

ABSTRACT

Title of Thesis: THE IMPACT OF HYPERMASCULINITY ON UNDERGRADUATE MEN'S PERCEPTIONS OF SEXUAL ASSAULT AND CONSENT

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In the U.S., approximately 1 out of every 5 women reported a completed or attempted sexual assault in their lifetime, with women ages 18-24 being at significantly higher risk for assault. While sexual assault affects all genders, the majority of sexual assaults on campuses involve men assaulting women. Using a convenience sample of undergraduate men (n=59), this study investigated how hypermasculinity affects undergraduate male's perceptions of sexual assault, consent, hook-up culture, and rape myth acceptance (RMA) using six validated inventories. Hypermasculinity was significantly associated with RMA ($p = .001$), and sexual consent attitudes and behaviors, such as a lack of perceived behavioral control ($p = .004$) and positive attitudes toward consent ($p = .001$). A significant relationship between hypermasculinity and motivations for participation in hook-up culture was also detected. These findings can inform universities how to utilize their limited resources to provide education to improve the prevalence of sexual assault.

THE IMPACT OF HYPERMASCULINITY ON UNDERGRADUATE MEN'S
PERCEPTIONS OF SEXUAL ASSAULT AND CONSENT

by

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Table of Contents

Acknowledgements.....	ii
Table of Contents.....	iv
List of Tables.....	vi
Chapter 1: Introduction.....	1
Problem Statement.....	1
Research Questions.....	7
Definition of Terms.....	8
Study Significance.....	9
Chapter 2: Background.....	11
Sexual Assault in U.S. Colleges.....	11
Consequences of Sexual Assault and Current Interventions.....	12
Rape Myth Acceptance.....	15
Greek Life and Athletics.....	16
Affirmative Consent.....	21
Masculinity in College.....	23
Masculinity and Sex.....	26
Theory of Emerging Adulthood.....	28
Precarious Manhood Theory.....	31
Chapter 3: Methods.....	34
Study Design.....	34
Study Sample.....	35
Measures.....	36
Operationalization of Variables.....	42
Data Analysis Plan.....	45
Chapter 4: Results.....	48
Descriptive Statistics.....	48
Scale Scores.....	49
Research Question 1.....	52
Research Question 2.....	53
Research Question 3.....	55
Research Question 4.....	59
Research Question 5.....	64
Exploratory Analyses.....	65
Chapter 5: Discussion.....	69
Summary of Central Findings.....	69
Implications.....	78
Limitations.....	81
Directions for future research and interventions.....	83
Conclusion.....	84
Chapter 6: Appendices.....	86
Appendix A: IRB Approval.....	86
Appendix B: Recruitment Materials.....	88
Appendix C: Consent Form.....	90

Appendix D: Measures 93
Appendix E: Debriefing Script 103
References 105

List of Tables

Table 1: Sample Demographics.....	49
Table 2: Scale and Subscale Scores.....	51
Table 3: Bivariate Correlation of Hypermasculinity Scores and Rape Myth Acceptance Scores.....	53
Table 4: ANOVAs for Hypermasculinity Scores and Rape Myth Acceptance Subscale Scores.....	53
Table 5: ANOVAs for Hypermasculinity Scores and Sexual Consent Scale- Revised (SCS-R) Subscale Scores.....	55
Table 6: Bivariate Correlation of Social-Sexual Motives Subscale and Hypermasculinity and RMA.....	56
Table 7: Bivariate Correlation of Social-Relationship Seeking Motives Subscale and Hypermasculinity and RMA.....	57
Table 8: Bivariate Correlation of Enhancement Motives Subscale and Hypermasculinity and RMA.....	58
Table 9: Bivariate Correlation of Conformity Motives Subscale and Hypermasculinity and RMA.....	59
Table 10: Mean Differences in Hypermasculinity Based on Greek Life Affiliation.....	60
Table 11: Mean Differences in Hypermasculinity Based on Sports Team Membership.....	61
Table 12: Mean Differences in Sexual Consent Attitudes and Norms Based on Greek Life Affiliation.....	62
Table 13: Mean Differences in Sexual Consent Attitudes and Norms Based on Sports Team Membership.....	62
Table 14: Mean Differences in Rape Myth Acceptance Based on Greek Life Affiliation.....	63
Table 15: Mean Differences in Rape Myth Acceptance Based on Sports Team Membership.....	64
Table 16: ANOVAs for Hypermasculinity Scores and Social Comparison (INCOM-Short) and Fear of Negative Evaluation (BFNE-II).....	65
Table 17: ANOVA for Political Affiliation and Hypermasculinity.....	66
Table 18: Multiple Comparisons – Post Hoc Test for Political Affiliation and Hypermasculinity Scores.....	67
Table 19: Mean Differences in Sexual Consent Attitudes and Norms based on Rape Myth Acceptance Scores.....	68

Chapter 1: Introduction

Problem Statement

Sexual assault is one of the most widely discussed public health issues of the last decade, with numerous movements such #MeToo and #TimesUp dominating social media platforms and public discourse alike (Langone, 2018). There have been numerous high-profile cases in the last five years, spanning all spheres of influences include President Donald Trump, Supreme Court Justice Brett Kavanaugh, Hollywood producer Harvey Weinstein, and former U.S Olympic Gymnastics national team doctor, Larry Nasser (Battaglia et al., 2019; Cacciola et al., 2018; Garcia, 2017). While high profile cases get significant media attention, sexual assault and sexual violence are not limited to those in position of power or influence, but are often perpetrated by those who have existing relationships with their victims. A seminal study by the U.S. Department of Justice found that among all women in college who experienced sexual assault, 9 in 10 offenders were known to the victim, whether a previous romantic partner, classmate, friend, acquaintance, or coworker (Fisher et al., 2000). Despite the increased spotlight on sexual assault in the media, the number of sexual assaults and the number of reports of sexual assault in the last ten years have remained largely unchanged (Department of Justice: Office for Victims of Crime, 2018). In the United States, approximately 1 out of every 5 women (or an estimated 25.5 million) in the U.S. reported an attempted or completed rape during their lifetime, while 43.6% of women (nearly 52.2 million) experienced some form of sexual violence (Smith et al., 2018). Despite these overwhelming figures, the

prevalence of sexual assault and violence on college campuses are believed to be even higher.

Sexual assault on college campuses has been recognized as a significant public health issue at the highest levels of U.S. government. In January 2014, President Barack Obama established the White House Task Force to Protect Students from Sexual Assault with its chief directive to strengthen federal enforcement efforts and provide institutions of higher education with additional resources and tools to combat sexual assault on their campuses (The White House, 2014). This effort was largely made because institutions were lacking support, standard protocols for reporting, and resources to assist college students who are victims of sexual assault. Women who attend college are at a greater risk of sexual victimization than their counterparts who do not pursue higher education (*Scope of the Problem: Statistics* | RAINN, 2015; Wood & Stichman, 2016). Although the issue of sexual assault affects more than women (e.g. men, non-binary individuals), the most significant majority of sexual assaults on college campuses involve men assaulting women (Banyard et al., 2007; Flack et al., 2008; Howard et al., 2008; Sinozich & Langton, 2014). According to the comprehensive *Report on the AAU Campus Climate Survey on Sexual Assault and Sexual Misconduct*, up to 30% of women are sexually assaulted during their years in college (Cantor et al., 2015). However, many scholars agree that these figures could be even higher given the difficulties in tracking the incidence and prevalence of sexual assault and a lack of reporting. Obtaining precise figures on the incidence and prevalence of sexual violence can be extremely difficult due to the varying and inconsistent definitions used by various institutions such as colleges and universities,

police bureaus and other state and/or federal government agencies. Researchers have found that methodological variances across studies, including fluctuating definitions of sexual assault, inconsistent sampling methods, assessment timeframes, and target populations, have led to a continued struggle to fully understand the scope of this issue (Fedina et al., 2016; Mellins et al., 2017). The inability to precisely track reported sexual assaults only further highlights the need for action in addressing this health issue. According to the Bureau of Justice Statistics, only 23.2% of all sexual assaults were reported to the police in 2016 (Morgan & Kena, 2018). On college campuses, this number is significantly lower. In a study by Sabina and Ho, (2014), only 2–11% of college women reported their sexual assault to campus, local, or state law enforcement. Lindquist and colleagues (2016) found that only 3% to 10% of survivors of sexual assault made any formal grievance through university reporting procedures.

Previous research has identified numerous factors associated with sexual assault on college campuses that have been implemented and targeted for intervention. Alcohol use, especially binge drinking, has significant correlations to sexual assault, among both perpetrators and victims of sexual assault with research citing that nearly half of all sexual assaults on college campuses are associated with either the perpetrator's alcohol consumption, the victim's alcohol consumption, or both (Abbey et al., 2004). One recent study found that women who reported binge drinking or risky drinking at least monthly were more likely to experience any sexual assault than those who did not (Mellins et al., 2017). A study by Mohler-Kuo, Dowdall, Koss, and Wechsler (2004) found that 72% of all women who responded

that they had been sexually assaulted were intoxicated during the assault. Fraternity and sorority affiliation has also been demonstrated to be associated with an increased risk for sexual assault. Women who participated in a sorority reported more frequent occasions where heavy alcohol consumption occurred, increased risky behavior, and more frequent encounters with men belonging to fraternities, all of which significantly predicted those who reported past sexual assault (Franklin, 2016). In addition to alcohol, there have been noted associations found regarding fraternity members as perpetrators of sexual assault due to their financial affluence, status on campus as dominant purveyors of social parties, and their ability to have complete authority at parties where alcohol and other substances are being consumed and provided (Jozkowski & Wiersma-Mosley, 2017). Martin (2016, p. 34) specifically notes regarding this first point that “economic affluence fosters assumptions of privilege and a belief that those with privilege stand above (or outside) formal authority.”

The hook-up culture of many college social scenes significantly contributes to the potential risk for sexual assault (Vedantam et al., 2017). A hook-up is defined as “a physically intimate encounter ranging from kissing to intercourse that occurs without the expectation of future physical encounters or a committed relationship” (Owen, Rhoades, Stanley, & Fincham, 2010, p. 656). Flack Jr. et al. (2016) found that out of all students who reported an event of unwanted sexual activity or sexual assault, 78% of these occurred during a hook-up situation. Additionally, a majority of college students who were found to believe that hookups are harmless and can elevate one’s social status among their peers also had increased rape myth acceptance (RMA)

(Reling et al., 2018). Also, female students who reported higher numbers of hook-ups and reported more episodes of heavy drinking were found to be significantly more likely to experience more sexual victimization (Tyler et al., 2017). A particular time of the school year or the year a student is in school also has potential correlations to sexual assault, which researchers have called the *Red Zone*. According to Kimble, Neacsiu, Flack, and Horner (2008), women in their freshman year of college were at higher risk for sexual assault than those in their sophomore term. Additionally, the early weeks of the fall semester showed the highest prevalence of sexual assault (Kimble et al., 2008). Cranney (2015) also found that a larger proportion of freshmen have been a victim of sexual violence while they were freshmen than any other school year.

Numerous interventions to reduce the occurrence of sexual assault have been previously tested on college campuses. The seminal intervention program, *Bringing in the Bystander*, was one of the first to focus on bystander intervention training for the prevention of sexual assault. *Bringing in the Bystander* is an in-person, 90-minute, workshop that demonstrates how bystanders can safely intervene in situations where sexual violence may be occurring or situations that could lead to potential sexual violence. The results throughout multiple iterations have shown the program to increase knowledge about sexual assault, increase bystander efficacy and decrease RMA among men and women (Amar, Tuccinardi, Heislein, & Simpson, 2015; Banyard, Moynihan, & Crossman, 2009; Senn & Forrest, 2016). The *Sexual Assault Prevention Program*, one of the first to ever be implemented on college campuses, incorporates social norms and bystander intervention education in single-sex cohorts

(Hanson & Gidycz, 1993). When the program was administered to its first cohort of women, it was not effective in decreasing the incidence of sexual assault for women with a sexual assault history, but did decrease the incidence of sexual assault for women without a sexual assault history (Hanson & Gidycz, 1993). Subsequent administrations have found that the *Sexual Assault Behavior Program* had positive effects on self-reported sexual aggression in males and increase men's belief that their peers would intervene if they were to encounter a situation where sexual violence could occur (Gidycz, Orchowski, & Berkowitz, 2011). Other more recent interventions designed to reduce sexual assault on college campuses include *Real Consent*, the SAFE Program, and the Social Norms intervention (Orchowski et al., 2018; Salazar, Vivolo-Kantor, Hardin, & Berkowitz, 2014; Zounlome & Wong, 2018). While these programs have yet to be replicated over time, they also show promising potential to reduce sexual violence on college campuses.

While there has been substantial literature published around interventions for sexual assault whose aims are to change skills or knowledge, research has seldom explored the underlying attitudes and beliefs that contribute to the prevalence of sexual assault on campuses. Two recent studies found that self-reported physical aggression was positively associated with RMA among male students (Bhogal & Corbett, 2016; Nunes et al., 2013). Warren and colleagues (2015) similarly found that RMA had positive correlations to perpetration of sexual aggression, but also found that a conformity to norms of masculinity and peer support of abuse were also notable factors. Burgess (2007) found five attitudes and beliefs associated with acceptance of sexually aggressive behavior including self-justification due to women's provocative

behaviors, attitudes that women should take more responsibility for their sexual assault, the need for sexual status among peers, approval of the use of alcohol coercion in sexual conquests, and traditional norms of masculinity and a rejection of feminine behaviors. A more recent study found that the need to display “playboy” behavior, the desire for dominance over women, and enjoyment of pornography were also associated with men who reported negative sexual attitudes and behaviors toward women (Mikorski & Szymanski, 2017). These studies recommended further exploration into how these attitudes and beliefs could be better incorporated into current sexual assault interventions in order to increase their effectiveness, challenging the idea that only basic knowledge needs to be increased to reduce sexual assault on college campuses.

Research Questions

The main questions to be examined in this research are:

Research Question 1: Does a negative correlation exist between hypermasculine attitudes and rape myth acceptance among undergraduate males?

Research Question 2: Do men who score higher on hypermasculinity inventories differ in their beliefs, attitudes, or norms regarding sexual consent than those with lower reported levels of hypermasculinity?

Research Question 3: How do different motivations for participating in hook-up culture relate to hypermasculine attitudes and rape myth acceptance?

Research Question 4: Does group affiliation have positive or negative associations with hypermasculinity, rape myth acceptance, and sexual consent attitudes?

Research Question 5: Does the need for social acceptance and comparison with peers differ between men with higher reported levels of hypermasculinity than those with lower reported levels?

Definition of Terms

Bystander Intervention – A reactive and community-oriented prevention strategy for reducing the incidence of sexual assault that underscores the belief that sexual assault is a community issue in which any individual can intervene before, during, or after a sexual assault occurs” (Banyard et al., 2004; McMahon, 2015).

Emerging Adulthood – A stage of development proposed by Arnett (2000) that falls between adolescence and young adulthood, spanning the late teens through the twenties, primarily focusing on ages 18 to 25.

Hegemonic Masculinity – An idealized version of masculinity at a particular place and time within a society or culture (Connell, 2005).

Hook-up – A physically or sexually intimate encounter, with behaviors extending from kissing to intercourse that occurs without the expectation of future physical encounters or a committed relationship (Owen et al., 2010).

Hypermasculinity – “A construct describing men who exhibit an exaggeration of the traditional male gender role, including: a) characteristics such as a supervaluation of competitive, aggressive activities and devaluation of cooperative, care-taking activities; b) status and self-reliance are highly valued; c) interpersonal violence, dominance of others and sensation-seeking behavior are perceived as necessary to maleness; and d) women are seen predominantly as sexual objects or conquests” (Burk, Burkhart, & Sikorski, 2004, p. 5).

Precarious Manhood – A theory that posits that manhood is a “precarious social status that is hard won and easily lost, and requires continual public demonstrations of proof” (Vandello & Bosson, 2013, p.101) in order to obtain and maintain a sufficient social status of manliness.

Rape Myths/Rape Myth Acceptance – Conscious or subconscious beliefs, formed through preconceived prejudices, which lead individuals to justify or refute sexual violence. Acceptance of rape myths create hostile environments that restrict what incidences of sexual violence can be considered rape by perpetrators, victims, or outside entities (Burt, 1980; McMahon & Farmer, 2011).

Sexual assault – a “full range of forced sexual acts including physically forced kissing or touching, verbally coerced sexual intercourse, and physically forced vaginal, oral, and anal penetration” (Abbey et al., 2004, p. 2).

Sexual consent – “a deliberate, voluntary, and affirmatively communicated willingness to participate in a specific sexual act or behavior that may be expressed either through verbal or non-verbal means, which create a mutual understanding to engage in specific sexual activity” (Office of Civil Rights & Sexual Misconduct at the University of Maryland, 2016).

Study Significance

The current study aims to understand underlying attitudinal factors that may be contributing to the prevalence of sexual assault on college campuses. There is a significant gap in the literature regarding the effect of masculine attitudes and hypermasculinity on sexual assault. The majority of current literature approaches sexual assault prevention from a change in action standpoint, whether related to reducing alcohol consumption/substance use, implementing safety precautions for students who are involved in high-risk environments such as binge drinking events, and bystander intervention programs. Specifically, while previous literature has largely investigated how a lack of knowledge may be an intervention point for college students, this study will look at whether interventions should consider targeting conforming to masculine norms and/or hypermasculine attitudes to reduce men’s sexual violence against women. Hayes-Smith and Levett (2010) found that sexual assault education and knowledge of resources did not lead to a reduced endorsement of rape myths among both male and female criminology students at a large, public university. A more recent study found that students who had received sexual assault prevention education did not report a lower acceptance of rape myths compared with a college with no programming, thus demonstrating the current ineffectuality of

current programming on changing negative attitudes about sexual assault (Hayes et al., 2016).

Institutions of higher education face many barriers when it comes to sexual assault prevention, such as insufficient resources and limited data regarding the severity of the issue on their individual campuses (Winerman, 2018). A recent study by Lund and Thomas (2015) found that while a large majority of universities have websites that provide information about university policies related to sexual assault (88.2%) and how to report to law enforcement (72.2%), far fewer (43.3%) mentioned sexual assault prevention or education for the university community. A recent study found that a university's attempt at education through mandatory online sexual assault prevention trainings was viewed as ineffective, impersonal, and incomprehensive (Hubach et al., 2019). Given the limited resources that universities often have for sexual assault prevention, more knowledge regarding the effect attitudes can have on the potential for a male student to commit sexual violence could better focus sexual assault prevention resources to those issues that will have the most overarching influence on the reduction of sexual assault.

Chapter 2: Background

Sexual Assault in U.S. Colleges

It is well documented in current literature and news media that sexual assault is a ubiquitous issue on college campuses in the United States. Since researchers began regularly tracking the incidence of sexual assault around thirty years ago, the rate of sexual assaults on college campuses is consistently reported at approximately 1 in 5 women (Fisher et al., 2000; Himelein, 1995; Koss et al., 1987; Krebs et al., 2009). However, in more recent studies, the rate has been reported to be as high as 30% (Cantor et al., 2015). A recent study found that college students desire more information about sexual education and sexual assault prevention and that the traditional methods for delivering this information, such as the use of pamphlets or university websites, is not effective (Garcia, Lechner, Frerich, Lust, & Eisenberg, 2012). Sexual assault and safe sexual practice education at institutions of higher education is important, given that the quality of sex education prior to university enrollment is dependent on where the student attended high school, and has been shown to not prepare students adequately upon arrival at their universities (Pound, Langford, & Campbell, 2016). Despite the ongoing significance of sexual assault as a public health issue on college campuses, recent studies demonstrate that many universities fail to adequately provide education and resources regarding policies and procedures for victims (Richards, 2019) and attempts to educate students about sexual assault and consent are not meeting students' needs (Hubach et al., 2019). Based on these findings, it is not surprising that women report feeling afraid to attend

universities due to the potential to be a victim of sexual assault (Ablaza, 2016). Also not unexpected is that media outlets such as the *Washington Post* have previously published the annual numbers of reported sexual assaults at popular college campuses in order to inform the public about this pervasive public health issue (Anderson, 2016).

Consequences of Sexual Assault and Current Interventions

There are significant and enduring consequences to survivors' health and well-being following a sexual assault. Dworkin, Menon, Bystrynski, and Allen (2017) conducted a meta-analysis of 2,813 published studies about sexual assault and found that sexual assault was associated with increased risk for all forms of psychopathology assessed including anxiety, depression, disordered eating, obsessive-compulsive conditions, and substance abuse and dependence, and even stronger associations were found for posttraumatic stress and suicidality. Similarly, another recent study involving first-semester female students (n= 483) found that after controlling for previous mental health and pre-college sexual assault history, those students who reported experiencing sexual assault during their first semester of college showed clinically significant levels of anxiety and depression at the conclusion of their first semester (Carey et al., 2018). Students who are sexually assaulted during college are also at a higher risk for future assaults (Littleton et al., 2009).

Students who experience sexual assault also face numerous academic and social life challenges both during and after their college completion. Students who were sexually assaulted in college reported negative academic and social

consequences such as: a) difficulty resuming student life as it was prior to the assault; b) academic challenges such as measurable declines in grade point average, increases in absenteeism; and c) lost confidence in their academic abilities, and avoidance of social gatherings and activities (Baker et al., 2016; Potter et al., 2018). Sexual assaults that occur during college can have effects beyond students' college careers, and can affect their futures. Potter et al. (2018) found that students who experienced sexual assault in college delayed entering the job market after graduation, were less able to achieve their career goals and perform competently in the workplace, and limited their job opportunities due to fear of feeling unsafe or vulnerable. Sexual assault victims also report an inability to have future intimate connections with other partners, especially those experiencing higher levels of shame, guilt or fear (van Berlo & Ensink, 2000).

Despite the numerous sexual assault interventions that have been employed by colleges and universities across the U.S., the research on long-term effectiveness of these interventions leaves significant room for improvement. In two reviews of the efforts made by college campuses to prevent sexual violence against women, researchers have found that while interventions use different theoretical models of health behavior to affect attitudinal changes of issues related to sexual assault, the larger community-wide changes that are necessary to reduce the prevalence of sexual violence were not found (Banyard, 2014; Casey & Lindhorst, 2009). Another factor surrounding the effectiveness of sexual assault interventions are the age of the recipients. Many of these interventions are focused on bystander intervention practices, or programs that teach students how to intervene in risky situations where a

sexual assault could potentially occur. Kettrey and Marx (2019) found when reviewing 151 published reports on bystander programs that while these programs can have positive effects on efficacy, intention and intervention, they had significantly stronger effects with those students who were in their first two years of college in comparison to those in their third year or later. The efficacy of bystander programs can also be affected by other characteristics of those receiving the programming, as Hines and Palm Reed (2015) found that those students who were at the highest risk for experiencing or perpetrating sexual assault demonstrated the most significant improvement over a 6-month period. Not all reviews of sexual assault interventions have been as promising. DeGue and colleagues review of outcome evaluations of prevention programs (n= 140) found that a mere 2.1% of interventions were characterized as being effective for changing behaviors related to sexual violence, while another 6.4% were found not to be effective, and 2.1% provided evidence that the programs had a negative or destructive impact on those who participated (DeGue et al., 2014). The largest majority of the evaluations reviewed (77.1%) did not provide sufficient evidence either way in regards to their overall effectiveness in the prevention of sexual assault (DeGue et al., 2014). This lack of effectiveness in sexual violence prevention may be due to the focus of these interventions. Edwards, Shea, and Barboza Barela (2018) noted that institutions of higher education often focus their prevention efforts on the response and resources for students after a sexual assault has already occurred, rather than strategies for the elimination of sexual violence altogether.

Rape Myth Acceptance

The concepts of *rape myths* and *rape myth acceptance (RMA)* were first described in detail in 1980 by Martha Burt, who defined RMA as “prejudicial, stereotyped, or false beliefs about rape, rape victims and rapists – in creating a climate hostile to rape victims” (Burt, 1980). Some of the rape myths first described by Burt highlighted the ideas that only “loose” women are raped, women can resist sexual advances if they truly wanted to, and women only say they are raped when they are upset or want revenge (Burt, 1980). These rape myths are not only untrue, but propagate society’s misunderstanding of the numerous factors that contribute to sexual assault and the acute and detrimental effects it causes to its victims (Lutz-Zois et al., 2015). One of the most troubling aspects of rape myths is they allow victims and perpetrators to place the blame on the victim for the assault, allowing victims to convince themselves they will not be believed or supported if they report their assault. Researchers found that those who do not ascribe to rape myths or hold attitudes of blame towards victims of sexual assault are more likely to show empathy toward those who are assaulted, which could increase the reporting rate of sexual violence in the future (Bhogal & Corbett, 2016).

It is important to note that rape myths are not only perpetuated by men, but also by women. Some studies have shown that men are more likely than women to support RMA beliefs and attitudes, but numerous other studies have shown there is no difference in genders when examining RMA (Aronowitz et al., 2012; Davies et al., 2012; McMahon & Farmer, 2011; Russell & Hand, 2017). Researchers have demonstrated significant rates of RMA among people and professions who are tasked

with defending and helping survivors of rape and sexual assault, including law enforcement (Hine & Murphy, 2019), religious leaders and clerics (Sheldon & Parent, 2002), medical and health care professionals (Ullman & Townsend, 2007), and those in legal systems (Eyssel & Bohner, 2011; Sommer et al., 2016; Wenger & Bornstein, 2006). Also, news outlets and media are notorious for using RMA rhetoric when reporting crimes of sexual violence (Bonnes, 2013; O'Hara, 2012; Worthington, 2005), with one recent study demonstrating that tweets that utilized more RMA were retweeted by more Twitter users than those who did not use RMA-based language or phrases (Stubbs-Richardson et al., 2018). During the infamous Kobe Bryant rape case, Franiuk and her colleagues (2008) conducted two studies that investigated the frequency of RMA in news stories about the case, as well as its effects on the general public. In Study 1, researchers examined 156 news sources and found that 65 had at least one rape myth in the article (Franiuk et al., 2008). In Study 2, researchers found that participants (n= 62) who viewed an article about the Bryant case that employed rape myths were more likely to assume Bryant was innocent and that the victim of the assault was lying (Franiuk et al., 2008), thus demonstrating the potential for media to sway public opinion about sexual violence. Additionally, there are numerous recent studies that have shown that RMA has negative associations with bystander intervention attitudes and intentions (Burn, 2009; Hust et al., 2019; Powers et al., 2015).

Greek Life and Athletics

Two subsets within college populations that have been a primary focus of sexual violence research are students involved in Greek life and athletics. Wiersma-

Mosley, Jozkowski, and Martinez (2017) analyzed data reported by the U.S. Office of Education and the Clery Act in 2014 (n= 1,423) and found that public universities with a greater number of male students involved in fraternities and sports were more likely to report rapes on their campuses. Murnen and Kohlman (2007) conducted a meta-analysis of 29 studies and found that men who are members of fraternities or college athletic teams are more likely to engage in sexually aggressive behaviors and support rape myths. As noted in Chapter 1, numerous studies have cited strong correlations between rape myth acceptance (RMA) and sexual assault, which is prevalent among Greek and athlete populations (McMahon, 2010). One of the first studies to specifically look at the association between RMA and these groups was Boeringer (1999), who found that out of 25 statements that were supportive of RMA, members of frats showed significant agreement on five statements, and athletes agreed to fourteen of the statements. This was later supported by Sawyer et al. (2002) who also identified higher rates of RMA in male athletes, especially those in their first or second year, competing at the Division I level, and those involved in a team sport. Fraternity men (n= 60) were also shown to have significantly higher scores on a RMA scale in Bleecker and Murnen's study (2005).

Humphrey (2000) concluded that athletes and fraternity members engaging in high-risk behaviors such as binge drinking and drug use reported significantly higher levels of sexual aggression and hostility toward women, as well as peer support for sexual violence from other men within their groups, in comparison to those in low-risk behavior groups who do not engage in these risky behaviors. Martin (2016) believes that students involved in Greek life and athletics are more prone to engage in

sexual violence due to both internal and external factors in institutions of higher education that gives privilege to students involved in these groups. Martin called one of these factors *political economy*, described as conflicting priorities that allow sexual assault by certain groups to occur due to the prestige they contribute through means such as financial status or athletic competition. A recent report from ESPN's *Outside the Lines* supports this argument as the report found that student athletes were three times more likely to be named in Title IX sexual assault complaints than non-student athletes at the "Power 5" conference schools (Atlantic Coast Conference, Big Ten Conference, Big 12 Conference, Pac-12 Conference, and Southeastern Conference) (Lavigne, 2018). Michael Kimmel, a prominent researcher in the area of masculinity and related risky behaviors, found similar evidence for this "culture of entitlement" when interviewing college men involved in fraternities and athletics. He posits that athletes or fraternity members are not more inclined to sexual violence because they are involved in fraternities or sports, but because their involvement in these organizations gives them an elite status on campus that creates significant privilege as well as a tight bond of brotherhood. He writes in *Guyland* (2008): "Nowhere is brotherhood more intense, the bonding more intimate and powerful, or the culture of protection more evident than among athletes and fraternity members. Greeks and jocks live at the epicenter of Guyland."

Research indicates that sexual assault is not only committed at higher rates by those involved in fraternities, but also occurs at increased rates during fraternity parties and events. Fraternity events provide ample opportunity and a conducive environment for behaviors associated with an increased risk for sexual assault,

especially binge drinking. The seminal study from Abbey and colleagues (2004) found that alcohol consumption can considerably increase one's risk to perpetrate sexual assault due to its effects on cognitive and motor skills, which can limit one's ability to comprehend both verbal and non-verbal behaviors. Additionally, Abbey et al. (2004) found that a perpetrator's views regarding the effect of alcohol on women can lead to an increase in cognitive distortions, which enforces the belief that a woman wants to have sex or that women who consume alcohol are more sexually aroused regardless of other signs of communication.

Fraternity events also increase the availability of alcohol for students who are underage, providing them opportunities to drink that are otherwise significantly limited, leading to an increased risk for sexual assault (Armstrong et al., 2006). Another study conducted by Minow and Einolf (2009) (n= 779) found that 32% of rapes reported by students at a mid-size public university occurred in a fraternity house and that women involved in sororities were four times more likely to report being sexually assaulted than students who were not members of sororities. Men involved in fraternities also have increased status on college campuses, which researchers have found can affect the way in which men and women assume gender roles at Greek-life events. Researchers have found that when attending fraternity events, men and women are more likely to accept traditional sex roles of dominant men and submissive women, due to the intense desire for social inclusion and status (DeSantis, 2007; Harris & Schmalz, 2016). This inclusion and status among fraternities is often obtained through heavy drinking and hooking-up. Harris and Schmalz (2016) found through their interviews that many women would rather

participate in this dangerous culture, rather than potentially face ostracism and a lack of acceptance from those males with increased status on campus, thus becoming “co-constructors of their own oppression.”

As with Greek life, athletes are disproportionately represented as perpetrators of sexual assault in reports on college campuses. One of the first studies of athletes and sexual violence found 19% of college sexual assaults were committed by men in athletics. This number is staggering considering that only 3% of college students participate in collegiate athletics. (Crosset, Benedict, & McDonald, 1995). A recent survey study (n = 12,624) by Foubert and colleagues (2019) noted a significant relationship between having taken advantage of someone sexually while under the influence of alcohol and participation in campus athletics. McCray (2015) hypothesized five major factors as to why athletes are more prone to commit sexual violence: (1) male bonding; (2) sport as a masculine-proving ground; (3) combative sports and violence; (4) the athletic justice system; and (5) big man on campus syndrome (Melnick, 1992). This big man on campus syndrome, which Kimmel (2008) called “jockocracy,” causes athletes to feel entitled to special treatment in classes, among peers, and from women, because from their initial day on campus, they are treated as though they are above the rules that apply to other students. Given the association between athletic status on campus and sexual assault, it is not surprising that when Stotzer and MacCartney (2016) surveyed NCAA athletes, athletic division emerged as statistically significant; the number of reported sexual assaults increased as the NCAA Division became more elite, in comparison with institutions that did not have NCAA athletic programs.

Affirmative Consent

The limited amount of research on affirmative consent is concerning, given that whether consent was given is typically the deciding factor in the majority of sexual assault cases on college campuses (Jozkowski, 2015). Affirmative consent is indicative of the “yes means yes” standard and those who wish to engage in sexual activity with another person must obtain an affirmative declaration and unequivocal “yes” to sexual activity in order for it to be considered consensual. This consent also relies on both parties being explicit in their communication of consent as well as responsive and respectful to refusals of sexual activity (Jozkowski, 2015; Schulhofer, 2016). Two of the first studies that investigated the concept of consent found that verbal consent was more likely to be used to communicate consent for intercourse and non-verbal cues were used for consent for sexual touching (Hall, 1998; Hickman & Muehlenhard, 1999).

Additionally, researchers found that people do not typically consent for all unique sexual activities in sequence, thus many sexual activities advance without explicit consent to continue a different sexual activity (Hall, 1998). Recent research with undergraduate men (n= 370) found that men who responded positively to statements of RMA and token resistance, a no means yes interpretation of consent, scored poorer on the interpretation of consent in various sexual scenarios than those who felt competent in clearly communicating consent with a sexual partner (Shafer et al., 2018). Other research has demonstrated that college students often confuse communication cues that may signal a likelihood of future consent with signals of actual consent (Muehlenhard et al., 2016). Alcohol consumption has also been shown

to reduce the negotiation of consent in sexual situations and reduces one's ability to correctly interpret indications of consent (Davis et al., 2004; Scott & Graves, 2017).

Scholars have cited that while there are prevention programs on college campuses that explain the importance of consent, these programs often have glaring flaws. Jozkowski (2015) found that one of the most troubling aspects of many sexual assault education and prevention programs is that the prevention burden is continually placed on the female participant to adequately communicate consent by being more assertive and by educating herself and her friends to learn how to intervene through bystander intervention techniques. Though the education programs have valid information and practices for students, this framing reduces the focus on those who perpetrate assault and continues to promote victim blaming on women (Freitas, 2018). Additionally, many of the prevention programs do not address the obvious gender imbalances that exist in heterosexual hookups and the culture that is perpetuated on campuses, that women who say no to a sexual advance must have a valid excuse for doing so, to avoid appearing rude and offending the male partner (Burkett & Hamilton, 2012; Freitas, 2018).

Many misconceptions about women and consent exist in college culture, which leads to continued perpetuation of RMA and sexual assault. First, research has shown that many college men believe that most women want to engage in sexual activity, but will say no in order to maintain their reputation (Muehlenhard, 2011). Another misconception is that if a woman simply had expressed no to sexual activity, they would not have been assaulted. A recent study by Cook and Messman-Moore (2018) found that out of 262 women in college who had been sexually assaulted, 81%

of them verbally expressed their lack of consent. Early research around sexual assault noted that women who actively resisted their attacker through either physical means or by running away, would be less likely to have their assault escalate into a completed rape in comparison with those who passively resist (Zoucha-Jensen & Coyne, 1993). However, more recent research also shows that only one out of four women will utilize these active and physical resistance techniques during a potential assault (Ullman, 2007) and those who do physically resist are more likely to be injured during the assault (Wong & Balemba, 2016). Navigating healthy sexual communication in an unhealthy sexual culture on college campuses continues to have negative effects on women who are assaulted, perpetuating the idea that if a woman does not do enough to prevent her assault, she is somehow to blame. This belief can have significant effects on female victims to internalize guilt and shame about their assaults, continue to promote token resistance culture, and result in non-reporting (Jozkowski, 2015). The confusion surrounding consent, how to obtain consent, what constitutes consent, and whether students are adequately equipped to give and receive consent continue to be significant elements in the issue of sexual assault on college campuses.

Masculinity in College

Research on the construct of masculinity has been well documented and examined through a variety of perspectives. Seminal research by Mahalik and colleagues (2003) identified the following norms that are significant to masculinity in contemporary U.S. culture: success or “winning at all costs,” sexual aptitude or “being a playboy,” control over one’s emotions, willingness to engage in risky

behaviors, displays of physical aggression, demonstrations of dominance, self-sufficiency or “self-reliance,” emphasizing career or work as a top priority, control of women, rejection of behaviors perceived as gay or feminine, and the desire for social status. While these characteristics are not inherently positive or negative when examined individually, researchers argue that it is the pressure placed on men to conform to these norms that can lead to negative consequences. In his formative work, *The Myth of Masculinity*, Pleck (1981) defines what he calls the *Gender Role Strain Paradigm*, which argues that genders are strictly defined by certain stereotypes or categories that are created based on what a society deems as ideal. As men mature, they acquire insight through social interactions regarding whether they are appropriately conforming to this role through either reward or punishment by their peers, which can cause physical and mental health issues for those who cannot conform (Pleck, 1981). Another popular concept of masculinity is *Hegemonic Masculinity*, defined as the “idealized form of masculinity at a given place and time in society” (Connell, 2005). Hegemonic masculinity is the dominant, culturally acceptable form of masculinity that instructs men how to behave and interact with women and other men, representing their status and power among their peers (Connell, 2005). According to Connell, hegemonic masculinity in the U.S. is represented by white, cisgender, heterosexual men who have achieved high socioeconomic status and advanced education. Given that not all men in American society fit into this tightly defined paradigm, the struggle for achieving this perceived ideal masculinity remains a significant issue for American men today, especially men

of color (Griffith et al., 2012), transgender men (Vries, 2012), and gay men (Connell & Messerschmidt, 2005).

The pressures to display and perform idealized versions of masculinity have significant effects on men's health and wellness. Courtenay (2000) describes how men are displaying unhealthy forms of masculinity when they neglect their health in order to maintain an appearance of strength, drive while under the influence, or take part in risky activities; all of these actions are "like badges of honor" going against positive and healthy behaviors. This neglecting of health in order to maintain masculinity is seen most often in regards to psychological health. In a study of 137 college men, those who reported the greatest need to conform to masculine ideals also reported the most negative attitudes regarding seeking mental health care (Levant et al., 2009). Idealized masculinity enforces the idea that reliance on others, showing weakness, or not enduring pain silently is feminine and thus, many men do not receive needed mental health treatment (O'Brien et al., 2007; Tang et al., 2014). Pressure to conform to hegemonic masculine ideals can also lead to significant issues with self-worth, as men report feeling unmanly or that they must "put on a mask" when they do not meet societal expectations (Edwards & Jones, 2009) or must repress emotions that go against masculine norms (Green & Addis, 2012). Specifically in college populations, a recent qualitative study by Foste and Davis (2018) found that undergraduate males identified the harmful behaviors of excessive drinking, having many sexual experiences, and nullifying any feelings or vulnerability were associated with the ideal expectations of college men.

Masculinity and Sex

Sex is one of the most defining elements of masculinity among men in college, due to the numerous masculine norms that it encompasses such as social status, control over women, winning, and dominance. In a recent qualitative study by Fleming and Davis (2018), freshman males cited having sex as a source of status or accomplishment among their peers and that those who are not having sex are often “virgin-shamed.” Virgin shaming is used not only to bolster one’s own feeling of masculinity, but to embarrass other men and create pressure to engage in sexual activity in order to achieve masculinity (Fleming & Davis, 2018). Sex is also a significant source for male bonding and camaraderie among college males, which Kimmel (2008) argues is often more important than the pleasure of sex itself. One student he interviewed stated regarding sex, “When I’ve just got laid, the first thing I think about...before I’ve even like finished- is that I can’t wait to tell my crew who I just did” (Kimmel, 2008, p. 206). Kimmel also found through his interviews that insecurity is often a notable driving force for seeking frequent sexual encounters among college-aged men, as they believe that their peers are engaging in more sex than they are, which in turn creates insecurity (Kimmel, 2008, p. 207).

Researchers have noted numerous associations between college men’s unhealthy masculine attitudes and their effect on sexual behaviors. In a sample of 264 college-aged men, over 90% reported they have used sexually aggressive strategies against women when at a bar or a party and researchers found that these behaviors were considered normal for college men in these environments (Thompson & Cracco, 2008). Additionally, researchers found that when controlling for other factors, men

who scored higher on measures regarding how positively they view masculine traits (e.g. assertiveness, dominance, and risk-taking behaviors) were more likely to engage in aggressive behavior toward women (Thompson & Cracco, 2008). A more recent study by Mikorski and Szymanski (2017) found numerous correlations between masculine ideologies; the use of pornography and Facebook, associating with male peers who engage in abusive behaviors, and those who normalize violence and dominance over women are all predictors for objectification and sexually aggressive behaviors toward women. Other behaviors that have been linked to sexually aggressive or abusive behaviors toward women include regular pornography viewing (Borgogna et al., 2019), use of coercion/need for dominance over an intimate partner (R. M. Smith et al., 2015), and aversion to displays of emotion (Obierefu & Ojedokun, 2019).

Researchers have also found numerous relationships between masculine attitudes and beliefs and risky behaviors in men attending college. Giaccardi and colleagues (2017) surveyed 449 undergraduate males and found that men scoring higher on measures of masculine ideology were more likely to participate in unsafe sexual behaviors, alcohol/drug use, and risky driving behaviors. In a similar study, researchers surveyed 776 undergraduate males and found that men who scored higher on questions related to risk-taking behaviors were more likely to drink to intoxication as well as be at greater risk for alcohol-related health problems, even when controlling for factors associated with increased alcohol consumption such as fraternity affiliation (Iwamoto et al., 2011).

Alcohol use and hegemonic masculinity have also been found to be uniquely linked among college-aged men. One study found that drinking is a form of “liquid bonding” that allows men to display their level of masculinity to their peers (Sasso, 2015), while another study found that men build their persona of masculinity around stories about their personal drunken experiences and their ability to drink significant amounts of alcohol (Peralta, 2007). Masculinity and the norm of aggression has also been positively associated with heavy alcohol use and the probability of responding with physical aggression when provoked in a social setting, showing that those college men who report wanting high approval from their peers are more likely to act aggressively and drink heavily (Dumas et al., 2015). Researchers have also linked harmful health practices to masculinity, as Walsh and Stock (2012) found that men who scored higher on masculinity inventories also reported using less sunscreen. All of these studies establish a pattern that college aged men who place high value on their perceived masculinity are likely to partake in risky and unhealthy behaviors.

Theory of Emerging Adulthood

The Theory of Emerging Adulthood was developed through elaboration of other theoretical constructs previously proposed by Erikson (1968), Levinson (1978), and Keniston (1971). Erik Erikson, considered one of the founders of the study of human development, was one of the first scholars to propose a lifetime model of human development that marked eight unique stages of psychological and social development (Erikson, 1968). Erikson proposed that a person will encounter some sort of conflict or crisis of identity during each stage and must resolve each conflict in order to continue past the current stage of development (Erikson, 1968; Sokol, 2009).

Applying Erikson's theory to today's population, Erikson would have placed the majority of college-aged men under the stage of adolescence (ages 12-24). Daniel Levinson's Seasons of Life Theory, identified the ages of 17-33 as the "novice phase of development" whose main goal is to successfully transition into adulthood (Levinson, 1978). Levinson noted that this season is unique to human development as persons in this stage must deal with many moments of instability, caused by the need to make choices surrounding romantic relationships, career prospects, and education, on which someone builds upon for the rest of their life (Levinson, 1978). Kenneth Keniston was one of the first theorists to denote adults ages 18-25 as a separate stage of development, unique from adolescence and full adulthood, which he termed as "youth" (Keniston, 1971). Keniston theorizes that the period of development of youth emerged as a separate developmental stage due to the increase of prosperity in Western civilization, with increased emphasis on higher education, political movements, and youth culture (Keniston, 1971). However, the term "youth" was so ambiguously defined that Keniston's youth stage was never widely accepted by other developmental scientists (Arnett, 2000).

The Theory of Emerging Adulthood was created by psychologist Jeffery Arnett and specifically identifies the period of emerging adulthood in industrialized societies as unique from all other developmental stages due to delays in marriage and parenthood and the change of primary focus to self-discovery and experimentation (Arnett, 2000; Arnett et al., 2011). Arnett specifically posits that emerging adulthood must be treated as a separate developmental stage from adolescence and adulthood as "emerging adults do not see themselves as adolescents, but many of them also do not

see themselves entirely as adults” (Arnett, 2000, p. 471). In the U.S., people in the emerging adulthood stage use this period of time to focus on their personal development through exploring their own identity and experiencing instability due to numerous life choices and changes, and are found to be generally hopeful about the various possibilities that life will present to them in adulthood (Arnett, 2004). Arnett also notes that a considerable change between previous theories is that while people in this life stage are focused on important steps toward reaching adulthood such as accepting personal responsibility for their own choices and making decisions independent of familial influences, completing education, selecting a career, and entering into marriage/selecting a life partner typically rank at the bottom of what people ages 18-29 identify as important for attainment of adulthood (Arnett, 1997, 1998). Emerging adults experience more psychiatric disorders in one year than during any other developmental stage with anxiety (22.3%), substance use disorders (22%) and mood disorders (12.9%) being the most prevalent (Kessler et al., 2005). Friendships also tend to peak in importance during this life stage, as familial influences tend to inhibit emerging adult’s ability to experiment and explore (Arnett, 2000; Arnett et al., 2011)

In regards to romantic and sexual experiences, emerging adults see this as a time for exploration and gaining experiences with multiple partners, as this is now possible with a decrease in parental surveillance and a societal reduction in pressure to enter into marriage or a long-term relationship (Arnett, 2000). Arnett (2000) also notes that emerging adulthood is the stage of development where risky behaviors such as unprotected sex, substance use, and unsafe/drunk driving reach an apex, which he

has found is typically driven by emerging adults' need for experiencing intense emotions and pushing boundaries. Researchers have found that casual sex is quite prevalent in this life stage, as 40% of emerging adults who were 22 years old had a recent sexual partner with whom they were not currently engaged in a committed relationship (Lyons et al., 2015). Additionally, researchers found that in particular for men in this stage, those who regularly engaged in casual sex also had friends who were doing the same, in a sense both supporting and enforcing the practice (Lyons et al., 2015).

There are also associations between emerging adulthood and hook-up culture, as James-Kangal and colleagues (2018) investigated whether there are changes in beliefs and attitudes in marriage/long-term relationships among those who are currently in the emerging adulthood stage. After surveying 248 emerging adults, researchers found that one's engagement in hook-up culture was not linked to a devaluation in future marriage or long-term relationship prospects, thus suggesting that hook-up culture may be specific to experiences in this life stage that do not carry over or effect future life stages (James-Kangal et al., 2018).

Precarious Manhood Theory

Precarious Manhood Theory (PMT), developed by Joseph A. Vandello and Jennifer K. Bosson, was developed out of numerous masculinity theories with a psychological and sociological basis (Eisler & Skidmore, 1987; Herek, 1986; M. S. Kimmel, 1997, 2006; Levant 1996; O'Neil et al., 1986; Pleck, 1981, 1995). Vandello and Bosson (2013) theorize that the gender role of men can be problematic during men's life course and cause significant anxiety and distress that can influence

behavior and attitudes. They argue that men can find overcoming obstacles and inadequacies particularly difficult if they are unable to display a “necessary and sufficient” amount of masculinity in both their external behavior and their internal character (Vandello & Bosson, 2013). PMT also has origins in anthropological studies of men and masculinity around the world (Gilmore, 1990). Prior to the emergence of industrialized societies, manhood was often achieved through performance in official rituals and feats of physical strength and endurance (Vandello & Bosson, 2013). In contemporary society, men are still expected to earn or achieve their masculinity, but are not provided with an official and tangible mechanism to demonstrate this to their peers and elders, which leads to feelings of uncertainty and anxiety regarding whether or not they have adequately demonstrated their manliness in order to attain real manhood (Gilmore, 1990; Vandello & Bosson, 2013). Kimmel (2006) supports this assertion noting that while the concept of manhood and masculinity changes with time and cultures, the primary need to prove or earn one’s manliness is ever-present.

There are three basic tenets of PMT: 1) manhood is viewed as being an elusive, achieved status or one that must be earned; 2) once achieved, manhood continues to be tenuous and impermanent, meaning it can be lost or taken away; and 3) manhood is confirmed primarily by others and thus requires evidential, public demonstrations (Vandello et al., 2008; Vandello & Bosson, 2013). This theory posits that because of the precarious nature of masculinity, or threats to their masculinity, men experience regular stress and anxiety about the status of their manliness, far

more than woman, due to the feeling that it is perpetually threatened or could be lost (Vandello et al., 2008; Vandello & Bosson, 2013).

Researchers have investigated this idea in multiple studies and overall, the theory has been well supported. In two similar studies (n= 193 and n= 450), men were provided with fabricated comments about whether they possessed greater or lesser amounts of masculinity than the average male (Frederick et al., 2017). After the feedback, men were asked to provide the amount of weight they could lift in various formats; those who received feedback that they were less masculine than the average man reported that they could lift more weight than those who received neutral or positive feedback (Frederick et al., 2017). PMT also theorizes that men will often exhibit behaviors that will demonstrate or reestablish their manhood following the threat of a loss of manliness, by engaging in risky or aggressive behaviors (Vandello & Bosson, 2013). In a recent online study (n=600), researchers found that men who reported they felt less masculine than the average man and expressed stress due to their perceived lack of masculinity were more likely to engage in high-risk sexual behavior and reported more diagnosed sexually transmitted diseases (Reidy et al., 2016). Research has also shown that men who feel less secure in their masculinity feel the need to avoid femininity in appearance, personality or behaviors (O'Connor et al., 2017; Weaver et al., 2010).

Chapter 3: Methods

Study Design

In order to study rape myth acceptance, sexual consent attitudes and norms, hook-up culture norms, social inclusion and its relationship to hypermasculinity, I administered a one-time, online survey hosted on the Qualtrics platform; these collected, quantitative data were then analyzed using multiple statistical methods. Prior to commencing any research, I sought approval from the Institutional Review Board, receiving approval under an expedited review with no more than minimal risks to participants. In order to recruit participants, a variety of recruitment methods were employed including sending emails through listservs that included numerous subscribers from the targeted population and posting electronic announcements through PowerPoint slides in large, undergraduate classes, when permitted by the instructor (Appendix A). The methods of in-person recruitment in classrooms and posting flyers around high foot-trafficked areas of campus were not utilized due to the shutdown of campus and all in-person instruction because of the COVID-19 pandemic. Despite significant efforts to increase enrollment, including sending over 120 emails via campus listservs and student groups, using PowerPoint announcements in classes of over a dozen faculty members, as well as increasing the data collection period from three weeks to nearly three-months, recruitment efforts were notably inhibited by the inability to recruit in-person, in classrooms, and among student groups. Prior to consent, all participants were screened using a short, five-question survey to ensure eligibility; for those participants deemed ineligible, they

were informed of their ineligibility prior to consent and thanked for their time. All eligible participants were then taken to the informed consent document (Appendix B), where they were told that the purpose of the research was to better understand attitudes and beliefs about sex among the targeted population, as to not bias responses during the study. While deception was not employed, participants were provided with additional information regarding the full, detailed purpose of the study and were informed regarding why it was necessary to only disclose limited information during consent, at the survey's conclusion.

The online-survey included 136 Likert-scale questions from reliable and validated questionnaires, as well as ten additional, standard demographic questions, such as year in school, race, and group affiliations (Appendix C). It was anticipated that it would take most participants 20-25 minutes to respond to all questions; a pilot test of eight participants was completed prior to data collection to ensure this amount of time was sufficient. Participants were permitted to skip any question they did not wish to answer, but were prompted to respond to any unanswered questions in case questions were unintentionally omitted. All participants who completed the survey were entered into a raffle to win one of fifty \$20 gift cards. All data was collected anonymously, as any identifiable information required for compensation was collected in a second survey not linked to their responses, in order to allow participants to feel as though they could respond to the questionnaires honestly.

Study Sample

The target population for this study was adults between the ages of 18-25, who self-identified as heterosexual, who self-identified as male, were currently

enrolled as an undergraduate student at the University of Maryland, College Park at the time of the survey, and reported previous engagement in sexual activity. Given that the largest majority of sexual assaults on college campuses involve men assaulting women (Banyard et al., 2007; Flack et al., 2008; Howard et al., 2008; Sinozich & Langton, 2014), participants were required to self-identify as men who only engage in sexual activity with women. Additionally, participants needed to be undergraduate students between the ages of 18-25, as this population possesses unique characteristics that increases their potential for perpetration due to living situation, developmental stage, participation in groups with higher risk for sexual assault perpetration such as Greek life and organized sports, and higher rates of heavy alcohol use and other substances (Abbey et al., 2001, 2004; Kimmel, 2008; Zinzow & Thompson, 2015).

In order to determine an adequate sample size, I conducted a power analysis using the G*Power computer program (Erdfelder et al., 1996). The program specified that a total sample of 191 people would be needed to detect a medium effect size ($|\rho|=0.20$), with 80% power ($\beta=0.80$) and 95% confidence ($\alpha=0.05$). In the event that I was unable to recruit 191 participants after the survey had been published for three weeks, I would switch the effect size to ($|\rho|=0.30$), which would require 82 participants.

Measures

Hypermasculine attitudes. The *Auburn Differential Masculinity Inventory* (Burk et al., 2004) (ADMI-60) is a 60-question inventory designed to measure a person's hypermasculinity, or the level to which they ascribe to an excessive version

of hegemonic masculinity. The ADMI-60 uses a 5-point Likert scale from *Very much like me* (= 4) to *Not at all like me* (= 0) to create an overall hypermasculinity score, as well as five sub-scores based on an evaluation of five factors: Hypermasculinity, Sexual Identity, Dominance and Aggression, Conservative Masculinity and Devaluation of Emotion. Example statements that participants will respond to include: “I consider men superior to women in intellect,” (Hypermasculinity), “I wouldn’t have sex with a woman who had been drinking,” (Sexual Identity), “I think men should be generally aggressive in their behavior” (Dominance and Aggression), and “I think men who cry are weak” (Devaluation of Emotion). For this study, I did not use the Conservative Masculinity sub-scale in order to reduce participant burden and due to its statements being the least relevant to the population of interest. During its initial creation and testing, the ADMI-60 proved to be psychometrically sound ($\alpha = 0.83$ and 0.85) and has been successfully used in recent studies on related topics (Obierofu & Ojedokun, 2019; Vechiu, 2019). Construct validity was examined through correlation with Mosher and Sirkin's (1984) Hypermasculinity Inventory (HMI) ($r = .70$) and both convergent and discriminate validity were deemed to be adequate.

Rape Myth Acceptance. The *Updated Illinois Rape Myth Acceptance Scale* (IRMA) created by McMahon and Farmer (2011) is a 22-question measure that can assess the extent to which a person ascribes to rape myths. This updated scale was adapted from The Illinois Rape Myth Acceptance Scale (Payne et al., 1999), which was both significantly longer and did not reflect the current culture of college students. IRMA

is measured using a 5-point Likert scale from *Strongly agree* (=1) to *Strongly disagree* (=5) with higher scores indicating greater rejection of rape myths. Four subscales that reflect popular rape myths within American society are delineated in the measure including: *She asked for it*, *He didn't mean to*, *It wasn't really rape*, and *She lied*. When the updated IRMA was originally tested, the reliability was reported at $\alpha = 0.87$, and is now commonly used in research that focuses on bystander intervention and sexual assault on college campuses (Canan et al., 2018; Carroll et al., 2016; Lamb & Randazzo, 2016). Both criterion and construct validity were confirmed, with construct validity reported as (Comparative Fit Index = .90, Tucker-Lewis Index = .97) and criterion validity was supported for male participants through MANOVA analysis.

Sexual Consent Attitudes and Norms. The *Sexual Consent Scale- Revised* (SCS-R) is a 39-statement measure that explains a person's attitudes, beliefs and normative behavior in relation to obtaining and exchanging consent during sexual activity (Humphreys & Brousseau, 2010). The SCS-R uses a 7-point Likert scale with response options ranging from *Strongly disagree* (=1) to *Strongly agree* (=7) and five sub-scales exist within the measure: *(Lack of) perceived behavioral control*, *Positive attitude toward establishing consent*, *Indirect behavioral approach to consent*, *Sexual consent norms*, and *Awareness and Discussion*. The last sub-scale was omitted from this study in order to reduce participant burden and its minimal relevancy to this study's aims. Example statements from the SCS-R include: "I would have difficulty asking for consent because it would spoil the mood" (Perceived Behavioral Control),

“I feel that sexual consent should always be obtained before the start of any sexual activity” (Positive Attitude), “Typically I communicate sexual consent to my partner using nonverbal signals and body language” (Indirect Behavioral Approach), and “I think that obtaining sexual consent is more necessary in a new relationship than in a committed relationship” (Sexual Consent Norms). The SCS-R shows excellent internal reliability overall ($\alpha = .87$) and sub-scale consistency ($\alpha = .67$ to $.86$). Construct validity of the five subscales were examined through correlations with the Hurlbert Index of Sexual Assertiveness (HISA) (Hurlbert, 1991) and the Sexual Sensation Seeking and Sexual Compulsivity Scales (SSSS) (Kalichman & Rompa, 1995) and while not all subscales were significantly correlated ($r = 0.2$ to 0.37) those that were presented logical convergence with the HISA and SSSS.

Social Inclusion and Comparison. The *Brief Fear of Negative Evaluation Scale-II* (BFNE-II) (Carleton et al., 2007) and the *Iowa–Netherlands Comparison Orientation Measure* (INCOM) (Gibbons & Buunk, 1999) were used to assess participant’s fear of being rejected by their peers and their level of social comparison among their peers. The BFNE-II consists of 12 statements participants are asked to rate on a 5-point Likert scale ranging from *Not at all characteristic of me* (=0) to *Extremely characteristic of me* (=4) with excellent reliability ($\alpha = .97$). The BFNE-II demonstrated moderate convergent validity ($.50 < r < .69$) correlating with the Anxiety Sensitivity Index (ASI)-Social concerns subscale (Peterson & Reiss, 1992), the Social Interaction Anxiety Scale (Mattick & Clarke, 1998), and others, as well as discriminate validity ($r < .30$) when tested against the Illness/Injury-Sensitivity Index

(Carleton et al., 2005) or the ASI-Somatic subscales. Two examples of questions from the BFNE-II include “I worry about what other people will think of me even when I know it doesn’t make any difference” and “If I know someone is judging me, it tends to bother me.” An abbreviated version of the INCOM will be used for this study (INCOM-Short) which is comprised of 6 statements that are measured using a 5-point Likert scale ranging from *I disagree strongly* (=1) to *I agree strongly* (=5) with internal consistency in the original sample reported as ($\alpha = .83$) (Buunk & Gibbons, 2006). Construct, discriminant, and criterion validity were examined extensively and were found to be valid among both American and Dutch populations. Two examples of statements from the INCOM-Short are “I often compare how I am doing socially (e.g., social skills, popularity) with other people” and “I often compare myself with others with respect to what I have accomplished in life.”

Hook-up Culture. The *Hookup Motives Questionnaire* (HMQ) (Kenney et al., 2014) consists of 19 statements that assess a participant’s motivations for taking part in a hook-up or hook-up culture. The HMQ uses a 5-point Likert scale that rates responses from *Almost never/never* (=1) to *Almost always/always* (=5) and consists of five factors: *Social-Sexual Motives*, *Social-Relationship-Seeking Motives*, *Enhancement Motives*, *Coping Motives*, and *Conformity Motives*. The fourth factor (*Coping Motives*) was not used due to its irrelevancy to the study’s research questions. An example statement from each of the four factors used in this study include: “Hooking up provides me with *friends with benefits*” (Social-Sexual Motives), “I hook up because hooking up is a way to find a relationship” (Social-Relationship-Seeking

Motives), “I hook up because it’s fun” (Enhancement Motives), and “I hook up because I feel pressure from my friends to hook up” (Conformity Motives). The HMQ did not report an overall internal consistency, but Kenney et al. (2014) reports that the internal consistency for each of the five subscales was reliable, ranging from ($\alpha = .83$ to $.90$). The HMQ was also found to have appropriate subscale discriminant validity and satisfied criterion-related validity ($r = .01$ to $.39$) by demonstrating that the subscales were significantly correlated with hookup approval and behavior.

Demographics. A total of ten demographic questions were examined including: age, status on campus (i.e., student, faculty), gender, sexual orientation, year in school (1st through 5+), race, ethnicity, group affiliation (i.e., Greek life, sports, Resident Life), international student status, and political affiliation. While the first four questions were asked during the screening process, those that were not required for determination of eligibility were requested at the end of the study. Group affiliation was requested in order to compare how men who belong to groups that are comprised of mostly other men, such as fraternities and NCAA/Club/Intramural Sports teams differ compared to those with no group affiliations or groups that have a more gender-diverse membership. International student status was queried as some of the measures included have not been tested in international populations and some of the terminology may not be as familiar to students who have primarily resided outside of the United States. Political affiliation was asked to investigate whether there were any associations between political beliefs and constructs such as hypermasculinity or RMA, as this may elucidate information that has not been widely explored.

Operationalization of Variables

The primary predictor variable in this study was hypermasculinity, as it was anticipated that a person's level of hypermasculinity would have a positive association with rape myth acceptance, attitudes about sexual consent and hook-up culture, and their need for comparison and inclusion among peers. Hypermasculinity was measured through the ADMI-60, which provides an overall score as well as individual scores for each factor, with higher scores indicating a higher ascription to attitudes of hypermasculinity. However, hypermasculinity was treated as a dependent variable when comparing scores from the ADMI-60 to scores on the BFNE-II and INCOM-Short scales, as one's need for comparison and approval by their peers (i.e., threats to masculinity) would be the predictor variables. Both the BFNE-II and INCOM-Short provided an overall scale score with higher scores signifying a greater need for approval from peers and a greater tendency for comparison against peers.

Dependent variables that were measured in this study were rape myth acceptance, sexual consent attitudes, beliefs, and norms, and hook-up culture attitudes and norms. RMA was measured using the IRMA questionnaire, which provided an overall score and four sub-scores regarding one's belief in rape myths, with higher scores representing those who generally reject rape myths. The SCS-R was used to measure sexual consent attitudes and norms using all three of the attitudinal scales and one of the two behavioral scales, with the scale score differing depending on the scale. Higher scores can represent both positive and negative attitudes and positive and negative behaviors about consent depending on the sub-scale; this was carefully evaluated during analysis. Finally, hook-up culture attitudes and norms was measured

using the HMQ, which provided four subscale scores for different constructs within hook-up culture. Higher scores on each of the four motivations are positively correlated with the frequency of participation in hook-up behaviors and on higher scores on four out of five factors, except for *Conformity*, were positively associated with approval of participation in hook-up culture. Figure 1 illustrates the two primary theories for this study, *The Theory of Emerging Adulthood* (Arnett, 2000) and *Precarious Manhood Theory* (Vandello & Bosson, 2013), and how they are related to the variables that will be studied.

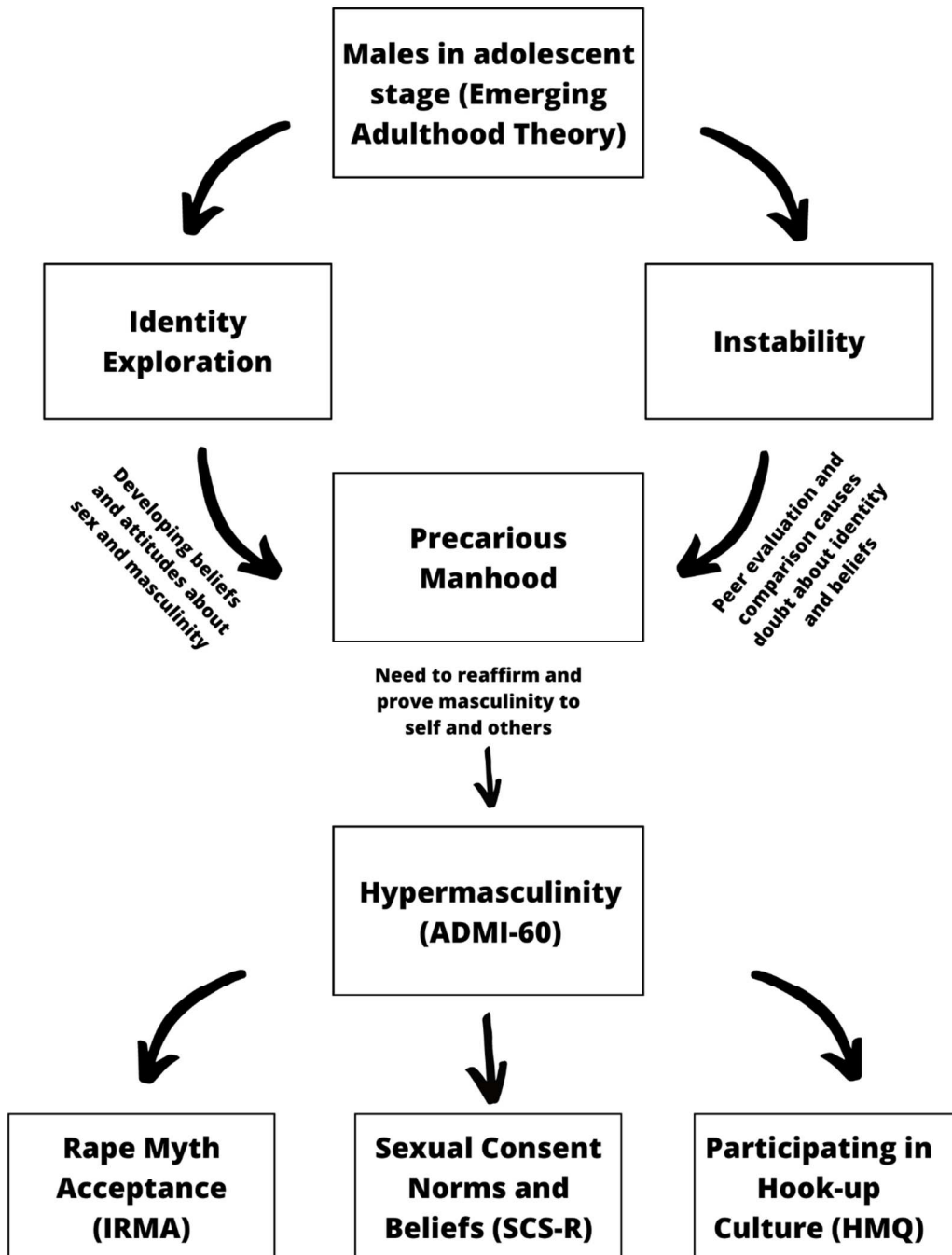


Figure 1. Theoretical model of college men's development and hypermasculinity

Data Analysis Plan

In order to conduct the necessary analysis, SPSS Version 26 statistical software was employed to run statistical testing. Participants' data were included for analysis as long as participants responded to all of the questions in the ADMI-60 and SCS-R measures, as hypermasculinity and/or sexual consent data were needed for all analyses. Pairwise deletion was utilized for missing data among those included for analysis, due to the small sample size and the need to maximize statistical power. Descriptive statistics were utilized to illustrate demographic data, as well as any measure that would benefit from displaying this information. For example, highlighted mean scores were provided for the standardized scales in order to demonstrate the overall averages and trends of both the independent and dependent variables. Scale and/or subscale scores and related statistics such as standard deviations, scale ranges, and Cronbach's alpha were utilized for all inventories. Only subscale scores were utilized for the SCS-R and HMQ, as neither scale was designed to be scored and analyzed as a total scale.

Pearson's 2-tailed bivariate correlational test was used to compare high versus low hypermasculinity scores from the ADMI-60 (independent variable) to the total score on the IRMA (dependent variable) in order to identify whether a negative correlation exists between hypermasculine attitudes and rape myth acceptance among undergraduate males. To further investigate this key question, a one-way analysis of variance (ANOVA) test was used to compare high and low hypermasculine groups to each of the subscales from the IRMA measure to investigate whether certain rape myths are more common among high or low hypermasculinity groups. Pearson's 2-

tailed bivariate correlational tests were also performed in order to explore how different motivations for participating in hook-up culture (independent variable) are associated with hypermasculine attitudes and rape myth acceptance (dependent variables).

A one-way analysis of variance (ANOVA) test was employed to compare sexual consent beliefs, attitudes, and norm subscale scores as determined by the SCS-R to scores of hypermasculinity by again grouping participants into two groups, low levels versus high levels of hypermasculinity, in order to investigate whether college men of different hypermasculine levels differ in their beliefs, attitudes or norms regarding sexual consent. Additionally, a one-way ANOVA test was run to compare scores on the BFNE-II and INCOM-Short to scores of hypermasculinity, again, dividing participants in low/high hypermasculinity groups, in order to investigate whether there are differences in the need for social inclusion and comparison among the different levels of masculinity.

Independent sample *t*-tests were performed to compare how different group affiliations are associated with levels of hypermasculinity (ADMI-60), sexual consent beliefs and norms (SCS-R), and rape myth acceptance (IRMA) as determined by these variables' scale and subscale scores. This test was run using two different methods: participation in Greek life vs. non-Greek students and participation in organized athletics vs. non-sport team students.

Finally, one-way ANOVA was completed using political party affiliation as the independent variable and hypermasculinity scale scores as the dependent variable

to conduct an exploratory analysis regarding the potential effect of political affiliation on hypermasculine beliefs and attitudes.

Chapter 4: Results

Descriptive Statistics

A total of 297 participants were screened for eligibility, out of which 59 participants met the inclusion criteria for the final analysis. The primary reasons for exclusion were: a) did not identify as male (n= 113); b) did not identify as heterosexual/straight (n= 76); or c) did not report prior engagement in sexual activity (n= 62). The majority of the sample identified as white (73.7%), Democrat (45.6%), and reporting having a group affiliation at the university (84.7%), with academic groups (45.8%) and club/intramural sports (42.4%) being the most reported activities (Table 1). The sample was relatively equally distributed in terms of participants' ages and their year of study, with participants identifying as 21 years old (27.1%) and enrolled for their 3rd year of studies (31.6%) being the most represented (Table 1).

Table 1: Sample Demographics

	N (%)	N (%)	
Age		Year in School	
18	5 (8.5)	1 st year	9 (15.3)
19	15 (25.4)	2 nd year	13 (22)
20	11 (18.6)	3 rd year	18 (30.5)
21	16 (27.1)	4 th year	14 (23.7)
22	6 (10.2)	5 th year or more	3 (5.1)
23	3 (5.1)	Missing	2 (3.4)
24	1 (1.7)	Group Affiliation*	
25	2 (3.4)	NCAA UMD Athletic Team	0 (0.0)
Race		Club or Intramural Team/Sports	25 (42.4)
American Indian/Alaskan Native	0 (0.0)	Greek Life	14 (23.7)
Asian/Asian American	8 (13.6)	Academic Groups	27 (45.8)
Black/African American	4 (6.8)	Religious Student Organizations	9 (15.3)
Native Hawaiian/Pacific Islander	0 (0.0)	Performing Arts Groups	4 (6.8)
White	42 (71.2)	Student Government Association	2 (3.4)
Two or more races/biracial	3 (5.1)	Other/Not Listed	17 (28.8)
Missing	2 (3.4)	No Group Affiliation	9 (15.3)
Ethnicity		Political Affiliation	
Hispanic/Latino	2 (3.4)	Republican	10 (16.9)
Not Hispanic/Latino	55 (93.2)	Democrat	26 (44.1)
Missing	2 (3.4)	Independent	11 (18.6)
International Student Status		Libertarian	3 (5.1)
No	57 (96.6)	Green	1 (1.7)
Yes	0 (0.0)	Other/No Affiliation	6 (10.2)
Missing	2 (3.4)	Missing	2 (3.4)

*Multiple selections were allowed for Group Affiliation as participants may have membership in more than one group on campus; thus, percentages are not equal to 100.

Scale Scores

Six valid and reliable questionnaires were administered to all participants: the *Auburn Differential Masculinity Inventory* (ADMI-60) (Burk et al., 2004), the *Updated Illinois Rape Myth Acceptance Scale* (IRMA) (McMahon & Farmer, 2011), the *Sexual Consent Scale- Revised* (SCS-R) (Humphreys & Brousseau, 2010), the

Brief Fear of Negative Evaluation Scale-II (BFNE-II) (Carleton et al., 2007), the *Iowa–Netherlands Comparison Orientation Measure –Short* (INCOM- Short) (Gibbons & Buunk, 1999), and the *Hookup Motives Questionnaire* (HMQ) (Kenney et al., 2014). Respondents’ mean scale and subscale scores, standard deviations, scale/subscale ranges, number of items, and Cronbach’s alpha are reported in Table 2. Despite eliminating some subscales, internal consistency was demonstrated for each scale and subscale.

Overall, the sample reported relatively low scores of hypermasculinity (ADMI-60), with the highest average scores being reported for *Dominance and Aggression* ($m= 28.864$) and *Devaluation of Emotion* ($m= 7.186$) subscales. Rape Myth Acceptance (IRMA) was highly rejected by the sample population, with slightly greater acceptance of rape myths under the *She Lied* subscale ($m= 19.35$), indicating greater acceptance that victims falsely manufacture reports of sexual assault. The SCS-R revealed that participants believed they could exert considerable control over sexual negotiations of consent and overall had a positive attitude toward consent. However, scores on *Indirect behavioral approach to consent* and *Sexual consent norms* subscales revealed that participants relied more heavily on indirect, non-verbal means of obtaining consent and felt consent was less important to obtain in established sexual relationships. The sample reported average scores on the BFNE-II ($m= 34.25$), but above average scores on the INCOM-Short ($m= 20.456$), indicating that participants are more likely to compare themselves to their peers than experience fear and anxiety due to the perception of being judged by their peers. Responses to the HMQ revealed that participants’ most significant motivation for hooking up is for

enhancement purposes (m= 12.83), and least significantly for reasons surrounding conformity (m= 5.53).

Table 2: Scale and Subscale Scores

Scale Name	Scale Range	# of items	Cronbach's α	Mean	Std. Deviation
ADMI- 60	0- 184	46	.895	51.831	19.263
Hypermasculinity	0- 68	17	.841	9.797	7.467
Sexual Identity	0- 56	14	.743	16.424	7.276
Dominance and Aggression	0- 72	18	.825	28.864	9.921
Devaluation of Emotion	0- 20	5	.727	7.186	3.613
IRMA	22-110	22	.925	92.54	13.322
She asked for it	6- 30	6	.823	26.40	3.868
He didn't mean to	6- 30	6	.775	23.37	4.510
It wasn't really rape	5- 25	5	.808	23.42	2.764
She lied	5- 25	5	.904	19.35	4.753
SCS-R**	35- 245	35	.668	-	-
(Lack of) perceived behavioral control	11- 77	11	.920	23.085	11.757
Positive attitude toward establishing consent	11- 77	11	.921	61.525	11.680
Indirect behavioral approach to consent	6- 42	6	.793	27.898	7.165
Sexual consent norms	7- 49	7	.784	32.88	7.076
BFNE-II	12- 60	12	.960	34.25	12.758
INCOM-Short	6- 30	6	.822	20.456	4.866
HMQ**	15- 75	15	.917	-	-
Social-Sexual Motives	4- 20	4	.852	8.08	4.145
Social-Relationship Seeking Motives	3- 15	3	.903	5.59	3.102
Enhancement Motives	4- 20	4	.969	12.83	6.393
Conformity Motives	4- 20	4	.806	5.53	2.445

***The SCS-R and HMQ scales are designed to be analyzed as subscales only, so total score data was not analyzed.*

Research Question 1

The first research question examined was whether a negative correlation existed between hypermasculine attitudes and rape myth acceptance (RMA) among undergraduate males. In order to test the relationship between hypermasculinity and RMA, a Pearson's 2-tailed bivariate correlation was used to compare those with low levels versus medium levels of reported hypermasculine beliefs and attitudes. It was hypothesized that higher scores on the ADMI-60 (hypermasculinity) would be associated with lower scores on the IRMA (RMA), as higher scores on the IRMA indicate a greater rejection of rape myths. Because there were no participants with high levels of reported masculine beliefs (scores of 110 or higher) in the sample, participants were divided into two groups: lower hypermasculinity (total score ≤ 51) and medium hypermasculinity scores (total score ranging between 53 and 104). Participants' reported level of hypermasculinity was significantly and negatively associated with RMA, with participants in the medium hypermasculinity group indicating greater acceptance of rape myths ($r = -.536, p \leq .001$) (Table 3).

To further examine the difference between groups with low and medium levels of hypermasculinity and RMA, one-way analysis of variance (ANOVA) was used to compare ADMI-60 scale scores to the four subscale scores of the IRMA. The ANOVA indicated a statistically significant relationship between reported levels of hypermasculinity on each of the four RMA subscales, with the *She asked for it* subscale indicating the most significant relationship ($F = 11.824, p = .001$) (Table 4).

Table 3: Bivariate Correlation of Hypermasculinity Scores and Rape Myth Acceptance Scores

		Hypermasculinity Scale Scores	RMA Scale Scores
Hypermasculinity Scale Scores	Pearson Correlation	1	-.536*
	Sig. (2-tailed)		.000
	N	59	57
RMA Scale Scores	Pearson Correlation	-.536*	1
	Sig. (2-tailed)	.000	
	N	57	57

*Correlation is significant at the 0.01 level (2-tailed)

Table 4: ANOVAs for Hypermasculinity Scores and Rape Myth Acceptance Subscale Scores

IRMA Subscales		Sum of Squares	df	Mean Square	F-value	Sig.
She asked for it	Between Groups	148.223	1	148.223	11.824	.001
	Within Groups	689.496	55	12.536		
	Total	837.719	56			
He didn't mean to	Between Groups	81.096	1	81.096	4.215	.045
	Within Groups	1058.167	55	19.239		
	Total	1139.263	56			
It wasn't really rape	Between Groups	41.787	1	41.787	5.952	.018
	Within Groups	386.107	55	7.020		
	Total	427.895	56			
She lied	Between Groups	208.816	1	208.816	10.874	.002
	Within Groups	1056.167	55	19.203		
	Total	1264.982	56			

Research Question 2

Another research question investigated whether college men who score higher on hypermasculinity inventories differ in their beliefs, attitudes or norms regarding

sexual consent, compared to those with lower levels of hypermasculinity. One-way analyses of variance (ANOVA) was used to detect the differences between low and medium levels of hypermasculinity (ADMI-60) and participants' attitudes, beliefs, and norms surrounding sexual consent negotiations and practices. The ANOVA demonstrated statistically significant differences between levels of hypermasculine attitudes and the four SCS-R subscales. Participants who scored in the lower hypermasculinity group were more likely to have better perceived behavioral control over consent negotiations ($F= 8.769, p= .004$), possessed more positive attitudes toward consent ($F= 11.957, p= .001$), were less likely to use indirect/non-verbal methods for obtaining consent ($F= 4.546, p= .037$), and had more desirable norms for sexual consent practices ($F= 7.712, p= .007$) (Table 5).

Table 5: ANOVAs for Hypermasculinity Scores and Sexual Consent Scale-Revised (SCS-R) Subscale Scores

SCS-R Subscales		Sum of Squares	df	Mean Square	F-value	Sig.
(Lack of) perceived behavioral control	Between Groups	1068.842	1	1068.842	8.769	.004
	Within Groups	6947.734	57	121.890		
	Total	8016.576	58			
Positive attitude toward establishing consent	Between Groups	1372.018	1	1372.018	11.957	.001
	Within Groups	6540.694	57	114.749		
	Total	7912.712	58			
Indirect behavioral approach to consent	Between Groups	219.942	1	219.942	4.546	.037
	Within Groups	2757.448	57	48.376		
	Total	2977.390	58			
Sexual consent norms	Between Groups	346.118	1	346.118	7.712	.007
	Within Groups	2558.052	57	44.878		
	Total	2904.169	58			

Research Question 3

A third research question explored how different motivations for participating in hook-up culture are associated with hypermasculine attitudes and rape myth acceptance (RMA). In order to demonstrate these associations, Pearson’s 2-tailed bivariate correlations were used to compare scores on the Hook-up Motivation Questionnaire (HMQ) subscales to the total scale scores for hypermasculinity (ADMI-60) and RMA (IRMA). Hypermasculinity scores were significantly and positively associated with each individual motivational subscale: social-sexual motives ($r = .349, p = .007$); social-relationship seeking motives ($r = .397, p = .002$);

enhancement motives ($r = .355$, $p = 0.006$); and conformity motives ($r = .402$, $p = .002$). There was no noted significance between RMA and the HMQ subscales. The bivariate correlational analyses are summarized in Tables 6-9.

Table 6: Bivariate Correlation of Social-Sexual Motives Subscale and Hypermasculinity and RMA

		Social-Sexual Subscale Scores	Hypermasculinity Scale Scores	RMA Scale Scores
Social-Sexual Motives Subscale Scores	Pearson Correlation	1		
	Sig. (2-tailed)			
	N	59		
Hypermasculinity Scale Scores	Pearson Correlation	.349*	1	
	Sig. (2-tailed)	.007		
	N	59	59	
RMA Scale Scores	Pearson Correlation	-.042	-.536	1
	Sig. (2-tailed)	.759	< .001	
	N	57	57	57

*Correlation is significant at the 0.01 level (2-tailed)

Table 7: Bivariate Correlation of Social-Relationship Seeking Motives Subscale and Hypermasculinity and RMA

		Social-Relationship Seeking Motives Subscale Scores	Hypermasculinity Scale Scores	RMA Scale Scores
Social-Relationship Seeking Motives Subscale Scores	Pearson Correlation	1		
	Sig. (2-tailed)			
	N	59		
Hypermasculinity Scale Scores	Pearson Correlation	.397*	1	
	Sig. (2-tailed)	.002		
	N	59	59	
RMA Scale Scores	Pearson Correlation	.066	-.536	1
	Sig. (2-tailed)	.625	< .001	
	N	57	57	57

**Correlation is significant at the 0.01 level (2-tailed)*

Table 8: Bivariate Correlation of Enhancement Motives Subscale and Hypermasculinity and RMA

		Enhancement Motives Subscale Scores	Hypermasculinity Scale Scores	RMA Scale Scores
Enhancement Motives Subscale Scores	Pearson Correlation	1		
	Sig. (2-tailed)			
	N	59		
Hypermasculinity Scale Scores	Pearson Correlation	.355*	1	
	Sig. (2-tailed)	.006		
	N	59	59	
RMA Scale Scores	Pearson Correlation	.027	-.536	1
	Sig. (2-tailed)	.844	< .001	
	N	57	57	57

**Correlation is significant at the 0.01 level (2-tailed)*

Table 9: Bivariate Correlation of Conformity Motives Subscale and Hypermasculinity and RMA

		Conformity Motives Subscale Scores	Hypermasculinity Scale Scores	RMA Scale Scores
Conformity Motives Subscale Scores	Pearson Correlation	1		
	Sig. (2-tailed)			
	N	59		
Hypermasculinity Scale Scores	Pearson Correlation	.402*	1	
	Sig. (2-tailed)	.002		
	N	59	59	
RMA Scale Scores	Pearson Correlation	-.199	-.536	1
	Sig. (2-tailed)	.138	< .001	
	N	57	57	57

*Correlation is significant at the 0.01 level (2-tailed)

Research Question 4

Another research question examined was whether positive or negative relationships exist between hypermasculinity (ADMI-60), rape myth acceptance (IRMA) and sexual consent attitudes, beliefs and norms (SCS-R), and different group affiliations. Independent sample *t*-tests were used to determine whether significant differences existed between participants who belonged to sports teams (i.e., club or intramural sports) and Greek life organizations on campus in comparison to those who did not affiliate with these groups.

For participants who reported involvement in Greek life, significant differences were found for numerous components of hypermasculinity, including the overall scale score as well as the *Sexual Identity and Dominance and Aggression*

subscale scores. For the overall scale score, there was a significant difference in the scores for those with Greek affiliation (M= 63.571, SD= 17.408) and those with no Greek affiliation (M= 48.178, SD= 18.5); $t(57) = -2.756, p = 0.008$. There was also a significant difference in the *Sexual Identity* subscale scores for those with Greek affiliation (M= 21.5, SD= 6.525) and those with no Greek affiliation (M= 14.844, SD= 6.186); $t(57) = -3.222, p = 0.002$. The complete results for hypermasculinity as related to Greek affiliation can be found in Table 10.

For participants who reported involvement in club and intramural sports, there were no statistically significant differences for the overall hypermasculinity scale score nor any of the subscale scores (Table 11).

Table 10: Mean Differences in Hypermasculinity Based on Greek Life Affiliation

		Mean score (Std. deviation)	t-value	df	Mean difference	p-value
ADMI-60 scale scores	No (n = 45)	48.178 (18.5)	-2.756	57	-15.394	0.008
	Yes (n = 14)	63.571 (17.408)				
Hypermasculinity subscale scores	No (n = 45)	8.8 (7.134)	-1.878	57	-4.2	0.066
	Yes (n = 14)	13 (7.874)				
Sexual Identity subscale scores	No (n = 45)	14.844 (6.816)	-3.222	57	-6.656	0.002
	Yes (n = 14)	21.5 (6.525)				
Dominance and Aggression subscale scores	No (n = 45)	27.156 (9.427)	-2.475	57	-7.201	0.016
	Yes (n = 14)	34.357 (9.787)				
Devaluation of Emotions subscale scores	No (n = 45)	6.844 (3.747)	-1.312	57	-1.442	0.195
	Yes (n = 14)	8.286 (2.998)				

Table 11: Mean Differences in Hypermasculinity Based on Sports Team Membership

		Mean score (Std. deviation)	t-value	df	Mean difference	p-value
ADMI-60 scale scores	No (n = 34)	54.441 (21.738)	1.219	57	6.161	0.228
	Yes (n = 25)	48.28 (14.974)				
Hypermasculinity subscale scores	No (n = 34)	11.353 (8.896)	1.909	57	3.673	0.061
	Yes (n = 25)	7.68 (4.22)				
Sexual Identity subscale scores	No (n = 34)	17.412 (8.425)	1.222	57	2.332	0.227
	Yes (n = 25)	15.08 (5.204)				
Dominance and Aggression subscale scores	No (n = 34)	29.294 (9.907)	0.385	57	1.014	0.702
	Yes (n = 25)	28.28 (10.114)				
Devaluation of Emotions subscale scores	No (n = 34)	7.088 (3.511)	-0.242	57	-0.232	0.810
	Yes (n = 25)	7.32 (3.816)				

There was also a significant difference found for sexual consent attitudes and norms for Greek life members when using the SCS-R (Table 12). Those participants with Greek life affiliation scored significantly higher on the *(Lack of) perceived behavioral control* subscale regarding confidence in obtaining consent ($M= 28.786$, $SD= 14.05$) than those without participation in Greek groups ($M= 21.311$, $SD= 10.503$); $t(57) = -2.141$, $p= .037$. There were no significant differences for the SCS-R subscale scores for those reporting intramural or club sports team participation and those who do not participate in sports teams on campus (Table 13).

Table 12: Mean Differences in Sexual Consent Attitudes and Norms Based on Greek Life Affiliation

		Mean scores (Std. deviation)	t-value	df	Mean difference	p-value
(Lack of) perceived behavioral control subscale scores	No (n = 45)	21.311 (10.503)	-2.141	57	-7.475	0.037
	Yes (n = 14)	28.786 (14.05)				
Positive attitude toward establishing consent subscale scores	No (n = 45)	62.022 (11.626)	.582	57	2.094	0.563
	Yes (n = 14)	59.929 (12.149)				
Indirect behavioral approach to consent subscale scores	No (n = 45)	27.378 (7.331)	-1	57	-2.194	0.321
	Yes (n = 14)	29.571 (6.572)				
Sexual consent norms subscale scores	No (n = 45)	32.467 (7.638)	-0.805	57	-1.748	0.424
	Yes (n = 14)	34.214 (4.839)				

Table 13: Mean Differences in Sexual Consent Attitudes and Norms Based on Sports Team Membership

		Mean scores (Std. deviation)	t-value	df	Mean difference	p-value
(Lack of) perceived behavioral control subscale scores	No (n = 34)	22.912 (12.261)	-0.131	57	-0.408	0.896
	Yes (n = 25)	23.32 (11.279)				
Positive attitude toward establishing consent subscale scores	No (n = 34)	60.971 (12.169)	-0.422	57	-1.309	0.674
	Yes (n = 25)	62.28 (11.182)				
Indirect behavioral approach to consent subscale scores	No (n = 34)	28.412 (8.18)	0.639	57	1.212	0.526
	Yes (n = 25)	27.2 (5.583)				
Sexual consent norms subscale scores	No (n = 34)	31.765 (8.228)	-1.426	57	-2.635	0.159
	Yes (n = 25)	34.4 (4.873)				

There were no significant differences in rape myth attitudes (IRMA) between those involved in Greek life and those with no Greek life affiliation (Table 14), nor those involved in intramural or club sports teams versus those with no intramural or club sports team membership (Table 15).

Table 14: Mean Differences in Rape Myth Acceptance Based on Greek Life Affiliation

		Mean scores (Std. deviation)	t-value	df	Mean difference	p-value
IRMA scale scores	No (n = 43)	93.233 (12.112)	0.681	55	2.804	0.499
	Yes (n = 14)	90.429 (16.856)				
She asked for it	No (n = 43)	26.442 (3.724)	0.130	55	0.156	0.897
	Yes (n = 14)	26.286 (4.428)				
He didn't mean to	No (n = 43)	23.372 (4.1)	0.011	55	0.015	0.992
	Yes (n = 14)	23.357 (5.773)				
It wasn't really rape	No (n = 43)	23.512 (2.772)	0.430	55	0.369	0.669
	Yes (n = 14)	23.143 (2.825)				
She lied	No (n = 43)	19.907 (4.23)	1.568	55	2.264	0.123
	Yes (n = 14)	17.643 (5.943)				

Table 15: Mean Differences in Rape Myth Acceptance Based on Sports Team Membership

		Mean scores (Std. deviation)	t-value	df	Mean difference	p-value
IRMA scale scores	No (n = 32)	91.563 (14.725)	-0.626	55	-2.238	0.534
	Yes (n = 25)	93.8 (11.449)				
She asked for it	No (n = 32)	25.938 (4.181)	-1.03	55	-1.063	0.308
	Yes (n = 25)	27 (3.416)				
He didn't mean to	No (n = 32)	23.438 (4.925)	0.130	55	0.158	0.897
	Yes (n = 25)	23.28 (4.016)				
It wasn't really rape	No (n = 32)	23.281 (2.986)	-0.429	55	-0.319	0.67
	Yes (n = 25)	23.6 (2.5)				
She lied	No (n = 32)	18.906 (5.114)	-0.796	55	-1.014	0.429
	Yes (n = 25)	19.92 (4.281)				

Research Question 5

One-way analyses of variance (ANOVA) was used to examine the differences between low and medium levels of hypermasculinity (ADMI-60) and participants' need for social comparison with their peers and the fear of rejection and negative evaluation by their peers. The ANOVA demonstrated no statistically significant difference between participants with low levels of hypermasculinity and medium levels of hypermasculinity regarding their propensity toward comparison with their peers' thoughts and opinions (INCOM-Short). The ANOVA also did not show a significant difference between participants with low levels of hypermasculinity versus

medium levels of hypermasculinity in regards to fear of negative evaluation by their peers and social anxiety (Table 16).

Table 16: ANOVAs for Hypermasculinity Scores and Social Comparison (INCOM-Short) and Fear of Negative Evaluation (BFNE-II)

		Sum of Squares	df	Mean Square	F-value	Sig.
INCOM-Short	Between Groups	53.933	1	53.933	2.332	0.133
	Within Groups	1272.207	55	23.131		
	Total	1326.14	56			
BFNE-II	Between Groups	3.945	1	3.945	0.024	0.878
	Within Groups	9437.241	57	165.566		
	Total	9441.186	58			

Exploratory Analyses

Exploratory analysis was used to further investigate concepts surrounding hypermasculinity among college-aged males. One-way analyses of variance (ANOVA) was used to detect the differences between political party affiliation and participants' reported hypermasculinity scores, as determined by the total score of the ADMI-60. . The ANOVA indicated a statistically significant relationship between reported levels of hypermasculinity with participants' political affiliation ($F= 6.236, p = .001$) (Table 17).

Table 17: ANOVA for Political Affiliation and Hypermasculinity

		Sum of Squares	df	Mean Square	F-value	Sig.
ADMI: Total Scale Score	Between Groups	4968.971	3	1656.324	6.236	.001
	Within Groups	14077.590	53	265.615		
	Total	19046.561	56			

As the ANOVA revealed a significant relationship between political affiliation and hypermasculinity, a post-hoc test was conducted to further explore which political affiliations' mean differences were significant. The political groups that were tested included Republican, Democrat, Independent, and Other, which was comprised of those who indicated Libertarian, Green, other party or no party affiliation. Post-hoc comparisons using the Tukey HSD test indicated a significant difference in hypermasculinity scores between participants who identified as Republican in comparison to those who identified as Democrat, with Republican participants reporting an average score that is 25.715 points higher than Democrat participants ($p = .001$). There were no other statistically significant differences between groups (Table 18).

Table 18: Multiple Comparisons – Post Hoc Test for Political Affiliation and Hypermasculinity Scores

Political Affiliation	N (%)	Mean	Comparison Affiliation	Mean Difference	Standard Error	p-value
Republican	10 (17.5)	68.6	Democrat	25.715*	6.064	0.001
			Independent	18.418	7.121	0.058
			Other	13.7	7.289	0.249
Democrat	26 (45.6)	42.885	Republican	-25.715*	6.064	0.001
			Independent	-7.297	5.862	0.602
			Other	-12.015	6.064	0.208
Independent	11 (19.3)	50.182	Republican	-18.418	7.121	0.058
			Democrat	7.297	5.862	0.602
			Other	-4.718	7.121	0.911
Other	10 (17.5)	54.9	Republican	-13.7	7.289	0.249
			Democrat	12.015	6.064	0.208
			Independent	4.718	7.121	0.911

**The mean difference is significant at the 0.05 level.*

The final exploratory analysis completed was to investigate the differences between college men’s sexual consent beliefs, attitudes and norms and their acceptance of commonly held rape myths. Independent sample *t*-tests were used to compare scores of the Sexual Consent Scale- Revised (SCS-R) subscales to scores on the Illinois Rape Myth Acceptance (IRMA) scale, where participants were divided into two groups: low rape myth acceptance (scores ≥ 87) and medium rape myth acceptance (scores 51 through 86). Higher scores are representative of those respondents who were more likely to reject the rape myths proposed in the scale.

The analysis revealed statistically significant differences on all four subscales of the SCS-R (Table 19). Most notably, participants who were more likely to believe common rape myths had less favorable attitudes toward establishing consent before sexual activity ($M= 53.667$, $SD= 14.213$); $t(55) = 4.014$, $p < .001$, and were less like to practice affirmative consent ($M= 36.5$, $SD= 6.879$); $t(55) = -2.712$ $p = .009$.

Table 19: Mean Differences in Sexual Consent Attitudes and Norms Based on Rape Myth Acceptance Scores

SCS- Subscales	IRMA Score	Mean scores (Std. deviation)	t-value	df	Mean difference	p-value
(Lack of) perceived behavioral control subscale scores	Low (n = 39)	20.539 (10.865)	-2.02	55	-6.462	.048
	Medium (n = 18)	27 (11.985)				
Positive attitude toward establishing consent subscale scores★	Low (n = 39)	65.564 (8.14)	4.014	55	11.897	<.001
	Medium (n = 18)	53.667 (14.213)				
Indirect behavioral approach to consent subscale scores	Low (n = 39)	26.359 (7.379)	-2.412	55	-4.808	.019
	Medium (n = 18)	31.167 (6.051)				
Sexual consent norms subscale scores	Low (n = 39)	31.231 (6.792)	-2.712	55	-5.269	.009
	Medium (n = 18)	36.5 (6.879)				

★ Lower scores on this subscale indicate less desirable attitudes regarding sexual consent

Chapter 5: Discussion

Summary of Central Findings

The results of this research demonstrate the numerous relationships that hypermasculinity has with rape myth acceptance (RMA), comprehension and practices of consent, and participation in hook-up culture among college-aged males. First, the analyses demonstrated a significant relationship between college men's hypermasculine attitudes and beliefs and their acceptance of commonly held rape myths. In particular, the two RMA subscales from the *Illinois Rape Myth Acceptance (IRMA) Scale* (McMahon & Farmer, 2011) that produced significant findings were *She Lied* and *She Asked for it*, both of which are rape myths that emphasize the woman was at least partially responsible for the assault or had ulterior motives for the assault accusation. Previous research demonstrated that men who ascribe to hypermasculine beliefs value dominance, "playboy-behavior," and supremacy over women, which may explain why rape myths surrounding a woman's role in the assault are more heavily associated with hypermasculinity than those regarding a man's individual behavior or responsibility (Mahalik et al., 2003). Previous research by Lutz-Zois and colleagues (2015) similarly found that traditional masculinity was significantly linked to increased victim blaming. Additionally, a recent study discovered that masculinity beliefs that center around power or devaluing women were significantly associated with an increased acceptance of rape myths, which directly supports this finding (Le et al., 2020).

This study also revealed the relationship between hypermasculinity and sexual consent attitudes and behaviors. As determined by each subscale from the *Sexual Consent Scale – Revised* (Humphreys & Brousseau, 2010), college men who had lower hypermasculine ideologies were more likely to have agency and control over their consent negotiations, held more positive attitudes about consent, were more likely to obtain affirmative consent in sexual encounters, and had more desirable norms for sexual consent practices. This finding is supported by previous research that found *conformity to masculine norms*, which has negative associations to the belief of male superiority and the endorsement of influence and dominance over women, predicted less comprehension of affirmative consent (Warren et al., 2015). Warren and colleagues (2015) also assert that this lack of comprehension of consent may be due to men’s beliefs regarding masculinity and the constructs of dominance over women and entitlement; thus, these men may never cultivate a positive attitude or healthy norms regarding practices of sexual consent. Other recent research supports findings related to the fourth subscale, *Sexual consent norms*, which found that men with higher hypermasculine beliefs were less likely to ask for consent once it had been granted for one activity (i.e., kissing, fondling) or one sexual encounter, assuming a “once yes, always yes” approach to consent (Bay-Cheng & Eliseo-Arras, 2008).

Hypermasculinity was found to be significantly and positively associated with motivations for participation in hook-up culture for all four dimensions of the *Hook-Up Motives Questionnaire* (HMQ): Social-sexual motives (physical or sexual desires met through a noncommittal hook-up), Social-relationship motives (the opportunity

for finding a committed partner through hooking up), Enhancement (positive motivator for the purposes of internal pleasure or satisfaction), and Conformity (negative motivator for the purposes of fitting in) (Kenney et al., 2014). Previous research supports this finding as scholars have found that participating in hook-up culture is associated with hegemonic masculinity, allowing men to assert dominance over women and sexual situations (Kalish, 2013; Reling et al., 2018; Stinson, 2010). Hooking up has also previously been identified as a mechanism through which college men can attain status among their peers, which can reinforce their socially-defined masculinity and supports this study's finding of conformity motives in relation to hypermasculinity (Kalish, 2013; Peralta, 2007). Blayney and colleagues (2018) also found enhancement motives to be significant among college males who participate in hook-up culture, especially when combined with alcohol consumption. Contrary to current research, this study did not find any difference in RMA attitudes and participation in hook-up culture. Previous research by Reling and colleagues (2018) found that social-sexual and conformity motives were positively associated with increased RMA while Yost and Zurbriggen (2006) found that social-sexual motives were correlated with both RMA and hypermasculinity.

Participants involved in Greek life on campus were more likely to have higher hypermasculinity scores overall, as well as on the *Sexual Identity* and *Dominance and Aggression* subscales (Burk et al., 2004). This finding was both supported and unsupported by previous research. Bleecker and Murnen (2005), as well as Seabrook et al. (2018) found that hypermasculine ideologies, the pressure from peers to adhere to masculine norms, and asserting dominance over women were closely related to

involvement in fraternities. However, Corprew and Mitchell (2014) found that the need for dominance over women increased as hypermasculine attitudes increased regardless of fraternity membership, thus Greek life was not a mediator in the relationship between dominance over women and hypermasculinity. Significance was also found between belonging to a fraternity and sexual consent, specifically on the *(Lack of) perceived behavioral control* subscale. Participants who reported membership in Greek life were less likely to feel they had the ability to comfortably and successfully negotiate consent during sexual encounters. Previous research has found that members of fraternities are more likely to believe in the “sexual double standard” (men who engage in frequent sex are considered acceptable and admired while women who would behave similarly would be shamed) and perpetuate the stereotype that men in fraternities are always available for hooking up, which may contribute to their inability to negotiate consent as it would be perceived as unmanly and pathetic (Waterman et al., 2020). Fraternities also enjoy an elevated status and prestige on college campuses, which may contribute to a sense of entitlement not only over membership and parties, but also of women (Armstrong et al., 2006; Jozkowski & Wiersma-Mosley, 2017).

There was no statistical significance between RMA and Greek life membership, which is both supported and refuted in previous research. Multiple studies have found that men who are members of fraternities are more likely to support rape myths than college men who do not participate in Greek life (Canan et al., 2018; McMahon, 2010; Murnen & Kohlman, 2007). However, other studies uncovered conflicting findings, noting that there were no associations between RMA

and fraternity membership (Boeringer, 1999), or even that those in fraternities had notably less RMA in comparison to non-Greek peers (Reling et al., 2018). The stark differences in findings may be due to more recent campus initiatives that target Greek organizations with tailored interventions addressing sexual assault and RMA.

This study revealed no significant associations between men involved in club or intramural sports and the constructs of hypermasculinity, sexual consent attitudes and norms, and RMA. This finding has been both supported and challenged in past research, with Locke & Mahalik (2005) finding no relationship between sports participation and RMA or sexual aggression toward women, while among 29 different schools, Murnen and Kohlman (2007) found significant differences between men involved in NCAA programs and RMA and sexual aggression toward women. These contrasting findings are not surprising, as all of the athletes in this sample were members of club or intramural sports teams, which do not garner the same prestige that NCAA athletes are afforded on college campuses. Prestige and privilege have often been identified as significant factors in hypermasculinity, unhealthy sexual consent practices, and RMA among athletes and fraternity members (Kimmel, 2008; Martin, 2016).

A surprising and contradictory finding derived from this study was that no significant difference was detected between participants' need for comparison with their peers or their fear of negative evaluation between men with lower hypermasculine levels and men with medium hypermasculine levels. Precarious Manhood Theory (PMT) posits that masculinity is a status that is earned, fragile and subject to change, and primarily confirmed by peers through demonstrations of

manliness (Vandello et al., 2008; Vandello & Bosson, 2013). A loss or question of one's manliness can be classified as a threat to masculinity. Therefore, one would think that threats to that masculinity through judgment or evaluation from peers would be positively associated with higher levels of hypermasculinity. A plausible explanation for this lack of relationship between threat to masculinity and hypermasculinity may be because no participants in this sample fell within the highest hypermasculinity scoring range. Another explanation could be that the statements in the *Brief Fear of Negative Evaluation-II* (BFNE-II) and *Iowa-Netherlands Comparison Orientation Scale* (INCOM) do not directly elicit thoughts of threats to masculinity, as the statements are written more generally. If statements were more explicit about participants' feelings toward their masculinity being judged or probed, a significant relationship may have been detected.

Significant differences were also found between sexual consent beliefs and norms and RMA, which is a relatively new topic of research in the field of sexual assault research. Men who were more likely to believe in perpetuated rape myths were less likely to understand how to discuss consent with a potential partner, have favorable attitudes about consent, utilize affirmative consent practices, and obtain consent for all sexual encounters. Previous research has been inconclusive regarding the influence of RMA on consent. A recent study conducted by Silver and Hovick (2018) found that increased RMA among college men predicted reduced confidence and negative attitudes toward affirmative consent. A similar study also found connections between consent attitudes and norms and RMA for only two of the four subscales administered in this study: (*Lack of*) *Perceived Behavioral Control* and

Positive Attitudes Toward Establishing Consent (Kilimnik & Humphreys, 2018).

Minimal literature was found that compared topics of the other two subscales,

Indirect behavioral approach to consent or *Sexual consent norms* to RMA.

Comparing this study's findings to previous research, it is expected that RMA is also linked to indirect approaches to consent and negative sexual consent norms, as the *Illinois Rape Myth Acceptance Scale* includes numerous statements regarding rape myths that imply a lack of resistance or lack of a verbal "no" is indicative of consent (McMahon, 2010). Another recent study also stated that RMA was linked to poor consent interpretation and intentions to stop sexual activity if consent was unclear or rescinded (Shafer et al., 2018).

In the exploratory analysis, a relationship between political party affiliation and hypermasculinity was revealed as participants who identified as Republicans had significantly higher levels of hypermasculine beliefs than participants who identified as Democrats. An explanation for this finding may be the political party dynamics of the last decade. Given the age of participants, most have had the opportunity to vote in one or two elections, with both of those election cycles including Donald Trump as the Republican candidate. President Trump has been cited as using hypermasculinity and overtly aggressive language as a tactic to reach white, male voters (Kurtzleben, 2020). Recent research has posited that people who identify as Republican also identify with the current president's strategies of highlighting masculinity, dominance over women, and machismo, all of which were measured in the hypermasculinity inventory (Neville-Shepard & Neville-Shepard, 2020; Smith & Higgins, 2020). However, hypermasculine and domineering characteristics may only be associated

with men who identify as Republican when current political leaders representing the Republican Party exemplify these characteristics, so this association should be accepted with caution.

A visual summary of the central findings can be found below, which utilizes a section of the theoretical model in Chapter 3 to illustrate the results of the study (Figure 2). Constructs that were measured using validated inventories are included in rectangles, while populations or variables of interest are shown in circles. Color-coding was used to demonstrate both the strength of relationships and those relationships that were discovered with exploratory analyses, with a key in lower-left hand corner for reference.

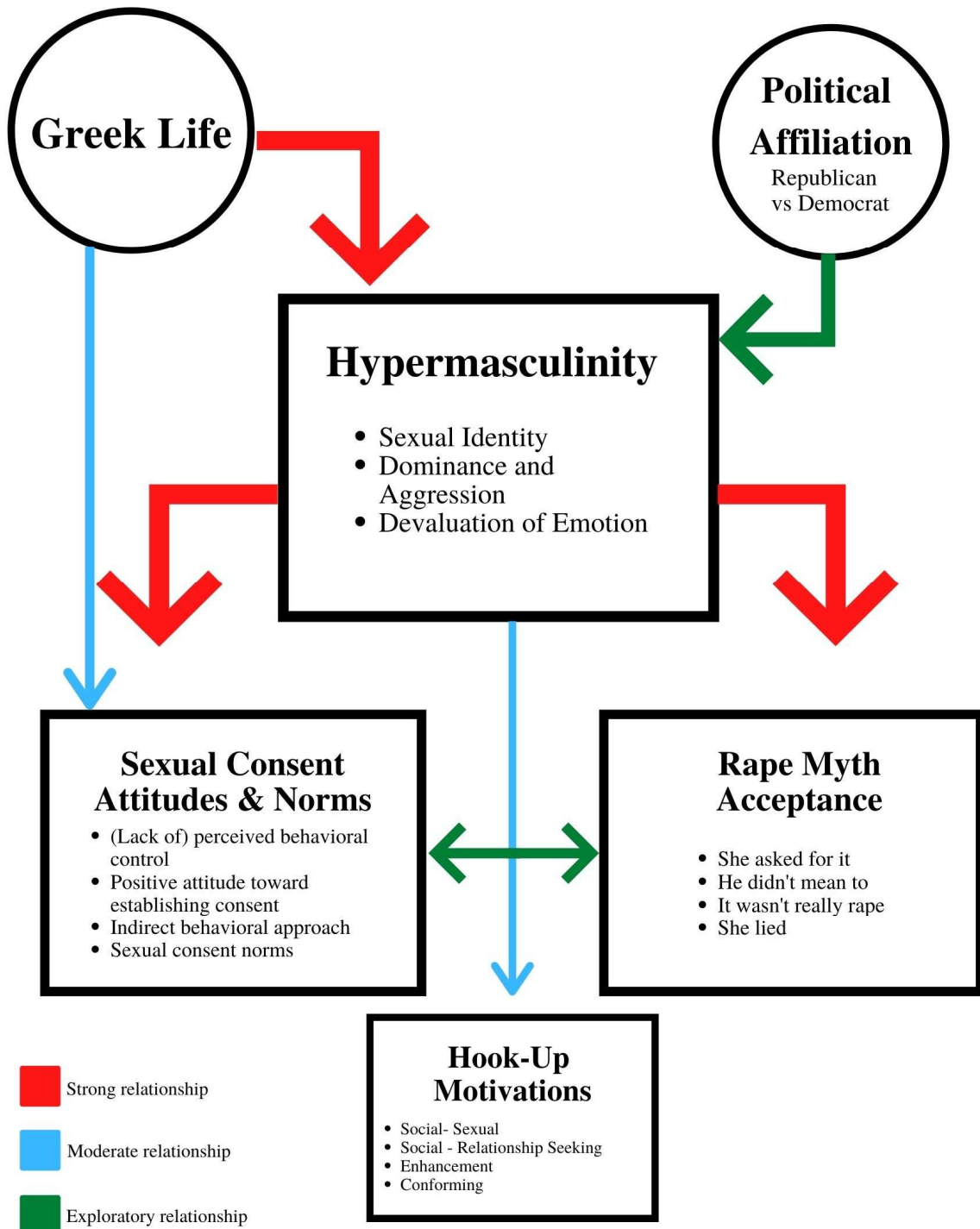


Figure 2. Model of central findings and their relationships to other variables

Implications

This study has demonstrated that hypermasculinity has numerous effects on attitudes, beliefs, practices, and norms that have implications for the continued perpetration of sexual assault among college males. This knowledge could be used to improve gender-oriented sexual assault prevention programming for college males in order to bring awareness to how hypermasculine attitudes may lead to misconceptions regarding the consent process and educate men about the importance of obtaining affirmative consent for all sexual activity. Previous research has shown that men believe women are the “gatekeepers” for sexual activity and thus, expect women to lead any negotiations of consent or be responsible for stopping any unwanted actions from occurring (Bogle, 2008; McMahon & Farmer, 2011). Research has also found that significant gender differences exist regarding how men and women both provide and interpret both verbal and non-verbal consent, with men relying heavily on non-verbal cues to assume consent or non-consent (Jozkowski et al., 2014). Combining these findings with the results of this study highlights the importance of gender-oriented sexual assault prevention programming, as men not only bring potentially detrimental attitudes to their interpretations of consent, but also lack understanding regarding the differences in communication methods between genders. By providing college males with knowledge through interventions about how these false assumptions and rape myths may influence their consent practices, sexual assault prevalence could gradually decrease.

Gender-oriented interventions that focus on hypermasculinity could also address the myths and attitudes surrounding hook-up culture that also lead to

increased sexual assault perpetration. Kimmel (2008) found when interviewing college males that men less commonly cited motivations for hooking up for sexual pleasure and more to prove their manliness to other men due to the pressures of conformity and the need to continually prove and retain manhood. This insecurity about the need to conform and compete regarding sexual experiences continues to go unacknowledged and sustains the myth among college males that their peers are more masculine and are having more sexual experiences than they are (Kimmel, 2008). Additional research with college men has found that men are more likely to see sex as “a conquest” or “a commodity” of which a limited amount exists, thus creating a competitive atmosphere among men seeking to participate in sexual activity (Jozkowski et al., 2017). This psychological framing of hooking up as a competition can cause men to act as though they must convince women to have sex with them, so even when signs of non-consent exist, they will persist in the name of winning the hooking-up competition. Creating spaces on campus that will allow for open dialogue among college males regarding these myths surrounding hook-up culture and hypermasculinity could dispel these false beliefs and allow men to be better educated about participating in hook-up culture safely. These gender-oriented interventions should also educate men, especially those with higher hypermasculine traits, about the effects of alcohol on interpreting consent and motivations for participation in hook-up culture, as research has found that alcohol can increase aggressiveness in men, which could also increase the potential for competitive motivations for participation in hook-up culture. While changing college campus culture concerning sex and hooking up may be challenging, universities must attempt to acknowledge

that these attitudes and beliefs exist in order to begin a gradual shift toward healthier motivations for pursuing sexual activity.

This study also demonstrated numerous issues surrounding sexual consent attitudes, beliefs, and practices among college males that have troubling implications for sexual assault. Both hypermasculinity and RMA were found to have significant influence on not just sexual consent attitudes, but also the execution and practice of consent. Colleges are increasing their efforts toward education surrounding the concept of affirmative consent, but seldom do students receive any instruction related to skills regarding how to obtain affirmative consent (Jozkowski et al., 2014). What makes this finding of deficient consent skills even more troublesome is further research has found that women were less likely to be explicit in their consent, especially for sexual activity experienced during a hook-up or sexual activity other than vaginal-penile intercourse (Willis et al., 2019). Based on the literature surrounding issues in communication of consent, it is disconcerting as to why universities are not dedicating more efforts toward increasing consent communication skills. Sexual consent communication education is imperative toward improving the practice of affirmative consent on college campuses. This research highlights the need for comprehensive sexual consent education that does not exclusively focus on increasing knowledge, but emphasizes building confidence and skills for negotiating consent, increasing support for affirmative, verbal consent, and normalizing the act of affirmative consent of sexually engaged students.

This study also identified that while Greek life membership was not significantly associated with RMA, higher levels of hypermasculinity and poor sexual

consent attitudes and practices still exist in comparison with non-Greek peers. Studies have found that despite significant attention directed toward curbing sexual assault incidence among Greek life groups, tailored interventions have only resulted in changes to knowledge and intentions that did not directly affect behavior (Choate, 2003; J. D. Foubert, 2000; Katz & Moore, 2013). However, interventions that concentrated on improving fraternity men's capability and willingness to act as a bystander in potential sexual assault circumstances showed promise (Foubert & Newberry, 2006; Langhinrichsen-Rohling et al., 2011). Previous interventions have focused heavily on education regarding rape myths and binge drinking, but this research highlights that traditional hypermasculine norms of dominance and control over others, participating in sex as a form and assertion of power, and the inability to obtain and interpret consent are more directly associated with Greek life. This finding is integral for universities' design of Greek life sexual assault prevention programs, as targeting both the innate cultural factors of hypermasculinity, as well as concentrating on building healthy attitudes and skills around consent, are likely to be more salient to fraternity members. Additionally, research has shown that peer-led sexual assault prevention is more effective with college men and Greek life participants, which may also be necessary for addressing hypermasculinity and consent, as socio-cultural context and relatability may be necessary to influence behavior (Ortiz & Shafer, 2018).

Limitations

A notable limitation of this study is the small sample size, as the desired sample size could not be reached. Due to the closure of all in-person education and

research during the period of data collection, recruitment strategies were limited to online approaches, primarily through campus student listservs and online class announcements. This reduced both the number and range of participants who could be reached. The reduced sample could have been a factor in the lack of significant results for group affiliations as a broad enough sample could not be attained to test group differences or may have inflated significant results due to the limited perspectives provided.

The generalizability of this study is also a limitation due to several factors. First, the convenience sampling methods utilized were primarily focused on areas of campus where the researcher had previous relationships and connections, which may have unintentionally led to a homogenous sample of participants. For example, most in-class recruitment was completed by faculty in the School of Public Health, where many students may have already been introduced to many of the concepts tested in this study. Also, findings from this study are not representative of all college males within the United States or international students, as the sample was limited to one Mid-Atlantic university. Additionally, the lack of diversity within the sample limits generalizability as the sample did not have broad representation in regards to race, ethnicity, or group affiliation, and limited eligibility to heterosexual males who were sexually active.

Finally, it is important to note that research involving sensitive topics such as hypermasculinity, sexual assault, or sexual practices, may be subject to the possibility of social desirability bias in responses, as participants may be reticent to report undesirable attitudes and behaviors. All surveys were collected anonymously with no

identifiable information in order to reduce the potential for social desirability bias, but it still must be considered given the nature of the research. It is also worth noting that Reling et al. (2018) found that college students who may have been previously exposed or targeted for sexual assault education and prevention or those who participate in the sexual assault prevention activities may bias results.

Directions for future research and interventions

Future research should aim to replicate this study with a more representative sample, as investigating the influence of hypermasculinity on various constructs related to the prevalence of sexual assault is novel to the field of sexual assault prevention. Future studies should also examine whether there is a difference in results in public versus private institutions, large population versus small population colleges, and different locations throughout the United States. Additionally, a more diverse sample, especially in regards to race and sexual orientation, is needed to further explore the research questions proposed, as previous research has found that marginalized communities may navigate the concepts of hypermasculinity, hook-up culture, and consent much differently than their heterosexual, white counterparts (Kimmel, 2008; Reling et al., 2018).

Additionally, qualitative research is necessary to learn more about the nuances of hypermasculinity, hook-up culture, and the attitudes and practices surrounding sexual consent on college campuses. Quantitative measures are limited in their ability to interpret complex issues and are not able to fully capture the depth of information required to understand the behaviors, intentions, and the thought processes behind these matters. Qualitative research could be used to gather further information about

how men approach consent and their cognitive processes behind how they interpret whether they have adequately obtained affirmative consent from their sexual partner. This information would aid in filling in the gaps of the quantitative research in order to construct an all-encompassing intervention for teaching consent negotiation skills, reducing social and cultural barriers of consent, and increasing knowledge.

Based on the relatively subdued scores on the hypermasculinity inventory, an updated inventory using more contemporary thoughts and ideals of masculinity may be needed for current and future generations of college males. Recent research has demonstrated that Millennials and Generation Z are redefining what it means to be male, as men are more engaged in political and social issues (Council et al., 2020), are less likely to embrace conservative white male values (Mueller & Mullenbach, 2018), are more likely to equally endorse physical, emotional, and intellectual strength (Oliffe et al., 2019), and are encountering more barriers regarding intimacy and connection due to the rise in smartphone use (Kaviani & Nelson, 2020). These socio-cultural and psychological changes are bound to have an effect and potentially redefine the concepts of modern masculinity. Future research should continue to explore how these changes may be promoting healthier masculinity or creating new hypermasculine attitudes and beliefs that are not currently captured on existing masculinity inventories.

Conclusion

Sexual assault on college campuses continues to plague institutions, disrupting men and women's abilities to obtain an education in a safe and inclusive environment. Many current interventions for sexual assault prevention are falling

short on modifying behavior and often place the burden of consent responsibility solely on women's shoulders, which continues to perpetuate longstanding rape myths and confusion surrounding what constitutes affirmative consent. While institutions continue to supply education for sexual assault prevention and increasing consent knowledge, these efforts are not creating the long-lasting change in behaviors that are crucial to tackle the issue of sexual assault. This study sheds light on where college males are improving in the knowledge, specifically rape myths, but also demonstrates that transforming behavior and cultivating sexual consent negotiation skills are essential to reducing sexual assault on college campuses. College men must learn to recognize that consent requires both parties to be actively and verbally engaged in the process in order to prevent confusion and miscommunication. They must also examine their own biases, thoughts, and beliefs, and self-reflect on how these may be leading to unhealthy behaviors and motivations for involvement in hook-up culture. By demonstrating the importance of these concepts as they relate to sexual assault, researchers must collaborate with institutions of higher education to best utilize the limited financial and human resources campuses have to provide education, awareness, and workshops to work toward ending sexual assault on college campuses.

Chapter 6: Appendices

Appendix A: IRB Approval



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TO: Andrea Dragan
FROM: University of Maryland College Park (UMCP) IRB

PROJECT TITLE: [1563112-1] The Impact of Hypermasculinity on Undergraduate Men's Perceptions of Sexual Assault and Consent

REFERENCE #:
SUBMISSION TYPE: New Project

ACTION: APPROVED
APPROVAL DATE: February 21, 2020
EXPIRATION DATE: February 20, 2021
REVIEW TYPE: Expedited Review

REVIEW CATEGORY: Expedited review category 7; Waiver of written consent: 45CFR46.117(c)(1)

Thank you for your submission of New Project materials for this project. The University of Maryland College Park (UMCP) IRB has APPROVED your submission. This approval is based on an appropriate risk/benefit ratio and a project design wherein the risks have been minimized. All research must be conducted in accordance with this approved submission.

Prior to submission to the IRB Office, this project received scientific review from the departmental IRB Liaison.

This submission has received Expedited Review based on the applicable federal regulations.

This project has been determined to be a MINIMAL RISK project. Based on the risks, this project requires continuing review by this committee on an annual basis. Please use the appropriate forms for this procedure. Your documentation for continuing review must be received with sufficient time for review and continued approval before the expiration date of February 20, 2021.

Please remember that informed consent is a process beginning with a description of the project and insurance of participant understanding followed by a signed consent form. Informed consent must continue throughout the project via a dialogue between the researcher and research participant. Unless a consent waiver or alteration has been approved, Federal regulations require that each participant receives a copy of the consent document.

Please note that any revision to previously approved materials must be approved by this committee prior to initiation. Please use the appropriate revision forms for this procedure.

All UNANTICIPATED PROBLEMS involving risks to subjects or others (UPIRSOs) and SERIOUS and UNEXPECTED adverse events must be reported promptly to this office. Please use the appropriate reporting forms for this procedure. All FDA and sponsor reporting requirements should also be followed.

All NON-COMPLIANCE issues or COMPLAINTS regarding this project must be reported promptly to this office.

Please note that all research records must be retained for a minimum of seven years after the completion of the project.

If you have any questions, please contact the IRB Office at 301-405-4212 or irb@umd.edu. Please include your project title and reference number in all correspondence with this committee.

This letter has been electronically signed in accordance with all applicable regulations, and a copy is retained within University of Maryland College Park (UMCP) IRB's records.

Appendix B: Recruitment Materials

Listserv Announcement:

Are you an undergraduate male between the ages of 18-25?

You may be eligible to participate in a research study about personal attitudes and beliefs about sex and hooking up on college campuses. The study consists of a one-time, online questionnaire that will take 15-25 minutes to complete. All surveys will be completely anonymous.

All participants who are eligible and complete the survey will be entered into a raffle to win one of fifty \$20 gift cards!

If interested, please click here (<https://tinyurl.com/CPHookUpSurvey>) to complete the survey. This survey can be completed on a computer or a smart phone. If you have questions about this study, please email adragan@umd.edu for more information.

**This study was approved by the UMCP Institutional Review Board under Study ID# 1563112.

Faculty Email

Dear Dr. (insert name),

My name is Andrea Dragan and I am an MPH student in the Behavioral and Community Health department in the School of Public Health. I write today in the hopes that you would be willing to share information about my study to students in your class. This study is being administered in fulfillment of my MPH thesis requirements.

This study will consist of a one-time online survey that takes 15- 25 minutes to complete. Participants must be current undergraduate men at the University between the ages of 18-25. All participants who are eligible and complete the study will be entered into a raffle.

If you are willing to share this information with your students, please send them this announcement/PowerPoint slide below: (will insert Listserv email language here).

If you have any questions, do not hesitate to email me at adragan@umd.edu. This study is supervised by Dr. Sharon Desmond, who can be reached at desmond@umd.edu.

This study was approved by the UMCP Institutional Review Board under Study ID# 1563112.

Social Media Announcement

[Note: Text will be used as stated below. When appropriate to use a picture, one of the pictures included in the flyers below may accompany the text.]

Are you a male undergraduate student? Want to share your opinions about sex on campus?

Complete a one-time, online survey that will take 15- 25 minutes. All surveys will be completely anonymous.

All participants who are eligible and complete the survey will be entered into a raffle to win one of fifty \$20 gift cards! Go to (<https://tinyurl.com/CPHookUpSurvey>) to complete the survey, If you have questions about this study, please email Andrea Dragan at adragan@umd.edu.

PowerPoint Announcement:

Are you an undergraduate male between the ages of 18-25?

- ▶ You may be eligible to participate in a research study about personal attitudes and beliefs about sex and hooking up on college campuses.
- ▶ The study consists of a one-time, online questionnaire that will take 15-25 minutes to complete. All surveys will be completely anonymous.
- ▶ **If interested, please click the link below to complete the survey:**
- ▶ <https://tinyurl.com/CPHookUpSurvey>
- ▶ All participants who are eligible and complete the survey will be entered into a raffle to win a \$20 gift card! At least a 1 out of 4 chance of winning!



Appendix C: Consent Form



Institutional Review Board

1204 Marie Mount Hall • 7814 Regents Drive • College Park, MD 20742 • 301-405-4212 • irb@umd.edu

Appendix B: CONSENT TO PARTICIPATE

Project Title	<i>Personal Beliefs and Attitudes about Sex on College Campuses</i>
Purpose of the Study	This research is being conducted by Andrea Dragan, a Master of Public Health student at the University of Maryland, College Park. We are inviting you to participate in this research project because you are an undergraduate male who qualified for this study. The purpose of this research project is to better understand attitudes and beliefs about sex and hooking up between men and women on college campuses.
Procedures	<p>You will complete a one-time, anonymous, online survey that will take about 15- 25 minutes to complete. The questions will ask you about your personal beliefs and opinions on a variety of topics about sex and hooking up in college. Examples of questions you may be asked include:</p> <p>“I hook up because it allows me to avoid being tied down to one person.” “I feel confident that I could ask for consent from my current partner.” “My attitude regarding casual sex is, the more the better.”</p> <p>Note: There will also be check questions dispersed throughout the survey to ensure you are paying attention. <u>If you do not answer these questions correctly, you will not be eligible for compensation.</u> Please read the questions and respond mindfully.</p> <p>At the end of the survey, you will be taken to another survey to provide your email address for the raffle. This survey will not be connected to your responses in any way.</p>
Potential Risks and Discomforts	There may be some risks from participating in this research study. You may feel uncomfortable answering personal questions about your beliefs and attitudes regarding sex and hooking up. You do not need to answer any question that makes you feel uncomfortable and

	<p>may skip any question you do not wish to answer. There is also a potential risk of breach of confidentiality; however, steps have been taken to mitigate this risk as much as possible. Please see the Confidentiality section below.</p>
Potential Benefits	<p>There are no direct benefits from participating in this research. However, we hope that in the future, other people might benefit from the knowledge obtained that can improve understanding of the beliefs and attitudes of men about sex and hook-up culture on college campuses.</p>
Confidentiality	<p>Your survey responses will be kept confidential and will never be directly connected to your name or any other personally identifiable information. We will only ask you for your email address for compensation purposes, which will be collected in a survey separate from your responses. All email addresses will be deleted immediately following the raffle. No other identifiable information will be collected.</p> <p>Any potential loss of confidentiality will also be minimized by storing all data on a password-protected computer. All data will be collected through Qualtrics, a secure online research survey platform designed to keep your information confidential. Only the Principal Investigator and her advisor will have access to the data.</p> <p><i>If we write a report or article about this research project, your identity will be protected to the maximum extent possible. Your information may be shared with representatives of the University of Maryland, College Park or governmental authorities if you or someone else is in danger or if we are required to do so by law.</i></p>
Compensation	<p>You will be entering into a raffle to win one of fifty \$20 Amazon gift cards. Your chances of winning around approximately 1 in 4.</p> <p><i>You will be responsible for any taxes assessed on the compensation.</i></p>
Right to Withdraw and Questions	<p><i>Your participation in this research is completely voluntary. You may choose not to take part at all. If you decide to participate in this research, you may stop participating at any time. If you decide not to participate in this study or if you stop participating at any time, you will not be penalized or lose any benefits to which you otherwise qualify.</i></p> <p><i>If you are a student, faculty or staff at the University of Maryland-College Park, your grades, standing, and/or employability will not be positively or negatively affected by your decision to participate or not participate in this study.</i></p>

	<p><i>If you decide to stop taking part in the study, if you have questions, concerns, or complaints, or if you need to report an injury related to the research, please contact the investigator:</i></p> <p style="text-align: center;">Andrea Dragan 1204C Marie Mount Hall College Park, MD 20742 adragan@umd.edu (301) 405-7326</p>
<p>Participant Rights</p>	<p><i>If you have questions about your rights as a research participant or wish to report a research-related injury, please contact:</i></p> <p style="text-align: center;">University of Maryland College Park Institutional Review Board Office 1204 Marie Mount Hall College Park, Maryland, 20742 E-mail: irb@umd.edu Telephone: 301-405-0678</p> <p><i>For more information regarding participant rights, please visit:</i> https://research.umd.edu/irb-research-participants</p> <p><i>This research has been reviewed according to the University of Maryland, College Park IRB procedures for research involving human subjects.</i></p>
<p>Statement of Consent</p>	<p><i>By clicking “I Agree/Consent” below, you indicate that you are at least 18 years of age; you have read this consent form or have had it read to you; your questions have been answered to your satisfaction and you voluntarily agree to participate in this research study. You may print a copy of this online consent form if you wish.</i></p> <p><i>If you agree to participate, please click “I Agree/Consent” below.</i></p>

Appendix D: Measures

Screening Questionnaire

Please answer the following questions to determine your eligibility for this study. You must respond to all questions in order to determine your eligibility.

1. How old are you?

- 17 or younger
- 18
- 19
- 20
- 21
- 22
- 23
- 24
- 25
- 26 or older

2. What is your primary status on campus?

- Faculty
- Staff
- Undergraduate Student
- Graduate Student
- Other

3. What is your current gender identity?

- Male
- Female
- Trans Male/Trans Man
- Trans Female/Trans Woman
- Genderqueer/Gender Non-Conforming
- Different Identity (please specify) _____

4. Which of the following best describes your sexual orientation?

- Heterosexual/straight
- Mostly heterosexual/straight
- Bisexual/attracted to men and women equally
- Mostly homosexual/lesbian/gay
- Homosexual/lesbian/gay

- Not listed above (please specify)_____

5. Have you ever engaged in sexual activity before?

- Yes
 No
 Prefer Not to Say

Auburn Differential Masculinity Inventory (ADMI-60) (Burk et al., 2004)

The following statements describe certain beliefs. Please read each item carefully and decide how well it describes you.

Rate each item on the following 5-point scale: 4= Very much like me, 3= Like me, 2= A little like me, 1= Not much like me, or 0= Not at all like me.

1. If another man made a pass at my girlfriend/wife, I would tell him off
2. I believe sometimes you've got to fight or people will walk all over you
3. I think men who show their emotions frequently are sissies
4. I think men who show they are afraid are weak
5. I think men who cry are weak
6. Even if I was afraid I would never admit it
7. I consider men superior to women in intellect
8. I think women who say they are feminists are just trying to be like men
9. I think women who are too independent need to be knocked down a peg or two
10. I don't feel guilty for long when I cheat on my girlfriend/wife
11. I know feminists want to be like men because men are better than women
12. Women, generally, are not as smart as men
13. My attitude regarding casual sex is "the more the better"
14. There are two kinds of women: the kind I date and the kind I would marry
15. I like to tell stories of my sexual experiences to my male friends

16. I think it's okay for men to be a little rough during sex
17. If a woman struggles while we are having sex, it makes me feel strong
18. I am my own master; no one tells me what to do
19. I try to avoid physical contact
20. If someone challenges me, I let him see my anger
21. I wouldn't have sex with a woman who had been drinking
22. Sometimes I have to threaten people to make them do what they should
23. Many men are not as tough as me
24. I value power over other people
25. If a woman puts up a fight while we are having sex, it make the sex more exciting
26. I don't mind using verbal or physical threats to get what I want
27. I think it is worse for a woman to be sexually unfaithful than for a man to be unfaithful
28. I think it is okay for teenage boys to have sex
29. I prefer to watch contact sports like football or boxing
30. If I had a son I'd be sure to show him what a real man would do
31. I notice women most for their physical characteristics like their breasts or body shape
32. When something bad happens to me I feel sad
33. I don't mind using physical violence to defend what I have
34. I think men should be generally aggressive in their behavior
35. I would initiate a fight if someone threatened me
36. Women need men to help them make up their minds
37. If some guy tries to make me look like a fool, I'll get him back

38. I consider myself quite superior to most other men
39. I get mad when something bad happens to me
40. I like to be the boss
41. I would fight to defend myself if the other person threw the first punch
42. If another man made a pass at my girlfriend/wife, I would want to beat him up
43. Sometimes I have to threaten people to make them do what I want
44. I think it's okay to have sex with a woman who is drunk
45. I feel it is unfair for a woman to start something sexual but refuse to go through with it
46. I often get mad

Updated Illinois Rape Myth Acceptance Scale (IRMA)
(McMahon & Farmer, 2011)

Rate each item on the following 5-point scale: 1= Strongly agree, 2= Agree, 3= Neither agree or disagree, 4= Disagree or 5= Strongly disagree.

1. If a girl is raped while she is drunk, she is at least somewhat responsible for letting things get out of hand.
2. When girls go to parties wearing slutty clothes, they are asking for trouble.
3. If a girl goes to a room alone with a guy at a party, it is her own fault if she is raped.
4. If a girl acts like a slut, eventually she is going to get into trouble.
5. When girls get raped, it's often because the way they said "no" was unclear.
6. If a girl initiates kissing or hooking up, she should not be surprised if a guy assumes she wants to have sex.
7. When guys rape, it is usually because of their strong desire for sex.
8. Guys don't usually intend to force sex on a girl, but sometimes they get too sexually carried away.

9. Rape happens when a guy's sex drive goes out of control.
10. If a guy is drunk, he might rape someone unintentionally.
11. It shouldn't be considered rape if a guy is drunk and didn't realize what he was doing.
12. If both people are drunk, it can't be rape.
13. If a girl doesn't physically resist sex—even if protesting verbally—it can't be considered rape.
14. If a girl doesn't physically fight back, you can't really say it was rape.
15. A rape probably doesn't happen if a girl doesn't have any bruises or marks.
16. If the accused "rapist" doesn't have a weapon, you really can't call it rape.
17. If a girl doesn't say "no" she can't claim rape.
18. A lot of times, girls who say they were raped agreed to have sex and then regret it.
19. Rape accusations are often used as a way of getting back at guys.
20. A lot of times, girls who say they were raped often led the guy on and then had regrets.
21. A lot of times, girls who claim they were raped have emotional problems.
22. Girls who are caught cheating on their boyfriends sometimes claim it was rape.

The Sexual Consent Scale–Revised (SCS-R) (Humphreys & Brousseau, 2010)

The following statements describe certain beliefs about consent. Please read each item carefully and decide how well it describes you.

Rate each item on the following 7-point scale: 1= Strongly disagree, 2= Disagree, 3= Somewhat disagree, 4= Neither agree or disagree, 5= Somewhat agree, 6= Agree, or 7= Strongly agree

1. I would have difficulty asking for consent because it would spoil the mood
2. I am worried that my partner might think I'm weird or strange if I asked for sexual consent before starting any sexual activity

3. I would have difficulty asking for consent because it doesn't really fit with how I like to engage in sexual activity
4. I would worry that if other people knew I asked for sexual consent before starting sexual activity, that they would think I was weird or strange
5. I think that verbally asking for sexual consent is awkward
6. I have not asked for sexual consent (or given my consent) at times because I felt that it might backfire and I wouldn't end up having sex
7. I believe that verbally asking for sexual consent reduces the pleasure of the encounter
8. I would have a hard time verbalizing my consent in a sexual encounter because I am too shy
9. I feel confident that I could ask for consent from a new sexual partner
10. I would not want to ask a partner for consent because it would remind me that I'm sexually active
11. I feel confident that I could ask for consent from my current partner
12. I feel that sexual consent should always be obtained before the start of any sexual activity
13. I believe that asking for sexual consent is in my best interest because it reduces any misinterpretations that might arise
14. I think it is equally important to obtain sexual consent in all relationships regardless of whether or not they have had sex before
15. I feel that verbally asking for sexual consent should occur before proceeding with any sexual activity
16. When initiating sexual activity, I believe that one should always assume they do not have sexual consent
17. I believe that it is just as necessary to obtain consent for genital fondling as it is for sexual intercourse
18. Most people that I care about feel that asking for sexual consent is something I should do

19. I think that consent should be asked before any kind of sexual behavior, including kissing or petting
20. I feel it is the responsibility of both partners to make sure sexual consent is established before sexual activity begins
21. Before making sexual advances, I think that one should assume “no” until there is clear indication to proceed
22. Not asking for sexual consent some of the time is okay
23. Typically I communicate sexual consent to my partner using nonverbal signals and body language
24. It is easy to accurately read my current (or most recent) partner’s nonverbal signals as indicating consent or non-consent to sexual activity
25. Typically I ask for consent by making a sexual advance and waiting for a reaction, so I know whether or not to continue
26. I don’t have to ask or give my partner sexual consent because my partner knows me well enough
27. I don’t have to ask or give my partner sexual consent because I have a lot of trust in my partner to “do the right thing”
28. I always verbally ask for consent before I initiate a sexual encounter
29. I think that obtaining sexual consent is more necessary in a new relationship than in a committed relationship
30. I think that obtaining sexual consent is more necessary in a casual sexual encounter than in a committed relationship
31. I believe that the need for asking for sexual consent decreases as the length of an intimate relationship increases
32. I believe it is enough to ask for consent at the beginning of a sexual encounter
33. I believe that sexual intercourse is the only sexual activity that requires explicit verbal consent
34. I believe that partners are less likely to ask for sexual consent the longer they are in a relationship

35. If consent for sexual intercourse is established, petting and fondling can be assumed

Brief Fear of Negative Evaluation-II (BFNE-II) (Carleton, Collimore, & Asmundson, 2007)

Please select the number that best corresponds to how much you agree with each item: Not at all characteristic of me (=1), A little characteristic of me (=2), Somewhat characteristic of me (=3), Very characteristic of me (=4) or Extremely characteristic of me (=5)

1. I worry about what other people will think of me even when I know it doesn't make any difference.
2. It bothers me when people form an unfavorable impression of me.
3. I am frequently afraid of other people noticing my shortcomings.
4. I worry about what kind of impression I make on people.
5. I am afraid that others will not approve of me.
6. I am afraid that other people will find fault with me.
7. I am concerned about other people's opinions of me.
8. When I am talking to someone, I worry about what they may be thinking about me.
9. I am usually worried about what kind of impression I make.
10. If I know someone is judging me, it tends to bother me.
11. Sometimes I think I am too concerned with what other people think of me.
12. I often worry that I will say or do wrong things.

Iowa-Netherlands Comparison Orientation Scale (INCOM-Short) (Gibbons & Buunk, 1999)

Most people compare themselves from time to time with others. For example, they may compare the way they feel, their opinions, their abilities, and/or their situation with those of other people. There is nothing particularly 'good' or 'bad' about this type of comparison, and some people do it more than others.

We would like to find out how often you compare yourself with other people. To do that we would like to ask you to indicate how much you agree with each statement below: 1= I disagree strongly, 2= I disagree, 3= I neither agree nor disagree, 4= I agree, and 5= I agree strongly

1. I often compare myself with others with respect to what I have accomplished in life
2. I always pay a lot of attention to how I do things compared with how others do things
3. I often compare how my loved ones (boy or girlfriend, family members, etc.) are doing with how others are doing
4. I am not the type of person who compares often with others
5. If I want to find out how well I have done something, I compare what I have done with how others have done
6. I often compare how I am doing socially (e.g., social skills, popularity) with other people

Hookup Motives Questionnaire (HMQ) (Kenney et al., 2014)

Following is a list of reasons college students give for hooking up. Thinking of all the times you have hooked up, how often would you say that you hook up for each of the following reasons?"

1 = (almost never/never), 2 = (some of the time), 3 = (half the time), 4 = (most of the time), 5 = (almost always/always).

1. I hook up because it allows me to avoid being tied down to one person.
2. Hooking up provides me with "friends with benefits."
3. Hooking up provides me with sexual benefits without a committed relationship.
4. Hooking up enables me to have multiple partners.
5. I hook up because hooking up is a way to find a relationship.
6. I hook up because it is the first step to forming a committed relationship.
7. I hook up because it can help me decide if I want something more serious with my hookup partner.
8. I hook up because it's fun.

9. I hook up because it's sexually pleasurable.
10. I hook up because I'm attracted to the person.
11. I hook up because it's exciting.
12. I hook up because I feel pressure from my friends to hook up.
13. I hook up because my friends will tease me if I don't.
14. I hook up because it helps me fit in.
15. I hook up because I feel I'll be left out if I don't.

Demographic information

- 1) What year of school are you in this semester? (Select one)
- 1st year
 - 2nd year
 - 3rd year
 - 4th year
 - 5th or more year
- 2) What is your race? (Select one)
- American Indian/Alaskan Native
 - Asian/Asian American
 - Black/African American
 - Native Hawaiian/Pacific Islander
 - White
 - Two or more races/biracial
 - Other (please specify): _____
- 3) What is your Ethnicity? (Select one)
- Hispanic or Latino/a
 - Not Hispanic or Latino/a
- 4) Are you an International Student? (Select one)
- Yes
 - No
- 5) Are you a member of any of the following groups? (Please select all that apply)
- NCAA UMD athletic team
 - Club or intramural sports

- Greek Life (Fraternity or Sorority)
 - Academic groups
 - Religious student organization
 - Performing Arts groups
 - Student Government Association (SGA)
 - Other
 - None of the above
- 6) Which political party do you align with most closely? (Select one)
- Republican
 - Democrat
 - Independent
 - Libertarian
 - Green
 - None of the above

Appendix E: Debriefing Script

Thank you for your participation in our research study. To enter the raffle for 1 of 50 \$20 gift cards, please click the forward arrow at the bottom of this page, where you will be redirected to a separate survey to enter your email address.

To learn more about this study, please read below.

I would like to discuss with you in more detail the study you just participated in and to explain exactly what we were trying to study.

As you may know, scientific methods sometimes require that participants in research studies not be given complete information about the research until after the study is completed. We do not always tell people everything at the beginning of a study because we do not want to influence your responses. If we tell people what the purpose of the study is and what we predict about how they will respond, then their responses would not be an honest indication of what they believe or how they act during their everyday lives.

While this study is hoping to better understand attitudes and beliefs about sex and hooking up between men and women on college campuses, we are also examining how hypermasculinity affects men's beliefs, attitudes, and behaviors surrounding sex, consent, and hook-up culture. We are also examining how group affiliation and social comparison, or the need to be accepted by your peers, affects your beliefs about these concepts. We apologize for having to keep this information from you until the end of the study.

If other people knew the true purpose of the study, it might affect how they answer questions, so we are asking you not to share the information we just discussed.

Your answers will never be connected to your personal information, so anything you shared today will remain completely private. As a token of our appreciation, we now wish to invite you to enter our raffle to win 1 of 50 gift cards worth \$20. If you would like to enter the raffle, please click the link below and you will be taken to a separate survey to provide your email address. This will not be linked in any way to your responses on this survey.

If you have any questions, please feel free to contact me.

Andrea Dragan
Email: adragan@umd.edu
Phone: (301) 405-7326

If you have questions about your rights as a research participant or wish to report a research-related injury, please contact:

University of Maryland- Institutional Review Board Office
E-mail: irb@umd.edu
Phone: 301-405-0678

Thank you again for your participation.

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