

BRIEF REPORT

College Students' Beliefs Regarding Help Seeking for Male and Female Sexual Assault Survivors: Even Less Support for Male Survivors

CHRISTOPHER T. ALLEN

*Department of Psychology, University of Massachusetts, Lowell, Lowell,
Massachusetts, USA*

REBECCA RIDGEWAY and SUZANNE C. SWAN

*Department of Psychology, University of South Carolina, Columbia,
South Carolina, USA*

This study explored college students' perceptions regarding barriers to disclosure of sexual assault and helpfulness of campus resources for survivors of sexual assault. To better understand barriers and social reactions to disclosure of sexual assault, it is important to examine peer perceptions of barriers and resources for assault survivors. A total of 475 undergraduate students estimated the frequency with which various barriers prevent sexual assault disclosure and rated the helpfulness of several campus resources for both male and female survivors. Students perceived that barriers to disclosure were more likely to prevent men than women from telling someone they were assaulted and seeking help. Students also believed that campus resources are more helpful for female than male survivors. Students' negative perceptions of disclosure and help seeking for male survivors indicate that more education regarding the sexual assault of males and inclusive outreach is needed.

KEYWORDS *community violence, gender issues, intervention, rape, victim*

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Address correspondence to Christopher T. Allen, Department of Psychology, University of Massachusetts, Lowell, 113 Wilder Street, Suite 300, Lowell, MA 01854. E-mail: allenct1@gmail.com

Sexual assault is a pervasive problem for women during their college years. As many as one fifth to one quarter of college women could be expected to experience at least one attempted or completed sexual assault (Fisher, Cullen, & Turner, 2000). Sadly, more recent studies (e.g., Fisher, Daigle, & Cullen, 2009) have found no evidence that these rates are declining. Furthermore, although research on male victimization is limited, studies have found that male students also experience sexual coercion and assault. In a sample of undergraduate students, 14% of males had been forced to engage in sexual contact or intercourse at least once in their lives (Davies, Pollard, & Archer, 2001). In another college sample, 21% of fraternity college men reported experiencing some form of unwanted sexual contact (Larimer, Lydum, Anderson, & Turner, 1999). A more recent study by Banyard and colleagues (2007) found that the rate of unwanted sexual contact among men, although less than half that of women, was still a considerable percentage (8.2% for men vs. 19.6% for women). Rates of sexual assault for men are certainly nowhere near as high as the rates for women, but these studies suggest that sexual assault on college campuses is a common problem, and that colleges need to provide adequate resources for both male and female survivors.

To respond to the realities of sexual assault on campuses, many schools provide services for survivors. Although the implementation of such services is encouraging, creating services does not guarantee their use (Walsh, Banyard, Moynihan, Ward, & Cohn, 2010). A theoretical model offered by Liang, Goodman, Tummala-Narra, and Weintraub (2005) describes the process of help seeking for survivors of partner violence. Drawing from the broader literature on help seeking, it identifies three components of the help-seeking process: (a) recognizing and defining the problem, (b) making a decision to seek help, and (c) selecting a particular type and source of support.

This study contributes to the extant literature on survivor help seeking by examining factors of the social context hypothesized to influence survivors' selection of support (Stage 3 of the model proposed by Liang and colleagues, 2005). Studies have found that survivors are far more likely to disclose to peers than to formal service providers such as police or medical personnel (Filipas & Ullman, 2001; Starzynki, Ullman, Filipas, & Townsend, 2005). This study examines campus sexual assault climate as indicated by what students think about barriers to disclosure and helpfulness of resources for both male and female sexual assault survivors. These perceptions are important, because for many students who are sexually assaulted, the first person they will tell is a friend (Starzynki et al., 2005). If the friend believes that telling others about the sexual assault will result in humiliation and ridicule rather than support, and if he or she believes campus resources will not be helpful, he or she is unlikely to advise that the survivor engage

in further help seeking. Yet, supportive resources to help the survivor cope with the aftermath of sexual assault might be needed for recovery (Campbell, 2006). By assessing perceptions of barriers and helpfulness as they pertain to male and female survivors, we further our understanding of how the social context in which sexual assault resources are offered affects their use.

BARRIERS TO DISCLOSURE AND HELPFULNESS OF SUPPORT SERVICES FOR FEMALE AND MALE SURVIVORS

Recently, research has devoted increasing attention to understanding the barriers that prevent disclosure after sexual assault. For the purpose of this study, a *barrier* is any factor that decreases the likelihood that a survivor will tell someone else about his or her victimization or seek formal services for help in the aftermath of the victimization (Walsh et al., 2010). The literature has primarily focused on female survivors and has identified several barriers to disclosure. Perceptions of sexual assault, and beliefs about the women and men victimized by it, are often characterized by rape myths, which are false beliefs that deny and minimize rape and blame victims (Lonsway & Fitzgerald, 1994). Even a survivor's loved ones (Feldman-Summers & Palmer, 1980) might believe these common rape myths, and might wrongly assume that a survivor "consented" to an assault by either not resisting appropriately or by somehow provoking the assaulter (e.g., by wearing revealing clothing; Williams, 1984). Furthermore, survivors might also have to prevail over what Campbell and Raja (2005) referred to as "secondary victimization." Secondary victimization has been defined as the victim-blaming attitudes, behaviors, and practices demonstrated by some community service providers and others, which result in additional trauma for survivors (Campbell, Sefl, & Barnes, 1999). A growing body of research indicates that sexual assault survivors might be denied help by the legal and medical systems, and what help they do receive might leave them feeling blamed, doubted, and revictimized (Campbell & Raja, 1999; Campbell, Wasco, Ahrens, Sefl, & Barnes, 2001). Experiences of this kind can discourage survivors from seeking help or disclosing the assault.

Although the barriers to disclosing sexual assault for female survivors are considerable, the barriers to male survivors' reporting of sexual assault might be even greater. The sexual assault of males is one of the least discussed crimes in our society (Groth & Burgess, 1980). The dearth of discourse on this topic has been attributed to several factors (Kassing, Beesley, & Frey, 2005; Rando, Rogers, & Brittan-Powell, 1998), including mistaken beliefs that men cannot be sexually victimized (Donnelly & Kenyon, 1996; Graham, 2006) and that men are only at risk of sexual assault in institutional settings (Adler, 1992; Isely, 1998). Indeed, rape myths regarding male survivors include, "it

is impossible to rape a man,” “men are to blame for not escaping,” and “men do not need counseling after being raped” (Struckman-Johnson & Struckman-Johnson, 1992).

The full extent of male sexual victimization is likely further concealed by traditional male gender role socialization. Because males are socialized to be strong and in control of their emotions, they might be unlikely to report an assault even if experiencing a great deal of distress (King, 1992). Given these powerful social norms and the limited cultural and social support that exists for male survivors, it is not surprising that they report at even lower rates than women (Donnelly & Kenyon, 1996). In fact, there is some evidence to suggest that male sexual assaults are most likely to come to the attention of service agencies when survivors seek care for nonsexual physical injuries sustained in the assault (Kaufman, Divasto, Jackson, Voorhees, & Christy, 1980).

Like female survivors, males might be ashamed of their victimization; feel violated, helpless, and fearful; and suffer from postassault trauma (Collins, 1982). Because they are less likely to ask for assistance in dealing with their attacks (Walsh et al., 2010), the consequences of sexual assault could be compounded and, in some instances, might be more severe for males than for females. Therefore, services that make seeking and receiving help less traumatic are important for male as well as female survivors. This notion is supported by the recent work of Walsh and colleagues, who examined disclosure of sexual assault and use of services among college students (Walsh et al., 2010). Male survivors were less likely than female survivors to disclose unwanted sexual contact to anyone, and were less likely to seek services at the campus sexual assault center. This study suggests that, despite the many barriers to reporting sexual assault for women, men might experience even greater barriers.

In a previous study of college students' perceptions of barriers to reporting sexual assault for male and female survivors (Sable, Danis, Mauzy, & Gallagher, 2006), participants believed that male survivors would experience more shame, guilt, and embarrassment as well as greater fear of not being believed, relative to female survivors. On the other hand, female survivors were thought to have a greater fear of retaliation and greater lack of resources. Although this study helps us understand what students perceive as barriers to reporting assault, no study (to our knowledge) has assessed how helpful students think these resources are. This is an important question, because students are unlikely to recommend a friend seek a resource if they do not believe it will be helpful to them.

In addition to differences in perceptions of barriers and helpfulness of resources by gender of survivor, we also examine differences based on gender of respondent. Women might be more likely than men to be aware of the many barriers to reporting sexual assault because through social networks and the media, women might learn of the negative experiences other women

have had on disclosure. However, women might be more likely to see resources as helpful for survivors, potentially for two reasons. First, women are more likely than men to seek help for problems of all types, including issues related to physical and mental health (Farrimond, 2012). Therefore, women might have more positive views of help seeking in general as compared to men. Second, most sexual assault resources have been designed around feminist treatment models (Davies, 2002; Donnelly & Kenyon, 1996), and women might be more comfortable with these treatment models and believe that they are more helpful, as compared to men.

We propose the following hypotheses:

- H1: Students will perceive barriers to disclosure as more frequently preventing male survivors than female survivors from help seeking after sexual assault.
- H2: Students will perceive campus resources to be more helpful for female survivors than for male survivors.
- H3: Female students will perceive barriers to disclosure as more frequently preventing survivors from seeking help, relative to male students.
- H4: Female students will perceive campus resources to be more helpful for survivors, relative to male students.

METHODS

Study Sample and Protocol

Study data were collected from 475 undergraduate students at a large, public Southeastern university using an Internet survey. Participants were recruited using the Psychology Department subject pool. Students were enrolled in a variety of psychology courses offering course credit for participation in the research. Most participants (88.8%) were between the ages of 18 and 21 ($M = 19.96$, $SD = 1.92$). The majority of the participants (74%) were female, and 26% were male. The sample was made up of 80.4% Whites, 12.8% African Americans, 3.1% Asian Americans, 0.9% Hispanics, and 2.8% who identified themselves as multiracial or of other ethnicities. Regarding academic standing, the sample consisted of mostly first-year students (39.6%) with sophomores, juniors, and seniors making up 21.3%, 23.8%, and 14.7% of the sample, respectively; 6% of respondents did not specify their academic standing.

Measures

Perceptions of barriers to sexual assault disclosure were evaluated using a scale adapted from the Rape and Sexual Assault Campus Awareness Survey by Sable et al. (2006). Using a 5-point response scale ranging from *Never*

to *Very often*, male and female students rated their perceptions of the frequency with which 11 barriers prevent sexual assault disclosure for both male and female survivors. Specifically, participants were asked, "For female student survivors, how often do you believe the listed barriers prevent help-seeking after sexual assault?" All barriers are listed in Table 1. Identical questions were asked about male student survivors. Internal consistency for this measure was very good ($\alpha = .84$ and $.86$ for female and male survivors, respectively). Finally, using a 5-point scale ranging from *Very unhelpful* to *Very helpful*, participants were asked to rate how helpful they perceived 11 campus resources to be in helping both male and female survivors after sexual assault. All campus resources are listed in Table 2. Internal

TABLE 1 Perceived Frequency of Barriers Preventing Disclosure by Survivor Gender

Barrier	<i>M</i>		<i>t</i> value	<i>df</i>	<i>p</i>
	Female	Male			
Perceived help-seeking barriers: All barriers	3.60	3.76	-6.51	420	<.001
Shame, guilt, or embarrassment	4.45	4.63	-4.03	421	<.001
Fear of not being believed	3.96	4.27	-5.57	421	<.001
Fear of retaliation by the perpetrator	4.09	3.10	16.86	420	<.001
Dislike or distrust of the police	3.02	3.43	-8.33	418	<.001
Does not believe the perpetrator will be successfully prosecuted	3.86	3.60	5.17	420	<.001
Lack of knowledge about how to get help	3.54	3.48	1.14	419	<i>ns</i>
Lack of campus resources to obtain help	2.93	3.05	-2.63	420	<.009
Does not want family or friends to know	4.26	4.56	-6.95	417	<.001
Does not know what is considered sexual assault	3.66	3.65	.051	415	<i>ns</i>
Does not want to be perceived as gay	2.88	4.52	-25.36	415	<.001
Lack of community resources to obtain help	2.88	3.00	-3.03	419	<.003

Note. Mean scores based on a given Likert scale ranging from 1 (*never*) to 5 (*very often*). *p* values used the Bonferroni correction for multiple comparisons.

TABLE 2 Perceived Helpfulness of Campus Resources by Survivor Gender

Source	<i>M</i>		<i>t</i> value	<i>df</i>	<i>p</i>
	Female	Male			
Perceived campus resource helpfulness: All resources	4.16	3.71	18.48	423	<.001
Campus police	4.07	3.67	11.32	322	<.001
Office for sexual health and violence prevention	4.35	4.05	10.68	364	<.001
University counseling center	4.31	4.12	7.47	320	<.001
Student health center: General medicine clinic	4.17	3.97	7.12	283	<.001
Student health center: Women's clinic	4.45	2.95	18.81	298	<.001
Campus religious organizations	4.01	3.87	4.35	166	<.001
Residential life staff	3.80	3.50	7.89	216	<.009

Note. Mean scores based on a given Likert scale ranging from 1 (*very unhelpful*) to 5 (*very helpful*). *p* values used the Bonferroni correction for multiple comparisons.

consistency for this measure was very good ($\alpha = .85$ and $.86$ for female and male survivors, respectively).

RESULTS

Perceptions of Barriers to Reporting Sexual Assault

Consistent with our first hypothesis, male survivors were perceived to be more affected by barriers to help seeking than female survivors, $t(420) = -6.51$ $p < .001$. All but two barriers were believed to be significantly more likely to prevent men than women from reporting an assault. The barriers of “shame, guilt, and/or embarrassment” and “does not want friends and/or family to know” were seen as the top two barriers (as indicated by having the two highest mean scores) preventing disclosure for both male and female survivors; however, students believed that overall, these barriers were significantly more likely to prevent men than women from reporting an assault. Male survivors were also perceived to be significantly more affected by the barriers of “does not want to be perceived as gay,” “dislike or distrust of the police,” “lack of campus resources to obtain help,” “lack of community resources to obtain help,” and “fear of not being believed.” The barriers “fear of retaliation” and “does not believe the perpetrator will be successfully prosecuted” were believed to be significantly more likely to prevent women than men from reporting an assault ($p < .001$).

Perceptions of Campus Postassault Resource Helpfulness

Consistent with our second hypothesis, every campus resource was perceived to be more helpful for female survivors than for male survivors, $t(423) = 18.48$ $p < .001$ (see Table 2).

Next, a multivariate analysis of variance (MANOVA) was conducted to assess for differences in overall perceptions of barriers by respondent gender (using a Bonferroni correction for multiple comparisons). Consistent with our third hypothesis, perceptions of barriers to disclosure were found to significantly differ by respondent gender, $F(1, 465) = 19.51$, $p < .01$. Female students were more likely than male students to perceive sexual assault survivors to be affected by barriers to disclosure. Analyses were also conducted separately by survivor gender and the findings were the same regardless of survivor gender.

To examine our fourth hypothesis, a MANOVA was conducted to assess for differences in overall perceptions of barriers by respondent gender (using a Bonferroni correction for multiple comparisons). Perceptions of helpfulness of campus resources were found to significantly differ by gender, $F(1, 454) = 4.28$, $p = .04$, in support of our fourth hypothesis. Overall, female students perceived campus resources to be more helpful for survivors. Analyses were

also conducted separately by survivor gender and the findings were the same regardless of survivor gender.

DISCUSSION

This study examined the social context of sexual assault on a college campus and found that, although disclosing sexual assault is seen as difficult for all survivors, students believed that male survivors were especially likely to encounter numerous barriers that would prevent them from getting help. Students also believed that campus resources for sexual assault survivors would not be as helpful for male survivors as they would be for female survivors. Indeed, if barriers to disclosure are greater for men and the resources aren't very helpful, why would a man seek help?

These findings lead to questions regarding the mechanisms behind these gender differences in disclosure of assault. As societal awareness of sexual assault is primarily a result of the feminist movement raising awareness of the prevalence of men's violence against women in society (Mezey & King, 1989), male survivors do not typically "fit" many people's script of sexual assault. As described by Parrot (1991), the "real rape" script is one that consists of a woman who is attacked by a male stranger, usually outdoors, who is likely to have a weapon, threaten physical violence, and inflict pain while enacting an assault. Thus, organizations that serve sexual assault survivors need to take extra measures to educate the communities they serve regarding the reality that sexual assault happens to both women and men. Such conceptions move away from the framing of sexual assault as a "women's issue" that does not concern men. In sum, findings from this study underscore the need for college sexual assault programs to directly address the influence of gender on assault disclosure and help seeking.

Interestingly, results revealed that female participants thought barriers would be more of a hindrance for survivors (regardless of the gender of survivor) than male participants. We speculate that women might be more aware of the impact of barriers to help seeking because women are more likely to have either experienced sexual assault themselves, or to have a friend or family member who has been assaulted. Men thought barriers were less of a problem than women did. We speculate that this finding could be explained by the effect of male rape myths. Because men are socialized to believe that it is impossible for men to be victims of sexual assault (Garnets, Herek, & Levy, 1990; Groth & Burgess, 1980) and men are less likely to have personal experience with sexual assault, they are less likely than women to have ever given any thought to why someone would be reluctant to ask for help after being sexually assaulted. Given that men are unlikely to come forward for treatment or disclose their trauma because of rape myths, it is important for service providers to be knowledgeable about male rape indicators, that is,

clinical and behavioral symptoms that have been associated with male sexual assault (Yeager & Fogel, 2006); directly inquire about sexual victimization; and convey a willingness to discuss these issues nonjudgmentally. As male rape myths might further add to the detrimental consequences of assault, mental health and medical providers should be prepared to discuss these myths, and related topics such as masculinity, homophobia, gender role conflicts, and sexuality; processing these issues could help survivors overcome the stigma, shame, and self-blame that often accompany endorsement of rape myths (Kassing et al., 2005). Future studies might wish to explore this by examining male participants' endorsement of male rape myths, history of sexual victimization, and their personal experiences with knowing someone who has been sexually assaulted.

Overall, students perceived resources as more helpful for female survivors. In addition, female students, in particular, perceived resources as being more helpful for survivors (regardless of the gender of survivor) than male participants. Given that women are more likely to engage in help seeking of all kinds (Farrimond, 2012), the majority of sexual assault resources have been designed with a female victim treatment model (Davies, 2002) and it is generally assumed that victims of sexual assault will be female (Rogers, 1998), these findings are not surprising. Although we applaud the campus in this study for providing services that are perceived as helpful for female sexual assault survivors, these results also underscore the need for campuses to address the issue of sexual assault among males and provide gender-appropriate services for male survivors (Walker, Archer, & Davies, 2005). If bystander intervention education approaches to reducing sexual assault are to succeed at preventing the assault of males, myths about male sexual assault and survivors will need to be challenged. By doing so, bystander approaches can hopefully shift community norms toward greater acknowledgment and support for male assault survivors.

Limitations

Results of this study are limited in the following regards. First, data were not collected on participants' experience of sexual assault. In a study of female undergraduates with a history of sexual assault, Rabenhorst (2006) found that 25% of those with assault-related posttraumatic stress disorder symptoms reported experiencing distress immediately following their participation in a study that asked participants to disclose assault history. Eleven percent of these participants reported continued stress during a 2- to 4-week follow-up period. Given these findings, and the unknown effect of asking males to disclose assault history in a research paradigm, the authors opted not to assess participants' assault history. Given the prevalence rates of sexual assault in college samples, it is more than likely that some study participants are sexual assault survivors. We do not know how such experiences

would impact participants' responses regarding barriers and helpfulness of resources. Future studies might wish to collect data on and examine the effects of participants' victimization history. Second, participants were not asked whether or not they personally knew someone who had been sexually assaulted. Responses to questions regarding barriers and helpfulness of resources would probably be affected by a participant's personal experiences of knowing someone who had been assaulted or being a survivor themselves. Finally, the students in this sample are not necessarily representative of college students at the campus where the study was conducted, nor of college students in general.

CONCLUSIONS

This article highlights the importance of studying the campus culture that awaits survivors after a sexual assault. Although sexual victimization of men has been acknowledged in the research literature since at least the 1980s (Kaufman et al., 1980), the response to this issue has been functionally nonexistent, with some arguing that support services for male sexual assault survivors are decades behind those for women (Rogers, 1998). Results of this study indicate that participants do not perceive campus resources as adequately addressing the needs of male sexual assault survivors. These findings remind us that, despite decades of research on sexual assault and rape myths, rates of sexual assault on college campuses have remained fairly constant (Banyard et al., 2007). This should not really be surprising in light of widely believed victim-blaming attitudes (Miller, Markman, Amacker, & Menaker, 2012) that are regularly expressed and reinforced in each new sexual assault case that is discussed in the national media. Meanwhile, very rarely is there any discussion at all about male victimization. Attitudes and beliefs about rape appear to be deeply woven into the culture, are complex, and are extremely resistant to change (Shechory & Idisis, 2006). Although research has consistently demonstrated the adverse impact of rape myths in survivors' interactions with a range of service providers (e.g., Ullman & Townsend, 2007), comparatively little is known about specific mechanisms that lead to the acceptance of rape myths. However, a recent meta-analysis examining rape myth acceptance found that rape myths are strongly associated with other types of prejudicial beliefs (e.g., sexism, racism, homophobia; Suarez & Gadalla, 2010). Based on these findings, the authors stress that the content of rape prevention programs should be expanded to address the intersectionality of oppressive belief systems (Suarez & Gadalla, 2010).

Scarce (1997), in discussing the need for greater resources and sensitivity to sexual assault among males on college campuses, offered several recommendations to better meet the needs of male assault survivors. In summary, he stressed that colleges must provide a coordinated response to respond to male sexual assault including, but not limited to the following:

1. Education and prevention efforts focused on the issue of male sexual assault.
2. Specific training of campus first responders and administrators on how to respond to and support male survivors.
3. Increasing the number of resources and referrals for male survivors.
4. Development of prevention and intervention programs specifically designed to address male sexual assault.
5. Reviewing college policies to ensure that sexual assault policies are free of gender bias.

We agree with these recommendations and believe that such efforts need to occur in a context that critically examines how gender (and other identities) have shaped the development of a college's response to sexual assault. In addition to providing a more supportive climate for male survivors, we believe that including content on male sexual assault, as well as same-gender sexual assault, has other benefits as well. It moves the conversation around sexual assault away from being framed solely as a women's issue. If men can also be affected by sexual assault, both as survivors, and as people who experience secondary victimization from the assault of a person they care about, sexual assault becomes their issue, too. It also moves the conversation away from two unfortunate themes that many men have taken away from sexual assault prevention programs: "all men are potential perpetrators" and "men have no role to play in preventing sexual assault, other than to not perpetrate" (Crooks, Goodall, Hughes, Jaffe, & Baker, 2007). Although no sexual assault prevention program explicitly states these themes and few would endorse them, these are the messages that men can take from sexual assault prevention programs that focus only on sexual assault as a "women's issue."

This discussion is in no way meant to suggest that attention or resources should be taken away from currently recognized and served populations on college campuses. Rather, we hope that by encouraging campus stakeholders to consider the sexual assault response to those who fall outside of traditional notions of sexual assault survivors, we can promote the development of a campus culture that responds to and supports all survivors in a manner that best serves a survivor's goals for recovery. To succeed in such efforts, we must challenge and ultimately reject any notions about sexual assault that dismiss any survivor's experience.

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