

A Comparative Study of Long Term Psychological Functioning in Male Survivors of
Stranger and Acquaintance Rape

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Abstract

The aim of the present study was to compare psychological functioning in male rape survivors who had been raped either by strangers or acquaintances, and to test differences between the functioning of gay versus heterosexual survivors. Thirty-eight male rape survivors completed a range of measures relating to their perceptions about the nature of effects of their assault, their general health, self-esteem, and world assumptions. Results revealed that survivors of stranger rapes had lower psychological functioning overall than survivors of acquaintance rapes. Gay survivors were more likely to have crises about their sexual identity than heterosexual survivors. Suggestions for future work are proposed.

Introduction

Research on the effects of male rape has shown that many men display serious psychological disturbances, even years after their assault. Male survivors experience depressive symptoms (e.g. Mezey & King, 1989; Walker, Archer & Davies, 2005a), lack of self-esteem (Myers, 1989; Walker et al, 2005a), symptoms of post-traumatic stress disorder (PTSD: Coxell & King, 1996; Myers, 1989; Walker et al, 2005a), sexual dysfunction, and a range of issues regarding loss of masculinity or confusion about their sexual identity (e.g., Coxell & King, 1996; Walker et al, 2005a).

A number of studies have investigated the impact of stranger verses acquaintance rape on subsequent psychological functioning in female survivors, but there have been no comparable studies on male survivors. Although stranger rape tends to be viewed by the public as more “real” than acquaintance rape (Krahé, 2000), the effects of acquaintance rape can be at least, or even more, psychologically devastating, than stranger rape for women (e.g., Resick & Nishith, 1997). Moreover, some research suggests that acquaintance rape survivors display negative psychological symptoms for longer than victims of stranger rape (Ullman & Siegal, 1993).

Not all research on the differences in effects of stranger verses acquaintance rape are in this direction. Resick and Nishith (1997) reviewed the literature on the acquaintanceship status of the victim and perpetrator, with mixed results. For example, they cited work by Ellis et al. (1981) and Thornhill and Thornhill (1990), who both found that women sexually assaulted by strangers were more depressed and fearful post-assault than those sexually assaulted by acquaintances. Resick and Nishith cited other research whereby no differences were revealed on measures of psychological functioning post

rape, when the victim and perpetrator acquaintanceship was varied (e.g., Frank et al., 1981; Girelli et al., 1986; Kilpatrick et al., 1987; and Mechanic et al., 1994 among others).

Although we know that there are severe psychological disturbances apparent in male survivors, often for years after the assault (e.g., Walker et al, 2005a), there is no research to date that has investigated whether specifics of the assault, such as whether the perpetrator was, for example, a stranger, or a well known acquaintance or romantic partner, affects recovery or has effects on the psychological functioning of male survivors in any of the ways that it does in female survivors. Walker et al's (2005a) qualitative analysis of male survivors' reactions to rape detailed how devastating rape can be in terms of long term psychological functioning. A further paper written by Walker, Archer and Davies (2005b) compared the psychological functioning of this group of men with a matched control group of non-assaulted men and showed that their psychological functioning was more negative than controls, even though on average the time since their assault and in taking part in the study was 10 years. This shows how severely rape can affect men, even years after the assault. The primary aim of this study was to re-analyse the data published in Walker, et al's (2005a, b) papers to extend understanding into the effects of male rape by investigating how the type of rape (acquaintance verses stranger rape) influenced psychological functioning. We know from earlier analyses (Walker et al, 2005a, b) that psychological functioning was generally negative, but analyzing the data in terms of the specifics of the assaults will give us more of an insight into how this group of men was affected by rape. This was an exploratory analysis based on small groups, but which the authors hope will inspire further work on this important subject.

We based our predictions on work on female survivors, although because there is no equivalent work on male survivors, we made our predictions tentatively. We predicted that male survivors of stranger rapes might have a lower long term symptomology than the acquaintance group, as stranger rape survivors maybe more likely to seek help and to receive support and positive treatment after reporting the rape. Although we analysed responses to the nature of the assaults, we did not predict *a priori* whether there would be differences between groups on specific measures.

A secondary aim was to compare long term functioning and responses to the assault in gay and heterosexual male rape survivors. Previous research has discussed how rape might affect gay and heterosexual men, focussing around internalised homophobia for gay male survivors, externalised homophobic reactions towards other men in both gay and heterosexual survivors, confusion about future sexual identity, sexual dysfunction, and loss of gender identity (Anderson, 1982). Some research has suggested that gay men may have deeper crises after sexual assault and rape than heterosexual men, due to their history of coming to terms with their sexuality in the past, and the re-development of previous internalised negative feelings regarding their sexual behaviour (Garnets, Herek, & Levy, 1990). No studies have investigated empirically the possible differences between gay and heterosexual survivors in reactions to rape. Investigating possible differences in psychological functioning and responses to the assault in gay and heterosexual survivors is thus a unique extension to the current literature. Our analyses reported in Walker et al (2005a, b) comprised analyses for the whole sample, and we did not split groups by sexuality, so the current paper extends this research. Knowing that there empirically based differences between the ways that gay and heterosexual men are

affected by rape could provide those working with survivors additional or more specifically informed ways in which to treat them. The authors also hope that by providing initial empirical data on this issue we inspire other researchers to investigate it further.

We know from our previous analyses (Walker et al, 2005a, b) that long term psychological functioning was negative for the sample overall. However, we tentatively predicted differences in specific responses after the assault depending on the survivor's sexuality. Previous research has noted that gay male victims suffer from deep and long-lasting crises about their sexual orientation after rape, as a way of blaming themselves for the rape happening (Garnets, et al., 1990). Thus we predicted that more gay victims would report crises about their sexual identity after rape than heterosexual victims would.

Method

Participants and Procedure

Advertisements were placed in three British newspapers, three lifestyle magazines for men, three magazines aimed at gay men, on a sexual abuse survivor's page on the Internet (www.xris.co.uk), and in five genitourinary departments in England.

Advertisements asked respondents to contact the second author by telephone, and she discussed the nature of the research with each caller. If they were willing to take part in the research, the questionnaires and instructions were mailed to them, together with a pre-paid envelope. Fifty-two men responded to the advertisement and all were sent out a questionnaire pack. From these, 40 men returned the questionnaire (return rate = 77%).

Sample and Assault Characteristics

Respondents supplied a range of demographic details: including their sexual

orientation, age, ethnicity, occupational status, educational level, and current relationship status. Of the 40 participants, the majority (38) were carried out by perpetrators who were unrelated to the victim. Only two assaults were carried out by perpetrators related to the victim. These two cases were excluded from all further analysis to avoid possible confounds.

Of the sample, 20 men were gay, 13 were heterosexual, 3 were bisexual and 2 reported that they were asexual. At the time of the assault, most survivors (70%) were aged between 16 and 25 years (mean age = 24.4 years; SD = 8.8 years). The mean age at the time of the study was 34.7 years; SD = 10.8 years. Thus, between time of assault and the time of the study there was an average of just over 10 years. All respondents reported that they were white and British.

In most cases (65.8%) there was one perpetrator. Physical or psychological coercion was reported in nearly all cases. Direct physical force, such as hitting or punching, was reported in more than half the cases. As well as being anally raped (a condition for being included in the study), 55% of survivors also experienced oral penetration (now considered rape under U.K. law, though not at the time of data collection). Fourteen survivors sought medical treatment for their injuries but only five disclosed the sexual nature of the assault during treatment. Twenty survivors had thought about suicide since the assault, and 17 had made suicide attempts. Over half of the men (58%) sought psychological help after the rape, although in most cases help was not sought unless long after the assault. Only four of the men reported their assault to the police, which resulted in one conviction.

Materials

Male Rape Questionnaire (Walker et al, 2005a) The survivors completed the Male Rape Questionnaire (MRQ), which covered demographic information, circumstances and nature of the assault, help seeking, perceived attitudes of the police and health care professionals, and long-term reactions to the assault. Much of the MRQ comprised open-ended questions, in which survivors were requested to state in their own words how the assault had affected them. Some items were quite specific, asking them to think about issues, such as identity, substance abuse, depression and so on. Qualitative data was content analysed, and coded where necessary to enable quantitative analysis to be conducted (see Walker et al, 2005a for full details of the MRQ, questionnaire items, and its qualitative findings).

General Health Questionnaire (GHQ: Goldberg, 1981) consists of 28 items that measure aspects of psychological functioning: somatic symptoms, anxiety, social dysfunction, and depression. Examples include: “Have you recently lost sleep over worry” and, “Have you recently felt that life is entirely hopeless”. Responses were elicited along a 4-point scale, from “Not at all” to “Much more than usual”. Cronbach’s alpha for the overall scale in the present sample was .85.

World Assumptions Scale (WAS: Janoff-Bulman, 1989) consists of 32 items that measure basic assumptions about the world. The sub-scales of the WAS are benevolence of the world, benevolence of people, justice, controllability, randomness, self-worth, self-controllability, and luck, such as: “Bad events are distributed to people at random”, and, “I often think I am no good at all”. Each sub-scale consists of 4 items. Each of the items on these scales was rated along a 6-point scale, from 1 (strongly disagree) to 6 (strongly

agree). Cronbach's alphas for the subscales ranged from .40 to .83, the lowest being randomness (.40), justice (.58), and self-control (.69). It should be noted that alphas are sometimes low when there are few items on a subscale, and although this is not entirely satisfactory, the scales with low alphas were used in subsequent analysis.

State Self Esteem Scale (Heatherington & Polivy, 1991) consists of 20 items that measure current feelings of self esteem. It consists of three sub-scales: performance, such as: "I feel confident about my abilities"; social, such as, "I feel at others respect and admire me"; and appearance, such as "I feel satisfied with the way my body looks right now". Responses were made along a 5-point scale, from 1 (not at all) to 5 (extremely). Cronbach's alphas were .91 (performance), .91 (social), and .92 (appearance).

Impact of Events Scale (IES: Horowitz et al., 1979) consists of 15 statements that refer to a serious life-event, in the present case to the rape. Seven of the items measure intrusion of thoughts related to the event, such as: "Images related to it popped into my mind". The other eight measure avoidance of thoughts related to the rape, such as "I wished to banish it from my store of memories". Responses were made along a 4-point scale, from 1 (not at all) to 4 (often). Cronbach's alpha for the overall scale was .81.

Results

Each sub-group comprised 19 respondents. Inclusion into each sub-group was decided based on degree of acquaintanceship reported by survivors. The acquaintance group included men who were raped by a well known acquaintance, lover or ex-lover, or someone else in a position of trust. The stranger group included those assaulted by either a complete stranger or by someone they had only met very briefly, for example, in a bar the same night as the rape, or after brief words spoken in a park or leisure area.

Preliminary Tests on Demographics

The acquaintance and stranger rape groups did not differ significantly on the demographic measures. When raped, the men did not differ on age (Stranger mean = 26.4 years, Acquaintance mean = 22.4 years; $t [36] = -1.42, p = .16$) or at the time of the study (Stranger mean = 33.7 years, Acquaintance mean = 35.7 years; $t [36] = .58, p = .56$). Moreover, the two groups did not differ on sexual orientation (gay verses heterosexual: Pearson's Chi-Square = .42, $p = .52$).

MRQ Measures

A range of MRQ measures were tested in this study, relating to the nature of, survivor-reactions towards, and the reporting of, the assault. Some differences were revealed between the stranger and acquaintance groups. The majority of these analyses were conducted using Pearson's Chi Square. The statistics for each set of significant Chi Square analysis are included in Table 1. Where Chi Square was not used for a particular set of analysis, the statistics are included within the text.

Insert Table 1 about here

Nature of Assault Survivors of stranger rapes were more likely to have been assaulted by more than one perpetrator than the acquaintance rape group ($t [36] = 2.52, p = .02$) and were more likely to suffer from physical injuries after the assault. Survivors of stranger rapes reported that they felt less able to fight back during the assault than the acquaintance group did, with eight of the acquaintance group saying that they were able to fight back at some point during the assault, compared with three in the stranger group.

However, most survivors of both types of rape felt that they reacted with submission rather than aggression. All survivors felt that the assault was threatening and violent regardless of perpetrator-type, and some physical force was used in the majority of cases (15 acquaintance rape, and 16 stranger rape cases). There was no difference in whether the survivors feared for their lives: 11 of the acquaintance rape group and 14 of the stranger rape group did so.

Respondents who fought back were compared with those that did not fight back on several measures using logistic regression. No differences were revealed between either group on measures relating to whether other crimes were committed during the assault, amount of physical injuries, threats, fear for life, number of perpetrators, sexual orientation, location of assault, or type of perpetrator (all p 's > .05).

Survivor-Reactions to Assault There were few differences between the two groups in the way they reacted to the assaults. Most claimed they had fantasies of revenge after the assault, all but two of the acquaintance rape group fantasised about harming or killing the perpetrator(s). There were no differences between groups in their sense of anger, vulnerability, or crisis of sexual identity. Most felt angry and vulnerable to further attacks for a considerable time after the assault. Most survivors felt a crisis over their true sexual identity after the assault, with 11 of the acquaintance group and 13 of the stranger group reporting feelings of being changed, a loss of, or confusion about, their sexual identity. Most felt that their self image was affected in other ways, such as feeling depressed, anxious, a loss of self-respect, and blaming themselves for the assault (all p 's > 0.05).

Relating to and Reporting their Rape to Others Stranger rape survivors were more likely to have emotionally distanced themselves from their friends and families after the assault

(19 vs. 13). More survivors of stranger rapes than acquaintance rapes had fears about being alone with men after the assault (6 vs. 1). Most of the men did not report their assault to the police, regardless of the type of rape (four had reported). There was also no difference as to whether men reported to the medical services as a function of the type of rape, but although only three men had received psychological treatment before the assault, over half had done so afterwards (11 of both groups). All p 's > 0.05 .

Psychological Functioning Measures

All sub-scales on all psychological functioning measures were tested using a series of independent samples t -tests. Contrary to predictions, with Alpha set at .05, survivors of stranger rape scored significantly lower on all of the sub-scales of the self-esteem measure, they had significantly lower self worth (WAS), and felt they were significantly less lucky (WAS) than survivors of acquaintance rape (see Table 2). However, due to multiple tests it is pertinent to reduce the Alpha to .005. Subsequently, only one significant difference was revealed between the groups on luck. No other effects were significant. Effect sizes (d) for all comparisons are also displayed in Table 2. All effect sizes are in the same direction, showing a consistent pattern overall: that the stranger rape group have lower self esteem, have more negative world assumptions, and have worse general health scores than the acquaintance rape group. Although some of these effect sizes are small (.3 or below), those pertaining to self esteem showed medium effects (around .6) and two, self-worth and luck, displayed large effect sizes (based on Cohen, 1988).

Insert Table 2 about here

Differences across Sexuality

The same set of analyses as was used for the type of perpetrator comparisons was used to compare sexuality groups. The three bisexual and two asexual respondents were removed from this analysis. Thus, the analysis was conducted on the 20 gay and 13 heterosexual survivors. No significant differences were revealed, except on one measure: crises of sexual identity. As predicted, more gay survivors had suffered a crisis in their sexual identity after the assault than the heterosexual survivors had (Pearson's Chi-Square = 4.00, $p = .04$), such that 16 of the gay survivors suffered sexual identity crises, while five out of the 13 heterosexual survivors did.

In terms of evaluating what this finding means for gay and heterosexual men, it is pertinent to explain what we mean by "crisis of sexual identity". From MRQ findings (see Walker, et al, 2005a) 70% of the sample reported experiencing long-term crises with their sexual orientation and 68% with their sense of masculinity after the assault. When asked through open-ended questioning how rape had affected them, some men wrote about such identity crises. Some men also talked about how crises in personal identity had negatively affected their sexual behaviour. The current finding suggests that more gay than heterosexual men had long term problems with crises as a result of their usual consenting sexual practices reminding them of rape, although we must also acknowledge that some men felt that their sexual identity changed after rape. One man reported of this type of crisis: *"I am not really homosexual but I cannot stop myself having sex with men. I feel as if having sex with men I am punishing myself for letting the assault happen*

in the first place” (see Walker, et al, 2005a for full reporting of qualitative findings; further information can be found in Davies, 2004).

Discussion

Overall, stranger and acquaintance rape groups scored similarly on most of the measures: survivors were affected negatively in all cases (see Walker et al, 2005a and also Walker et al, 2005b for comparative findings between this group of men and a match control non-assaulted group). The differences between the two groups were specific, namely relating to self esteem and their perceived ability to react to the assault. The stranger rape group tended to have more physical injuries and were more likely to have been assaulted by more than one perpetrator than the acquaintance group. Although the stranger assaults were no more violent, based on survivors' own perceptions of the assault, this group considered themselves less likely to be able to fight back throughout the assault. This may seem paradoxical, but it is logical that even rapes that were not overtly violent were perceived as threatening and un-escapable by the survivors. The fact that they did not, or could not, fight back might have grave consequences for male rape survivors.

The ability to fight in a confrontational situation is an important part of masculine identity: men are considered to be "less of a man" if they are not able to protect themselves adequately in confrontations (Thompson & Pleck, 1986). Indeed, in hypothetical rape attribution studies where this has been tested, male victims are blamed more than female victims when they do not fight back during the assault (e.g., Davies, Pollard, & Archer, 2001), and it was clearly an issue that worried men in the current sample, who talked about their masculine identity in the qualitative sections of the MRQ

(reported in Walker et al, 2005a). In the current study, the stranger rape group had lower self esteem and lower self worth and were also less likely to fight back, which fits with this suggestion. Further research is needed to assess specifically what is different about men who fight back during sexual assault and those that do not, but this is certainly an issue for those working with male rape victims to consider with their clients.

Contrary to predictions (though consistent with some research on female survivors; see Resick & Nishith, 1997), the stranger group was more negatively affected by their assault than the acquaintance rape group in that they had lower feelings of luck, self esteem and self worth, although only luck was a significant difference when the Alpha was reduced to 0.005 for multiple comparisons. It must be borne in mind that both groups scored very much to the negative end of many of the measures, so any observed differences are relatively small differences in magnitude. Nevertheless, the effect size comparisons for the psychological functioning measures showed a consistent pattern, in that the stranger group were functioning at to lower level across all measures than the acquaintance group. However, the *d* values for luck and for self-worth were particularly large, indicating that the stranger rape group had much lower values on both these scales. The survivors of stranger rapes considered themselves unluckier than the acquaintance rape survivors. We can only speculate on why this might be, but it could be that survivors of stranger rapes were more likely to attribute the cause of their rape as being “in the wrong place at the wrong time” (thus unlucky) than acquaintance rape survivors. Future research needs to investigate the perceived causes of different types of rape in male survivors by concentrating on questioning male rape survivors with these issues. Although the Walker et al (2005a) qualitative data was detailed it was conducted using

largely open-ended questioning. Questioning future samples with specific aims in mind will get a much more detailed view on how men perceive the causes of their rape. Such findings would be extremely informative to those working with male rape survivors and authors hope that the current findings, plus those of the previous Walker et al papers inspire other researchers to conduct more work on such issues.

It is difficult to determine how representative the present sample was of all male rape survivors because it was self-selected, comprising those survivors who responded to media advertising. Although recruiting respondents from media advertising is not ideal, it was the only viable way of recruiting a non-clinical sample. It also comprised a relatively small sample due to difficulties in recruiting participants. When split by type of rape there was only 19 respondents per group, and when split on the sexual orientation variable the sample was reduced further to 20 gay survivors and only 13 heterosexual ones. Significant results need to be interpreted with caution with such a small sample, as it would only take a few contrary cases to overturn current findings. However, if the significant results of the current study were due to type 1 errors, the effect sizes would not fit into such a consistent overall pattern. Therefore, the findings of the current study do show an interpretable trend that future studies should endeavour to confirm and extend.

The sample comprised men who on average had been assaulted over 10 years before the study took place. We consider this a positive point for the study, as it shows that negative psychological effects of male rape are still apparent in the long term functioning of survivors, which pertinently expresses the need for psychological intervention for men who have been raped years previously. We do note however, that

the relatively high age of this sample at the time of study does not correspond with much of the literature on female survivors, and further research is needed to investigate the effect of age on psychological functioning in both male and female rape survivors.

A further limitation of this study was that experiences of childhood sexual abuse were not taken into account. Research suggests (e.g. Arata, 2000) that childhood sexual abuse leaves individuals more open to abuse as adults, and can result in extreme symptomology in adulthood. Some of the men in this study had been sexually assaulted on previous occasions, thus there could be a pattern of repeat victimisation being shown in this sample, but numbers were too small to prove analysable. Future research needs to investigate this factor further.

Although this study is limited in scope in terms of sample size, the findings have implications for the treatment of male rape survivors, as well as being an avenue from which to base future empirical work. Regardless of whether the rape is carried out by strangers or acquaintances or whether the survivor was gay or heterosexual, there are serious and long-term psychological effects for the male survivor (Walker et al 2005a). However, clinicians must bear in mind that due to issues regarding the way a "real man" should behave, men may display a particular set of functions because they felt that they did not deal with the situation in a way a man should, i.e., they did not fight back. Clinicians should also bear in mind that gay survivors are very likely to suffer from deep and long-lasting sexual identity crises after rape. This was shown clearly in this study. The fact that many men have to struggle to come to terms with their sexuality in the first place means that being raped is very likely to compound feelings of self-hatred and internalised homophobia (Anderson, 1982; Garnets, et al, 1990). It must not be forgotten

too that nearly half of the heterosexual men in the current study suffered from sexual identity crises after rape (see Walker et al, 2005a and Davies, 2004, for detailed qualitative analyses). This is not a surprising finding as previous research has reported that heterosexual men do question their sexual identity after rape, in that they think that they must be gay for the perpetrator choosing them for such an act in the first place (McMullen, 1990). One possible limitation that must be borne in mind however is that it was not possible to assess whether or not the men that were in crisis over their sexual orientation were actually in crisis before the assault took place. It could be that the men in crisis were already in crisis before the assault. Nevertheless, it is likely that those already in crisis would have their crisis worsened and compounded by rape.

In summary, the “take home” message from this study is that regardless of our manipulations, responses to rape and the psychological functioning of the survivor even years after the rape are, in many cases, extremely negative. Education and publicity are needed throughout society to ensure that survivors report their rape and seek psychological support for its effects. Indeed, a final point worthy of consideration is that the current findings and those of our earlier work are based on the thoughts and feelings of a small group of men who were willing to come forward and disclose details of their rape to a group of researchers. We must not forget that many men do not come forward after rape, to seek treatment, or disclose the nature of their assault for other reasons. We do not know how negatively affected the lives of such men might be, although we may assume that many of them do need psychological intervention and social support. Increasing the capability in such men to come forward is an ongoing challenge for researchers and practitioners alike.

Implications

- This study highlights to those working with victims that male rape has severe psychological effects many years after the assault took place, and shows this is the case regardless of perpetrator type or the victim's sexuality
- Nevertheless, this study details that perpetrator type can influence of after-effects of male rape, which should be considered and explored further, in practical settings.
- Also, victim characteristics may have particular effects, such as deep long-lasting sexual identity crises after rape, which compound existing anxieties.
- This study highlights the research still needed in the area, and details issues that researchers may focus on in future studies.

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Table 1

Pearson's Chi-Square Results Comparing Stranger versus Acquaintance Rape Survivors

Question	Percentage of stranger rape survivors answering yes	Percentage of acquaintance rape survivors answering yes	Chi Square	p
Suffered physical injuries	89.5	52.6	6.27	.02
Able to fight back	15.8	42.1	3.20	.06
Reacted with submission	89.5	84.2	.23	.61
Fear for life	73.7	57.9	1.05	.31
Revenge fantasies	100.0	89.5	2.11	.15
Sense of anger	89.5	73.7	1.57	.21
Sense of vulnerability	89.5	94.7	.36	.55
Crisis of sexual identity	68.4	57.9	.45	.50
Emotional distancing	78.9	63.2	7.13	.008
Fears of being alone with men	94.7	68.4	4.38	.04
Reported to police	5.3	15.8	1.12	.29
Reported to medical services	36.8	42.1	.11	.74
Received psychological treatment	57.9	57.9	.00	1.0

Table 2

Means, Standard Deviations, *t* values and Significance for the GHQ, WAS and Self Esteem (all dfs = 36)

Scale	Stranger Group Mean	Acquaintance Group Mean	d	t	p
GHQ					
Overall Scale	15.32 (9.60)	13.68 (9.97)	-.16	-.51	.21
WAS					
Benevolence of the world	12.74 (4.95)	13.95 (6.04)	.21	.67	.50
Benevolence of people	14.47 (5.59)	15.00 (5.20)	.10	.30	.77
Justice	9.68 (4.79)	10.32 (3.15)	.15	.48	.63
Controllability	11.79 (4.48)	12.16 (3.53)	.09	.28	.78
Randomness	15.63 (3.59)	16.79 (3.61)	.31	.99	.33
Self-worth	11.42 (3.75)	15.26(5.61)	.79	2.48	.02
Self-controllability	16.00 (4.07)	17.11 (3.96)	.27	.85	.40
Luck	9.47 (3.72)	13.84 (4.74)	1.00	3.16	.003
Self Esteem					
Performance	20.42 (6.25)	24.37 (6.63)	.60	1.88	.08
Social	17.95 (5.85)	22.58 (7.90)	.65	2.05	.05
Appearance	13.95 (4.95)	17.89 (7.27)	.62	1.96	.06
IES					
Overall Scale	48.79 (13.70)	40.63 (19.98)	-.20	-.15	.15