did influence MRMA, but age had no influence on the acceptance of male rape myths. Among the theoretical implications of the current study, the notion that women were found to be more accepting of MRMA when compared to men contradicts the feminist theory of rape. This theory is based on gender inequality and the idea that men use rape and sexual violence to exert power and control over their victims and enforce a status of patriarchy (Chiroro et al., 2004). According to the feminist approach, rape myths (rape ideologies) are derived from the patriarchal system, that encourages and justifies sexual violence, sexual coercion, and belittles and undervalues victims of sexual assault (Boakye, 2009). However, the current study provides empirical evidence to the opposite as females were found to be more supporting of male rape myths. These findings also support the idea that sociocultural factors could have a stronger influence on rape myths than gender (Nayak et al., 2003).

Rape myth acceptance is a cognitive schema that influences how people interpret social information (Chapleau & Oswald, 2010). Acceptance of rape myths increases people's willingness to blame the victim while decreasing people's willingness to blame the perpetrator (Chapleau & Oswald, 2013). In this study, no significant relationship was found between age and MRMA, however, given that the majority of those participating were young adolescents it can be assumed that more education is needed to eliminate negative stereotypes and male rape myths surrounding male victims (Lowe & Rogers, 2017; Burt, 1980; Hudson & Ricketts, 1980; Kassing et al., 2005; Nyúl & Kende, 2021). The best way to help decrease these beliefs and negative attitudes is to raise awareness through educational programmes. The awareness of rape myths (both male and female) can reduce rape myth acceptance (Walfield, 2021; Reddy et al., 2022). The current findings indicated that homophobia towards gay men, female rape myth acceptance and gender can influence the acceptance of male rape myths. This could help to further the development of appropriate education and awareness programmes with a tailored gender approach. Additionally, the results of the current study can support further development and adjustment of prevention programmes and interventions that are aimed at decreasing male rape myth acceptance.

#### *Limitations and suggestions for future research*

The insufficient variation of the participants' ages as well as having more female participants can be named among this studies limitations. The majority of the sample was in their early twenties and female. Women were found to be more accepting of male rape myths as they were the most prevalent, yet no significant relationship was found between ages meaning there may not be a significant enough variation. For example, it has demonstrated that older individuals (aged 40 or above) were more likely to have higher levels of rape myth acceptance and more negative attitudes toward rape victims compared to younger individuals (aged 18 to 30) (Boakye, 2009). Participants aged 35 or older were not sufficiently represented in this sample. The recreation of this study with varied age groups is required.

Cultural and societal beliefs (Nayak et al., 2003), as well as the race/ethnicity of respondents (Dejong et al., 2020) may influence MRMA. In the current study, all participants were UK residents and no information about their ethical background was collected. Their cultural and societal background was beyond the scope of this research. However, studying other countries that are geographically, racially, and socially homogeneous and diverse will provide a better understanding of how societal norms and cultural differences can influence rape myth acceptance in that society (Fakunmoji et al., 2021).

Rape myths reflect societal or cultural attitudes, and as such, the prevalence of rape myths varies across countries (Dinos et al., 2015), with negative attitudes toward rape victims ranging from 18.3 percent (United Kingdom) to 29.5 percent (Canada) in western countries and 32.9 percent

(Hong Kong) to 51.5 percent (Malaysia) in eastern countries (Ward, 1995; Dinos et al., 2015). Cross-cultural research into rape myths has primarily focused on FRMA, leaving MRMA unexplored in other countries (Barn & Powers, 2021), so there is a need for additional investigation, and replication of the current study in other Western and Eastern countries. Further cross-cultural exploration could be beneficial and provide interesting information of the influence that cultural and societal background have on male rape myth acceptance.

Although the study was not aimed specifically to recruit exclusively students, the majority of participants were recruited via the University system, hence they were most probably students. This can limit the generalizability of the study, as Furnham & Hughes (2014) pointed out students can be more knowledgeable and have a greater recognition of rape myths than the general public. Furthermore, some of the students could have come from disciplines that include studying cognitive distortions and rape myths in their curriculum. Kassing et al. (2005) argued that education level in general could influence male rape myth acceptance. Thus, one of the venues for further research would be including this variable in the analysis.

### **Conclusion**

This study investigated the relationship between male rape myth acceptance (MRMA), female rape myth acceptance (FRMA), homophobia toward gay men (HTGM), age, and gender. It was determined that all these factors individually, except for age, did indeed influence male rape myth acceptance. Further exploration of this topic might include larger samples, better distribution of ages, equal gender samples and additional influence factors, such as the ethnical and cultural backgrounds of the respondents and their educational level.

### **Funding**

None.

### **Availability of data and material**

Data will be made available upon reasonable request.

### **Conflict of Interest**

All authors declare that they have no conflict of interest.

### **Author's contributions**

All authors significantly contributed to the research and preparation of manuscript.

### **Ethics Approval**

Ethical approval for the study was received from the research team's university's ethics committee.

### References

- Adolfsson, K. (2018). Blaming victims of rape: Studies on rape myths and beliefs about rape.
- Barn, R., & Powers, R. A. (2021). Rape myth acceptance in contemporary times: A comparative study of university students in India and the United Kingdom. *Journal of Interpersonal Violence, 36*(7-8), 3514-3535.
- Beshers, S., & DiVita, M. (2021). Changes in rape myth acceptance among undergraduates: 2010 to 2017. *Journal of Interpersonal Violence, 36*(19-20), 9371-9392.
- Boakye, K. E. (2009). Attitudes toward rape and victims of rape: A test of the feminist theory in Ghana. *Journal of Interpersonal Violence, 24*(10), 1633-1651.
- Bullock, C. M., & Beckson, M. (2011). Male victims of sexual assault: Phenomenology, psychology, physiology. *Journal of the American Academy of Psychiatry and the Law Online, 39*(2), 197-205.
- Burt, M. R. (1980). Cultural myths and supports for rape. *Journal of Personality and Social Psychology, 38*(2), 217.
- Campbell, R., & Wasco, S. M. (2005). Understanding rape and sexual assault: 20 years of progress and future directions. *Journal of Interpersonal Violence, 20*(1), 127-131.
- Campbell, R., Wasco, S. M., Ahrens, C. E., Sefl, T., & Barnes, H. E. (2001). Preventing the "Second rape" rape survivors' experiences with community service providers. *Journal of Interpersonal Violence, 16*(12), 1239-1259.
- Carmody, D. C., & Washington, L. M. (2001). Rape myth acceptance among college women: The impact of race and prior victimization. *Journal of Interpersonal Violence, 16*(5), 424-436.
- Chapleau, K. M., & Oswald, D. L. (2010). Power, sex, and rape myth acceptance: Testing two models of rape proclivity. *Journal of Sex Research, 47*(1), 66-78.
- Chapleau, K. M., & Oswald, D. L. (2013). Status, threat, and stereotypes: Understanding the function of rape myth acceptance. *Social Justice Research, 26*(1), 18-41.
- Chapleau, K. M., Oswald, D. L., & Russell, B. L. (2007). How ambivalent sexism toward women and men support rape myth acceptance. *Sex Roles, 57*(1), 131-136.
- Chapleau, K. M., Oswald, D. L., & Russell, B. L. (2008). Male rape myths: The role of gender, violence, and sexism. *Journal of Interpersonal Violence, 23*(5), 600-615.
- Chiroro, P., Bohner, G., Viki, G. T., & Jarvis, C. I. (2004). Rape myth acceptance and rape proclivity: Expected dominance versus expected arousal as mediators in acquaintance-rape situations. *Journal of Interpersonal Violence, 19*(4), 427-442.
- Cohen, J. (1988). *Statistical power analysis for the behavioural sciences*. Abingdon: Routledge.
- Connell, R. W. (2020). *Masculinities*. Routledge.
- Crittenden, K. S. (1983). Sociological aspects of attribution. *Annual Review of Sociology, 9*(1), 425-446.
- Crown Prosecution Service. (2020). *Key facts about how the CPS prosecutes allegations of rape*. Retrieved From: <https://www.cps.gov.uk/publication/key-facts-about-how-CPS-prosecutes-allegations-rape>
- Davies, M. (2002). Male sexual assault victims: A selective review of the literature and implications for support services. *Aggression and Violent Behaviour, 7*(3), 203-214.
- Davies, M. (2004). Correlates of negative attitudes toward gay men: Sexism, male role norms, and male sexuality. *Journal of Sex Research, 41*(3), 259-266.

- Davies, M., & Rogers, P. (2006). Perceptions of male victims in depicted sexual assaults: A review of the literature. *Aggression and Violent Behaviour, 11*(4), 367-377.
- Davies, M., Gilston, J., & Rogers, P. (2012). Examining the relationship between male rape myth acceptance, female rape myth acceptance, victim blame, homophobia, gender roles, and ambivalent sexism. *Journal of Interpersonal Violence, 27*(14), 2807-2823.
- Davies, M., Pollard, P., & Archer, J. (2001). The influence of victim gender and sexual orientation on judgments of the victim in a depicted stranger rape. *Violence and victims, 16*(6), 607.
- Davies, M., Pollard, P., & Archer, J. (2006). Effects of perpetrator gender and victim sexuality on blame toward male victims of sexual assault. *The Journal of social psychology, 146*(3), 275-291.
- DeJong, C., Morgan, S. J., & Cox, A. (2020). Male rape in context: measures of intolerance and support for male rape myths (MRMs). *Criminal Justice Studies, 33*(3), 195-212.
- Demetriou, C., Özer, U. B., & Essau, A. C. (2015). Self-Report Questionnaires. Retrieved from: [https://www.researchgate.net/publication/313966621\\_Self-Report\\_Questionnaires](https://www.researchgate.net/publication/313966621_Self-Report_Questionnaires)
- Dinos, S., Burrowes, N., Hammond, K., & Cunliffe, C. (2015). A systematic review of juries' assessment of rape victims: Do rape myths impact on juror decision-making?. *International Journal of Law, Crime and Justice, 43*(1), 36-49.
- Edwards, K. M., Turchik, J. A., Dardis, C. M., Reynolds, N., & Gidycz, C. A. (2011). Rape myths: History, individual and institutional-level presence, and implications for change. *Sex roles, 65*(11), 761-773.
- Eyssel, F., & Bohner, G. (2011). Schema effects of rape myth acceptance on judgments of guilt and blame in rape cases: The role of perceived entitlement to judge. *Journal of Interpersonal Violence, 26*(8), 1579-1605.
- Fakunmoju, S. B., Abrefa-Gyan, T., Maphosa, N., & Gutura, P. (2021). Rape myth acceptance: Gender and cross-national comparisons across the United States, South Africa, Ghana, and Nigeria. *Sexuality & Culture, 25*(1), 18-38.
- Fisher, N. L., & Pina, A. (2013). An overview of the literature on female-perpetrated adult male sexual victimization. *Aggression and Violent Behaviour, 18*(1), 54-61.
- Frese, B., Moya, M., & Megías, J. L. (2004). Social perception of rape: How rape myth acceptance modulates the influence of situational factors. *Journal of Interpersonal Violence, 19*(2), 143-161.
- Furnham, A., & Hughes, D. J. (2014). Myths and misconceptions in popular psychology: Comparing psychology students and the general public. *Teaching of Psychology, 41*(3), 256-261.
- Grubb, A., & Harrower, J. (2008). Attribution of blame in cases of rape: An analysis of participant gender, type of rape and perceived similarity to the victim. *Aggression and Violent Behaviour, 13*(5), 396-405.
- Grubb, A., & Turner, E. (2012). Attribution of blame in rape cases: A review of the impact of rape myth acceptance, gender role conformity and substance use on victim blaming. *Aggression and Violent Behaviour, 17*(5), 443-452.
- Haskell, L., & Randall, M. (2019). Impact of trauma on adult sexual assault victims: What the criminal justice system needs to know. *Available at SSRN 3417763*.
- Hinck, S. S., & Thomas, R. W. (1999). Rape myth acceptance in college students: How far have we come?. *Sex Roles, 40*(9), 815-832.
- Hine, B. A., Murphy, A. D., & Churchyard, J. S. (2021a). Development and validation of the Male Rape Myth Acceptance Scale (MRMAS). *Heliyon, 7*(6), e07421.



- Home Office. (2020). Sexual Offences Act 2003, Rape and Other Sexual Offences. Retrieved From: [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/877790/count-sexual-apr-2020.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/877790/count-sexual-apr-2020.pdf)
- Hudson, W. W., & Ricketts, W. A. (1980). A strategy for the measurement of homophobia. *Journal of Homosexuality*, 5(4), 357-372.
- Idisis, Y., Ben-David, S., & Ben-Nachum, E. (2007). Attribution of blame to rape victims among therapists and non-therapists. *Behavioural Sciences & the Law*, 25(1), 103-120.
- Javaid, A. (2015). Male rape myths: Understanding and explaining social attitudes surrounding male rape. *Masculinities and Social Change*, 4(3), 270-294.
- Kassing, L. R., Beesley, D., & Frey, L. L. (2005). Gender role conflict, homophobia, age, and education as predictors of male rape myth acceptance. *Journal of Mental Health Counselling*, 27(4), 311-328.
- Kite, M. E., & Whitley Jr, B. E. (1996). Sex differences in attitudes toward homosexual persons, behaviours, and civil rights a meta-analysis. *Personality and Social Psychology Bulletin*, 22(4), 336-353.
- Labhardt, D., Holdsworth, E., Brown, S., & Howat, D. (2017). You see but you do not observe: A review of bystander intervention and sexual assault on university campuses. *Aggression and Violent Behaviour*, 35, 13-25.
- Lonsway, K. A., & Fitzgerald, L. F. (1994). Rape myths. In review. *Psychology of Women Quarterly*, 18(2), 133-164.
- Lowe, M., & Rogers, P. (2017). The scope of male rape: A selective review of research, policy and practice. *Aggression and Violent Behaviour*, 35, 38-43.
- Lowe, M., & Rogers, P. (2017). The scope of male rape: A selective review of research, policy and practice. *Aggression and Violent Behaviour*, 35, 38-43.
- Maddux, W. W., & Yuki, M. (2006). The “ripple effect”: Cultural differences in perceptions of the consequences of events. *Personality and Social Psychology Bulletin*, 32(5), 669-683.
- McCallum, E. B., & Peterson, Z. D. (2012). Investigating the impact of inquiry mode on self-reported sexual behaviour: theoretical considerations and review of the literature. *Journal of sex research*, 49(2-3), 212-226.
- McMahon, S. (2010). Rape myth beliefs and bystander attitudes among incoming college students. *Journal of American College Health*, 59(1), 3-11.
- McMahon, S., & Farmer, G. L. (2011). An updated measure for assessing subtle rape myths. *Social Work Research*, 35(2), 71-81.
- Nagel, B., Matsuo, H., McIntyre, K. P., & Morrison, N. (2005). Attitudes toward victims of rape: Effects of gender, race, religion, and social class. *Journal of Interpersonal Violence*, 20(6), 725-737.
- Nayak, M. B., Byrne, C. A., Martin, M. K., & Abraham, A. G. (2003). Attitudes toward violence against women: A cross-nation study. *Sex Roles*, 49(7), 333-342.
- Nyúl, B., & Kende, A. (2021). Rape myth acceptance as a relevant psychological construct in a gender-unequal context: The Hungarian adaptation of the updated Illinois rape myths acceptance scale. *Current Psychology*, 1-14.
- Office for National Statistics. (2020). Sexual Assault in England and Wales: Year Ending March/September 2020. Available at:

- <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/natureofsexualassaultbyrapeorpenetrationenglandandwales/yearendingmarch2020>
- Owens, B. C., Hall, M. E. L., & Anderson, T. L. (2021). The relationship between purity culture and rape myth acceptance. *Journal of Psychology and Theology*, 49(4), 405-418.
- Phillips, K. (2021). *Male sexual victimisation and the specialist officer: a critical analysis of the police response to adult males* (Doctoral dissertation, Canterbury Christ Church University).
- Reddy, L. N., Campbell, C. M., & Morczek, A. L. (2022). Exploring the impact of informal rape myth education in a nonstudent sample. *Journal of Interpersonal Violence*, 37(3-4).
- Rogers, P. (1998). Call for research into male rape. *Mental Health Practice*, 1(9), 34.
- Rollero, C., & Tartaglia, S. (2019). The effect of sexism and rape myths on victim blame. *Sexuality & Culture*, 23(1), 209-219.
- Sable, M. R., Danis, F., Mauzy, D. L., & Gallagher, S. K. (2006). Barriers to reporting sexual assault for women and men: Perspectives of college students. *Journal of American College Health*, 55(3), 157-162.
- Safeline. (2020). Rape Statistics. Retrieved from: <https://safeline.org.uk/be-informed/>
- Sawyer, R. G., Thompson, E. E., & Chicorelli, A. M. (2002). Rape Myth Acceptance Among Intercollegiate Student Athletes: A Preliminary Examination. *American Journal of Health Studies*, 18(1).
- Shaver, K. G. (1970). Defensive attribution: Effects of severity and relevance on the responsibility assigned for an accident. *Journal of Personality and Social Psychology*, 14(2), 101.
- Sleath, E., & Bull, R. (2010). Male rape victim and perpetrator blaming. *Journal of Interpersonal Violence*, 25(6), 969-988.
- Spiker, R. (2022). Male rape myth-The role of gender role conformity in men's perceptions of male rape. *Modern Psychological Studies*, 26(2), 5.
- Spruin, L., & Reilly, L. (2018). An exploration into the acceptance of male rape myths within the UK. *Journal of Forensic Sciences and Criminal Investigation*, 9(3).
- Struckman-Johnson, C., & Struckman-Johnson, D. (1992). Acceptance of male rape myths among college men and women. *Sex Roles*, 27(3), 85-100.
- Turchik, J. A., & Edwards, K. M. (2012). Myths about male rape: A literature review. *Psychology of Men & Masculinity*, 13(2), 211.
- UK Legislation. (2003). *Sexual Offences Act 2003, Rape and Other Sexual Offences*. Available at: <https://www.legislation.gov.uk/ukpga/2003/42/contents>
- Voller, E., Polusny, M. A., Noorbaloohi, S., Street, A., Grill, J., & Murdoch, M. (2015). Self-efficacy, male rape myth acceptance, and devaluation of emotions in sexual trauma sequelae: Findings from a sample of male veterans. *Psychological Services*, 12(4), 420.
- Wakelin, A., & Long, K. M. (2003). Effects of victim gender and sexuality on attributions of blame to rape victims. *Sex Roles*, 49(9), 477-487.
- Walfield, S. M. (2021). "Men cannot be raped": Correlates of male rape myth acceptance. *Journal of Interpersonal Violence*, 36(13-14), 6391-6417.
- Walker, J., Archer, J., & Davies, M. (2005). Effects of rape on men: A descriptive analysis. *Archives of Sexual Behaviour*, 34(1), 69-80.
- Ward, C. A. (1995). *Attitudes toward rape: Feminist and social psychological perspectives* (Vol. 8). Sage.

- White, S., & Yamawaki, N. (2009). The Moderating Influence of Homophobia and Gender-Role Traditionality on Perceptions of Male Rape Victims 1. *Journal of Applied Social Psychology, 39*(5), 1116-1136.
- Widanaralalage, B. K., Hine, B. A., Murphy, A. D., & Murji, K. (2022). “I didn’t feel i was a victim”: a phenomenological analysis of the experiences of male-on-male survivors of rape and sexual abuse. *Victims & Offenders, 1-26*.
- Yapp, E. J., & Quayle, E. (2018). A systematic review of the association between rape myth acceptance and male-on-female sexual violence. *Aggression and Violent Behaviour, 41*, 1-19.