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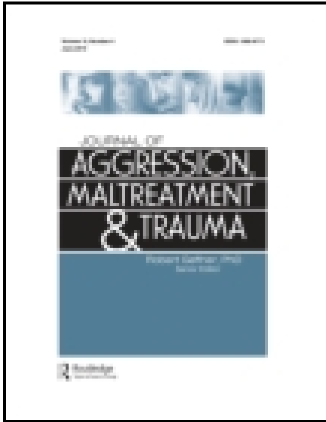

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Sex Differences in Response to Victimization by an Intimate Partner: More Stigmatization and Less Help-Seeking among Males

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Sex Differences in Response to Victimization by an Intimate Partner: More Stigmatization and Less Help-Seeking among Males

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Little is known about the unique challenges faced by male victims of intimate partner violence. We explored sex differences in perception of male versus female victims, as well as in one's willingness to identify as a victim, to minimize or conceal victimization, and to seek help for perceived victimization in a sample of 166 (89 female, 77 male) undergraduates. Results indicated that participants held more negative attitudes toward male versus female victims. Males were less likely than females to consider hypothetical aggressive acts perpetrated against them as abusive. When asked to think about how they would respond if they felt "abused" by their partner, male participants reported being more likely to minimize and less likely to disclose and seek help compared to females. Results are discussed in terms of the social emphasis on male dominance and highlight the need to consider the unique challenges faced by male victims.

KEYWORDS *abuse, dominance, female aggression, help-seeking, intimate partner violence (IPV), male victims, psychological abuse, stigma*

It is becoming increasingly clear that males are not the sole perpetrators of intimate partner violence (IPV; Archer, 2000; Kar & O'Leary, 2010; Straus, 2009). In the United States, an estimated 835,000 males were assaulted by

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their female romantic partners in a given year (Thoennes & Tjaden, 2000). Similar findings are reported in a recent Canadian study—more than half a million males were violently victimized by a female romantic partner between 1999 and 2004 (Statistics Canada, 2006). In spite of the growing body of evidence highlighting female-perpetrated partner violence, the issue of male victimization remains divisive and relatively neglected among researchers and practitioners alike. The victimization of males is so contentious that George (1994) termed it the "Great Taboo"; he believed the controversy was due to stereotypical ideologies of masculinity and femininity that inherently run counter to male victimization.

Some researchers have suggested that victimized males face a different set of challenges than victimized females (e.g., Hines & Douglas, 2009, 2010a, 2010b) and that studies of battered females will not suffice in providing a theoretical framework for understanding male victimization (e.g., George, 1994). Hines and Douglas (2009) argued that societal expectations of male dominance and the potentially greater stigma faced by male victims will likely make it more difficult to identify and treat targeted males and aggressive females (see also Gilbert, 2002). Societal expectations suggest that males should be physically dominant (Hines & Douglas, 2009). Accordingly, victimization by a female partner is considered emasculating and might ultimately deter males from reporting their victimization and seeking help (Hines & Douglas, 2009). There is a clear need to improve the study, identification, and treatment of targeted males. It is important to begin to understand how males differ from females in terms of their victimization stigma, as well as in their ability and willingness to identify themselves as victims and to subsequently seek help.

INTIMATE PARTNER VIOLENCE AND DOMINANCE

The perpetration of IPV by males has been deemed a power and control tactic used to dominate a partner and to penalize her undesirable behavior (Hamberger, Lohr, Bonge, & Tonlin, 1997; Yllö, 1993). When reports of females' perpetration of partner violence first came to light it was presumed by many that such behaviors were an expression of self-defense (Dobash & Dobash, 1977–1978; Hamberger & Potente, 1994). Self-defense is clearly an important predictor of some females' use of violence against intimate partners (e.g., Stuart et al., 2006); however, it is short-sighted to assume it is the sole motivation for all females' aggression. Indeed, self-defense explains only a minimal proportion of females' partner-directed aggression (Felson & Messner, 1998; Sarantakos, 1999). Similar to males, females' use of aggression has been linked to jealousy, anger, punishing their partner's infidelity, and attempts at controlling or dominating their partner (Arnocky, Sunderani, Miller, & Vaillancourt, 2012; Babcock, Miller, & Siard, 2003; Cascardi & Vivian,

1995; Dasgupta, 2002; Graham-Kevan & Archer, 2009; Hettrich & O'Leary, 2007; Hines & Malley-Morrison, 2001; Stets & Hammons, 2002). In accordance with these motives, females in both dating and married or cohabiting relationships report perpetrating unilateral acts of partner violence at rates similar to males (Arias & Johnson, 1989).

Females' domination and control over a male partner runs counter to societal expectations of male dominance (George, 1994; Hines & Douglas, 2009). For a man, exhibiting dominance is linked to his status, prestige, and mating opportunities (Von Rueden, Gurven, & Kaplan, 2011), and thus violation of this gender role could result in distress. Conversely, failure to adhere to the masculine gender role is often linked with stigmatization and maltreatment (e.g., Herek, 2004). For example, Brogden and Nijhar (2004) found that males who were victimized by their partners reported feeling their masculinity had been undermined by their victimization. Given this disconnect between male victimization and societal expectations of male dominance, it can be expected that victimized males would be perceived in a more negative or stigmatizing light (i.e., that they are weak, that they should be less susceptible to victimization, or are more deserving of it).

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STIGMATIZATION OF MALE VICTIMS

Steinmetz (1977–1978) noted that in post-Renaissance France and England, husbands who were believed to have been abused or dominated by their wives were derided and shamed. In modern society, it has been argued that males who experience aggression by a female are similarly stigmatized (George, 1994). *Social stigma* refers to disapproval of an individual's characteristics or beliefs that are perceived to be against cultural norms (Goffman, 1963; Link & Phelan, 2001). Stigma toward those with undesirable traits can even occur within the marginalized group itself. Overweight individuals (a stigmatized group) strongly associated "thin people" with "pleasant" and "overweight people" with "unpleasant" on an implicit association task (Rudman, Feinberg, & Fairchild, 2002). It is possible that targeted males might hold a stigma against other males who are the targets of female partner violence.

It might be less stigmatizing for a female to be a target of partner violence than it is for a male to be similarly targeted (see George, 1994). Whereas historical and anecdotal evidence seems to support such an argument, little research has empirically explored the stigmatization of male targets. One exception has been the study of people's attributions of blame toward male targets of sexual assault. Smith, Pine, and Hawley (1988) compared students' judgments of male and female targets of heterosexual and homosexual rape. The authors found that males who were sexually assaulted by a female were considered more likely to have encouraged the episode

and to have derived more sexual pleasure and less stress from it compared to males targeted by other males or to females targeted by either males or females. Researchers studying women's stalking behavior have reported similar findings. Males who were stalked by females were seen as being more responsible for their situation than were females exposed to males' stalking behavior (Phillips, Quirk, Rosenfeld, & O'Connor, 2004). Similarly, Sheridan, Gillette, Davies, Blaauw, and Patel (2003) argued that there is a general lack of concern for males who are targeted and those males are perceived as having more control over their stalker. Although each of these studies has demonstrated differences in how male and female targets are viewed (i.e., males are less likely than females to be seen as a victim), these studies did not assess whether male targets were indeed stigmatized.

Research specific to partner violence has shown that male victims might be considered in a different light compared to female victims. Harris and Cook (1994) exposed individuals to vignettes in which either a man or a woman was physically battered. Results showed that respondents rated male victims as being more responsible for their victimization and reported their victimization as being less serious compared to females (Harris & Cook, 1994). Based on this research, it was predicted that abused men would be more stigmatized than abused women (Hypothesis 1).

MINIMIZATION AND HELP-SEEKING

Failure to conform to masculine gender roles (and the potential for facing related stigma) can create psychological conflict and strain (O'Neil, 1990). If male victims are stigmatized more than female victims (as we hypothesized), then we might also expect fewer help-seeking behaviors on the part of targeted males. According to McNeely, Cook, and Torres (2001), targeted males have suggested that they would not have sought help even if they believed help existed for them. The authors cited case reports suggesting that some victimized men fear being characterized as a "wimp," or worse, and that many of these men would not have called a crisis line even if they were aware that one was available for men (McNeely et al., 2001). Information supporting an underreporting of males' victimization comes primarily from crime and arrest-related data. Stets and Straus (1992) found that females call police after a partner assault 10 times more often than males. Similarly, Brown (2004) reported that females were more likely to contact the police to have an abusive partner arrested.

Several researchers have attempted to explain males' underreporting. Some males might accept their partner's aggression and remain in the relationship because they perceive their partner's aggression as being less serious (Adler, 1981; Levant, 1992) or if they are in denial of being victimized (Davis, 2004). Researchers have also suggested that targeted males will avoid seeking

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help due to fear of ridicule, shame, humiliation, embarrassment, or being labeled the initiator of the aggression (Hines & Douglas, 2009; Langley & Levy, 1977; Macchietto, 1992; McNeely et al., 2001; O'Brien, Hunt, & Hart, 2005; Steinmetz, 1980). It is not surprising then, that men might be less likely than females to view aggression against them as a crime (Dutton & Nicholls, 2005) and might be less willing to report or seek help for their victimization.

THIS STUDY

The existing literature on male targets of female aggression has identified three potential sex differences pertaining to individual and societal responses to IPV; yet to date, few empirical studies have examined stigma toward male victims and the willingness of males to seek help. In this study, we addressed this gap in knowledge by exploring stigma toward male victims, as well as male conceptualizations of and responses to perceived victimization. First, it was hypothesized that participants would hold more negative (stigmatizing) attitudes toward male versus female targets (Hypothesis 1) and that these sex differences would hold regardless of participants' own experiences with victimization. Second, it was expected that when asked to consider various hypothetical acts of violence being perpetrated against them, males would be less likely than females to consider these aggressive acts as being "abusive" (Hypothesis 2). Third, it was expected that males would be more likely than females to minimize and less likely to seek help for those acts deemed abusive (Hypothesis 3). It was expected these attitudinal differences (more stigma, more minimization, and less help-seeking among males) would exist broadly between the sexes, rather than only among targets. Therefore, analyses controlled for participants' actual experiences with partner aggression in their relationship rather than limiting the sample only to targeted males and females.

METHOD

Participants

Participants were 166 undergraduate university students between the ages of 18 and 30 (M_{age} = 22, SD = 2.3). Of these students, 89 were female and 77 were male. Our final sample consisted of White (78%), Arab (7%), Southeast Asian (6%), South Asian (3%), Asian (2%), Black (2%), and Latin American (2%) individuals.

Procedure

Students were recruited from common areas on a university campus via recruitment stations and posters detailing the study. To participate,

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individuals had to be in a heterosexual dating relationship at the time of participation (dating length $M = 4$ months, $SD = 1.17$). Individuals in long-distance relationships were excluded from the study. Participants were given a questionnaire package to take home, complete individually, and return to the lab. Participants were compensated for their time with $20.

Measures

Aggression by an intimate partner

The Conflict Tactics Scale (CTS2) victimization scale is a 39-item self-report instrument designed to measure the extent to which individuals in a dating, cohabiting, or marital relationship were victimized by their current partner (Straus, Hamby, Boney-McCoy, & Sugarman, 1996). The measure includes four partner aggression subscales: psychological, physical, sexual, and physical injury from partner assaults. The response scale ranged from never to more than 20 times in the past 12 months. If the behavior did not happen in the past 12 months, participants were asked if it had ever happened prior to the past 12 months. Each subscale is separated in terms of minor and severe acts of aggression. Following Straus and Gelles (1986), we were interested in severe acts, which are defined as acts that have a relatively high probability of causing harm (see Straus et al., 1996). Following the scoring procedure recommended by Straus et al. (1996), the scale midpoints (e.g., *3–5 times* = 4) were used to calculate sum scores for each victimization category. In this study, each aggression subscale was internally consistent: psychological victimization ($\alpha = .76$), physical victimization ($\alpha = .82$), sexual victimization ($\alpha = .86$), and physical injury ($\alpha = .97$).

Stigmatization of partner violence victims

Currently, there is a lack of reliable measures of partner violence stigma and of conceptualizations of what constitutes a victimizing act. Therefore, novel measures were developed to address these psychometric gaps. A measure of negative attitudes held toward targets of partner violence was created, termed the Partner Violence Stigma Scale (PVSS; Appendix A). The measure employs a 7-point Likert-type scale ranging from 1 (*strongly disagree*) to 7 (*strongly agree*). The eight items assessed three important aspects of social stigma: stereotyping (linking victimization to negative attributes), attribution assumptions (attaching blame to the individual's condition), and social avoidance (see Link, Yan, Phelan, & Collins, 2004). They were loosely based on existing measures for other stigmatizing conditions, such as contracting HIV/AIDS (e.g., Kalichman et al., 2005). Items were developed to measure participants' beliefs about negative qualities of people experiencing partner violence (e.g., victims are unattractive, liars, weak) as well as a dimension of shamefulness and blame toward victims (e.g., should be ashamed of themselves, they

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deserve what they get, they provoke the behavior). An avoidance and social sanction dimension of stigma against victims of partner violence (i.e., avoiding friendship with a victim of partner violence) was also used. Each of the stigma items contributed to a single factor with item loadings ranging between .56 and .77. The items contributed 45.12% toward the explained variance and were internally consistent at $\alpha = .82$. To test sex differences in the stigmatization of victims, half of the males and half of the females in the sample were randomly assigned to receive the measure in reference to victimized men and those in the other half of the sample were randomly assigned to receive the measure in reference to victimized women.

Conceptualizations of victimization

The Minimization and Help-Seeking Scale (MHSS) was developed to examine whether males and females conceptualize aggressive acts differently and whether sex differences exist in individuals' responses to perceived victimization. Using a pool of aggressive acts commonly observed in partner violence measures, a list of five physically aggressive acts, seven psychologically aggressive acts, and two sexually aggressive acts was compiled (Appendix B). Participants were instructed to mark with a check any action(s) that, if directed toward them by their partner, would elicit feelings of victimization or abuse. The number of endorsed items was then summed to create a score representative of how many items were considered abusive.

Reactions to hypothetical victimization

To assess how individuals would respond to feelings of victimization, participants rated their potential reactions to feeling victimized or abused by imagining themselves being the target of one of the acts that they had selected as being abusive. Each item was anchored on a 7-point Likert-type scale ranging from 1 (*strongly disagree*) to 7 (*strongly agree*). These reaction items loaded on two distinct factors: help-seeking and disclosure (e.g., "I would seek assistance from an organization that helps victims," "I would tell my family and/or friends about what happened") and minimization and concealment ("I would give them one more chance before leaving them," "I would lie about the seriousness of what happened"). Principal component analysis using a varimax rotation showed that four items loaded on minimization and concealment ($\alpha = .70$), with factor loadings ranging between .37 and .80, and contributed 29% toward the explained variance. Three additional items loaded on a factor termed help-seeking and disclosure ($\alpha = .71$), with loadings ranging between .41 and .86, and contributed 25% toward the explained variance. Convergent validity was established via comparison with the OSLO–3, a three-item measure of social support using a 5-point Likert-type scale (Dowrick et al., 1998). Previous research has shown that,

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in general, individuals with greater social support are more likely to seek help across various domains (e.g., Roberts, 1988). In this sample, social support was positively correlated with the help-seeking subscale ($r = .17$, $p < .05$) and was negatively correlated with minimization ($r = .35$, $p < .001$). This measure allowed us to assess gender differences in how individuals would respond when they feel victimized or abused as opposed to when they are exposed to one of the acts that might or might not be considered "abuse" by the victim. Note that to use this measure, participants must have selected at least one act that would make them feel like a victim of abuse. In this study, all participants met this criterion.

RESULTS

Descriptive Statistics

In examining experiences with victimization in the current relationship (CTS2 scores), it was found that males and females self-reported being targeted for similar amounts of physical, psychological, and sexual aggression, and being injured by their partners to similar degrees. Using an independent samples *t* test, none of the victimization variables varied significantly by sex (*t*s = –0.20 to –1.20, *ns*). Descriptive statistics for each study variable are presented in Table 1.

Hypothesis 1: Stigma against Male Targets

It was hypothesized that individuals would hold greater negative attitudes (i.e., more stigma) toward targeted males versus females. Moreover, it was expected that one's own exposure to partner aggression would not influence one's own negative attitudes held toward victims of IPV (i.e., we expected targeted males to be stigmatized more regardless of participants' own experiences). Using a one-way analysis of variance (ANOVA), differences in stigma toward male versus female targets of partner violence were examined. Results indicated that participants rated targeted males significantly more negatively than they did targeted females, $F(1, 160) = 8.02$, $p < .001$, $d = -.77$; $M_{\text{female}} = 1.7$, $SD = 0.98$, $M_{\text{male}} = 2.5$, $SD = 1.10$. This result held true regardless of the participants' own CTS2 scores (physical, psychological, sexual, and injury).

Hypothesis 2: Males Conceptualize Victimization and Abuse Differently Than Females

The number of acts that males and females believed would make them feel like a victim of abuse was examined. Controlling for actual experiences with victimization (CTS2 scores), we employed the negative binomial regression

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TABLE 1 Descriptive Statistics for Study Variables

	Total					Females					Males				
	N	*M*	*SD*	Min	Max	*N*	*M*	*SD*	Min	Max	*N*	*M*	*SD*	Min	Max
Physical victimization	166	—	—	0.00	30.00	89	—	—	0.00	21.00	77	—	—	0.00	30.00
Psychological victimization	166	—	—	0.00	35.00	89	—	—	0.00	27.00	77	—	—	0.00	35.00
Sexual victimization	166	—	—	0.00	28.00	89	—	—	0.00	12.00	77	—	—	0.00	28.00
Partner-induced injury	166	—	—	0.00	28.00	89	—	—	0.00	9.00	77	—	—	0.00	28.00
Stigmatization of victims	165	2.10	1.04	1.00	5.63	88	1.77	0.87	1.00	5.13	77	2.43	1.13	1.00	5.63
Acts considered "abusive"	143	10.06	3.62	0.00	14.00	74	11.49	2.40	5.00	14.00	69	8.52	4.08	0.00	14.00
Willingness to minimize	153	3.00	1.44	1.00	7.00	78	2.42	1.32	1.00	6.75	75	3.59	1.31	1.00	7.00
Willingness to help-seek	153	4.49	1.21	1.00	6.67	78	4.94	1.03	1.00	6.67	75	4.03	1.23	1.00	6.67

model to test this hypothesis. This procedure was selected for analyzing count data over Poisson regression given that for each criterion variable the frequency data were positively overdispersed (95% lower limits [LLs] = 3.3–8.6, 95% upper limits [ULs] = 3.4–10.2) and the number of occurrences was not limitless. In support of Hypothesis 3, we found that males considered fewer of each type of act (physical, psychological, sexual, and total acts) as being abusive if directed toward them than did females. Specifically, the total acts model showed a significant sex difference, likelihood ratio $\chi^2(2) = 27.59$, $p < .0001$, where males differed from females in total acts considered abusive ($B = -0.28$, $p < .0001$). Results showed males to endorse fewer physical, likelihood ratio $\chi^2(2) = 9.51$, $p < .001$ ($B = -0.25$, $p < .0001$); psychological, likelihood ratio $\chi^2(2) = 16.22$, $p < .001$ ($B = -0.29$, $p < .0001$); and sexual acts, likelihood ratio $\chi^2(2) = 8.47$, $p < .001$ ($B = -0.31$, $p < .0001$) when compared to females. Interestingly, results also showed a significant effect for CTS2 scores, whereby participants with higher total CTS2 scores were less likely to perceive aggressive acts against them as abusive ($B = 0.02$, $p < .05$).

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Hypothesis 3: Males Are Less Likely to Disclose and More Likely to Conceal Feelings of Victimization

The hypothesis that males and females would respond differently to perceived feelings of victimization and abuse was explored. A Hotelling's T^2 two-group between-subject multivariate analysis of variance (MANOVA) was employed to examine help-seeking and concealment after hypothetical experiences with victimization. The predictor variable was participant sex. Participants' CTS2 victimization scores were included as covariates. Assumptions of error variance equality between groups were met for each of the outcome variables.

A one-way MANOVA revealed a significant multivariate main effect for sex, Wilks's λ, $F(2, 147) = 21.01$, $p < .001$, $\eta_p^2 = .23$. Given the significance of the overall test, the univariate main effects were examined. Univariate main effects for sex showed that females were significantly more likely than males to seek help, $F = 20.31$, $p < .0001$, $d = 1.67$; $M_{\text{females}} = 5.3$, $SD = 1.03$, $M_{\text{males}} = 3.4$, $SD = 1.23$, and that, conversely, males were significantly more likely than females to conceal or minimize their victimization, $F = 26.42$, $p < .0001$, $d = -0.99$; $M_{\text{females}} = 2.7$, $SD = 1.31$, $M_{\text{males}} = 4.0$, $SD = 1.31$). See Figure 1 for mean differences in help-seeking and minimization by sex.

DISCUSSION

This study explored sex differences in males' and females' experiences with and perceptions of IPV. The following three hypotheses were derived from

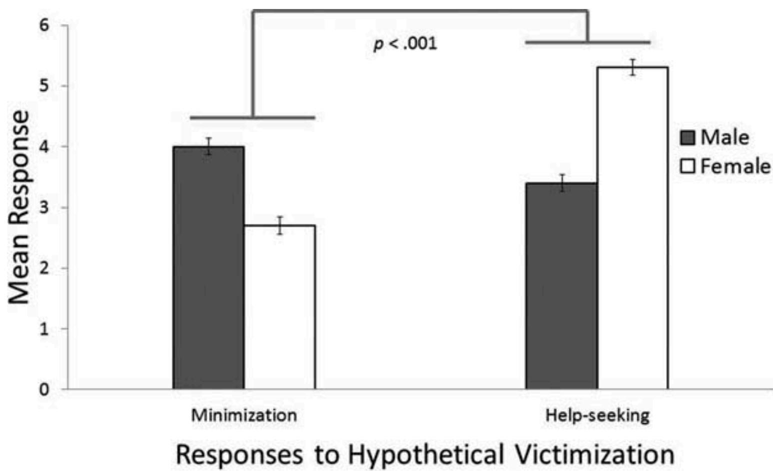

FIGURE 1 Significant sex differences in males' versus females' willingness to minimize or conceal victimization as well as to seek help for victimization.

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the existing literature on IPV: (a) negative stereotypical attitudes (i.e., stigma) would be held more toward targeted males than females, (b) males would be less likely than females to consider specific acts of partner-perpetrated aggression as being victimizing and abusive, and (c) males compared to females would report being more likely to minimize or hide a partner's aggression and less likely to seek help when they consider themselves to have been victimized.

First, a number of researchers have described the potential for stigmatization of male targets of partner violence by females (George, 1994; Hines & Douglas, 2009; Steinmetz, 1977–1978). However, to date no empirical research has examined the difference in levels of stigmatization for male versus female targets. Participants completed a measure of negative attitudes toward targets of partner violence. Half of the sample responded to the questions while considering male targets, and half the sample answered the questions in regard to female targets (randomly assigned). Results showed that participants stigmatized males significantly more than females, and this stigmatization held, regardless of the participants' own experiences with their partners' aggression.

Second, given the hypothesis that males would be stigmatized to a greater extent than females, it was also expected that males minimize their perceptions of victimization more and seek help less than females. To test this hypothesis, participants were provided a list of 14 acts of maltreatment common to existing measures. Participants indicated any number of these acts that would make them feel like a "victim of abuse." Results indicated that males considered significantly fewer acts as being abusive than did females. This lesser consideration of a partners' aggression as victimizing might be a

function of physical and emotional differences between the sexes. Female physical aggression might be less physiologically damaging to male targets. The lessened threat to physical safety could lead some males to disregard their victimization to some degree. Similarly, males raised to express their masculinity in the form of emotional invulnerability might be less apt to regard a female partner's psychological aggression as hurtful. Another possibility is that males do experience these acts as painful; however, because of their understanding of the societal expectation of masculinity and dominance and the stigma that is associated with identifying as a victim, they are less willing or even unwilling to acknowledge their true beliefs, even in an anonymous questionnaire. Future research might consider sex differences in what is considered victimizing by exploring specific extremely damaging acts such as stabbing or shooting a partner or hitting them with a car. These acts would be mutually physically damaging to males and females and so could provide further insight into the reasons behind these initial sex differences. Moreover, although results showed a significant sex difference, it is noteworthy that males still considered many acts as abusive.

Third, participants were instructed to consider being the target of one of the "abusive" acts that they believed would make them feel like a victim of abuse and then responded to minimization and help-seeking scales. In support of Hypothesis 3, results showed that males were significantly more likely to minimize their victimization and less likely to seek help, even under conditions in which they feel like they have been victimized. The use of the MHSS conferred benefits that an examination of actual male victimization would not have allowed. Hypothetical victimization (rather than actual victimization) was examined to (a) control for the sex difference between males and females in considerations of a partner's aggression as abusive, and (b) examine individuals' beliefs about how they would respond regardless of whether they have ever experienced victimization. The latter point was important because it was suspected that male attitudes toward stigmatization of victims and help-seeking existed regardless of their own victimization status. That is, it does not take being victimized for a male to develop an attitude toward minimization and less help-seeking behavior.

The observation that males minimize more and seek help less when they feel abused could be a function of the stigma associated with violation of the stereotypical gender role. Case reports have suggested that men fear disclosure for fear of ridicule and embarrassment (McNeely et al., 2001). Thus, individuals seeking to provide effective treatment to male victims must consider discretion and confidentiality issues, which are likely very salient to male victims. It is also likely that males understand that help from family, friends, and various social services simply does not exist for male victims to the extent that it does for females. This shameful reality only serves to reinforce the male victim's assumptions that their victimization is less serious and less worthy of them seeking assistance.

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Taken together, the findings of this study showed that males differ from females in their experiences with partner aggression. These differences are seen psychologically and behaviorally (i.e., in perceptions of what is victimizing, in minimization, and in help-seeking). It seems intuitive that these differences might be related, in part, to differences in gender role expectations and the differential degree of stigma faced by males when they fail to meet these gendered requirements.

Limitations

One limitation of this study was the constraint of the sample to university students who were currently in a dating relationship. Although dating violence in college samples is certainly an important social issue (O'Leary, 1999; Straus, 2004), findings should be replicated among community samples of varying ethnicities, incomes, and age groups. This limitation might be especially applicable to our finding that students in our sample stigmatized male targets of partner violence more than female targets. For instance, university-educated individuals tend to be more affluent, and those who are more affluent have been found to be less empathetic toward others (Piff, Kraus, Côté, Cheng, & Keltner, 2010). It will be of interest for future research to determine whether this finding might translate into greater stigmatization of targets (especially male targets) by non-university-educated individuals.

Another limitation regards the measure developed to examine males' versus females' willingness to disclose and help-seeking when aggressed against. The measure prompted participants to consider feeling victimized before selecting how they would respond. This methodology allowed us to control for the anticipated sex differences that we observed in feeling abused or victimized after being aggressed against (i.e., if one does not feel victimized, then he or she has no reason to seek help). However, the measure did not take into account which specific "abusive" act the participant thought of when responding to the help-seeking and minimization questions. If feelings of abuse exist on a continuum, those imagining experiences of less severe abuse (e.g., being called names vs. being attacked with a weapon) might report fewer help-seeking behaviors. This aspect of the measure does not seem to affect participants' reporting, as females were more likely than men to consider psychological (i.e., presumably the less severe) acts as abusive. If considering less severe acts in any way reduced one's likelihood of help-seeking, then it should have been more prevalent among females and, thus, would have made the observed sex difference (that males seek less help and engage in greater minimization) less salient. Still, it is possible that there might be sex differences in what abusive act was recalled when responding to the measure. Thus, the measure might be improved by prompting participants to consider a specific act of victimization (e.g., being hit by one's partner) and then constraining the sample to only those who endorsed that

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they would feel abused or victimized by that act. Adopting this methodological approach in future research might help to underscore the findings of this study. Future research might also consider whether these findings would hold in nonheterosexual samples, in which stigma might also play a particularly important role in deterring help-seeking behaviors. For instance, research has found that homosexual individuals might be less likely than heterosexual individuals to report victimization to the police (Merrill, 1998), and this minimization might be intensified in those who are not "out" (Pattavina, Hirschel, Buzzawa, Faggiani, & Bentley, 2007).

These findings suggest that it could be particularly important to focus efforts toward developing strategies to reduce stigma of male dating violence victims and to increase awareness of dating violence among potential male victims, as well as improving access to dating violence services for male victims, with the ultimate goal being to facilitate their help-seeking behavior.

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CONCLUSION

The findings of this study provide the first empirical evidence that male targets of female aggression face unique challenges that should be addressed by researchers, policymakers, and practitioners alike. Male targets seem to diverge from societal expectations of dominance and face significantly more stigma from their peers than female targets. In essence, it is more socially acceptable for a female to be a target of abuse than it is for a male. These findings highlight a potential reason why males reported a greater willingness to minimize their perceived victimization, either by not identifying the act as aggressive or by hiding their exposure to such acts, and reported being less likely to seek help if they were ever to feel victimized. Researchers need to replicate these findings and develop distinct models of male victimization that are based on objective research rather than on what is understood of female victimization. Research on male targets of partner aggression needs to increase to effectively inform policymakers and practitioners, who in turn must consider the unique challenges facing male targets, and develop better screening and treatment options for targeted males.

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APPENDIX A
PARTNER VIOLENCE STIGMA SCALE (PVSS)

Presented is the version assessing stigma against males (females in brackets).

Instructions: Please rate your agreement with each statement using the scale below. There are no right or wrong answers and your responses are anonymous. This scale applies to heterosexual (man + woman) relationships. In this scale, the term *abuse* refers to being exposed to some level of physical, psychological, or sexual aggression by one's romantic partner.

1	2	3	4	5	6	7
O	O	O	O	O	O	O
I strongly disagree						I strongly agree

1. _______ Men (Women) who are abused by their romantic partners should be ashamed of themselves.
2. _______ Men (Women) who are abused by their romantic partners are weak.
3. _______ Men (Women) who stay with abusive partners deserve what they get.
4. _______ Men (Women) who are abused by their romantic partners probably cannot attract anyone better.
5. _______ Men (Women) who are abused by their romantic partners are not men (women) I want to be friends with.
6. _______ Many men (women) who say they are abused by their romantic partners are probably lying or exaggerating.
7. _______ When a woman (man) hits her (his) partner, it is most likely in self-defense.
8. _______ When a woman (man) hits her (his) partner, it was most likely provoked.

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APPENDIX B
MINIMIZATION AND HELP-SEEKING SCALE (MHSS)

Part A

Instructions: Please check off (√) any of the actions that, if your partner did to you, would make you feel like a victim of abuse.

_____ Slapped me across the face
_____ Called me hurtful names
_____ Hit me with an object or weapon

_____ Kicked me
_____ Told me I could not go out with family or friends
_____ Forced me to perform a sexual act
_____ Pushed or shoved me
_____ Insulted me on purpose
_____ Insulted my intelligence
_____ Talked me into doing something sexual that I initially did not want to do
_____ Swore at me
_____ Treated me like I was inferior
_____ Shamed me in public
_____ Choked me

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Part B

Instructions: Sometimes people have varying responses to conflict within their relationship. Using the scale below, please rate your level of agreement with each statement. Questions refer to your relationship with your current partner, or if you are single, to your most recent romantic relationship.

1	2	3	4	5	6	7
O	O	O	O	O	O	O
I strongly disagree						I strongly agree

1. _______ If my partner did something I checked above, I would seek assistance from an organization that helps victims.
2. _______ If my partner did something I checked above, I would NOT seek assistance from my family or friends.
3. _______ If my partner did something I checked above, I would give them one more chance before leaving them.
4. _______ If my partner did something I checked above, I would be reluctant to tell anyone for fear of being blamed.
5. _______ If my partner did something I checked above, I would be embarrassed to let anyone know.
6. _______ If my partner did something I checked above, I believe there are organizations that could help me.
7. _______ If my partner did something I checked above, and the police were called, I would lie about the seriousness of what happened.
8. _______ If my partner did something I checked above, I would tell my friends and family about what happened.

Concealment and minimization = Items 2, 4, 5, 7

Disclosure and help-seeking = Items 1, 3, 8