



Blame attribution in sexual victimization

Carin Perilloux^{*}, Joshua D. Duntley¹, David M. Buss

University of Texas at Austin, Austin, TX 78712, United States



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ABSTRACT

The current study explored how victims and third-parties attribute blame and perpetrator motivation for actual sexual victimization experiences. Although we do not assert that victims are responsible for perpetrators' behavior, we found that some victims do not allocate all blame to their perpetrator. We sought to examine how victims and third-parties allocate blame in instances of actual completed and attempted sexual victimization and how they perceived perpetrator motivations. Victims of completed rape ($n = 49$) and attempted sexual assault ($n = 91$), and third-parties who knew a victim of sexual assault ($n = 152$) allocated blame across multiple targets: perpetrator, self/victim, friends, family, and the situation. Participants also described their perceptions of perpetrator's motivation for the sexual assault. Victims tended to assign more blame to themselves than third-parties assigned to victims. Furthermore, victims perceived perpetrators as being more sexually-motivated than third-parties did, who viewed perpetrators as more power-motivated. Results suggest that perceptions of rape and sexual assault significantly differ between victims and third-party individuals who have never directly experienced such a trauma.

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1. Introduction

Research devoted to understanding the allocation of blame and responsibility for sexual victimization (for a review, see Pollard, 1992) indicates that both personal and contextual variables influence the degree to which perpetrators and victims are blamed. Traits such as rape myth acceptance and hostile masculinity are positively correlated with tendencies to blame rape victims (Abrams, Viki, Masser, & Bohner, 2003; Cohn, Dupuis, & Brown, 2009; Mason, Riger, & Foley, 2004). Victim-blaming is also associated with victim behaviors such as prior willingness to have consensual romantic contact with the victimizer, wearing revealing clothing, or accompanying one's date to his home (Bell, Kuriloff, & Lottes, 1994; Maurer & Robinson, 2008; Pollard, 1992). These studies' methods range from investigations of victim self-blame among female sexual victims to manipulations of vignettes rated by general samples of participants (i.e., participants not selected by victimization status) to identify variables that influence blame and responsibility attributions. The current study examined how female victims and women in whom victims have confided allocate blame for an actual sexual victimization experience.

Although early studies of victim-blaming reflected previously pervasive negative stereotypes about rape and rape victims (for a review, see Suarez & Gadalla, 2010), subsequent research shows that friends of rape victims do not blame their friends and most felt their relationship grew closer after the disclosure (Ahrens & Campbell, 2000). Even though individuals assign most of the blame to the perpetrator, they still indicate that the victim is not completely blameless (e.g., "she should not have drunk so much; she should not have put herself in that situation"). This trend is present in both third-party ratings and ratings made by the victims themselves (Testa & Livingston, 1999; Ullman & Najdowski, 2010).

Not only do contextual variables (e.g., victim drinking) influence blame ratings, perceptions – right or wrong – of the perpetrator's underlying motivation behind the act might influence how blame is attributed. It has become the standard view in social science that the motivation for rape is more about power than about sex (e.g., Brownmiller, 1975). This view has been challenged by researchers arguing that there need not be a singular motivation for sexual assault; different rapists have different motivations, and some might be motivated by power, some by sex, and some by combinations of power and sex (Buss & Malamuth, 1996; Jones, 1999; McKibbin, Shackelford, Goetz, & Starratt, 2008; Thornhill & Palmer, 2000).

Self-blame appears to influence many aspects of victim psychology. Victims who blame themselves feel more guilt, shame, and self-loathing and are more likely to experience post-traumatic stress disorder (Arata & Burkhart, 1996), but the tendency to blame

* Corresponding author. Present address: Psychology Department, Union College, 807 Union Street, Schenectady, NY 12308, United States.

E-mail address: periloc@union.edu (C. Perilloux).

¹ Member of the Criminal Justice and Psychology Programs, The Richard Stockton College of New Jersey, United States.

oneself after sexual victimization is also associated with certain coping mechanisms. For example, feeling self-blame implies that one has some control over the outcome and this control can lead to greater confidence to avoid similar future victimizations (Heath & Davidson, 1988). The key appears to be the type of self-blame. Individuals who engage in self-blame based on a perceived *characterological defect* are more likely to experience post-traumatic stress disorder and to feel helpless and guilty. In contrast, individuals who engage in self-blame based on a perceived *behavioral mistake* are more likely to perceive control over the situation and feel more confident in their ability to take precautions to avoid similar victimization in the future (Arata & Burkhart, 1996; Breitenbecher, 2006; Heath & Davidson, 1988). Other than perpetrators, victims usually have the most direct, first-hand information about behaviors and decisions leading up to the event and thus might have insights into which tactics were actually effective and which were not. Conversely, the more victims blame their perpetrator or "society" for their victimization, the more likely they are to experience anger and feelings of injustice, and likewise more fear since they perceive victimization as less personally controllable (Brockway & Heath, 1998). Perpetrator blame varies with personal and situational factors; for example, perpetrators who have a "good reputation" are blamed less (Cohn et al., 2009) and perpetrators whose victims start resisting earlier rather than later are blamed more (Kopper, 1996).

Victims are also aware of the potential social costs of public knowledge of the victimization (Perilloux, Duntley, & Buss, 2012; Ullman, 1996). Rape victims often keep their victimization secret due to the fear that others will blame them or judge them negatively (Suarez & Gadalla, 2010; Ullman, 1996). These consequences prevent many rape victims from coming forward to disclose to friends and family, and prevents police investigations most rapes (Maddox, Lee, & Barker, 2012; Wolitzky-Taylor et al., 2011). Indeed, victims experience varying levels of psychological pain themselves: particularly women who are of reproductive age and mated (Thornhill & Thornhill, 1990). Concerns about others' attributions could cause victims to perceive detrimental effects to their reputation, their value as a romantic partner, and even their own self-esteem (Perilloux et al., 2012).

The current study assesses whether victims and third-parties differ in their perceptions of blame and causality on the part of perpetrators and victims of actual instances of sexual victimization. We collected data from women who self-reported about a completed rape, women who self-reported about an attempted sexual victimization, and women who knew someone well who was sexually victimized. By comparing how these groups of women attributed motivations and assigned blame, we could identify whether first-hand experience of sexual victimization results in different perceptions of responsibility.

2. Method

2.1. Participants

The current study represents a subset of a larger online survey of victimization experiences approved by our university's institutional review board. Participants were recruited as volunteers from university organizations or to partially satisfy a research requirement in psychology courses at a large Southern university. For the current study, we included participants from the original study who fit one of three categories: women who reported a completed rape that occurred after puberty, defined here as age 13, ($n = 49$; current age: $M = 20.31$, $SD = 2.56$), women who experienced an attempted sexual victimization after puberty ($n = 91$; current age: $M = 19.78$, $SD = 1.67$), or women who indicated that they knew a

woman who had experienced any sexual victimization after puberty, attempted or completed, ($n = 152$; current age: $M = 20.28$, $SD = 3.00$). Because we cannot know the perpetrator's true intended outcome in an attempted victimization, women reporting any form of attempted victimization (e.g., attempted molestation, attempted rape) comprised the attempted group.

2.2. Materials

This survey defined sexual victimization as follows:

"Sexual victimization refers to being a nonconsensual (unwilling) participant in sexual activity with another person. Engaging in sexual activity with another person without your consent, against your wishes, or against your will may all be considered examples of sexual victimization. Another person attempting to get you to engage in sexual activity without your consent, against your wishes, or against your will may also be considered sexual victimization. It can be committed by a wide range of people, including strangers, acquaintances, current or ex-romantic partners, dates, fellow employees, neighbors, fellow students, and others. Sexual activity may include, but is not limited to, intercourse, anal sex, oral sex, or penetration."

Participants indicated whether they had experienced an attempted or completed victimization based on this definition by responding to the question "Was this experience an attempted or a completed victimization?" Participants who indicated that they had been victimized completed the victim version of the instrument concerning the sexual victimization experience they identified as the most vivid in their memory. Participants who indicated they had never been victimized were asked if they knew anyone who had been. Those who answered affirmatively completed the third-party version of the instrument. Those who did not complete an unrelated task. The full instruments consisted of about 200 questions regarding their most vividly recalled first-hand sexual victimization experience or third-party knowledge of an attempted or completed victimization. The questions ranged from factual details, such as time and location, to more subjective details, such as perceptions of blame and attributions of perpetrator motivation (full instrument available from the first author).

Participants divided up the blame for the victimization between the perpetrator, the victim, family members, friends, the situation, and other. Participants assigned percentages to each category (between 0% and 100%), provided the categories summed to 100% total. We further examined why victims might blame themselves using their open-ended responses to "Please explain why you assigned the blame in this way." Three research assistants, unacquainted with the research goals, read through the responses and identified the most common items mentioned: the five most frequent reasons for self-blame were: victim was intoxicated, victim put herself into a bad situation, victim did not resist enough, victim sent mixed messages, and victim was too trusting. The research assistants then coded each response into these categories.² We also examined how participants attributed the perpetrator's motivation with an open-ended question asking "Please explain what you think the person hoped to gain by sexually victimizing you [the victim]. In other words, WHY did this person sexually victimize you [the victim]?" The same research assistants determined the most frequency categories and coded the responses as: sex, power, preserve or start a relationship, opportunity arose, perpetrator had a mental problem, or perpetrator was intoxicated. In the case of multiple categories

² The three research assistants ranged in agreement from 85% to 100% before discussion across the variables they coded. 100% agreement was reached by discussion.

mentioned in a single response, the first one mentioned was recorded as the response.

2.3. Procedure

Participants were instructed to access the online survey when they had the time and privacy to complete the entire instrument, about 45 minutes. After completing informed consent on the website, participants were directed to the proper instrument based on whether they had experienced victimization first-hand or knew about someone else who had been victimized. Finally, participants read a debriefing statement online.

3. Results

The results include only the women who responded to the applicable questions; because each question was optional, there were several women who chose not to answer certain questions and therefore the *n*s vary by analysis. We conducted a 6 (blame targets: perpetrator, victim, situation, friends, family, other) \times 3 (participant group: completed, attempted, third-party) mixed model ANOVA. The interaction of blame target and participant group was significant, $F(10, 1295) = 9.96, p < .001$, as were the main effects of blame target, $F(5, 1295) = 1150.75, p < .001$, and group, $F(1, 259) = 4.65, p < .01$. As shown in Fig. 1, the three groups of women assigned similar proportions of blame to the situation, friends, and “other” categories; the interaction was driven by differences in the blame of the perpetrator and of the victim herself, and also family members. Post-hoc tests showed that the patterns of the completed and attempted groups did not differ, but the third-party group assigned significantly more blame to the perpetrator (82%) than did the victims in the completed (68%; Tukey's HSD $p < .001$) and attempted groups (71%; Tukey's HSD $p = .001$), which did not differ from one another (Tukey's HSD $p = .56$). Women in the third-party group also assigned less blame to the victim (8%) than victims in the completed (19%; Tukey's HSD $p < .001$) and attempted groups (19%; Tukey's HSD $p < .001$) blamed themselves.

The third-party group also assigned significantly more blame to family members (2%) than did victims in the attempted group (0%; Tukey's HSD $p < .05$).

Although there were significant differences in the pattern of blame, all three groups of women assigned the most blame to the perpetrator. Participants offered multiple reasons to explain why the perpetrator committed the victimization, as illustrated in Fig. 2. To compare attribution patterns across the groups, we conducted a chi-square cross-tabs analysis which required us to remove the extremely low base-rate attributions (*mental illness* ($n = 7$), *perpetrator was intoxicated* ($n = 3$)) to satisfy the requirement of having expected values of at least five in each cell. This analysis revealed that attributions of the perpetrators' motivation differed by participant group, $\chi^2(6, N = 271) = 14.28, p = .03$. Women in the completed and attempted groups were more likely to cite *sex* and less likely to cite *power* than women in the third-party group. Women in the attempted group were more likely to cite *preserve/start relationship* and less likely to cite *opportunity arose* than women in the completed and third-party groups.

We examined whether perpetrator motivation was related to victim blame scores across the participant groups. A 4 (perpetrator motivation: sex, power, opportunity arose, start/preserve relationship) \times 3 (participant group: completed, attempted, third-party) ANOVA on victim blame scores revealed a significant interaction, $F(6, 264) = 2.75, p = .01$, and a significant main effect of group, $F(2, 264) = 4.45, p = .01$; the main effect of perpetrator motivation was not significant, $F(3, 264) = 1.85, p = .14$. As shown in Fig. 3, the significant interaction is driven by group differences in victim blame when the perceived perpetrator motivation was *sex* or *power*; no significant differences existed for the *start/preserve relationship* or *opportunity arose* categories. When the motivation was perceived to be *sex*, victims in the completed and attempted groups assigned significantly more victim blame than third-parties. When the motivation was perceived to be *power*, victims in the attempted group assigned significantly more victim blame than did third-parties or victims in the completed group.

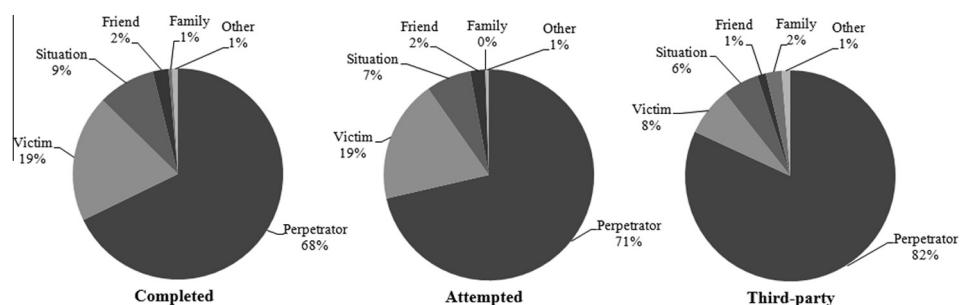


Fig. 1. Blame attribution across targets by participant group.

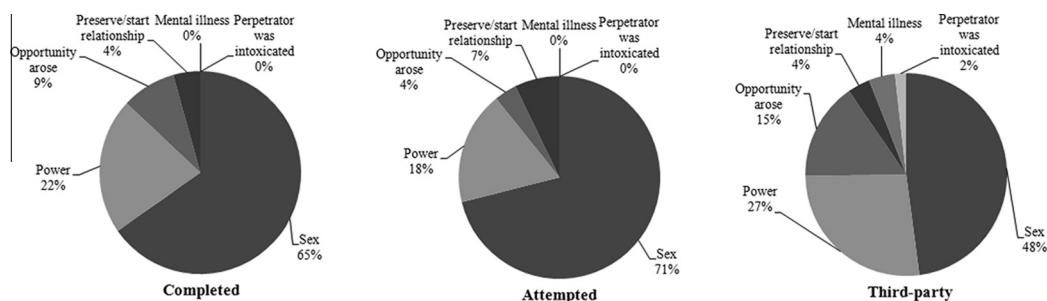


Fig. 2. Perceived perpetrator motivation by participant group.

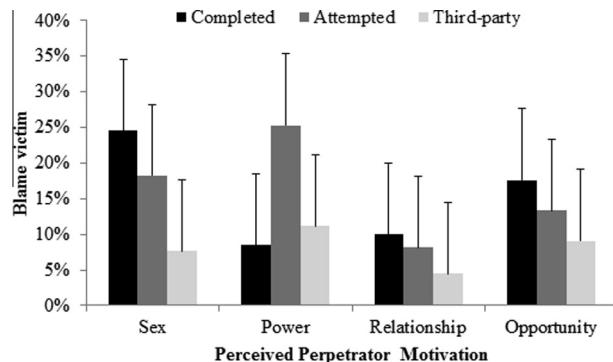


Fig. 3. Degree of victim blame by participant group and perceived perpetrator motivation.

We next explored why victims would assign blame to themselves, and compared reasons for self-blame between completed and attempted rape victims. The most frequent reasons for self-blame fell into five categories: putting one's self into a bad situation, being intoxicated, not resisting enough, sending mixed messages, and being too trusting. The percentages of individuals citing each reason are depicted by group in Fig. 4. Completed rape victims (25%) compared to attempted rape victims (11%) were significantly more likely to indicate that they did not resist enough, as a reason for self-blame, $\chi^2(1, N = 136) = 4.26, p = .04$. Women in the attempted group (41%) compared to the completed group (24%) were more likely to list physical resistance as an effective resistance tactic, $\chi^2(1, N = 136) = 3.23, p = .07$. There was a trend for attempted rape victims (15%) to indicate more often than completed rape victims (4%) that they assigned blame to themselves for sending mixed messages, $\chi^2(1, N = 136) = 3.49, p = .06$. More completed rape victims (29%) than attempted rape victims (19%) listed their own intoxication as a reason for self-blame, though this difference was not significant, $\chi^2(1, N = 136) = 1.71, p = .19$. Relatedly, victims of completed rape self-reported greater alcohol intoxication levels at the time of the victimization ($M = 4.35, SD = 2.79$) than attempted rape victims ($M = 3.26, SD = 2.49$), $t(114) = 2.17, p = .03$. More attempted rape victims (47%) than completed rape victims (33%) cited putting themselves in a bad situation as the reason for self-blame, but this difference was not significant, $\chi^2(1, N = 136) = 2.24, p = .13$. Attempted (6%) and completed (2%) rape victims listed being too trusting as a reason for self-blame in a small number of cases, $\chi^2(1, N = 136) = 0.95, p = .33$.

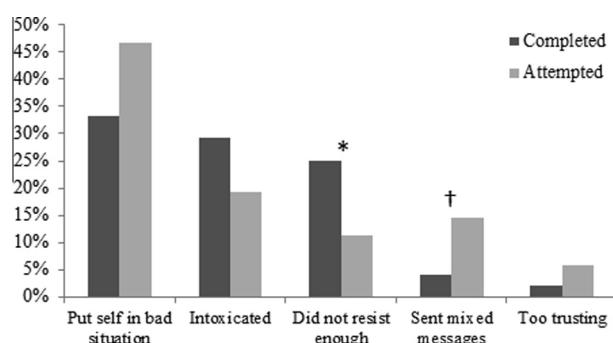


Fig. 4. Reasons for self-blame cited by attempted and completed rape victims. Note. Because the question was open-ended, some individuals indicated more than one of these reasons thus the percentages might not sum to 100. * $p < .05$; † $p < .10$.

4. Discussion

One of the main findings here is that third-parties were even less likely to blame the victim than the victims themselves; specifically, third-parties assigned nearly all blame to the perpetrator and very little to the victim, the situation, or any other individual. Third-parties also differed from victims in their perception of the perpetrator – they were much less likely than actual victims to believe him to be sexually-motivated. Finally, third-parties were relatively single-minded in their avoidance of blaming the victim: their victim blame ratings were consistently low regardless of their perceptions of the perpetrator's motivation. Together, these patterns indicate that third-parties are unlikely to believe that the victim provoked the assault. These findings are relevant to the widely-known tendency for rape to be seriously under-reported and could encourage victims to come forward after discovering that many of their peers overwhelmingly blame the perpetrator rather than the victim. Peer support, however, would not necessarily nullify the more general reputational effects victims anticipate (Perilloux et al., 2012), so future research would be required to tease apart these conflicting effects on actual reporting rates.

Victims in both the completed and attempted groups assigned nearly a fifth of the blame to themselves. As others have suggested, this self-blame might serve as a coping mechanism whereby some self-blame – specifically behavioral self-blame – actually increases feelings of control over the situation, prompts future precautionary behavior, and decreases anxiety (Breitenbecher, 2006; Heath & Davidson, 1988). Alternatively, perhaps victims do have genuine insight into the causal chain that led to the rape. We are, of course, not asserting that victims are responsible for the perpetrator's behavior. Perhaps victims, compared to third-party individuals who were not present during the assault, have special knowledge based on their experience of the types of actions, behaviors, and intuitions. Victims did, in fact, list well-documented predictors of completed rape, such as intoxication (Burchfield & Felson, 2004; Muehlenhard & Linton, 1987; Testa & Livingston, 2009) and lack of physical resistance (Ullman, 1998) when explaining why they assigned blame to themselves, which is also consistent with patterns found in counterfactual research on rape victims (Branscombe, Wohl, Owen, Allison, & N'gaba, 2003). The current results showing that victims in the completed group were more likely to blame themselves for not resisting enough compared to victims in the attempted group comports with previous research showing that women who physically resist were less likely to have experienced a completed rape than women who did not physically resist (Ullman, 1998). The women in the completed rape group were also more likely to be intoxicated, possibly rendering them less effective at resisting compared to women in the attempted group.

Victims also perceived the perpetrators' motivations differently, with victimized women more likely to view the perpetrator's motivation as sex-related and third-parties more likely to view it as power-related. The perpetrator's perceived motivation predicted self-blame: relative to third-parties, completed and attempted rape victims were more likely to blame themselves if they believed the perpetrator was motivated by a desire for sex, while attempted rape victims were also more likely to blame themselves if they believed the perpetrator was motivated by a desire for power. The finding that victims of completed sexual assault, compared to third-party individuals not present, perceive higher levels of sexual motivation, supports the more nuanced conceptualization of perpetrator motivation as a result of not only power motives but also sexual motives. If viewing rape as power-related leads to less victim blaming by third-parties, then one could argue that this perception is useful, but if victims themselves perceive the act as

sexual, then it might be a disservice to victims to characterize rape as solely a crime of power and entirely irrelevant to sex. The current results are thus more consistent with recent conceptions of the interplay of power and sex in rapists' motivations (e.g., Monahan, Marolla, & Bromley, 2005). Future studies could use a more directed approach, asking victims to rate the degree to which they believed power and sex motivated the rapist; these ratings could then be correlated with blame assignment to see whether patterns emerge. Furthermore, subsequent studies could examine the cues victims use to infer perpetrators' motivations.

Due to the sampling method, there is a limit to which we can draw conclusions about group differences. In particular, the third-parties in this study consisted of women who knew a victim. Given the low reporting rate of rape (Langton, Berzofsky, Krebs, & Smiley-McDonald, 2012) and victims' reticence about sharing their stories, perhaps these third-parties represent a particularly compassionate and empathetic group because they were chosen by victims for disclosure. Victims might also have been more likely to tell others (third-parties) about victimization experiences if they felt it was quite clear that they were not to blame, namely stranger rape scenarios or instances in which they were not intoxicated (Littleton, Grills-Tauechel, & Axsom, 2009; Sims, Noel, & Maisto, 2007; Ullman & Najdowski, 2010). The majority of participants in both the first-person and third-party samples, however, reported victimization experiences involving known perpetrators and many involved alcohol. So these results might be broadly applicable given the much higher rate of acquaintance rape than stranger rape (Tjaden & Thoennes, 2000).

Our sample was limited in scope. We were not able to collect information about many demographic variables of interest, but given the university population from which these groups were drawn, our sample might be relatively low in ethnic and socioeconomic diversity. Future studies designed to obtain more representative samples could bolster the current findings. Furthermore, our study examined female participants exclusively; although women are more likely than men to be sexually victimized, future research could examine whether similar trends exist among male victims and male third-parties. Finally, our definition of sexual victimization was purposefully broad to elicit as much information about as many different experiences as possible, but this definition might have limited the specificity of our group distinctions. The classification of participants to the completed rape group was straightforward from their responses on the survey, whereas the attempted group consisted of women who indicated that they believed the experience was an attempted victimization, but because they – and we – cannot be sure which outcome the perpetrator was trying to obtain (e.g., rape, molestation), we included all such women in the attempted group. This method of inclusion might have clouded our results, but given the relative similarity of responses by both victim groups, this seems unlikely.

5. Conclusion

The current study revealed that victims and third-parties have somewhat different perceptions of sexual victimization experiences – third-parties blame the victims even less than the victims blame themselves and perceive the act as more power-motivated than sexually-driven. Victims, on the other hand, do engage in self-blame but seem to focus on behaviors such as alcohol intoxication and physical resistance, rather than character flaws, which implies they might be using self-blame to cope by increasing feelings of control over future avoidance and prevention of similar victimization. Overall, the message here is a positive one: victims might be cultivating a sense of control and the individuals with whom they share their stories appear willing to give them the

benefit of the doubt in their journey from acknowledgement to recovery.

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