

open resistance. Furthermore, a comparison of strategies used by husbands versus wives to introduce needs might clarify the previously mixed findings on sex differences in strategy selection for spousal persuasion; some researchers reported sex differences (e.g., Burgoon, Dillard, & Doran, 1983; Ragsdale, 1996), but others found none (e.g., Ifert & Roloff, 1996; Weigel et al., 2006). Additionally, interviews with both marital partners could prove useful in discovering whether dyads develop joint repertoires of strategies as well as the extent to which strategies are tailored to suit individual dyads. Finally, future research could employ expanded samples, including married couples at various developmental stages in their marriages to test for potential relationships between the length of the marriage and the success of various strategies.

Limitations

First, although we gathered rich, detailed data, our sample lacked ethnic diversity. Given that marital partners enact identification issues of race, gender, and class through their discourse (Thompson & Collier, 2006), data from a more diverse sample might yield additional strategies. Second, because of the dearth of research regarding compliance-gaining in the spousal relationship, the present study provides only an outline for future in-depth research into the various aspects investigated herein. This study, therefore, might give the appearance of being somewhat superficial because of its preliminary nature.

Third, self-report data are susceptible to various biases, most notably social desirability response bias (participants' tendency to respond in ways that prompt others to evaluate them positively or in a socially desirable manner). Because of the sensitive nature of the subject matter, participants might have been reluctant to share their more personal needs and perhaps the more unpleasant request strategies. Fourth, self-reports rely on participants' memories and the accuracy of those memories remains unknown. Finally, although some participants might have revealed less because they spoke to a live person in a telephone conversation (versus the anonymity of a web-based survey), the interview method allowed for follow-up questions and reassurances to reluctant participants. Given the privacy issues involved in data collection on marital discussions, self-report remains one of the few viable methods of data collection.

Conclusions

Despite these limitations, the present study contributes to our understanding of marital communication in the following ways: (a) This study represents an initial investigation into the strategies spouses employ to introduce needs, wants, and desires into marital dialogues with the hope that their marital partners will fulfill their requests. (b) The study addressed the previously understudied area of compliance-gaining in the marriage relationship. (c) Within the con-

findings of the study's sample and methodological limitations, the results revealed a preliminary list of common strategies spouses report employing to disclose needs to one another in ways that prompt compliance. (d) The results heuristically suggest appropriate avenues for future research.

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Missing

Emotional Responses and Acceptance of Rape Myths by College Students

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Abstract: *This study examines the rate of acceptance of rape myths within college students and their subsequent emotional reactions to them. An adapted version of Burt's (1980) Rape Myth Acceptance Scale (BRMAS) was used, as well as an original emotional reaction scale to test the emotional reactions of sadness, fear, joy, disgust, anger, and surprise. Confirmatory factor analysis validated the adapted BRMAS. A discriminant analysis significantly classified males and females based on a linear combination of rape myth beliefs and there were significant difference found in acceptance rates and emotional reactions. The findings are discussed in terms of communicating about rape with relational partners and future research suggestions are offered.*

In the recent past news, our culture has been bombarded with rape myths. The Natalie Holloway case in Aruba revolved around discussion over whether the young woman had been drugged or given alcohol, and "date-raped." In the Kobe Bryant case, the victim was accused of falsifying claims against the athlete. In California, accusations of rape against Governor Schwarzenegger were quickly dismissed by the public on the grounds that Arnold is just a "Good Ole Boy," among other reasons. Date and acquaintance rape as well as rape among non-consenting wives have made national news. Recall the Duke University lacrosse team incident where 47 team members were tested for DNA because of alleged rapes taking place at an off-campus party. In each of the aforementioned cases, the media seems to be putting the victim on trial instead of the alleged perpetrator(s). All of these examples have a common thread: the media explodes rape myths in the public eye. Wood (2003) reported that in spite of the fact that the overall trend of violent crimes had decreased in the United States, rapes are on the rise. As an expansion of existing research, this study provides an addition to the communicative understanding of rape myth acceptance by factoring in emotional reactions to rape myth acceptance. While acceptance of rape myths is important to understand on its own, the emotions persons associate with rape myths seem to be under-explored and could easily add to

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the theoretical understanding of and applicability to research concerning the ways in which people communicate about rape.

Swift, Prieb, and Overbagh (2005) argued that it is essential to study rape through a communicative perspective, within a relational context, because it broadens the applicability of the results found, and ignoring the subject simply perpetuates myths and harms to survivors. For example, there may be individual differences in how rape is talked about between intimate partners where one has been victimized. There may be nonverbal communicative differences as well. One way to broaden applicability of results is to study not only the acceptance rate of rape myths, but also the emotional reactions conjured up by these myths. Swift et al.'s study indicated that the most important aspect to understanding rape survivors' coping strategies is to understand their communicative strategies with close relational partners regarding the rape.

Due to the social inappropriateness of the topic, rape is rarely openly, candidly discussed in public, with some exceptions of talk shows. Hence, when it is discussed, it happens within an interpersonal communication and relational context or is dramatically sensationalized in mass-mediated contexts. It often is a difficult topic to discuss with some intimate relational partners because of the shame of the victim and the likelihood that the partner may perpetuate victim blame, explicitly or implicitly. This seems problematic, because rape seems to happen as frequently as it is ignored (Botta & Pingree, 1997; Rennison & Rand, 2003; Rhynard & Krebs, 1997; Smith, White, & Holland, 2003; Warshaw, 1994). While this subject is hardly addressed in casual conversation, inaccurate beliefs seem to fester and poison society through most often unspoken understandings held by the public at large. Much of Western culture tends to believe in gender stereotypes; men are strong, women are weak, and women are expected to submit to men either implicitly or explicitly (Bergoffen, 2003; Hobby, 2000; Ratcliffe, 1995; Scherer, 2002). In particular, these unspoken beliefs seem dangerous at the college level, where many rapes occur: "College campuses host large concentrations of young women who are at greater risk for rape and other forms of sexual assault than women in the general population or in a comparable age group" (Fisher, Cullen, & Turner, 2000, p. iii). One reason why this occurs is the nature of most college campuses being open environments with many people coming and going.

Misunderstandings of Rape

Stone and Vanzant (2001) pointed out that the impact of rape on the victim is not entirely understood, nor nearly as well studied as it could be. Survivors of sexual violence have difficulty communicating about their experiences with relational partners, friends, and family members (Botta & Pingree, 1997; Rothbaum, Kozak, Foa, & Whitaker, 2001; Smith, et al., 2003; Sudderth, 1998). Rape is the perhaps the most humiliating and misunderstood crime committed. Women who

are raped have their agency completely stolen from them during the act. Perhaps because of society's discomfort with or lack of understanding of rape, society continually re-victimizes the survivor.

Sexual violence causes severe psychological trauma for survivors (Karp, Silber, Holstrom, and Stock, 1995; Rothbaum, et. al, 2001; Spitzberg, Marshall, and Cupach, 2001). Research has also studied how rape survivors cope with their post-rape anxiety through communicative acts (Draucker, 2001; Orbuch, Harvey, Davis, and Merbach, 1994; Sudderth, 1998; Swift, et al., 2005). Framing the situation on the part of the survivor can be part of that process (Bateson, 1972); however, when society provides obstacles to the healing process, it becomes problematic.

Young and Maguire (2002) found that the dominant paradigm seems to dictate the "correct" word choices when it comes to the labels survivors of sexual violence may call themselves and what others may call these people. The most correct terms, or at least the most helpful in the healing process, seem to be the terms that the survivors or victims choose to label themselves. Unfortunately, the power and agency stripped from them during their sexually violent experience continues long after, and is perpetuated by others' (sometimes violent, always dominant) language choices. In any case, there seems to be a strong resistance to static labels by those who have lived through such trauma (Young & Maguire, 2002). Due to this literature, the following hypothesis is posed:

H1: Participants who have survived being a victim of sexual violence will be more likely to respond negatively to rape myth acceptance compared to non-victims.

Rape Myths

"Rape myths include the belief that a rape victim wanted or deserved to be victimized and the belief that a victim is at fault if she is raped" (Buhi, 2005, p. 63). Burt (1980) defines rape myths as "prejudicial, stereotyped, or false beliefs about rape, rape victims, and rapists" (p. 217). In instances of rape, most of society seems more comfortable categorizing women as liars than categorizing men as rapists. Women's accounts of sexual assaults in the courtroom are most often dismissed as implausible; essentially women are seen as responsible for their own attacks (Kelly, 1997). This assumption that women are lying, or at least responsible for their attacks, gives power to rape myths. As attribution theory informs us, this blame is due to the fact that people are attributing the problematic situation of rape to inherent character flaws on behalf of the woman rather than the perpetrator. There is essentially a fundamental attribution error on the part of those attributing.

Rape and the behaviors that women are taught to engage in, in order to avoid rape, may in fact be what perpetuates male dominance over women (Bohner, Weisbrod, Raymond, Barzi, and Schwarz, 1993).

Society at large seems to be the primary cause of the perpetuation of rape myths. In fact, Bohner, et al. (1993) found that men who believe in rape myths tend to have higher self-esteem and more positive affect than men who do not believe in rape myths. "Rape myths are the mechanism that people use to justify dismissing an incident of sexual assault from the category of 'real' rape" (Burt, 1991, p. 27). Rape is perhaps the most prevalent and violent form of attack to be made on another human being. Because of the social stigma associated with rape, accurate figures of the prevalence of such violence is nearly impossible to estimate (Koss, Heise, & Russo, 1994).

Women tend to agree more with the survivor's perspective in sexual violence situations, while men are more likely to be influenced by rape myths. (Anderson, 1999, Heppner, et al., 1995, Simpson & Senn, 2003). Men who do accept rape myths as truth are more likely to commit acts of sexual violence, because they do not view the behavior that they are engaging in as wrong. It seems that overall men are more likely than women to accept rape myths. For instance, in situations of male rape, heterosexual males are most likely to take on anti-victim attitudes because of the myth of the good ole boy (Davies & McCartney, 2003).

Women tend to perceive sexual behavior as unwelcome and harassing more often than men do (Dunn & Cody, 2000); however, women who believe rape myths tend to have lower self-esteem than women who do not believe rape myths (Burt, 1980). Connop and Petrak (2004) found participants felt that talking about the assault tended to be problematic, leading to arguments because of misunderstandings between those discussing rape. Rape myths could be a reason that people do not want to discuss nor understand each other regarding these matters. When a culture supports and believes rape myths, it is dangerous to the culture (Koss, et al., 1994). This danger lies in the fact that the culture is reifying survivors' negative beliefs about themselves, causing them to become the perpetrator in their own eyes. Burt's (1980) rape myth acceptance scale is the most commonly used in literature investigating the acceptance of rape myths. The suggestions that Lonsway and Fitzgerald (1994) made for improving the Burt (1980) scale along with how the scale was improved follow:

1. Conceptual clarity and definitional consistency: The definition provided by their study was accepted as the definition of rape myths for the purposes of this study. "Rape myths are *attitudes and beliefs that are generally false but are widely and persistently held, and that serve to deny and justify male sexual aggression against women*" (Emphasis in original, Lonsway & Fitzgerald, 1994, p. 134).
2. Domain articulation: The items included in the current study equally represent what we consider the core issues of our study: victim blame, denial of frequency, denial of male accountability, which are the most prevalent categories of