"People laugh, don’t believe it": Unveiling Male Rape Myths through a Mixed Methods Exploration of Professionals, Survivors, and Community Insights.

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March 2024

A thesis submitted in fulfilment of the University’s requirements for the Degree of Doctor of Philosophy

Declaration

To the best of my knowledge, I confirm that the work in this thesis is my original work undertaken for the Doctor of Philosophy in the Faculty of Health & Life Sciences, De Montfort University. I confirm that no material of this thesis has been submitted for any other degree or qualification at any other university. I also declare that parts of this thesis have been submitted for publication and conferences.

Abstract

Research shows that misconceptions, or rape myths, about male sexual violence survivors are prevalent in England. These myths lead to adverse outcomes such as obstacles in reporting incidents, secondary victimisation, and hesitation in seeking medical and psychological support. Despite these known effects, studies on male rape myths, especially in England and Wales, are less comprehensive compared to those on female rape myths. Therefore, this doctoral research sought to understand better perceptions surrounding male rape myths (MRMs). The study utilised an exploratory sequential mixed methods research design to comprehensively explore MRMs, combining in-depth qualitative insights with generalisable quantitative factors. In the first phase (Study One), qualitative interviews were conducted with 13 professionals aged 32-63. The data was analysed using Willott and Griffin's (1997) method for the Foucauldian discourse analysis. Willott and Griffin's method allowed for identifying power dynamics, subject positions, discursive resources, interpretative repertories, and discursive practices. Study one unearthed three interrelated dominant discourses titled 'Professionals' Insights: Societal Myths, Acquaintance Rape Realities, and Legal Obstacles', 'Navigating Re-Traumatisation: Unequal Power and Support Challenges'. For mixed methods integration, the preliminary findings from study one informed phase two's interview schedule, which was piloted with some professionals. The second phase (Study Two) had 9 male survivors aged 20-51; the same analysis from Study One was used to analyse Study Two's data. Four dominant discourses emerged: 'Bearing the Unseen Weight', 'Barriers: Institutional Power and the Complex Journey of Male Survivors', 'A Media Discourse: (in)Authentic Portrayal of Male Rape', 'Breaking the Silence: Disclosure and Support for Male Survivors' and one negative case study. The third phase incorporated the qualitative findings from the first two studies to guide the design of the third quantitative study, specifically in selecting study variables and formulating acquaintance rape scenarios. Study three examined the extent to which rape myth acceptance, myth-consistent information, sexism, and sociodemographic factors predicted blaming attribution in response to acquaintance rape scenarios in a public sample (N=196, M = 38.06 years old, SD = 13.18). Findings suggested that myth-consistent information is a positive predictor of blame attribution, while male rape myth acceptance is a negative predictor of perpetrator blame. The implications, limitations and future recommendations were discussed for the study-level and overarching mixed-method study findings.

Acknowledgements

I would like to extend my deepest appreciation to my fantastic supervisors, Dr Amanda D. Wilson, Dr Joanne Rechdan, and Dr Elizabeth Noon, whose guidance and continuous support have been indispensable.

I also want to thank my family and friends from the bottom of my heart. Their steadfast encouragement and faith in me are my rock-solid foundations. Their tolerance, comprehension, and support have consistently served as sources of inspiration.

In Addition, my sincerest gratitude goes to the male survivors, professionals and members of the public who participated in this research.

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Preface

I have always been interested in theories of crime stemming from my foundation year in psychology, which led to my completion of a BSc (Hons) in Forensic Psychology and an MSc in Forensic Psychology. The topic of male rape myths showcased in this thesis became a topic of interest during my master's in forensic psychology degree, which I did in 2015 - 2017, and now as a Doctor of Philosophy (PhD) candidate. During my MSc in Forensic Psychology, the modules Advanced Research Methods; Psychology, Investigation, and the Legal Process; Offenders: Causes, Assessment and Treatment; and Issues in Sexual Offending informed my understanding and interest in sexual offending due to the tangible nature of how this knowledge could be applied to the real world. In the module Issues in Sexual Offending, we covered 'Male Rape Victims', which captured my interest because 1) this was the first time I had learned that forensic psychologists are also interested in victimology and survivor care. 2) I had and still want to work in a field that directly impacts policy, practice, or support services for survivors of crime. This led me to investigate gender differences in male rape myth acceptance during my dissertation, which sparked more questions by the time I completed it – rightly, as Dewey (1939) posited that the end of a research inquiry should signal a start of a new one and this led me to extend on my MSc Dissertation in the current PhD thesis. This thesis has been informed by my interest in tackling complex social issues in forensic psychology, reflecting my journey into and during this thesis.

1 CHAPTER ONE: INTRODUCTION

This chapter will discuss the issue of rape, with a brief role of forensic psychology in understanding sexual offending and survivor care; it then defines the focus and scope of the thesis, which is male rape myths. This chapter will then justify the importance of investigating this issue and will end with the thesis overview.

1.1 Topic and Context

1.1.1 Rape

In England and Wales, the Sexual Offences Act 2003, section 1, defines Rape as the unlawful penetration of the vagina, anus, or mouth with a penis, which can only be committed by men. The prevalence of rape garnered from the self-reported Crime Survey for England and Wales (Office for National Statistics, 2023), ending in March 2023, showed that since turning 16, 6.3% of women have reported being victims of rape, in contrast to 0.1% of men (Kambashi et al., 2023). However, it is worth noting that rape is not immune to the dark figure of crime, which represents the significant discrepancy between the number of crimes that occur and those that are reported or recorded by the police, often leaving many incidents unacknowledged and unaddressed within the Justice System (Administrative Data Research UK, 2024). This indicates that the true extent of the prevalence of rape is unknown (Fohring, 2014).

Nonetheless, in England and Wales, the sentencing for rape is determined by factors such as severity and aggravating and mitigating factors (Sentencing Council, 2024a). Firstly, severity is comprised of three levels, and the court assesses the offence based on categories of harm and culpability: Harm is evaluated from Category 1, indicating extreme severity or impact. Category 2 factors include severe psychological or physical harm, transmission of a sexually transmitted infection, violence or threats thereof, unauthorised entry into the victim’s home, and the victim’s vulnerability. Category 3 concerns factors unspecified in the first two categories, leaving room for unknown factors to be considered. Whereas Culpability ranges from Category A, involving factors such as the use of alcohol or drugs to facilitate the offence or crimes motivated by hostility towards the victim's identity (e.g. sexuality, race, religion, gender, disability, or presumption of said factors), to Category B, where none of Category A's factors are present. Secondly, according to the Sentencing Council (2024a), aggravating factors might extend the sentence, including the time and location of the offence, commission while intoxicated, and any threats or blackmail used. Conversely, mitigating factors such as remorse, lack of maturity, or absence of relevant convictions can reduce the sentence length. Lastly, the facets above concerning the crime's

specifics and the offender’s background, including the offence's nature, the victim's harm, and any relevant circumstances that might aggravate or mitigate the situation rape can usually result in a custodial sentence, ranging from four years to the maximum penalty under the Sexual Offences Act 2003, being life imprisonment for the most severe cases.

Moving to how rape progresses in the Criminal Justice System, the nuances of legal proceedings in the justice system are illuminated by recent statistics. Notably, the University College London Jury Project's findings, as published in the Criminal Law Review, detail the charges, pleas, and convictions related to rape and sexual offences in England and Wales spanning from 2007 to 2021 (Thomas, 2023). This comprehensive analysis covered all charges (5,263,800) brought against every defendant across every Crown Court centre for 15 years. It was found that 34.7% of the rape offences involved a female victim aged 16 or older, whereas only 0.9% pertained to male victims of the same age group. Among all the sexual offence charges brought forward during this period, rape constituted 19.7%, with the other 80.3% representing various other sexual offences. The proportion of pleas entered for rape charges saw an increase, moving from 88.01% in 2007 to 91.59% by 2021. Nevertheless, the rates of not guilty pleas for rape charges stayed elevated, averaging 85% over the 15 years, almost twice as high compared to the 44% for other types of sexual offences. Jury decisions on rape charges resulted in 57.52% guilty verdicts on average, 41.52% not guilty, and a negligible proportion of hung juries at 0.96%. Of these hung juries, a small fraction, 0.11%, subsequently delivered guilty verdicts on other severe charges such as attempted rape or sexual assault. Despite a substantial number of not-guilty pleas, the consistency in rape conviction rates over the years remained notable, standing at 58%. This contrasts with conviction rates for other crimes, such as threatening to kill (36%), attempted murder (47%), murder (76%), and drug possession with intent to supply (84%). Examining conviction rates by gender charges against females aged 16 and older led to convictions 50% of the time over the 15 years, peaking at 91% in 2021. For male victims of the same age group, the conviction rate was consistently at 63%, maintaining this level into 2021 (Thomas, 2023). These statistics emphasise the possibility of securing a guilty verdict from juries for rape cases, counteracting the high dropout rates identified in the research by George and Ferguson (2021). (Kambashi et al., 2023).

1.1.2 Brief Overview: Rape and The Role of Forensic Psychologists

This thesis is rooted in forensic psychology, which focuses on psychology within the legal system (Brown & Horvath, 2021). Forensic Psychology integrates theoretical frameworks to construct a multi-layered understanding of sexual offending behaviour and support survivors of crime (Walklate, 2021; Ward & Hudson, 1998). It also facilitates targeted interventions and prevention strategies (Brown et al., 2024).

For example, by applying Cognitive-behavioural theories (e.g. Jacoby, 2004; Kohlberg, 1984), sexual offending can be unpacked by understanding how the offender's distorted thinking (e.g. cognitive distortions, rape-supportive attitudes) can influence their offending behaviour. When Attachment theory is applied, research links patterns of avoidant, insecure, or disorganised attachment from childhood attachment experiences to difficulties in forming positive adult relationships, potentially leading to maladaptive behaviours, including sexual offending (Moffitt & Caspi, 2001). Additionally, applying Social Learning Theory (Miller & Dollard, 1941; Rotter, 1945) offers insights into how sexual offending behaviour can be understood as being influenced by social relations or familial interactions (Anderson et al., 2003). Consequently, forensic psychologists could utilise these tailored theories and many others, considering each offender's profile, background, and the context of their offending behaviour (Shatokhina & Harkins, 2021). This person-centred approach enhances the effectiveness of risk assessment, treatment planning, and intervention implementation, aiming to reduce recidivism and address the psychological underpinnings of sexual offending behaviour comprehensively (Mitchell et al., 2018; Tyler et al., 2021). By addressing the immediate and broader factors that contribute to sexual offending, forensic psychology contributes to a deeper understanding of and response to rape.

Responses to rape encompass a range of strategies that may be broadly categorised into judicial, medical, and societal interventions. Among these, societal responses represent a comprehensive approach that includes actions, initiatives, and policies at multiple levels, from individual and community efforts to institutional and governmental actions (Turchik & Edwards, 2012). While judicial responses focus on legal aspects (George & Furguson, 2021) and medical responses deal with health-related interventions, including psychological support (McLean, 2013), societal responses integrate these elements into a broader framework (Turchik & Edwards, 2012). This framework aims at addressing, preventing, and supporting survivors of rape through collective action and public policy (HM Government, 2024). An issue that can negatively impact the workings of the responses is societal discourses of rape, as they often reveal a troubling tendency to misplace blame, shifting it from the offender to the victim (Burt, 1980; Krahé, 2016). This misattribution is underpinned by longstanding prejudices and misconceptions (or myths) about rape, which serve to deflect responsibility away from the perpetrators (Lonsway & Fitzgerald, 1994). Such attitudes are deeply entrenched in the societal fabric and reflect a misunderstanding of the dynamics of rape (Edwards et al., 2011).

Indeed, Forensic psychologists are deeply interested in societal discourse because it pointedly influences societal attitudes towards survivors, the stigmatisation of victims, and the perpetuation of myths around sexual violence (Shatokhina & Harkins, 2021).

Comprehending public opinions assists forensic psychologists in creating better prevention strategies, customising therapeutic interventions to address stigma, and directing efforts in policy advocacy (Walklate, 2021). Forensic psychologists can influence public discussions to create a more knowledgeable and empathetic society that advocates for survivors and holds wrongdoers responsible, thus affecting how sexual violence is handled on personal and societal scales (Walklate, 2021). This brings us to the focus and scope of the thesis.

1.2 Focus and Scope

This thesis navigates the complex terrain of rape myths, dissects their functions and explores psychological theories that could elucidate their persistence in society (Edwards et al., 2011). Traditionally, the discourse of rape myths has focused on female rape myths, delineating how these myths contribute to victim-blaming and misunderstanding of consent. Male rape myths (MRMs) are relatively neglected (Turchik & Edwards, 2012). The examination of MRMs reveals a significant gap in the literature, with understanding and awareness trailing approximately two decades behind that of their female counterparts (Walfield, 2018). This thesis specifically focuses on understanding the myths surrounding adult civilian male survivors of rape and female-perpetrated sexual assault within the unique legal context of England and Wales. This regional focus is necessary because Scotland and Northern Ireland have distinct legal frameworks, such as the Sexual Offences (Scotland) Act 2009 and The Sexual Offences (Northern Ireland) Order 2008.

Moreover, this legal backdrop is critical in understanding how the Sexual Offences Act 2003, with its gender-specific provisions, shapes and sometimes constrains the recognition of male rape and female-perpetrated sexual assault. The Act’s specific language, particularly evident in Section 1, delineates legal definitions and arguably subtly perpetuates rape myths that contribute to the underrecognition of male survivors. Despite legal provisions under Sections 2 or 4 of the Sexual Offences Act 2003 allowing for charges of sexual assault by women, with legal consequences ranging from community service to life in prison (Sentencing Council, 2024b), a notable gap persists between legal categorisations and survivors' narratives. Emerging evidence suggests that male survivors often describe their experiences of female-perpetrated sexual assault with the term 'rape,' demonstrating a significant misalignment between legal terminology and lived experiences (Weare, 2018a, 2018b). This discrepancy highlights the necessity of examining the intersection of legal frameworks, societal narratives, and the personal testimonies of survivors to fully address and challenge the prevailing myths about male rape and female-perpetrated sexual assault.

1.2.1 *Justification for the present thesis*

The examination of MRMs holds paramount importance within forensic psychology due to its multifaceted impact on understanding and addressing the crime of rape and its repercussions on male survivors. Rape constitutes a severe crime that inflicts deep and often enduring psychological and physical harm on its victims, including men. The spectrum of adverse effects spans psychological afflictions such as depression and anxiety to post-traumatic stress disorder (PTSD) and risk of contracting sexually transmitted infections (Walker et al., 2005). Moreover, male survivors may manifest avoidance behaviours, engage in self-harm, fall into patterns of substance misuse, encounter breakdowns in personal relationships, and grapple with suicidal ideations or attempts (Boner-Thompson et al., 2023; Walker et al., 2005). Beyond precipitating the health crisis of rape and female-perpetrated sexual assault, rape myths exacerbate these challenges by pervading every facet of the Criminal Justice System and impeding the processes of securing medical, psychological, and social support (George & Furguson, 2021). The prevailing awareness of these myths among men can inhibit their pursuit of help-seeking behaviours, fuelled by a fear of judgment or adverse treatment (Mostoller & Mickelson, 2024; Wingender & Olesen, 2023).

Addressing the gap in research on MRMs necessitates a focused scholarly inquiry, especially since existing literature on MRMs is sparse and outdated, with the bulk of research conducted between the 1990s and early 2000s (Thomas & Kopel, 2023). This temporal gap signifies that contemporary societal changes and evolving understandings of gender and sexuality may not be adequately reflected in current knowledge of MRMs (Hine et al., 2021). Furthermore, the predominance of research from international contexts, notably outside England and Wales, introduces a geographical and cultural gap in understanding the specificity of MRMs within different legal and social frameworks (Hine et al., 2021). Additionally, the research on MRMs has lagged on Female Rape Myths (FRMs), creating an imbalance that overlooks the unique challenges faced by male survivors of rape and sexual assault. The examination of MRMs is crucial for addressing both theoretical and practical challenges in supporting male survivors. It aims to dismantle harmful beliefs that can hinder the recovery and support processes for male survivors, contributing to a more inclusive and comprehensive understanding of rape myths across genders (Connell, 2012). This research highlights the need for updated, culturally and geographically specific studies to inform policies, support services, and public awareness efforts (Kelly & Staunton, 2021). By filling these gaps, the study enriches the forensic psychology field with insights for more effective and empathetic approaches to aid male survivors of rape and sexual assault. The investigation into MRMs plays a pivotal role in bridging theoretical and practical divides, in line with the aim of the thesis (Creswell & Plano Clark, 2018). On a theoretical level, it broadens the discourse within forensic psychology to include a broader range of experiences

and perceptions related to sexual violence (Horvath & Brown, 2013). On a practical level, it lays the groundwork for the future development of targeted interventions, training programs for professionals, and public education campaigns aimed at more effectively supporting male survivors (Cohen, 2014). This dual impact highlights the significance of contemporary research on MRMs as an essential step toward ensuring justice and comprehensive support for all rape survivors.

1.3 Thesis Overview

This thesis seeks to understand myths concerning male rape and sexual assault in England and Wales. Through a pragmatically guided mixed methods approach, the study navigates the interplay between formal support professionals' perspectives, male survivors' narratives, and public opinions, uncovering nuanced insights into the many-sided nature of myths about male rape and sexual assault. Introduction to the overarching thesis (Chapter One) the current chapter lays the groundwork by highlighting the critical importance of addressing male rape and sexual assault. It sets the research agenda, emphasising the necessity for a focused inquiry into these often-overlooked aspects of sexual violence. This chapter defines the scope of the research and illuminates the urgency of scholarly and practical engagement with the topic. In Chapter Two, Adult Male Rape Myths Since 1994: A Systematic Literature Review, the thesis delves into the specific MRMs circulating within the UK, based on a thorough review of the literature (Kambashi et al., 2023). This foundational chapter informs the empirical studies that identify key myths and highlight areas needing further exploration. Methodology and Methods (Chapter Three) elaborates on the pragmatic worldview shaping the thesis, detailing the theoretical lens and methodological strategies employed to investigate the research questions. This chapter bridges the initial conceptual groundwork with the empirical inquiries, outlining how qualitative and quantitative methods are synergistically used to dissect the phenomena under study.

The empirical journey begins with Chapter Four, which presents the insights of Service Providers and Health Professionals into male rape and male rape myths. Utilising critical discourse analysis, this chapter reveals how professionals conceptualise and engage with the complexities of male sexual violence in England and Wales. Chapter Five shifts focus on the Survivors' Understanding of Male Rape Myths, offering a poignant examination of how male survivors themselves perceive and navigate the aftermath of rape and sexual assault. Through their narratives, captured via critical discourse analysis, the chapter sheds light on the personal and societal implications of male rape myths. The inquiry culminates in Chapter Six, where the study extends into the broader public domain and assesses 'Predicting Victim and Perpetrator Blame in a Male Acquaintance Rape and Sexual Assault Scenario'. This chapter explores the variables influencing blame attribution in acquaintance

rape scenarios, integrating quantitative analysis to extend the discourse analysis findings from the perspectives of professionals and survivors.

Finally, Chapter Seven Discussion and Conclusion synthesises the rich tapestry of findings across the chapters to present three groundbreaking arguments that mark novel contributions to the discourse on male rape myths, forensic psychology, and sexual violence research. This culminating chapter reflects on the research's implications, critically assesses its strengths and limitations, and charts a course for future scholarly and practical endeavours. In weaving together these chapters, the thesis offers a comprehensive and enriched understanding of male rape and sexual assault, making significant strides in both the academic and practical realms of addressing sexual violence.

Summary of chapter

This chapter presents the topic of rape, highlighting the role of forensic psychology in comprehending sexual offences and supporting survivors. It subsequently outlines the thesis's focus on myths surrounding male rape. This chapter explains why it is important to examine this issue and concludes by giving an overview of the thesis. The next chapter, A Systematic Literature Review, delves into male rape myths literature in the English context.

2 CHAPTER TWO: SYSTEMATIC LITERATURE REVIEW

Declaration: This chapter has been published in Kambashi, N., Rechdan, J., Noon, E., & Wilson, A. D. (2023). Adult male rape myths in England since 1994: A systemic mixed methods review. Psychology, Public Policy, and Law, 29(4), 497–511. https://doi.org/10.1037/law0000402

Introduction to chapter

The previous chapter introduces the current thesis's topic, focus, and scope. This chapter, A Systematic Literature Review, delves into male rape myths literature in the English context to ascertain what misconceptions about male rape have been found in England and what can be understood from them. This chapter concludes by setting out the direction and scope of the thesis.

2.1 Introduction of Systematic Literature Review

In the psychological literature, rape myths are defined as false, stereotypical, or prejudicial beliefs about rape, rapists, and rape victims (Burt, 1980; Payne et al., 1999). These myths shift blame for the incident, wholly or partially, from the perpetrator to the victim (Burt, 1980; Bohner et al., 2009). Conversely, in the United Kingdom legal context, especially within the Crown Court, the term "rape myths" is not typically used. Instead, judges employ the terminology "misleading or false assumptions", reserved for widely held beliefs about rape that have been contradicted through reliable evidence or experience within the criminal justice system (Picton et al., 2023). This approach aims to debunk known misconceptions to ensure a fair trial in line with guidelines set by the Court of Appeal Criminal Division (Judiciary of England & Wales, 2023). Despite this difference in terminologies, this review will use MRM and rape myths interchangeably to refer to rape myths about male victims, consistent with the terminology used in the psychological literature. Research indicates that anyone can subscribe to MRMs (Anderson & Lyons, 2005; Jackson et al., 2017), which can adversely influence how they engage with male rape survivors (Bonner-Thompson et al., 2023). These adverse effects can contribute to secondary victimisation, defined as victim-blaming attitudes, practices, and behaviours by professionals, which can result in further trauma for the male rape victim (Campbell et al., 2001).

Jackson et al. (2017) reported that male survivors (N=18) had experienced secondary victimisation from professionals, friends, and family when they disclosed the sexual assault, which affected them emotionally and behaviourally (100% of N=18) and decreased their likelihood of seeking further formal and social support (67% of N=18). This suggests survivors can be re-traumatised by how professionals (law enforcement, medical facilities, and psychological support services), friends, and family react to their disclosure, and this can inhibit their recovery as they may fear further secondary victimisation (Abdullah-Khan, 2008; Carpenter, 2009; Allen et al., 2015). For instance, Ullman and Peter-Hagene (2014) demonstrated that adverse social reactions to women's sexual victimisation disclosure were associated with more significant Post-Traumatic Stress Disorder symptoms and perceived lack of control over their recovery (similar to Snipes et al. 2015). Additionally, male survivors might accept MRM; thus, they might be unaware that the sexual violence they experienced is rape or may perceive that they are partly to blame for the assault (Hammond et al., 2017; Weare & Hulley, 2019).

The issue of MRM in England and Wales has received little professional and academic attention compared to research on female rape myths ([FRM]; Davies & Rogers, 2006; Chapleau et al., 2008). Furthermore, research on male rape myth acceptance (MRMA) has predominantly employed university student samples and quantitative methodology (Judson et al., 2013) and from a predominately international sample (Thomas & Kopel, 2023). Consequently, this literature review aimed to examine MRM in England and Wales research since 1994, when false beliefs about male rape became identifiable as myths through the Sexual Offences (Amendment) Act 1976 in the Criminal Justice and Public Order Act. The purpose of conducting a systematic literature review for this thesis was to comprehensively map out the existing body of research, as Bolen et al. (2014) emphasise the importance of such reviews for identifying and synthesising relevant literature on MRMs. This process aimed to achieve a detailed understanding of MRMs and pinpoint knowledge gaps within England and Wales. Hence, the research question was as follows: What adult male rape myths have been identified by research conducted in England and Wales since the legal recognition of male rape in 1994?

2.2 Method

The philosophical paradigm which underpins this review is the pragmatic worldview (Maxcy, 2003; Lincoln et al., 2011; Morgan, 2014). Pragmatism argues that a practical and applied philosophy should guide methodological decisions (Maxwell, 2011). Harden (2010) argues that integrating methodologies into a review enhances its efficiency and application. The pragmatism epistemology allows for the quantitative and qualitative methodology to be reviewed and encourages the elimination of the dichotomy between postpositivist and

constructionism worldviews (Maxcy, 2003; Kaushik & Walsh, 2019). The postpositivist paradigm is concerned with the belief that there is one truth of reality, and valid knowledge of this truth can only be observed through objective scientific methods which remove or control variables (Guba & Lincoln, 2005). On the other hand, the social constructionism perspective asserts that human actions and understanding are shaped by societal and cultural influences rather than being solely determined by biological or personal psychological factors (Berger & Luckmann, 2016).

Finally, the pragmatism worldview focuses on “what works” to answer the review research question rather than concentrating on the philosophical epistemologies that underpin the methodology. For this reason, the mixed methods approach to a systemic review framework ([MMASR] Grant & Booth, 2009; A. Pearson et al., 2015) was used to inform this review. This framework adheres to the aims of a systemic review, which are to methodically identify, evaluate, and synthesise empirical evidence to address the review’s research question (Higgins & Thomas, 2019; Sandelowski et al., 2006). However, unlike traditional systematic reviews, which focus on quantitative experimental studies (e.g., randomised control trials), this framework allows for any combination of methodology (e.g., quantitative, qualitative, and mixed methods) and method (e.g., case studies, interviews, correlations) to be considered for review (Harden & Thomas, 2010). This approach was adopted to provide a complete picture of the review research question that goes beyond either a qualitative or quantitative review (Pearson et al., 2015).

2.2.1 Defining the Scope

The literature identification began with a scoping search using Google Scholar and Summon electronic database comprising 161 individual databases (e.g., PsychINFO, Web of Science). The scoping search provided a brief overview of what literature was available on MRM, and this informed the scope of the review and the formulation of the review research question. Through the scoping search, key search terms (see searching and screening section below) were identified and used to source articles for the review (Grant & Booth, 2009). Furthermore, the scoping search assisted in formulating the inclusion and exclusion criteria during the screening process. The inclusion criteria encompassed peer-reviewed quantitative, qualitative, and mixed methods primary England and Wales studies from 1994 until the present concerning male rape and acceptance of MRM. Primary England and Wales studies were defined as studies which sampled participants from the countries England and Wales. This included male rape studies that included FRM to form a basis for comparison. A country limit was imposed with a focus on studies from England and Wales as the review aimed to examine MRM since the recognition of male victims in English Law. The inclusion criteria considered adult male rape as 16 years old and over at the time of the rape,

in concurrence with the Sexual Offences Act (2003) and Home Office (2020) Counting Rules' definition of adult rape victims.

Articles that were unpublished, non-academic or discussion papers were excluded from the review in keeping with the MMASR framework's definition of "empirical" research (Grant & Booth, 2009; Pearson et al., 2015). Studies that did not explicitly state the gender of the victim were also excluded because feminists argue that gender-neutral legal language signifies an attempt to impede the gendered analysis of sexual violence (Rumney, 2008). Gender-neutral language makes the gender issues surrounding rape immaterial in evaluating sexual violence and limits the ability to draw gendered inferences from research findings (Cohen, 2014). However, gender plays a vital role in the discourse of rape, as women's and men's experiences are different (Anderson, 2007). Furthermore, studies that only focused on child sexual abuse were also excluded, as a common MRM is that violence toward men only happens to them when they are children (Davies et al., 2011). Lastly, the paper focused on male survivors, so six studies with more female than male participants were excluded to reduce the overrepresentation of female respondents in psychological research (Barlow & Cromer, 2006; Dickinson et al., 2012). This was to facilitate a balanced comparison between women and men participants to get a rigorous understanding of the social issue of rape.

2.2.2 Search Strategy and Screening

The literature search was conducted using Summon and the British Psychological Society's EBSCO discovery service database, encompassing academic catalogues such as Science Direct and JSTOR. These two electronic databases were used as they allowed for an extensive search and included filtering options for identifying relevant scientific literature (Bramer et al., 2017). For this reason, Google Scholar was not used during this part of the search strategy as it did not allow for filtering out non-empirical papers. Instead, studies were identified using wildcards and the Boolean method (Bronson & Davis, 2011); search terms can be found in Table 2.1.

Table 2.1.

Search Terms and Wildcards Used in Systemic Literature Search

Search terms
Male rape, Male rape myth*, Attitude* toward* rape Male, M*N, Male rape victim, Male rape survivor", Qualitative research, Quantitative research, Consequences, Male rape myth acceptance, Rape myth acceptance, Sexual offence*, Victim*, Adult, Sexual assault, Gender, Female offender*

The searches were coupled with filters such as ‘English language’, ‘1994 to present’, ‘peer-reviewed’, and ‘journal article’. The searches yielded 885 articles, and once the duplicates were removed, 583 titles and abstracts were reviewed (see Figure 1 for the screening process). It should be noted that no Welsh studies were found during the searches. Nevertheless, 115 articles appeared to meet the inclusion criteria; thus, their full texts were obtained to affirm their eligibility. Following the full-text screening, data was extracted from 43 articles that met the inclusion criteria (See Kambashi et al., 2023).

The remaining articles were assessed for quality using the Mixed Methods Appraisal Tool (MMAT) 2018 version by Hong et al. (2018), a comprehensive tool that appraises the methodological qualities of qualitative, mixed-methods, and quantitative descriptive studies. The tool included two screening questions and five core quality criteria items for qualitative and quantitative research and 15 items for mixed methods studies. The studies were appraised initially by the first author and then the author team (Pluye, 2013). Six studies (Javaid, 2017b; Javaid, 2017d; Javaid, 2017e; Javaid, 2018a; Javaid, 2018b; Javaid, 2018c) were excluded due to duplicate publication (Larivière & Gingras, 2010; Villar, 2015). A further 27 papers were excluded from the review during the quality appraisal process because they did not meet the MMAT’s two screening questions (Schwandt et al., 2007; Hong et al., 2018). The remaining 10 papers’ reference lists were read to check for other studies which met the inclusion criteria. This was conducted to include papers that may have been omitted from the database searches, as the Cochrane Collaboration proposes (Horsley et al., 2011). One paper (Walker et al., 2005) was identified through that process and was subsequently included in the review. Consequently, 11 papers were included in the review (see supplementary material, table S2 MMAT detailed quality appraisal).

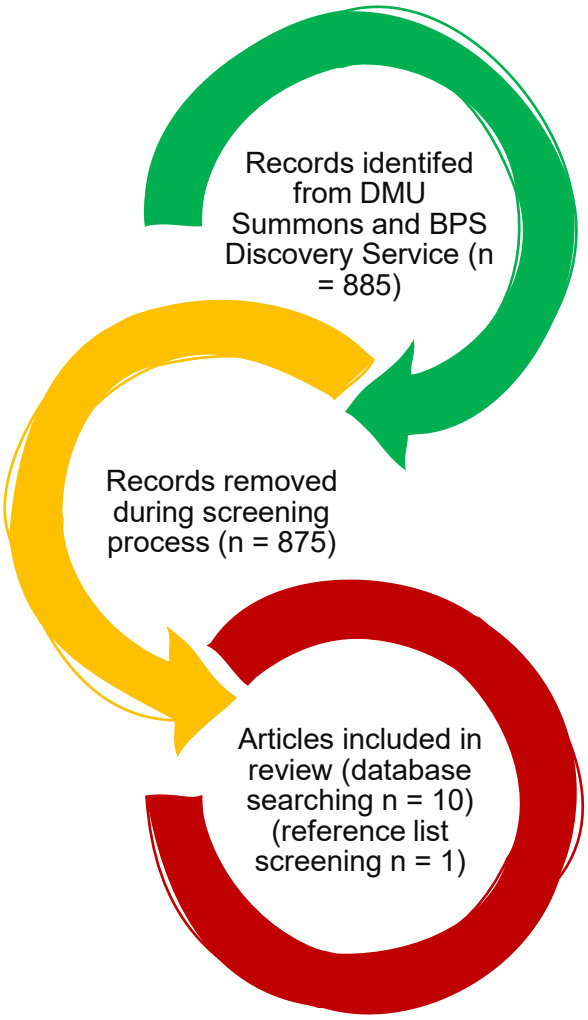
2.3 Synthesis

Thematic synthesis was employed to analyse the remaining papers, as this method permitted the analysis of qualitative, quantitative and mixed methods data to be integrated into one composition (Thomas & Harden, 2008; Thomas et al., 2017). Furthermore, the thematic synthesis was chosen because it has been demonstrated to be a rigorous and systematic approach to analysing methodologically heterogeneous data in mixed-methods systematic reviews (Noyes et al., 2019; Hong et al., 2020). The synthesis followed three stages. Firstly, all the studies were coded using emergent descriptive codes from the data, for example, ‘minimisation of rape incident’ (Thomas et al., 2017). Secondly, the codes were developed into descriptive themes to articulate associations between the themes and to

relate conceptually similar themes with one another, for example, 'rape is not serious for some men' (Thomas et al., 2017). Lastly, analytical themes were generated by asking how the unearthed descriptive themes address the review's research question, which will be exemplified in the results (Thomas et al., 2017).

Figure 2.1

Flow Diagram of Systematic Review of Included Articles (Adapted from Page et al., 2021)



2.4 Results

As mentioned above, the final sample included 11 English papers, 8 were quantitative studies, 2 were mixed methods, and 1 was qualitative (See Table 2.2 for systematic description and findings). Two themes emerged from synthesis, "Departure from the stereotypical rape script" and "Male rape can be avoided". Additionally, one meta-theme was identified as "Victim's sexual orientation influences perceptions of male rape", with the following sub-themes "Straight men are the 'real' victims", "He must be gay", and "Rape

allegations are a cover-up". Although, notably, 5 of the 11 studies reviewed did not report the demographic of race or ethnicity, all six studies that did report the demographic included samples comprised mostly of Caucasian participants (90% to 100%; Davies & McCartney, 2003; Wakelin & Long, 2003; Davies & Hudson, 2011; Davies et al., 2013; Hammond et al., 2017; Walker et al., 2005).

Table 2.2

Descriptive Characteristics and Key Findings of Included English Studies

Author (Year)	**Study characteristics (*N*, *N*-type, Rape Type)**	**Analysis and main findings**
Anderson (1999)	60 M, 60 W, students, stranger rape	The content analysis showed that both male and female participants perceived the female rape survivor more negatively than the male survivor. Men assigned more behavioural blame to the male survivor, while women directed more toward the female survivor. Additionally, men attributed more character flaws to the female survivor compared to the male survivor, yet both men and women equally attributed behavioural and characterological blame to the male survivor.
Anderson and Bissell (2011)	52 M, 52 W, students, acquaintance rape	Three-way ANOVA revealed that the gender of participants affected their blame attributions towards both male and female rape perpetrators. Men were more likely to blame male perpetrators, whereas Women placed more blame on female perpetrators. Male participants also showed higher levels of rape myth acceptance and more negative views of rape victims than female participants. Additionally, regression analysis indicated that those endorsing more rape myths were inclined to victim blaming.
Anderson and Quinn (2009)	120 M, 120 W, medical students, stranger rape	Two-way ANOVA showed that male participants had more negative views of rape victims compared to female participants. Views on male rape victims were more negative than those towards female rape victims.
Anderson et al., (2001)	15 M, 15 W, students, stranger rape	Content analysis revealed two themes: 'Meta-commentary' and 'Negative Attribution to Victims.' Moreover, it showed that participants' blame attributions were based on gender and sexuality perceptions rather than the covariational information provided in the vignettes.
Davies and Hudson (2011)	75 M, 58 W, community, stranger rape	Three-way ANOVA results indicated that victim blaming is influenced by the victim's sexuality and the participant's gender, with straight participants more likely to blame victims, particularly male victims. Straight male participants deemed the attack less severe compared to gay and female participants. Cross-dressing victims received

		more blame than straight victims, and gay male participants perceived the attack as more severe than straight participants.
Davies and McCartney (2003)	100 M, 50 W, community, stranger rape	One-way MANOVA revealed that straight men were more inclined to support rape myths and adopt anti-victim stances compared to straight women or gay men, with straight women also displaying more anti-victim attitudes than gay men. Straight men were more prone to victim blaming and perceived assaults as less severe compared to gay men. However, there were no notable differences in victim blaming or perceived severity of the rape between straight men, women, or gay men.
Davies et al. (2013)	50 M, 50 W, students,	Content analysis identified categories including the rape location, victim-perpetrator relationship, the long-term psychological impact on the victim, and the motivation behind the attack. Log-linear analysis of category frequencies indicated that male victims were often perceived as gay and less likely to report the assault or to scream during it, compared to female victims who were more frequently depicted as seriously injured and abused post-assault. The analysis also showed age-related perceptions, with male victims more commonly portrayed as over 25 and female victims as under 25. Both male and female participants attributed the rapist's motivation to power and control.
Doherty and Anderson (2004)	30 M, 30 W, students, stranger rape	Discourse analysis revealed that straight male victims face greater societal ridicule and experience the trauma of rape more severely than other victim groups. The study showed straight men as inherently stronger and women and gay men as the 'natural' victims, thus reinforcing traditional gender roles, adherence to hegemonic masculine traits (Connell, 2005) and homophobic attitudes. By framing female and gay male rape as congruent with normative heterosexual roles and straight male rape as an aberration from hegemonic masculinity, the discourse effectively marginalised male victims. The discursive practices served to lessen the perceived severity of rape for gay men and trivialise the victimisation of women.
Hammond et al. (2017)	98 M (*n*=11 survivors, *n*=45 knew a survivor), community	Mann-Whitney U tests indicated that participants were more inclined to endorse rape myths when the assailant was female. This tendency decreased with assault by penetration-incidents, yet the likelihood of agreeing with myths remained higher if the assailant was female. Additionally, a majority believed the police would consider a man's complaint about rape by another man seriously. At the same time, nearly

		half doubted the seriousness of police response if the perpetrator was a woman. About 45% of male respondents expressed reluctance to report their sexual assault to the police due to concerns over not being taken seriously, feelings of embarrassment, and shame, especially if the perpetrator was male. There was also a perception among some men that the police would exhibit gender bias, diminishing the severity of the crime.
Wakelin and Long (2003)	113 M, 108 W, students, stranger rape	Three-way MANOVA results indicated a tendency among men to assign more behavioural and characterological blame to victims compared to women. Gay male victims were subject to more blame than their heterosexual male and lesbian counterparts, while heterosexual female victims faced more blame than heterosexual male and lesbian victims. Additionally, men were more likely to suggest victims had an unconscious desire for the assault. Beliefs that victims, especially if gay or lesbian, could have avoided their situations were more prevalent than for straight victims. Male participants were more inclined to think victims could have avoided the assault and assigned more significant blame to them than female participants did. The study found that the perpetrators of rape against gay men were deemed less accountable than those who assaulted lesbian or straight male victims. The participant's gender significantly influenced the assessment of victim behaviour and the proportion of blame allocated to the perpetrator.
Walker et al. (2005)	80 men (*n* = 40 survivors, *n* = 40 control group).	The primary characteristics of the assaults indicated that the majority (62.5%) took place indoors and were perpetrated by acquaintances. Coercion was a common element in nearly all incidents, with physical force being reported in over half of the cases. T-tests comparing survivors to non-survivors revealed that survivors experienced higher levels of psychological distress, more somatic symptoms, more significant social dysfunction, increased anxiety, more depression, and lower levels of self-worth and self-esteem compared to the control group. Furthermore, survivors frequently reported intrusive thoughts and a tendency to avoid specific thoughts, feelings, and situations. Logistic regression analysis showed that seeking psychological help post-assault was a significant predictor of suicide attempts among survivors.

Note. N = sample, N-type= sample type, M = men, W = women, ANOVA= Analysis of variance, MANOVA = Multivariate Analysis of Variance,

2.4.1 Departure from The Rape Script

This theme focused on how rape scripts can inform rape myth adherence. The review highlighted that Individuals are more inclined to believe a victim of rape if their attack follows the stereotypical rape script (Anderson, 1999; Anderson et al., 2001; Davies & Hudson, 2011; Wakelin & Long, 2003; Doherty & Anderson, 2004). For example, rape occurs at night in a public place, the male assailant is a stranger who uses a weapon, and the female victim physically resists but is overcome by considerable violence (Krahé, 1991). A rape script is a culturally determined prototype for how non-consensual sex acts typically proceed (Krahé et al., 2001; Ryan, 2011) and how an individual should behave after the incident (Anderson, 1999; Hammond et al., 2017). Rape scripts can shape how individuals react to male survivors' disclosure of their rape; hence departure from the culturally accepted rape script can lead to rape myth acceptance (Davies et al., 2013). Indeed, this review has demonstrated that male survivors are more likely to be blamed for their sexual victimisation in comparison to female survivors, particularly by other male respondents (Anderson, 1999; Davies & McCartney, 2003; Wakelin & Long, 2003; Anderson & Quinn, 2009; Anderson & Bissell, 2011; Davies & Hudson, 2011). This is because society, including male survivors, may perceive a man being the victim as a departure from their accepted stranger rape script, where the victim is expected to be a woman (Hammond et al., 2017).

On the other hand, studies have reported that stereotypical stranger rape scripts similarly apply to the perception of male rape, except they are more likely to contain more fallacious details than female rape scripts (Davies et al., 2013). For instance, the construction of male rape victims includes victim/rapist sexual orientation, rapist motivation, serious physical injuries, and further violent assault as part of the attack (Davies et al., 2013). The implication of these additional erroneous details of male rape scripts is that individuals may construct MRM which serves to blame male survivors for the attack if the survivors' sexual victimisation is not per the stranger male rape script (Anderson et al., 2001; Hammond et al., 2017). A further implication is that survivors will not report the offence to the police or disclose it to social support systems (Hammond et al., 2017) because they perceive authorities and society will not take a man being a victim of rape seriously (Doherty & Anderson, 2004; Hammond et al., 2017). This indicates that male survivors' likelihood of reporting the offence is informed by awareness or internalisation of MRMs, therefore positioning MRMs as barriers to reporting; and subsequently leading to low reporting of rape (Hammond et al., 2017).

Though it has been argued that male rape scripts contain stereotypical details (Davies et al., 2013; Hammond et al., 2017), the available research suggests these expectations might not be unfounded. These incidents tend to occur at night (Walker et al.,

2005), and statistics support the notion that men are less likely to report the incident to the police (ONS, 2018). Nonetheless, it is important to note that the study by Davies et al. (2013) used student samples with a mean age of 22.1. Thus, their findings can only be generalised to that homogeneous sample. This suggests that there may be a bias in constructing the male rape script. Therefore, there is room to explore professional or community samples' perceptions of male rape in England and Wales. Exploring a heterogeneous sample would provide a holistic picture of what MRM may be present in English society, rather than relying on students' views as they only represent one part of society (Sturgis, 2012).

2.4.2 Male Rape Can Be Avoided

The following theme describes the misconception of the preventability of being a victim of rape. Three studies have demonstrated that society endorses the myth "he should know better", which implies men should be able to avoid being a victim of rape or that they behaved in a way that warranted the attack (Anderson, 1999; Anderson et al., 2001; Wakelin & Long, 2003). Particularly if the male victims have been assaulted before, this suggests that male victims could have prevented the rape if they had behaved differently (Anderson, 1999; Hammond et al., 2017). Anderson et al. (2001) demonstrated that male and female student dyads construed male and female victims as 'stupid' for not learning from their previous sexual victimisation or for walking alone down a path where sexual violence had previously occurred. Notably, Anderson (1999) argued that having the female-male pairs read a scenario and then spontaneously discuss male-female victims was a more naturalistic way to collect data than interviewer-interviewee methods. However, even with the use of this naturalistic approach, Anderson et al. (2001) were not able to support the Covariation Model of Attribution ([CMA]; Kelley, 1973) they sought to examine. The CMA describes how individuals use social perception to attribute behaviour logically and rationally to internal or external factors of an incident. It focuses on what information is gained through perception and how it is employed to judge the cause of behaviour (Kelley, 1973). Scholars purport that people employ the covariation principle to attribute the cause of rape. They do so by seeking information concerning the frequency of rape and its prevalence in different environments. (Calhoun et al., 1976). Anderson et al.'s (2001) findings suggest that individuals may hold the negative attribution "he/she is very stupid" based on other beliefs rather than 'logical' or 'rational' evaluations of rape victims' behaviour or characteristics (Anderson, 1999).

Research has examined how sex differences and homophobia influence blame attribution towards rape survivors. Homophobia is a negative attitude towards gay individuals (Fraïssé & Barrientos, 2016). When it concerns sex differences, Wakelin and Long (2003) found that male participants were more likely to perceive rape as avoidable than female participants, possibly due to the "man box" concept of ideal masculinity (Kivel, 1998). The

“man box” is a societal expectation that men should be dominant, assertive, and resilient. This may have contributed to male participants assuming that male victims of rape could have avoided it more easily than female victims (Connell & Pearse, 2015). In addition to sex differences, participants perceived that gay and lesbian survivors should have been able to avoid rape more effectively than straight survivors (Wakelin & Long, 2003). Respondents also thought chance was more to blame when the survivor was a gay male than a straight male, suggesting participants thought gay men have a higher chance of being a victim of rape due to factors such as overt gay behaviour or appearance (Wakelin & Long, 2003). This implies that homophobic stereotypical perceptions of sexuality contributed to tougher judgements of gay male survivors (Anderson, 1999; Davies & McCartney, 2003; Wakelin & Long, 2003; Doherty & Anderson, 2004; Anderson & Bissell, 2011; Davies & Hudson, 2011).

It should be noted that Anderson (1999), Anderson et al. (2001), and Wakelin and Long (2003) used stranger rape scenarios as stimuli within their research. Therefore, their findings are limited to research focusing on male stranger rape. It has been argued that stranger rape and acquaintance rape influence blame attribution differently (Davies & McCartney, 2003; Anderson & Bissell, 2011). The next synthesised meta-theme expands on the relationship between sexual orientation and male rape more comprehensively.

2.4.3 Victim’s Sexual Orientation Influences Perceptions of Male Rape

This meta-theme argues that male rape and sexual orientation are inseparable in comparison to female rape and contains three sub-themes: “straight men are the ‘real’ victims”, “he must be gay”, and “rape allegations are a cover-up” (Anderson, 1999; Davies & McCartney, 2003; Wakelin & Long, 2003; Doherty & Anderson, 2004; Davies & Hudson, 2011; Davies et al., 2013; Hammond et al., 2017). In addition, scholars argue that sexuality-based rape myths are rooted in homophobia, which is a facet of heteronormative culture that adversely informs people’s perceptions of male rape (Doherty & Anderson, 2004) and functions to minimise the issue of male rape (Davies & McCartney, 2003).

2.4.4 Straight Men Are The ‘Real’ Victims.

This theme describes which men are considered the actual victims of male rape, as studies have demonstrated that the severity of rape for straight men and gay men is conceptualised differently (Davies & McCartney, 2003; Doherty & Anderson, 2004; Davies & Hudson, 2011; Hammond et al., 2017). For instance, Doherty & Anderson (2004) demonstrated that respondents constructed male rape as more severe for straight survivors than gay survivors, as the rape threatens their heterosexual identity. This is under the Gender Role Conflict theory (GRC; O’Neil, 1981), which states that men should be capable of behaving in a manner that is typical of men (e.g., resist the attack, handle confrontational

situations; Davies et al., 2013; O'Neil, 2013). Therefore, individuals who subscribe to this theory may perceive that the male victim did not fend off his attacker in a 'macho' manner, thereby casting doubt on his heterosexual identity and membership to hegemonic masculinity (Doherty & Anderson, 2004; O'Neil, 2013). Hegemonic masculinity is the idealisation of stereotypical male qualities as the masculine cultural archetype, which explains why and how men maintain dominance over groups considered to be feminine (Connell & Messerschmidt, 2005). As a result, the male victim's membership to hegemonic masculinity may be revoked post-assault (Doherty & Anderson, 2004; O'Neil, 2013).

The other threat is the misconception that the straight survivor's sexuality will be questioned because of the rape; this notion is under the "taint of homosexuality theory" ([THT] Doherty & Anderson, 2004; Sivakumaran, 2005). The THT argues that society may question the straight survivors' sexuality after the rape due to the survivor's physiological response, such as arousal or ejaculation during the rape (Sivakumaran, 2005). The THT also states that any sexual activity between two men is gay regardless of whether the act is non-consensual (Sivakumaran, 2005). This means people may perceive all male rape victims as gay (Wakelin & Long, 2003; Davies et al., 2013; Hammond et al., 2017). However, scholars argue that sexuality is innate and not nurtured; hence a straight man being assaulted by another man will not change his sexual orientation to gay (Mustanski et al., 2002; Weeks, 2017). Furthermore, the belief that male survivors must be gay implies gay survivors are considered as belonging to an already marginalised masculinity and therefore lack the traits that fit into the hegemonic norm (Connell & Messerschmidt, 2005). Hence gay survivors are deemed as less affected by rape (Wakelin & Long, 2003) because it is assumed that anal penetration is a "normal" sexual expression for gay men (Davies & McCartney, 2003; Doherty & Anderson, 2004; Davies & Hudson, 2011; Hammond et al., 2017). Thus, the belief that rape is not as severe for gay survivors as it is for straight survivors is damaging as it threatens the recognition of male rape as an issue for all men (Davies & Hudson, 2011).

Furthermore, the assertion that sexuality influences the impact of rape is unfounded. For instance, Walker et al. (2005) demonstrated that male survivors are psychologically impacted by their sexual victimisation regardless of their sexuality compared to a control group of male non-survivors. Following the assault, male survivors reported experiencing depression, secondary victimisation, psychological disturbances, low self-esteem, insomnia, post-traumatic stress disorder-related symptoms, sexual identity issues, suicidal ideation, and attempted suicide (Walker et al., 2005). Subsequently, the conception that straight survivors are the 'real' victims can marginalise gay survivors to a greater extent, compounding their traumatising experience (Doherty & Anderson, 2004; Walker et al., 2005; Davies et al., 2013; Hammond et al., 2017). It is worth noting that Walker et al. (2005) used

the world assumption 32-item scale (Janoff-Bulman, 1989), which measured male survivors' assumption of the world they reside in with a focus on justice, self-worth, luck, self-controllability, the benevolence of individuals, randomness, and general controllability. However, they only reported the lowest subscales' internal consistencies (self-control α = .69, justice α = .58 and randomness α = .40), which some scholars would consider unacceptable because the low alphas may be due to the constructs that are measured being poorly related (DeVellis, 2003; Cohen & Swerdlik, 2018). Consequently, the findings should be interpreted cautiously as the low internal consistency may reflect heterogeneous constructs of the world assumption scale or the low number of items in each subscale. Nevertheless, it can be said that this severity rape myth is contrary to the following theme "He must be gay".

2.4.4.1 He Must Be Gay.

This theme concerns the notion that all male rape victims must be gay because they must have behaved in a gay manner which is atypical of hegemonic masculinity (Wakelin & Long, 2003; Davies et al., 2013; Hammond et al., 2017). Thus, arguably male survivors may be judged more harshly based on the acceptance of homophobic beliefs, particularly by straight individuals (O'Neil, 1981; Anderson, 1999; Connell, 2005). This rape myth is particularly problematic as it assumes that male survivors are gay, and their rape is not deemed 'real' rape (Wakelin & Long, 2003). For example, studies have demonstrated that straight men are more likely to blame gay male victims for rape (Davies & McCartney, 2003; Wakelin & Long, 2003) than they are to blame straight women (Wakelin & Long, 2003), gay women (Wakelin & Long, 2003), and cross-dressing (female or male undefined) rape survivors (Davies & Hudson, 2011). However, findings on the intersectionality of sexuality and gender and victim blame attribution have been complex. For instance, Davies and McCartney (2003) demonstrated that straight men attributed more blame toward straight women than gay men.

Additionally, Davies and Hudson (2011) explored survivor status (straight, gay, cross-dressing, trans women and trans men) and could only demonstrate that straight men were blamed less than the cross-dressing survivors. These mixed results suggest there is room for research to explore how participant and survivor gender and sexuality inform rape myth acceptance in England and Wales, as the findings from these studies imply that when participants are presented with a diverse range of victims, they are more likely to blame the sexual minorities.

2.4.4.2 Rape Allegations Are a Cover-Up.

The following synthesised sub-theme builds upon the “He must be gay” subtheme by arguing that male survivors had consensual intercourse. However, “he lied” about being raped to hide his sexual orientation (Anderson, 1999; Hammond et al., 2017). The current theme is similar to the FRM “she lied”, and both myths function to deny the survivor’s claim of rape. Though notably, the “he lied” and “she lied” are underpinned by different ideologies, the beliefs that underpin the FRM version are beyond the scope of this review (for the female context, see Edwards et al., 2011). The ideology that informs the MRM version is that individuals may perceive male survivors as lying about sexual victimisation because they are trying to ‘cover up’ their sexual experience with another man (Anderson, 1999; Hammond et al., 2017). This suggests that male survivors are ashamed of consensual intercourse and come to regret it due to fear related to their sexuality, resulting in a false allegation of rape (Doherty & Anderson, 2004). However, this myth has been largely unsubstantiated by research conducted in England and Wales compared to the international exploration of male rape, which is beyond the scope of this review (for the international context, see Klement et al., 2018). Therefore, there remains a gap for further research to explore what perceptions about male rape may be present in England and Wales.

2.5 Discussion

This systematic review identified the persistence of MRMs in England since 1994 (Burt, 1980; Payne et al., 1999). The review demonstrated that MRMs arise when individuals receive information about a rape that does not match the stereotypical rape script (Anderson, 1999; Anderson et al., 2001; Wakelin & Long, 2003; Doherty & Anderson, 2004; Davies & Hudson, 2011). This review has also demonstrated that the stereotypical rape script has changed to include male victims, with additional considerations such as the victim’s sexual orientation and rape severity (Davies et al., 2013). These additional factors to the stereotypical rape script can lead to people questioning male survivors’ sexual orientation, masculinity and rape claim legitimacy. Additionally, the victim-blaming ideologies that arise when male rape departs from the stereotypical rape script have also been observed in American (Schneider et al., 1994; Struckman-Johnson, 1988; Weiss, 2010) and Mongolian (Peitzmeier et al., 2015) research. This review argues that the questioning mentioned results in misconceptions about male rape that function to minimise and dismiss the issue of male rape (Payne et al., 1999; Bohner et al., 2009), following Burt’s (1980) definition of a rape myth.

Notably, some of the myths identified in the review contradict each other, revealing the complexity of male rape myths. For example, the myths “male rape can be avoided” and “straight men are the ‘real’ victims” acknowledge the possibility of straight men being victims of rape and aim to differentiate the experiences of straight and gay male victims adversely

(Davies & McCartney, 2003; Wakelin & Long, 2003; Doherty & Anderson, 2004; Davies & Hudson, 2011; Hammond et al., 2017). On the other hand, the myths “he must be gay” and “rape allegations are a cover-up” argue that all male victims of rape are gay and either unaware of this or actively trying to hide their sexuality (Anderson, 1999; Payne et al., 1999; Wakelin & Long, 2003; Hammond et al., 2017). A common thread running through these myths is their basis in the acceptance of homophobic beliefs, stereotypical gender roles, and hegemonic masculinity (Doherty & Anderson, 2004; Anderson & Bissell, 2011; Connell & Messerschmidt, 2005; Weeks, 2017).

Moreover, the review found that similar Irish (McGee et al., 2011) and American (Judson et al., 2013; Walfield, 2018; DeJong et al., 2020) research has found adherence to sexual orientation-based MRMs, while Dutch (Huitema & Vanwesenbeeck, 2016), South African (Mgolozeli & Duma, 2019), and American (White & Yamawaki, 2009) research has demonstrated endorsement of gender role and hegemonic masculinity-based MRMs. This suggests that the issue of male rape is also an issue of homophobia and sexism cross-culturally (Davies & Hudson, 2011; O’Neil, 2013). However, it should be noted that how these MRMs are communicated varies across cultures due to factors such as the country or state’s discourse concerning sexual violence law, rape, sexual orientation, and gender identity. This highlights the need for a nuanced understanding of how male rape myths function within particular cultural contexts to develop more effective interventions.

Nevertheless, this review's findings suggest that the MRMA aims to dismiss the issue of male rape as an issue of sexual identity. Should this dismissal of the issue of male rape persist, there is a risk that gay survivors will be further marginalised and that straight survivors will not be able to see themselves reflected in the services available for male survivors. Both problems could negatively impact male survivors' physical and psychological well-being, as male rape can happen to all men regardless of sexual orientation, including Men who have Sex with Men (Carpenter, 2009). Another risk is the potential for these myths to impact the credibility of male survivors of rape in legal proceedings. For example, if a survivor's sexual orientation is questioned based on a myth that all male victims of rape are gay, this could impact the likelihood of the perpetrator being held accountable. This could also result in further victimisation of straight survivors whose sexual orientation is unduly questioned. Additionally, this could result in a lack of legal protections for male survivors of rape and contribute to high attrition rates, per George and Ferguson (2021), and affect charges, pleas and conviction rates (Thomas, 2023). Therefore, efforts to dispel MRMs are necessary to prevent the marginalisation of gay survivors and ensure that straight survivors see themselves reflected in the services available to male survivors, including legal services (Carpenter, 2009; Pearson & Barker, 2018).

The review findings have also shown a need for more up-to-date research on male rape and MRMs, as relevant studies are scarce and dated (Pearson & Barker, 2018). the need for more up-to-date research on male rape and MRMs has legal implications for policymakers and lawmakers. If research on male rape is scarce and dated, this can impact the development of policies and laws related to sexual violence. Without up-to-date research, policymakers and lawmakers may not fully understand the issues faced by male survivors of rape and may not be able to develop effective policies and laws to address these issues. Another legal implication is the need for information resources to dispel MRMs for all audiences (e.g. survivors, formal services and legal professionals). Review findings have demonstrated that male survivors can accept MRMs and know that MRMs persist within English society (Walker et al., 2005; Davies et al., 2013; Hammond et al., 2017; Weare & Hulley, 2019). This knowledge influences survivors' likelihood of seeking support from formal services, legal services, family, and friends out of fear of secondary victimisation (Campbell et al., 2001; Abdullah-Khan, 2008; Carpenter, 2009; Allen et al., 2015; Hammond et al., 2017; Jackson et al., 2017). This is noteworthy, as the findings show that male survivors' psychological and physical well-being are impacted by rape, contrary to rape myths that aim to diminish the impact of male rape. Therefore, the information resources could help reduce further victimisation of male survivors of rape.

2.5.1 Methodological Considerations

This review did not find empirical support for the notion that different types of people (e.g., friends, family, formal support systems, mock jurors) can be accepting of male rape myths, contrary to previous research (Anderson & Lyons, 2005; Jackson et al., 2017), as a majority of the studies included relied on student samples as mentioned above. Indeed, it is important to understand rape myths among university students because this population is at an increased risk of sexual violence (Judson et al., 2013; Reling et al., 2018; Crocker & Sibley, 2020). However, these studies may provide an underestimated rape myth adherence which threatens the validity of their findings because university students are predominantly sampled from social sciences programmes. Social sciences students may be aware of rape myths. Therefore, research that employs student samples may demonstrate lower rape myth adherence than broader society. (Hanel & Vione, 2016). Future research should examine MRMA in a sample from the wider community, similar to the research by Davies and McCarthy (2003) and Davies and Hudson (2011), who examined community sample endorsement of MRM. Furthermore, only one study within this review sought to examine survivors' MRMA (Hammond et al., 2017), and one other explored the impact of male rape and sexual assault on well-being (Walker et al., 2005) since 1994 in England. It would also be beneficial if future research could allow male survivors to voluntarily participate in

research that concerns them, similar to research by Hammond et al. (2017). Their experiences as male survivors, as highlighted by Dinisman and Moroz (2017), could offer valuable insights into perceptions of male rape in England, including the use of gendered terminology in the law. This is consistent with the findings of Weare and Hulley (2019).

In addition to the preponderance of the student sample, most of the research in the review was quantitative. Eight of the 11 studies in the review used quantitative methodology and demonstrated how individuals' MRMA and blame attribution might vary in controlled circumstances (Queirós et al., 2017). However, due to the numerical nature of quantitative research, contextual factors (e.g., the reasoning behind scale item ratings, understanding and knowledge of the constructs being measured), which would have assisted in interpreting the results or explaining the variations found, could not be applied to the findings (Braun & Clarke, 2013; Queirós et al., 2017). Furthermore, these studies did not directly address the potential connections between the law and male rape myths, making it difficult to draw definitive conclusions on whether the law informs the myths or if societal beliefs shape the law, which could perpetuate the myths. The focus on quantitative approaches aimed to quantify the complex topic of male rape, thus limiting their ability to draw inferences from the findings (Eatough, 2012). Consequently, there is room to examine the issue of MRMA and blame attribution qualitatively because the findings from the quantitative approaches provide a partial view of MRMA. The use of qualitative approaches would allow for the exploration of confirming and contradicting beliefs on the topic of MRMA and blame attribution, similar to the two studies by Anderson et al. (2001) and Doherty and Anderson (2004) in the review, which used discourse analysis (Wiggins & Potter, 2017). Discourse analysis could provide evidence of what misconceptions of male rape persist in society, how they are constructed through language (Gee & Hanford, 2014; van Dijk, 2015), and how the legal system may influence them.

Some quantitative studies did not report the size of the effect they found. The four quantitative studies that did report effect sizes had good substantive significance (effect size; Hill et al., 2007), though the remainder of the studies did not report the effect sizes, leaving readers to decide whether the study had enough substantive significance (Cohen, 1988; Lakens, 2013). It would also be beneficial for future research to report effect sizes, as reporting substantive significance and statistical significance aids the reader in understanding the extent of the differences observed (Sullivan & Feinn, 2012; Schäfer & Schwarz, 2019). Furthermore, the quality appraisal process revealed that six of the quantitative and mixed methods studies (Hong et al., 2018) did not clearly state their target population or explain their chosen target population. Thus, it was not easy to ascertain whether these studies represented their population of interest (Sturgis, 2012).

Additionally, some studies achieved a low nonresponse bias (6 studies with response rate above 60%; Sturgis, 2012). Four of the quantitative studies and the mixed methods studies did not report a response rate. Fincham (2008) argues that it is essential for studies to report response rates to help the reader ascertain whether the study's sample of participants is representative of the study's target population. Therefore, it was not possible to evaluate the studies' findings that did not provide a response rate in the review with the assurance that the sample of participants reflected aspects of the target population with depth and breadth (Fincham, 2008). Thus, the lack of response rate reporting impeded the ability to assess the validity and reliability of the findings fully (Fife-Schaw, 2012). Future research could benefit from reporting both the target population and response rate, as these would allow the reader to appraise the research findings with confidence in whether the sample adequately represents the population of interest (Lavrakas, 2008).

A few studies applied materials that were designed to be used in female rape myth studies directly to male rape myth studies with altered gender pronouns (Anderson et al., 2001; Davies & McCartney, 2003; Doherty & Anderson, 2004; Anderson & Bissell, 2011; Davies & Hudson, 2011). Whilst this limited the number of scales participants would have to complete, reducing respondent fatigue (Lavrakas, 2008), research has demonstrated that the conceptualisation of MRM and FRM can be similar and dissimilar (Davies et al., 2013). Furthermore, a study within the review argued that a robust MRM scale did not exist as reasoning for constructing their own (Anderson & Quinn, 2009). However, the study was published in 2009, while the Male Rape Myth Acceptance Scale ($\alpha = .90$; Melanson, 1998) was available and has been shown to have good internal consistency ($\alpha = .91$; Kassing et al., 2005; Cohen & Swerdlik, 2018). Therefore, it would be advantageous for research examining MRM and FRM to use psychometric scales specifically designed to measure constructs unique to male and female rape.

Furthermore, as previously stated 6 of the 11 studies disclosed the racial or ethnic demographics of their participants, and most of those samples were predominantly Caucasian (90% to 100%; Davies & McCartney, 2003; Wakelin & Long, 2003; Davies & Hudson, 2011; Davies et al., 2013; Hammond et al., 2017; Walker et al., 2005). Thus, their findings do not represent the England and Wales population. According to England and Wales 2021 Census (ONS, 2022b), Asian ethnic groups (5.5 million), Black ethnic groups (2.4 million), mixed ethnicity groups (1.7 million) and other ethnicities (1.3 million) make up approximately 18.3% of the population in England and Wales. Consequently, a gap exists in investigating to what extent ethnicity influences MRMA. It would be beneficial to investigate ethnicity, and MRM instead of race, as this would allow individuals to self-describe their ethnic background (Solomos & Collins, 2010). This would also allow for detecting ethnic

differences if any were present (Kashima & Gelfand, 2012; Connelly et al., 2016) and contribute to ensuring that ethnic groups are sufficiently represented within research (Owusu-Bempah & Howitt, 2000; Redwood & Gill, 2013). Notably, the review was open to primary studies from Wales; however, none were found. Hence there is room for scholars to examine MRMA in Wales to help close this knowledge gap.

Nevertheless, there were a few limitations of the review that were identified. Firstly, most of the research within the study focused on stranger rape, when the attacker is not known to the victim. Therefore, caution should be exercised when applying the findings to acquaintance rape. Future research could explore perceptions of male rape with a focus on stranger and acquaintance rape to identify any differences (Davies & McCartney, 2003; Davies & Hudson, 2011; Persson & Dhingra, 2021). Secondly, due to the methodologically diverse and small sample of studies included in the review, it was not possible to conduct a meta-analysis to demonstrate a generalisable effect size (Cohn & Becker, 2003; Valentine et al., 2010). It was also improbable to conduct a meta-ethnography to develop models from findings across multiple qualitative studies (Atkins et al., 2008; France et al., 2019). Future research should focus on exploring the issue of male rape qualitatively so that it can be possible for a meta-ethnography to be conducted.

Additionally, future reviews could include unpublished work (e.g. dissertations, preprints) to increase the sample size, thus increasing the ability to conduct a meta-analysis or meta-ethnography. Thirdly, the full spectrum of sexual and gender identities has not been fully explored as the studies only reported on the demographic of sexuality as “straight”, “gay”, “trans man”, “trans woman”, and “cross-dressing”. Further studies could explore how a wide range of sexual (e.g. bisexual, pansexual, asexual men) and gender identities (i.e. genderqueer men) inform perceptions of sexual violence against individuals who identify as men. Lastly, it was not possible to contextualise the MRMs observed to FRMs found in the UK due to the different theoretical frameworks underpinning MRMs and FRMs. Therefore, there is room for further research to explore the theoretical ideologies that inform both FRMs and MRMs to identify any differences and/or similarities.

In conclusion, the MMASR was used to identify, evaluate, and synthesise empirical evidence from quantitative, qualitative, and mixed methods studies in England and Wales to address the review's research question. Through this approach, the thematic synthesis demonstrated that there are male rape myths that persist in England. The identified myths concern stereotypical rape scripts, stereotypical gender roles, the preventability of rape, and sexual identity. Challenging MRMs would be essential to reduce the endorsement of stereotypical gender roles and reduce acceptance of homophobic beliefs in England. In addition, further empirical attention is required to explore the perception of male rape myths

to raise awareness of the issue of male rape and challenge misconceptions about male rape. Finally, research should use qualitative and mixed methodologies to explore the different perspectives of MRM in England with non-student samples.

2.6 Transparency Statement

To ensure the integrity of the systemic literature review, which was previously published in a journal article, as noted earlier, no edits have been made to this section within the thesis. Instead, an additional section below has been incorporated to elucidate how the literature review informed the current research. Moreover, in compliance with copyright stipulations, diagrams and figures included in this thesis are based on previous draft versions before the journal's final publication. This approach adheres to the copyright agreement, which permits using the accepted manuscript version before final edits for upload to the university's repository. The copyright agreement specifies that only the accepted manuscript version, prior to final journal edits, is permissible for upload to the university's repository. This measure safeguards against unauthorised redistribution of the published material while allowing the scholarly work to contribute to the ongoing academic discourse.

2.7 The Rationale for the Present Thesis

In the systematic review detailed above, three interconnected gaps in knowledge are identified. The first gap concerns the research landscape in England and Wales, which predominantly featured quantitative studies. These studies primarily focused on identifying associations and causal relationships between various constructs and MRMs, with limited depth in exploration (Kambashi et al., 2023). In response, this thesis pivots toward a qualitative approach to investigate participants' perceptions of male rape myths, mirroring strategies found in the literature (Anderson et al.., 2001; Doherty & Anderson, 2004). Qualitative research is instrumental for its ability to delve deeply into complex issues, offering rich, detailed insights into people's experiences, perceptions, and the meanings they ascribe to them. This approach is particularly suited for exploring how MRMs are constructed, maintained, and deconstructed and examining the underlying power dynamics that sustain them (Foucault, 1991). This detailed qualitative exploration is presented in Studies One (Chapter Four) and Two (Chapter Five), which utilise Critical Discourse Analysis ([CDA]; Fairclough, 1995; 2001a) as the primary methodological framework. CDA is adept at uncovering the subtle ways language reflects and perpetuates power relations and ideologies, making it an ideal tool for this investigation (Arribas-Allyon & Walkerdine, 2017). The methodological underpinnings and rationale for choosing CDA are thoroughly discussed in Chapter Three. Specifically, Study One explores professionals' understanding of MRMs in

England and Wales through CDA. Meanwhile, Study Two seeks to understand survivors' perceptions of male rape and female-perpetrated sexual assault within the same geographical context. Together, these studies aim to provide a comprehensive understanding of MRMs from the perspectives of those who work with survivors and the survivors themselves.

The second gap identified from the systematic review stems from the considerable reliance on research materials, such as psychometric scales, originally developed within the context of female rape myths. This reliance creates a distinct lack of measurement tools designed explicitly for MRMs, highlighting an area of unmet need in the research (Kambashi et al., 2023). Addressing this gap, the thesis endeavours to understand MRMs without simply extending the narratives found within female rape myth literature. The goal is to develop an insightful framework grounded in the qualitative narratives gathered in Studies One (Chapter Four) and Two (Chapter Five). This framework is subsequently tested on a broader public sample in Study Three (Chapter Six) and aims to enrich the existing body of quantitative research. Quantitative research is invaluable for producing findings that can be generalised across populations, offering robust evidence that can inform policy, practice, and further research (Borgstede & Scholz, 2021). Therefore, the variable selection for Study Three is directly prompted by insights gained from the qualitative studies, ensuring that the quantitative investigation is deeply rooted in nuanced understandings of MRMs.

The third gap identified pertains to the prevalent use of student samples in existing research, which did not fully capture the perceptions of the broader population regarding MRMs (Kambashi et al., 2023). Recognising this limitation, the thesis broadens its investigative lens to encompass a more varied participant pool. This expanded scope includes front-line professionals likely to encounter male survivors of rape (Study One, Chapter Four), male survivors of rape and sexual assault themselves (Study Two, Chapter Five), and the general public's views on male rape myths and blame attribution (Study Three). By adopting this diverse sampling approach, the research aims to garner a richer, more holistic understanding of male rape myths as they are perceived across different societal segments, in line with the aim of mixed methods research (Fetters & Freshwater, 2015).

In alignment with this comprehensive strategy, the three studies are analysed sequentially, employing qualitative and quantitative methodologies. This mixed-method approach allows for a layered exploration of MRMs, facilitating a deeper insight into how these myths are understood, challenged, and perpetuated across various demographics (Noyes et al., 2019). Hence, the overarching goal of this thesis is to dissect the complex fabric of societal perceptions surrounding MRMs, thereby contributing to a more nuanced

and informed discourse on the subject. This strategy underlines the thesis's commitment to broadening the narrative around male rape myths beyond the confines of homogeneous sample groups, offering a more transparent, more inclusive view of the perceptions and attitudes that shape responses to male survivors of sexual violence.

Summary of Chapter

This chapter, A Systematic Literature Review, explores the literature on MRMs within the English setting to determine the misconceptions about male rape in England and gain an understanding of them. This chapter ends by outlining the thesis direction and scope. The next chapter focuses on the methodology of the thesis, which comprises the worldview underpinning the thesis, the theoretical framework that helps understand the findings of the thesis and the mixed methods approach and methods. All these factors inform the research aims and objectives, which are presented at the end of the chapter.

3 CHAPTER THREE: METHODOLOGY, CONCEPTUAL AND THEORETICAL FRAMEWORK AND METHODS

Chapter Two presents a systematic literature review showcasing that male rape myths (MRMs) in England are predominantly rooted in entrenched gender role stereotypes and homophobic attitudes toward men. Key findings of the review in Chapter Two highlight the importance of delving deeper into societal perceptions of MRMs, recognising their entanglement with intricate social issues. These social issues include conceptualisations of sexual violence, health disparities, sexual identity complexities, and mental health concerns, as Thomas and Kopel (2023) discuss in the context of understanding male rape. Additionally, Chapter Two demonstrates that most existing knowledge on MRMs in England is derived from quantitative studies with student samples, highlighting the need for heterogeneous samples. In addition, while some qualitative studies are included in Chapter Two, they are dated and raise issues concerning their applicability in contemporary societal shifts. This presents an opportunity to expand the understanding of MRMs within broader, more diverse populations and employ methodologies beyond the quantitative realm. This brings us to the focus of this chapter, which contains two sections. The first section focuses on the theory underpinning the thesis, and it begins with the study's methodology, grounded in the pragmatist worldview. This philosophical foundation provides a flexible and practical lens that examines the research problem. Following this, the chapter details the conceptual framework that forms the backbone of this research and offers insight into the theoretical underpinnings that guide the investigation in this thesis. Then, the chapter delves into the mixed-methodology approach adopted in this research. This discussion illuminates how combining qualitative and quantitative methods enhances the depth and breadth of the study, enabling a more comprehensive exploration of MRMs. The second section focuses on the methods used to investigate the multifaceted issues concerning MRMs through discourse analysis and multiple regression. The chapter concludes with a summary of the methodology, methods, research aims, and questions.

3.1 Section One: Methodology

3.1.1 Philosophical assumptions

Philosophical assumptions, or worldviews, are foundational beliefs and theories that underpin research inquiries. A worldview refers to the fundamental beliefs and principles about the nature of reality and knowledge that guide our understanding of the world. These assumptions encompass ideas about what exists, how it can be known, and the nature of truth. In the context of research, worldview assumptions underlie the philosophical stance

that researchers take towards their study, influencing their choice of methods, interpretation of data, and understanding of the MRMs they are investigating (Koltko-Rivera, 2004). Guba and Lincoln (2005) emphasise the importance of recognising these assumptions, highlighting how they significantly influence the research process. This recognition is particularly relevant in contemporary psychological research, where post-positivism and constructivism have held prominence as foundational paradigms underpinning quantitative and qualitative empirical enquiry (Kankam, 2019). Post-positivism, often linked with quantitative research, is a philosophical stance that recognises the existence of an objective reality but acknowledges the limitations of our ability to comprehend it fully. This perspective suggests that while an external world is independent of our perceptions, our understanding of it is always fallible and subject to revision. Post-positivism thus endorses rigorous methods and empirical evidence while accepting that knowledge is tentative and probabilistic (Guba & Lincoln, 2005). Conversely, constructivism is more aligned with qualitative research and posits that individuals construct knowledge and understanding socially. It asserts that our experiences, culture, and social context shape our perceptions and interpretations of the world. Constructivism holds that there are multiple subjective realities rather than a single, objective truth and highlights the importance of understanding the meanings and experiences of male survivors and professionals in their practice (Delanty, 2005; Guba & Lincoln, 2005).

As Cherryholmes (1992) and Tashakkori and Teddlie (2003) highlight, Pragmatism offered a middle ground between post-positivism and constructivism. It argues for a practical research approach that focuses on the consequences and usefulness of knowledge rather than being bound by strict adherence to either an objective or subjective view of reality (Morgan, 2014). Pragmatism challenges the dichotomy between post-positivism and constructivism. It is particularly well-suited for mixed methods research because it allows for integrating both quantitative and qualitative methods in a complementary manner (Dewey, 1925/2008).

Therefore, this thesis chose Pragmatism as the guiding worldview, particularly suited to exploring complex social phenomena such as MRMs (Morgan, 2007) because the literature review (Chapter Two) demonstrated that research in MRMs has primarily taken a post-positivist worldview using quantitative methodology. Thus, there was room to consider a different worldview, such as pragmatism, to examine the issue of MRMs. Consequently, the research considered various forms of Pragmatism, specifically the approaches of Dewey (1939/2008a), Morgan (2014), and James (1975), to find the most suitable framework. Dewey's Pragmatism, particularly influential in the fields of education and democracy, emphasises the role of experience in the process of inquiry. However, Dewey's (1939/2008a) approach, heavily focused on experiential learning and the pre-conceptual 'itch' in

experience, may not be fully compatible with quantitative research's structured, data-driven nature. This incompatibility arises because Dewey's model prioritises lived experiences and contextual understanding, which are often less quantifiable and more subjective, thus potentially clashing with the objective and systematic approach characteristic of quantitative methods, as Luntley (2016) argued.

On the other hand, Morgan's (2014) interpretation of Pragmatism aims to reconcile Dewey's (1939/2008a) emphasis on practical experience with the demands of modern social research. Morgan's (2014) version of Dewey's (1939/2008a) philosophy, which emphasises the connection between social research and political concerns, is particularly well-suited for studies with direct political implications or that aim to influence policy and social justice issues. In such contexts, Morgan's approach helps frame the research within a broader political and social justice narrative, making it more impactful in advocacy and policy change. However, a different approach was considered suitable for a study exploring MRMs in England and Wales, especially when these myths are still relatively under-researched and lack a well-established foundation of knowledge. Before advocating for political change or policy reform, it is essential to understand the subject matter thoroughly (Towl, 2021). Consequently, James's (1975) interpretation of Pragmatism presents a more balanced approach, overcoming the limitations of Dewey's (1939/2008a) and Morgan's (2014) frameworks. James’s (1975) Pragmatism acknowledges the strengths and contributions of qualitative and quantitative methodologies, offering a more holistic perspective. This balance is crucial for a study that aims to integrate diverse methodological approaches to explore complex social phenomena like male rape myths comprehensively. James’s (1975) framework allows for a pragmatic synthesis of different research methods, aligning well with the mixed-methods approach of this study.

As a pioneering psychologist and philosopher, James (1975) offered a perspective well-suited to the principles of psychological research. Their emphasis on the practical effects of ideas bridges the empirical rigour of quantitative methods with the depth of qualitative insights. This balance is essential for MRMs, where both empirical patterns and deeper psychological implications are key. James's (1975) pragmatism, which advocates for a pluralistic approach, aligns with this research's practical and applied nature, effectively integrating diverse methodologies. By embracing James's philosophy, the study adopts a pragmatic lens, focusing on actionable insights and the practical relevance of findings in both empirical and psychological dimensions of MRMs. This philosophical foundation informs the conceptual-theoretical framework crafted to resonate with pragmatic principles, ensuring that the theories and models chosen are relevant for practical utility and real-world application

(Towl, 2021). The worldview thus guides the methodology and influences the interpretation and integration of theoretical concepts within the research.

3.1.1.1 Summary of Worldview

Embracing James's (1975) pragmatic philosophy, this research adopted a practical approach emphasising methodological flexibility and helpful utility. This alignment with James's (1975) Pragmatism facilitated a comprehensive examination of MRMs, focusing on generating actionable insights and practical relevance. The study's philosophical foundation directly influenced the development of its conceptual and theoretical framework, ensuring alignment with a pragmatic worldview. This approach guided the methodology and shaped the interpretation and integration of theoretical concepts. The selected theories, to be discussed in the following section, are chosen for their compatibility with the pragmatic approach and relation to forensic psychology. This integration of theory and methodology, underpinned by Pragmatism, ensures a cohesive and robust approach to exploring MRMs, balancing theoretical depth with empirical rigour.

3.1.2 Conceptual Theoretical Framework

3.1.2.1 Introduction Conceptual Theoretical Framework

The conceptual-theoretical framework of this research integrates and synthesises multiple interrelated concepts and theories to guide empirical enquiry. As an essential tool, it brings coherence to the study, informing its design and purpose (Grant & Osanloo, 2015; Kivunja, 2018; Lederman & Lederman, 2015). This study's conceptual-theoretical framework is built upon the theory of Hegemonic Masculinities (Connell, 2005; Connell & Messerschmidt, 2005) and the concept of promoting Healthy Masculinities (Di Bianca & Mahalik, 2022). This integration of Connell's established theory of masculinities with the emerging concept of Di Bianca and Mahalik’s (2022) healthy masculinities provides a comprehensive and nuanced lens through which to explore and understand male rape myths. The conceptual, theoretical framework first outlines the theory of hegemonic masculinities, followed by the promotion of healthy masculinities theory and how they informed the current thesis.

3.1.2.2 The Theory of Hegemonic Masculinity

In the study of male rape, understanding the underpinning concepts of MRMs necessitates an exploration of societal notions of men and masculinities. This research drew upon Connell’s (2005) theory of Hegemonic Masculinity, refined by Messerschmidt (2005), to

interpret gender practices revealed in the data. Masculinity, as a form of gender expression, encompasses roles, identities, and power dynamics predominantly associated with men (Connell & Pearse, 2015). Hegemony refers to the dominance of one social group over others (Gramsci, 1971). In the current context, it is a form of masculine expression that dominates forms of masculine expression. Hegemonic masculinity, as articulated by Connell (2005) and refined by Connell and Messerschmidt (2005), is a crucial concept that illustrates the culturally dominant ideal of masculinity. This ideal upholds specific norms of male behaviour and is characterised by the dominance of certain groups of men over women and men. Hegemonic masculinity in Western societies, particularly in England and Wales, embodies traits such as strength, heterosexuality, authority, and emotional restraint and is often considered the most honoured and socially endorsed form of masculinity (Kivel, 1998; Jewkes et al., 2015). The concept is significant in understanding societal responses to male rape, as it enforces the gender binary and subordinates' non-hegemonic masculinities, especially those associated with gay or bisexual identities (Ruxton & van deer Gaag, 2013) because it provides crucial insights into how societal norms and power dynamics around masculinity shape the perceptions of male rape.

The selection of Hegemonic Masculinity theory as the framework for this research was strategically made to address the thematic domains identified in the literature review, as outlined in Chapter Two. These themes include "Departure from the Rape Script," "Male Rape Can Be Avoided," and the meta-theme "Victim's Sexual Orientation Influences Perceptions of Male Rape." This theory was chosen because it provides a robust conceptual tool for dissecting the gendered nature of MRMs and the power dynamics that underpin these themes (Doherty & Anderson, 2004). One significant application of the theory of Hegemonic Masculinity (Connell, 2005; Connell & Messerschmidt, 2005) in the study is its relevance in understanding the departure from the traditional rape script. Hegemonic norms often define 'real' rape as involving a male perpetrator and a female victim. Cases of male rape that deviate from this narrative challenge these entrenched norms, leading to myths that delegitimise or trivialise male survivors' experiences. This analysis is crucial for understanding societal expectations of masculinity and their impact on the recognition and interpretation of male rape incidents.

Additionally, the theory of Hegemonic Masculinity (Connell, 2005; Connell & Messerschmidt, 2005) offered insights into misconceptions about the preventability of male rape, rooted in ideals of male strength and sexual agency. The belief that men should be able to avoid rape is tied to these ideals, contributing to victim-blaming attitudes. This perspective aids in understanding how societal beliefs about masculinity contribute to myths portraying male rape as preventable. Likewise, the theory provides a framework for

analysing how a victim's sexual orientation affects perceptions of male rape. The sub-themes 'Straight Men Are The ‘Real’ Victims' and 'He Must Be Gay' are directly linked to the intersections of homophobia and hegemonic masculinity norms (DeJong et al., 2020; Jackson, 2006). This othering of gay male survivors as not part of the hegemonic masculinity group influences how MRMs are perpetuated, particularly regarding assumptions about sexuality and gender norms.

While Hegemonic Masculinity theory, as advanced by Connell and Messerschmidt (2005), provides valuable insights into societal power dynamics and gender norms, it has faced critiques for its ambiguity and potential for overlapping interpretations (Demetriou, 2001; Gough, 2018; Wetherell & Edley, 1999; Whitehead, 2003). Demetriou (2001) pointed out the challenges in applying the theory practically due to the complex interplay of internal and external hegemonic masculinities. Internal hegemony refers to men dominating other men, while external hegemony pertains to men's dominance over women through institutional structures. Collier (2002) and Mac an Ghaill and Haywood (2012) have also highlighted the theory's focus on antagonistic hegemonic masculinity traits, as discussed above. In response, Connell and Messerschmidt (2005) have clarified that their theory is not intended to offer comprehensive solutions but to critically examine the problematic nature of hegemonic masculinity's place in societal processes. The theory's strength lies in its ability to analyse the othering of non-hegemonic masculinities across various disciplines (Messerschmidt, 2018). Its application in forensic psychology is particularly relevant, as it aids in exploring how societal constructs of masculinity influence individual and interpersonal dynamics. Forensic psychology's broad scope includes analysing victimisation and the societal impact on both offenders and survivors, which aligns with the objectives of this study (Towl, 2021).

Additionally, given its significance in understanding MRMs (Kassing & Prieto, 2003; Kassing et al., 2005), Hegemonic Masculinity theory was employed as a foundational framework for this research. However, to address its limitations in terms of negative portrayals of masculinity and lack of guidance for overcoming these challenges, the study also integrated the 'Relational-Cultural Framework of Promoting Healthy Masculinities' proposed by Di Bianca and Mahalik (2022). This additional framework offered a more balanced perspective, emphasising the promotion of healthier masculinity constructs and providing pathways to address the issues identified by the theory of Hegemonic Masculinity and the application of the theory.

3.1.2.3 Relational-Cultural Framework for Promoting Healthy Masculinities

This study expands its theoretical framework to include the concept of positive masculinities, as conceptualised through Relational-Cultural Theory (RCT) by Di Bianca and Mahalik (2022). Drawing upon the foundational work of Connell and Messerschmidt (2005), RCT provided a lens to understand and challenge harmful gender ideals, advocating for the development of healthier masculine behaviours. This theory is particularly pertinent in the context of MRMs, as it addresses how the socialisation of hegemonic masculinities throughout a man's life can perpetuate oppression and marginalisation. Di Bianca and Mahalik reported how hegemonic masculinity fostered relational disconnections among men, reinforcing oppressive norms and contributing to various health crises (Jordan, 2018; Reichert, 2019). The application of RCT in this study is instrumental in identifying and opposing the detrimental patterns of traditional masculinity. By exploring the negative aspects of hegemonic masculinity and promoting healthier alternatives, the study aims to understand and ultimately challenge the adherence to MRMs within the UK context. This approach aligns with the research objectives and offers a comprehensive framework for examining resistance to oppressive gender norms and fostering a shift towards more positive masculine behaviours.

RCT sheds light on how dominant socialisation processes entrench men within the framework of hegemonic masculinity, a significant factor in sustaining MRMs. Central to this process is the suppression of emotions other than anger, as highlighted by Levant (2005), which can lead to anxiety in men about displaying vulnerability. This emotional suppression is mirrored in prevalent MRMs, such as the false belief that 'Men are not affected by rape' (Hawkins et al., 2019; McGee et al., 2011; Schulze & Koon-Magnin, 2017). Such myths can act as barriers to male survivors seeking formal support due to the fear of being judged for showing vulnerability (Mitchell et al., 2018). Additionally, RCT emphasises the role of hyper-independence and emotional distancing from other men and 'feminine' traits in isolating male survivors. This isolation can further hinder disclosing their experiences (Mckenzie et al., 2018; Sable et al., 2006; White & Kurpius, 2002). Understanding and challenging these restrictive masculinities are crucial in dispelling MRMs. RCT advocates for healthy masculinities, encouraging men to express emotions, engage in personal growth, treat others with dignity, and act compassionately (Di Bianca & Mahalik, 2022). According to RCT, these positive masculine patterns can be fostered and sustained through growth-promoting relationships marked by belonging, connection, and interdependence (Frey, 2013; Jordan, 2018). This theoretical perspective is vital in complementing the exploration of hegemonic masculinity, offering a pathway for positive change and addressing the negative patterns associated with MRMs.

RCT posits that relationships among men have far-reaching implications that extend beyond individual benefits, contributing to broader social action (Sternbach, 2001; Vera, 2020). The healthy connections men develop through these relationships can create ripple effects that transcend their immediate circles. By embracing their humanity and that of others, men can foster greater empathy and understanding within various contexts, including society, intimate relationships, families, and communities (Adams & Frauenheim, 2020; Birnie-Porter, 2016). Such an approach can heighten awareness of sexual violence as an issue affecting men and play a crucial role in its overall reduction. Moreover, engaging men in efforts to reduce violence, particularly violence against women, has shown that effective social reform requires moving beyond changing individual attitudes to advocating for institutional shifts (e.g., among legislators, policymakers, and stakeholders; Casey et al., 2018; Willig, 1999). This approach is especially relevant in the context of male rape, where research and public awareness still lag behind the understanding of female rape. Addressing attitude change as part of a comprehensive strategy for social reform remains a critical need in this area (Davies et al., 2006).

RCT encouraged men, within their relational experience groups, to critically examine and challenge the glorification of sexual conquest, aggression, and objectification that are often central to hegemonic masculinity. This critical examination fostered a transformation in their relationship with power, steering it towards the support of pro-social values. For instance, men could play an active role in holding rapists and sexual assaulters accountable for their actions, moving away from victim-blaming attitudes towards a more supportive and empathetic stance (Birnie-Porter, 2016; Flood, 2015; Rye, 2006); such a shift aligned with the objectives of this research, aiming to promote social reform and a deeper understanding of MRMs. Addressing the critique that RCT has been predominantly associated with female rape myths (FMRMs), this study took a significant step by extending its application to MRMs. This innovative approach recognised that MRMs are complex and not limited to the notion that only men can be perpetrators (Mgolozeli & Duma, 2019). By applying RCT within the context of male rape and sexual assault, the research challenged traditional narratives and delved into how relational experiences among men could be instrumental in transforming and dispelling these myths. This application of RCT highlighted its versatility and potential in addressing MRMs and FMRMs, thus contributing to a more comprehensive and inclusive understanding of sexual violence. The study's extension of RCT to MRMs enriched the theoretical framework and offered new perspectives and possibilities for addressing a crucial issue in forensic psychology.

3.1.2.4 Summary of Conceptual-Theoretical Framework

This study's conceptual-theoretical framework comprised the theory of hegemonic masculinity (Connell, 2005; Connell & Messerschmidt, 2005) and the RCT for promoting healthy masculinities (Di Bianca & Mahalik, 2022; Jordan, 2018) to investigate the role of hegemonic masculine norms in shaping MRMs. The theory of Hegemonic Masculinity was instrumental in understanding how societal perceptions of the perceived masculine ideal contribute to the formation and maintenance of MRMs. This framework was particularly relevant in exploring the societal dynamics of masculinities in England and Wales and examining how adherence or departure from traditional hegemonic norms influenced these myths. Additionally, the application of RCT provided a complementary perspective, focusing on cultivating healthier masculinities. RCT highlighted the importance of fostering relational connections among men and challenging the norms of traditional hegemonic masculinity. This approach was instrumental in explaining health-positive masculine behaviours and attitudes, thereby offering a means to address and transform the underlying factors contributing to MRMs. Transitioning from the theoretical underpinnings, the next part of this chapter will outline the methodological approach of the research. This approach, grounded in mixed methods research, builds upon the established theory of Hegemonic Masculinity and RCT for Healthy Masculinities. It detailed the specific methodologies employed in the study, including the use of Foucauldian theory to analyse qualitative data, thereby providing a cohesive and integrated understanding of the research design and its application.

3.1.3 Methodological approach

3.1.3.1 Introduction to the Methodological Approach

This thesis adopted a mixed-methods approach to investigate male rape myths (MRMs) in England and Wales, underpinned by a pragmatic worldview. This approach facilitated an integrated and comprehensive exploration of MRMs. The qualitative research component employed Critical Discourse Analysis (CDA) to delve into the perceptions and narratives of professionals and survivors, focusing on the underlying societal discourses and norms (Willot & Griffith, 1997). In contrast, the quantitative research component employed exploratory analysis, aligning with the study's exploratory nature. This approach enabled the examination of various relationships and patterns within the data, particularly regarding blame attributions in acquaintance male rape and sexual assault scenarios (Creswell & Plano Clark, 2018). Insights from the qualitative research informed the quantitative analysis, assisting in identifying emerging trends and hypotheses pertinent to MRMs.

3.1.3.2 Mixed Method Approach to Male Rape Myths

The thesis employed a mixed-methods approach to explore perceptions of MRMs in England and Wales. Since the 1980s, social sciences research in the UK (Bryman, 1988,

2006; Fielding & Fielding, 1986) has increasingly recognised the need to address complex research problems beyond the scope of singular quantitative or qualitative methodologies. For example, examining MRMs require understanding not only the prevalence and patterns of these myths (a quantitative aspect) but also the deeper societal and psychological underpinnings that give rise to them (a qualitative aspect). Such myths may include beliefs about the nature of male rape victims, societal responses to male survivors, and the intersection of gender norms with perceptions of victimisation, as discussed in the conceptual-theoretical framework. By integrating quantitative and qualitative methods, this research aligned with the pragmatic worldview, adopting a 'what works best' approach to comprehensively investigate how professionals, survivors, and the community understand MRMs (James, 1975).

The specific research questions detailed in the summary of this chapter and the context of existing literature on MRMs (see Chapter Two) informed the decision to adopt a mixed-methods approach. In mixed-methods research, various designs are available, each with strengths and purposes (Creswell & Plano Clark, 2018). Firstly, a convergent mixed methods design involving simultaneous quantitative and qualitative research with merged results was considered but was deemed unsuitable. Although it offers a comprehensive analysis, its parallel data collection focus does not support developmental exploration. In addition, convergent mixed methods design has been associated with weak integration, potentially limiting the inferences drawn from the findings (Fetters & Freshwater, 2015). Secondly, an explanatory sequential mixed methods design, which begins with quantitative research followed by qualitative research to explain the quantitative results, was also considered. However, this approach is more apt for scenarios where initial quantitative insights guide subsequent qualitative inquiries. Given that existing research in MRMAs has been predominantly quantitative (Anderson et al., 2001; Anderson & Bissell, 2011; Doherty & Anderson, 2004), often replicating techniques used in female rape myth studies, there was a need for an initial in-depth qualitative approach (similar to Davies et al., 2013).

Consequently, an exploratory sequential mixed methods design was deemed most appropriate for this study. This design began with qualitative research to explore under-researched areas, followed by quantitative research to test and generalise the qualitative findings. The exploratory sequential design was particularly suited for this research due to the limited and outdated understanding of MRMs. It allowed for an initial qualitative exploration of issues concerning male survivors, such as barriers to reporting, gender and sexuality considerations, and help-seeking behaviours, which are crucial areas that previous research has often overlooked. Creswell (2021) advocates for qualitative research within a mixed-methods framework when the existing knowledge base is limited or outdated or new

concepts need exploration. This approach offered a deeper and more nuanced understanding of MRMs, incorporating perspectives and experiences of professionals who work with male survivors and male survivors themselves previously unaddressed or underdressed in the literature (Emezue & Udmuangpia, 2022). Furthermore, psychological research into MRMs and blame attribution has predominantly followed deductive approaches with predefined samples, possibly missing critical aspects of the phenomenon. This study-maintained flexibility in sample inclusion by employing an exploratory sequential mixed-methods approach, which enabled the exploration of emerging ideas. This approach provided a comprehensive understanding of MRMs, addressing the research gap in understanding male rape and sexual assault perceptions among professionals, survivors, and the broader community in England and Wales.

This research design, grounded in mixed methods principles, allowed for a sequential exploration where each phase built upon the findings of the previous one. In the first phase (Study One, outlined in Chapter Four), semi-structured interviews with professionals offered critical perspectives on male rape, shaping the subsequent qualitative inquiry. The insights gained from these interviews were instrumental in developing the interview schedule for the second phase (Study Two, Chapter Five), focusing on survivors' experiences. Additionally, using an online questionnaire, the knowledge acquired from both qualitative studies was pivotal in crafting the scenario and identifying key variables for the quantitative phase (Study Three, Chapter Six). This structured approach ensured that each study informed and enriched the following phase, thereby enhancing the overall depth and validity of the research (Creswell, 2021; Tashakori & Teddlie, 2010). Through analysing the studies sequentially, the research maximised the benefits of both qualitative and quantitative methods. To that effect, the mixed-methods approach was also influenced by the needs of the research's target audiences, including practitioners and policymakers.

As Green and colleagues (2015) highlighted, stakeholders often require diverse forms of evidence to effectively develop procedures, practices, and policies in real-world settings. Combining qualitative and quantitative research methods created a comprehensive evidence base that is cost-effective and highly informative. This blend of methodologies allowed for a deeper understanding of the complex phenomena of MRMAs from professionals’, survivors and community perspectives, ensuring that findings are robust and applicable to various settings (Bartholomew & Brown, 2012). Such a combination enhances the practical applicability of research outcomes, aligning well with this study's pragmatic orientation and conceptual framework (West et al., 2018). However, implementing an exploratory sequential mixed-methods design brought challenges, especially within the context of a doctoral research project. Managing multiple studies under this framework

required significant time and resource allocation, demanding meticulous planning and coordination to meet the demands of a PhD timeline (Hafsa, 2019). Therefore, each research component required separate ethical approvals, which added complexity to the research process, and it was crucial to have a high level of proficiency in both qualitative and quantitative research methods. Mastery of these diverse methodologies was necessary to effectively integrate each study's findings into the overarching research design in line with the recommendations of Johnson and Onwuegbuzie (2004). The studies' respective chapters outlined how these considerations were addressed and the impact of the Coronavirus pandemic (COVID-19) on the research process—the following section conferred on the approach of the qualitative studies in more detail.

3.1.3.3 Qualitative Studies Approach

Qualitative research focuses on understanding individuals' perceptions of their social environments, incorporating the participants' experiences and the researcher's perspectives to construct meaning (Grossoehme, 2014). In exploring MRMs through the narratives of professionals and survivors, this research utilised a qualitative approach to capture the depth and complexity of these perceptions. Various qualitative methodologies within psychology were considered to identify the most suitable method for analysing these narratives. For an in-depth discussion of the selected qualitative approach, including the rationale behind the choice of Foucauldian Discourse Analysis (FDA) as a specific method within the broader CDA framework, please refer to Section 3.3.1. This section details how the qualitative studies were designed and conducted, emphasising the theoretical underpinnings that guided the analysis and the implications for understanding MRMs within the context of professional and male survivor experiences.

3.1.3.4 Quantitative Study Approach

The quantitative component of this research utilised an exploratory study design to investigate the extent to which factors identified from the qualitative studies and wider research could predict blame attribution in cases of male rape. The focus on blame attribution is vital because it helps to understand the societal and psychological mechanisms that contribute to the perpetuation of male rape myths. Blame attribution influences public perceptions, legal outcomes, and the treatment of survivors, making it a crucial aspect of understanding and addressing MRMs (Hine et al., 2021). The study's exploratory nature was essential for delving into an area where relationships between variables are not yet clearly established (Hoaglin, 2003; Keith, 2019). The exploratory analysis allowed for identifying emerging trends and patterns vital to developing a deeper understanding of the factors influencing blame attribution. Prediction was chosen as an analytical focus because it

enables the targeting of independent variables that potentially influence the dependent variable – in this case, blame attribution (Cohen, 1968). By examining the potential predictors of blame attribution, the study sought to understand which factors might be most influential in shaping attitudes and responses to male rape (Sleath & Bull, 2010). This approach is not only about identifying these factors but also about understanding their interplay and combined impact. Chapter Six provides a detailed exploration of the quantitative approach, highlighting its significant contribution to this research's overall understanding of MRMs.

3.1.3.5 Summary of the Methodological Approach

The methodological approach of this thesis is structured around a mixed-methods design and reflects the complexity of studying MRMs. The qualitative component employed Foucauldian Theory to examine the narratives of professionals and survivors to explore how societal discourses and power relations influence perceptions of MRMs. This approach was complemented by the quantitative component, which used an exploratory and predictive analysis to investigate patterns and relationships within the data related to the victim and perpetrator blame attributions. Combining these methods enabled a comprehensive exploration of MRMs, from the deep-seated societal narratives to the specific factors influencing individual perceptions. This holistic approach, grounded in Pragmatism, provided a rich and detailed understanding of the issue, contributing valuable insights into the societal and individual dimensions of MRMs. As we shift into Section Two of the Methodology and Methods chapter, the specific methods employed in the qualitative studies are discussed.

3.2 Section Two: Methods

Section One of this chapter laid the groundwork by elucidating the philosophical assumptions, conceptual and theoretical frameworks, and overarching methodological approach underpinning this research. Building on this foundation, Section Two zeroed in on the specific methods utilised in the qualitative components of the study, illustrating the techniques and procedures adopted. This section aims to provide a synopsis of how these methods were selected and their significance in exploring male rape myths (MRMs) within England and Wales. It articulates the rationale behind selecting methods and how they synergistically address the research objectives. This overview elucidates the practical aspects of the research, underscoring the coherence and robustness of the chosen methods within the study's conceptual and theoretical fabric. The focus here was on detailing the employment of Critical Discourse Analysis (CDA) in qualitative studies, a method pivotal for dissecting the narratives of professionals and survivors. This analytical tool allowed for a comprehensive examination of the language and discourses that frame perceptions of

MRMs, shedding light on the nuanced ways in which societal beliefs and attitudes towards male rape are constructed and maintained. Each study, presented in the manuscript format in Chapters Four and Five, offers in-depth insights into the process, from data collection to analysis, thus emphasising the methodological rigour and depth of inquiry achieved through these approaches. By concentrating exclusively on the qualitative methodology, this section underlines the importance of narrative and discourse in unpacking the complexities surrounding MRMs. It showcases the meticulous consideration of method selection, ensuring that the research captures and critically examines the multifaceted nature of MRMs in England and Wales.

3.2.1 Discourse Analysis

In the qualitative research component of this study, a thorough evaluation of different types of qualitative methods was considered to analyse narratives concerning MRMs from professionals and survivors. The exploration initially included Interpretative Phenomenological Analysis (IPA) and Thematic Analysis, each offering distinct analytical perspectives. IPA, known for its focus on individual lived experiences, provides an in-depth examination of personal perceptions and interpretations (Eatough & Smith, 2017). However, it may not adequately address the broader societal and discursive constructs that shape MRMs. Its emphasis on individual experiences might not have captured the societal narratives and the impact of cultural and power dynamics on these myths (Smith, 2004). Thematic analysis, another method evaluated, could have offered versatility in identifying, analysing, and reporting themes within data. While Thematic Analysis is effective for data-driven thematic exploration, it may not have delved as deeply into the intricate societal discourses and power dynamics that underpin MRMs in its unearthing of themes. Its general applicability could limit its capacity to critically examine the underlying societal constructs and power relations essential for a thorough understanding of MRMs (King & Horricks, 2010). After considering these methods, Discourse Analysis was selected as the most suitable approach for this study. Its strength lies in its ability to comprehend further societal and cultural narratives that shape perceptions of MRMs. In contrast to IPA and Thematic Analysis, which primarily focus on individual perspectives or themes derived from data, Discourse Analysis explores how language and discourse reflect and construct societal norms, power relations, and cultural understandings (Arribas-Allyon & Walkerdine, 2017). This approach was particularly relevant for investigating how societal narratives about male rape are formed, sustained, and challenged within the context of England and Wales.

Discourse Analysis on MRMs was selected for this research due to its alignment with the study's objectives. This method enabled an in-depth examination of the perceptions and interpretations of professionals and survivors regarding MRMs, considering the broader

societal and cultural contexts that influence these narratives. Over 300 Discourse Analysis types exist and offer unique topic perspectives and analytical tools, though the predominant methods in psychology are Discursive Psychology (Wiggins & Potter, 2008), Conversational Analysis (Sack et al., 1974) and CDA (Fairclough, 1995, 2001a). Firstly, Discursive Psychology concerns how psychological phenomena are constructed and negotiated in everyday language, exploring the interplay between psychological processes and discursive practices (Wiggins & Potter, 2008). Secondly, Conversational Analysis investigates the structure and organisation of talk in interaction, analysing the mechanics of conversation (e.g. turn-taking, non-verbal cues) to understand everyday social interaction and communication (Sack et al., 1974). Lastly, CDA examines how power relations and social inequalities are manifested and perpetuated through language. It emphasises the role of discourse in maintaining or challenging social structures and power dynamics (Fairclough, 2001a). After careful consideration, CDA was selected for its capacity to critically analyse the power dynamics and societal constructs underpinning MRMs, aligning with the thesis's goal to investigate the construction and maintenance of MRMs in society.

Given the decision to employ CDA, it was pertinent to highlight the foundational CDA methodologies of van Dijk, Fairclough, and Wodak. These scholars, significant figures in critical psychology, are distinguished by their unique approaches to critical discourse analysis (Blommaert & Bulcaen, 2000; Jahedi et al., 2014). Fairclough’s (2001a, 2001b, 2003) Critical Approach provides a comprehensive framework integrating textual analysis with sociopolitical contexts. This methodology is adept at revealing how discourses are shaped by and contribute to shaping social practices, offering valuable insights into the societal aspects of language use. However, despite its strengths, Fairclough's critical approach to studying language might fall short in addressing the specific cultural and historical contexts that influence MRMs. It tends to emphasise textual analysis and broad sociopolitical factors, potentially overlooking the nuanced cultural and historical elements specific to MRMs in England and Wales. For example, Fairclough's approach might not adequately capture the subtle ways in which language reflects and reinforces cultural norms and historical attitudes towards male survivors of rape. Their focus on broader societal structures could miss the finer details of individual narratives and the localised cultural influences that shape these myths. Consequently, while Fairclough's CDA offered a robust tool for analysing societal discourses, its potential limitations in capturing the depth of cultural and historical nuances in the context of MRMs necessitated considering alternative approaches.

An alternative approach considered was the discourse-historical approach, which posits a dialectical relationship between discursive practices and the fields of action in which

they are embedded, as highlighted by Wodak (2001). This perspective acknowledges that while situational, institutional, and social settings can shape and affect discourses, these discourses, in turn, can exert influence over social and political processes and actions, both discursive and non-discursive. This interconnectedness between discourse and context is central to understanding how language functions within societal dynamics. However, while Wodak's approach excels in exploring the historical aspects of discourse, it may be less adept at focusing on the immediate social and cultural contexts integral to shaping individual narratives about MRMs. The discourse-historical approach's strength in examining long-term discourse evolution might not fully capture the specific contemporary cultural and social nuances that are particularly relevant to understanding MRMs in the present context (Wodak et al., 2009). Consequently, while Wodak's methodology offered valuable insights into the historical development of discourses, its potential limitations in addressing the immediate cultural and social factors influencing MRMs necessitated exploring alternative approaches that could more directly address these aspects in the narratives of professionals and survivors in England and Wales.

On the other hand, van Dijk's socio-cognitive approach offered a compelling perspective on language study, particularly in its ability to connect the intricacies of language use (micro-structure) with broader societal issues (macro-structure). This approach centres on the concept of social cognition, which Van Dijk (1993a) defines as the collective representations and mental processes, including interpretation and learning, that shape societal understanding of groups, relationships, and structures (Kintsch & van Dijk, 1978; van Dijk, 1993a). By examining both the detailed aspects of language (micro-structure) and the broader societal contexts (macro-structure), Van Dijk's framework addresses the interplay between individual language use and societal dynamics of power, dominance, and inequality (van Dijk, 2001), have contributed to a general theory of the sustaining social inequalities particularly discourse and racism (van Dijk, 1993b, 2000, 2001). Conversely, while van Dijk's socio-cognitive approach provides valuable insights into how social cognition mediates the relationship between language and societal structures, it may not fully align with the specific aims of this study on MRMs. This research sought to explore how gender norms and stereotypical roles inform and maintain MRMs within society. While Van Dijk's framework adeptly addresses issues of race and ethnic inequality, it might not offer the same depth and specificity needed to analyse the gendered dimensions and societal constructions of MRMs.

While the methodologies of van Dijk, Fairclough, and Wodak offer comprehensive insights into discourse analysis (Jahedi et al., 2014), Foucauldian Discourse Analysis ([FDA]; Arribas-Allyon & Walkerdine, 2017), a subset of CDA, was specifically chosen for its

pronounced focus on power relations and societal structures within discourse. It is important to note that FDA is not directly created by Foucault but rather represents an application of Foucauldian theories to discourse analysis by scholars (Agger, 1991; Burr, 1995; Willlot & Grifth, 1997) in critical psychology and various disciplines (Khan & MacEachen, 2021). Foucauldian theory delves into the intricate relationships between power, knowledge, and discourse, examining how these elements influence societal norms and individual behaviours. This emphasis directly correlates with the research's exploration of gender dynamics and societal narratives regarding MRMs, making FDA the preferred approach. FDA's distinct ability to dissect societal discourses, revealing the underlying structures that construct, sustain, and contest male rape myths (MRMs), aligned with the objectives to assess MRMs in England and Wales critically. Its applicability in unpacking the interplay between societal norms, power dynamics, and perceptions towards male rape and sexual assault rendered FDA particularly effective for this study (Arribas-Allyon & Walkerdine, 2017). Furthermore, the FDA's orientation towards deconstructing the complex power dynamics at play within MRMs underscored its suitability over other approaches, providing a robust framework for examining the intricate relationships between language, societal narratives, and power dynamics in the context of MRMs. Please refer to Table 3.1 below for examples of the applications of Foucauldian concepts in analysing professionals' and survivors' narratives.

Table 3.1

Foucauldian Concepts and Examples of Application to Professionals' and Survivors' Narratives

Author (Year)	Concept	Explanation	Present Studies Context
Foucault (1980)	Discourse	Discourse involves analysing historical verbal traces and distinct ways of speaking within various domains of knowledge or social practices.	Analysis of discourse utilised to examine the language used in narratives from professionals and survivors, focusing on how it constructed or challenged MRMs considering societal views of male rape.
Foucault (1980)	Power	Power is a relational dynamic that can be oppressive or productive. It operates at micro levels across the social body and is not confined to the state or government.	This concept was used to observe how power was exercised in the context of MRMs and male rape, affecting individual and institutional interactions.
Foucault (1972)	Power-Knowledge	This concept involves exploring the relationship between power and the	The studies focused on how MRMs are supported by specific power dynamics and the

Author (Year)	Concept	Explanation	Present Studies Context
		creation and spread of knowledge.	knowledge produced within society.
Foucault (1979)	Discipline	Discipline involves regulating behaviour through the organisation of space and time.	The studies examined institutional practices and their impact on the treatment and perception of male rape survivors, demonstrating how discipline operates within these contexts.
Foucault (1978)	Biopower	Biopower refers to managing populations in terms of births, deaths, reproduction, and health.	Biopower was utilised to understand how societal norms around sexuality and gender shape the perceptions of male rape survivors and perpetrators.
Foucault (1987)	Genealogy	Genealogy traces the historical development of knowledge and cultural practices shaped by power dynamics.	Genealogy was used to trace the historical evolution of MRMs and their influence on current power relations.
Foucault (1988)	Culture	Culture is a hierarchical organisation of values, which includes and excludes simultaneously.	The studies looked at how culture determines the acceptance or rejection of MRMs and how these myths are perceived in different social groups.
Foucault (1977)	Panopticon	The Panopticon, conceptualised by Bentham and metaphorically used by Foucault, represents societal surveillance and norms.	The studies employed this concept to analyse how societal surveillance affects individual behaviour and perceptions of male rape cases, including the help-seeking behaviour of male survivors' post-assault.

However, it should be noted that while FDA is a powerful tool for examining societal discourses and power relations, it faces critiques that the research in this study addressed to enhance its applicability and effectiveness. One major critique is its potential to overshadow individuals' material realities and experiences. Scholars Habermas (1984) and Fraser (1990) argue that an exclusive focus on discourse analysis might lead to an underappreciation of the tangible impacts and real-world consequences of societal norms and power structures on people's lives. In the context of MRMs, this critique suggests that a discourse-centric approach could inadvertently neglect the direct experiences of male survivors and the implications of these myths on their well-being. Thus, in line with Wetherell's (1999) advocacy for incorporating participants' material realities in CDA, the study ensured that individuals' material realities and lived experiences were integral to the analysis, focusing on professionals' interactions with training and policies and survivors' engagement with

psychological, legal, or medical services. This approach acknowledges the importance of considering survivors of sexual violence as whole beings rather than merely focusing on their experiences relevant to the research topic (i.e. myths). This holistic perspective is essential for a comprehensive understanding of the impact and implications of sexual violence on individuals' lives and perceptions of sexual violence, as suggested by Anderson and Colleagues (2023).

The qualitative studies also addressed the complexity and abstract nature of FDA, challenges noted by scholars Taylor (1985) and Honneth (1995) for their difficulty in practical application. The research utilised a structured approach to FDA to overcome these challenges based on Willot and Griffith's (1997) established framework. This methodology was advantageous in demystifying FDA's abstract concepts, enhancing their accessibility and applicability to the study. The systematic implementation of FDA ensured analytical rigour and depth, enabling a critical examination of societal narratives and discourses (Braune & Clarke, 2013). The use of FDA was also closely aligned with the study's conceptual framework, particularly the theory of hegemonic masculinities and the RCT of promoting healthy masculinities. This alignment facilitated exploration of societal constructs of masculinity and power dynamics as they manifest in discourses about male rape, which construct, maintain and deconstruct MRMs (Cohen, 2014). Additionally, the effectiveness of FDA in similar studies on male survivors of sexual violence with British students (Anderson & Doherty, 2007), American professionals (Emezue & Udmuangpia, 2022) and Male survivors of female perpetrated sexual violence (Kramer & Bowan, 2021) further demonstrated suitability for the qualitative studies research, demonstrating its relevance and applicability in the study of MRM.

3.2.1.1 Willot and Griffith's (1997) Framework for Conducting Foucauldian Discourse Analysis

The framework by Willot and Griffith (1997) was carefully chosen for its capacity to explore the hierarchy of hegemonic masculinities and marginalised masculinities (Gough & Edwards, 1998; Wilson, 2018; Wilson, 2020). This unique approach combined constructivist grounded theory and a feminist framework, which provided a distinctive lens for analysing gender dynamics, particularly concerning MRMs. Willot and Griffith's method is centred on the feminist analysis of masculinities, stressing the importance and feasibility of examining these constructs from a feminist perspective. Their focus on hegemonic forms of masculinity, as conceptualised by Carrigan et al. (1985), which was adapted by Connell and Messerschmidt (2005), is crucial in understanding the dominant societal discourses that significantly influence public perceptions, including those related to male rape. Their framework addresses these discourses' historical and ideological aspects, incorporating

insights from theorists Connell (1987) and Parker (1990). In line with Foucauldian concepts, Willot and Griffith's approach acknowledges the role of power relations and societal structures in shaping gender constructs. It aligns with the feminist standpoint in its emphasis on exploring the perspectives of marginalised groups and critiquing oppressive hegemonic discourses, as scholars such as Harding (1991) advocate. This framework not only considers the construction of gender concerning masculinity but also recognises its interplay with other systems of oppression.

Steps of the Analysis.

The FDA Framework process began with uploading transcripts into Nvivo, a software program designed for qualitative data analysis, which was chosen as it is widely used in academic research (Braun & Clarke, 2013). The steps of the analysis were as follows:

- Step one. Transcripts were partitioned into distinct chunks based on their topics.
- Step two. Each section was then coded using a dual in-vivo thematic approach, both inductive and deductive. In-vivo codes, inspired by grounded theory, are direct derivatives of professionals' recurring words and phrases (Walker & Myrick, 2006). Using inductive and deductive coding techniques, capitalised on each approach's unique strengths. While inductive coding facilitated the surfacing of novel insights and themes rooted directly in participants' narratives, deductive coding ensured the data's contextualisation within established theories or frameworks (Fereday & Muir-Cochrane, 2006).
- Step three. Theme cleaning took place by removing duplications to streamline in-vivo themes, and the consolidated themes were thoroughly examined.
- Step four. Each theme was examined in more depth to discern the varied ways it was discussed.
- Step five. This step entailed constructing theoretical narratives that captured these diverse discourse patterns.
- Step six. A fresh theme was selected and subsequently compared against the discourse patterns identified in the theoretical narratives from step five. If this new theme conformed to already established patterns, another theme was chosen and repeated.
- Step seven. However, if the new theme selected in Step Six did not fit the existing patterns, it was returned to Step Four for an in-depth examination. This cyclical approach between steps 4 and 7 continued until the identified discourse patterns could explain most themes coherently.

The analysis process stopped when the overarching (superordinate) themes captured the core of professionals' or survivors' discourse on MRMs. These superordinate themes directly informed the emergence of specific dominant and subordinate discourses. Conversely, subordinate discourses were negative case studies (Henry, 2015). Presenting case studies in research enhances validity by providing real-world examples that illustrate and support theoretical findings (Yin, 2009), strengthening the research findings' credibility. Furthermore, it is essential to note that studies one and two in this research were analysed sequentially, with a brief interlude between them. This structured approach was implemented to minimise the risk of bias. By analysing each study independently, the research ensured that findings from one study did not unduly influence the interpretation of data in the other. This separation helped maintain the integrity and objectivity of the analysis, allowing each study to contribute unique insights to the overall understanding of MRMs (King & Horricks, 2010).

3.2.1.2 Discursive devices

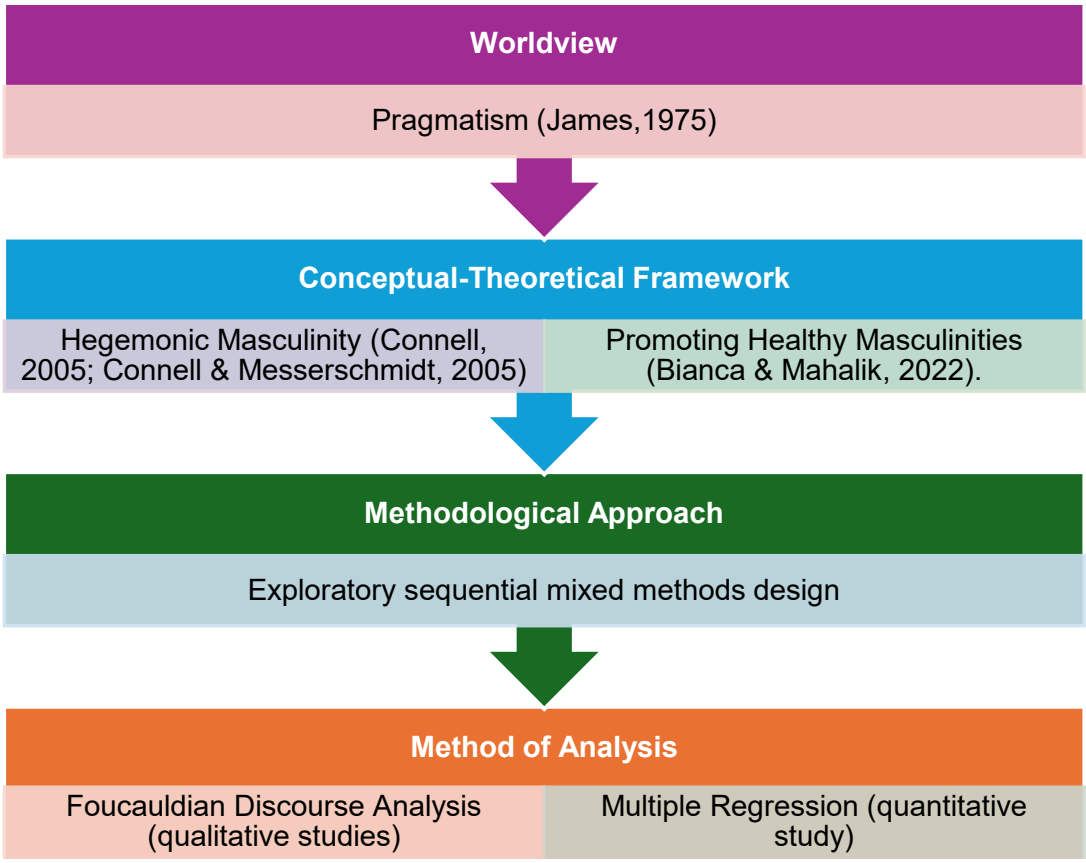
In Steps Four, Five and Six of the qualitative data analysis, several discursive devices were employed to deconstruct the underlying discourses in the language used by professionals and survivors. These crucial analytical tools help uncover the narratives' deeper meanings and power dynamics. Firstly, Subject Positions, as defined by Davies and Harres (1990), were used to identify the perspectives or positions from which individuals speak authoritatively about MRMs. This device helped to highlight 'who' is speaking and 'from where', providing insights into the authority and legitimacy of the narratives shared by professionals and survivors. Subject Positions were instrumental in understanding the varying perspectives and experiences that shape how male rape is discussed and perceived. Secondly, as Bacchi and Bonham (2014) discussed, the study utilised Discursive Practices to examine how power relations are constructed and reinforced within society. These practices are critical in shaping dominant societal narratives, as they emphasise certain viewpoints over others, often rooted in cultural and social norms. Discursive Practices were key in analysing how societal attitudes towards male rape are formed and perpetuated through language. Thirdly, Interpretative Repertoires, as described by Potter and Wetherell (1987), were employed to explore familiar themes, beliefs, and culturally ingrained tropes in the narratives. Interpretative Repertoires provided insights into how professionals and survivors navigate and articulate their understanding of MRMs, revealing contradictions and alignments in their viewpoints. Lastly, Discursive Resources, as conceptualised by Parker (2003), were used to examine the strategies employed in structuring the narratives. These resources include definitions, analogies, cumulative enumerations, and interrogations, which are crucial in determining 'how' something is said or

written. Discursive Resources were vital in understanding the rhetorical techniques and strategies used by professionals and survivors to convey their perspectives on MRMs. These discursive devices played a significant role in the analysis, allowing for a nuanced examination of the discourses in the language used by professionals and survivors. By employing these devices, the study was able to deconstruct the narratives and uncover the complex interplay between language, power, and societal attitudes towards MRMs. The use of these devices enriched the analysis and provided a comprehensive understanding of the discourses shaping perceptions of male rape in England and Wales.

Summary of Chapter

Figure 3.1

Visual Summary of the Thesis's Methodology and Methods



This chapter discusses Pragmatism as the worldview that underpins the research conducted. A pragmatic approach allows the researcher to explore the complex issue of MRMs using qualitative and quantitative approaches in one sequential study. Additionally, the conceptual-theoretical framework of the theory of hegemonic masculinities and RCT for promoting healthy masculinities is detailed and used to explain the gendered practices in the

research data. Please see Figure 3.1 for a visual presentation of the concepts discussed in this chapter. Nevertheless, the research aims, objectives and questions are presented below:

Research aims:

- To explore professionals' understanding of male rape in England and Wales using Foucauldian Discourse Analysis (Study One)
- To explore survivors' perceptions of male rape in England and Wales using Foucauldian Discourse Analysis (Study Two)
- To examine the extent to which male rape myth acceptance, ambivalent sexism, gender, and personal experience and characteristics predict blame attribution in an acquaintance rape scenario. (Study Three)

Research Objective

- To understand how male rape myths are constructed, maintained, and deconstructed in England and Wales

Research questions:

- How can a sequential mixed methods design enhance the understanding of MRMs? (Overarching study)
- How do professionals understand male rape? (Study One)
- How do male survivors of rape and sexual assault understand male rape? (Study Two)
- To what extent do MRM acceptance, ambivalent sexism, perpetrator gender, participant gender, participant sexuality, participant ethnicity, the participant being a survivor, and the participant knowing a survivor predict victim and perpetrator blame in acquaintance rape? (Study Three)

The following three chapters report each study individually in a journal-style format. Chapter Seven, which is the discussion and conclusion, provides a summary of the research findings, including integration and reflexivity.

4 CHAPTER FOUR: PROFESSIONAL'S UNDERSTANDING OF MALE RAPE AND MALE RAPE MYTHS

The previous chapter, Chapter Three, details how the worldview of pragmatism informs this thesis; it also comprises the conceptual and theoretical framework of hegemonic masculinity and promoting healthy masculinity and the mixed methods approach. This chapter focuses on the first of the three studies in this thesis. This chapter, presented in manuscript format, includes an introduction to professionals in the male rape myth literature, the method of conducting the study, the results of qualitative interviews, a discussion of the results, and reflexivity. The chapter ends with an explanation of the mixed methods integration process.

4.1 Introduction

4.1.1 Support Seeking and Services for MUSE

Men's unwanted sexual experiences (MUSE) are issues that are under-researched and underrepresented in today's society. Unwanted sexual experiences include any incident which is sexual where active and informed consent was not given and is also referred to as non-consensual sexual experiences (ManKind, 2020). ManKind's (2021) research, utilising a representative sample of 1,011 adult males aged 18 and older from across the United Kingdom (UK), segmented by age and region, revealed that 42% of these men had encountered at least one of thirteen legally defined sexual crimes. Notably, 9% reported experiencing rape or a non-consensual act involving penetration of the mouth or anus. This suggests that nearly half of the adult male population may have experienced an unwanted sexual event, and nearly 1 in 10 may experience rape. The study will focus on the myths about MUSE, particularly rape myths because research into male rape myths has received little to no academic attention, as discussed in Chapter Two of this thesis. The psychological aftermath for male survivors of rape—ranging from psychological distress and substance misuse to questioning their sexuality and masculinity, alongside suicide ideation and difficulties with sexual intimacy (Bonner-Thompson et al., 2023; Depraetere et al., 2020) emphasises the imperative for formal support mechanisms to address these consequences. This nexus of aftereffects not only highlights the profound and varied impacts of sexual violence on male survivors but also frames an essential area of inquiry: understanding male rape myths.

Formal support for male survivors of sexual violence involves assistance from trained organisations and professionals across a broad spectrum, including health professionals,

counsellors and therapists, social workers, police officers, Independent Sexual Violence Advisors, solicitors/legal advisors, human resources professionals, and support workers in rape crisis centres or third-sector organisations. These services, such as university services, can be internal or external, for instance, Sexual Assault Referral Centres (SARCs) and housing charities (Silk, 2023). Silk and colleagues (2023) noted that male survivors in their study accessed an average of six types of formal support compared to four types accessed by female survivors, reflecting the diverse needs of male and female survivors. However, engagement with these services varies, and some survivors discontinue support due to negative experiences with professionals, which can lead to secondary victimisation and alternative coping mechanisms like self-harm and substance misuse (PettyJohn, 2022).

These adverse interactions, including accusations of dishonesty, dismissal, unprofessional conduct, and insufficient support durations (e.g., 10-minute healthcare appointments or six therapy sessions), have been reported by male survivors in Southeast and Northeast England (Bonner-Thompson et al., 2023). Similar experiences are well-documented in the literature on female rape survivors, who also face challenges such as victim-blaming, inadequate support, and professional insensitivity (Campbell & Raja, 1999; Pemberton & Mulder, 2023). Such experiences can lead to disillusionment with the support process and scepticism about its effectiveness. While these findings from Bonner-Thompson et al.'s (2023) participatory qualitative research may not generalise to all male survivors, they underscore the importance of understanding and addressing the implications of male rape myths in formal support settings.

Rape myths, which are false beliefs aiming to shift blame to the victim, significantly impact survivors' experiences with formal support services (Burt, 1980). These myths contribute to the perception of survivors as less than 'ideal victims', affecting the quality and effectiveness of support received (Campbell & Raja, 1999; Depraetere et al., 2020). Notably, both male and female survivors face similar rape myths, such as beliefs that they should have known better, that they did not resist, or that their behaviour somehow invited the assault (Lonsway & Fitzgerald, 1994; Struckman-Johnson & Struckman-Johnson, 1992). However, there are also distinct differences in the myths they encounter. Women face questions about what they were wearing at the time of the attack, while men are more likely to be questioned about their sexual identity post-assault (Doherty & Anderson, 2004). Addressing these challenges requires a deeper understanding of male rape myths, which research suggests is approximately 20 years behind the study of female rape myths (Hine et al., 2021). This understanding is crucial for improving service provision and professional training to meet the complex needs of male survivors better and prevent secondary victimisation.

4.1.2 Professionals and Male Rape Myths

The focus on rape myth acceptance and observer characteristics in male rape research is attributed to the evolving understanding of sexual violence against men. Initially, scholarly attention to male rape was limited, with prevailing societal and academic emphasis on female victims (Lowe & Rogers, 2017). As awareness of male rape has grown, particularly with the acknowledgement that men can also be victims of sexual violence, researchers have sought to understand the unique dynamics at play (Anderson, 1999; Struckman-Johnson & Struckman-Johnson, 1992). Rape myth acceptance studies have provided insights into societal attitudes that hinder recognition and support for male survivors. Similarly, examining observer characteristics has helped to identify preconceptions that could influence perceptions of male rape cases (Leverick, 2020). This shift towards studying male rape myths and observer characteristics is a critical step in acknowledging the complexity of sexual violence against men and challenging the stereotypes and stigmas that previously obscured their experiences (van der Bruggen & Grubb, 2014). Importantly, understanding these aspects is crucial, as it aligns with existing literature on survivors of rape (non-gender focused), indicating that individuals holding such beliefs could potentially serve on juries, thereby influencing trial outcomes and perpetuating rape myths (George & Ferguson, 2021).

While most research has chiefly focused on student observers and their characteristics, there has been less emphasis on how various types of professionals endorse male rape myth acceptance (MRMA). A few studies from Israel, America, and the UK reveal that professionals such as counsellors in training, therapists, police officers, and medical students exhibit lower adherence to MRMA, especially when compared to their counterparts in student groups or untrained professionals (Anderson & Quinn, 2009; Idsis et al., 2007; Kassing & Prieto, 2003; Shechory & Idsis, 2006; Shechory & Jaeger, 2019). Men, in general, displayed higher levels of rape myth acceptance than women in these studies, particularly when the survivor was male, suggesting that male professionals may be more likely to accept MRMA.

Additionally, some myths endorsed were based on resistance beliefs (Kassing & Prieto, 2003), aligning with the hegemonic masculinity trait of being capable of fighting off an attacker. 'Hegemonic masculinity' refers to the culturally dominant ideal of masculinity that valorises toughness, heterosexuality, authority, and emotional restraint and is often considered the most ideal way of being a man in societal contexts (Connell, 2005). This cultural construct supports the notion that men should be able to prevent their victimisation, a belief positively associated with stereotypical gender role beliefs and MRMA (Shechory & Idsis, 2006; Shechory & Jaeger, 2019). For instance, Donnelly and Kenyon (1996) found that

some health, medical, and law enforcement professionals in their American study believed men could not be victims of rape, a sentiment echoed by Jamel (2010) along with other myths such as 'he asked for it' and 'he secretly desired it'. Conversely, professionals noted in Donnelly and Kenyon's study (1996) who had experience working with male survivors exhibited less stereotypical beliefs about male survivors. This finding suggests that among these professionals, training and practical experience in supporting male survivors are critical factors in reducing MRMA.

One quantitative study by McKee et al. (2020) particularly highlights the impact of professional training on rape myth acceptance, focusing on officers from the Police Service of Northern Ireland who underwent 'Targeting Attitudes Toward Rape Myths' training. The training notably reduced adherence to 'He lied' and 'She lied' myths, which falsely assert rape reports are often fabricated, among the officers compared to a control group. The study also revealed a smaller reduction in male rape myth acceptance (MRMA) than in female rape myth acceptance across all officers. This outcome underscores the effectiveness of targeted training in combating false beliefs about rape but also highlights the persisting challenge of adequately addressing MRMA. Importantly, while this study sheds light on police attitudes towards male rape, it points to a significant gap in our understanding of how similar training influences MRMA beliefs within formal support services. This gap merits further investigation, as enhancing training programs to counter MRMA more effectively could profoundly impact the quality of support provided to male survivors of sexual violence. Exploring this area is crucial for developing more informed, sensitive, and effective support services, thereby addressing a key objective of the current study. This research aims to contribute to the narrative by offering insights into the potential benefits of expanding and refining training programs to encompass a more nuanced understanding of MRMA, ultimately fostering a more supportive environment for male survivors.

4.1.3 Professionals and Male Rape Myth Acceptance

Despite the valuable insights derived from the literature on professionals and male rape myth acceptance (MRMA), certain aspects warrant closer examination. Most existing studies, such as those by Kassing and Prieto (2003), Shechory and Idsis (2006), Idsis et al. (2007), Anderson and Quinn (2009), Shechory and Jaeger (2019), and McKee et al. (2020), have employed quantitative methods, with exceptions like Donnelly and Kenyon (1996) and Jamel (2010) who have incorporated qualitative analyses. While quantitative approaches offer measurable data on the prevalence and patterns of MRMA, they may not fully capture the complex beliefs and biases associated with male rape. For instance, qualitative methods could elucidate the nuanced reasoning behind professionals' adherence to rape myths, such

as the internal conflict between professional training and personal beliefs, a dimension potentially overlooked by quantitative surveys.

Furthermore, the diversity of scales used to measure rape myth acceptance ranges from the Acceptance of Rape Myths Scale (Gilmartin-Zena, 1988; Kassing et al., 2003) to the Rape Myth Acceptance Scale (Burt, 1980; Shechory & Idsis, 2006; Shechory & Jaeger, 2019) complicates direct comparisons and may mask the depth of underlying convictions. This is further compounded by the potential for social desirability bias in self-report surveys, where participants might underreport their acceptance of rape myths to align with perceived societal expectations (Reynolds, 1982). Although Kassing et al. (2003) accounted for this bias, illustrating the methodological robustness of some quantitative studies, the possibility of such bias highlights the importance of qualitative inquiry for an authentic exploration of attitudes.

Additionally, the geographical concentration of research in countries like Israel, the UK, and the US, alongside variations in legal definitions and the somewhat dated nature of specific studies, questions the generalisability of findings across different contexts. These considerations underscore the need for more contemporary, nuanced qualitative research in England and Wales to refine our understanding of professionals' perceptions of MRMA. This study aimed to bridge these gaps by employing a qualitative approach, offering a comprehensive exploration of the complexities surrounding MRMA among professionals. Through in-depth interviews and thematic analysis, this research sought to provide a richer, more detailed account of the attitudes, beliefs, and experiences shaping professionals' perceptions of male rape, contributing to a more nuanced understanding of MRMs that can inform future training, policy development, and support services.

4.1.3.1 Male Rape Myth Acceptance and Secondary Victimisation,

On another note, the principal repercussion of male rape myth acceptance by professionals, as observed in academic literature, is secondary victimisation (Lowe & Rogers, 2017). As previously noted, secondary victimisation is a substantial factor in the experiences of male survivors of rape, serving to compound the trauma and distress stemming from the initial crime. This re-victimisation emerges from judgemental attitudes, often shaped by rape myths and behaviours towards the survivor, leading to a lack of formal support and potentially resulting in survivor condemnation and alienation (Campbell & Raja, 1999). To comprehensively understand the implications of rape myth acceptance, it is crucial to delve deeper into the complexities of secondary victimisation and the role that rape myth acceptance plays in its occurrence and persistence. For example, an international study by Jamel et al. (2008) examined sexual offences investigative trained officers' services provided

to male rape survivors using thematic analysis and found that male survivors reported experiencing adverse responses from the police. Male survivors encountered challenges such as not being taken seriously; receiving inappropriate and insensitive responses, including being shouted at and joked with; having their backgrounds influencing the response they received; being stereotyped; lack of consideration of their potential trauma; facing a lack of information about further support; and assigned a female liaison officer without their consent. These experiences arguably correspond with rape myths that aim to minimise or trivialise the seriousness of male rape and uphold confirmation bias by engaging in victim-blaming practices, such as stereotyping and using background information to preconceive judgments (McIntyre & Tkazky, 2023). These biases tend to confirm pre-existing beliefs or assumptions rather than considering the unique circumstances of each case as stated by van der Bruggen and Grubb (2014). This is evidenced by Jamel (2010), who reported that one of the male survivors was accused of being a sex worker by an officer. These experiences highlight the adverse impact of professionals' MRMA on secondary victimisation. They underscore the need for professional training to challenge these myths, ensuring survivors receive the respectful and supportive response they deserve. This emphasises the importance of addressing rape myths not only for survivor support but also for improving the professional practices that directly impact their recovery journey.

Moreover, male survivors reported that the confrontational approach during interviews discouraged survivors from continuing with their cases, with one survivor reporting that because of this, they withdrew from society and experienced isolation, self-blame, anger, depression, and multiple suicide attempts (Jamel et al., 2008). This experience of SV agrees with American and British research, which also found survivors experience distrust of others, reluctance to seek further help, violation, and low self-esteem as a result of SV from the legal system (Bonner-Thompson et al., 2023; Campbell, 2005; Campbell & Raja, 2005). However, some positive experiences were noted when the police validated survivors' experiences, offered a caring and sensitive approach, maintained regular contact, and explained the process patiently (Jamel et al., 2008). Thus, not all interactions with professionals are inherently negative (Thomas, 2023), indicating a purpose in understanding male rape myths. Positive experiences can significantly aid the recovery process for survivors, and by dismantling these myths, the likelihood of beneficial encounters can be increased.

Research by Jamel et al. (2008) involving male survivors (N = 20) from diverse geographical locations, including the UK, Ireland, Scotland, Australia, the USA, and Canada, introduces a broad cultural and contextual spectrum to the study. While this diversity potentially enriches the external validity and enables a broader global comprehension of

male survivor experiences, the non-stratified small sample across multiple countries could limit the precision of conclusions drawn (Deffner et al., 2022). Differences in legal systems and societal norms across these regions might affect the universality of secondary victimisation experiences reported, suggesting a need for caution in generalising findings. Moreover, Campbell's influential research employing gender-neutral language prompts reflection on its direct relevance to male sexual violence, considering the UK's distinctly gendered rape discourse (Widanaralalage et al., 2022a). This discourse, framed by societal and legal perceptions that traditionally view males primarily as perpetrators and females as victims, may significantly influence the recognition and support of male survivors. Therefore, while interpreting these findings, it's crucial to acknowledge both the cultural specificity and the gendered context within which they are situated. Additionally, existing studies predominantly focus on the Criminal Justice System (CJS), leaving a notable gap in understanding Male MRMA within other formal support services. This oversight underscores the need for more detailed research into how MRMA manifests in various support settings, further emphasising the importance of a nuanced approach to studying male rape myths and their impact on survivor support.

4.1.4 Contemporary Approach to Professionals' Insights on Male Rape Myths

Recently, there has been a change in how MRMA are being studied. Traditional approaches have focused on professionals' adherence to these myths and were largely positivist and quantitative (Abdullah-Kahn, 2008). The contemporary approach focuses on a broader look at practitioners' understanding of male rape and a change to qualitative methodology (Emezue & Udmuangpia, 2022; Lindberg, 2023). For example, Lindberg argues for a practice-based approach to formal support and help for male survivors. Practice-based research shows that formal support services are influenced by cultural, social, and material factors (Nicolini & Monteiro, 2016). Practices are performative and depend on context and actors (Schatzki, 2005). According to Lindberg, this approach brings three significant contributions. Firstly, it allows for contextual examination of welfare, enabling exploration of how different practices affect support for male victims of rape in their operational context. This includes analysing explicit homophobia, sexism, institutionalised routines and their potential impacts on outcomes (Turchik & Edwards, 2012; Wetherell, 2015). Secondly, the approach investigates connections and contradictions, highlighting how relations between practices influence services. The effect of particular practices depends on the context, and interactions between organisational practices, gendered attitudes, and other variables can significantly impact outcomes. Lastly, the practice-based approach provides applicable knowledge, identifying challenges and opportunities for improving support to male rape victims and generating practical knowledge. This knowledge could enhance service

quality while preserving the capacity for a cultural critique of the practices. However, by focusing on practices and sociocultural contexts, this approach might overlook the role of male survivors' agency in shaping the outcomes of help-seeking processes (Gueta & Shlichove, 2022). Highlighting the role of male survivors' agency is crucial because it acknowledges that survivors actively navigate their recovery paths, making choices that best suit their needs and circumstances.

Indeed, while there is potential for practice-based research on male rape, it could be argued that similar contributions can be garnered from more established forms of qualitative research. For instance, in research by Davies (2004) and Walker et al. (2005), male rape survivors in the UK were asked to suggest ways in which therapists and police could improve their response to cases of male rape. The survivors primarily desired access to broader support similar to what is available for women, including male rape crisis centres and round-the-clock helpline services. They also voiced the need to be listened to and believed by professionals and for professionals to receive training. Additionally, they advocated for easier access to therapy in major UK locations and called upon formal support services to increase public awareness of male rape. It should be noted since Davies, Walker and colleagues' research. There has been a development in the support for male survivors, services that support male victims can now receive accreditation by Lime Culture to demonstrate that they meet the male quality standards set out by the Male Survivors Partnership (MSP) for working with men affected by abuse, rape and sexual exploration in the UK (MSP, n.d). Additionally, there are 24-hour helplines by charities such as Safeline and Respect available for Male Survivors (Respect, 2022; Safeline, 2023). However, unfortunately, issues such as generally a lack of support for male survivors as afforded to women and experiencing rape myth-informed SV highlighted by Davies and Waker and colleagues are still present (Bonner-Thompson et al., 2023; Depraetere et al., 2020; Lowe & Rogers, 2017). Thus, there is still room to understand the issues of service provisions, training and understanding of MRMA in formal support settings.

Existing qualitative research using descriptive and thematic analysis has provided invaluable insights, such as the persistent homophobic views in rape support services (Davies, 2004; Walker et al., 2005). In addition to the dissonance between male survivors' identification of their experiences of forced-to-penetrate and female-on-male sexual assault and the legal definitions of rape (as elaborated in Chapter 2; Weare & Hulley, 2019). Nevertheless, as the current study sought to deepen our understanding of male survivors' multifaceted challenges, it becomes evident that alternative analytical methods may offer further illumination. In this respect, Foucauldian Discourse Analysis (FDA) presents an opportunity for deeper exploration. FDA is a poststructuralist methodology for studying the

interconnectedness of language, meanings, social hierarchies, power dynamics, and knowledge systems (Wooffitt, 2005). Unlike other forms of discourse analysis, Critical discourse analysis that applies Foucauldian theory (1972) as an analytical tool sets itself apart regarding methodology and focal area. Importantly, Foucault perceives Discourse (with a capital D to signify dominant macro-level narratives) as an objective, dialogical power that can create divisions between stigmatised individuals and those who may be stigmatised. In essence, FDA is imbued with a political intention to expose disparities between privileged and marginalised groups through a critical perspective (Foucault, 1977; Goffman, 1963). Thus, FDA performs a social justice role, striving to dismantle deeply rooted power imbalances. Please refer to Methodology Chapter 3 for a more detailed discussion of the FDA.

In the context of formal support services and male rape, we can see an example of the applicability of FDA. Emezue and Udmuangpia (2022) utilised a story-focused interview method to exhibit responses from 11 American formal support professionals. They aimed to explore their understanding of their awareness and management of stigma when working with male survivors of sexual victimisation, and they unearthed three themes. The first theme, stigma awareness shaped by discursive and material forces, highlights how professionals acknowledge the effects of dominant and stigmatising narratives of male victims of sexual violence. The narratives indicated an understanding that male victims internalise and embody these dominant narratives (e.g. homophobia and masculinity), leading to a form of stigma. The service providers viewed this stigma as a product of mutually reinforcing discursive (sociocultural exchanges) and material factors (embodied stigma). The second theme, ‘labelling as a (de) stigmatising tool,’ there were differing practices among professionals in their (de)stigmatising practices, particularly in allowing individuals to identify as victims, thrivers, worriers or survivors in dialogue. Labels were identified as crucial as a social currency of stigma. These findings shed light on the factors perpetuating the stigma of male rape. Recognising and respecting how male survivors choose to identify themselves based on their personal experiences can enhance the quality of support they receive and help combat pervasive misconceptions about rape (Forde & Duvvury, 2017). Although Emezue and Udmuangpia’s (2022) research offers critical insights into the understanding of stigma in male rape by formal support services, there is a need for culturally and legally specific analysis in England and Wales. The unique legal definition of rape in these countries necessitates a tailored examination, which this study provides by applying FDA, a method known for its strong emphasis on sociocultural, political, and historical contexts (Foucault, 1992; Janks, 1977).

4.1.5 Rationale for the Present Study

As recognition of male rape and sexual victimisation increases (Thomas & Kopel, 2023), contemporary insights into professionals' perceptions are essential to enhance the support offered to male survivors. This study is significant for its potential implications for professional practice, policy, academic research, and the well-being of male survivors. Although foundational, existing research in the MRMA domain is outdated and often adopts an accusatory stance towards professionals without proposing solutions. That approach may hinder the creation of a supportive environment for male survivors.

4.1.5.1 Research Aims and Objectives

Consequently, this study aimed to bridge this gap by exploring professionals' understanding of male rape myths, informed by their practical experiences, in the English and Welsh context where the definition of rape is distinct. The overarching aim of this study was to explore professionals' understanding of male rape in England and Wales using FDA. This approach unpacked the discursive underpinnings of their perspectives, the subject positions, interpretive repertoires, power dynamics, societal narratives, and hegemonic norms that may influence their perceptions and practices. Therefore, to achieve this, the study focused on two primary objectives:

- To examine the role of reporting, disclosure, male rape myths, professional training, sex, and sexuality in the discourse of male rape. This objective sought to explore the various factors influencing how professionals perceive and approach male rape within their practice. It aimed to reveal the implicit narratives and ideologies underpinning their attitudes and actions.
- To understand the perceived barriers to disclosure identified by professionals, FDA was used to unravel the discourses that contributed to these barriers. Recognising these obstacles was seen as a potential avenue to develop more strategies for encouraging and supporting disclosure among male survivors.

4.1.5.2 Research Question

- How do professionals understand male rape?

4.2 Method

4.2.1 Research Design Overview

The study, anchored in a pragmatic philosophical stance detailed in Chapter 3, endeavoured to comprehend professionals' perceptions of male rape by exploring real-world dynamics. Accordingly, selecting FDA and semi-structured interviews was consistent with this philosophy. This approach accentuated the intricate relationship between language, meaning, and power while offering the latitude to delve into the detailed experiences and

perspectives of the professionals. Before extensive recruitment, the initial interviews were a preliminary evaluation, and their purpose was to assess the questions' efficacy and ensure the research design was robust and without notable issues, aligning with the approach advocated by Silverman (2017). The data consisted of semi-structured interview transcripts collected through purposeful voluntary sampling. Semi-structured interviews allowed discussion concerning the study's research question (Wiggins & Potter, 2017). The analysis used Willott and Griffith's (1997) framework for conducting FDA as detailed in Chapter Three of this thesis.

4.2.2 Participants

Thirteen professionals were interviewed, of which the average age was 45, with seven cisgender women, five cisgender men and one transgender man. In terms of ethnicity, nine professionals identified their ethnicity as White, two as Indian and two as Black African. Regarding sexual orientation, seven professionals identified as straight, three as gay, two as undisclosed and one as bisexual. The professionals provided psychological, emotional, medical, and legal support to male survivors in local charities or forensic settings. Eligible professionals included Service Providers, as detailed by Silk (2023), and non-NHS health professionals (Anderson & Quinn, 2009). These included sexual violence support services, Rape crisis member services, domestic violence support services, sex worker support services, LGBT+ charities, and sexual health charities. Seven participants were designated Service Providers, operating primarily within local charities in counselling, advocacy, or outreach roles. Six were healthcare professionals affiliated with rape crisis member services or fulfilled health-centric responsibilities within comparable local charitable organisations. See Table 4.1 for the demographic characteristics of the professionals.

Table 4.1

Professional's Demographic Characteristics

Professionals	Age	Gender	Sexual Orientation	Ethnicity
Health Professional 1 (HP1)	40	Woman	Straight	Indian
Health Professional 2 (HP2)	37	Man	Gay	White
Health Professional 3 (HP3)	58	Man	Straight	White
Health Professional 4 (HP4)	39	Woman	Straight	Black
Health Professional 5 (HP5)	57	Transgender man	Gay	White
Health Professional 6 (HP6)	32	Woman	Bisexual	White
Service Provider 1 (SP1)	49	Woman	Straight	White
Service Provider 2 (SP2)		Man		White
Service Provider 3 (SP3)	63	Man		White
Service Provider 4 (SP4)	36	Woman	Straight	Indian
Service Provider 5 (SP5)	42	Man	Gay	White

Professionals	Age	Gender	Sexual Orientation	Ethnicity
Service Provider 6 (SP6)	47	Woman	Straight	Black
Service Provider 7 (SP7)	45	Woman	Straight	White

4.2.3 Participant Selection and Recruitment

This study utilised purposeful sampling and selected professionals with experience working with male survivors of rape or operating in settings where they could encounter male rape survivors at any point in their recovery journey (Patton, 2002). The professionals' willingness and availability to participate were also considered, in line with the ethical principle of voluntary participation (Vanclay et al., 2013). Before seeking ethical approval, initial steps involved reaching out to potential participant organisations to gauge their willingness to assist with recruitment after obtaining ethical approval (see appendix A for gatekeeper permission request). This preliminary contact was strictly to secure gatekeeper permissions (see appendix H for permission gained), a necessary component for the ethics application, ensuring all interactions adhered to ethical guidelines, as King and Horricks (2010) recommended. These initial communications were conducted through emails containing a preliminary participant information sheet, a draft interview schedule, and a draft recruitment poster to ascertain their interest and secure preliminary agreements for support post-ethical approval. Following the recommendations of King and Horrocks (2010), gatekeepers were invited to provide input on the interview schedule during these preliminary communications. This approach was recommended to ensure the research design was relevant to the field and maximised its potential impact (Penfield et al., 2014). Engaging gatekeepers early in the process facilitates a collaborative approach, enhancing the study's applicability and ensuring that the methods and materials are sensitive to the needs and contexts of male survivors of rape. This collaborative feedback mechanism is pivotal in tailoring the research to meet the ethical standards of respect, voluntariness, and informed consent, thereby enriching the study's ethical integrity and alignment with professional practices in the field. After receiving ethical approval from the Faculty Research Ethics Committee (FREC), the author contacted the organisations that had agreed to participate once more to formally request their assistance in disseminating the study materials (Appendix B for advert and Appendix C for the information sheet) among potential participants (see appendix J for approved ethics letter).

While the initial aim was to recruit 15-20 professionals, guided by Braun and Clarke's (2013) suggestion for qualitative research in PhD projects, the actual recruitment was driven by the principle of data saturation. Saturation in qualitative research is when additional data collection does not yield new insights into the research questions (Gee, 2005). In this study,

saturation was reached after conducting 13 interviews, based on the recurrence of themes and the richness and depth of the data, indicating a comprehensive exploration of professionals' understanding of male rape (Ando et al., 2014). The decision to cease recruitment at this point aligned with the qualitative aim of the study, which was to attain an in-depth understanding rather than generalise the findings (Miles & Huberman, 1994).

4.2.4 Data collection

The study was conducted online using Qualtrics and Online video conferencing platforms. Qualtrics is a web-based survey platform that allows researchers to design and distribute surveys. A questionnaire was created on Qualtrics to display the information sheet (Appendix C) and collect informed consent (Appendix D) and demographic information (Appendix E). In addition, Qualtrics was used to display one of four scenarios (Appendix F.1) and the debrief page (Appendix G) to participants. Semi-structured interviews were conducted via online video conferencing platforms and digitally audio recorded.

4.2.4.1 Semi-structured Interviews

The semi-structured format was selected to facilitate in-depth exploration of participants' experiences, perspectives, and interpretations while allowing flexibility to delve deeper into specific topics (Galletta, 2013). An interview schedule, informed by the literature discussed in the literature review (Brinkmann & Kvale, 2015), guided the discussions. This schedule comprised two main sections: building rapport and conducting the interview, with an additional section dedicated to a scenario and its associated questions. In the building rapport section, questions were designed to make the participants comfortable and gain insights into their professional responsibilities and experiences with male rape cases. This included questions on how often they encounter such cases and the terminology they prefer when referring to individuals who have experienced rape. The interview section was the core part of the interview. Questions in this section were designed to probe deeper into the professionals' perspectives and experiences around the issue of male rape in the United Kingdom. Questions touched on barriers for men reporting rape and seeking medical and psychological support, the influence of sexual orientation on the probability of rape, male rape myths explicitly and the participants' professional training and recommendations in this area. An additional focus on male rape myths and considerations for interviewing male rape survivors was also included. The final part of the interview featured a short, non-graphic scenario related to rape, adapted from Wakelin and Long (2003).

The professionals were asked to share their professional views on public perceptions around the scenario and how those perceptions might change depending on the victim's gender, sexuality, and relationship to the perpetrator. This three-part structure of the

interview schedule, which included rapport-building, semi-structured questions, and scenario-based discussions, was designed to elicit a rich understanding of the professionals' experiences and perspectives on male rape and related (Brinkmann & Kvale, 2015). The interview lengths ranged from 23 minutes to 1 hour and 7 minutes, averaging 41 minutes, reflecting participants' availability and willingness to share their experiences. While some interviews were brief due to participants' time constraints or the focused nature of their responses, every effort was made to ensure data integrity and quality. This included following ethical guidelines that allowed participants to speak freely and for as long or as short as they wished, accommodating their schedules and comfort levels (BPS, 2017). Furthermore, the interview questions were designed to elicit comprehensive insights even within shorter time frames, ensuring that the study's objectives were met across all interviews. Participants were emailed the debrief sheet at the end of the interview.

The author transcribed the audio recordings of the interviews using the adapted version of Jefferson's (2004) orthographic transcription system. This system is geared towards pattern-based discourse analysis, as outlined by Braun and Clarke (2013), and aligns with the guidelines of the UK Data Service's anonymity toolkit (n.d.). Through Jefferson's conventions, the transcription process encapsulated the explicit content of speech and its intricate features, such as pauses, emphasis, and other linguistic elements that may deliver meaning. These conventions enabled an FDA approach, which recognised discourse as a medium through which power relations and knowledge are created, circulated, and possibly institutionalised (Foucault, 1972). The transcription strategy is detailed in Appendix K; an example transcript can be found in Appendix K.1.

4.2.5 Ethical Considerations and COVID-19

This study meticulously adhered to ethical guidelines and legal requirements, including those set by De Montfort University, the British Psychological Society (BPS, 2014; 2017; 2018), and GDPR (EU, 2018), ensuring participant privacy and rights were safeguarded. Participants provided informed consent online (Appendix D), anonymity was preserved through numerical identifiers, and sensitive topics were carefully avoided in interviews to prevent distress. Data were securely stored in compliance with GDPR, with personal identifiers removed during transcription and communications conducted through secure university channels. Due to the COVID-19 pandemic, there were lockdowns and social distancing rules (Cabinet Office, 2020); thus, the study was conducted online, so internet-meditated ethical research guidelines (BPS, 2014) were adhered to.

4.2.6 Analysis

This study applied FDA to delve into professionals' understandings of male rape myths (MRMs). As elaborated in Chapter Three, 'Methodology and Methods,' FDA was selected for its depth in exploring the interactions of language, power, and knowledge within societal discourses, particularly those surrounding gender and sexuality (Foucault, 1972; 1977; 1978; 1979; 1988). This approach was instrumental in uncovering the power dynamics involved in constructing MRMs and how these are articulated and understood within the context of societal norms. The FDA's detailed, line-by-line analysis allowed for capturing the subtle nuances and inherent complexities in the language used to discuss male rape myths (Bacchi & Bonham, 2014; Davies & Harre, 1990; Parker, 2003; Potter & Wetherell, 1987; Willott & Griffin, 1997). This meticulous approach was crucial for identifying discursive patterns and devices that inform the construction and perpetuation of these myths. Several key concepts—subject positions, discursive resources, discursive practices, and interpretive repertoires—were central to the analysis, ensuring a comprehensive examination of the data. Willott and Griffin's (1997) method, known for its application in masculinity and marginalised masculinity studies (Gough & Edwards, 1998; Wilson, 2018; 2020)—guided the analysis. The transcripts were systematically coded in Nvivo, partitioning them into thematic sections, followed by dual in-vivo thematic coding—both inductive and deductive. This dual coding approach balanced the generation of new insights from the participants' narratives with the contextualisation of data within existing theoretical frameworks (Fereday & Muir-Cochrane, 2006).

From the initial 703 in-vivo themes, theme cleaning and removing duplications distilled them down to 46 refined themes. These themes were then subjected to deeper examination, leading to the construction of theoretical narratives that encapsulated the discourse patterns observed. An iterative methodology was employed, cycling through themes to match them against established discourse patterns or to subject them to further analysis if they introduced new patterns. Ultimately, this rigorous method culminated in identifying 13 superordinate themes that encapsulated the essence of the professionals' discourse on male rape. These superordinate themes illuminated the dominant and subordinate discourses within the professional narratives regarding male rape, offering nuanced insights into the understanding and perpetuation of MRMs. Three dominant discourses, which are “Professionals’ Insights: Societal Myths, Acquaintance Rape Realities, and Legal Obstacles”, “Navigating Re-Traumatisation: Unequal Power and Support Challenges” and “Defining Survivor Identity and the Critical Role of Specialist Services” stood out, appearing in more than half of the transcripts (i.e. 7 and above). An overview of these dominant discourses can be found in Table 4.2. Conversely, two subordinate discourses, “Consent Becomes the Issue” and “Gender Norms, Masculinity, and Survivor's

Sexual Orientation", materialised as negative case studies (Henry, 2015). These were evident in less than half of the transcripts but offered invaluable insights that nuanced or challenged the dominant discourses. A breakdown of these negative case studies is provided in Table 4.3.

4.3 Findings

Table 4.2

An Overview of The Dominant Discourses and Themes in The Professionals' Narratives

Discourses	Themes
Professionals' Insights: Societal Myths, Acquaintance Rape Realities, and Legal Obstacles	Societal perceptions of male rape
	Acquaintance rape
	Rape law
Navigating Re-Traumatisation: Unequal Power and Support Challenges	Criminal justice system
	The effect
	Re-traumatisation
Defining Survivor Identity and the Critical Role of Specialist Services	Victim-Survivor Debate
	Specialist Services

4.3.1 Discourse One: Professionals' Insights: Societal Myths, Acquaintance Rape Realities, and Legal Obstacles

This discourse concerns the professionals' understanding of male rape and how it is perceived and dealt with in the UK public discourse and legal framework. In discussing the theme of "Societal perceptions of male rape", professionals construct a negative societal understanding and representation of rape, which can be seen in the following extract:

> *Interviewer: From your professional experience what recommendations would you give to encourage men who have been raped to report the offence?*
>
> *Service Provider 5: […] I think that probably is a bit different for male survivors yeah because I think what what society's got better at erm and I can reference this all through growing up is that erm female rape is probably not talked about enough but it's kind of always in the conscious erm storylines in dramas soap operas have done that for a long time Whereas the male bits are very taboo and like all we erm won't touch on it and so I don't think it's talked about as much okay but both needs to be talked about Both need to be encouraged but I think male rape it seems a bit different*

Here, SP5 offers their personal interpretation by asserting their subjectivity through the repeated use of the pronoun "I", suggesting that different views concerning male rape may

exist, and this position does not assert dominance over the other views. SP5 uses the discursive resource of differentiation in these statements, “I think that probably is a bit different for male survivors” and “female rape [is] always in the conscious” to distinguish between male survivors and female survivors. SP5 acknowledges that while female rape might be discussed in society adequately, it still occupies permanence in societal awareness, and in doing so, they argue that non-discussion does not equate to a lack of awareness. SP5 draws upon media discourse as a tool that shapes societal understanding in this quote “storylines in dramas soap operas have done that for a long time”. This suggests that media is important in informing societal views on rape. The speaker’s use of “the male bits are very taboo” and “like all we erm won’t touch on it” points to a strong power structure that discourages the discussion of male rape due to the potential discomfort society may have about male rape. While noting the differences in how male and female rape are understood, SP5 advocate for equal attention and discussion of male and female rape here “both needs to be talked about both need to be encouraged”. This extract illuminates the limited way male rape is understood within society and its inextricable link to female rape.

The professionals argue that society’s general construction informs barriers to reporting male rape myths shaped by society’s understanding of female rape. For example:

> *Interviewer: I think you’ve touched on this a little bit and what does rape myth mean to you?*
>
> *Health professional 2: […] I think in people’s mind it will be a very sort of middle class err you know erm almost like blameless in inverted commas person so a person who’s pure than pure air walking through like a park and then and then some stranger drag him into a bush and that you know obviously I’m not anyone who’s experienced that I’m not saying it doesn’t happen but it’s a very small proportion of (.) of of rapes and sexual offences erm that that’s kind of what they call a stranger rape in police terms.*

HP2 draws upon the interpretative repertoire of “stranger rape”, implying that the general public constructs the ideal victim. The use of “middle class” suggests there are class-based perceptions of who is considered a victim. Similarly, using “blameless” and “pure than pure air” highlights the expectation and construction of a ‘perfect’ victim narrative. This inclusion of purity adds a layer of value judgement on male survivors, suggesting some victims are more deserving of acknowledgement. This discourse construction excludes the majority of male survivors the professionals encounter in their practice because it creates a stringent requirement of what male rape is. Consequently, this narrow framework describes “a small proportion” of male rape and sexual assault survivors HP2 and all the professionals have

encountered in their services. HP2 challenges the dominant discourse depicting a random and rare incident perpetrated by a stranger.

In their services, the professionals state that they mostly encounter male survivors who know their attackers as raised in the “acquaintance rape” theme. For instance,

> *Interviewer: From your professional experience what kind of context does rape usually happen in?*
>
> *Service provider 2: Usual- I think it’s about eight we’d say about over eighty percent of it happens in a domestic situation in in the home or where people live and people who have a prior relationship so could be father brother uncle babysitter whatever yeah but people with a prior relationship and eighty per cent would be in a home in the home so domestically I think it was we’re where it takes place mostly*

SP2 highlight the commonality of acquaintance sexual violence, suggesting that it is a pervasive issue often underestimated in society, contrasting sharply with the societal stereotype of “stranger rape”. This discourse also indicates a power dynamic, as it calls attention to the vulnerability of those victimised by someone they know and trust within “relationships”. Additionally, SP2 define the construct of acquaintance rape to support the argument that the experiences the practitioners encounter in practice differ from the general public’s understanding of male rape. This is demonstrated in the phrases “a huge amount” and “over eighty per cent”, underscoring the vast scope of acquaintance rape and illustrating that male rape scenarios can be deeply embedded within various “domestic” contexts, such as intimate partners and familial settings.

This leads us to the last theme of “Rape Law”, where professionals argue that the Sexual Offences Act 2003 is an issue as it does not fully account for what professionals and survivors perceive as rape, for example.

> *Interviewer: In your own words do you think male rape is an issue in the United Kingdom?*
>
> *Health professional 6: also I feel I mean we’ve had issues erm at work where male clients have experienced a rape from a woman and and and in the eyes of the law that’s actually not true I certainly don’t agree with that but that’s that’s what the law says so erm we’ve definitely encountered that on the helpline which is quite frustrating so yeah I feel I feel there’s definitely a problem where the experience of it erm is even less recognised because it doesn’t fit into the legal framework that we have either*

In this extract, HP6 focuses on the issues of male rape survivors whom women have assaulted. HP6 employs the metaphor “in the eyes of the law” to suggest a disconnect between the “legal framework” and the male survivors’ experiences. It metaphorically highlights how justice is perceived within the legal system. Thus, HP6 states that the rape law does not support these male survivors of female-perpetrated assault adequately. Male survivors and professionals recognise this as “rape” rather than its designated label of “sexual assault” within rape law. This lack of acknowledgement of female-perpetrated rape in the legal discourse informs the notion that women cannot rape men. HP6 affirms their clear opinion on the issue by maintaining that they disagree with the legal approach to male rape by women. The experiences of male survivors are posed as “even less recognised”, indicating how the legal discourse can reinforce the existing power structure and further marginalise male survivors who do not “fit” the stringent framework. Indeed, HP6’s use of the term “in the eyes of the law” and their frustration with the legal framework demonstrates that they view the law as a powerful institution that controls and shapes male survivors’ experiences and the general public perceptions.

The professionals also provided some nuances in expressing concern about the gap between male survivors' lived experiences and legal definitions. For instance,

> *Interviewer: Do you think the probability of a man being a victim of rape is related to his sexuality?*
>
> *Service provider 7: I mean it wouldn’t it wouldn’t be classed as rape because it would be erm penetration with an object but you know rape happens within heterosexual relationships if with the female as well and that’s even less well understood then it is understood it you know if you classify rape as penis penetration and that means that in a heterosexual relation a female couldn’t rape a male but there are a number of cases where men are penetrated by females with an object and in my book that that is an experience of rape right but it’s legally it’s not classed as rape ((long pause)) so erm but I don’t I don’t think we as society I don’t think we acknowledge that happens*

In the discourse presented by SP7, there is an evident tension between the lived experiences of male survivors and the legal definitions surrounding rape. Beginning with the point that female-on-male sexual assault involving “penetration with an object” is not “classed as rape” within the legal purview, SP7 juxtaposes this against the broader understanding held by professionals. Further challenging dominant societal discourses, SP7 notes that rape also “happens within heterosexual relationships,” thereby contesting heteronormative assumptions that such acts predominantly occur in non-heterosexual contexts or primarily involve male perpetrators and female victims. Furthermore, SP7

contrasts “penetration with an object” with “penis penetration”, highlighting the exclusivity of legal definitions, which, in their narrowness, may omit certain traumatic experiences that do not fit the legal mould of rape. By asserting, “in my book that that is an experience of rape”, SP7, along with the other professionals emphasised personal convictions that challenge and oppose the formal legal narrative. This perspective underlines the professionals’ broader understanding, serving as a counter-narrative to established legal power structures. Furthermore, with the closing remark, “I don’t think we as society...acknowledge that happens”, SP7 shines a spotlight on the broader societal gap — a prevailing denial or ignorance that fails to recognise the complete spectrum of male rape experiences.

4.3.2 Discourse Two: Navigating Re-Traumatisation: Unequal Power and Support Challenges

This dominant discourse concerns the practitioners’ understanding of male rape in the context of male survivors going through the CJS in England and Wales. In the in-vivo theme “Criminal Justice System,” the practitioners state that male survivors face difficulties when they report their experience to the police, which can be seen in the following extract:

> *Interviewer: What issues do you think men who have been raped may encounter when reporting the offence?*
>
> *Service Provider 7: For example if they were to report it to the police I mean (.) the police service has changed over the years, but it’s still not great It’s not great at receiving female victims of rape and my impression is that it’s worse at receiving male victims because it’s that thing about it like it people struggle to believe that it’s a thing that can happen They think that it doesn’t happen to men so I think they’re still still that and then getting a conviction ((laugh)) and getting it to court and all the rest of it is just its a joke because it’s just such a tiny tiny number of cases get taken up by the CPS (Crown Prosecution Service) and then get taken for to prosecution that the whole thing I imagine would be ((long pause)) horrible for men to go through from start to finish I could totally see why somebody would just ((long pause)) pretend it didn’t happen try and bury it*

SP7's critique of the CPS’ treatment of male rape survivors is both pointed and insightful. Starting with “for example,” they highlight an industry-wide issue, using an analogy to underscore the challenges faced by both female and male survivors. SP7 suggests that the police service struggles with female rape cases and fares even worse with male cases, possibly due to societal norms around victimhood. This perception of the police becomes even more evident when they describe the prosecution process as “just... a joke” and emphasise the “tiny tiny” number of cases that proceed to the CPS, pointing to a broader

issue of underrepresentation. Their reference to “the whole thing” encapsulates the challenges of the CJS for these survivors. Their empathetic stance is evident when considering why some male survivors might “pretend it didn’t happen” or “bury” the incident. These reflections provide insight into the systemic obstacles and psychological traumas victims face. While the inherent difficulties of the CJS are touched upon, more specific challenges are elaborated in the theme “Psychological pitfalls of the process”.

In the in-vivo theme “Psychological pitfalls of the process”, the professionals argue that the reason male survivors do not report to the police is fear of going through the CJS process and what impact it could have on them. Thus, male survivors know what is involved in the process even if they do not engage. For example,

> *Interviewer: So you have touched on some reasons why men may not want to speak to the police. What issues do you think men who have been raped may encounter when reporting the offence?*
>
> *Service Provider 2: Well I think you know the reason men don’t go to the police is because of shame and guilt and the enforcers of sexual abuse are the ones who have gone to the police and gone through that finding a huge ordeal really you know go to a Public Protection Unit and I’ve been long to a number of that with a number of people to accompany into that It’s quite a harrowing experience just making a statement a video statement to the police because they are all sorts of details about and you have to go back and relive the kind of the trauma of it or which may have been something happened years and years ago so it generally is a very harrowing experience from there going into the criminal justice system people wait years sometimes the court case to come to fruition CPS seems to work extremely slowly and you know we’ve got one gentleman it’s been weighing five and a half years er to go to court and you know really that’s that just weighs heavily on him that’s part of a part of an institutional institutional investigation which I understand is complex but five and a half years then after that they then have to be prepared and go to court and maybe perhaps face their their your know perpetrator in court once again the harrowing experience […] when it’s all over people generally have no attention paid to them whatsoever they’re generally not given very much help in terms of support afterwards and they get loads of attention I get to a very harrowing experience It’s very very difficult for them at the end of it all they’re left with no support usually so that’s the experience for men so we we always encourage men if they want to go to the police to report it of course it’s a good thing to do but are very mindful of warning them erm how difficult that could be*

In this quote, SP2 notes some of the difficulties male survivors may encounter and alludes to the power relations present in the CJS. They begin by levelling with the interviewer, hinting at a mutual understanding of the issues with “I think you know”. In SP2’s narrative, the term “five and a half years” evidences the slow process of the CJS, while “weighing [heavily]” emphasises the emotional burden and distress caused by this prolonged duration. This contributes to the emotional burden on survivors to repeatedly relive the trauma of the abuse when making a statement or testifying in court, further emphasised by the repeated metaphor “harrowing experience,” which paints their journey through the system as one fraught with emotional distress. This suggests that the CJS reinforces the survivor’s subjugation and powerlessness, while the perpetrator is not necessarily held accountable for their actions. SP2 argues that the institutional and bureaucratic processes of the CJS often impede the efforts of survivors seeking justice as “people wait years sometimes the court case to come to fruition”. This implies that the CJS’s institutional practices create a disciplinary mechanism that reinforces the marginalisation of male survivors and propagates the power dynamics of sexual violence. SP2’s stress on the lack of support, both in terms of “not given very much help in terms of support” and being “left with no support”, shines a light on the systemic neglect survivors face post-trial, further solidifying the isolating journey survivors endure. SP2’s repetition of “very very difficult” amplifies the challenges, indicating that the ordeal is not just challenging but overwhelmingly so.

However, it should be noted that in the theme “Re-traumatisation”, professionals argue that further traumatisation of male victims is not limited to their experience with going through the CJS. It can also be present when male survivors engage with different sectors. For example,

> *Interviewer: What issues do you think men who have been raped may encounter when reporting the offence?*
>
> *Health professional 1: Erm I suppose the first thing I said about the pride the image guilt shame issues you know having to describe what happened to them in that those incidents It’s it’s a trauma itself they’re reliving that trauma any rape victim any abused victim whether it’s domestic violence or rape or any other kind you are reliving that memory when you’re describing it to err professionals and sometimes it’s not just one professional you have to keep repeating it to others as well supposing there is a court case police cases counsellor mental health professionals any other like social social services any other statutory sector organisation if you’re if you’re approaching them you have to repeat that same story over and over again (.) which is a trauma for them itself so that and other times it could be like if we are just talking about United Kingdom in other countries I suppose how believable is it? err cultural*

norms err all of that comes into religious perspectives all of that comes into context even in the UK if you're coming from various different cultural backgrounds or religious backgrounds there is a stigma attached there shame attached so all all of that erm comes into account when you're reporting a case

HP1 highlights male survivors' profound difficulties when disclosing their traumatic experiences to various professionals across sectors such as 'court personnel', "police", and "mental health professionals". For these survivors, detailing their ordeals often becomes a secondary trauma, not only a singular retelling but a repeated act of "reliving that memory" to a diverse range of professionals. Coupled with this emotional toll is the inherent "guilt" and "shame" associated with rape and domestic violence. HP1's poignant query, "how believable is it?" hints at the dual battle survivors face internally, with the weight of trauma and" externally, with societal scrutiny. This scrutiny is compounded by "cultural norms and "religious perspectives" that can cast doubts on a survivor's account, adding complexity in international and UK contexts. Thus, professionals are aware of the immediate trauma of recounting and the nuanced societal and cultural dimensions that influence survivors' perceived credibility and subsequent willingness to seek help.

4.3.3 Discourse three: Defining Survivor Identity and the Critical Role of Specialist Services

This dominant discourse highlights the importance of specialist support services for survivors of sexual violence and the ongoing debate surrounding victim-survivor identities and their experiences in the UK. The practitioners were asked what terms they prefer to refer to individuals who have been raped or sexually assaulted, either victim or survivor, and the answers informed the recurrent patterns in the theme 'Victim-Survivor debate'. The professionals highlighted that it is more complex than assigning one of the two terms, and an example of this is shown in the following extract:

Service Provider 4: I tend to ask that individual what they would like to be referred as ((long pause)) I think it's really important that we as practitioners we acknowledge not everyone will resonate with the word victim or some people don't resonate with the word survivor What people though need to understand is victim is very much erm a terminology that will be used if they do go and report it because you (.) you can't get to court without a victim if that makes sense and it's you know it's a terminology the Crown Prosecution will use we have a victim's code we have a victim's commissioner in this country so the first thing is I asked you what you would like to be referred as I will explain if you get any access copies to your case notes you may see terminology in there like victim but I tend to explain why we use it

SP4 acknowledges the importance of allowing individuals to specify how they want to be addressed, as not everyone ‘resonates’ with the terms “victim” or “survivor”. This highlights the agency and autonomy of the individual and challenges the power dynamics inherent in imposing labels on the individuals within their service. However, SP4 also highlights the institutional use of the term “victim” in the CJS’s processes and documents, appealing to authority by referencing specific official entities such as the court system, the Crown Prosecution, a "victim's code", and a "victim's commissioner". It becomes apparent how legal governance and authoritative references define and control the narrative around such experiences, emphasising the government’s role in shaping the discourse.

In addition, the professionals also discuss the implications and nuances behind the terms “victim” and “survivors” during a survivor’s recovery process. For example

> *Health Professional 5: I prefer survivor for myself because it starts to turn a negative experience (.) it starts to reframe it as a positive thing that you are still alive you have come through this you can get strong again you can rebuild your trust in people It’s just trying to turn away from victimising a person who bad things happens to and I think people feel helpless enough when they’ve been raped without that sense of helplessness following them you know talk about re-victimisation what that you know with that comes in an an unseen spoken thing that oh you’re the kind of person who gets victimised you know you see that all the time domestic abuse and other things so (.) I think using the phrase using the word survivors can be helpful because that tries to reframe what’s good about something awful (.) you’ve got through it (.) you’re still here*

In this discourse, HP5 employs the term “survivor” to reframe the experience of those who have been sexually assaulted, suggesting resilience and strength rather than vulnerability and victimhood. The phrase “it starts to reframe it as a positive thing” reveals an attempt to shift the perspective from a passive victim position to an active, resilient survivor one. HP5 highlights the power dynamics in labelling individuals as victims or survivors and implicitly challenges the traditional dynamics that re-victimise individuals who have experienced sexual assault. The phrase “turn away from victimising a person” indicates a desire to shift power relations, giving agency back to those who have experienced rape and domestic abuse. HP5 employs discursive resources such as opposition, causality, and metaphor. The opposition between “victim” and “survivor” emphasises the contrast between passivity and resilience. The causality in the phrase “you can rebuild your trust in people” suggests positive outcomes from adopting a survivor perspective. HP5 also uses a metaphor, framing sexual assault as an adverse event that can be transformed into something positive, as suggested by “reframe what’s good about something awful.” Additionally, HP5 addresses the

concept of “re-victimisation” and the unspoken assumption that some people are prone to victimisation, challenging the idea that specific individuals are inherently vulnerable. HP5’s use of “survivor” challenges traditional power dynamics and social norms, advocating for a more empowering view of individuals who have experienced sexual assault and a shift towards giving agency back to them. Nevertheless, the theme ‘Victim-Survivor debate’ focuses on accepting individuals’ self-identifying post-assault.

On the other hand, the in-vivo theme ‘Specialist Services’ focuses on what training is available to ensure the professionals meet male survivors’ needs. The majority of the professionals have formulated their training. For example:

> *Interviewer: Okay erm so have you received any training in relation to working with men who have been raped?*
>
> *Service Provider 3: Not formally because I’ve because we had to set it up ourselves and we have no money ((laughs)) we just done but I would say I’ve had training I’ve had training in terms of erm (.) well it’s quite ironic really because I’m doing the training now but erm I’ve had training and I’ve been lucky in that I’ve I’ve got to know erm some of the leading experts in the world around erm sexual abuse and violence so we’ve even I’ve even done some training days with them*
>
> *Service provider 7: Well I work at a place that specialises in offering counselling to male survivors of sexual abuse and rape (.) I mean I’ve written some training now for our volunteers and staff coming in so that people working with the organisation going forward we’ll have that training*

In these extracts, two Service Providers separately discuss their training and expertise in working with male survivors of sexual abuse and rape. SP3's statement, “Not formally because I’ve because we had to set it up ourselves and we have no money ((laughs))”, highlights a lack of accredited training due to resource constraints. However, the subsequent mention of being fortunate enough to have connections with ‘world-leading experts’ (SP3) indicates that, while they lacked formal avenues, they still managed to access some form of training or expert knowledge. The phrase “I’ve been lucky” by SP3 demonstrates that such access to training might not be uniform across the board. In contrast, SP7's experience, as evidenced in the statement “I’ve got to know erm some of the leading experts in the world”, seems more structured. They work at a service specialising in counselling male survivors, and their capability to develop training programs for their staff further indicates a more established infrastructure supporting their role. From these extracts, it is evident that there are variances in access to training and expertise among service providers, shaped by factors such as resource availability and institutional support.

Professionals indicate that certain UK services provide unequal access to male survivors. Some of these services, based on their established discourse on sexual violence, might not be adequately equipped to assist men through their recovery journey. For example,

> *Interviewer: Okay thank you erm so what experience have you had with working with men who have been raped in adulthood?*
>
> *Health professional 3: We've also gone through recently I think called male survivors quality standards accreditation so there's erm (.) there's that there's an organisation an umbrella organisation called male survivors and that was two or three separate organisations [Organisation name] at [Region name] [Organisation name] are quite [distance] to us and erm [Organisation] [Large City] I think got together recognising that there was some sexual violence services that were erm closed to men there were some services that were ambivalent to men and some services that are downright hostile to men it's almost as if the the view is taken that men are the offenders and are not to be anywhere near near the service or that it waters down to service by seeing men so they came together and put all together some male survivor quality standards […] a couple of weeks ago actually we were we were finally accredited so we were sort of seen as a service that is particularly erm open to male survivors*

HP3 explains the existence of Male Survivors Quality Standards (MSQS) Accreditation, which resulted from several services forming an "umbrella organisation". During their explanation, HP3 uses the discursive resource of appointments by citing survivors' and helpline organisations to support the authenticity and importance of their narrative. Furthermore, HP3 recounts that these organisations acknowledged that some sexual violence services were "closed", "ambivalent", or "downright hostile toward men". Therefore, this suggests that these attitudes stem from the perception that "men are the offenders" who are not welcome to engage with support services and having them in the service would "water it down". HP3 illustrates that the formulation of the MSQS accreditation challenges this belief and asserts that men can also be victims of sexual violence and have the right to access support services.

4.3.4 Negative Case Study One: Consent Becomes the Issue

Table 4.3

An Overview of The Subordinate Discourses and Themes in The Professional's Narratives

Negative case studies	Themes
Consent Becomes the Issue	Consent
Gender Norms, Masculinity, and Survivor's Sexual Orientation	Masculinity
	Gay men

The professionals highlight a societal trend in the negative case study "consent" when an attacker is known to the survivor. Discussions often pivot to questions of consent, especially among individuals constructed as "unbelievers" (HP6, line number) to challenge male survivors. In addressing a hypothetical scenario where a male survivor experiences stranger rape, the interviewer probed Health Professional 4 about potential perception shifts if the scenario involved acquaintance rape instead. HP4 elucidated society's perception as follows:

> *Interviewer: Do you think their perception would change if the perpetrator was an acquaintance?*
>
> *Health Professional 4: It will be sort of like oh you knew each other you know what he's like you know so just because just because you knew him means that you also acknowledge their advances Okay so because they're acquaintances so they know each other so it will be ((long pause)) erm that perception that you know him you know what he's like so you should have you know you should have said no to his advances*

HP4 implies that the person receiving the information will interrogate the survivors of acquaintance rape to find reasons why it happened to them, as belief in the victim is negotiated. HP4 legitimises their argument using the discursive resources of exemplifying male rape myths demonstrated in previous research. For example, the phrase "acknowledge their advances" and "must have led them on" are well-established misconceptions. Another misconception in the negative case study presented below suggests that male victims must be gay. Nonetheless, interrogating the survivors serves as an avenue for victim blaming. Therefore, the unbelieving individuals assume male survivors label consensual intercourse as rape to "cover-up" (HP5, line number) as a consensual act. This line of thought functions to re-victimise the survivors. Thus, the individuals wholly reject the notion that rape occurs in intimate relationships. It is important to note that this negative case study was only present in the HPs' narratives.

4.3.5 Negative Case Study Two: Gender Norms, Masculinity, and Survivor's Sexual Orientation

This subordinate discourse concerns how masculinity, gender, and sexuality inform the discourse of male rape myths. Some professionals stressed how endorsement of masculinity affects male survivors of sexual violence and abuse. For instance:

> *Interviewer: Yeah erm so yeah where were we? so? Yeah barriers you'd think err men would encounter when reporting the offence?*
>
> *Service Provider 3: […] It's it's that whole masculine image I think it's a bit and I noticed that because when I first started going to to erm ((inaudible)) meetings for the whole of [County name] with different organisations working around sexual violence and abuse would come together and of course it was mainly er mainly women there so I you know there'd be me and maybe one other man erm that will be there at the beginning changing now and of course when you when you listen and you start thinking about the issues for women which is coming from those male masculine attitudes and so on and then you start to realise well actually we're dealing with the same you know it's not different it is the same the same thing It says you know it's those (.) being a man and all this kind of thing I'm thinking this is okay and that okay is what is holding men back from being able to start (.) to start working erm on healing and recovery from it at all you know it's not okay to talk about it and we're not seeing enough being developed in services and organisations to start changing that and making it okay for guys to feel safe to start talking about it er and dealing with it and so on in a way that they can cope with Yeah they'll often get you know go down that route and it's the same with reporting to erm reporting to the police*

SP3's language in this extract highlights the power dynamics and discourse around masculinity concerning sexual violence. SP3 describes how they were among the few men attending general meetings for organisations working around sexual violence and abuse, primarily attended by women, as evident in the phrase "mainly women there." This gender imbalance reflects a power dynamic where women are often expected to take the lead on issues of sexual violence, which can inadvertently contribute to a female practitioner-centric approach to addressing male rape. This may disempower male survivors, as they may find it challenging to connect with support services that predominantly consist of female practitioners. The consequences of this gender imbalance are reflected in SP3's observation that "being a man and all this kind of thing" represents societal pressures and expectations placed on men to uphold an image of hegemonic masculinity, which can prevent them from seeking help or reporting incidents of sexual violence and abuse. This discourse of power

surrounds the construction of masculine gender identity and creates barriers for men seeking support. SP3's statement that they are "not seeing enough being developed in services and organisations" highlights a power discourse where there is a deficiency in providing male-centric support services and resources. The language used in the excerpt suggests that more resources and support services that consider the role of masculinity in recovery are needed, as it acts as a barrier.

Nonetheless, in the theme "gay men", professionals contend that an individual's sexuality does not inherently influence their vulnerability to male rape. This perspective is illustrated in the subsequent extract:

> *Interviewer: Okay Do you think the probability of the man being a victim of rape is related to his sexuality?*
>
> *Health professional 4: that's the erm the presumption isn't it from you know from the society as a whole that you know rape must be related to to er their sexuality um but it's it's not (.) It's not if I wasn't a a therapist I would have the same mentality as well because erm I think it's to do with the community that we've grown up in that gay men are the one going out clubbing and then they just hook up with anyone that they hook up with and then they just do whatever but that's not the case err from what I know now people are being raped in- men are being raped in their own houses by the people that they married to so (.) it's nothing to do with sexuality erm and it shouldn't be and that's the main thing that we have to sort of like put across as therapists to say that it is okay for people to come forward and talk about it and we will not judge you by your sexuality or whatever because then we will sort of like demystified those myths*

HP4 challenges the presumption that male rape is related to the victim's sexuality by stating it is "not the case". HP4 employs phrases like "you know" and "isn't it from you know" to level the power dynamic with the interviewer, signalling an acknowledgement of the shared societal belief in this stereotype and placing them on equal footing. Then, HP4 addresses the larger cultural and societal discourse that constructs "gay men" as promiscuous and therefore more prone to sexual violence, evidenced by the narrative "then they just hook up with anyone that they hook up with and then they just do whatever". However, HP4 refutes this "myth" by pointing out that "men are being raped in their own houses by the people that they married to so", illustrating that male rape transcends sexuality. As a therapist, HP4 emphasises the need to challenge these "myths" and underlines the collective responsibility of therapists in providing a non-judgmental and supportive space for male survivors, as evidenced in the quote, "we will not judge you by your sexuality or whatever because then

we will sort of like demystified those myths". HP4's discourse shows that the societal discourse of sexual violence is both constructed and maintained by "society as a whole" and can be challenged by informed professionals.

4.4 Discussion

This study endeavoured to use Foucauldian discourse analysis to examine professionals' interpretations of male rape within England and Wales. The primary aim was to explore the discursive formations influencing professionals' perceptions, emphasising the interplay of power dynamics, societal narratives, and prevailing norms. Patterns in their language revealed complex intersections of these elements, particularly highlighting the role of gender in defining narratives around male rape and sexual assault. To this end, the study specifically probed into topics such as the role of reporting, prevalent male rape myths, the nature, professional training, and the influence of gender and sexuality in shaping the discourse of male rape (Objective 1). Parallelly, it also sought to gauge the perceived barriers to disclosure identified by these professionals (Objective 2). Guided by the core research question, 'How do professionals construct male rape in England and Wales?', this discussion section aims to contextualise the findings. It will summarise and interpret the identified discourses, pondering their implications for the professionals and the male survivors they aim to support. Furthermore, an introspective look at the study's strengths and limitations will be provided.

4.4.1 Summary of Findings

The study unearthed three core discourses in professionals' narratives on male rape in England and Wales. Firstly, societal awareness of male rape appears skewed, often reflecting stereotypes borrowed from notions of female rape. This predominantly focuses on stranger rape, despite professionals mostly encountering cases of acquaintance rape. The legal labelling of female-perpetrated sexual violence further complicates this discourse. The second discourse delves into the CJS' role in male rape reporting. Here, processes within the CJS emerge as potentially distressing experiences for survivors, leading to secondary victimisation. On the other hand, the challenges are not confined to the CJS, as survivors are often re-traumatised when retelling their experiences to different professionals. In the third discourse, the emphasis lies on the necessity for tailored services that meet the unique needs of male survivors. This includes navigating the intricate dynamics of providing such services and ensuring that survivors transition from a state of victimhood to one of survival. Finally, two negative case studies offer nuances of consent and a crucial lens into the intersections of gender and sexuality. In the ensuing discussion, we will delve deeper into

these discourses, highlighting their implications and drawing parallels with the broader literature.

4.4.2 Interpretation of the Dominant Discourses and Relation to Wider Literature

4.4.2.1 Professionals on Societal Views, Acquaintance Rape and Legal Challenges

The first discourse illuminates the societal perspectives professionals navigate regarding male rape. Discursive practices reflect that these views are significantly circumscribed but are also profoundly influenced by prevalent stereotypes. HP6's observation, 'not in the kind of stereotype way, the kind of a stranger,' captures that the stereotype is not just rooted in the stranger narrative. Such sentiments echoed in the data highlight the dominance of a narrative that often reduces rape to a stranger-involved scenario (Krahé et al., 2015). Enduring gender-role stereotypes and power dynamics shape societal perceptions of male rape myths. Studies by Shechory and Idsis (2006) and Shechory and Jaeger (2019) from Israel further highlight this, revealing a consistent bias within Israeli police departments. These departments often uphold traditional gender roles, positioning women as the primary victims. Such biases are mirrored in the observations made by the professionals in the current study, who note that the general public widely holds similar perceptions influenced by these stereotypes. The Israeli context of these studies offers a valuable perspective, prompting reflections on cultural nuances and the potential for comparative analyses with other regions.

Furthermore, the media's discursive practices are foundational in shaping societal views on male rape, often providing the primary lens through which the public understands these issues. This dynamic mirrors Foucault's theory of the intricate relationship between power and knowledge (Foucault, 1991). Television and other media outlets have the authority to generate, influence, and spread knowledge. Their content choices, portrayal methods, and omissions are emblematic of underlying power dynamics. Professionals' references to soap operas and dramas emphasise this intersection of power and knowledge. Through Foucault's perspective, these media portrayals reflect and actively craft societal realities, dictating the accepted "truth" about male rape. Such views are shaped by cultural narratives that traditionally position men as symbols of strength and power, often contradicting the recognition of male vulnerability. Emezue and Udmuangpia's (2022) study reveals that professionals in the US are keenly aware of stigmatising narratives surrounding male victims of sexual violence. This sentiment was echoed by professionals in England and Wales, who acknowledge the weight of media-driven narratives. These narratives can suppress male experiences and further marginalise discussions surrounding female rape.

Given the media's significant influence on societal understanding and standards, assessing its effects on reporting, public acceptance, and the implications for victim assistance and the pursuit of justice is vital.

In addition, while media plays a role in emphasising certain narratives, such as the dominance of the 'stranger rape' stereotype, professionals frequently underscore the prevalence of 'acquaintance rape'. The pronounced discrepancy between these public perceptions and what professionals witness underlines the depth of societal misconceptions. Acquaintance rape, often mistakenly assumed to be consensual, further entrenches a victim-blaming culture (Krahé et al., 2015). The perpetuation of rape myths and society's inclination towards stereotypical rape scripts become even more evident when survivors do not fit the 'ideal victim' mould, as characterised by HP4's depiction of a "middle class, blameless" individual. This restrictive 'ideal victim' perception, which often frames women as the primary victims and denies male sexual victimisation, is also supported by Depraetere et al. (2020), who emphasise its roots in prevailing gender roles and societal sexual scripts. Given society's adherence to this restrictive narrative, survivors who feel their experiences deviate from this mould might doubt their stories will be validated, leading to potential underreporting (Davies et al., 2013). The dichotomy between 'stranger rape' and 'acquaintance rape' demands further exploration to enhance understanding and combat these misconceptions to change societal views.

On another note, in England and Wales, the legal definitions surrounding rape contradict some survivors' lived experiences. Especially regarding female-perpetrated rape, the existing legal structure reflects societal norms that place men in predominantly positions of control and power, often side-lining the possibility of being victims, particularly by women (similar to Krahé et al., 2015). The chasm between these legal definitions and the multifaceted realities of male rape is further evidenced by Weare and Hulley (2019), who spotlight male survivors' narratives that often do not align with the current legal perspectives. While Weare and Hulley delve into male survivors' personal experiences, this discourse expands the lens to include professionals working with these victims. Their insights underscore the discord between societal perceptions, professional realities, and the sufficiency of the legal framework. The professionals' perspectives and the personal narratives from Weare and Hulley's research illuminate the pressing gaps in the Sexual Offences Act 2003. This dissonance is not just about acknowledging the immediate aftermath of the assault but also the broader societal and legal challenges that may undermine the recognition of male survivors' traumas. Lingberg (2023) suggests that societal perspectives, which include the legal lens, can adversely affect professional practices. The implication is that current definitions might limit the support available to male survivors and

re-traumatise them, emphasising the need to address these discrepancies for more holistic support.

While this discourse echoes the broader literature, it distinctively highlights the dual challenges faced by Health Professionals and Service Providers in England and Wales. On one hand, they navigate the weighty societal perceptions surrounding male rape. On the other hand, they contend with restrictive legal definitions. This confluence burdens these professionals and emphasises gaps in public understanding and legal frameworks, which may impede adequate support for male survivors. There is a clear need to investigate the interplay of societal and legal domains, especially in the context of England and Wales, and to understand its influence on the practice of these professionals. Across roles, there is a consistent professional acknowledgement of the limitations in societal and legal interpretations. This collective recognition underlines the urgent need for change, potentially catalysing societal shifts and legal reforms.

4.4.2.2 Re-Traumatisation, Power Dynamics and the Struggle for Support

In the second discourse, professionals discuss male survivors' challenges within the CJS of England and Wales and other formal support services. The CJS, a cornerstone of societal justice, heavily influences survivors' paths to justice and healing. The need to unpack this discourse arises from its potential to highlight systemic biases against a demographic often marginalised by societal misconceptions (George & Ferguson, 2021). SP2's description of these experiences as "harrowing" underscores the gravity of the situation. To fully grasp the complexities male survivors face, it is essential first to understand the architecture of the CJS. At its forefront stands the police, a robust entity wielding considerable power and influence in the UK's criminal justice landscape. Following this is the prosecution, an impartial service tasked with gathering and presenting evidence to the criminal court. The sequence then leads to the criminal courts, institutions responsible for adjudicating cases and determining outcomes for those found guilty. (Davies & Beech, 2018). However, within this structured framework, professionals perceive troubling disparities. They argue that male survivors often grapple with a system less supportive of them than their female counterparts. This inequity is not merely a structural anomaly but mirrors wider societal beliefs, especially the myth that "men cannot be raped." SP7's words poignantly encapsulate this sentiment: "They think that it does not happen to men." This prevailing misconception, reinforced by research by DeJong et al. (2020) and included in rape myth scales from Struckman-Johnson and Struckman-Johnson (1992) and Hine et al. (2021), demonstrates how deeply these myths have infiltrated society, even reaching the

legal sanctums. Particularly within the police service, as indicated by SP7, there have been shifts in attitudes over the years, but the support extended to male survivors remains inadequate.

Building upon the professional narrative in this discourse, a comparative analysis with recent research further elucidates the intricate challenges and discursive practices shaping male survivors' interactions with the CJS. McCarrick et al. (2016) undertook a UK-based study exploring the experiences of male survivors of Intimate Partner Violence (IPV) where the perpetrator was female. Their findings, echoing the professional insights, suggest a powerful discursive narrative that often casts male survivors in the role of the guilty party within the CJS. Such narratives amplify their victimisation and perpetuate power imbalances, exacerbating these survivors' disorientation. The dominant discourse, marked by an underlying sentiment of gender-based injustice, emerged robustly from their accounts, with survivors frequently attributing disparities in their treatment to their male identity. However, the subtleties in power dynamics become even more evident when considering the methodological distinctions between the studies. While McCarrick et al. utilised Interpretative Phenomenological Analysis (IPA) to dissect the lived experiences of male survivors, the current study, through FDA, critically examined the institutional narratives and power dynamics, focusing on professionals' insights regarding male rape (Foucault, 1972). Consequently, while both studies converge on particular thematic concerns, their distinct lenses provide rich, multifaceted insights into the prevailing power dynamics and discourses that male survivors navigate.

Venturing beyond the UK context, Lysova and Dim's (2022) study from Canada reveals challenges male survivors of IPV face that mirror those of male survivors of rape and sexual assault in this discourse. The IPV survivors encountered dominant themes of masculinity that framed them as unlikely victims, often facing sceptical or even hostile reactions from the police. This hesitance by the police, especially when charging abusive female partners, signifies a power dynamic that dismisses male victimhood. It is essential to distinguish between male rape and IPV; each interacts with societal norms differently. The reasons for the disparity in addressing IPV are manifold, and one of the most contested is shaped by discursive practices that suggest male provocation or the lack of capability to 'fight back' (Machado et al., 2020). In contrast, male-on-male rape and female-on-male sexual assault are often challenged by discourses of masculinity and sexuality (Cohen, 2014). While distinct in cultural and legal contexts, the similarities between the UK and Canada highlight the prevalent power dynamics and biases against male survivors in Western societies; therefore, whether it is rape or IPV, it is arguably influenced by overarching narratives that transcend specific Western geographies or cultures.

Returning to the UK context, Widanaralalage et al.'s (2022b) research stand distinct, focusing explicitly on the harrowing experiences of male-on-male rape survivors. Participants often viewed reporting as a crucial step towards externalising their trauma, hoping for validation and support. Tragically, instead of affirmation, the dominant response from police officers was marred by negativity and indifference. For many, the repercussions of these unsatisfactory interactions transcended the immediate moment, leading to deep-seated psychological distress (Lowe & Rogers, 2017). When put aside in the current discourse, the differences in approach become apparent. While both studies engage with the power dynamics and discursive practices shaping the survivors' experiences, the source of insight varies. The professionals' perspectives in this research provide a panoramic view of the challenges faced by male survivors, shaped by their professional experiences and broad interactions. In contrast, the direct accounts from survivors in Widanaralalage et al.'s (2022a) study offer a visceral, intimate portrayal of these encounters' emotional and psychological toll. This duality - the external, broader lens and the deeply personal narrative - paints a comprehensive picture of male survivors' multifaceted challenges within the CJS. Collectively, these studies underscore a troubling consensus: Male survivors, whether in the UK or Canada, consistently grapple with a system marked by disbelief, bias, and insensitivity. Their experiences, when juxtaposed against the professional's narrative, paint a dire picture of the pressing need for systemic reforms within the CJS.

While individual narratives of male survivors of rape and IPV reveal deeply personal traumas, the current discourse, as highlighted by professionals, illustrates that these challenges are set against a backdrop of more pervasive societal and systemic forces. Drawing upon Foucauldian thought, we are reminded that power is not solely centralised but diffused throughout societal structures (Foucault, 1991). Consequently, male survivors encounter challenges that stem from deep-rooted societal prejudices and inherent inefficiencies within the CJS. This extends beyond prevailing rape myths. Male survivors must navigate a CJS that, while intended to serve justice, can inadvertently present bureaucratic hurdles, potentially contributing to their re-traumatisation. It becomes evident that the challenges male survivors face in England and Wales encompass societal misconceptions and structural impediments within the justice system.

Outside the systemic challenges of the CJS lie deeper, more personal implications for male survivors. Every interaction with reporting, evidence collection, trial or seeking psychological or medical help demands recounting traumatic experiences. HP1 poignantly highlights that for survivors, each recounting is not just a retelling "they're reliving that trauma". This continuous cycle of narration and evaluation resonates with Foucault's notions of surveillance, suggesting that survivors are constantly scrutinised (Foucault, 1977). Similar

to research on female rape and secondary victimisation in various formal settings (Campbell, 2005; Campbell & Raja, 1999; Campbell & Raja, 2005). In addition, a few studies have documented the secondary victimisation of male survivors within the legal system (Jamel et al., 2008; Widanaralalage et al., 2022b) and other formal support services (Bonner-Thompson et al., 2023). Nevertheless, the current discourse carves out a unique space. It highlights the perspectives of formal support services in England and Wales, capturing geographically and contextually specific insights into male survivors of rape and sexual assault. An essential reflection thus emerges: In their interactions with male survivors, do institutions such as the police, prosecution, courts and other service providers perceive these traumatic recounting simply as procedural steps, or do they genuinely recognise and address the multifaceted trauma these individuals face?

In the face of such evident challenges, a glimmer of hope shines through as professionals consistently demonstrate genuine empathy and understanding towards the difficulties faced by male survivors. Their frustration with the CPS, exerting disciplinary power over survivors and professionals, speaks volumes (Foucault, 1975). The revelation that only a “tiny tiny number of cases” (SP7) involving male survivors are considered by the CPS points to a systemic flaw. This positions the system as a disciplinary force that seems to overlook the plight of male rape survivors. However, professionals' recognition of these dynamics heralds the rise of a counter-discourse (Foucault, 1977). This is not just an acknowledgement of male survivors’ experiences. It represents a proactive step towards challenging and reshaping the historical knowledge structures that have marginalised male survivors. Professionals advocate for reporting and believe preparing survivors for the challenges ahead is their responsibility, especially if they want justice.

4.4.2.3 Survivor Identity & Specialist Service Significance

The third discourse, rooted in the professional’s discursive formations, sheds light on the deeply embedded power dynamics inherent in identity labels and underscores the essentiality of specialist services providing inclusive support for male rape survivors. Central to this discourse is the exploration of the ‘victim’ and ‘survivor’ dichotomy. The choice of label, whether ‘victim’, ‘survivor’, or even lesser-acknowledged descriptors like ‘thriver’ or ‘worrier’, becomes more than a mere term of identification. These labels serve as markers on the healing journey, playing a role in defining, reflecting, and guiding a survivor’s experience and psychological trajectory (Williamson & Serna, 2018). The autonomy to self-identify can be a transformative tool, as found in both this study and research by Emezue and Udmuangpia (2022). Emezue and Udmuangpia’s work emphasises how professionals view these labels as wielding the power to stigmatise or de-stigmatise. Consequently, male survivors intentionally choosing their identity label can profoundly impact their healing

journey. The narratives from professionals echo this sentiment, with SP4 notably sharing, “I tend to ask that individual what they would like to be referred as”. However, there remains an ambiguity in the broader range of terms or identities that survivors might adopt in England and Wales, suggesting a need for further exploration to inform professionals better.

Professionals emphasise the importance of looking beyond the labels of ‘victim’ and ‘survivor’ to understand an individual's healing journey truly. An individual's identification with either term, or perhaps neither, reflects their emotional state, perspective on the trauma, and aspirations for recovery (Forde & Duvvury, 2017). As HP5 points out, the term ‘survivor’ can “reframe it as a positive thing”, signifying endurance and persistence. However, viewing survival solely as ‘getting strong again’ can inadvertently uphold heteronormative ideals, suggesting strength as the singular path to recovery for male survivors. In contrast, scholars propose that healing encompasses a spectrum of emotions, from vulnerability to strength (Littleton et al., 2007). HP5's sentiment that 'survivor' helps to “reframe what is good about something awful” encapsulates this nuanced understanding, calling attention to the need for a space where survivors can find positivity, resilience, acceptance and hope amidst their trauma.

The act of self-identification is crucial for male survivors, representing a means to reclaim agency and voice. However, when professionals lean on established protocols, such as the 'victims code', it reveals the constraints of institutional frameworks that might impose their labels and categories. While the 'victims code' and the 'victim’s commissioner' (2023) signify institutional attempts at support, they also illuminate a tension: even as survivors find empowerment in choosing their identity labels, they are embedded within a broader societal context that might not always align with these personal choices. Whereas self-labelling can be transformative in a survivor's recovery journey, it is also shaped by external power dynamics and institutional practices (Foucault, 1977; Levy & Eckhaus, 2020). Recognising these intertwined layers and the nuanced boundaries survivors navigate becomes paramount. Legal institutions, even with the best of intentions, might inadvertently influence male survivors' experiences and perceptions. For instance, institutions' over-reliance on the term 'victim' can perpetuate a notion of unending victimhood. Such a label might inadvertently ensnare male survivors in a continuous cycle of victimisation, possibly leading to re-traumatisation each time they resonate with or are reminded of the term (Williamson & Serna, 2018). Moreover, this societal perception can potentially reinforce a view of such individuals as eternally vulnerable, overshadowing their agency and potential for resilience and recovery.

Labelling is central to this discourse, but it is only a facet of the broader concerns of professionals’ voices. The conversations illuminated an apparent demand for comprehensive

training, accessible resources, and holistic support for male survivors of sexual assault. Notably, many professionals highlighted the imperative of consistent training, with some even innovating their resources, a discursive practice showing commitment to equipping staff, particularly newcomers, with the necessary tools to assist male survivors effectively. This proactive stance resonates with the findings of Donnelly and Kenyon (1996), who found that adequate training significantly reduced negative attitudes towards male survivors. However, it is worth noting that the current discourse does not suggest that professionals in England and Wales are swayed by negative stereotypes or rape myths, unlike in earlier studies. Such differences may be attributed to evolving societal contexts and the historical periods in which these discourses emerged. For context, the Georgian study by Donnelly and Kenyon was set in an environment where male rape was legally classified under sodomy. Their findings reflected deep-seated societal and legal biases. In contrast, the 2020 current discourse from England and Wales exhibits a shift, with professionals actively seeking to bridge training and resource gaps. Jamel et al.'s (2008) study provides another lens, portraying a UK environment where negative attitudes persisted among police officers. Fast forward to the present discourse, and the narrative is one of the conscious efforts by professionals to counter challenges in supporting male survivors.

Similarly, McKee et al.'s (2020) research in Northern Ireland highlighted both progress and areas of stagnation in changing attitudes, spotlighting the regional power dynamics and variations within the UK. However, the dominant discursive practice that echoes through these studies is the palpable shift in professional attitudes towards male rape survivors over the years. Viewing this through a genealogical lens rooted in Foucault's principles (surveillance Garland, 2014), we understand that power structures, societal norms, and dominant beliefs influence the discourse around male rape survivors. The evolving discourse over time signals a potential shift in societal dynamics, possibly stemming from enhanced awareness, such as television shows spotlighting male survivors and more sophisticated training methodologies. A pertinent example is the inception of the MSP, which lays down benchmarks for supporting MUSEs in the UK. This initiative allows support entities to secure accreditation, attesting to their adherence to the standards defined for male survivors (MSP, n.d). Within this discourse, it emerged that Health Professionals had secured this accreditation. This revelation subtly exposes a power disparity concerning access to accredited training, particularly between Health Professionals, Service Providers instrumental in the formation of the MSP, and other Service Providers. This disparity warrants further exploration, especially considering its potential impact on the recovery trajectories of male survivors. However, despite these evolving positive shifts and strides

made in awareness and training, it remains vital to recognise that the landscape is variegated, and not all service providers align with these progressive views.

For example, HP3's candid observation provides a stark reminder of prevailing challenges in treating male survivors: "There were some services that were ambivalent to men and some services that are downright hostile to men. It is almost as if the view is that men are the offenders." This sentiment, echoed by other professionals, reveals an unsettling truth: while awareness has grown, biases casting men primarily as potential offenders persist among certain service providers. These prejudices indicate power dynamics, where institutions further marginalise an already vulnerable group by defining narratives, shaping societal perceptions, and influencing survivors' recovery journeys. Although the discourse showcases professionals championing a more informed and empathetic approach, it does not suggest that the entire landscape in England and Wales is bias-free. HP3's statement affirms that while supportive pockets exist, a more extensive systemic shift remains crucial. Corroborating this, research by Davies (2004) and Walker et al. (2005) emphasises male survivors' challenges. Their advocacy for resources comparable to those available to female survivors, including tailored crisis centres, underscores their quest for acknowledgement, belief, and understanding. The professionals in this sector significantly influence a survivor's recovery journey, and their level of empathy can either validate or alienate survivors, as alluded to in discourse wo. Thus, while initiatives like MSP mark progress, significant work is ahead. It is imperative for service providers to not only offer support but also ensure it is rooted in understanding, empathy, and a departure from harmful stereotypes.

4.4.3 Negative Case Studies

4.4.3.1 Consent becomes the issue.

In the negative case study centred around consent, especially in acquaintance rape scenarios, there is a profound manifestation of rape myth acceptance. When Health Professionals discussed the topic, a notable concern was how societal discourse becomes entangled with misconceptions, particularly when the survivor knows the perpetrator. HP4's statement exemplifies this, "you knew him, you know what he's like." This is more than plain societal talk. It is a discursive practice rooted in power dynamics that privileges certain voices while silencing others. The privileged voices in this discourse are those that perpetuate and uphold rape myths, particularly the ones that question or invalidate survivors in acquaintance scenarios. These might be the voices of individuals who, consciously or unconsciously, believe in and perpetuate harmful stereotypes about rape and consent (Elllison & Munro, 2013). The privilege here does not necessarily mean these individuals hold any power in society; instead, their views align with prevailing misconceptions, granting

them a louder “voice” or influence in the discourse (Foucault, 1981). Their narratives gain traction, thereby influencing societal perceptions of acquaintance rape. Such voices are supported by British literature, as observed in studies by Davies et al. (2013) and Hammond et al. (2017), signifying the deeply entrenched nature of these myths in societal perceptions.

In contrast, the silenced voices are those of the male survivors, who, already bearing the trauma of their experience, face the additional challenge of being believed or having their experiences legitimised (McCrrick, 2016). Consequently, the authentic voices of survivors are often drowned out by dominant narratives, dismissed, or outright ignored. This silencing has cascading consequences, from underreporting to insufficient support structures. In this case, the power dynamic reinforces harmful myths about acquaintance rape, further marginalising survivors and making their journey towards justice and healing even more arduous (George & Ferguson, 2021). These misconceptions and challenges tied to consent were absent in the narratives of Service Providers. This absence warrants reflection. It is possible that Service Providers, due to the nature of their roles and specific training, may approach the topic with a different set of priorities or perspectives compared to Health Professionals. While both are frontline personnel, the nuances in their training, experience, and day-to-day interactions could potentially shape how they perceive and engage with rape myths. Alternatively, Service Providers may be more exposed to a wider range of survivor narratives, leading to a broader understanding that challenges or nullifies prevailing myths. Further investigation into the distinct perspectives of these two groups could yield insightful findings on how professional roles influence discursive practices.

4.4.3.2 Gender Norms, Masculinity, and Survivor's Sexual Orientation

Central to this negative case study is the theme of hegemonic masculinity (Connell & Messerschmidt, 2005). The societal pressures and expectations associated with ‘being a man’ act as formidable barriers for male survivors of rape (Bonner-Thompson et al., 2023). As articulated by Service Provider 3, “It’s those (.) being a man and all this kind of thing I’m thinking this is […] what is holding men back from being able to start (.) to start working erm on healing and recovery”. This quote exemplifies a pervasive cultural resistance which inhibits many men from confronting, discussing, or even acknowledging their experiences with sexual violence (Addis & Mahalik, 2003; Widanaralalage et al., 2022b). Such deeply internalised ideals of masculinity are framed as fundamentally opposed to vulnerability, leading to a culture dominated by silence and suppression (Mahalik et al., 2022).

Furthermore, this negative case study illuminates the prevailing perception that spaces dedicated to addressing sexual violence are predominantly oriented towards women (Davies et al., 2005). Embedded power dynamics within these environments might

inadvertently marginalise the experiences of men, boys, and those of varying gender identities and expressions, rendering them less visible or secondary (Foucault, 1998). Recent campaigns, such as the initiative to end Violence Against Women and Girls (Tudor, 2023), seemingly reinforce this perspective. While the campaign's primary focus appears to be on women and girls, it less conspicuously encompasses violence against men, boys, and individuals across the spectrum of gender identity and expression (Home Office, 2021). Such observations highlight the necessity for a more comprehensive exploration into creating inclusive and equitable environments where all experiences, irrespective of gender, are recognised and prioritised with equal vigour. This aligns with insights from the International Committee of the Red Cross (2022), suggesting that narratives across gender spectrums should be prominently featured.

Intensifying the issue's complexity is the prevailing societal misconception connecting male rape exclusively with gay men. This widespread and harmful stereotype suggests that male rape is inherently tied to being gay (Hine et al., 2021). However, the narratives from professionals debunk this myth, underlining that sexual violence is not constrained by sexual orientation. Crucially, these are not just isolated prejudices held by a minority but deeply rooted misconceptions within society, sometimes even influencing professionals in the field. This mirrors findings from Kassing and Petro (2003) and the seminal work by Turick and Edwards (2012). Such realisations emphasise the pressing need and responsibility for well-informed professionals to counter these deeply ingrained misconceptions proactively.

The limited presence of this discourse in many narratives might reflect the professionals' perception that these issues, extensively studied, especially in research reliant on student samples, stranger rape scenarios, and predominantly quantitative methods (Kambashi et al., in press), are now well-understood. This could lead to their no longer being at the conversation's forefront. While the established roles of masculinity and homophobia in rape myth acceptance are recognised, some professionals might prioritise uncovering new facets and factors (Abdullah-Khan. 2008). This does not downplay the significance of these themes but may signify a push to explore complexities beyond already acknowledged factors. However, the perspectives of those professionals who did emphasise these themes highlight these subjects' enduring relevance and importance. Their insights act as a beacon, pointing to the continuous evolution of understanding in this domain and the perpetual need for dialogue (Foucault, 1977). Even if this case study is deemed 'negative' in its representation, it offers a pivotal lens into domains that require sustained attention, awareness, and discourse in subsequent research and practice.

4.4.4 Comparison of Dominant Discourses and Negative Case Studies

In qualitative inquiry, comparing dominant discourses is crucial. This comparison offers a layered understanding of male rape and sexual assault, unearthing perspectives that challenge or complement one another (Arribas-Allyon & Walkerdine, 2017). The goal is to present a holistic view of how professionals understand and navigate the intricate landscape of male rape, addressing the core research question. Where applicable, the nuances brought forth by negative case studies concerning the dominant discourses were explored.

Firstly, in discourse one, professionals in this discourse underscore the discrepancy between popular notions of male rape and the on-ground realities they face. They invest significant effort in bridging society's skewed perceptions. However, negative case studies, especially “Consent Becomes the Issue”, hint that this gap might be tied to entrenched myths and systemic neglect. Another layer, "Gender Norms, Masculinity, and Survivor's Sexual Orientation", indicates some professionals are witnessing an evolving understanding of male rape, albeit this evolution might be in its infancy. Secondly, in discourse two, professionals identify the CJS as a partner and a potential obstacle in addressing male rape. The second negative case study deepens this narrative, suggesting that societal masculinity constructs might have a bearing on the CJS's handling of male rape cases, which points to the intricate relationship between societal misperceptions and their tangible repercussions within the legal system. The third discourse emphasises that male rape, a profound trauma, requires a unique, tailored response. Supported by negative case studies, the narrative touches upon persistent male rape myths and the complexities arising from societal constructs around masculinity and sexual orientation. Considering insights that male rape often involves acquaintances, professionals in this discourse recognise the multifaceted struggles survivors might face, emphasising the pressing need for more nuanced and specialised support structures. These discourses elucidate the rich, multi-dimensional perspective professionals hold regarding male rape. They traverse the spectrum from societal biases through the CJS's intricacies to survivors' distinctive support needs, forming a complementary understanding (Arribas-Allyon & Walkerdine, 2017).

4.4.5 Strengths, Implications and Future Recommendations

The implications of this study, grounded in the FDA approach, resonate profoundly for England and Wales in the 2020 landscape. The aftermath of Brexit marked this period (Brakman et al., 2023), the trials of Reynhard Sinaga – which brought to the forefront issues of male rape and sexual assault (Pidd & Halliday, 2020), and the COVID-19 Pandemic, which saw an increase in self-referrals to sexual violence and domestic violence services (Walklate et al., 2022) paints a rich tableau of societal and cultural changes. Utilising FDA offered an insight into how these dynamics intersect with Health Professionals and Service Providers’ understanding of male rape. The strengths of this method rest in its ability to

unpack and challenge dominant narratives, offering a detailed perspective on the factors influencing professional views within this specific temporal and regional frame.

The implications for male survivors of rape and sexual assault include the prominent gap identified between societal perceptions informed by media, professional's understanding, and the lived experiences of male survivors. This signifies a strong need for society to recognise and validate the traumas these survivors face. Acknowledging their experiences could positively impact their healing journey by reducing feelings of isolation or invalidation (Ellis et al., 2020). Thus, it would be beneficial for government agencies and non-government organisations to launch awareness campaigns that specifically target debunking myths around male rape, bridging the gap between societal perceptions and the realities experienced by male survivors. Additionally, future research could conduct studies that delve into the media's role in shaping perceptions of male rape, possibly focusing on television, movies, and news media. In addition, the emphasis within professional discourses on tailored services indicates that general victim assistance might not fully cater to the unique needs of male survivors (Silk, 2023; Walker et al., 2005). This implies that male survivors may benefit more from specialised support, even if locating them might be more challenging. It would be advantageous to establish dedicated support centres for male rape and sexual assault survivors to ensure tailored assistance or encouragement of existing specialised services to welcome male survivors. Therefore, researchers could undertake comparative studies that evaluate the efficacy of general vs specialised support services for male rape survivors.

Additionally, for professionals working with male survivors, multiple discourses on male rape suggest that professionals need to be equipped with a multi-dimensional understanding to provide adequate support. Access to comprehensive training programs that encompass these different dimensions could be beneficial. (MSP, n.d.). Therefore, research could be conducted to evaluate the effectiveness of current training programs that cater to professionals working with male survivors. This would provide insights into gaps in training, areas of strength, and potential areas of improvement. In addition, given the recognition of the specialised needs of male survivors, there is an implication that resources in terms of funding and professional training need to be specifically allocated to cater to these needs. Therefore, it would be of great help if services were facilitated with access to comprehensive training for professionals that provide an in-depth understanding of the multiple discourses surrounding male rape and greater access to funding. Additionally, the research could encapsulate the feedback and experiences of male survivors regarding their interactions with trained professionals.

Furthermore, social action and policies concern the discourses that have shed light on societal misconceptions regarding male rape. There is an implication here for social movements, campaigns, and policy-makers to challenge and reshape these norms actively. A recommendation would be to examine the effectiveness of existing or new awareness campaigns. Furthermore, with the CJS identified both as an ally and a hurdle, there is an implication for legal and policy reforms to make the system more responsive to the needs of male survivors, particularly those who label their female-sexual assault as rape (Weare & Hulley, 2019). Advocacy for policy reforms within the CJS to be more accommodating and sensitive to the issues faced by male rape and sexual assault survivors would be beneficial. Further research could explore the decision-making processes within the CJS as they pertain to male rape cases, possibly through interviews with legal professionals such as police, prosecution and court personnel.

4.4.6 Limitations

The study inherently embodies limitations that merit acknowledgement. A significant focus of the research centred on Health Professionals and Service Providers within the geographical bounds of England and Wales. This intensive regional spotlight, while invaluable, raises questions regarding the direct transferability of findings to professionals in regions or nations marked by distinct cultural, legal, and social fabric (Korstjens & Moser, 2018). Additionally, the scope did not extend to other crucial professional categories who routinely interface with male rape survivors, including educators, community leaders, and policymakers. To this end, future research might fruitfully capture perspectives from a more diverse professional spectrum, such as those in education or law enforcement. Engaging in comparative studies that span different regions or countries could also reveal intriguing cross-cultural and cross-regional differences in comprehending male rape, enriching our understanding manifold.

Secondly, another poignant area to probe would be the direct voices of male survivors of rape and sexual assault. This study proffered a mediated understanding through professionals, leaving space for researchers to engage directly with survivors using FDA or other befitting qualitative methodology (Cohen, 2014). Lastly, the temporal framing of this study cannot be overlooked. Set against the backdrop of transformative societal events such as Brexit, the trials of Reynhard Sinaga, and the Corona Virus Pandemic, the findings are firmly rooted in this particular temporal milieu. This contextuality might introduce challenges when endeavouring to transfer findings to varied temporal settings, even when engaging the same cadre of professionals (Korstjens & Moser, 2018). A natural progression in future research would be chronicling how professionals' perceptions undergo shifts in response to evolving societal or historical landscapes.

4.5 Conclusion

Exploring how professionals understand male rape and the associated myths has uncovered varying discursive practices and power relations. At the centre of these discourses lies the influence of the CJS. Its disciplinary power shapes the experiences of male survivors as they navigate the challenges of exploring support and dictates the boundaries within which professionals operate. The findings indicate that, in addition to the CJS, societal perceptions deeply impact male survivors' experiences, with potential amplification or mitigation by media influences. The professionals who work with male survivors of male rape and sexual assault highlighted their dedication to providing optimal support despite the obstacles they face. They persevere to deliver support despite hindrances such as varying levels of access to training and limited resources. The landscape of 2020 England and Wales forms the backdrop for these findings. While it provides a valuable snapshot of current understandings and challenges, it also imposes contextual constraints on the findings. Thus, the ever-evolving societal views on gender, sexuality, and power dynamics necessitate continuous research to stay updated. However, the study's core message remains universal: While male survivors' journey through recovery is fraught with obstacles, there is a persistent beacon of hope, guidance, and support offered by dedicated professionals. It is hoped that understanding and supporting male survivors will become less of an uphill battle and more of a collaborative journey towards understanding, healing, and advocacy.

4.6 Reflexivity

This section includes any potential bias I may have brought into the research process and how I actively engaged in reflexive practices to identify, understand, and mitigate these biases throughout the study.

4.6.1 "… and for women too"

My journey into forensic psychology began with intrigue in social psychological theories of crime and later evolved into a deeper exploration of victim care in forensic settings. This trajectory, combined with my gender identity as a cisgender woman, undeniably influenced the research process. My academic exposure to the dearth of knowledge of male survivors during my master's dissertation quantitative study honed my sensitivity, perhaps enabling a more intricate grasp of professional narratives. However, with this sensitivity came questions: Did my gender encourage professionals to interlace their discourses consciously or unconsciously with female narratives? This question was prompted when professionals would answer a question concerning male rape with an

elaborate answer, then face me, look me in the eye and add “and for women too” at the end of their narratives. Moreover, while I approached the interviews with a degree of nervousness, deeming myself in a lesser standing due to my inexperience in applying my knowledge from interviewing to practice, the professionals seemed to view me differently. Phrases like "you know what it is like" hinted that they perceived me as an equal, an informed peer. This unexpected positioning brought forth richer, unguarded insights.

4.6.2 Diversity and Expectations in Male Rape Discourses

Moreover, my identity as a Black British-African woman potentially added a unique layer to the research dynamics. The study's cohort of participants was diverse, and this mix of perspectives undoubtedly enriched the dialogues, with each participant bringing their unique experiences and insights into the discussions on intersectionalities. While the narratives were filled with dialogues about survivors' ethnicity, immigration status, and various vulnerabilities (from being rough sleepers, grappling with addiction, to contending with both visible and invisible disabilities), these discussions, which I had not fully anticipated based on previous literature predominantly focusing on cisgender white men, broadened the scope of my research. They underscored the importance of recognising the vast spectrum of male survivor experiences. The diversity among participants and my identity might have created a space where professionals felt encouraged to delve deeper into specific topics or share more personal experiences. They might have sensed an environment conducive to discussing underrepresented or seldom discussed facets of the issue, irrespective of their ethnic or gender background. Regardless of their identity, every participant brought valuable insights to the study. While shared identities might have facilitated specific discussions, it is equally important to note that all participants contributed to the depth and breadth of the narratives collected.

While the diverse narratives provided valuable insights, they were not consistently recurrent enough to dominate the established discourses or to be characterised as negative case studies in the analysis. This observation might be attributed to the study's design, which did not specifically include questions targeting these intersectional factors. Hence, the data acquired was more a result of spontaneous mention by the professionals rather than a structured inquiry. This indicates a gap and underscores the importance of future research explicitly focusing on these intersectionalities when examining perceptions and experiences of male rape. The deliberate inclusion of questions related to these themes in subsequent studies would undoubtedly deepen our understanding and reveal even more nuanced perspectives that the current research design might have inadvertently overlooked.

4.6.3 Alternate Realities: Research During a Pandemic

Initially, I was inclined to conduct face-to-face interviews in the East Midlands, primarily drawn by its diverse demographic landscape. However, the advent of the COVID-19 pandemic necessitated a pivot in the study design and mandated a re-evaluation of the associated ethical considerations. This unexpected turn serendipitously expanded the study's geographical reach, encompassing professionals' perspectives across England and Wales. While logistically feasible, the subsequent shift to online interviews ushered in a set of concerns, notably potential internet connectivity issues. Fortuitously, these apprehensions remained unrealised. The online medium unexpectedly introduced an element of candidness to the interactions between the interviewees. As there were sporadic interruptions, such as dogs barking, unexpected phone calls, and deliveries, our exchanges humanised and carved out space for candid pandemic-related conversations, fortifying the rapport. These inconspicuous yet profound moments they have accentuated the shared experience of navigating the pandemic's exceptional circumstances, potentially serving as a power dynamic equaliser.

4.6.4 Methodological Reflections

Embracing a pragmatic worldview enabled me to select FDA as the most suitable methodology to traverse the complexities of male rape. This decision was underpinned by my intrigue in power dynamics and the complexities of discourse. While FDA adeptly captured overarching narratives and illuminated power structures, there exists a possibility that certain nuanced micro-narratives, particularly those on the periphery of the dominant discourse, might have been overlooked. One such nuanced micro-intricacy potentially pertains to the adaptive measures professionals employed in supporting survivors during the COVID-19 pandemic. Given its unprecedented challenges, professionals reconfigured their approaches to survivor support from switching to remote interactions with survivors to upholding COVID measures when interacting with the survivors. Nevertheless, the interview questions were not pre-emptively tailored to capture these specific modifications since the pandemic's evolution and its resultant challenges were unpredictable. This subtle dimension of professionals' practices during such unparalleled times might remain somewhat underrepresented in the present research.

4.6.5 Expectations vs. Grounded Realities

As I embarked on this research journey, my initial expectations were influenced by certain assumptions regarding the breadth of support services available to male survivors. I had imagined a landscape brimming with agencies tailored specifically to male survivors. Surprisingly, my outreach was frequently met with the stark response, ‘We only support women’. Additionally, several charities indicated their exclusive focus on non-serious crimes,

which, to my astonishment, would encompass sexual assault but exclude rape. However, even in their declinations, many organisations endeavoured to assist by signposting me to other potential participants. However, some of these recommended organisations were either already enrolled in my study or conveyed that they were overwhelmed with research requests on male rape, lacking the bandwidth to participate further. This presented a dual-edged reality: On the one hand, the frequency of research requests signalled a growing academic and societal acknowledgement of the issue of male rape, suggesting its emerging prominence in research circles. On the other, it highlighted a palpable scarcity of resources, evidencing the challenge these organisations face in managing their primary duties alongside growing research engagements. Driven by these revelations, I pivoted my approach, broadening my search to organisations spanning men's health, sexual health, domestic violence support, services for sex workers, and LGBTQ+ initiatives. This adaptive strategy was emblematic of the fluidity required in research and emphasised the critical importance of revisiting and recalibrating one's assumptions in response to the ever-evolving dynamics of the field.

4.6.6 Semantics of support

The journey, replete with its pursuit of permissions and ethical considerations, brought the particulars of institutional mandates to the fore. Several charities introduced a divisive lexicon, discerning 'sexual assault' from 'rape' and categorising the former under lesser grave offences. Such terminological demarcations became points of concern, especially since discourse one of this study alluded to scenarios where male survivors, subject to female-perpetrated sexual assault, might perceive their ordeal as 'rape'. This subtle linguistic differentiation bears substantial ramifications, casting a shadow of ambiguity over male survivors' experiences. It raised pressing queries: Were these survivors' needs falling through the cracks? Were their traumas being relegated due to mere semantics? This nuanced yet significant discovery underscored the importance of language and definition within the support system. It accentuated the potential gaps and barriers male survivors might encounter when seeking support, especially if their experiences do not align with predefined institutional terminologies. As I progressed in my research, it became increasingly evident that understanding male rape is not just about gauging societal or professional perceptions but also about dissecting and challenging the structural frameworks that could inadvertently gatekeep support.

4.7 Mixed Methods Integration

This study is the first study of the overarching exploratory sequential mixed methods research design, following the guidelines of Fetters and colleagues (2013). Insights from

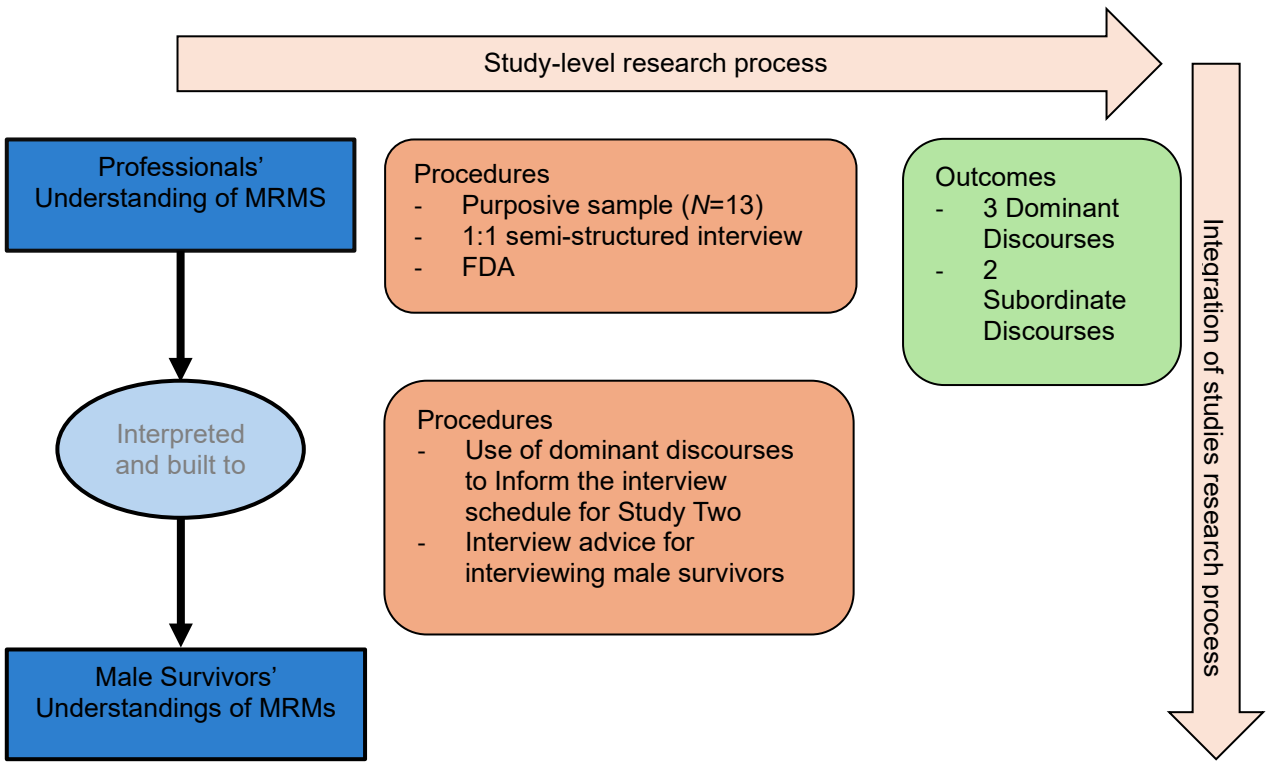
professionals about male rape and associated myths critically informed the subsequent investigation concerning survivors' perceptions. These insights guided the refinement of the topics within the following study's interview schedules, allowing for an in-depth exploration of survivors' understanding and experience with help-seeking. In this iterative research design, feedback from professionals was invaluable (Creswell & Creswell, 2018). One significant contribution was including after-care questions in the interview protocol, ensuring interviews concluded with an emphasis on participant well-being and signposting to external support services (See Figure 4.1 for a diagram of the process).

Summary of chapter

This chapter, presented in manuscript format, includes an introduction to professionals in the MRMs literature, the study's method, the results of qualitative interviews, a discussion of the results, and reflexivity. The chapter ends with an explanation of the mixed methods integration process. Chapter Five, the next chapter, focuses on male survivors of rape and sexual assault's insights on male rape myths. The next chapter is also presented in a manuscript format and is this thesis's second study of three.

Figure 4.1

Diagram of Sequential Exploratory Mixed-Methods Process



5 CHAPTER FIVE: SURVIVORS' UNDERSTANDING OF MALE RAPE MYTHS

Chapter Four, the previous chapter, explores professionals' perceptions of male rape in the UK. It identifies three main discourses that shape the interview structure for the subsequent study discussed in this chapter. This chapter covers study two of three in this thesis. Male survivors of rape and sexual assault are included in the research, which involves detailing the method used for the study, analysing the data collected, presenting the study results, discussing the implications of the results, and reflecting on the study process. This chapter closes by presenting an explanation of the mixed methods integration process.

5.1 Introduction

While existing research has shed light on the English societal mythic views as discussed in Chapter 2 and professional understanding of male rape myths in Chapter 4, a critical gap remains in directly hearing from the survivors themselves. The current study sought to bridge this gap by centring the voices of adult male rape and sexual assault survivors, a perspective that has been notably absent in the broader discourse (Graham, 2006). This introduction section began with a review of International and English knowledge concerning survivors' narratives of male rape myths from a qualitative lens, and the gaps in understanding were discussed.

5.1.1 Survivor's discourse in the international arena

This section delves into the narratives of male survivors from various cultural and geographical backgrounds, examining how their experiences and perceptions are shaped within their respective societies.

5.1.1.1 Male Societal Narratives and Self-Perception

Kramer and Bowman's (2021) study in South Africa offered critical insights into the experiences of 10 survivors (*n* = 5 men, *n* = 5 women) of female-perpetrated sexual violence, utilising Foucauldian Discourse Analysis (FDA), a branch of Critical Discourse Analysis (CDA). This methodological approach, grounded in Foucault's concept of culture, is pivotal in understanding the power dynamics and societal narratives that inform knowledge and individual experiences within specific cultural contexts (Foucault, 1988). A significant finding for male participants was their initial unawareness or inability to claim victim status or recognise that what had happened to them constituted an offence. This perception was shaped and challenged by societal narratives encountered through therapy, media, and online forums, exemplifying the Foucauldian idea of how cultural discourses shape self-perception and identity. These narratives enabled survivors to identify and accept their status

as 'victims,' which was crucial for their recovery process, echoing the importance of therapy in such journeys, as highlighted by Mason and Lodrick (2013). However, the study also revealed the impact of socioeconomic status and racial inequality on access to therapy. The majority of participants were white and had access to therapy, which contrasts with the Black African majority in South Africa (Central Intelligence Agency, 2022). Literature suggests reduced socioeconomic status among Black Africans compared to their white counterparts (Adedeji et al., 2022). This underrepresentation in the study highlights broader issues of racial and socioeconomic inequality in access to mental health services mirrored by the United Kingdom (UK) context (Bansal et al., 2022). The discrepancy points to the need for more inclusive research that encompasses a broader range of men's sexual violence experiences from different ethnic backgrounds and socioeconomic status, even in specific cultural contexts such as South Africa or the UK, as understood through Foucault's framework.

Nevertheless, Kramer and Bowman (2021) also found the impact of societal perceptions on male survivors' self-perception, particularly in terms of emasculation and bodily betrayal during the assault. These feelings resonate with the traits of hegemonic masculinity, which values strength, stoicism, and invulnerability (Connell & Messerschmidt, 2005). Such societal expectations can exacerbate the difficulty male survivors face in acknowledging and disclosing their experiences. However, Kramer and Bowman's (2021) study does not explicitly specify whether the participants experienced child or adult sexual abuse. Their 2020 study, which had the same participants, revealed that 4 out of 5 male survivors experienced child sexual abuse (CSA). This lack of specificity in the 2021 study limits the transferability of the findings to adult male rape and sexual assault. Research indicates that CSA survivors often confront homophobia-based myths, while adult male survivors grapple with myths rooted in gender roles, similar to the traits of hegemonic masculinity (Connell & Messerschmidt, 2005; Davies et al., 2011). Thus, the findings from CSA studies may not directly translate to adult male survivors, though they offer partial valuable insights into the impact of societal expectations on male survivors' experiences.

Indeed, belief in hegemonic masculinity traits has been demonstrated to underpin some male rape myths, as explored in Chapters 2 (Literature review), Chapter 3 (Methodology) of this thesis and wider literature (e.g. PettyJohn et al., 2022). To get a closer look at how hegemonic masculinities of traits of strength, invulnerability, competitiveness and aggression (Kivel, 1998), and male rape and sexual assault intersect, an American study by Dashiell (2023) exampled this well. Dashiell used CDA to analyse online comments from male military personnel who had experienced sexual violence (rape and sexual assault). The study revealed a reluctance among male military survivors to use the term 'rape' as a means

to maintain their masculine capital (Ravenhill & de Visser, 2017), both signifying their adherence to the masculine ideals prevalent in military culture (PettyJohn et al., 2022) and avoiding the stigma associated with being a sexual assault survivor. This finding resonates with Foucault's concept of discipline, emphasising how power mechanisms within specific institutional contexts (the military) regulate individual behaviour and perceptions. In the context of the military, this disciplined environment influences how men perceive and respond to sexual violence, thereby moulding their masculine identities and reactions in line with institutional norms. (Foucault, 1979). Additionally, the participation of male survivors in online forums dedicated to self-disclosures of rape in the military suggests some awareness of their experiences potentially being classified as rape or sexual assault. This is evident by instances in Dashall's extracts where the men in the comments were able to label the assault as "rape" when talking about their colleagues in the military. However, it was unclear if all the comments included in the study were from American Military personnel or if the participants could have been from other world militaries as the comments were sourced from Subreddits on the 8th most popular social media website (Welsh, 2023), Reddit, which has an international reach. Thus, caution should be exercised when applying these findings to other male rape in the military research.

Another key finding of Dashiell's (2023) study revealed that in military environments, perpetrators who were caught often faced violent repercussions, creating an illusion of resolution and further silencing survivors who lacked adequate support. This situation led male survivors to experience health crises, including feelings of isolation, self-harm, or suicidal ideation, due to their inability to express ongoing distress (Di Bianca & Mahalik, 2022). Additionally, the military's hierarchical structure often led survivors to reinterpret sexual violence from higher-ranking individuals as merely 'following orders', thereby desexualising the assault and aligning with the fraternity ethos of military culture (Gardner, 2013). While these findings shed light on the power dynamics within the military, the study's focus on a non-civilian population presents limitations. The unique power hierarchies and cultural norms of the military may not translate to civilian experiences, and military experiences with sexual violence, often labelled as Military Sexual Trauma, are more acknowledged in health systems and research than civilian counterparts (Wilson, 2016). Therefore, there is potential for further research on masculinities and adult male rape in civilian contexts using CDA. Furthermore, using online comments as data while offering valuable insights might not fully capture survivors' personal experiences. The public nature of online forums can shape narratives, possibly omitting private struggles, nuanced emotions, and individual coping mechanisms (Naslund et al., 2021).

5.1.1.2 Secondary Victimisation

In the context of male survivors' recovery, coping mechanisms can vary greatly, influenced by a range of factors. Among these, secondary victimisation emerges as a critical aspect, significantly impacting whether or not a survivor continues with help-seeking behaviours (Campbell & Raja, 2005). For instance, the study by Jackson et al. (2017) explored the experiences of 18 adult cisgender men from America and Canada, most of whom identified as gay, followed by bisexual and queer. Jackson et al. utilised conventional content analysis, and their research revealed that nearly all participants experienced some form of rationalisation or dismissal of their disclosure by both formal and informal support systems. This often manifested as victim-blaming, with survivors being asked to recount their assault in excessive detail or repeatedly, discouraged from further disclosure, or facing a lack of follow-up. Moreover, participants frequently encountered stereotyping and discrimination related to their sexual identity, even within their own gay, bisexual and queer communities (G&B+). This resonates with findings by Jamel et al. (2010), which indicated the presence of homophobia and internalised homophobia in responses to disclosures. A more explicit exploration of sexual identity and support-seeking could provide deeper insights into the challenges faced by sexual minority men in seeking support.

Additionally, the concept of re-traumatisation through repeated questioning, as observed in Jackson et al.'s (2017) study, aligns with findings from this thesis's first study (Chapter Four), particularly within the second discourse titled 'The Criminal Justice System and Male Rape Survivors: Re-Traumatisation, Power Dynamics, and the Struggle for Support.' In this discourse, professionals recognised that each retelling of a survivor's story, especially within legal and medical contexts, can exacerbate the trauma, potentially hindering recovery, as evidenced by Jackson et al. (2017), who highlighted the adverse impact of secondary victimisation on male survivors of sexual violence. Emotional and cognitive responses, such as shame, guilt, anger, and betrayal, not only intensify the trauma from the initial assault but also impede the healing process. The negative responses from disclosure recipients can lead survivors to withdraw from seeking further support, reinforcing their sense of isolation. This finding resonates with similar research on female rape and secondary victimisation by Campbell (2005).

Nevertheless, despite these challenges, participants in Jackson et al.'s study recognised the value of disclosure in recovery. They stressed the importance of discussing the assault and receiving formal and informal support in processing the incident over time. However, Jackson et al.’s (2017) study focussed on white gay men who had disclosed their assault. This raised questions about the experiences of survivors from other racial, cultural, or sexual orientation groups and those who have not disclosed their experiences. The critique highlights the need for broader research that encompasses a more comprehensive

range of survivor experiences, ensuring a more inclusive and comprehensive understanding of the challenges faced in recovery. In line with the theme of disclosure and support, research such as Dashiell (2023) and Kramer and Bowman (2020, 2021) emphasises the role of relational experiences, as detailed by Di Bianca and Mahalik (2022), such as participating in online forums and talking therapy, as crucial in the recovery process.

5.1.1.3 Diverse Experiences of Sexual Violence

When considering a more comprehensive understanding of male sexual violence, it is crucial to examine how varying narratives and contexts influence societal perceptions and legal frameworks. In Study 1 (Chapter 4), Discourse One: ‘Professionals’ Insights: Societal Myths, Acquaintance Rape Realities, and Legal Obstacles’ and the Negative Case Study 'Consent becomes the issue,' professionals contended that deviations from stereotypical male rape scripts often lead to increased fictional elements in rape myth acceptance and victim-blaming practices. This observation is in line with UK research by Anderson (2007) and Davies et al. (2013), which found a tendency to add more mythic characteristics to the construction of male rape compared to female rape. Consequently, Acquaintance rape is often seen as non-stereotypical to the prescribed rape script, although research suggests a spectrum of men’s experiences of sexual violence.

To illustrate this spectrum, we shift the focus back to South Africa with Mgolozeli and Duma's (2019) study. The researchers used Interpretative Phenomenological Analysis (IPA) to explore the complex experiences of 11 male survivors, predominantly black and straight. Their findings revealed a broad spectrum of sexual violence, encompassing acquaintance rape, gang rape, stranger rape, prison rape, homophobic rape, and armed rape. Many survivors had experienced more than one type of assault, and this demonstrated the intricate nature of male victimisation. This diversity challenges the binary view of male sexual violence as either stranger rape or acquaintance rape, aligning with Foucault’s concept of power/knowledge, where societal understanding is both shaped by and shapes legal frameworks (Foucault, 1980). The 2007 amendment to South Africa’s rape laws, which acknowledges all sexes as potential victims or perpetrators, reflects an evolving narrative that sought to address the country's label as the 'rape capital' of the world (Govender, 2023; Government of South Africa, 2024). In contrast, the legal definitions in the Sexual Offences Act (2003) in England and Wales, where men are solely defined as perpetrators, highlight different societal constructs. This juxtaposition stresses the need to broaden legal and societal narratives to recognise the diverse experiences of male sexual violence survivors fully. While these international studies provide valuable insights, they also emphasise the importance of contextualised research. In England and Wales, where different social,

cultural, and legal frameworks exist, the experiences of male survivors and the methodologies employed to study them might present unique narratives and challenges.

5.1.2 Male survivors of rape and sexual assault in the England and Wales context

In the realm of understanding male survivors of rape and sexual assault within England and Wales, the contributions of Widanaralalage et al. (2022b) and Javaid (2017) provided in-depth insight into the experiences of male survivors of rape. To begin with, Widanaralalage et al. (2022b) utilised IPA to explore the lived experiences of nine male survivors. A notable theme from their research, ‘gendered narratives,’ delved into societal misconceptions that predominantly categorise men as perpetrators and women as victims. This finding echoes previous research (Jamel, 2010), raising concerns about the persistence of these stereotypical narratives into the 2020s. This exemplifies how societal power structures and discourses continue to shape and reinforce gender roles and identities, reflecting Foucault's argument that discourses are not static but are constantly influenced by and influence societal norms (Foucault, 1980). Another significant theme, ‘coping with the abuse,’ captures the affective distress of the survivors, especially in incidents involving acquaintances. The theme highlighted the complex emotional responses of the survivors, including feelings of violation, mental contamination, self-isolation, and self-blame. This examination of coping mechanisms is consistent with earlier research, including Walker et al.'s (2005) study. This persistence of similar findings over the past two decades suggests a lack of significant progress in addressing these issues.

Additionally, Widanaralalage et al.'s (2022b) study underscored the significant role of 'masculinity' in shaping male survivors' experiences, highlighting how societal norms often perceive male victimhood as a deviation from conventional masculine behaviour. This observation aligns with the theory of hegemonic masculinity discussed in Chapter 3 of this thesis (Connell & Messerschmidt, 2005), which posits that non-conformity to dominant masculine norms can lead to subordination or marginalisation. Foucault's theories of biopower and discursive formations offer a pertinent lens to examine these dynamics, suggesting that societal norms around masculinity exert control over both male survivors and society at large in their responses to trauma and victimisation (Foucault, 1972, 1978). However, the scope of Widanaralalage et al.'s (2022b) study is somewhat narrow, primarily focusing on the G&B+ community who experienced assault from age 13 onwards, based on the consent principle of the Sexual Offences Act (2003). This raised questions about the study's transferability to a broader male survivor population. Given that the Sexual Offences Act (2003) and Crime Recording Rules (Home Office, 2024) define adult male rape as

involving individuals aged 16 and above, the study's focus on male-on-male abuse from age 13 may not fully encapsulate the diverse experiences of male survivors, particularly those abused by different genders, as extensively explored in Chapter 4.

In transitioning to Javaid (2017)'s study, which also aligns with Foucault's concept of biopower, we find another layer of complexity in the experiences of male rape survivors. Javaid employed thematic analysis to examine the experiences of 15 male rape survivors, both with Human Immunodeficiency Virus (HIV) and without HIV. The study illuminates the intersection of HIV status with the aftermath of rape, highlighting its profound impact on masculinity perceptions, social relationships, and stigma. This includes a 'double' stigma for those who either contracted HIV from their assault or contracted a different strain while already being HIV-positive. Foucault’s theory of biopower, which examines the control of bodies and sexuality in modern societies (Foucault, 1976), offers a lens to understand these findings. The HIV-related stigma experienced by the survivors can be seen as an exercise of biopower, where societal norms around health, sexuality, and victimhood interact to create layers of stigma and marginalisation. The concept of 'double stigma' reflects Foucault's idea of discourse, where prevailing narratives construct the identities and experiences of subjects, in this case, male rape survivors with HIV (Fohring, 2018).

Although Javaid's (2015) research offered insights into the experiences of HIV-positive and non-HIV-positive male rape survivors, the study presented discrepancies in the key themes announced and their representation in the results section, calling for a critical evaluation of the thematic analysis process. This aspect of the study invites scrutiny into how the themes were identified, developed, and presented concerning the data. Reflecting on Foucault's critique of the power/knowledge nexus, it becomes evident that the methodological constraints in Javaid's study might influence the construction and interpretation of knowledge about male rape survivors, especially regarding HIV status. Foucault (1972) argued that research methods and power dynamics are pivotal in shaping our understanding of male survivors. Thus, with its limitations, Javaid's thematic analysis underscores the necessity for rigorous and transparent research methods in qualitative studies (Nowell et al., 2017). While Widanaralalage et al. (2022b) and Javaid have significantly contributed to our understanding of male survivors' experiences in the UK, their studies also point to the demographic scope and methodological depth gaps. In light of these considerations, the present study aims to broaden the exploration of male rape survivors' experiences, addressing these gaps and contributing to a more comprehensive understanding of the societal and discursive constructs affecting male survivors.

5.1.3 Rationale: Gaps in Knowledge and Present Study

The literature on male rape survivors, both internationally and within England, reveals significant methodological gaps, along with limited cultural and geographical representation. The current study addressed these gaps by expanding the research scope, and it employed FDA, similar to Kramer and Bowman (2021), to examine the power dynamics and narratives shaping survivors' experiences in England and Wales. This approach allowed for a comprehensive exploration of societal discourses and their impact on men's experiences with sexual violence. Additionally, the study endeavoured to encompass a diverse range of experiences from male rape and sexual assault by including a broad spectrum of adult male survivors' experiences of sexual violence. Under the Sexual Offences Act (2003), this included male-on-male rape (Section 1) and female-on-male sexual assault, with particular attention to instances involving penetration by a female perpetrator (Section 2) and forced-to-penetrate (Section 4) situations. This focus was informed by insights from Study 1's discourse 'Deconstructing Male Rape' (Chapter Four), where professionals highlighted that male survivors often view sexual assaults by women as rape. By including these varied experiences, the study aimed to delve into the realities of all male survivors, similar to Weare and Hully (2019). Furthermore, research in this field has predominantly centred on the experiences of GBQ men (e.g. Jackson et al., 2017; Widanaralalage et al., 2022b). While these demographics are crucial to understanding, such a focus risks portraying male rape as an issue exclusive to gay, bisexual, and queer men (Kambashi et al., 2023). However, research indicates that heterosexual men also experience rape and sexual assault (e.g. Mgolozeli & Duma, 2019; Walker et al., 2005). Therefore, this study broadened its scope to include men with diverse sexual orientations or expressions, recognising the importance of capturing a wide range of experiences and challenging the limited narrative that male rape primarily affects only certain sexual minority groups.

5.1.3.1 Research Aims and Objectives

This study aimed to explore male survivor's understanding of male rape in England and Wales, with the intention that discussion about male rape would naturally reveal any prevalent male rape myths. An objective was to explore how help-seeking behaviours, masculinities, sexuality and male rape in the understanding of male rape myths (Objective 1). The other objective was to examine the discursive formations that shape prevalent constructions concerning male rape (Objective 2). By doing so, the research sought to fill the critical gaps in our understanding of male rape survivors' experiences within the specific societal and legal context of England and Wales. Consequently, the research question was: How do male survivors of rape and sexual assault understand male rape?

5.2 Method

5.2.1 5.2.1 Research Design Overview

This study, grounded in a pragmatic philosophical approach as outlined in Chapter 3 and similar to Chapter Four's approach, aimed to gain insights into male survivors' perspectives on male rape myths and sexual assault by examining their real-world experiences. The FDA was used alongside semi-structured interviews in line with this pragmatic stance. This methodology highlighted the complex interplay between language, meaning, power and viewpoints. Before full-scale recruitment, initial interviews were piloted to evaluate the questions' effectiveness and ensure the research design's robustness and reliability, a strategy aligned with Majid et al.'s (2017) recommendations. The data comprised transcripts from semi-structured interviews obtained via purposive voluntary sampling. This format facilitated in-depth discussions pertinent to the study's research question (Wiggins & Potter, 2017). The analysis followed Willott and Griffith's (1997) FDA framework outlined in Chapter 2. Additionally, after some time, an online qualitative questionnaire was offered as an alternative to semi-structured interviews to accommodate varying participant preferences.

5.2.2 Participants

Nine male survivors, primarily from professional backgrounds, two of whom were students, participated in the research. The average age of the participants was 30, and they all identified as cisgender men residing in England. While the study aimed to include participants from the other three regions of the UK, none participated. In terms of the men's sexual orientation, five were straight, three were gay, and one was asexual. Regarding ethnicity, four identified as White, three as Black, one as mixed race (Black and White), and one as Native American. Concerning the gender of the perpetrators, five were identified as men meaning they identified their experience as male-on-male rape and four as women meaning some survivors considered this rape would be considered as a female-on-male force to penetrate sexual assault, and seven participants knew their attackers. Therefore, all references to sexual assault in the chapter reference female-perpetrated sexual assault. Regarding preferred terms of address, five opted for 'survivors', three for 'victims', and one preferred 'individuals'. See Table 5.1 for the demographic characteristics of the participants. In terms of help-seeking behaviours post-assault, all nine had sought informal support from friends and family; seven participants did not report their experience to the police; six had sought medical attention; and seven had sought psychological support. Regarding the mode of participation, six completed the qualitative questionnaire, and three participated in an online interview. See Table 5.2 for the reported help-seeking of the participants.

Table 5.1

Demographic Characteristics of Male Survivors of Rape and Sexual Assault

Survivors	Age	Ethnicity	Gender	Sexual orientation	P Gender	Type
Survivor 1 (S1)	22	Native American	Cisgender male	Straight	Man	SR
Survivor 2 (S2)	51	White British	Cisgender male	Gay	Woman	AR
Survivor 3 (S3)	41	Mixed Race Black and White	Cisgender male	Straight	Men	AR
Survivor 4 (S4)	20	Black Jamaican	Cisgender male	Straight	Woman	SR
Survivor 5 (S5)	26	White British	Cisgender male	Straight	Man	AR
Survivor 6 (S6)	33	White British	Cisgender male	Gay	Man	AR
Survivor 7 (S7)	23	Black	Cisgender male	Asexual	Woman	AR
Survivor 8 (S8)	22	Black British	Cisgender male	Straight	Woman	AR
Survivor 9 (S9)	35	White	Cisgender male	Gay	Man	AR

Note. P Gender = Perpetrator, AR = Acquaintance Rape, SR = Stranger Rape

Table 5.2

Male Survivor's Support Sought and Preferred Victim-Survivor Address

Survivors	Police	Medical	Friends/Family	Psychological	Victim-Survivor Address
Survivor 1	No	Yes	Yes	Yes	Victims
Survivor 2	Yes	Yes	Yes	Yes	Survivors
Survivor 3	No	No	Yes	Yes	Survivors
Survivor 4	No	No	Yes	No	Victims
Survivor 5	Yes	Yes	Yes	Yes	Survivors
Survivor 6	No	Yes	Yes	Yes	Individuals
Survivor 7	No	Yes	Yes	Yes	Victims
Survivor 8	No	No	Yes	No	Survivors
Survivor 9	No	Yes	Yes	Yes	Survivors

5.2.3 Participant Selection and Recruitment

The recruitment of study participants employed a purposeful sampling strategy designed to select male survivors of rape and sexual assault residing within the UK (Patton, 2002). This approach was underpinned by the ethical principle of voluntary participation (Vanclay et al., 2013), ensuring that survivors' willingness and ability to participate were duly considered. Advertisements and posts disseminated across various open social media platforms facilitated this process. This method was chosen for its extensive reach and accessibility, enabling the engagement of participants from diverse backgrounds and locales across the UK (Gosling & Mason, 2015).

5.2.3.1 Inclusion Criteria

Participants were required to meet specific criteria to align with the study's focus. These criteria included UK residency and being aged 18 or over at the time of the study. Additionally, their experiences of sexual violence needed to have occurred post-16 years of age, corresponding with the UK's legal definition of adult rape (Sexual Offences Act, 2003). Initial inclusion parameters were restricted to male-on-male rape experiences. However, to maintain inclusivity per the Equality Act 2010, participation was open to transgender individuals as well as cisgender men, thereby ensuring a broad spectrum of experiences and perspectives.

5.2.3.2 Exclusion Criteria

The study's exclusion criteria were carefully delineated. Individuals who had exclusively experienced CSA were omitted, acknowledging the distinct nature of rape myths and sanctions they encounter compared to survivors of adult sexual violence (Davies et al., 2011). Furthermore, to minimise potential harm, the study precluded participation from individuals whose assault occurred within one year prior to the research, aligning with ethical guidelines aimed at safeguarding participants from re-traumatisation or emotional distress (Jackson et al., 2017). The study received ethical approval by the Faculty of the Health and Life Sciences Ethics Committee (FREC) at De Montfort University (DMU), Leicester.

5.2.3.3 Adjustments to Inclusion Criteria

The initial recruitment phase, focused solely on male-on-male rape survivors, yielded only one participant over several months. This prompted a revaluation of the inclusion criteria. Insights from Chapter Four, particularly the interpretive repertoire surrounding the inadequacy of the legal definition of rape in acknowledging male victims of female-perpetrated sexual assault, guided this reassessment. Literature evidencing forced-to-penetrate cases (Weare, 2020) and international legal definitions of rape with gender-neutral or inclusive terms (e.g., South Africa, Canada) further informed this decision. Consequently, the participant criteria were expanded to include survivors of both male and female

perpetrators. This amendment resulted in recruiting four additional participants, illustrating the impact of broader inclusion criteria on participant engagement (Patton, 2002).

5.2.4 Sample Size

While the initial aim was to recruit 15-20 male survivors, guided by Braun and Clarke's (2013) suggestion for qualitative research in PhD projects, the recruitment was also driven by the principle of data saturation. Saturation in qualitative research is when additional data collection does not yield new insights into the research questions (Gee, 2005). In this study, saturation was reached after 9 participants participated in the study, based on the recurrence of themes and the richness and depth of the data, indicating a comprehensive exploration of professionals' understanding of male rape (Ando et al., 2014). The decision to cease recruitment at this point aligned with the qualitative aim of the study, which was to attain an in-depth understanding rather than generalise the findings (Miles & Huberman, 1994).

5.2.5 Data Collection

Participants were provided with an information sheet (See Appendix O) through a link or QR code posted on various open social media sites. This sheet, designed in compliance with guidelines for interviewing vulnerable participants, detailed the study's aims, participant rights (including withdrawal at any point, rights not to answer specific questions, take breaks, and stop the interview), data processing, storage details, and data access information. This approach aimed to reduce surprises during the study and reinforce participants' understanding of their involvement. Eligibility for the study was assessed through a preliminary form, as outlined in the information sheet. Those who met the inclusion criteria were directed to a consent form (see Appendix Q). Upon giving informed consent, participants completed a demographic questionnaire, which included their participant number and email for arranging the online interview via Microsoft Teams and receiving the debrief sheet (See Appendix T).

The interviews were semi-structured to facilitate an in-depth exploration of participants' experiences, perspectives, and interpretations while allowing for flexibility in discussing specific topics of interest (Galletta, 2013). The interview schedule was informed by the literature reviewed and the preliminary findings of Chapter Four (Brinkmann & Kvale, 2015) and focused on participants' experiences with disclosure to various support networks, the role of sexual orientation in these interactions, and the presence of male rape myths in their narratives. Questions also probed barriers to disclosure, awareness of male rape myths, and understanding of the UK's legal definition of rape. The interview concluded with questions about awareness related to male rape and self-care inquiries, as recommended by

the professionals discussed in Chapter Four. The average interview duration was approximately 58 minutes. The transcription strategy employed in this study was the same as that employed in study one and can be found in Appendix K.

5.2.5.1 Adjustments to Data Collection

The adjustments discussed in the participant selection and recruitment were made to the data collection process. The initial preliminary form, which previously screened for perpetrator gender, was removed. This change was in response to expanding the inclusion criteria to encompass experiences involving perpetrators of any gender. In addition to the semi-structured interviews, a qualitative questionnaire option was introduced. This adaptation was communicated to potential participants through an updated information sheet. The questionnaire comprised the same questions as those in the interview schedule, with an additional query about why participants chose this mode of participation over an interview. This choice provided valuable insights into participant preferences and accessibility considerations. Participants in the study were informed that they could receive a £10 online gift card as a small thank-you for their participation. This gesture was meant to acknowledge their valuable time and effort on the questionnaire or interview. In keeping with ethical best practices, the choice to accept or decline the gift card was entirely up to them in keeping with the British Psychological Society (BPS, 2021a) Ethical Guidance. The inclusion of this option resulted in a varied response from our participants. The introduction of these changes led to a diverse range of participant responses. Two more participants opted for interviews, resulting in three interviews with durations ranging from 27 to 58 minutes and an average duration of 40 minutes. Additionally, there were six responses to the qualitative questionnaire, indicating a positive reception to the varied methods of participation.

5.2.6 Ethical Considerations

The ethical framework of the study was designed to ensure participant welfare and adherence to research ethics standards. Key considerations included obtaining informed consent online. Participants were informed of the nature of the study on the information sheet before they could provide informed consent. (see Appendix Q). When it concerned monetary incentive and autonomy, introducing a £10 voucher as a potential incentive for participants was carefully managed to avoid coercion. Participants were informed of the optional nature of the voucher and given full autonomy to choose whether to redeem it, which was in line with the BPS (2022) guidelines. This approach was intended to respect participants' decisions and minimise any ethical concerns regarding inducement. Additionally, all amendments to the study received further ethical approval from FREC at DMU (See Appendix U). Lastly, consistent with ethical practices for interviewing potentially

vulnerable participants, the study provided comprehensive support information on the debrief form (see Appendix T). This included contact details for support services for participants to access if required. It should be noted that the researcher volunteered at the male survivor's charity, which provided training on working with male survivors. This experience also offered insight into approaching this group with sensitivity and empathy.

5.2.7 Analysis

For a detailed description of the steps involved in FDA, refer to Chapter Three, 'Methodology and Methods.' This section will focus on why FDA was particularly suited to this study's research question, the specific approach to analysis, and the discursive findings that emerged. FDA was selected as the most appropriate analytical method for this study, which aimed to understand how male survivors understand MRMs. FDA was ideal for this purpose because it facilitated the in-depth examination of how language, power, and knowledge interact in the survivors' narratives (Foucault, 1972). Foucault's focus on the role of discourse in shaping social realities and individual subjectivities provides a critical lens through which to explore and interpret the complex and often hidden power dynamics inherent in the construction of male rape myths. This approach enables a nuanced analysis of how survivors themselves articulate and understand these myths within the broader context of societal and cultural discourses on male rape and sexual assault, gender, sexuality, and their experiences (Foucault, 1977, 1978, 1979, 1988).

Line-by-line analysis was chosen, and the need for a thorough and meticulous examination of the data drove this. This granular approach ensured that no potentially significant aspect of the survivors' narratives was overlooked (Willot & Griffth, 1997). It allowed for the identification of subtle nuances in language and meaning, crucial for understanding the intricacies of how male rape myths are constructed and perpetuated in discourse (Bacchi & Bonham, 2014; Davies & Harres, 1990; Parker, 2003; Potter & Wetherell, 1987). This level of detailed analysis is fundamental to the FDA, as it uncovers the underlying discursive patterns that might otherwise remain obscured. The initial coding process resulted in a list of 226 codes. The final list was refined to 27 codes through an iterative review and collapsing process (see Appendix V for the final list). The patterned analysis, guided by these codes, identified 11 of key themes, each representing a different aspect of the survivors' understanding of MRMs. To ensure the robustness of these themes and discourses, each had to be present in 6 of the transcripts, thereby validating their relevance and prevalence in the data. The analysis culminated in 4 distinct discourses 'Bearing the Unseen Weight', 'Barriers: Institutional Power and the Complex Journey of Male Survivors', 'A Media Discourse: (in)Authentic Portrayal of Male Rape' and 'Breaking the Silence: Disclosure and Support for Male Survivors' each arising from the text and talk in the

transcripts. These discourses represent the different ways survivors conceptualise and engage with the concept of male rape myths. They reflect the diverse and, at times, conflicting perspectives that survivors hold, influenced by their personal experiences, societal narratives, and cultural contexts. See Table 5.3 for an overview of the Dominant Discourses and themes and Table 5.4. for Subordinate discourse.

5.3 **Findings**

Notably, some of the participants completed an interview, which will appear as an 'interview' in the extracts; where participants completed the qualitative questionnaire, this will be labelled 'questionnaire question'—these were included to provide context to the extract.

Table 5.3

An Overview of the dominant discourses and themes in the Male Survivors' narratives

Discourses	Themes
Bearing the Unseen Weight	Survivors' Mental Well-being
	Emotional Turmoil
	Man up
Barriers: Institutional Power and the Complex Journey of Male Survivors	Male Rape Conceptualisation
	Acquaintanceship Adds Complexity
	Survivors' Physical Well-being'
A Media Discourse: (in)Authentic Portrayal of Male Rape	Accurate portrayal
	Getting justice
Breaking the Silence: Disclosure and Support for Male Survivors	(Un)Disclosed Experiences
	Helpful Support

5.3.1 Discourse One: Bearing the Unseen Weight

This discourse addresses the profound effects that rape and sexual assault have on the mental well-being of male survivors, particularly within the context of societal pressures to adhere to masculine ideals. As a result of these pressures, combined with the trauma experienced, male survivors constructed their psychological, emotional, and social well-being as being adversely impacted, as exemplified in the in-vivo theme 'Survivors' Mental Well-being'. For instance:

> *Interviewer: What recommendations would you give to encourage men who have experienced rape to seek medical support*
>
> *Survivor 8: We encourage them because of the psychological effects it has you know the experience doesn't go away but your memories might also be affected er meaning from time to time when you think about the incident you might become not extremely pleasant to the society or the people around you making you vulnerable towards some attacks erm That is on the psychological end on the emotions ahh it*

> *becomes a burden and when you (.) when you have- when you carry it into your heart for so long meaning there are some things that you won't be able to think of as being open and frank to people because you're lying to yourself and you are also lying to people that you're healed (S8, Straight, Black British, Female-perpetrated Sexual Assault [FPSA])*

S8, who identifies both as a male survivor of sexual assault and as a service provider, articulates the enduring psychological impact of such experiences. This articulation is a discursive practice where S8, drawing on his dual expertise, actively shapes the discourse on mental well-being. He employs technical terminology 'psychological effects', 'memories', and 'affected' as part of an interpretative repertoire that frames trauma understanding in a psychological context. These terms underscore the persistent emotional aftermath of rape or sexual assault and how it can fundamentally alter survivors' self-perception and their interactions within society. Additionally, S8 employs the poignant metaphor of 'carrying [a burden] into your heart' as a discursive resource to vividly depict suppressed emotions and the hidden, yet heavy, consequences of stigmatisation faced by survivors of sexual assault. This metaphor, part of the interpretative repertoire dealing with societal views on trauma, captures the internal struggles of male survivors, illustrating how burying complex feelings can be detrimental. Furthermore, S8 utilised the discursive strategy of polarisation, another discursive resource, by contrasting "lying to oneself and others" with "being open and frank". This dichotomy underscores a dissonance between an external façade and the internal reality of ongoing struggle and lack of healing from the assault. Through advocating for "open and frank" communication about mental well-being post-assault, S8 challenges the norms inhibiting male survivors from expressing their vulnerabilities and addressing societal misunderstandings surrounding their actions and emotions.

While the theme 'Survivors' Mental Well-being' highlights the harmful effects of suppressing emotions, the next theme, 'Emotional Turmoil', offers specific examples of the emotional issues, psychological state and explanations underpinning the suppression. For example:

> *Questionnaire Question 6: How has this experience impacted you?*
>
> *Survivor 3: really that impacted my the way I saw myself really there was a lot of self-doubt and paranoia. To try and deal with that I can just shut that off and try not to think about it and decided that I was gonna tell anyone because I was ashamed and embarrassed and kind of put a lid on it. I tried to be a man and just get over it. Of course that lid did not stay on it manifested in different ways" (S3, Straight, Mixed Race Black and White, Male- perpetrated Rape [MPR], SR)*

S3's narrative engages in a discursive practice that reflects and challenges societal expectations regarding masculinity and emotional expression. His discourse reveals how 'real men' are often perceived as needing to conceal their emotions and quickly overcome trauma, a notion deeply ingrained in societal expectations of how men should recover. This is an interpretative repertoire that defines how male survivors are expected to react post-assault. However, S3's decision to share his emotional turmoil signifies a discursive practice that contests these masculine norms, illustrating his dualistic struggle between conforming to these expectations and addressing his own emotions. S3's self-perception and agency, significantly impacted by the rape, are expressed through his attempts to suppress feelings to regain control, revealing the underlying power dynamics. The use of metaphors like "shut it off", "put a lid on it", and "I tried to be a man" serve as discursive resources, signifying his efforts at emotional suppression. Conversely, the metaphor of the "lid" failing to stay in place symbolises the inevitable resurgence of his emotions, challenging the feasibility and healthiness of this suppression. Additionally, S3's narrative employs the discursive resource of lexical contrast. His use of terms such as "ashamed", "embarrassed", "self-doubt", and "paranoia" starkly contrasts with the societal expectation for him to "get over it". This juxtaposition underscores the detrimental consequences of suppressing emotions and adheres to an interpretative repertoire that questions the societal norms around male emotional resilience post-trauma. S3's narrative culminates in an argument that societal expectations for men to recover from rape and sexual assault quickly are flawed. This argument is a discursive practice that calls for a societal shift in how male survivors navigate emotional turmoil, illustrating that repressed emotions can surface in other harmful ways.

Moreover, the final theme, 'Man up,' intricately builds upon the earlier theme of 'Emotional Turmoil' and further elucidates the discourse on masculinity. This theme underscores how male survivors of sexual violence are compelled to navigate entrenched gender norms and pervasive negative beliefs surrounding their traumatic experiences. The narrative here links back to previous extracts, particularly the poignant use of phrases such as "I tried to be a man" (S8), highlighting a continuous struggle. Male survivors report that their gender significantly influences how others respond to their disclosure of the assault. For instance:

> *Questionnaire Question 12: How do you think your sexuality influenced how people reacted to your disclosure?*
>
> *Survivor 4: I don't think it was my sexuality more my gender as it's a lot less common for guys to be raped. Some girls from the party even thought I was joking. They laughed at me and when they saw I wasn't laughing with them. They got aggy (slang for aggressive) telling me to man up (S4, Straight, Black Caribbean, FPSA, SR)*

S4, identifying as a male survivor of rape through their explicit use of the term ‘rape’ in his narrative, engages in a discursive practice that confronts societal discourses on rape. This usage not only positions himself within the context of his experience but also challenges the societal belief that men, particularly heterosexual men like himself, cannot be victims of rape. This is an interpretative repertoire that typically marginalises male survivors, perpetuating the notion that men should be immune to such vulnerabilities. In his narrative, S4 employs the discursive resource of contrast by juxtaposing his serious recounting of the incident with the initial laughter and subsequent aggression of “girls”, highlighting the dismissal and disbelief he faced. This reaction is rooted in societal gender norms and reflects a power dynamic where other women invalidated their experience of sexual violence by a woman. The direct quote, “Man up”, encapsulated a societal power dynamic, representing a discursive resource that reinforces gender stereotypes and expectations. Furthermore, the use of personal pronouns “I” and “they” in S4’s account distinguishes his own perspective from the dismissive attitudes of the “girls”. This distinction is a discursive practice that emphasises the individuality of his experience against a backdrop of societal misconceptions. His lexical choices, such as “joking” and “aggy”, underline the lack of belief and hostile responses to his disclosure. These choices are discursive resources that illustrate the societal practice of dismissing the experiences of male rape and sexual assault survivors, imposing on them an expectation of resilience and emotional suppression.

5.3.2 Discourse two: Barriers: Institutional Power and the Complex Journey of Male Survivors

In this discourse, the male survivors highlight the complexities of male rape and sexual assault, physical well-being and challenges of getting justice. To begin with, the survivors construct the legal definition of rape as needing change to better align with societal realities in the theme of ‘Male Rape Conceptualisation’. For example:

> *Survivor 2: It needs to be changed it needs to be changed and I say again it needs to be changed. Women are able of raping men and it’s not just men who are capable of raping men it’s women can do it non-gender binary people can do it transgender people can do it and so I feel like the law needs to be updated to align with the society that we live in where the bogeyman is not just a man any more could be anyone and and anyone can be the victim of that bogeyman so I feel like this forced to penetrate and sexual assault by penetration I feel like that’s all rape and should be upgraded to being rape and and this would help I think the police have stronger cases when they take them to the Crown prosecution (S2, Gay, White British, FPSA, AR)*

In this extract, S2 adopts the dual roles of both a survivor of rape and an advocate, a position informed by his personal experiences and views on the legal system. He challenges the societal discourse that predominantly frames rape as a male-on-female crime. This challenge represents a discursive practice aimed at contesting outdated perspectives that fail to encompass the broader realities of sexual violence. S2's use of repetition, particularly in the phrase "it needs to be changed and I say again it needs to be changed", is a discursive resource that emphasises the urgency of updating the legal definition of rape. Through his narrative, S2 actively engages in an interpretative repertoire that questions the traditional binary perceptions of rape. Phrases like "the bogeyman is not just a man anymore" and "anyone can be the victim of that bogeyman" are powerful discursive resources that reinforce his argument for a more inclusive understanding of both perpetrators and victims of rape, challenging the gender binary in traditional rape narratives. Further, S2's advocacy for a redefinition of rape to include all 'victims' and perpetrators, as reflected in his explicit mention of "non-gender binary" and "transgender" individuals, represents a discursive practice pushing against the legal systems' limited definitions of rape. His choice of words such as "rape", "forced to penetrate", "sexual assault", "updated", "align", and "Crown prosecution" directly addresses the legal aspects of his argument, demonstrating his familiarity with and challenge to the legal process. In proposing an alternative practice that encompasses all instances of forced penetration as rape, S2 employs a discursive practice that advocates for legal reform. He believes that such an inclusive definition would enhance the police's ability to build "stronger cases", thereby reflecting a discursive strategy aimed at reshaping societal and legal understandings of rape.

The 'Male Rape Conceptualisation' theme established that men and individuals can be perpetrators of rape despite the legal definition, and building upon that, the theme 'Acquaintanceship Adds Complexity' focuses on male survivors who know their attackers, illustrating the nuances surrounding disclosure in this context. For example:

> *Qualitative Question 4.3: What made you decide not to report the incident(s) to the police?*
>
> *Survivor 6: I had tried to report the rape to my employers. My attacker was a supervisor at that job but the report didn't go far. I was getting the third degree from HR and that was enough to make me quit. I still think about going to the police it might be a bit late though it's been nearly 7 years since the last incident. Though mostly what keeps back is because of the working relationship we had, I do not think the police would believe it as there is that added layer of us knowing each other. (S6, Gay, White British, MPR, AR)*

In this extract, S6, identifying as a male rape survivor, utilised the metaphor “the third degree from HR” as a discursive resource, symbolising the intense scrutiny he experienced, which contributed to his feeling more like a suspect than an individual who experienced rape. This metaphor captures his perception of being subjected to excessive interrogation rather than receiving support. The explicit mention of a “supervisor” places S6 in a subordinate position, not only to his assailant but also to the HR department, whom he perceives as dismissive. This narrative construction is part of an interpretative repertoire that emphasises power imbalances within organisational structures. S6’s anticipation of similar power dynamics with the police is a discursive practice that highlights the societal narratives often marginalising male rape victims. He envisions further disbelief from the police due to his working relationship with his attacker, a situation he encapsulates in the phrase “added layer of us knowing each other”, a discursive resource that underscores the complexity of his predicament. Furthermore, the time reference “nearly 7 years” serves as a discursive resource, indicating the long-term contemplation about reporting and the reoccurring preoccupation the event has had on his mind. This temporal element illuminates the enduring impact of these negative experiences on his decision-making, a part of an interpretative repertoire dealing with the long-term effects of rape and the challenges in seeking justice. Through his narrative, S6 sheds light on the experience of secondary victimisation, highlighting how organisational practices can act as barriers and discourage survivors from seeking justice.

Nevertheless, in the ‘Survivors’ Physical Well-being’ theme, the men explicitly discuss the physical ramifications of rape and sexual assault on male survivors. This theme highlights the survivors’ perspective on the necessity of immediate medical attention, particularly driven by concerns about potential physical health issues, such as injuries and the risk of contracting sexually transmitted infections (STIs) from the assault. In this context, ‘medical support’ refers to a range of healthcare services, including emergency treatment, physical examinations, testing for STIs, and follow-up care. For example:

> *Qualitative Question 5.1: In what way has disclosure helped your recovery?*
>
> *Survivor 5: I am happy that I went to sexual health clinic that way I’m happy that I acted quite quickly because I did worry and about catching something and also I was just in a lot of pain so I decide to make make sure everything was physically okay with my body. When I went to that clinic I was even thinking about the psychological I was kind of in a trance and autopilot I was numb I was just thinking I need to see a doctor I need to get these tests and that’s all I was thinking about. Some glad I went there because of this I got referred to the centre and where they collected the evidence. That bit was really hard because I didn’t want to be touched but I had to be*

> *touched and it was very very intrusive. Cried several several times throughout the process but the staff there were really really patient with me and so I was at least happy that they behave professionally whether or not they went home and laughed about it I don't know a lot about a grown man crying during an examination I don't know but I was glad that in that instant they were professional and really let me take my time (S5, Straight, White British, MPR, AR)*

S5, identifying as a rape survivor, utilises metaphorical language and personal narrative to recount his experiences in a clinic. His description of feeling "in a trance" and "on autopilot" employs metaphor as a discursive resource, communicating a state of emotional numbness and disconnection. This metaphorical description is part of an interpretative repertoire that deals with the emotional responses of trauma survivors, illustrating a disconnection from reality as a coping mechanism. His assertive phrases "I need to see a doctor" and "I need to get these tests" represent a discursive practice of asserting control in a situation where power was taken from him. This narrative choice underlines his determination to care for his physical health and reassert agency, challenging the power dynamics typically experienced by survivors of sexual violence. The deliberate repetition of phrases such as "I didn't want to be touched but I had to be touched" and "very very" followed by "instructive" is a discursive practice that vividly illustrates the power imbalance he experiences during the physical examination with healthcare professionals. This repetition serves to emphasise the tension between the necessary medical touch and his profound discomfort with being touched. Additionally, S5's choice of words like "intrusive", "numb", "pain", and "cried" are discursive resources that powerfully express his physical and emotional discomfort. These choices challenge societal norms surrounding masculinity and emotional expression during medical examinations, as they depict a vulnerability often unacknowledged in male survivors. Furthermore, the phrase "whether or not they went home and laughed about it, I don't know" reflects his uncertainty and fear of judgment, subtly highlighting the potential for medical examinations to exacerbate distress. This is an interpretative repertoire that addresses the fear of judgment and mockery that male survivors might face when seeking medical attention. However, amidst these challenges, S5's narrative highlights positive aspects through terms "patient" and "professional", showcasing moments of compassion and care. His narrative contributes to the discourse on the immediate aftermath of rape, shedding light on both the physical and psychological impacts experienced by male survivors and the complex interplay of fear, judgment, and the need for empathetic care.

5.3.3 Discourse three: A Media Discourse: (in)Authentic Portrayal of Male Rape

Discourse three emphasises the understanding of the current state of public knowledge about male rape, constructed through the experiences of male survivors and

media discourse. In the ‘Accurate portrayal’ theme, male survivors discuss how media representations contribute to societal awareness of male rape. S9, both a survivor and an informed media consumer, highlights this through his reference to ‘I May Destroy You,’ (BBC & HBO, 2020) a British television series by Michaela Coel, acclaimed for its nuanced portrayal of sexual assault. This show, particularly its storyline involving a young male character ‘Kwame’, provides a pertinent example for our discussion on media’s influence. Below is an extract from the closing questions of the interview where S9 elaborates on this point:

> *Interviewer: Is there anything else you wanted to share?*
>
> *Participant: No not specifically no*
>
> *Interviewer: Is there anything you wanted to ask me?*
>
> *Survivor 9: Actually just to go back to that sharing thing just just thinking about you know well there was a story line in that I May Destroy You I just recalled with her best friend the young man (Kwame) I can’t remember the character’s name and that was a particularly important television moment that was particularly powerful and I think that has the power to enhance the conversation because of the you know very accurate I would think depiction of the of the influences that can lead to that event happening so it’s not about the event It’s about the whole context It’s about that assault in the context and I think that you know we were watching that here in my home and it was a very impactful piece so I think it’s give credit to that it takes bravery and courage of people to create culture that reflects honestly what the experience of people (S9, Gay, White British, MPR, AR)*

S9 appreciated accurate portrayals of experiences similar to his own, a perspective deeply rooted in his journey as a survivor. In his narrative, S9 skilfully employs the discursive resource of dates of appointment to add authenticity to his argument about the media’s role in influencing societal narratives about rape. By explicitly citing “I May Destroy You,” a pivotal television show, he highlights how media can significantly shape societal understandings of complex issues like sexual violence. This reference serves not only to anchor his argument in a tangible, recognisable context but also demonstrates the potential of media portrayals to catalyse societal dialogues on sexual violence. This interpretative repertoire acknowledged the power of media in shaping public perception. Additionally, S9 utilises the discursive practice of contrast, a strategy evident in his juxtaposition of the assault portrayed in the show against the broader societal context. This contrast implies that understanding both the specific incident and its societal implications is crucial for a comprehensive grasp of sexual violence. His narrative contributes a fresh perspective to the discourse on the media’s role in

shaping societal comprehension of male rape. Phrases such as “I think that has the power to enhance the conversation” and “it takes bravery and courage” reflect S9’s personal evaluation, affirming his belief in the potential of television to present detailed and complex portrayals of sexual assault. S9’s lexical choices – “powerful”, “bravery”, “courage”, “context”, and “impactful” – are discursive resources that reveal his endorsement of media depictions that truthfully represent people’s experiences with sexual violence. In arguing for media productions that depict not just the assault but also the context in which it occurs, S9 engages in a discursive practice that advocates for a more nuanced and empathetic portrayal of sexual violence in media.

The next theme of this discourse, ‘Getting justice’, concerns institutional and societal responses to male rape. The male survivors express doubt and fears about reporting their experiences of rape and sexual assault informed by their perception of gender relations in the legal system. For instance:

> *Qualitative Question 4.3: What made you decide not to report the incident(s) to the police?*
>
> *Survivor 3: I don’t know how to describe what had happened. Probably would not be a problem for the police. I have watched a few TV shows where the process of reporting and actually getting a woman’s rape case to court is so complicated. So, imagine that for a man? would be much harder. It does not seem worth it if it wouldn’t go any anywhere. (S3, Straight, Mixed Race Black and White, MPR, SR)*

In this extract, Survivor 3 illuminates an imbalanced power dynamic within the legal system, a discursive practice that exposes perceived systemic bias against male rape survivors. This bias complicates their pursuit of justice and reflects a broader societal discourse. S3’s indirect expression of doubt, particularly through his statement, “Probably would not be a problem for the police”, represents a discursive practice where he questions the system’s responsiveness without overtly accusing it of negligence or bias. This nuanced approach is part of an interpretative repertoire that addresses societal views on rape, which often assume it predominantly affects women and suggests a less responsive legal system for male survivors. By contrasting the expected complexity of a “woman’s rape case” with a potentially more challenging scenario for a male rape case, S3, as a marginalised and disheartened male rape victim, engages in a discursive practice that encourages empathy from the audience. This contrast also falls within an interpretative repertoire that critiques the societal and legal perceptions of rape, emphasising the unique challenges faced by male survivors. Employing the discursive resource of interrogation, S3 asks, “Imagine that for a man?”. This rhetorical question challenges the audience to confront and reevaluate their

preconceived notions about masculinity and victimhood. Through this, S3 effectively highlights the often-unspoken biases and double standards in society's perception of male survivors. Additionally, his reference to "TV shows" about reporting rape cases for female survivors, and extending this critique to male survivors, serves as a discursive resource that broadens his critique to encompass law enforcement and judicial practices. He perceives these as biased and discouraging for him and other men seeking justice, contributing to the discourse on the systemic challenges faced by male survivors in the legal system.

However, there is a duality in the survivors' understanding of where 'Accurate portrayal' stems from, as survivors also argue that the public is unaware that male rape can happen. For example:

> *Interviewer: What are your thoughts on how aware the public on male rape?*
>
> *Survivor 7: okay what are the thoughts on how aware are the general public on male rape? Ah actually I doubt if they are they're aware of rape on males because they always give that the simple fact of the society is always been held by that the female by the females so as for us men we believe that there is no any female who can rape us but actually it happens it happens and it happened to me but the public is not aware I don't I don't think that public is aware of the male rape (S7, Asexual, Black, FPSA, AR)*

In this extract, S7, sharing his perspective as a male rape survivor, engages in a discursive practice that highlights the limited awareness of male rape incidents within society. He confronts the pervasive ignorance surrounding this issue, asserting through the repeated use of the phrase" "it happen[s/ed]" three times, a discursive resource that reinforces the reality of male rape. This repetition is a strategic discursive practice to counter societal denial and lack of awareness. His choice of words, including "public", "aware", "male rape", and "females", further demonstrates his critique of societal understanding of sexual violence. This lexical selection is part of an interpretative repertoire that challenges the prevailing power dynamics and societal narratives, which often portray men as impervious to rape, particularly by women. S7's narrative, through this choice of words, is a discursive resource that defies the narrow confines of legal terminology and societal gender norms. By drawing on his personal experience, S7 challenges the dominant discourse and aligns with the 'Male rape conceptualisation' discussion. His narrative represents a discursive practice that contrasts with the typical societal understanding, which predominantly recognises women as the victims of sexual violence. He highlights the widespread societal practice of disregarding or denying the possibility of male rape, confronting this issue from the vantage point of his

lived experience. S7's narrative intertwines with the broader discourse on male rape, effectively bridging personal experiences with societal and legal frameworks.

5.3.4 Discourse Four: Breaking the Silence: Disclosure and Support for Male Survivors

This last dominant discourse concerns the male survivors' pursuit of support, barriers to the pursuit and evaluation of the usefulness of support. To begin with, the theme '(Un)disclosed Experiences' centres on the practices around disclosing male rape. The survivors construct reasons why male survivors may not disclose their experiences. For example:

> *Questionnaire Question 14.2: What do you think the barriers are for men who have been raped when seeking psychological support?*
>
> *Survivor 1: They feel shy, they do not want to talk about it. To them it was their weakest moment and they never want to speak on that vulnerability. In my case my face was covered in bruises and cuts and I know it may seem morbid. I think this made it easier for me to tell my psychiatrist about it because the proof was literally in his face. Unfortunately some people have no proof (S1, Straight, Native American [Studying in the UK], MPR, SR)*

In this extract, S1 offered insights into the disclosure challenges of male rape, particularly focusing on themes of "vulnerability" and "proof", which are part of a broader interpretative repertoire that discusses the severity of rape and sexual assault and societal expectations. Firstly, S1 comments on male survivors' hesitancy to discuss their experiences, as reflected in his statements, "they feel shy, they do not want to talk about it" and "weakest moment". This observation is a discursive practice that suggests a power dynamic where survivors may feel disempowered and vulnerable due to societal norms that often frame distress as a weakness. Secondly, S1's reference to "proof was literally in his face" serves as a discursive resource, employing metaphor to emphasise the role of visible physical injuries in his decision to disclose the assault. This aspect of S1's narrative highlights the societal notion, a prevailing interpretative repertoire, that physical evidence is often seen as necessary to substantiate claims of rape. This belief can dissuade those without visible injuries from coming forward. S1 identifies himself as a survivor who found it relatively easier to discuss his ordeal because of his physical wounds, thereby engaging in a discursive practice that contrasts his experience with survivors lacking physical "proof." Drawing this contrast, S1 illuminates each group's differing hurdles when considering disclosure. This is a discursive resource that showcases the heterogeneity among male survivors. His empathy towards other survivors, especially those without visible evidence, is exemplified in the statement,

“Unfortunately, some people have no proof.” His personal story serves as both a recounting of his experience and a commentary on the broader obstacles survivors face during disclosure, a discursive practice that sheds light on societal and professional practices surrounding substantiating rape claims during disclosure.

The ‘Helpful Support’ theme discusses the usefulness of disclosing male rape and sexual assault. The survivors evaluate their experience of support based on whom they are seeking support from, with informal support from peers and formal support from therapists singled out as the most helpful in their recovery. For example, S4 speaks about the helpfulness of peer support, and this can be seen in the example below:

> *Questionnaire Question 9: Are there any specific things that were positive about disclosing your experience?*
>
> *Survivor 4: just being able to receive support from my friends. Sometimes humans feel entitled to sex and that’s just not the case no matter what gender and my friends understood that. (S4, Straight, Black Caribbean, FPSA)*

S4, recounting his experience as a male rape survivor, describes the supportive response he has received from his friends, indicating a favourable power dynamic within his support network that is characterised by understanding and acceptance. This aspect of his narrative is a discursive practice that showcases the positive aspects of support systems for male survivors, contrasting with the dominant interpretive repertoire of disbelief or marginalisation. Crucially, S4’s discourse focuses on abstract yet significant societal concepts of ‘entitlement’ and ‘consent’, elements of a broader interpretative repertoire that shape societal understanding of sexual violence. By asserting that no individual, “no matter what gender”, has an inherent “entitlement to sex”, S4 engages in a discursive practice that challenges prevailing societal norms about sexual entitlement. This viewpoint is further reinforced by the supportive validation from his friends, who, on a basic human level, agree that no one is entitled to sex. This shared belief among his support network shapes his interpretation of his experiences and defines the supportive response he values. Furthermore, S4’s casual, conversational language, such as referring to people as “humans,” is a discursive resource. This choice of language establishes a candid tone, allowing S4 to personalise his reflections on his experiences further. This discursive strategy makes his narrative relatable and accessible, facilitating a deeper understanding of his perspectives on consent and entitlement.

On the other hand, when it concerns seeking professional help, particularly from therapists, the process is constructed as challenging to navigate. For example,

> *Questionnaire Question 5.1: In what way has disclosure helped your recovery?*

> *Survivor 6: The therapist was very helpful eventually,… The third therapist who is now current therapist has been instrumental with my recovery shes been helping me figure out why my childhood trauma may have led me to being vulnerable and how to overcome that vulnerability (S6, Gay, White British, MPR, AR)*

In this extract, S6 elaborates on his therapeutic journey, offering valuable insight into the process of trauma recovery. He positions himself as an actively engaged survivor in therapy, which is a discursive practice that emphasises his proactive role in his healing process. In this narrative, S6 explores the discourse of trauma and healing, delving into the therapeutic perspective that connects childhood trauma to present-day vulnerability. This exploration is part of an interpretative repertoire that aligns with conventional therapeutic ideologies and approaches, involving the acknowledgement of past trauma and the process of acquiring tools for healing. Furthermore, S6's narrative highlights the expertise of his 'third' therapist, who plays a significant role in his recovery. This emphasis on the "third" therapist is a discursive resource that implies the challenges S6 may have faced with his previous therapists, as indicated by his use of "eventually." This part of his narrative exemplifies a common yet often misunderstood aspect of therapy – the journey to find the right support and the difficulties involved. Over time, S6's experiences in therapy lead to a transformative journey, with the initial power dynamics in his life gradually shifting as he gains insight and control over his experiences. This transformation is evident in his evaluative language, using the terms "very helpful" and "instrumental," which are discursive resources that underscore the positive impact of the therapeutic process. These terms not only reflect his personal evaluation of the therapy experience but also challenge any societal misconceptions about the efficacy and importance of therapy for male survivors.

5.3.5 Diverse Narratives on Insights from LGBTQIA+ Therapy: A Negative Case Study

Table 5.4

An Overview of the Superordinate Discourses and Themes from the Male Survivors' Narratives

Negative case study	Theme
Diverse Narratives on Insights from LGBTQIA+ Therapy: A Negative Case Study	LGBTQIA+ centred support'

Finally, in the theme 'LGBTQIA+ centred support', a noteworthy group adds an alternative perspective to the discourse on therapeutic support. Specifically, three

participants who identify as gay emphasise the value of LGBTQIA+-centred support. For example:

> *Interviewer: In what in what way, do you think this [psychological support] has helped you? If that makes sense?*
>
> *Survivor 9: think it was the it's the best thing I've ever done for myself erm (.) it was having a person I see a [gender] psychotherapist [they] a specialist in trauma and in LGBTQIA+ experience so very early on I felt like it was ((long pause)) understood so erm really attuned with and to erm and because it's an art psychotherapy I was able to use not just language as a way in because I was by the time I went to see [them] I was completely (.) you know a bit of a mess really so it was really freeing to be able to draw use clay use music or different methods to be able to bring it into language and then through language and begin to understand and put a kind of a narrative you know and that allow a narrative to kind of emerge (people (S9, Gay, White British, MPR, AR)*

S9 narrates his therapy experiences as an empowering process, a discursive practice that portrays therapy as a space of understanding and freedom for expression. He employs metaphors such as "bringing into language" and "narrative emerging" as discursive resources, illustrating the evolution of his understanding and expression during therapy. These metaphors highlight the transformative nature of therapy in terms of personal growth and self-understanding. S9's use of a long pause can be interpreted as a discursive resource that indicates reflective thought. It signifies a moment of thoughtful consideration, adding depth to his narrative. S9's emphasis on narrative and understanding in the therapeutic discourse aligns with an interpretative repertoire that values diverse modes of expression, as seen in his mention of using creative tools such as "art", "clay", and "music" in therapy. This approach exemplified the adaptability and inclusiveness of therapeutic methods. Moreover, the therapeutic process is shaped by an LGBTQIA+ and affirmative-informed perspective, demonstrating the therapist's specialised approach. This aspect of the narrative is a discursive practice that acknowledges the importance of a therapy cognisant of and sensitive to diverse identities and experiences. While the therapist, as a professional, initially holds power, their attunement and understanding help to balance this dynamic, a shift that facilitates S9's self-expression and empowerment. The survivor's account culminates with positive evaluative phrases like "best thing I've ever done for myself" and "really freeing." These phrases serve as discursive resources that emphasise the transformative and liberating effects of LGBTQIA+-specific therapy.

5.4 Discussion

In summary, the research, guided by the question, ‘How do male survivors of rape and sexual assault understand male rape?’ in England and Wales, unearthed three discourses through Foucauldian discourse analysis, each shed light on different facets of the survivors’ experiences. The first discourse unveiled the profound psychological impact of rape and sexual assault on male survivors, particularly in the context of societal pressures and masculine ideals. It highlighted how survivors navigate their mental well-being amidst these pressures, revealing the struggle between societal expectations and personal emotional realities. In the second discourse, survivors articulated the complexities surrounding the legal definitions of rape and their pursuit of justice. It brought to the forefront the survivors’ support for broader legal recognition of male rape, encompassing all genders as potential perpetrators and victims, and the intricate challenges they face in seeking justice within the existing legal framework. The third discourse emphasised the role of media in shaping public awareness of male rape. It explored the survivors’ perspectives on accurate media portrayals and the general public’s awareness of male rape. The fourth discourse delved into the process of disclosure and the supportive (or lack thereof) responses they encountered informally and professionally. Lastly, the negative case study (NCS) demonstrated how LGBTQIA+-centred therapy facilitated a transformative process, enabling survivors to express and understand their trauma through diverse and affirmative therapeutic methods. The discussion focused on a deep dive into each discourse and how it relates to the literature, comparisons of the discourse and the negative case study, discursive devices, implications, limitations, and future recommendations.

5.4.1 Interpretation of the Dominant Discourses and Relation to Wider Literature

5.4.1.1 Baring the Unseen Weight

This dominant discourse primarily centred on the psychological aftermath of rape and sexual assault of male survivors. It emphasised how dominant masculine ideals significantly shape their mental well-being and responses to rape and sexual assault. The survivors’ stories reveal a stark contrast between their lived realities and the societal norms that dictate traditional manhood as characterised by emotional stoicism, constant readiness for sex, avoidance of anything deemed feminine, and a lack of vulnerability—norms that are resonant with Connell and Messerschmidt’s (2005) theory of hegemonic masculinity. This adherence to a strict interpretation of masculinity is further supported by Foucault’s power/knowledge (1972) dichotomy, highlighting the societal expectations that dictate male survivors’ self-perception and emotional expression. The experiences of survivors, as evidenced by instances where their trauma was met with laughter or dismissive commands to “man up” (S4), leading some to suppress their distress or “put a lid on it” (S3), align with findings from Kramer and Bowman (2021). Their study demonstrated that survivors often

internalised societal expectations, culminating in self-perceptions steeped in damage and stigma. However, it is essential to note that while Kramer and Bowman's study primarily focused on individuals' experiences of CSA, encompassing both women's and men's narratives, the discourse 'Bearing the Unseen Weight' in this study centres explicitly on the experiences of adult sexual violence. This suggests that there may be similarities in the impact and internalisation of societal expectations across both childhood and adult experiences of sexual violence, indicating a potential area for further research into the commonalities in these experiences. The discourse also highlighted the discrepancies between societal perceptions and the survivors' tangible needs for empathy and understanding. Some survivors faced dismissive responses at times that came from women, which added complexity to the dynamic by challenging the broader research that suggested women generally show lower acceptance of rape myths compared to men (Thomas & Kopel, 2023). This tension between societal constructs of masculinity and the actual experiences of male survivors calls for further investigation into the gendered dimensions of rape myth acceptance and the pervasive influence of hegemonic masculinity.

Furthermore, the personal accounts of survivors represent a potent form of resistance, illustrating Foucault's (1978) concept of the repressive hypothesis, where previously silenced discourses begin to find their voice. These narratives call for "open and frank" (S8) discussions about the negative impact of established paradigms of masculinity. This form of resistance is evident as survivors shared their experiences of vulnerability and the adverse effects the assault had on their mental and psychological well-being. In doing so, they contested the entrenched power structure that associates masculinity with emotional stoicism. Widanaralalage et al. (2022b) further underscore the importance of these counter-narratives by highlighting the societally enforced stereotypes that amplify male survivors' challenges, ranging from disbelief to marginalisation and prejudice. This mirrors Foucault's notion of disciplinary power (1979, 1980), which shapes individual behaviours and identities. By shedding light on their challenges, survivors gain knowledge about their own experiences and the societal forces at play, empowering them to redefine their identities and roles in defiance of traditional power structures, aligning with Foucault's concept of power knowledge.

5.4.1.2 Barriers: Institutional Power and the Complex Journey of Male Survivors

The dominant discourse highlighted the institutions male survivors of rape and sexual assault interacted with during their journey and the subtle ways these shaped their experiences of secondary victimisation. Starting with legal power, Foucault's (1991) analysis of law examined how power, knowledge, and legal discourse intersect. Foucault posits that

power is often exercised through institutional structures such as the legal system, which creates and enforces societal norms and behaviours. The dynamic within this discourse was exemplified by survivors who faced female-perpetrated sexual assault yet characterised their experiences as rape, and all survivors, regardless of the type of rape they experienced, advocated for legal recognition that any individual, regardless of gender, can be both a perpetrator and a "victim" as defined within the Criminal Justice System ([CJS]; Ministry of Justice, 2024). This discourse calls for legislative changes to reclassify certain acts perpetrated by women as "rape," mirroring those committed by men, thereby addressing a legal gap similar to Weare and Hully (2019). Survivors suggest that such recognition could aid the "police in building stronger cases" (S2), enhancing the likelihood of just outcomes. Arguably, it would also facilitate male survivors of FPSA's access to rape-centred support. Interestingly, the discourse reveals survivors' acute awareness of the nuances in legal processes and the critical role of the police in collecting evidence for the Crown prosecution. This insight suggests a need for more extensive legal education or legal resources for survivors, supporting their keen interest in the legal aspects of their cases. Aligning with Foucault's ideas on the interplay of knowledge and power, it is posited that gaining legal knowledge could significantly empower survivors. By understanding the justice system's workings, they can better navigate it and effectively advocate for their rights and the recognition of their experiences.

In this discourse, the medical institution emerged as a significant source of institutional power, characterised by two intertwined concerns among the survivors. Firstly, there was a pervasive fear of contracting STIs. The survivors' urgent pursuit of medical attention, whether it be in a forensic medical unit, a general hospital, or a sexual health clinic, was primarily preventive, motivated by a general anxiety of "catching something" (S5) rather than a reactive response to the rape or sexual assault itself. This preventative approach to seeking medical help reflects a broader behaviour pattern identified in Dashiell's (2023) study, where men often 'de-sexualise' acts of sexual violence to maintain aspects of their masculinity. This phenomenon is evident in the way survivors prioritise immediate medical treatment to manage potential health risks over directly addressing the assault.

Secondly, this fear of contracting STIs was further compounded by concerns over the stigma associated with STIs and their impact on masculine capital. In the context of hegemonic masculinity, contracting an STI is perceived as a vulnerability, challenging the hierarchies of masculinities (Connell & Messerschmidt, 2005). This thread of concern is not unfounded, as seen in Javaid's research on the impact of HIV on male rape victims. Javaid's study reveals the complexity added to survivors' experiences of HIV infection, whether pre-existing or contracted through the assault. The combination of victimhood and illness, along

with societal perceptions of HIV, deeply affects survivors' identities and their interactions in medical settings. This echoed the fears about masculine identity noted in our discourse. However, it is crucial to clarify that the fear of STIs among survivors in our study was more general and not exclusively linked to HIV. These dual concerns – the immediate medical response to prevent STIs and the fear of stigma associated with STIs in the context of masculine identity – reflect Foucault's (1978) notion of biopower, where the body and its health become arenas for exercising power and control. Foucault's analysis of how knowledge and power interact is pertinent here – the medical knowledge about STIs and their societal implications shape survivors' perceptions of their health and masculinity. In this light, the fear of STIs among the survivors in the current discourse is not only a health concern but also a reflection of the societal pressures and norms governing male identities. Hence there is an opportunity for interdisciplinary research to examine the interplay of STIs, male rape and sexual assault, and identity in the English and Wales landscape.

5.4.1.3 A Media Discourse: (in)Authentic Portrayal of Male Rape

This discourse highlighted the origins of authentic portrayals of male rape, suggesting that such portrayals stem from a combination of media representations and direct experiences with institutional power structures. This discourse posited that the media, along with personal encounters with authority figures and systems, play a critical role in shaping the narrative around male rape. It is through this interplay that we saw a pivotal (de)construction of male rape and the myths surrounding it. Male survivors in the study highlighted how their engagement with media as members of the general public themselves, particularly television shows depicting the challenges faced by female survivors in reporting rape, informed their understanding of the legal complexities involved. This indirect media exposure fostered empathy towards female survivors and led them to believe that, as men, they might confront more significant challenges due to societal and legal perceptions. This fusion of media narratives and personal encounters with power structures was crucial in shaping survivors' decisions and expectations, especially their reluctance to engage with law enforcement. This discourse resonated with findings from other research, such as Kahlor and Morrison (2007), which suggest that media portrayals of sexual violence can reinforce and perpetuate rape myths.

Furthermore, it aligns with Elmore et al. (2020), who found that community college students who perceived more remarkable similarity between people they know and those in the media reported higher endorsement of victim-blaming rape myths and excused the accused. This finding indicates a connection between media representation of rape and its impact on the CJS, as supported by Thacker and Day (2017). However, it is essential to note that this body of research is predominantly focused on the United States and often

concentrates on female rape in specific contexts, such as the community college environment, in Elmore et al.'s study. Therefore, caution should be exercised when applying these findings to the UK media landscape and its discourse around male rape, as cultural and contextual differences may influence the relevance and impact of these media representations.

Additionally, survivors in this discourse reported experiences of dismissal from workplace authorities when attempting to report their assaults. This direct experience, often exacerbated by a pre-existing working relationship with the attacker, diminished their willingness to engage with the police, echoing a belief that their cases would not be seriously considered reflecting the myth that male rape is not that serious for men (Turchik & Edwards, 2012). Such apprehensions align with Foucault's (1972) concept of disciplinary power, where negative institutional interactions and media narratives influence individual actions and perceptions. This concept resonates with the dynamics observed in the #MeToo Movement, initially focused on the media industry, highlighting power imbalances in work environments where sexual assault, harassment, and other forms of misconduct occur. The movement demonstrated how institutional powers often fail to address these issues, leading to campaigns that reveal the subtleties of power exercised through force, coercion, and intimidation, with implications for individuals' livelihoods and careers (PettyJohn et al., 2019). This broader societal context provides a backdrop against which the experiences of the survivors in this study can be understood, showcasing the pervasive nature of power dynamics across different settings and their impact on individuals' decisions to report sexual violence. However, this discourse also reveals a duality in the role of media.

While the media can sometimes shape perceptions that discourage engagement with legal processes, it also holds the potential to bring crucial awareness to the authentic portrayal of male rape and sexual assault. A notable example is the storyline in 'I May Destroy You' by Michaela Coel (BBC & HBO, 2020), which accurately depicts an acquaintance rape scenario. In the show, a gay black man experiences non-consensual sex after initially consenting, a clear violation under Section 1 of the Sexual Offences Act 2003. The character's subsequent interaction with police officers, who appear uncertain about how to handle the situation, and they incorporated elements of mythic talk during their interaction with the survivor, highlighted the challenges faced in reporting acquaintance rape. The show's sensitive and nuanced treatment of this subject was seen as a powerful "important television moment" (S9) and accurate representation, challenging dominant narratives and potentially influencing societal understanding and responses to acquaintance rape and male rape. This portrayal underscores the power of storytelling in media to reshape public perceptions and foster a more empathetic understanding of male rape, particularly in

scenarios involving acquaintances. This aligns with literature suggesting that media coverage (e.g. I May Destroy You) that covers different forms of sexual violence and the #MeToo Movement have revitalised the conversation around rape and sexual assault. These media narratives have not only increased awareness but also encouraged others to share their experiences, thereby contributing to a broader societal shift in the discourse on sexual violence (Benson-Allott, 2020; PettyJohn et al., 2019).

However, survivors in this discourse expressed concern that the general public remains largely unaware of the reality of male rape and to the public, rape is still largely about men raping women. This lack of awareness is concerning, as research suggests that in the absence of informed understanding, rape myths can persist and proliferate within society (Burt, 1980; Horvath & Brown, 2013). This scenario aligns with Foucault's (1977) concept of the panopticon, a metaphor for the modern surveillance state. As the panopticon exerts control through the possibility of constant observation, media narratives and public awareness—or lack thereof—act as tools of societal surveillance, shaping and controlling the public discourse on male rape. These narratives' power is constructed as either able to challenge or reinforce existing prejudices and misconceptions, effectively 'watching' and guiding public perception. Therefore, the role of media and public awareness in the construction of MRMs is crucial, as it directly influences how society views, discusses and ultimately understands the phenomenon of male rape and sexual assault in England. Thus, an essential question arises: Despite the presence of male rape portrayals in the media, and the public is construed as largely unaware of male rape and sexual assault, what elements are missing? What factors are contributing to this disconnection or misalignment in public understanding and media representation of male rape? Unravelling these questions is vital and would help with deepening the understanding of the role of the media in the discourse of male rape, bridging the gap between media portrayal and public awareness.

5.4.1.4 Breaking the Silence: Disclosure and Support for Male Survivors

Discourse Four unearthed that male survivors' reluctance to express vulnerability significantly impacted their willingness to seek support. This reticence can be understood through gender role strain theory, which suggests that societal norms pressure individuals to adhere to traditional gender roles. Within this framework, conventional masculine ideals often discourage the expression of vulnerability, deeming it a sign of weakness or a deviation from the expected stoic and resilient male archetype. This aligns with Foucault's (1972) concepts of power/knowledge and discourse, which also influence the experiences and behaviours of male rape survivors, echoing themes found in Discourse One. Foucault posited that power permeates society and is manifested through discourses that shape individual thought and behaviour. In the context of male survivors, the prevailing discourse

on masculinity, emphasising strength, control, and emotional restraint, acts as a deterrent to expressing vulnerability or distress (Di Bianca & Mahalik, 2022). This widely accepted narrative about masculinity, in line with Jewkes et al. (2015), thus wields power over the survivors' self-perception and their readiness to seek assistance.

Interestingly, survivors indicated that having physical 'proof' of assault, such as bruises, facilitated help-seeking (S1). This could be interpreted as evidence that they resisted the attack, aligning with typical male rape scripts and allowing them to retain some masculine capital (Davies et al., 2013). However, this trend raised concerns, as research suggests that physical injuries are less likely in rape cases, posing challenges in evidence collection and support seeking (Lowe & Rogers, 2017). Furthermore, while survivors may seek medical help in the presence of physical injuries or the fear of contracting STIs, as discussed in Discourse Three, this approach is troubling, given the lower probability of visible injuries in such cases (Bullock & Beckson, 2011). This highlights a critical gap in the support system and societal understanding of male rape, reinforcing the need for greater awareness and a shift in how male vulnerability is perceived and addressed in the aftermath of sexual violence.

In contrast to the reluctance to seek support due to societal norms, Discourse Four also showcased a countervailing trend where male survivors actively seek support from friends, family, and therapy. This represents a counter-discourse of resistance, challenging the prevailing norms around masculinity and help-seeking. It suggests that, contrary to traditional gender expectations, some men are progressively becoming more open to seeking support from personal networks and therapeutic sources. This shift aligns with American research by (Jackson et al., 2017), which has similarly found that male survivors do disclose their experiences and seek support. Additionally, literature by Bonner-Thompson and colleagues (2023) and Silk and Colleagues (2023) reinforce this perspective, indicating that such forms of support are often perceived as the most helpful by male survivors. Foucault's (1976, 1981) theory of power relations and resistance becomes crucial in understanding this aspect of the discourse. Foucault (1982) posited that while discourses can exert power and shape behaviours, they are not unidirectional or absolute. Instead, they are subject to contestation and resistance, allowing counter-discourses to emerge. In this case, the counter-discourse challenged the dominant narrative that stigmatises vulnerability and help-seeking in men, particularly in the context of rape and sexual assault. Indeed, male survivors reaching out for support despite societal pressures exemplify Foucault's idea of resistance within power structures. It underscores power's dynamic and fluid nature and how it can be restrictive and enabling, depending on the context and individual responses (Foucault, 1982). This trend in the discourse reflects a gradual but significant shift in societal

attitudes towards male vulnerability and support-seeking, moving towards a more inclusive and empathetic understanding of male experiences post-sexual assault. Notably, this suggests a cross-cultural link between US and UK help-seeking behaviours.

While Discourse Four illuminates a significant shift towards more open support-seeking behaviour among male survivors, it is crucial to approach this finding with a critical lens. One key critique is the potential oversimplification of the challenges faced by male survivors in seeking support. While the discourse highlights a positive trend in help-seeking behaviours, it may not fully capture the nuanced and often conflicting emotions that male survivors experience. This is evidenced in this discourse, where the majority of the male survivors were seeking support for multiple traumas (Mgolozeli & Duma, 2019; Thompson & Bennett, 2017). The counter-discourse of resistance, while empowering, might overshadow the deep-rooted societal pressures and internalised stigma that many male survivors still grapple with, as highlighted by Widanaralalage et al. (2022b). This can lead to a somewhat idealised view of support-seeking, potentially underestimating survivors' ongoing struggles and resistance in real-life contexts (Walker et al., 2005; Wetherell & Edley, 1999). The experiences of male survivors are diverse and context-dependent, varying widely based on factors such as cultural background, sexual orientation, age, and the nature of the assault (Mgolozeli & Duma, 2019). Therefore, while some survivors may find it easier to seek support, others may face significant internal and external barriers (Discourse One) and external (Discourse Two). This diversity in experiences must be acknowledged to avoid a one-size-fits-all narrative about male survivors' help-seeking behaviours.

5.4.1.5 Diverse Narratives on Insights from LGBTQIA+ Therapy: A Negative Case Study

Gay participants in this study highlighted the effectiveness of therapy tailored to their specific needs. Alternative therapeutic methods, such as art, clay, and music, were constructed as beneficial, particularly for those who find it challenging to articulate their emotions—a concept known as Alexithymia (Levant et al., 2009). These alternative approaches offered valuable avenues of expression, aligning well with the difficulties in verbalising feelings. This preference can be viewed as resistance to conventional medical discourses, which often prioritise talk therapy. Foucault's (1972) concept of power/knowledge is relevant here, as it demonstrates how societal and medical norms often dictate 'valid' or 'effective' treatment methods. Thus, the use of alternative therapies by gay survivors challenges these established norms. This mirrored literature suggests that alternative forms of therapy are constructed as helpful for the LGBTQIA+ community (Pelton-Sweet & Sherry, 2008). However, this led to questions about the accessibility of such therapies for straight survivors, suggesting a potential disparity in therapeutic options offered

across different survivor groups. This raised concerns about reinforcing inequalities within the healthcare system (Bansal et al., 2022). The efficacy of personalised therapeutic approaches, as demonstrated by the experiences of gay survivors, underscores the benefits of diversified therapy methods. Nonetheless, the implied lack of similar options for straight survivors indicates a need for more inclusive therapeutic practices in mainstream healthcare. Ensuring all survivors have access to beneficial therapy modes could address this gap.

5.4.2 Dominant Discourses and Relation to Theory

In this study, the dominant interaction between societal expectations of masculinity and the personal experiences of male survivors of rape and sexual assault. The first key discourse focused on how societal norms shape masculinity, highlighting the external pressures men encounter to adhere to traditional masculine standards. This aspect is closely linked to Connell and Messerschmidt's (2005) Theory of Hegemonic Masculinity, which sheds light on the dominant masculine traits society often valorises and the expectations these create for men. This theory revealed how societal norms can stigmatise men's vulnerability and reluctance to seek help, further entrenching male rape myths. Conversely, the second key discourse delved into the internal aspects of masculinity, exploring how men personally view and manage their masculine identity, especially when upholding or challenging societal norms. In this context, Pleck's (1981, 1995) Gender Role Strain Paradigm (GRSP) offers valuable insights. GRSP examines the internal conflict men may face in meeting societal masculinity standards, acknowledging the stress caused by rigid gender roles (highlighted in discourse one) and the potential for men to redefine masculinity to accommodate vulnerability and help-seeking. These discourses indicate that, despite societal and personal pressures to conform to traditional masculine norms, some men recognise the importance of medical help and psychological support. This realisation is particularly apparent in Discourse Two, which discusses the need for medical aid, and Discourse Four, which highlights the importance of informal social and formal psychological support (Addis & Hoffman, 2017). Furthermore, Discourse Three brings to light the significant role of media in forming and perpetuating societal views on male rape and sexual assault. The way media represents male rape can significantly affect how male rape myths are formed, maintained, or dismantled, ultimately influencing the public's understanding of these issues (Foucault, 1972). This interplay between media portrayal and societal perceptions of masculinity underscores the complex dynamics at play in the discourse surrounding male rape myths.

With its focus on power dynamics and the construction of knowledge, Foucauldian theory provided an overarching framework for understanding these discourses. It helped explain the perpetuation and challenge of societal norms within these narratives in Discourse

Three. Specifically, Foucault's ideas on power and knowledge resonate with Discourse One, where societal norms impact male survivors' emotional and psychological well-being. In contrast, Discourse Two reflects Foucault's concept of disciplinary power, where institutional power dynamics shape survivors' interactions with legal and medical institutions. Survivors in this discourse expressed a desire for legal changes that would recognise a broader spectrum of experiences as rape, moving beyond gender-based limitations. This call for change signifies an active challenge to the existing power structures and norms, embodying Foucault's ideas about the malleability and contestability of power.

5.4.3 Summary of Subject Positions, Interpretative Repertoires, and Discursive Practices/Resources

This study has identified a range of subject positions (Davies & Harre, 1990) occupied by male survivors of rape and sexual assault within societal discourse. These positions vary from marginalised voices contending with hegemonic masculinity norms to empowered individuals within specialised therapeutic settings. Each position is shaped by the survivor's relational status in society, influenced by their assault experiences, societal reactions, and personal identities (Bacchui & Bonham, 2014). The interpretative repertoires revealed in this research encompass diverse themes employed by male survivors to interpret their experiences. Key themes include the psychological trauma inflicted by assault, the weight of societal expectations, the challenges faced in navigating the legal system, and the struggle to find representation in media narratives (Potter & Wetherell, 1987). These repertoires resonate with themes found in female rape myth literature, where victim-blaming narratives and the battle for legitimacy are prevalent (Packer, 2003). Furthermore, the study highlighted various discursive practices and resources survivors use to articulate their experiences and facilitate recovery. These practices include metaphorical language, exemplified by phrases such as "anyone can be the bogeyman" (S2), and the construction of narratives that contrasted vulnerability with traditionally masculine ideals. These methods demonstrated how survivors actively interact with and sometimes resist entrenched societal discourses. This approach is akin to strategies observed in female rape myth literature, where survivors use social reform practices (e.g. campaigning, lobbying) to confront and challenge stigmatising myths and narratives (Berger, 2017).

5.4.4 Implications and Future Recommendations

5.4.4.1 Implications for Male survivors of rape and Sexual Assault

The study demonstrated the need for more nuanced and empathetic societal recognition of the psychological impact of rape on male survivors, particularly the challenges posed by traditional masculine ideals. This recognition encompasses micro-level

perspectives, informed by GSTP (Pleck, 1995), and macro-level influences from the Theory of Hegemonic Masculinity (Connell & Messerschmidt, 2005). Additionally, it would be advantageous if there was additional guidance on navigating the legal system, especially given the difficult nature of the CJS, as revealed by the professional's narratives in discourse one of Study One in Chapter Four of this thesis. This would help address the disciplinary power of CJS and its impact on survivors. In addition, the survivors' discourses highlighted the influential role of TV media in shaping societal perceptions and attitudes towards male rape and sexual assault. Thus, more accurate portrayals of male rape and sexual assault from the indent to negativing the aftermath and long-term considerations might offer resistance to the mythic public discourse. The importance of supportive networks, informal (friends and family) and formal (professional therapy), is underscored. These networks provide critical spaces for survivors to disclose their experiences without fear of judgment or stigma. The effectiveness of tailored therapy, especially for those in the LGBTQIA+ community, demonstrates the value of personalised support systems in aiding the healing and recovery process, underlining the need for diverse and inclusive therapeutic options.

5.4.4.2 Policy Implications

The study revealed some policy recommendations. Firstly, mental health support services should be tailored specifically for male survivors, recognising their unique challenges which are related to masculinities. This includes training mental health professionals in gender-sensitive approaches and increasing funding for male-focused support that respects men's personal views on their masculinity, as suggested by Silver and colleagues (2018). Secondly, policies need to bridge gaps in legal definitions of rape and assault, ensuring inclusivity and justice for all survivors. Thirdly, supporting media projects that provide authentic portrayals of male rape is critical, as these could raise public awareness and education on the subject. Fourthly, developing and funding accessible support structures for male survivors, including creative therapy (e.g. art, music) options (Demir, 2022) such as art or music therapy, could be helpful for male survivors, and there is a need to promote specialised therapeutic services catering to diverse survivor groups. In conjunction with comprehensive education and training programs for professionals across legal, medical, and mental health sectors are recommended to assist with an understanding of the multifarious nature of male rape myths and how they impact male rape and sexual assault—lastly, campaigning for legislative changes to broaden the legal definitions of rape and sexual assault and be inclusive of all gender expressions and rape scenarios. This would help validate the experiences of male survivors of female-perpetrated sexual assault who identify as rape survivors.

5.4.4.3 Recommendations for Future Research

Based on the implications identified, future research should consider a quantitative study exploring the general public's perceptions of different rape scenarios, beliefs in male rape myths, and levels of ambivalent sexism towards men similar to Chapleau and Colleagues (2007) and Davies and Colleagues (2012). This study would quantify the extent to which societal perceptions, as highlighted in the discourses, influence victim and perpetrator blame attribution in cases of male rape and sexual assault. Hence the focus should be on acquaintance rape as it is argued to elicit more mythic beliefs compared to stranger rape. The research would be advantageous to understand the broader societal attitudes towards male rape and how these attitudes may impact survivors' willingness to seek help and receive fair treatment in legal proceedings. The findings could provide empirical evidence to support policy changes and the development of targeted interventions to address the misconceptions and biases surrounding male rape (Smith & Skinner, 2017). The research could significantly contribute to forensic psychology by offering data-driven insights into societal attitudes (Towl, 2021). It could aid in developing more effective public awareness campaigns, educational programs, and policy reforms that are grounded in a material, realistic understanding of societal perceptions regarding male rape and sexual assault (Willig, 1999).

5.4.5 Strengths and limitations

5.4.5.1 Strengths of the Study

The study's sample was diverse across race, sexual orientation, and perpetrator gender, which enhanced the validity and depth of the findings. This diversity enabled a thorough exploration of a broad spectrum of experiences and perceptions, contributing to a comprehensive understanding of the varied impacts of male rape and sexual assault across different demographics. This is particularly significant, as most research on male rape myths often includes predominantly white participants (Kambashi et al., 2023). Additionally, employing both questionnaires and interviews in data collection facilitated triangulation of the findings, bolstering the reliability and depth of the data (Lauri, 2011). This mixed-methods approach was crucial in capturing qualitative interviews and questionnaires required to understand the experiences of a hard-to-reach population of adult male survivors of rape and sexual violence. Finally, the study's focus on various forms of support—medical, informal, and psychological—provided valuable insights into the complex nature of help-seeking and support for male survivors in England, revealing how different support types are accessed and perceived by survivors.

5.4.5.2 Limitations of the Study

While the study explored factors influencing the decision to seek or find support helpful, further investigation is necessary to understand the specific barriers or facilitators within each support category, particularly regarding support from the police. Although survivors demonstrated awareness of legal processes and laws, only two out of the nine participants had reported their incidents to the police. Consequently, it was not possible to identify dominant patterns of discourse related to male survivors' engagement with the police. While the diversity of the study's sample is a strength, it also poses a limitation regarding in-depth exploration into each specific experience category. For example, there is a need for a more focused exploration of the experiences of male survivors from ethnic minorities in England and Wales and comparative studies between the experiences of male survivors of FPSA and male-on-male rape. Ensuring a comprehensive exploration of each group's experiences is critical for a balanced understanding.

Another limitation, rooted in Foucault's principle that discourses are bound by time and context, relates to the potential geographic limitation of the study. Similar to Chapter Four, this study was contextualised within the COVID-19 pandemic and the early 2020s landscape of England and Wales. This context limits the transferability of the study's findings to other regions with different discursive formations. According to Foucault (1980), power relations and institutional structures that shape discourses on rape, sexual assault, masculinity, and survivorship are specific to each locale. Therefore, the insights obtained may not fully resonate with or capture the nuances of male rape and sexual assault survivors' experiences in other contexts where different discourses and power dynamics prevail. In line with Foucauldian thought, the study's findings are time-bound; therefore, social attitudes, legal frameworks, and support systems are dynamic and can evolve. Thus, the conclusions and implications drawn from this study will require re-evaluation in the future to ensure they remain relevant to the prevailing societal discourses and structures. This future re-evaluation would also facilitate a genealogical exploration of the discourse surrounding male rape myths over time, as per Foucault (1987).

5.5 Conclusion

Exploring how male survivors of rape and sexual assault understand male rape myths has uncovered varying discursive practices and power relations concerning these forms of sexual violence in England. At the centre of these discourses lay the influence of Masculine identity and the Legal definition of rape/sexual assault. The masculine ideals act as power relations that shape the experiences of male survivors as they make sense of their psychological and emotional vulnerabilities post-assault, traverse medical and legal institutions that hold power over the survivors, and challenge the rigidness of masculine ideals as they seek psychological formal and informal support. The implication is that

masculinities still take centre stage in the discourse of male rape from the perspective of men. Thus, micro-level masculinities theories might be more helpful in the study of male rape. Additionally, the legal definitions function as disciplinary powers that serve to restrict male survivors of female-perpetrated assault as rape. This demonstrated the heterogenicity of male survivors' experiences, which need to be reflected in the legal discourse. In addition, TV media can be an oppressive force that informs and shapes male rape myths and a productive force of power to dispel male rape myths. Thus, its influence warrants further examination. It is hoped that understanding male rape will centre the needs of the male survivors across the institutions they engage in, leading to a validating and collaborative passage towards recovery and replating from the presence of the male rape myths.

5.6 Reflexivity

5.6.1 Navigating the Labyrinth of Survivor Recruitment

I was somewhat aware of the difficulty of recruiting survivors of crimes. This awareness was informed by existing research. Survivors often take extended periods – sometimes up to 20 years – to disclose their experiences. I knew the potential reluctance and sensitivities surrounding participation in such a study. I employed various strategies during recruitment and data collection to mitigate these challenges and ensure a respectful and accommodating approach. Firstly, I utilised social media platforms extensively to disseminate study information. This approach was chosen for its broad reach and ability to connect with potential participants non-intrusively. Recognising the diversity of preferences among survivors, I adapted the study design to include a questionnaire option. This decision was aligned with the study's pragmatic worldview, offering participants a flexible and less demanding mode of engagement compared to traditional interviews. I also sought guidance from academics experienced in working with hard-to-reach populations. Their insights were invaluable in refining my recruitment approach, ultimately contributing to the successful participation of nine respondents. Notably, those who opted for the questionnaire cited the convenience of completing it at their own pace as a critical factor in their decision. They expressed that an interview format would have been overly demanding for them. However, one participant suggested that an audio recording option for responding to questions could have been a viable alternative. This feedback was insightful, revealing a preference for methods that offer greater control and comfort to the participants. Reflecting on this experience, I recognise that future research in this area might benefit from considering such flexible and participant-friendly data collection methods. Including options like audio

recordings could further lower barriers to participation, catering to this sensitive group's unique needs and preferences.

5.6.2 My Researcher Journey Amidst Emotional Tides

Reflecting on my journey throughout this research, my prior experience as an emotional support worker for male survivors of rape and sexual assault, combined with my training and adherence to the British Association for Counselling and Psychotherapy (2018) ethical framework and the BPS's (2022) conduct and ethics, provided me with a foundational understanding that I believed would equip me for this study. This background, along with my ongoing counselling as part of my job requirement and personal growth during my PhD years, seemed to have prepared me to engage with this sensitive subject matter. My focus was primarily on disclosure, help-seeking, gender, and sexuality, rather than the specifics of the assaults, aligning with the study's goal to explore male rape myths and their relation to these themes. Despite these preparations, transcribing and analysing the interviews and questionnaire responses were more challenging than anticipated.

The harrowing nature of some accounts deeply impacted me, heightening my sense of responsibility to represent the survivors' narratives faithfully. I felt a profound duty to do justice to their experiences and ensure their voices were accurately and sensitively conveyed in my research. This emotional toll led me to take frequent breaks during the analysis phase to maintain my well-being. I found solace in self-care practices and even rekindled my old hobby of crocheting, which became a therapeutic activity during post-analysis sessions. These coping mechanisms were crucial in helping me navigate the emotional landscape of this research. Reflecting on this experience, I contemplate what I might do differently in future research of a similar nature. One consideration is the potential benefit of having a support system in place, specifically for researchers dealing with emotionally taxing content. This could include more frequent counselling sessions or peer support groups for researchers in similar fields, such as Forensic Psychology, Well-being Psychology and Criminology. Additionally, building in scheduled breaks and self-care activities as an integral part of the research process rather than as an afterthought could be another approach to mitigate the psychological toll. Notably, a PhD is time-constrained, so this needs to be considered in the proposal phase.

5.7 Mixed Methods Integration

The integration process of this mixed methods study, encompassing Study One (Chapter Four) and Study Two (Chapter Five), laid the groundwork for a focused exploration in Study Three. Insights gleaned from these studies illuminated that male rape myths often

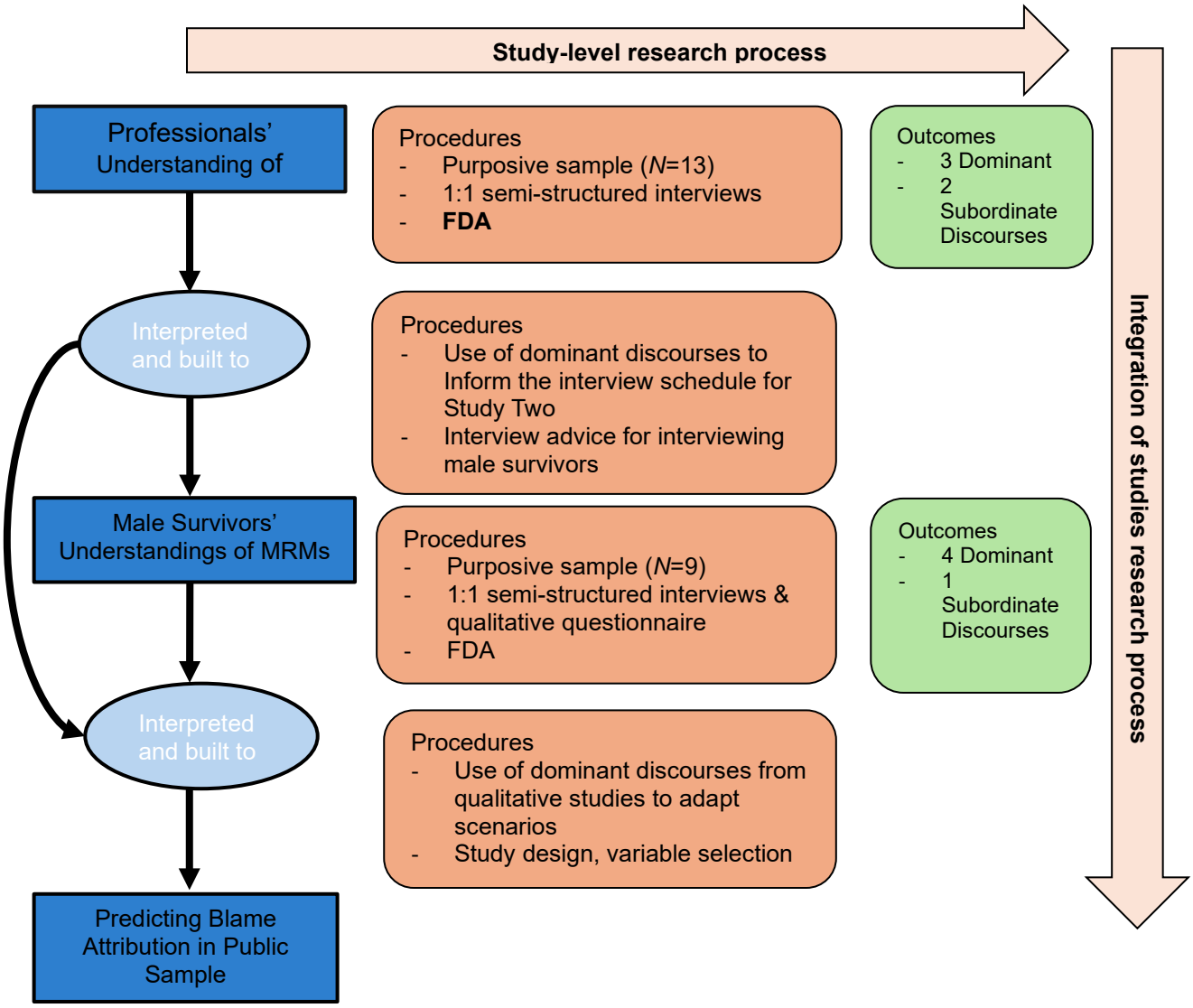
surface when incidents defy traditional narratives, particularly in acquaintance contexts. This revelation, coupled with some of the survivors equating their experiences of sexual assault to rape, emphasised the necessity of examining acquaintance rape and sexual assault scenarios within this research framework. The narratives highlighted acquaintance scenarios—encompassing interactions with friends, family, and intimate partners—as pivotal settings for these incidents, prompting a dual focus on male and female perpetrators to encapsulate the breadth of survivors' experiences. Moreover, discussions around dating apps like Tinder and Grindr, along with the role of alcohol in the survivor's build and the media, highlighted potential factors that might compound societal scepticism towards survivors' accounts. A recurring theme from both professionals and survivors was the perception that the questioning and myth-perpetuating phrases used in the discourse around male rape are fundamentally rooted in victim-blaming. Such interactions challenge the survivor's account and attribute blame, partially or wholly, onto the victim (Burt, 1980). This critical understanding led to the decision to examine blame attribution within acquaintance rape and sexual assault scenarios in Study Three, aiming to dissect the interplay of male rape myths and their role in fostering victim-blaming attitudes. Consequently, this study sought to investigate how belief in rape myths could influence the attribution of blame, thereby providing a nuanced understanding of the mechanisms underpinning societal responses to male rape and sexual assault within acquaintance settings (See Figure 5.1 for a diagram of the process).

Summary of chapter

This chapter delves into the perspectives of male survivors of rape and sexual assault regarding their understanding of male rape. The analysis identifies four dominant discourses, and the chapter discusses the significant implications these findings have on the field. Additionally, it details how the insights from Study One and Study Two inform the design and focus of Study Three, which will be explored in the subsequent chapter. The upcoming chapter is dedicated to Study Three, examining the community's perceptions of male rape. As the final study in this thesis, it presents a quantitative analysis, rounding out the mixed methods approach taken in this research to provide a comprehensive understanding of male rape myths and their societal impact.

Figure 5.1.

Diagram of Sequential Exploratory Mixed-Methods Process



6 CHAPTER SIX: PREDICTING VICTIM AND PERPETRATOR BLAME IN A MALE ACQUAINTANCE RAPE SCENARIO

The previous chapter, Chapter Five, focuses on the perspectives of male survivors of rape and sexual assault. It unveils four dominant discourses concerning male rape myths and their experiences of support-seeking post-assault. The current chapter, dedicated to Study Three, examines the community's perceptions of male rape. As the final study in this thesis, it presents a quantitative experimental study. This chapter is structured similarly to the previous two chapters; it introduces the focus of this study, methods used to conduct the study, data analysis, and discussion of the results.

6.1 Introduction

6.1.1 Male Rape Myths and Societal Perceptions

The systematic review by Kambashi et al. (2023) in Chapter Two revealed insights into male rape myths (MRMs) identified in England. It demonstrated that these myths often emerge when rape incidents diverge from the conventional narrative. Traditionally, this script involves stranger rape of a woman by a man, typically in an outdoor setting (Anderson, 2007). The traditional narrative, underpinned by the Gender Schema Theory, suggests an apparent dichotomy in gender roles, with women seen as submissive victims and men as dominant aggressors (Krahé, 2011). However, the review by Kambashi et al. (2023) counters this binary understanding by highlighting the evolution of the stereotypical rape script to now encompass male victims. This development introduces erroneous mythic beliefs concerning the victim's sexual orientation and the severity of the rape, often leading to societal doubts about the male survivor's masculinity and the legitimacy of their rape claim. These emerging trends, observed in American (Schneider et al., 1994; Struckman-Johnson, 1988; Weiss, 2010), Mongolian (Peitzmeier et al., 2015), and English (Davies et al., 2013) research contexts, indicate that the rigid gender roles dictated by traditional gender schemas are insufficient to explain the nuances of rape perception fully. This shift suggests that while Gender Schema Theory (Bem, 1981) provides a foundational understanding of societal expectations around gender, it needs to be expanded or reinterpreted to account for the evolving understanding of MRMs. These changing narratives are mirrored in the discourses from Studies One (Chapter Four) and Two (Chapter Five), which resonate with these temporal changes to the understanding of male rape.

In Study One, 'Discourse One: Professionals' Insights: Societal Myths, Acquaintance Rape Realities, and Legal Obstacles,' the professionals detailed their real-world experiences

working with male survivors versus societal perceptions of male rape, which informed the understanding of male rape myths. They revealed that male rape often occurs within the context of acquaintance and intimate partner relationships, similar to female rape, challenging the prevalent myth of stranger rape. Specifically, professionals highlighted cases where women were the perpetrators, noting that the legal framework in England and Wales does not recognise women as perpetrators in the definition of rape. This categorisation complicates the situation for male survivors who view their experiences as rape. However, these incidents are often legally classified as sexual assault and frequently go unreported due to the pervasive myth that women cannot rape men (McKeever, 2019; Section 1, Sexual Offences Act 2003). Study Two, specifically in ‘Discourse One: Bearing the Unseen Weight,' corroborates this by documenting male survivors' accounts of sexual assault by women, which they identified as rape. This legal and societal framing leads to skewed perceptions and responses to such incidents, often resulting in increased blame for male survivors and less scrutiny for female perpetrators, as observed in prior research on stranger rape (Struckman-Johnson & Struckman-Johnson, 1992). Recognising this disconnect between male survivors' experiences and the legal definitions, this current study delves deeper into female-perpetrated sexual assault (termed as such due to the confines of the Sexual Offences Act 2003) alongside traditional male-on-male rape scenarios. By exploring how perpetrator gender and male rape myths influence the perceived legitimacy of rape and assault claims, this research aimed to deepen the understanding of victim and perpetrator blame from a gendered perspective. This approach aligns with the mixed methods integration of the thesis, where findings from the first two studies informed the inclusion of female-perpetrated sexual assault as a variable in the current third study (Creswell & Plano Clark, 2018).

6.1.2 Media Influence and Personal Experience in Shaping Perceptions

Study Two’s Discourse Three, titled ‘A Media Discourse: (In) Authentic Portrayal of Male Rape revealed how media representations often contribute to the perpetuation of male rape myths by inaccurately portraying male rape and sexual assault. Conversely, it also suggests that the media has the potential to challenge and reduce these myths through more accurate and sensitive depictions. This influence is outlined by the Cultivation Theory (Gerbner et al., 1980), which suggests that prolonged exposure to media content shapes individuals’ perceptions of social reality. When media portrayals fail to reflect real-life instances of male rape and sexual assault accurately and sensitively, they can contribute to a skewed public understanding, reinforcing harmful stereotypes and misconceptions (Hedrick, 2021). However, in critiquing Cultivation Theory, it is essential to consider the contemporary media environment. Loos and Ivan (2024) argue that the theory may

overemphasise the power of traditional TV media while underestimating the audience's ability to engage with media content critically. One might question how this theory holds up in an era dominated by streaming services and social media, which offer more personalised media experiences (Armstrong & Mahone, 2017). Does the fragmented, user-controlled nature of modern media consumption diminish the uniform impact that traditional TV media once had? Interestingly, this critique of modern media resonates with findings from Study Two and Study One. Discourse Three of Study Two, which critiques the '(In)Authentic Portrayal of Male Rape in Media,' shares common ground with Cultivation Theory's assumptions about media influence. Moreover, the first discourse of Study One revealed a general lack of public awareness about male rape. This observation is particularly notable given the significant influence media is presumed to have. Together, these discussions suggest a complex relationship between media portrayals and public understanding of male rape, highlighting the challenge of translating media influence into informed public awareness.

In response to these findings and the changing landscape of media influence, the current study incorporated scenarios that manipulated mythic information commonly found in media portrayals of rape (Hedrick, 2021). For instance, these scenarios often depicted factors such as alcohol use (Nagy, 2023), the physical build of the male victim (Hine et al., 2021), the time and location of the assault (Davies et al., 2013), the use of dating apps (Dietzel, 2021; Jefferson, 2021), and the resistance used by the victim (Walfield, 2018). While many of these depictions traditionally centre on female victims in media, the current study aimed to examine their impact when applied to male rape cases. This exploration aimed to understand how such mythic information could predict victim and perpetrator blame attribution in acquaintance rape scenarios. Building on this, the study also delved into the potential influence of personal experience with assault on these perceptions. This exploration was grounded in existing literature that highlighted the impact of personal experiences on belief systems and attitudes towards rape (Davies et al., 2008). The study sought to discern whether first-hand or vicarious experiences with assault might influence the attribution of blame to the victim or perpetrator in these scenarios.

Furthermore, the study utilised Glick and Fiske's (1999) Ambivalent Sexism Theory to predict blame attribution. This theory, which identifies both hostile and benevolent forms of sexism towards men, posits that attitudes of resentment (due to men's social power) coexist with admiration (for the same qualities). Glick and Fiske argue that men and women can harbour these ambivalent sexist attitudes. This theoretical framework was instrumental in measuring sexism levels among participants' genders, providing insights into how these beliefs might affect blame attribution in male rape and sexual assault cases. The presence of

highly ambivalent sexism could predict a propensity to blame victims or perpetrators influenced by these complex gender attitudes. By investigating both media-influenced myths, personal experiences, participant gender and Ambivalent sexism, the study aimed to provide a holistic understanding of the factors that shape public perceptions and blame attribution in cases of male rape and sexual assault.

6.1.3 Rationale: Qualitative Integration, Gaps in the Literature, and the Present Study

6.1.3.1 Study One and Two Integration into Study Three

The insights from Studies One and Two critically informed the methodology and focus of Study Three, significantly enhancing our comprehension of male rape myths in England and Wales. In Study One, professionals highlighted that societal perceptions of male rape often originate from media portrayals, which depict female rape scenarios that contribute to the perpetuation of widespread rape myths. This crucial understanding influenced the development of targeted scenarios in Study Three, designed to examine how specific myths affect the attribution of blame to victims or perpetrators based on the myth's content and the involved parties' gender dynamics. For example, in a low rape myth condition, the male survivor (named Michael) is described as having a slight build and being physically overpowered by the female aggressor (See Table 6.2 for details of each scenario). This approach ensured that the scenarios used in Study Three were directly informed by real-world observations from Study One, highlighting how rape myths are constructed and sustained. Furthermore, 'Discourse Two: Navigating Re-Traumatisation: Unequal Power and Support Challenges' highlighted the issues of credibility and believability of male rape within the context of re-traumatisation and power imbalances. These insights directly informed the assessment mechanisms of blame in Study Three, providing a structured approach to analyse how societal biases impact victim perception. For instance, an item in the blame scale (Sleath & Bull, 2010) asked, 'To what extent do you consider Michael’s claim of rape to be credible?' By selecting a scale with such specific questions, Study Three could quantitatively assess the nuances of blame attribution that were qualitatively observed in the earlier studies.

Study Two, which focused on survivor experiences, revealed that male survivors frequently cope with rape by adhering to traditional masculine ideals, such as emotional suppression and self-reliance. This response often exacerbates their mental health struggles. It highlights the detrimental effects of entrenched masculine norms and rape myths, such as the erroneous beliefs that men cannot be raped or are unaffected by rape. These insights were pivotal in shaping Study Three’s exploration of how such myths influence blame attribution, particularly through the creation of varied myth-level scenarios to

assess their impact on public perceptions of rape cases. For example, in the high rape myth scenario, the male survivor was described as having an athletic build and only verbally protested, not physically. This design choice was intended to probe whether societal adherence to traditional masculinity would relate to higher levels of blame. Additionally, 'Discourse Three: A Media Discourse' illustrated how media can both reinforce and potentially dismantle male rape myths through their portrayals of rape. This discourse informed the development of scenarios in Study Three that varied in myth intensity to investigate their influence on the perception of rape cases. For instance, in the high rape myth scenarios, it was mentioned that alcohol had been consumed, whereas in the low myth scenarios, there was no mention of alcohol. By varying the intensity of the myths presented, Study Three was able to assess how deeply ingrained media portrayals affect public perceptions and blame attribution in male rape cases, providing a nuanced understanding of the media's role in shaping societal attitudes.

Both qualitative studies emphasised the importance of focusing on male acquaintance rape and sexual assault, revealing it as a critical area for understanding and addressing prevalent misconceptions about male rape and sexual assault. This pivotal finding steered Study Three towards specifically investigating acquaintance rape scenarios, aiming to uncover how societal misconceptions shape and influence blame attribution in these often-misunderstood contexts.

6.1.3.2 Gaps in the Literature

The literature review identified significant gaps within studies conducted in England, particularly the reliance on narrow demographic samples—primarily students from social science backgrounds in their early twenties (Kambashi et al., 2023). Acknowledging this limitation, the current study aimed to engage a more diverse public sample, encompassing a broader age range and a more comprehensive array of backgrounds. This approach was chosen to gain a more comprehensive understanding of public perceptions of MRMs, moving beyond the homogeneous demographic of earlier studies. Another critical gap in existing research on MRMs is the underrepresentation of diverse sexual orientations and ethnic backgrounds. Literature indicates that individuals from the LGBTQIA+ community are less likely to attribute blame to victims of assault; however, this aspect has been underexplored in the context of MRMs. Moreover, most of the existing research has not adequately captured or reported the ethnicity of participants, potentially overlooking significant cultural and racial dynamics that influence the perception of male rape.

The predictive analysis used in this study aligns with its exploratory nature, as Cohen (1968) outlined. This approach is particularly beneficial in exploratory research, where the

interplay between factors such as rape myth-consistent information, personal experiences, sexual orientation, and ethnicity in the context of MRMs is not yet fully understood. By identifying which factors are significant predictors of public perceptions and blame attribution, this study aims to guide future research toward these key areas, enhancing our understanding of the subject and potentially leading to the development of more targeted and effective interventions to challenge male rape myths and transform societal attitudes (Towl, 2021). The current study addressed these gaps by including measures of both sexual orientation and ethnicity of participants, aiming to provide a more nuanced understanding of how these factors may influence the attribution of blame in rape scenarios. For a detailed critique of the previous research's sampling limitations, please refer to Chapter Two.

6.1.4 Research Aims, Objectives, Questions and Hypothesises

The study aimed to explore the extent to which male rape myth acceptance, ambivalent sexism towards men, gender, personal experience and personal characteristics predict victim and perpetrator blame attribution in male acquaintance rape and sexual assault scenarios. The study aimed to test an acquaintance rape scenario, addressing a gap in traditional research, which has predominantly focused on stranger rape in the context of male survivors (Kambashi et al., 2023). Consequently, the research question was to what extent do MRMA, ambivalent sexism, perpetrator gender, rape myth consistent information, participant gender, participant sexuality, participant ethnicity, the participant being a survivor, and the participant knowing a survivor predict victim and perpetrator blame in acquaintance rape scenarios? Additionally, as this was an exploratory study, no hypotheses were made to delve into the less understood dynamics of acquaintance male rape and female-perpetrated sexual assault. Given these topics' complexity and emergent nature, such an exploratory method was pivotal for uncovering new insights and relationships among variables that have yet to be fully delineated in existing research (Hoaglin, 2003; Keith, 2019).

6.2 Method

6.2.1 Design

This study employed an experimental survey approach design. The predictor variables were levels of male rape myth (control, low, or high rape myth level), perpetrator gender (male, female), male rape myth acceptance, ambivalent sexism, social desirability bias, participant gender, sexuality, ethnicity, and whether the participant knew a survivor or was a survivor of sexual violence. Participants were presented with scenarios involving male survivors with both male and female perpetrators in either the control, low, or high rape myth level scenarios.

6.2.2 Participants

This online study involved 196 participants from the public. The inclusion criteria for the study were that participants needed to be 18 years of age and over and live in the UK. The average age of participants was 38.06 years (*SD* = 13.18). Regarding gender, 50.51% were women, and a majority of 96.94% identified as cisgender. Concerning ethnicity, the sample predominantly comprised White individuals (84.18%), and the majority identified as straight (77.55%). In terms of personal experiences, 64.80% of the participants reported not having experienced sexual violence, while a slight majority (51.02%) knew someone who had. Notably, 92.35% of the participants were non-students. See Table 6.1 for a detailed breakdown of demographic characteristics.

Table 6.1.

Demographic Characteristics of General Public Participants

Characteristics	Full sample	
	n	%
Gender		
Women	99	50.51
Men	91	46.3
Non-binary	4	2.04
Prefer not to say	2	1.02
Assigned at birth		
Yes	190	96.94
No	4	2.04
Prefer not to say	2	1.02
Ethnicity		
White	165	84.18
Asian	11	5.61
Mixed Race	9	4.59
Black	8	4.08
Other	2	1.02
Prefer not to say	1	0.51
Sexual orientation		
Straight	152	77.55
Bisexual	17	8.67
Gay	8	4.08
Lesbian	9	4.59
Pansexual	5	2.55
Self-describe	2	1.02
Prefer not to say	2	1.02
Asexual	1	0.51
Experienced sexual violence		
No	127	64.80
Yes	63	32.14
Prefer not to say	6	3.02
Knows someone who has experienced sexual violence		
Yes	100	51.02
No	92	46.94
Prefer not to say	4	2.04
Occupation		
Non-students (various occupations)	181	92.35

Students	15	7.65

6.2.3 Sampling size and procedure

Two power analyses for multiple regression were performed retrospectively. Initially, based on an expected medium effect size of f^2: .15, an ideal statistical power level of .8, 10 predictors, and a probability level of 0.5, it was determined that a minimum of 118 participants would be necessary to detect a medium effect, as per Cohen's guidelines (1992). Subsequently, for a projected small effect size of f^2: .02, with the same ideal power level, number of predictors, and probability level, the required maximum sample size was calculated to be 818 participants to detect a small effect. Given the time limitations inherent in a PhD project, the upper limit of 818 participants was set as the maximum sample size for the study. Thus, the study sought to recruit between 118 to 818 participants. The participant recruitment window occurred from June 2022 to May 2023. Initially, 82 participants were recruited using social media posts. Following funding from the IPS at DMU, an additional 154 participants were recruited from Prolific, totalling 236. The data, exported from Qualtrics as an SPSS file, was first checked in SPSS for label accuracy and then imported into R for cleaning. Forty incomplete responses were identified and removed through listwise deletion (Little, 1992). The attrition rate for Prolific participants was 6.49%, indicating those who engaged but did not complete the survey, resulting in a final count of n =145. In contrast, the attrition rate from social media recruitment was 37.80%, leaving n =51 participants. The implications of these attrition rates are discussed further in the discussion section. The study received ethical approval from the Faulty Research Ethics Committee Health and Life Sciences at De Montfort University (Appendix AF).

6.2.4 Materials

The questionnaire was hosted on Qualtrics and included the participant information sheet (see Appendix Y). It began with a preliminary questionnaire to assess the inclusion criteria (refer to Appendix Z), followed by the collection of informed consent (Appendix AA). The participants were then asked to provide their demographic characteristics (Appendix AB). After this, they were presented with two out of six possible scenarios on the same rape myth level: scenario 1 (male perpetrator, no myth), scenario 2 (female perpetrator, no myth), scenario 3 (male perpetrator, low myth), scenario 4 (female perpetrator, low myth), scenario 5 (male perpetrator, high myth), and scenario 6 (female perpetrator, high myth). Additionally, their responses to The Victim Blame and Perpetrator Blame Scale (Sleath & Bull, 2010), Male Rape Myth Acceptance Scale (Hines et al., 2021), The Ambivalence Toward Men Inventory– Short Form (Glick & Fiske, 1999; Rollero et al., 2014), and The Marlowe-Crowne Social Desirability– Short Form (M-C 1 (10)) by Strahan & Gerbasi (1972) were collected

(Appendix AD). The session concluded with a debrief page (detailed Appendix AE). Permission to utilise the scales can be found in Appendix AD.1.

6.2.4.1 Scenarios

The research adapted a rape scenario by Sleath and Bull (2010) into six versions, each depicting a non-graphic acquaintance rape/sexual assault involving a male victim. This scenario was selected for its previous application in an English sample and the availability of a corresponding blame attribution scale. In the study, participants were shown scenarios featuring either a male or a female perpetrator, set within the context of a control, low rape myth, or high rape myth condition. The participants' assignment to these conditions was randomised on Qualtrics. Accompanying each scenario was the blame attribution scale. Permission to adapt and utilise both the scenario and its scale was obtained. An illustrative example of the scenario is as follows:

> *"Michael, of slight build, had been chatting with Dennis for several weeks through Grindr. They went on a late-night date and walked back to Michael's home, passing through a small park. In the park, Dennis asked for a kiss, which Michael refused. Dennis then grabbed Michael, began undressing him, and, despite Michael's objections, physically forced him into sexual intercourse."*

The manipulated factors in these scenarios included the individual's body type, the time of the event, location, whether alcohol was consumed, the gender and name of the perpetrator, the dating application used for the meeting, and the type of resistance employed. To see how the factors were operationalised in the control, low and high rape myth levels, see Table 6.2. These factors were selected based on the construction and mention of myths observed in studies' one and two discourses.

Table 6.2

Scenario Factors Manipulated on Rape Myth Levels and Perpetrator Gender

Factors	No Rape Myth (*n* = 64)		Low Rape Myth (*n* =68)		High Rape Myth (*n* = 64)	
Perpetrator	Dennis	Emma	Dennis	Emma	Dennis	Emma
Dating Application	Grindr	Tinder	Grindr	Tinder	Grindr	Tinder
Micheal's physical type	Average build		Slight build		Athletic build	
Time of event	Date at night		Date late at night		Date during the day	
Location	Michael's home		The path to Michael's home went through a small park		Michael's home	
Alcohol consumption	Not mentioned		Not mentioned		They had been drinking alcohol	

Type of Resistance	Verbal consent	No to the kiss, verbal and physical resistance to further advances	No to the kiss, verbal protest, physical force used by perpetrator

Note. Dennis = Male, Emma = Female, Micheal = Male victim. n = participants per condition

6.2.4.2 Measures

The Male Rape Myth Acceptance Scale (MRMAS; Hine et al., 2021) is a 37-item 7-point Likert scale with 1 = “strongly disagree” to 7 = “strongly agree”. The MRMAS has two sub-scales: Blame and Minimisation/Exoneration. This scale was used to measure male rape myth acceptance because it has demonstrated good reliability (α = .91 - .96) in a UK context, with higher scores indicating male rape myth acceptance. In this study, the scores on MRMAS ranged from 54 to 217 (M = 94.33, SD = 38), and the scale demonstrated an excellent internal consistency reliability of α = .98. An example item is “Heterosexual men are more traumatised by their experience of being raped than women”.

The Ambivalence Toward Men Inventory– Short Form (AMI, Glick & Fiske, 1999; Rollero et al., 2014) is a 12-item 5-point Likert scale with 0 = “disagree strongly” to 5 = “agree strongly”. This measured ambivalence toward men, showing good reliability for two factors: benevolent sexism (α = .81) and hostile sexism (α = .79). Higher scores on the scale indicate greater ambivalent sexism towards men. In the current study, the total scores ranged from 12 to 67 (M = 32.77, SD = 12.74), and the whole scale showed high reliability (α = .88). An example item is “Every man ought to have a woman whom he adores”.

The Marlowe-Crowne Social desirability– Short Form (M-C 1 (10)) by Strahan & Gerbasi (1972) is a 10 true/false item scale. This scale was utilised to measure the extraneous variable of social desirability bias, which may occur in studies measuring sensitive topics (Fisher & Katz, 2000). Higher scores indicate more socially desirable responses. The current study's total scores ranged from 3 to 10 (M = 6.45, SD = 1.40).

The Victim Blame and Perpetrator Blame Scale (Sleath & Bull, 2010) is a 13-item 7-point Likert scale with 1 = “not at all” to 7= “completely”. The scale captured participants’ blame attribution toward the victim and perpetrators in the scenarios. In the scale’s original study, the two factors, victim blame (α = .87) and perpetrator blame (α = .88), demonstrated good internal consistency. In the current study, for example, in the low rape myth condition, victim blame (α = .85) and perpetrator blame (α = .94) showed good to excellent internal consistency. Greater scores indicated higher blame attribution. In this study, within the male perpetrator scenarios, the scores for perpetrator blame ranged from 4 to 28 (M = 21.65, SD = 7.94), and victim blame varied from 5 to 25 (M = 15.50, SD = 4). In the female perpetrator scenarios, the victim blame scores ranged from 5 to 25 (M = 15.45, SD = 4.03), and

perpetrator blame scores from 4 to 35 (*M* = 21.70, *SD* = 8.58). An example item is “How much do you consider the incident to be Michael’s fault?”.

Refer to Tables 6.3 and 6.4, respectively, for a comprehensive breakdown of the descriptive statistics for all predictor and criterion variables, including detailed demographic characteristics and scale total scores.

Table 6.3

Descriptive Statistics of Predictor Variables: Demographic Characteristics and the Scale Total Scores

Categorical Variable Predictors		Scales Variable Predictors					
		MRMAS		AMI		SDS	
	n	*M*	*SD*	*M*	*SD*	*M*	*SD*
Gender							
Women	99	89.6	38.61	33.6	13.25	6.63	1.37
Men	91	101.72	36.67	32.95	11.93	6.31	1.44
Non-binary	4	61	40.8	17.55	2.87	25	1.41
Prefer not to say	2	57.5	4.94	15.5	4.94	5	
Ethnicity							
White	165	90.9	35.4	31.2	11.8	6.46	6.46
Asian	11	122	50.1	43.3	11.8	6.45	1.75
Mixed Race	29	107	52.2	37.9	17.3	6.33	1.32
Black	8	96.2	29.4	37.9	16	6.38	1.41
Other	2	108	38.2	44.5	20.5	5.5	0.70
Prefer not to say	1	191		58		8	
Sexual orientation							
Straight	152	94.9	37.1	33.4	13	6.51	1.38
Bisexual	17	81.1	32.7	28.4	10.4	5.94	1.56
Gay	8	96.6	28.1	34.3	9.21	5.89	1.36
Lesbian	9	116	59.6	37.5	14.2	6	1.41
Pansexual	5	104	55.4	28	11.3	7.6	.89
Self-describe	2	58.5	2.12	17.5	4.95	6	
Prefer not to say	2	88	48.1	24.5	17.7	7	2.83
Asexual	1	67		26		8	
Experienced sexual violence							
No	127	96.2	37.4	23.2	11.8	6.46	1.45
Yes	63	92.8	40.2	35	14.3	6.49	1.33
Prefer not to say	6	17.7	15.2	23.2	9.81	5.83	1.17
Knows someone who has experienced sexual violence							
Yes	100	90.3	36.3	33.5	12.8	6.55	1.35
No	92	99.9	39.7	32.4	12.7	6.39	1.45
Prefer not to say	4	67	14.7	22.2	7.59	5.25	1.26

Note. FP = Female Perpetrator, MP = Male Perpetrator, n = sample

Table 6.4

Descriptive Statistics of Criterion Variables: Demographic Characteristics and the Scale Total Scores

	Scales Variable Criterion

Categorical Variable Predictors	n	FPVB (M1)		FPPB (M2)		MPVB (M3)		MPPB (M4)	
		M	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*
Gender									
Women	99	15.69	4.17	22.13	8.29	15.74	4.08	33.55	13.55
Men	91	15.31	3.75	21.42	8.77	15.34	3.85	32.95	11.93
Non- binary	4	14	6	22.25	12.17	14	6	17.75	2.87
Prefer not to say	2	12.50	6.36	12	5.65	13.5	4.94	15.5	4.94
Ethnicity									
White	165	15.4	3.98	21.9	8.64	15.5	3.82	22	7.77
Asian	11	14.4	5.73	17.2	8.16	14.2	6.48	18.2	9.64
Mixed Race	29	16.4	3.91	21.9	8.82	16	3.35	20.8	10.2
Black	8	16.4	3.20	22.6	7.69	17.5	4.54	20.6	7.48
Other	2	16.5	0.70	28	0	16	1.41	27	1.41
Prefer not to say	1	18		13		11		15	
Sexual orientation									
Straight	152	15.3	4.02	21.5	8.69	15.5	3.91	21.5	7.98
Bisexual	17	15.7	5.1	21.4	9.53	15.8	5.18	22.7	7.57
Gay	8	15	3.74	23.4	7.75	14.1	4.48	20.2	9.36
Lesbian	9	16.2	4.3	20.4	8.86	14.1	4.70	18.9	9.66
Pansexual	5	17.6	1.95	23.2	7.50	16.6	1.67	24.4	4.51
Self-describe	2	17		28	0	17		28	
Prefer not to say	2	17		22	8.49	17		22	
Asexual	1	17		28		17		17	
Experienced sexual violence									
No	127	15.4	4.15	21.9	8.44	15.2	3.98	20.5	8.55
Yes	63	15.5	3.89	20.8	8.96	15.7	4.03	22.1	7.7
Prefer not to say	6	15.5	3.33	26.3	6.35	15.8	3.92	24.8	5.15
Knows someone who has experienced sexual violence									
Yes	100	15.3	4.23	21.1	8.55	15.2	4.07	21.5	8.01
No	92	15.7	3.8	22.5	8.5	15.8	4	21.9	7.92
Prefer not to say	4	12.5	3.11	19.2	11.8	16.2	.95	20.5	9

Note. FP = female perpetrator, MP = male perpetrator, VB = victim blame PB perpetrator blame, M1 = Model 1 etc.

6.2.5 Procedure

Participants were recruited through open social media platforms and Prolific, where a poster or text (Appendix X) post containing a link or QR code directed potential participants to the Qualtrics-hosted survey. Upon entering the survey, participants first encountered the participant information sheet, which detailed the study's purpose and what their participation would entail (see Appendix Y). Following the information sheet, participants completed a preliminary questionnaire to assess their eligibility based on the inclusion criteria. Eligible

participants then proceeded to provide informed consent, acknowledging their understanding of the study and their voluntary participation (Appendix AA). After consent, participants were asked to fill in their demographic information, such as age, gender, ethnicity, sexual orientation, whether they were survivors or knew survivors and their occupation (Appendix AB). Subsequently, they were randomly presented with two out of six possible scenarios, each depicting an acquaintance rape scenario with varied levels of rape myth presence and perpetrator gender: scenarios 1 and 2 (no myth), scenarios 3 and 4 (low myth), and scenarios 5 and 6 (high myth). After reading each scenario, participants were immediately provided with responses using the VBPB scale (Sleath & Bull, 2010), which was positioned on the same page to ensure a direct and immediate assessment of their perceptions. Upon completing their responses for the first scenario and the scale, participants navigated to the next page, where they were presented with the second scenario following the same format. Then, participants completed the MRMAS (Hines et al., 2021), followed by the AMI (Glick & Fiske, 1999; Rollero et al., 2014), and the social desirability measure (Strahan & Gerbasi, 1972). The survey concluded with a debriefing page that provided participants with more information about the study's aims, the importance of their participation, and available resources for support related to sexual violence (Appendix T).

6.2.6 Analytic Strategy

This study adopted an exploratory approach, drawing insights from the findings of Study One (Chapter Four) and Study Two (Chapter Five), alongside the gaps identified in the broader literature (Chapter Two). In the absence of specific hypotheses, the primary aim was to uncover patterns, relationships, and underlying structures within the collected data on public perceptions of male rape and sexual assault, as suggested by Keith (2019). The exploratory method chosen for this study aligned with its overarching pragmatic worldview, as James (1975) described (See Chapter Three for Methodology). This approach afforded analytical flexibility and facilitated the emergence of data-driven insights, crucial for comprehensively exploring the variables of interest. A range of statistical techniques were employed to investigate the data thoroughly. Exploratory Factor Analysis (EFA) was applied to MRMAS (Hines et al., 2021) and AMI (Glick & Fiske, 1999) scales to understand their dimensions and reliability. However, the data collection method precluded EFA from the blame attribution scale. Potential predictors of blame attribution were tested using multiple regression analysis. All analyses were performed in R version 4.3.1. (The Foundation for Statistical Computing, 2023).

6.2.6.1 Operationalising of Predictor Variables

Due to the study's exploratory nature and a lack of literature justifying the precedence of certain variables, the enter method for multiple regression was employed (Lautenschlager et al., 1986). Groups not meeting the minimum threshold of 10 participants per condition were excluded to maintain model validity (Plonsky & Ghanbar, 2018). Conditions with multiple levels were consolidated into theoretically supported groups (Alkharusi, 2012). These variables were then dummy-coded in line with Field and colleagues' R studio guidelines (2012). For gender, 'is a man' was coded as 1 and used as a predictor, with women as the reference category (0). This choice was based on the predominance of female participants in the sample. For sexual identity, 'sexually diverse' (representing bisexual, gay, lesbian, pansexual, self-describe, prefer not to say, and asexual individuals; Henrickson et al., 2020) was coded as 1, with 'straight' as the reference (0). Ethnicity was operationalised by coding 'racially diverse' as 1 for all non-White participants (Wright et al., 2021), with White participants as the reference category. Survivors of sexual violence were coded as 1, and those without such experiences as 0 to examine the impact of personal experiences on myth acceptance. Similarly, acquaintance with a survivor was coded, with those unacquainted coded as 1 to capture the influence of indirect exposure to sexual violence. For the rape myth scenarios with a control condition, 'rape myth acceptance high level' and 'rape myth acceptance low level' were coded against the control, which was the reference category. For a complete breakdown of dummy variable assignments, please see the detailed R script in Appendix AI. The total scores of the MRMAS (Hines et al., 2021), AMI (Glick & Fiske, 1999; Rollero et al., 2014), and MC 1(10) (Strahan & Gerbasi, 1972) scales were included in the models as continuous variables

6.3 **Results**

6.3.1 Exploratory Factor Analysis

EFA was conducted on the scales below to explore the underlying factor structures in the context of the present study.

6.3.1.1 The Male Rape Myths Scale (Hine et al., 2021)

EFA of the MRMAS scale identified two factors, explaining a cumulative variance of 59.1%, with Factor 1 ($\alpha = .96$) accounting for 31.0% and Factor 2 ($\alpha = .86$) for 28.1% of the variance. The factor loadings, which show a mix of items from the original concepts of "Blame" and "Minimisation/Exoneration," suggest that the scale items capture broader themes across these categories, indicating a more multifaceted structure than initially conceptualised (see appendix AG for the factor loadings). The chi-square statistic for the hypothesis that two factors are sufficient was significant, χ^2 (593) = 1288.32, $p < .001$, highlighting that the two-factor model significantly fits the current data.

6.3.1.2 Ambivalence Towards Men Inventory (Glick & Fiske, 1999)

EFA of the AMI identified two factors, which explained a cumulative variance of 52.8%, with Factor 1 (α = .86) accounting for 27.3% and Factor 2 (α = .87) for 25.6% of the variance. The chi-square statistic for the hypothesis that two factors are sufficient was significant χ^2 (43) = 180.13, $p < .001$, indicating that the two-factor model is a statistically significant fit for the data. Factors 1 and 2 loaded the original Benevolent and Hostility sexism constructs, respectively, suggesting the constructs mapped on as initially intended. The factor loadings are presented in Appendix AH.

6.3.2 Interferential statistics

6.3.2.1 Influential Cases and Parametric Assumptions

All four models (presented below) were assessed for goodness of fit, as stipulated by Aguinis et al. (2013). To begin with, each model exhibited a small number of outliers (4 in Model 1, 2 in Model 2, 1 in Model 3, and 2 in Model 4) with high leverage. None of these outliers significantly influenced the models as they did not surpass Cook's Distance threshold of 1 or the leverage threshold (2-3 times the model's average). Covariance ratios also remained within acceptable limits, indicating no undue influence on the model variance. (see Append AK for goodness of fit analysis).

Additionally, all four models met the assumptions for multiple regression, including linearity, homoscedasticity, independence of errors, and no multicollinearity (Williams et al., 2013). However, the normality of residuals assumption was not met. Thus, bias-corrected bootstrapping (2000 resampling) with a CI of 95% was applied to the models, as Efron and Tibshirani (1993) recommended. This approach addressed the normality violation; the models below were based on this (see Appendix AJ for assumptions outputs). A Bonferroni correction was also applied to the models to reduce family-wise error rates (Sedgwick, 2012).

6.3.2.2 Multiple Regression Models

In model 1, which predicted victim blame with a female perpetrator, 37.75% of the variance was explained (Adjusted R^2 = .34, $F(10, 185) = 11.22$, $p < .001$, $f^2 = .60$, CI 95% [.24,.44]). High and low rape myth conditions were significant predictors (high: $\beta = 4.65$, $p < .001$; low: $\beta = 4.89$, $p < .001$). The significant positive relationship between high and low rape myth conditions and victim blame suggests that as the presence of rape myths increases, regardless of the intensity of these beliefs, there is a tendency to attribute more blame to

victims when the perpetrator is female. The other predictors were not significant, as presented in Table 6.5.

Table 6.5.

Model 1: Multiple Regression of Victim Blame in Female Perpetrator Scenario

Predictor	*b*	*b* 95% CI [LL, UL]	*beta*	*beta* 95% CI [LL, UL]	sr^2	sr^2 95% CI [LL, UL]	*r*	Fit
(Intercept)	9.45**	[6.66, 12.24]						
Is a Man	-0.46	[-1.44, 0.52]	-0.06	[-0.18, 0.06]	.00	[-.01, .01]	-.03	
Sexually Diverse	0.70	[-0.47, 1.88]	0.07	[-0.05, 0.20]	.00	[-.01, .02]	.08	
Racially Diverse	-0.75	[-2.10, 0.59]	-0.07	[-0.19, 0.05]	.00	[-.01, .02]	.02	
Survivors	0.24	[-0.90, 1.38]	0.03	[-0.10, 0.16]	.00	[-.00, .01]	.00	
Unacquainted	0.22	[-0.83, 1.27]	0.03	[-0.10, 0.16]	.00	[-.00, .01]	.07	
MRMAS Total Score	0.02*	[0.00, 0.04]	0.22	[0.03, 0.40]	.02	[-.01, .05]	.23**	
AMI Total Score	0.04	[-0.02, 0.09]	0.11	[-0.08, 0.30]	.00	[-.01, .02]	.21**	
SDS Total	-0.08	[-0.42, 0.26]	-0.03	[-0.15, 0.09]	.00	[-.01, .01]	-.04	
FP high rape myth level	4.65**	[3.51, 5.80]	0.54	[0.41, 0.68]	.22	[.12, .31]	.25**	
FP low rape myth level	4.89**	[3.74, 6.04]	0.58	[0.44, 0.72]	.24	[.14, .33]	.28**	
								R^2 = .377** 95% CI[.24,.44]

In model 2, which predicted perpetrator blame with a female perpetrator, 77.09% of the variance was explained (Adjusted R^2 = .76, $F(10, 185) = 62.26$, $p < .001$, f^2 =3.36, CI 95% [.70,.80]). Significant predictors included the Male Rape Myth Acceptance ($\beta = -0.05$, $p < .001$) and both high ($\beta = 16.37$, $p < .001$) and low rape myth conditions ($\beta = 13.67$, $p < .001$). The Male Rape Myth Acceptance negatively predicted perpetrator blame, indicating that stronger adherence to traditional masculine norms is associated with less blame attributed to female perpetrators. Conversely, high and low rape myth conditions significantly predicted increased perpetrator blame suggesting that accepting rape myths contributes to attributing more responsibility to female perpetrators. Other predictors were not significant, as detailed in Table 6.6 model breakdown.

Table 6.6

Model 2: Multiple Regression of Perpetrator Blame in Female Perpetrator Scenario

Predictor	*b*	*b* 95% CI [LL, UL]	*beta*	beta 95% CI [LL, UL]	sr^2	sr^2 95% CI [LL, UL]	r	Fit
(Intercept)	15.26**	[11.65, 18.87]						
Is a Man	0.37	[-0.90, 1.63]	0.02	[-0.05, 0.10]	.00	[-.00, .00]	-.03	
Sexually Diverse	0.73	[-0.79, 2.25]	0.04	[-0.04, 0.11]	.00	[-.00, .01]	.04	
Racially Diverse	-1.12	[-2.85, 0.62]	-0.05	[-0.12, 0.03]	.00	[-.00, .01]	-.05	
Survivors	-0.09	[-1.56, 1.38]	-0.00	[-0.09, 0.08]	.00	[-.00, .00]	-.07	
Unacquainted	0.91	[-0.45, 2.27]	0.05	[-0.03, 0.13]	.00	[-.00, .01]	.09	
MRMAS Total Score	-0.05**	[-0.08, -0.03]	-0.23	[-0.35, -0.12]	.02	[.00, .04]	-.27**	
AMI Total Score	0.02	[-0.05, 0.10]	0.04	[-0.08, 0.15]	.00	[-.00, .00]	-.21**	
SDS Total	0.00	[-0.44, 0.44]	0.00	[-0.07, 0.07]	.00	[-.00, .00]	-.03	
FP high rape myth level	16.37**	[14.89, 17.85]	0.90	[0.82, 0.98]	.59	[.49, .68]	.52**	
FP low rape myth level	13.67**	[12.18, 15.15]	0.76	[0.68, 0.84]	.41	[.31, .50]	.31**	
								R^2 = .771** 95% CI[.70,.80]

Note. * Indicates p < .05. ** indicates p < .01., FP = female perpetrator

Model 3, which predicted victim blame with a male perpetrator, the model explained 39.88% of the variance (Adjusted R^2 = .37, $F(10, 185) = 12.27$, $p < .001$, f^2 = .66, CI 95% [.26,.46]. The significant predictors were the high rape myth condition (β = 5.20, $p < .001$) and low rape myth condition (β = 5.49, $p < .001$). Both high and low rape myth conditions increased victim blame attribution. Other variables were not significant predictors of blame attributions. For more details, see Table 6.7.

Table 6.7

Model 3: Multiple Regression of Victim Blame in Male Perpetrator Scenario

Predictor	*b*	*b* 95% CI [LL, UL]	*beta*	*beta* 95% CI [LL, UL]	*sr*2	*sr*2 95% CI [LL, UL]	*r*	Fit
(Intercept)	10.82**	[8.09, 13.55]						
Is a Man	-0.35	[-1.30, 0.61]	-0.04	[-0.16, 0.08]	.00	[-.01, .01]	-.04	
Sexually Diverse	-0.16	[-1.30, 0.99]	-0.02	[-0.14, 0.10]	.00	[-.00, .00]	-.02	
Racially Diverse	-0.36	[-1.67, 0.95]	-0.03	[-0.15, 0.09]	.00	[-.01, .01]	.02	
Survivors	-0.08	[-1.19, 1.03]	-0.01	[-0.14, 0.12]	.00	[-.00, .00]	-.06	
Unacquainted	0.15	[-0.87, 1.18]	0.02	[-0.11, 0.15]	.00	[-.00, .00]	.08	
MRMAS Total Score	0.00	[-0.02, 0.02]	0.03	[-0.15, 0.21]	.00	[-.00, .00]	.02	
AMI Total Score	0.02	[-0.04, 0.08]	0.07	[-0.11, 0.26]	.00	[-.01, .01]	.04	
SDS Total	0.04	[-0.29, 0.37]	0.01	[-0.10, 0.13]	.00	[-.00, .00]	-.01	
MP high rape myth level	5.20**	[4.08, 6.32]	0.61	[0.48, 0.74]	.27	[.17, .37]	.28**	
MP low rape myth level	5.49**	[4.37, 6.62]	0.66	[0.52, 0.79]	.30	[.20, .41]	.33**	
								R^2 = .399** 95% CI[.26,.46]

Note. * Indicates p < .05. ** indicates p < .01., MP = male perpetrator

In Model 4, which predicted perpetrator blame when the perpetrator was male, 80.27% of the variance was explained (Adjusted R^2 = .79, $F(10, 185) = 75.27$, $p < .001$, f^2 = 4.06, CI 95% [.74,.83]). Significant predictors were the Male Rape Myth Acceptance (β = -0.04, p < .001). The lower the male rape myth acceptance, the higher the blame apportioned to the perpetrator. In addition, both high ($\beta = 14.85$, $p < .001$) and low ($\beta = 14.12$, $p < .001$) rape myth conditions also predicted high perpetrator blame. Other variables were not significant predictors of blame attributions. For detailed results, see Table 6.8.

Table 6.8

Model 4: Multiple Regression of Perpetrator Blame in Male Perpetrator Scenario

Predictor	*b*	*b* 95% CI [LL, UL]	*beta*	*beta* 95% CI [LL, UL]	sr^2	sr^2 95% CI [LL, UL]	*r*	Fit
(Intercept)	15.03**	[11.93, 18.14]						

Is a Man	-0.29	[-1.38, 0.80]	-0.02	[-0.09, 0.05]	.00	[-.00, .00]	-.06	
Sexually Diverse	0.18	[-1.13, 1.48]	0.01	[-0.06, 0.08]	.00	[-.00, .00]	.03	
Racially Diverse	-1.81*	[-3.30, -0.32]	-0.08	[-0.15, -0.01]	.01	[-.00, .02]	-.08	
Survivors	-0.92	[-2.18, 0.35]	-0.05	[-0.13, 0.02]	.00	[-.00, .01]	-.10	
Unacquainted	-0.59	[-1.76, 0.58]	-0.04	[-0.11, 0.04]	.00	[-.00, .01]	.03	
MRMAS Total Score	-0.04**	[-0.06, -0.02]	-0.18	[-0.28, -0.08]	.01	[-.00, .03]	-.27**	
AMI Total Score	0.00	[-0.06, 0.07]	0.00	[-0.10, 0.11]	.00	[-.00, .00]	-.21**	
SDS Total	0.20	[-0.18, 0.57]	0.03	[-0.03, 0.10]	.00	[-.00, .01]	-.01	
MP high rape myth level	14.85**	[13.58, 16.13]	0.88	[0.80, 0.95]	.56	[.47, .66]	.46**	
MP low rape myth level	14.12**	[12.84, 15.40]	0.85	[0.77, 0.92]	.51	[.41, .61]	.40**	
								R^2 = .803** 95% CI[.74,.83]

Note. * Indicates p < .05. ** indicates p < .01., MP = male perpetrator

R Studio console outputs can be found in Appendix AL.

6.3.3 Descriptive Analysis of Open-ended Questionnaire Responses

The descriptive narrative analysis of the qualitative responses in the questionnaire revealed that participants' attributions of victim and perpetrator blame were informed by the details provided in the scenarios and by the information that was absent, as detailed in Table 6.9. In the control condition featuring a male aggressor, factors such as the presence of verbal consent, sexual intercourse, and sexual acts were predominantly considered in decision-making. Conversely, in the control condition with a female aggressor, respondents primarily focused on verbal consent, sexual intercourse, and an accepted kiss. For the low myth condition with a male aggressor, emphasis was placed on a declined kiss, forced sex, and refused consent as crucial elements, while with a female aggressor, forced sex, the effort to fight off the aggressor, and a refused kiss were key considerations. In the high rape myth condition with a male aggressor, forced actions, refused kisses, and consent refusal were highlighted as significant. In contrast, with a female aggressor, the public highlighted forced sex, refused kisses, and the principle that the act was “she raped him” (P174) as important.

Table 6.9

Open Ended Question Responses Per Acquaintance Scenario.

Scenarios (n)	**Descriptive summary of key considerations when responding to the victim and perpetrator blame scale**
Scenario 1 (Male Perpetrator, No Myth) *n*= 56	Many respondents emphasised Michael's verbal consent as a key factor in determining the consensual nature of the encounter, as shown by phrases such as “Michael verbally consented” (P45) and “Consent was given” (P148). Participants also highlighted concerns over coercion, notably through “Dennis pushing Michael down” (P157) and the potential for consent given under duress, for example, “Michael might have only consented to not be a victim” (P20). Furthermore, the context meeting on Grindr "on a website for hooking up" (P32) introduced assumptions about consent. Additionally, the lack of insight into Michael's emotional or psychological state is noted as a limitation in fully understanding consent, with "very little...revealed about what Michael did, said, or thought." (P65).
Scenario 2 (Female Perpetrator, No Myth) *n* = 55	Most responses point to Michael's verbal consent to both the kiss and subsequent sexual intercourse through phrases such as “Michael verbally consented” (P46), “Consent was given” (P33) and “The part where Michael consented to kissing and to sex” (P63). Additionally, the analysis reveals a consistent application of criteria for assessing consent, with respondents drawing parallels to the previous scenario as shown in terms "Same as last answer" (P13) and "Again it consented sexual behaviour" (P23). However, a noted lack of detail regarding Michael's internal state, "We still don't know much about Michael's actions, statements or thoughts" (P65).
Scenario 3 (Male Perpetrator, Low Myth) *n*= 64	Respondents identified the moments when Michael explicitly refused consent as pivotal, highlighted by these phrases: "Michael said no," and (P136) "Michael tried to fight Dennis off" (P18). This emphasised recognition of non-consent. Participants also considered Michael's physical resistance, exampled by the narrative around Dennis's use of force: “Michael asked Dennis to let him go and then attempted, unsuccessfully, to fight him off. Both verbal and physically saying no” (P130) and the physical disparity between him and Michael raises concerns about power abuse, with respondents interpreting Dennis's actions as a clear violation of consent. Additionally, the use of the Grindr app and the context of a late-night date are considered but do not diminish the fundamental agreement that Michael's refusal supersedes any preceding context or assumptions about consent.
Scenario 4 (Female Perpetrator, Low Myth) *n* = 65	There is a clear recognition among respondents that Michael expressed non-consent through verbal rejections and physical resistance with phrases such as "Michael said no" (P75), "He tried to fight her off" (P35) and "Michael asking Emma to let him go" (P189) frequently cited. Furthermore, the role of Tinder, a “hook-up app” (P72), in expectations around consent is debated, emphasised that such contexts do not imply automatic consent, as encapsulated in the assertion that "No means no" (P165), irrespective of meeting circumstances. Legal and social accountability is a focal point, with a call for equitable treatment across genders in recognising and addressing sexual assault.
Scenario 5 (Male Perpetrator, High Myth) *n* = 60	Respondents universally acknowledge Michael's verbal and physical protestations as clear indicators of non-consent, with statements such as "Michael said no" (P59) and "Michael verbally protested"(P113). Additionally, Grindr was discussed as a platform is associated with casual sex but argue that their use does not constitute blanket

Scenarios (n)	Descriptive summary of key considerations when responding to the victim and perpetrator blame scale
	consent. In addition, participants questioned Michael's inability to physically resist, for example, “Athletic build, should have been able to fight” (P27). Participants also pointed out that alcohol's influence was considered “They had been drinking alcohol was a big factor to the behaviour” (P151), yet intoxication does not excuse the violation of Michael's clear non-consent supported by the phrase "no means no" (P88).
Scenario 6 (Female Perpetrator, High Myth) *n* = 62	The responses raised the significance of verbal protests and clear non-consent, with statements such as "Michael said no" (P196) ", Michael verbally protested"(P62) and "No means no"(P19). Though the responses also questioned, “It is different now it is a woman, why didn't he fight her off?" (P14) reflecting on assumptions regarding male resilience and female aggression. Additionally, the participants scrutinised factors such as alcohol consumption” and the context of meeting on the dating app Tinder, as exampled in these extracts. “I considered the fact they had been talking on Tinder, where some people assume that sexual intercourse is a given after a date” (P141) and “Did she put something in his drink? That is the only way I can think of how she could have done it” (P43). Yet the consensus firmly states that such circumstances cannot diminish the requirement for explicit, voluntary consent as evidenced by this quote “Again - the background is irrelevant. The minute Michael said he didn’t want sex and Emma continued, it became rape” (P97).

Note. n = number of responses for the scenario, P[Number] = NVivo ascribed participant number

6.4 Discussion

The present study aimed to explore the predictors of blame attribution in scenarios of acquaintance male rape and sexual assault within a sample of the UK general public. The predictor variables included the level of rape myth-consistent information in the rape scenario, ambivalent sexism toward men, male rape myth acceptance, gender, and the personal characteristics and experiences of the participants. In this section, the results of the studies will be discussed in the context of the broader literature.

6.4.1 Myth Consistent Information and Blame Attribution.

Results of the investigation into victim blame in acquaintance rape and sexual assault scenarios indicated that the presence of male rape myths played a crucial role in blame attribution, irrespective of the myths' subtlety or overt nature. Notably, subtle myths contrasted the established notion of 'real' rape (Horvath & Brown, 2009) and significantly positively influenced the tendency to blame male victims in male rape and assault scenarios. Traditional societal scripts, which define rape as a violent act by an unknown male assailant against a physically resisting female victim, often exclude acquaintance rapes lacking these elements (Krahé et al., 2007; Littleton & Axsom, 2003). Ryan's (2011) work on the social

construction of rape underlines how such narratives can skew recognition and blame attribution in female rape cases. This distortion is also present in male rape scripts, where myths create interpretive frames that influence perceptions of rape (Anderson, 2007; Davies et al., 2013). The present study further elucidated that overt rape myths were as influential in attributing blame, be it slightly less than the subtle rape myths, highlighting the need for holistic approaches to combat all rape myths and enhance the support and understanding of male rape. Carroll et al.'s (2019) findings on the public's limited awareness of male rape resonate with the professional insights from Discourse One (Study One, Chapter 4) and male survivors' experiences from Discourse Three (Study Two, Chapter 5). This alignment indicates a pressing need for further research to deepen the public's understanding of male rape and the associated myths.

Similarly, findings revealed that perpetrator blame in acquaintance sexual assault and rape scenarios revealed that male rape myths significantly predicted blame attribution across the sex of the perpetrator, regardless of whether the myths were overt or subtle. Interestingly, overt rape myths emerged as more robust predictors of perpetrator blame in both male and female aggressor scenarios, with subtle myths not being far behind. This contradicts prior research findings that acquaintance between victim and perpetrator typically results in diminished blame for the aggressor (Anderson & Lyons, 2005; Carroll et al., 2019; Kraché, 1991; Sleath & Bull, 2010). This finding suggests a shift in societal attitudes towards blame attribution. This suggests that certain elements, like the survivor's build, the assault happening at night, alcohol involvement, and the use of dating apps, could lead the public and potential jurors to hold perpetrators accountable, irrespective of their relationship with the victim. This might influence decisions about guilt. This suggests a readiness to hold perpetrators accountable irrespective of their relationship with the victim or the overtness or subtlety of the rape myths involved. This study’s unique focus on the gender of the aggressor in male victim scenarios provided new insights, differing from previous research that primarily examined the dynamics of stranger versus acquaintance rape (Sleath & Bull, 2010) or gender comparisons in victimisation (Anderson & Lyons, 2005). This study’s findings imply that public perceptions of accountability in male rape and sexual assault cases may be significantly influenced by the interplay of victim and aggressor sex, countering the traditional narrative that acquaintance or the victim's gender alone dictates blame attribution.

6.4.2 Ambivalent Sexism Towards Men and Blame Attribution

Turning the attention to sexism, the study did not find a significant predictive relationship between ambivalent sexism toward men and blame attribution. This diverges from the findings of Chapleau et al. (2008) and Davies et al. (2012), who documented a complex interplay between sexism and rape myth acceptance. Chapleau et al.'s study in the

United States revealed that benevolent sexism toward men—characterised by protective, paternalistic attitudes—was significantly associated with rape myth acceptance among women, suggesting such sexism may reinforce male rape myths. In contrast, Davies et al.'s (2012) British stranger rape study identified a positive association between hostile sexism toward men and male rape myth acceptance, while benevolent sexism showed no significant correlation. Furthermore, a negative association was observed between male rape myth acceptance and the male dominance subscale of the AMI, indicating potential discrepancies with the findings of Chapleau et al. (2008). This divergence suggests that in our study, attitudes endorsing male dominance were inversely related to blaming behaviours, contrasting with previous research that found different associations between sexism toward men and rape myth acceptance. A critical distinction between our study and prior works, such as those by Chapleau et al. (2008) and Davies et al. (2012), is the use of the AMI-Short Form, which might contribute to these observed variations in results. The present study utilised the AMI-Short Form (Glick & Fiske, 1999; Rollero et al., 2014). The variations observed in the relationships between sexism, rape myth acceptance, and blame attribution in male rape scenarios may stem from the differences in measurement tools employed across studies.

The current study shifted its focus towards predicting blame in acquaintance rape and sexual assault scenarios, moving beyond merely examining rape myth acceptance. The current study's findings suggest that ambivalent sexism towards men does not directly correlate with how blame is assigned in these scenarios. This departure from previous research raises questions about the direct impact of ambivalent sexism on the perception of male rape cases. This implies that this form of sexism may not be adequate to explain victim blame attribution in acquaintance rape and sexual assault scenarios. This suggests an opportunity for future research to examine more deeply the distinct roles that benevolent and hostile sexism towards men may play in the attribution of blame. It is also worth noting that the decision to operationalise the ambivalent sexism measure as a whole rather than as distinct factors of hostile and benevolent sexism may have contributed to the predictor's non-significance in this study. This approach was chosen because there was insufficient prior literature to justify splitting the scale to measure each dimension independently (Rollero et al., 2014), as demonstrated by earlier inconsistent findings (by Chapleau et al., 2007; Chaplaeu et al., 2008; Davies et al., 2012). Where it appeared that ambivalent sexism, encompassing both benevolent and hostile attitudes towards men, does not serve as a straightforward predictor for attributing blame in cases of acquaintance rape and sexual assault. Therefore, future studies could benefit from examining these dimensions of sexism

separately to understand better their contributions to acquaintance rape and sexual assault blame attribution.

6.4.3 Male Rape Myth Acceptance and Blame Attribution

Turning our attention to male rape myth acceptance, findings from this study indicated that lower acceptance of male rape myths significantly predicted increased blame attribution towards the perpetrator, particularly in cases where the perpetrator was female. This aligns with Sleath and Bull's (2010) findings, which showed that lower acceptance of male rape myths led to more significant attribution of blame to the attacker among British university students studying Psychology. Similarly, Murray et al.'s (2023) study in Chile demonstrated that reduced acceptance of modern rape myths is associated with increased blame directed at the perpetrator in a female rape scenario. These studies collectively demonstrated the impact of rape myth acceptance on perpetrator blame attribution across different samples, geographic locations, and victim genders. Contrary to Sleath and Bull (2010) and Murray et al.'s (2023) research that primarily focuses on specific contexts or populations, the present study broadened the scope by examining gender differences in blame attribution towards male and female aggressors in acquaintance male rape and sexual assault scenarios within a sample of the general public. This approach revealed the nuanced ways in which gender and rape myth acceptance interact to influence public perceptions of perpetrator blame in these cases. In this study, the nuanced findings reveal that lower acceptance of male rape myths significantly increases blame towards female perpetrators, highlighting a complex interaction between gender perceptions and rape myth acceptance. This study broadens previous research by illustrating gender differences in blame attribution towards perpetrators in acquaintance rape scenarios among the public. It emphasised the significance of considering both rape myth acceptance and gender dynamics to understand societal perceptions of perpetrator blame in sexual violence cases.

However, while rape myth acceptance significantly predicted perpetrator blame in both sexual assault and rape scenarios, its association with victim blame did not follow a similar pattern. This observation suggests a nuanced influence of rape myth acceptance on blame attribution, wherein attitudes may differentially affect perceptions of victims and perpetrators. Specifically, lower rape myth acceptance correlated with increased blame towards perpetrators, but this attitude does not necessarily extend to increased blame towards victims in these contexts. This finding contrasts with prior research on male rape myth acceptance and its relation to blaming male victims among various groups, including American counsellors in training (Kassing & Prieto, 2003), British university students (Davies et al., 2008; Hines et al., 2021; Sleath & Bull, 2010), and American university students (Ayala et al., 2015; Vandiver & Dupalo, 2012). This contrast highlights the complexity of the impact

of rape myths on public perceptions, indicating that while efforts to reduce rape myths may enhance accountability for perpetrators, their effect on victim blaming is more indirect and requires further research.

The absence of a significant link between male rape myth acceptance and victim blaming in this study may have been due to sample populations the different samples used in the original validation of the scale (Hines et al., 2021), which employed a student sample and this study's broader community sample. This variation in populations may explain the observed differences in the relationship between male rape myth acceptance and victim blame attribution. Consequently, this variability underlines the need for further research to explore these dynamics. Similar observations have been noted in the literature on female rape myths (Hudspith et al., 2023; Krahé, 2016), where different sample populations exhibit varying levels of myth acceptance. However, reports of such findings, especially regarding male rape myths, are sparse, limiting the ability to make defensible conclusions. To the best of the researcher's knowledge, the literature on this topic remains scant, highlighting a significant gap in understanding how various populations interpret rape myths and their impact on attitudes toward victims and perpetrators of sexual violence. Future research should aim to explore how perceptions of rape myths vary within diverse populations and how these perceptions subsequently affect public attitudes towards male sexual violence.

6.4.4 Demographic Characteristics as Predictors

In exploring the predictive role of participant gender, this study uncovered a noteworthy absence of a significant association between male participants and blame attribution towards either victims or perpetrators in scenarios of acquaintance rape and sexual assault. This finding diverges from the established literature, which commonly suggests that men tend to assign blame to victims while displaying leniency towards perpetrators (Grubb & Horrow, 2009). It is worth noting that much of the existing research primarily focuses on stranger rape, which may evoke perceptions distinct from those observed in acquaintance rape contexts (Kambashi et al., 2023). This divergence may reflect a societal shift in victim blame attribution. Such a shift could be influenced by heightened awareness and advocacy efforts surrounding sexual violence towards men, as exemplified by high-profile cases like that of Reynhard Sinaga (Pidd & Halliday, 2020) and the #MeToo movement's focus on women's experiences (PettyJohn et al., 2019). Furthermore, the dynamics unique to acquaintance rape—specifically, the complexity introduced by the victim's prior relationship with the aggressor—may elicit specific cognitive and emotional responses not typically observed in stranger rape scenarios. This complexity, highlighted in the discourses from Study One and Study Two, suggests that traditional

gendered patterns of blame attribution may not uniformly apply across different rape contexts. Consequently, the current findings indicate that it was necessary to examine male rape myths and victim blaming across a broader spectrum of rape scenarios. By transcending the conventional dichotomy of stranger versus acquaintance rape, as exemplified by Moglozli and Duma (2019) and considering evolving societal attitudes (Hines et al., 2021), future research is needed to provide a more refined understanding of how gender and context influence public perceptions of blame in cases of sexual violence towards men.

The study also found that sexual diversity did not significantly predict blame attribution, which contradicts past literature that suggests lower rape myth acceptance and victim-blaming among sexually diverse individuals (Worthen, 2021). This implies that factors beyond sexual orientation may influence blame attribution, or its impact may be more context-specific, highlighting the need for future research into how sexual orientation intersects with perceptions of sexual violence against men. The non-significant findings regarding racial diversity and blame attribution are consistent with research by Walfield (2018) and Willmott and Widanaralalage (2024). To note, the ethnic composition of this study's sample predominantly reflects the demographics of England and Wales (ONS, 2023), with 84.18% White and 15.82% racially diverse participants, suggesting sample size distribution may not have influenced the lack of significant findings related to ethnicity. Given this, future research should consider investigating different ethnic groups separately to deepen our understanding of how race influences attitudes towards male rape myths and blame attribution. Furthermore, this consideration should also be extended to examining sexual orientation identities and gender expressions. These identities inform thoughts towards male rape myths and blame attribution (Walker et al., 2019).

The absence of significant findings concerning the influence of being a survivor or knowing a survivor, which were two separate variables on blame attribution, diverged from previous studies that typically show a correlation with lower endorsement of male rape myths (Hammond et al., 2017). This suggests a more complex relationship between personal experiences with sexual violence and blame attribution on male acquaintance rape and sexual assault (Gravelin et al., 2019), warranting further investigation. Lastly, the study's measuring of social desirability aligns with previous research indicating that male rape myth acceptance does not correlate with socially desirable responses (Kassing et al., 2003). This suggests that the current study's responses are likely unbiased by social approval concerns. Measuring social desirability in future research will help ensure the validity and reliability of findings in the domain of male rape and sexual assault studies (Reynolds, 1982).

6.4.5 Implications of the study: Strengths and Future recommendations

This study enriches the discourse on rape myths, male rape, and sexual violence within the fields of forensic psychology by delving into the dynamics of blame attribution towards both victims and perpetrators in acquaintance rape myth scenarios within a UK general public sample. The findings revealed how both overt and subtle rape myths, along with low acceptance of male rape myths, are significant predictors of increased blame towards perpetrators. Conversely, the study identified an intriguing paradox where both low and high levels of rape myth information predict increased victim blame, underscoring the subtle and complex ways society perceives male rape victims. These insights have profound implications for male survivors, support services, legal professionals, and policymakers, suggesting a need for a refined approach to addressing and understanding the spectrum of blame attribution in male rape and sexual assault scenarios.

6.4.5.1 Implications for Public Awareness Campaigns, Policymakers, and Professional Training

This study's insights shed light on the critical need for a well-rounded approach to tackling the complex issue of rape myths and how they shape public views and blame allocation. It emphasises that our efforts should not just stop at debunking the prominent myths; we must also delve into and address the subtler, often ignored misconceptions that keep the stigma around male rape alive. To dismantle these myths effectively, support services and awareness campaigns must integrate the in-depth understandings from qualitative discussions and the quantified data from quantitative research into their training programs and policy making. This approach would allow for a more knowledgeable and all-encompassing strategy to shift societal attitudes and offer much-needed support to survivors (Creamer & Reeping, 2020).

6.4.5.2 Implications for Future Recommendations

One of the study's strengths is its comprehensive approach to examining blame attribution within a contextually rich scenario, providing a deeper understanding of how societal attitudes towards male rape are formed and perpetuated. Future research should build on this foundation by exploring the intersections of rape myths with other demographic and psychosocial factors, further unpacking the complex web of influences on blame attribution (similar to Willmott & Widanaralalage, 2024). Additionally, longitudinal studies could elucidate how these attitudes evolve, offering insights into the effectiveness of interventions aimed at changing public perceptions of male rape, similar to research concerning female rape (Yapp & Quayle, 2018). This study's insights into the predictors of victim blame in male rape scenarios pave the way for future research to delve deeper into the mechanisms through which rape myths influence societal attitudes. Longitudinal and

experimental studies could explore the efficacy of interventions designed to reduce rape myth acceptance and its impact on victim blaming. Moreover, research focusing on specific demographics or cultural contexts could uncover additional layers of complexity in how rape myths are endorsed and manifested in attitudes towards victims and perpetrators alike (Walker et al., 2019).

6.4.6 Limitations and Future Recommendations

The study encountered a higher attrition rate among participants recruited through social media than those from Prolific. This discrepancy can likely be attributed to the length of the survey and the absence of compensation for participants recruited via social media. While comprehensive research often necessitates longer surveys, they are generally associated with increased dropout rates (Hoerger, 2010). Although the extended survey length was justified to cover all relevant aspects of the study, it may have impacted participant engagement (Sharma, 2022). For this reason, future studies should explore strategies to streamline surveys without compromising the depth and breadth of data collection. This could involve optimising survey design or providing incentives to enhance participant retention, particularly for those recruited through social media platforms.

Additionally, the study included participants from across the UK, aiming to compare perceptions of rape myths and blame attribution among different regions, including England and Wales, Northern Ireland, and Scotland. While participants from Northern Ireland and Scotland were included in the analysis, their representation in the sample was insufficient to compare thoroughly with the larger samples from England and Wales. This limitation is significant because each region within the UK has distinct sexual offence laws and cultural norms, which could differentially influence societal attitudes towards rape and sexual assault. Therefore, caution should be exercised when applying the findings of this study to specific legal and cultural contexts within the broader UK. A more equitable representation from Northern Ireland and Scotland would enable a more detailed examination of regional legal frameworks and cultural norm differences. Such research is crucial for understanding how these regional variations influence perceptions of rape myths and blame attribution, ultimately contributing to a more comprehensive understanding of societal responses to rape and sexual assault within the diverse contexts of the UK.

Lastly, a notable observational finding was that the beta weights for victim blame were slightly higher in scenarios with a male perpetrator compared to those with a female perpetrator. This observation was not statistically tested and is therefore not confirmed as a significant difference within the scope of this study. It remains a point of interest that could indicate a variation in societal attitudes towards male rape based on the perpetrator's

gender. Future research would benefit from a more detailed analysis of this aspect, potentially revealing more nuanced insights into the influence of gender on blame attribution in sexual assault cases.

6.5 Conclusion

This study embarked on an exploration of blame attribution in acquaintance male rape and sexual assault scenarios, particularly within a sample drawn from the UK general public. It sought to dissect the influences of rape myths, ambivalent sexism toward men, gender, and personal characteristics of the participants on societal attitudes towards victims and perpetrators. A notable contribution lies in the study's illumination of how low and high rape myths play a role in shaping blame attribution towards perpetrators. This highlights the entrenched nature of rape myths within societal perceptions, emphasising the necessity for targeted approaches to dismantle these harmful narratives. However, the investigation into the relationship between ambivalent sexism toward men and blame attribution in acquaintance rape and assault scenarios showed no significant results This outcome indicates that the link between these variables may be more nuanced than previously understood, potentially varying across different contexts, or not fully captured by the measures used. This suggests the need for further research to explore the intricacies of how ambivalent sexism toward men influences perceptions and judgments in cases of sexual violence. Furthermore, the study's exploration of the predictive role of demographic characteristics on blame attribution revealed no significant associations, offering a counter-narrative to existing literature that suggests that demographic characteristics are related to blame attribution in male rape myth literature. This outcome hints at possible shifts in societal attitudes or the unique dynamics of acquaintance rape that merit deeper examination. While the study made strides in understanding the complex web of factors influencing blame attribution in male rape and sexual assault, it also opens the door for future research to build on its foundation. Further studies are encouraged to explore the intersections of rape myths with a broader array of demographic and psychosocial factors, employ more nuanced measures of ambivalent sexism, and consider longitudinal approaches to capture the evolving nature of societal attitudes towards male rape and sexual assault.

Summary of chapter

This chapter focuses on examining factors that predict blaming attribution in acquaintance rape and sexual assault cases with a male survivor. The multiple regression demonstrates that overt and subtle myth-consistent information positively predicts victim and perpetrator blame. The implications of these findings are discussed. The next chapter is the

last chapter of this thesis and comprises a discussion of all three studies, implications, and future recommendations.

7 CHAPTER SEVEN: DISCUSSION & CONCLUSION

The last chapter examines predictors of blame attribution in an acquaintance rape and sexual assault scenario. The current chapter discusses all three studies' findings and helps us better understand perceptions of male rape myths (MRMs) through qualitative and quantitative methodology. The chapter includes a reminder of the findings. These three key arguments are gleaned from the three studies, as well as the strengths, implications, limitations, and future recommendations of the mixed methods study, ending with a final reflection.

7.1 Discussion of all Three Studies

The current study embarked on an exploration to deepen understanding of male rape myths in the United Kingdom (UK) through a sequential mixed methods design; a summary of the key findings of this study is presented in Table 7.1. Initially, this involved delving into the perspectives of Service Providers and Health Professionals in England and Wales regarding male rape. Insights from these professionals shaped the interview topics for the second study and guided the conducting of interviews with male survivors. The thesis continued by examining the experiences of male survivors of both male-on-male rape and female-on-male sexual assault, including sexual assault by penetration and forced-to-penetrate scenarios. Narratives from professionals and survivors informed the selection of variables for the third study and contributed to creating an acquaintance rape scenario in a larger sample. The final study of the thesis aimed to ascertain the extent to which blame attribution in an acquaintance male rape scenario could be influenced by male rape myths, acceptance of these myths, sexism towards men, and participants' characteristics and experiences within a public sample. This mixed methods research unveiled three groundbreaking arguments that stand as novel contributions to the fields of male rape and male sexual assault, forensic psychology, health and social psychology, and the study of sexual violence. These arguments — ‘False Assumptions About Male Survivors of Rape and Sexual Assault,’ ‘Bridging Gender Relations, Gender Role Strain, and Relational-Cultural Theories against Male Rape Myths,’ and ‘Disciplinary Power Over Recovery’ — were meticulously examined within this chapter, against the extensive backdrop of existing literature. This detailed exploration was further enriched by a discussion of the implications of the findings, a critical assessment of the study's strengths and limitations, a presentation of recommendations for future research and final reflection.

Table 7.1

Summary of Mixed Methods Findings

Studies	Research Questions	Results
Exploratory Sequential Mixed Methods Study	How can a sequential mixed methods design provide an enhanced understanding of MRMs? (Overarching study)	Argument One: False Assumptions About Male Survivors of Rape and Sexual Assault
		Argument Two: Bridging Gender Relations, Gender Role Strain, and Relational-Cultural Theories against Male Rape Myths
		Argument Three: Disciplinary Power Over Recovery
Study One	How do professionals construct male rape in England and Wales?	Discourse One: Professionals' Insights: Societal Myths, Acquaintance Rape Realities, and Legal Obstacles
		Discourse Two: Navigating Re-Traumatisation: Unequal Power and Support Challenges
		Discourse Three: Defining Survivor Identity and the Critical Role of Specialist Services
Study Two	How do male survivors of rape and sexual assault construct male rape in England and Wales?	Discourse One: Bearing the Unseen Weight
		Discourse Two: Barriers: Institutional Power and the Complex Journey of Male Survivors
		Discourse Three: A Media Discourse: (in)Authentic Portrayal of Male Rape
		Discourse Four: Breaking the Silence: Disclosure and Support for Male Survivors
Study Three	To what extent do MRMA, ambivalent sexism, perpetrator gender, mythic information, participant gender, participant sexuality, participant ethnicity, the participant being a survivor, and the participant knowing a survivor predict victim and perpetrator blame in acquaintance rape?	Model One: Low and high rape myths predicted victim blame with a female perpetrator,
		Model Two: Low rape myth acceptance, high and low rape myths predicted perpetrator blame with a female aggressor
		Model Three: Low and high rape myths predicted victim blame with a male perpetrator
		Model Four: Low rape myth acceptance, high rape myths and low rape myths predicted perpetrator blame with a male perpetrator

7.1.1 False Assumptions About Male Survivors of Rape and Sexual Assault

7.1.1.1 Unpacking Gender-Specific Narratives

The discursive studies involving professionals and male survivors highlighted that male rape myths persist in society, primarily due to extrapolation from female rape scenarios without adequately acknowledging the distinct contexts and experiences associated with

male survivors (Davies & Rogers, 2006; Hine et al., 2021a; Lowe & Rogers, 2017; Stemple & Mayer, 2014). This approach reinforces male rape myths identified in both British and American literature, failing to recognise that male and female rape scenarios necessitate separate and specific considerations. For example, the myth that women cannot rape men highlights the need for scenarios in research that address both rape and sexual assault distinctly when exploring MRMs.

Societal perceptions often default to the traditional rape script—an 'ideal' scenario where a man is overpowered by a physically stronger male assailant, typically a stranger, in a nocturnal setting. This script, though identified in research on female (Horvath & Brown, 2013; Payne et al., 1999) and MRMs (Depraetere et al., 2020; Hines et al., 2021b), does not accommodate variations such as female perpetrators or non-physical forms of coercion, leading to a dismissal or trivialisation of the assault's severity for men. Furthermore, unique male rape myths, such as "he must be gay," emphasise the insufficiency of generalising findings from female-focused research to male survivors. This is evidenced in the current studies, where professionals and survivors articulate societal disbelief in atypical rape scenarios and the difficulty male survivors face in seeking justice, reflecting a statistically significant relationship between the endorsement of subtle and overt MRMs and victim blaming in sexual assault scenarios (Study Three).

This indicates a critical need for further examination of MRMs within England and Wales, suggesting that the role and persistence of these myths remain largely unchanged from earlier research spanning the 1990s to 2010 (Willmott & Widanaralalage, 2024). The persistence of myths and societal narratives around male rape and sexual assault necessitates distinct considerations for male survivors, challenging the generalisation from female to male rape myths and advocating for research that acknowledges and addresses the unique aspects of male rape and sexual assault.

7.1.1.2 Media Influence on Rape Myths

Nevertheless, the male survivors and the professionals suggested that the public’s discourses concerning male rape are informed by media representation of rape, indicating that said depictions might not be producing an accurate portrayal of male rape. The discursive studies involving professionals and male survivors consistently indicated that media representation plays a pivotal role in shaping societal understanding of male rape. Similar patterns of media power have been observed in female rape myth acceptance (Santoniccolo et al., 2023). Indicating that these representations often cast male and female survivors in a limited and stereotypical manner, thereby contributing to the perpetuation of male and female rape myths by failing to capture the complexity and diversity of survivors'

experiences (Nagy, 2023; Santoniccolo et al., 2023). Foucault's (1972; 1980) theories on power/knowledge and discourse shed light on how narratives in media about male rape contribute to societal discourses that both mirror and reinforce power dynamics and the endorsement of MRMs (Abdullah-Kahn, 2008).

Foucault's (1972; 1980) analysis implies that media depictions of male rape, as identified by professionals and survivors with instances in TV shows such as "EastEnders" (Survivor 2 in Chapter Five) and "Hollyoaks" (Health Professional 3, Service Provider 5 in Chapter Four), contribute to a broader discourse that maintains prevailing power dynamics and knowledge constructs about male rape. Eastenders (Holland et al., 1985) and Hollyoaks (Redmond, 1995) are prominent British soap operas and have been noted for their portrayal of male rape, among other storylines involving sexual violence (Nagy, 2023). Media representations often marginalise male survivors' experiences, fostering a culture of silence and perpetuating stigmas and myths about male rape. These portrayals frequently depict male rape victims as anomalies or less credible than female victims, suggesting that male rape is rare or less severe. These portrayals inform public perceptions and attitudes towards male rape, as professionals note, playing a critical role in either perpetuating or challenging societal rape myths (Akrivos, 2019; Foucault, 1977; Goffman, 1963).

However, it is essential to recognise that the influence of media on societal perceptions of male rape is not entirely negative. Male survivors in the second study spoke positively about the impact of accurate portrayals of male rape, which can significantly aid in dispelling myths, aligning with Cohen's (2014) assertion that media representations can assist in the dismantling of myths. Notably, a storyline concerning male rape in Hollyoaks was instrumental in increasing awareness and securing additional funding from the Ministry of Justice and Green (2014) to support male survivors of sexual violence as part of a Breaking the Silence initiative (Survivors Manchester, 2014), which was aimed at supporting male survivors to come forward for support. These stories' accuracy and compelling nature were primarily due to the involvement of actual survivors and guidance from Survivors Manchester (Ministry of Justice & Green, 2014). These portrayals helped transform societal understanding of male rape and demonstrated an influence on some male survivors. According to the Ministry of Justice, there was a 201% increase in men accessing rape support services between 2014 and 2018 (HM Government, 2019).

Furthermore, charities such as Survivors UK and Survivors Manchester reported a 1,700% surge in helpline calls from victims and their families following a depiction of male rape in another primetime soap opera, Coronation Street (Percival, 2018), further illustrating the significant, positive impact media can have on supporting male survivors. Although Coronation Street's specific storyline was not directly mentioned in the current thesis,

comparable to EastEnders and Hollyoaks, its impact on public awareness and support for male survivors aligns with the broader media influence observed in the current research. This underlines the media's dual capacity to both challenge and reinforce societal norms and attitudes towards male rape. Notwithstanding its positive aspects, there are constraints. It is essential to recognise these portrayals, often focused on drug-assisted rape in a male-on-male rape scenario; such representations in TV shows provide only a partial view of the complex reality of male rape (Akrivos, 2019). However, the focus on specific scenarios like drug-assisted male-on-male rape in media portrayals necessitates a broader narrative to capture the diversity of male rape experiences fully. While these stories play a crucial role in challenging some myths, they inadvertently uphold others by not addressing the full spectrum of male victimisation, calling for more nuanced media representations that reflect the complexity of male rape and contribute more effectively to dismantling pervasive myths.

7.1.1.3 Female Perpetrated Serious Sexual Assault

Discourse One among professionals highlights the complexity of rape incidents and how subtleties perpetuate rape myths, influencing judgments about survivors. Remarkably, the third study reveals that nuanced myths significantly impact victim-blaming attitudes, especially in cases involving female aggressors. These myths often challenge the possibility of male victimhood, rooted in traditional gender roles, by suggesting men should always desire sex, thus denying the reality of male victims by female aggressors (Fisher & Pina, 2013). This contrasts with male-on-male rape myths, where stereotypes about gay men and perceived vulnerability predominate (Crown Prosecution Service, 2021). Both scenarios overlook the essential issue of consent, highlighting the need for nuanced approaches to dismantle these male-specific myths.

Moreover, the concept of presumed consent in acquaintance scenarios, harming all survivors of sexual assault and rape, reflects a broader societal misunderstanding (Kahan, 2009). Such assumptions, which stem from the specific details of survivors' stories (e.g. having cohabited with the perpetrator), can complicate the recognition and validation of their experiences, regardless of the gender of the survivor or the nature of their relationship with the aggressor (Anderson, 2007). The danger of these acquaintance-based myths lies in their presumption of pre-existing consent, thus obscuring the complex realities of survivors' experiences in various contexts. Notably, this challenge of navigating false assumptions about consent is shared between male and female survivors (Walker et al., 2019). The societal misconceptions that blur the lines of autonomy and violate personal boundaries are common to both, underscoring a universal need to confront and debunk rape myths (Gravelin et al., 2019). This calls for the advocacy of explicit affirmative consent models that

respect the rights and experiences of all individuals, highlighting the importance of addressing these myths comprehensively and sensitively.

Now, circling back to the original topic of female aggressors, the literature supports the current thesis's finding that male survivors of female-perpetrated sexual assault are often met with heightened scepticism and disbelief (Discourse One, Chapter Four; Discourse Two, Chapter Five; Models 1 & 3, Chapter 6; McKeever, 2019), adding another layer of difficulty in their quest for acknowledgement and support. The findings underline the challenges faced by male survivors of sexual violence under the Sexual Offences Act 2003, primarily when the perpetrator is known. The male survivors in the current research felt that their experiences were not adequately captured by the term 'sexual assault' and more accurately reflect what they identify as rape. This discrepancy highlights a significant gap in the current legal framework, supported by literature from England and Wales, where male survivors often categorise their experiences squarely within the definition of rape (Weare & Hulley, 2019). This discrepancy underscores the urgent necessity to revisit and potentially revise existing legislation to reflect and validate the experiences of all survivors more accurately. Professionals pointed out that the structure of the law can hinder their ability to support male survivors who believe their assault constitutes rape, as they must navigate within the confines of legal definitions. This limitation impacts the extent of support professionals can offer, focusing solely on the legal aspects of survivors' experiences. Additionally, disparities in the services available to these men stem from categorising certain acts under the law. At the same time, rape is considered a serious crime, and other acts categorised as sexual assault may not be, leading to gaps in support for survivors (Varese et al., 2023).

7.1.1.4 Call for Gender-Inclusive English Law

In this study, both professionals and male survivors have advocated for amendments to the legal definition of rape under Section 1 of the Sexual Offences Act 2003 to be made gender-neutral. This change would align with practices in countries such as South Africa (Government of South Africa, 2024) and India (Pathak, 2016), acknowledging any individual as a potential victim or perpetrator regardless of gender. This would also assist with the significant concern about the potential for jury bias, especially in cases involving female perpetrators, where prevailing rape myths about women's incapacity for committing rape may influence judgments. This bias is compounded by legal definitions that do not challenge these myths, risking their perpetuation. Thomas (2023) found that some perpetrators of sexual offences were not convicted of rape but of what is perceived as lesser crimes. This practice undermines the impact on survivors of all genders, hindering their recovery process. There is a clear need for a focused examination of how individuals interpret the law and its connection to MRMs, as this research indicates it is a crucial issue. Making the law gender-

neutral would not only validate male survivors of sexual violence by acknowledging their assault as rape but also ensure that transgender, non-binary, and individuals across the full spectrum of gender expressions are supported by the law as survivors or held accountable as perpetrators. By doing so, this legal shift would directly confront and challenge pervasive MRMs, furthering societal recognition that rape can affect anyone, regardless of gender, and is not confined to traditional gender roles and expectations.

Integrating a more gender-inclusive approach within the Sexual Offences Act 2003, specifically, its first section, could significantly support survivors of all gender identities, offering profound insights into the evolving understanding of MRMs (Kiss et al., 2020). The first study in this thesis highlighted a lack of association with masculinity, sexuality, and MRMs, presenting a paradox when compared to earlier research linking MRMs to traditional masculinity theories (Hines et al., 2021). This discrepancy may arise from professionals' broader views on masculinity and sexuality, potentially more inclusive and less stereotypical, suggesting a departure from traditional masculinity-based judgments (Anderson & Quinn, 2009; Kassing & Prieto, 2003). This notion finds further support in male survivors' narratives from Study Two, which nuancedly discussed masculinity, indicating an awareness of its impact yet eventually seeking support, suggesting a nuanced navigation of masculine identities. Furthermore, the accurate portrayal of male rape in 'I May Destroy You' (BBC & HBO, 2020) was highlighted by both professionals and survivors, marking a departure from traditional media representations and possibly influencing public perceptions positively. Unlike previous portrayals, this program depicted a nuanced scenario of acquaintance rape that did not conform to masculine stereotypes, challenging the audience's understanding of consent and the complexities of sexual assault. This shift towards more nuanced representations, as evidenced by neither rape myth acceptance nor sexism toward men emerging as significant predictors in the third study, hints at evolving societal attitudes towards male survivors that merit further examination.

This evolving narrative indicates the potential for a broader societal shift that mirrors the juxtaposition observed between the Crown Court and support services' approach to MRMs. As the male survivors in this thesis navigated their experiences within the context of masculinity, their eventual decision to seek support suggests a potential re-evaluation of masculine stereotypes, further indicating a societal move towards a more inclusive understanding of male rape and assault. This progression underscores the need to reassess the role of masculinity in discussions around male rape myths, reflecting a critical area of exploration for future research. This reassessment of masculinity to MRMs, informed by contemporary media representations and survivor narratives, sets the stage for exploring theoretical frameworks that more accurately encapsulate these evolving societal attitudes.

The following section delves into how different theoretical perspectives might better elucidate the findings from this thesis, particularly in understanding the complex interplay between gender norms, societal perceptions, and the experiences of male survivors.

7.1.2 Bridging Gender Relations, Gender Role Strain, and Relational-Cultural Theories against Male Rape Myths

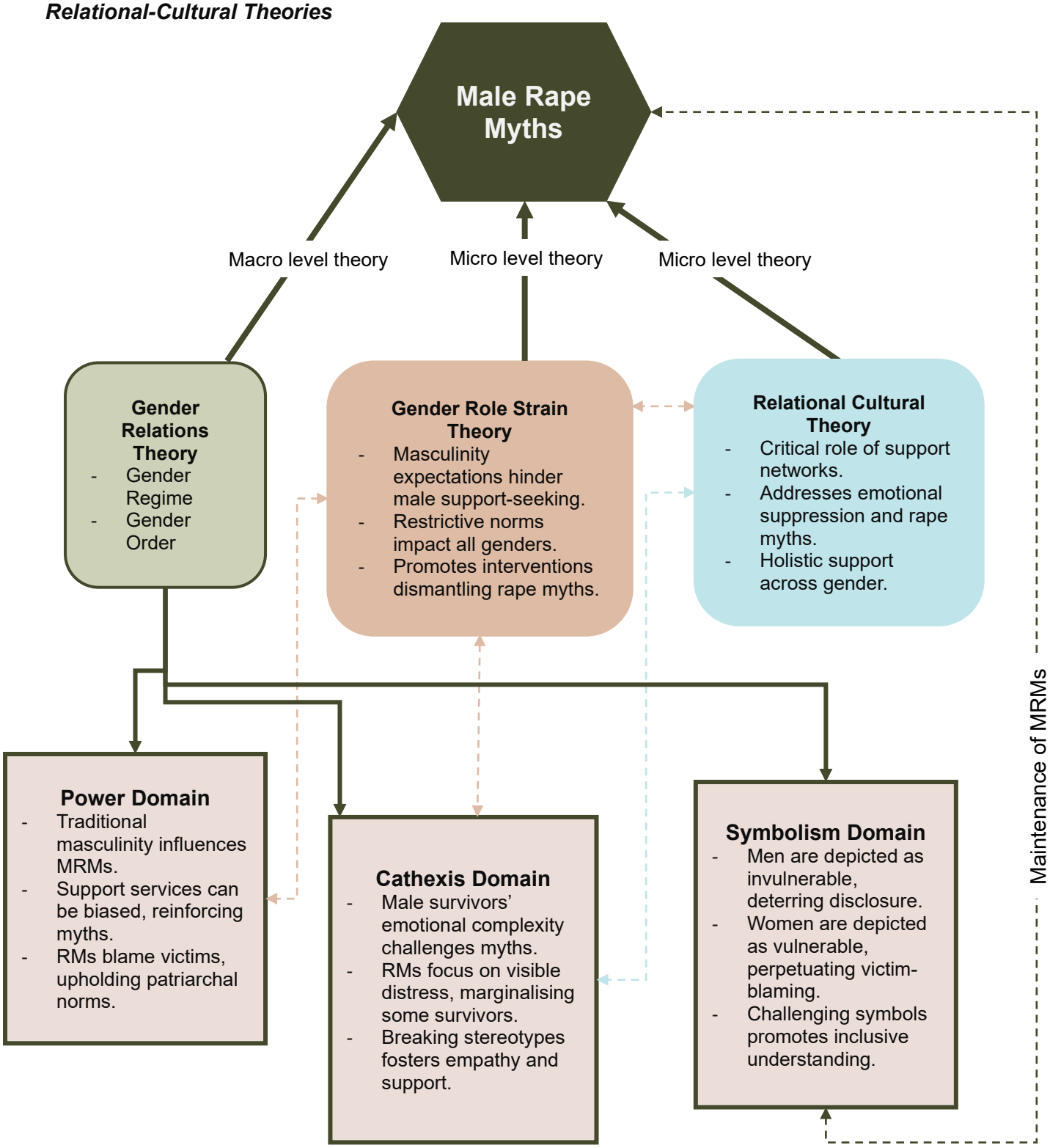
The findings from this mixed methods study suggest a re-evaluation by scholars of gender roles within the context of MRMS, moving beyond traditional binary views that often restrict rape to male perpetrators and female victims (Krahé, 2011). The study revealed an essentialist perspective within institutional (e.g. the CJS, service provision based on law) and societal norms (i.e. beliefs about male survivors of rape and sexual assault), which typically recognises rape as an act that occurs exclusively from male to female (Anderson, 2007). However, narratives from within the study (Chapters Four and Five) and the broader interdisciplinary topic of male rape (Cohen, 2014) and sexual assault (Weare & Hulley, 2019) contest this view, highlighting instances of male victimisation. This aligns with literature indicating that the gendered understanding of rape may discourage recognition of male rape as such (Walker et al., 2019). Despite these challenges, the findings also highlight that some survivors are actively seeking legitimacy to describe their experiences as 'rape.' This underlines the necessity to reconsider the theoretical foundations that underpin these phenomena, suggesting that our understanding of rape must evolve to encompass the experiences of all survivors, irrespective of gender.

To begin with, the notion of masculinities as foundational to male rape myths was not predominantly reflected in the narratives of professionals. In the male survivor’s narratives, they noted that while they might have felt pressured to conform to hegemonic masculine (Connell, 2005) standards, such efforts were ultimately found to be harmful and detrimental to their mental well-being. This is the essence of the hegemonic masculine theory, which argues that these expected hegemonic traits harm all men. However, this thesis argues that this theory is too simplistic to maintain and demonstrate the nuances central to the male survivor's stories. Furthermore, the public samples’ responses revealed that sexism towards men did not significantly influence victim-blaming or perpetrator-blaming. This indicates that judgments based on a man's conformity to hegemonic masculine traits do not play a crucial role in the victim-blaming dynamics of MRMs. Consequently, it can be argued that The Theory of Hegemonic Masculinity by Connell and Messerschmidt (2005) might not comprehensively explain the mechanisms at play in MRMs. This realisation stressed the necessity for adopting a more comprehensive theoretical framework that can accurately reflect the varied experiences and obstacles encountered by male survivors, moving beyond the traditional boundaries of masculinity norms. This is where Gender Relations Theory

(Connell, 2012; Connell & Pearse, 2015), the Gender Role Strain Paradigm (GRSP; Levant & Powell, 2017; Pleck, 1995), and Relational Cultural Theory (RCT; Jordan, 2018) come into play. It is important to note that it is the specific combination of these theories that is required to explore and understand male rape myths fully. Each theory addresses a distinct but complementary aspect of the phenomenon, with Gender Relations Theory offering insights into the broader societal and institutional structures that shape gender norms, GRSP focusing on the personal and psychological distress caused by these norms, and RCT highlighting the healing power of connections and relationships. This combination provides a holistic framework that captures the diverse experiences and challenges faced by male survivors, moving beyond the binary constraints of hegemonic masculinity (see Figure 7.1 for a visual representation of the framework). Future researchers should utilise this integrated approach, rather than selectively applying these theories, to ensure a nuanced and comprehensive understanding of MRMs and their impact on survivors. The remainder of this section argues why this should be the case.

Figure 7.1.

Theoretical Framework for Male Rape Myths: Gender Relations, Gender Role Strain, and Relational-Cultural Theories



Note. Solid lines = primary, direct connections, Dashed lines = bidirectional/interconnected influences, RM = Rape Myths

7.1.2.1 Gender Relations Theory

The Gender Relations Theory, as developed by Connell (2012) and Connell and Pearse (2015), offers a comprehensive framework for exploring gender dynamics and their impact on society, providing insightful perspectives on male rape myths. Central to this theory is the idea that gender dynamics cannot be understood in isolation; they must be examined through the interactions between different gender groups. This approach advocates for a holistic analysis of male and female rape myths, emphasising their interrelatedness rather than viewing them in isolation. The theory introduces the concepts of gender regime to explain how gender roles and expectations are structured within specific contexts and the broader society. Gender regimes, which detail the gender arrangements in localised settings, reflect and contribute to the societal gender order—the overall pattern of gender relations across different sectors. For example, the narratives from professionals and survivors in this thesis reveal that the Criminal Justice System (CJS) and support services exhibit gender regimes that influence the handling of MRMs. These settings, with their entrenched gender norms, lead to distinct approaches towards male and female survivors of rape and sexual assault, thus shaping societal perceptions and responses.

Professionals and survivors highlighted a systemic bias within the CJS, valuing traditional masculine norms such as toughness and stoicism. This bias can minimise empathy towards male survivors, reinforcing societal reluctance to recognise male victimhood due to prevailing beliefs in male strength and invulnerability. Concurrently, the treatment of female survivors often confronts gendered assumptions rooted in societal views on femininity and victimhood, focusing on scrutinising the survivor's behaviour, attire, or circumstances preceding the assault (Lonsway & Fitzgerald, 1994). These institutional biases reflect the gender regimes at play and impact the quality of support and justice for both male and female survivors. Meanwhile, the concept of gender order offers a macro-level view of how these gendered dynamics, deeply embedded in England and Wales' societal fabric, influence public perceptions, policy development, and support mechanisms.

Consequently, by applying gender relations theory to the study of MRMs, this research highlights the necessity of understanding gender to other gender groups, moving beyond a categorical approach that has traditionally dominated the field. This shift aligns with Connell and Pearse's (2015) argument against the sole reliance on hegemonic masculinity, which they suggest offers an incomplete picture of gender dynamics. Through a relational lens, this study revealed the interconnected nature of gender relations and their influence on societal narratives surrounding male rape, demonstrating that advancements in one gender group's understanding can significantly impact perceptions across genders. This comprehensive approach enriches our comprehension of MRMs and aligns with thematic

findings that call for a more nuanced exploration of gender dynamics. Furthermore, studies such as those by Davies and Rogers (2006) and Walfield (2018), which examine both male and female rape myths, serve as exemplars of the relational approach in action. These studies illustrate the critical importance of considering how myths associated with different genders interact and collectively shape societal attitudes towards rape survivors. Such an integrated analysis reveals the cumulative impact of gender-based myths, emphasising the necessity of a comprehensive approach to gender dynamics that can more accurately reflect the complexities of societal attitudes towards rape and sexual violence. The proceeding discussion focused on the gender relations theory's power, cathexis and symbolism domains that explain the creation and maintenance of rape myths.

In gender relations, power operates discursively and is shaped by societal norms and institutional practices. Within a patriarchal framework prevalent in the UK, power dynamics are influenced by traditional expectations of masculinity, positioning certain men at the top of the gender hierarchy. These dynamics exert control over both women and other men, establishing norms that often stigmatise vulnerability and emotional openness among men as signs of weakness (Pleck, 1995; UK Parliament, 2020). This cultural context directly influences male rape myths, reinforcing harmful stereotypes that "real men" should be invulnerable and self-reliant. Consequently, male survivors may avoid disclosing their experiences or seeking help, fearing emasculation or disbelief (Bonner-Thompson et al., 2023; Di Bianca & Mahalik, 2022; Kiss et al., 2020). The professionals (Study One, Discourse Three) highlighted instances where sexual violence support services other than their own, influenced by these gendered power dynamics, were unwelcoming or even hostile towards men, perpetuating the myth of men as sole aggressors and not victims (Study One, Discourse Three). Similarly, FRMs are also shaped by this power domain but manifest differently. FRMs frequently hinge on blaming the victim, scrutinising her behaviour, what she wore, or the situation she was in at the time of the assault (Burt, 1980). These myths propagate a societal view that labels women as inherently vulnerable and blames them for their victimisation, upholding a patriarchal system that limits acknowledgement and support for survivors based on ingrained gender stereotypes (Hunnicutt, 2009). Understanding the effect of gendered power on both male and female rape myths highlights the crucial need to question and dismantle the patriarchal beliefs and gender norms shaping these narratives. Tackling these myths necessitates a deep and thoughtful exploration of how gender and power intertwine within society, underlining the urgency for support systems that are genuinely inclusive and affirm the experiences of all survivors of rape and serious sexual assault, regardless of their gender.

In the realm of cathexis within gender relations, the emphasis lies on the profound influence of emotional connections and the broad spectrum of human emotions on social interactions and prevailing norms. This aspect underlines that reactions to a survivor's ordeal can be complex, encompassing both positive and negative emotions, and may lead to mixed or ambivalent feelings towards survivors, irrespective of their gender. For male survivors, as depicted in the narratives within this thesis, cathexis challenges prevailing myths that portray men's responses to sexual assault as uniformly stoic or unyielding (Depraetere et al., 2020). Such myths simplify the emotional complexity of male survivors, who, contrary to stereotypes, can exhibit a wide range of emotions, including fear, shame, and profound sadness, not just the 'masculine' responses of anger or stoicism, as demonstrated by the male survivors' discourses (Chapter Five). This acknowledgement expands the understanding of male rape myths by demonstrating that men, like any survivors, navigate a complex emotional aftermath following an assault. Conversely, FRMs often pivot around expectations of visible distress or vulnerability, potentially marginalising those whose reactions do not align with such narrowly defined emotional responses (Clark & Carroll, 2008). This highlights the critical role of cathexis in understanding rape myths, showing how gendered expectations hinder survivors' genuine emotional expression and access to empathy and support. The study emphasised the need to break down gender stereotypes and adopt a broader view of emotional experiences, moving beyond binary constraints on emotional expression. Recognising the diverse emotional landscapes of both male and female survivors of rape is crucial in combating rape myths and fostering a supportive environment for all survivors, acknowledging their humanity beyond gendered expectations.

In the domain of symbolism within gender relations, the focus shifts to how cultural symbols, media portrayals, and societal discourse construct and reinforce perceptions of gender, sexuality, and power. Symbolism significantly contributes to the entrenchment of both male and female rape myths by promoting narrow, stereotypical views of masculinity and femininity. For male survivors, cultural narratives often cast them as inherently dominant and invulnerable, suggesting that their experiences of rape are either improbable or less grievous than those of women. Such representations trivialise male victimhood-survivorship and fortify harmful stereotypes that deter men from disclosing their experiences, as previously discussed. Conversely, female survivors are frequently depicted in a manner that emphasises their vulnerability and passivity, potentially perpetuating victim-blaming attitudes and reinforcing the false dichotomy of sexual violence as a predominantly female issue (Clark & Carroll, 2008). These symbolic representations serve to maintain a gender order that prioritises certain narratives of sexual violence over others, thereby marginalising the experiences of male survivors and oversimplifying the complexities surrounding female

victimhood. The symbolic association of masculinity with power and control further complicates male survivors' willingness to come forward, as acknowledging victimhood could be seen as a relinquishment of their 'masculine' identity (Levant & Powell, 2017). Rape myths that question a man's physical strength or sexuality upon experiencing rape leverage these cultural symbols to silence and invalidate their experiences (Peterz & Vidmar, 2021). Similarly, the portrayal of female survivors often hinges on scrutinising their behaviour prior to the assault, perpetuating myths that implicitly blame them for their victimisation. Addressing rape myths requires scrutinising cultural symbols and narratives shaping gender and sexuality views. By challenging these structures, society can progress towards a more inclusive understanding that recognises the varied experiences of all survivors, regardless of gender. This approach underlines the need for gender relations theory to encompass a comprehensive exploration of how symbolic dimensions of gender relations influence societal attitudes towards rape and sexual violence, promoting a more equitable and empathetic response to all survivors.

Exploring power, cathexis, and symbolism within Gender Relations Theory (Connell, 2012) provides critical insights into the societal handling of rape myths, revealing how power dynamics bolster stereotypes: men are perceived as too strong to be victims, and women are seen as inherently vulnerable. This dynamic necessitates challenging patriarchal norms. Cathexis exposes emotional double standards, where male survivors face pressure to remain stoic, and female survivors are expected to display specific emotional responses (e.g. fear, tearfulness; Clark & Carroll, 2008), highlighting the need for broader emotional recognition. Symbolism further entrenches these stereotypes via media, perpetuating harmful myths and underscoring the urgency for more inclusive and nuanced gender understandings. The interconnectedness of these domains illustrates the profound societal impact of rape myths, advocating for a shift towards norms that support all survivors. Nevertheless, Gender Relations Theory offers a societal-level critique of rigid gender norms and their role in fostering rape myths. Therefore, there is space to explore the critique of rigid gender roles individually, which brings the discussion to the Gender Role Strain Theory (Levant & Powell, 2017; Pleck, 1995).

7.1.2.2 Gender Role Strain Theory

Gender Role Strain Paradigm (Levant & Powell, 2017; Pleck, 1995) posits that societal expectations for men to adhere to rigid, traditional masculine norms can significantly obstruct male survivors' paths to seeking medical and psychological support following rape or sexual assault. This adherence results in a trauma strain characterised by a psychological toll from the normative pressures to suppress emotions, which can impede internal acknowledgement, emotional expression, and the pursuit of support. This dynamic was

vividly illustrated in Study Two's Discourse One by male survivors who described this strain as “Bearing the unseen weight”, a narrative highlighting how societal norms deepen distress and isolation, as further evidenced in the survivors' discussions in Discourse Two. Similarly, professionals addressed these challenges in Discourse One, “Professionals’ Insights: Societal Myths, Acquaintance Rape Realities, and Legal Obstacles.” Additionally, Study Three underscored the role of male rape myth acceptance (MRMA) as a predictor of victim and perpetrator blame, irrespective of the perpetrator's gender. This suggests that entrenched societal norms around masculinity and femininity not only foster psychological distress but also contribute to the strain experienced by individuals facing scenarios that defy traditional gender roles, such as males being victims or females being aggressors. Through these discussions, it becomes clear that the expectations and myths entrenched in our societal fabric exert a profound influence on the experiences of male survivors, necessitating a nuanced approach that acknowledges and addresses the complexities introduced by rigid gender norms and their impact on survivors’ paths to healing and support.

While some may argue that the concept of hegemonic masculinity could explain the observed strain, this thesis contends that its applicability is inherently limited. One critical limitation, as highlighted by the broader literature, is that female and non-binary survivors of rape also experience gender role strain, a reality that hegemonic masculinity fails to address adequately. Gender Role Strain Theory, by contrast, recognises how restrictive gender norms inflict strain across the gender spectrum, adversely affecting the mental health and well-being of individuals regardless of gender identity (Harrington et al., 2022). For instance, female survivors might confront societal expectations to display ‘appropriate’ emotional responses or deal with the stigma associated with victimhood (Krahé et al., 2015). At the same time, non-binary and transgender individuals face challenges from their experiences being invalidated due to rigid binary gender norms. Furthermore, GRS uniquely focuses on identifying and dismantling the barriers—such as pervasive rape myths—that contribute to gender role conflict or strain, offering pathways for psychological relief and well-being. It advocates for personal and therapeutic interventions that empower individuals to navigate and resist restrictive gender norms, a focus that extends beyond the critique of hegemonic masculinity's emphasis on the negative impacts of traditional masculinity on men. By applying Gender Role Strain Theory to the study of rape myths, this research expands the discourse to encompass the varied experiences of all survivors, moving beyond the limitations imposed by a hegemonic masculinity framework. This approach acknowledges the broad spectrum of gender identities and experiences. It emphasises the need for a comprehensive understanding and mitigation of the distress caused by gender role

expectations, thereby advocating for a more empathetic and inclusive response to sexual violence survivors, and a suggested way to mitigate this strain is from RCT.

7.1.2.3 Relational Cultural Theory

Study Two illuminated the critical role of support from friends, family, and therapy in the healing journeys of male survivors, resonating with Di Bianca and Mahalik's (2022) findings on promoting healthier masculinities through RCT. This theory's critique of oppressive traditional masculinities and its application across genders (for the mapping of RCT, see West, 2005)— suggests its potential to significantly challenge and transform male rape myths in England and Wales by addressing the harmful effects of these norms. Specifically, RCT addresses the societal pressures on men to suppress emotions, evidenced in study three, where rape myths predict victim blame across different perpetrator genders which illuminated the societal inclination to discredit survivors, discouraging them from coming forward. This societal response has been shown to exacerbate the isolation experienced by survivors (Campbell, 2006), particularly those marginalised by their experiences as male survivors of rape and sexual assault, complicating their ability to express vulnerability and seek support. The emphasis on broader emotional expression, personal growth, and compassionate interactions as antidotes to MRMs aligns with the study's findings, where the professionals' practice of acknowledging survivors' experiences and pacing support according to their readiness demonstrates RCT's principles in action.

To close this argument, the application of RCT, alongside insights from Gender Relational Theory and Gender Role Strain Theory, offers a comprehensive framework for understanding the diverse experiences of all survivors. This approach challenges the narrow focus of hegemonic masculinity by highlighting the interconnectedness of male and female rape myths and the broader societal narratives that misconstrue male victimhood-survivorship. This study emphasises the need for societal evolution toward understanding and actively combating sexual violence, calling for a compassionate and inclusive treatment of all survivors. Through the application of these theories, the analysis sheds light on the mechanisms through which societal expectations contribute to the reinforcement of rape myths, advocating for a relational strategy that moves beyond conventional gender norms. This holistic view acknowledges the interconnected experiences of survivors, promoting healing and support across genders. Thus, RCT, with its focus on relational healing, coupled with the broader critiques offered by Gender Relational Theory and Gender Role Strain Theory, marks a pivotal advancement in redefining the discourse around sexual violence, moving beyond the stereotype of men as solely perpetrators to recognise the transformative power of empathy and connection in dispelling MRMs.

7.1.3 Disciplinary Power Over Recovery

7.1.3.1 Dominance of Physical Evidence

The results of this mixed methods study revealed that male survivors of sexual violence face considerable obstacles within the legal system, which intensify their distress following the assault. This aligns with prior research on male survivors of sexual violence (Widanaralalage et al., 2022a), intimate partner violence ([IPV]; McCarrick et al., 2016), and female survivors of sexual violence (Hohl & Stanko, 2015) and their interactions with the criminal justice system. Studies One and Two highlighted the complexity and often adversarial nature of the legal process for male survivors, which can lead to secondary victimisation (Campbell, 2006). These complexities from Study One (Discourse Two) and Study Two (Discourse Two) comprised limited access to support and the re-traumatising effects of legal procedures. Additionally, the qualitative studies' findings indicated that a heavy reliance on physical evidence in legal proceedings, often associated with resistance-based male rape myths, presented significant challenges for male survivors of sexual violence. The lack of traditional signs of struggle or the misinterpretation of ejaculation as consent further complicated the acknowledgement and validation of their experiences (Bullock & Beckson, 2011). This issue is not confined to male survivors as it is a common difficulty in sexual violence cases across genders (Kiss et al., 2020), highlighting the need for a more sophisticated understanding of consent and the interpretation of evidence. Nevertheless, the emphasis on physical resistance as a marker of non-consent perpetuates MRMs and has the potential to influence jury decision-making (Willmott & Widanaralalage, 2024). As demonstrated in Study Three (Chapter Six), resistance-based elements within the acquaintance rape scenarios played a considerable role in predicting blame attributed to both victims and perpetrators in cases of rape and sexual assault. This finding points to the critical need for educating legal professionals and juries about the complexities of sexual violence and the diverse ways it can manifest, moving beyond the emphasis on the presence of physical resistance and verbal consent.

Additionally, the current study unveiled challenges such as the stigmatising use of the term 'victims' in legal settings and constraints on discussing the case, mirroring obstacles identified in female rape research regarding legal and procedural alienation of survivors (Jeffery, 2021). These aspects, particularly the label 'victim,' may reinforce feelings of powerlessness and stigma, while limitations on case discussion can intensify isolation and frustration among survivors. Such dynamics accentuate the psychological toll of the legal process on those who have already suffered significant trauma (Widanaralalage et al.,

2022b). Study One highlighted the professional support to assist survivors in deciding whether to report, a critical factor in navigating legal complexities and emotional burdens of seeking justice. This is akin to Campbell's (2006) observation that female survivors with access to Sexual Violence Advisors reported more positive police interactions. Furthermore, Study Three's insights into how both low and high rape myths predict victim blame, irrespective of the perpetrator's gender, highlight the persistent influence of societal and legal biases in processing sexual violence cases. This indicates a critical need for a legal system that recognises the complexities of sexual violence beyond traditional myths and gender stereotypes, ensuring a more nuanced approach to support all survivors.

Furthermore, the second study illuminated that male survivors often have a profound understanding of the legal aspects concerning their cases. This indicates that, despite the anticipated legal obstacles, male survivors can, and frequently do, gain a nuanced comprehension of the legal framework pertinent to their experiences. This finding challenges the assumption in research that survivors' awareness of the legal system only arises from direct engagement (Ministry of Justice, 2022). In Study Two, legal awareness was a prominent theme in the narratives, evidenced in Discourse Two, even though only two out of nine male survivors had interacted with the legal process. This suggests a broader awareness among male survivors of the legal implications of their experiences, pointing to an underexplored area of male survivors' legal consciousness that warrants further investigation.

7.1.3.2 Secondary Victimisation from Repetitive Recounting

Moving on to the second aspect of this argument, it is crucial to acknowledge that the nature of the legal and support process itself can be a source of secondary victimisation, separate from the impact of individual attitudes or rape myths held by professionals. This distinct perspective was illuminated in Studies One and Two, where the repetitive recounting of traumatic events was highlighted as a substantial psychological burden on survivors (Campbell et al., 2009). As a result, there is a critical need for reforms aimed at streamlining testimony collection to minimise this psychological impact (Holder & Englezos, 2024). A more efficient and sensitive approach to gathering survivors' testimonies could significantly reduce the re-traumatisation associated with legal proceedings. Furthermore, the study sheds light on the broader issue of re-victimisation that extends beyond the confines of the legal system. Survivors often face the arduous task of revisiting their trauma in various contexts, including support service interactions. This continuous engagement with traumatic memories can be profoundly distressing, emphasising the necessity of implementing trauma-informed practices across all support and legal frameworks (Ellis et al., 2020; Smith, 2017). This need aligns with existing research on male (Widanaralalage et al., 2022b) and female

rape, which similarly points to the pervasive and detrimental effects of re-victimisation (Jeffrey, 2021). Such findings further highlight the importance of adopting practices that are cognisant of the trauma experienced by survivors, ensuring that all interactions, whether legal or supportive, are conducted in a manner that prioritises their psychological well-being and facilitates their recovery journey.

7.1.3.3 Discrepancies in Service Provisions

As a closing note, the study highlighted notable discrepancies in training, resources, and accreditation among support services for male survivors of sexual violence, which were mainly due to varying funding levels. These disparities necessitate a systematic review and enhancement to ensure uniform, high-quality care for all male survivors (Ellis et al., 2020). The study revealed that the current state often leads to uneven experiences for survivors; discussions from Study One (Discourse Three) and Study Two (Discourse Four) highlighted a pressing demand for more tailored support services for males. This is supported by the Home Office's (2022) policy paper on Supporting Male Victims, which recognises service availability as a crucial barrier for male survivors. A standardised approach in training and resource distribution, including education on subtle and overt male rape myths as predictors of victim blame (Study Three), is advocated to enhance support effectiveness and reliability across different locations and providers. This focused training can equip professionals with the tools necessary to challenge pervasive myths and provide more nuanced support to survivors, regardless of their location or the specific service they access (Silk, 2023).

Additionally, the study illuminated gender disparities among practitioners in the field of sexual violence support, with a notable predominance of female professionals. This gender imbalance might affect male survivors' comfort and willingness to seek help. This observation, supported by professionals' acknowledgement of the scarcity of male-centric services and the expressed need for more excellent male representation in support services, points towards the societal and institutional norms that influence these disparities (Study One, Discourse Three; Mahalik et al., 2012; Seidler et al., 2017). The desire among male survivors for more representation stresses the need for diversifying the gender makeup of professionals in this sector, potentially creating a more relatable and supportive environment for male survivors' recovery journey.

7.2 Strengths and Implications

The application of discourse analysis in this study provided an opportunity to explore the naturalistic aspects of MRMs. This method allowed for an in-depth examination of MRMs' construction, maintenance, and potential deconstruction within real-world settings, which

were then tested in a broader public sample. This section discussed the strengths of the thesis which were pragmatism, the mixed methods approach, qualitative and quantitative components, and their practical implications. Hopefully, these recommendations will inspire action across various psychology, research, institutions, practice, and social science fields.

7.2.1 Pragmatism and Mixed Methods to Practice

7.2.1.1 Pragmatic Approach

A key strength of this study was its foundation in James's pragmatism (1975), guiding it towards a practical, action-oriented understanding of MRMs. Through emphasising the utility of ideas and outcomes, the study's design integrated qualitative insights with quantitative data to tackle the real-world complexities of MRMs. They focused on the implications of societal beliefs and actions regarding MRMs, and the research aimed to uncover actionable insights for enhancing support for male survivors of sexual violence. Centring on survivors' experiences yielded theoretical and practically relevant findings. In line with this pragmatic approach, a recommendation is to develop and implement targeted interventions addressing the identified misconceptions and needs among male survivors. Educational programs for law enforcement and healthcare providers, informed by qualitative insights into MRMs, are proposed to improve their understanding and empathy towards male survivors. This initiative marks a crucial step in transforming academic research into practical measures that offer tangible support and empowerment to male survivors of sexual violence.

7.2.1.2 Mixed Methods Approach

Additionally, this research's mixed methods design highlighted the crucial role of merging qualitative insights and quantitative data to guide effective interventions and policymaking. A practical suggestion arising from this study advocates for a collaborative, multidisciplinary strategy to address MRMs. By bringing together experts from forensic and health psychology, counselling, criminology, law, education, and policymaking, to name a few, a unified approach that leverages the comprehensive findings of this study can be fostered. Such collaboration is vital for crafting and executing informed strategies that tackle the nuances of MRMs, ensuring that interventions and policies are grounded in a deep understanding of the issue from multiple perspectives. This coordinated effort is essential for initiating meaningful change and providing holistic support to survivors of sexual violence.

Finally, a key strength of this study was its methodical handling of common validity threats in exploratory sequential mixed methods research, including (1) ensuring the quantitative design's rigour, (2) grounding quantitative measures in qualitative findings, and (3) diversifying participants between the qualitative and quantitative phases to avoid sample overlap. The study adopted a systematic approach to construct the quantitative component

to address these concerns. It repurposed a scenario and blame scale by Sleath and Bull (2010), validated in the UK context, adapting it to incorporate mythic elements identified in narratives from professionals and survivors. This led to the creation of a novel variable that significantly predicted blame towards victims and perpetrators, affirming the utility of acquaintance rape and sexual assault scenarios in examining public perceptions of male rape myths. Based on qualitative insights, this variable's development represents a notable contribution to the field, offering a rigorous tool for future research to dissect and counter MRMs (Morgan, 1998; Morse, 1991). The community sample size was large enough to ensure statistical significance and revealed substantial effect sizes, further supporting the study's findings (Schäfer & Schwarz, 2019). Future research endeavours should persist in tackling validity concerns with strategies like participant diversification and integrating qualitative findings into quantitative frameworks. This will help ensure that investigations into MRMs remain pertinent and deeply rooted in the lived realities of those affected, contributing to a more nuanced and impactful understanding of the issue.

7.2.2 Qualitative insights

Delving into MRMs and survivor experiences through Discourse Analysis, the qualitative phase of this study offered profound insights into the nuanced landscape of male rape myths. Utilising narratives from professionals (Study One, Discourses One and Two) and survivors (Study Two, Discourses One through Four), a practical implication involves creating comprehensive training modules for support service workers. These modules should focus on recognising and effectively challenging MRMs in their interactions with survivors, thereby fostering a more supportive and understanding environment. This approach leverages the rich qualitative data to inform and enhance the practices of those directly working with male survivors, aiming to dismantle the pervasive myths that hinder adequate support.

Further, the study's findings, particularly from survivors' narratives (Study Two, Discourses One and Four), underscore the necessity of developing public awareness campaigns. These campaigns should highlight the multiplicity of experiences among male rape and sexual assault survivors (e.g. similar to I May Destroy You, BBC & HBO, 2020), countering stereotypical portrays of male rape and established and yet-to-be-established myths. This would contribute to a more nuanced public understanding of male rape, reducing stigma and encouraging a societal shift towards greater empathy and support for all survivors (Nagy, 2023). Both suggestions aim to translate qualitative insights into actionable strategies that directly address and mitigate the impact of MRMs, as revealed through the detailed analysis of professional and survivor discourses.

7.2.3 Quantitative Conformation

The study's findings highlight that interventions need to go beyond debunking the most common rape myths. Instead, they should address all kinds of misconceptions about male rape and sexual assault, particularly those that are not supported by the survivor's lived experiences, empirical data or do not align with legal standards (Picton et al., 2023). This broader approach can foster a society that has a deeper understanding of male rape and sexual assault. The quantitative phase of this research highlighted the influence of MRMs on how the public perceives these cases, offering robust evidence of their impact. First, confirmatory research must be initiated to validate and expand upon this study's findings. This step would involve designing studies specifically aimed at testing the relationships and predictions identified in the current research. By employing a mix of quantitative and qualitative methodologies, future research can further investigate the nuances of male rape and sexual assault myths, ensuring the generalisability and robustness of the initial findings. Such confirmatory studies are crucial for solidifying our understanding of male rape myths' effects on societal attitudes and the criminal justice system's handling of male survivors, ultimately contributing to more informed and effective interventions and policies. Second, Leverage the insights from this study to inform policy discussions and advocate for changes in legal and procedural frameworks. By integrating a more sophisticated understanding of consent and the realities of sexual violence, policies can move away from oversimplified narratives that fail to capture the complexities of these experiences. These practical suggestions aim to translate the academic findings into tangible changes that improve societal understanding and support for survivors of male rape and sexual assault.

7.3 Limitations and Future Research

This exploratory mixed methods study has significantly advanced our understanding of MRMs in England and Wales, making notable contributions to Forensic Psychology. However, there are limitations to consider, which subsequently open avenues for future research. Addressing these limitations can further our understanding and contribute to more comprehensive support for all survivors of sexual violence. Firstly, while this study has extensively explored the perspectives of survivors and professionals within the CJS, it lacked direct input from law enforcement officers. Future research should aim to include these perspectives to provide a more rounded view of the challenges and dynamics at play within the CJS concerning male rape myths. Research akin to Murphy and Hine (2019), which used questionnaires or Jamel (2010), which involved direct conversations with police officers, could shed light on law enforcement's attitudes, beliefs, and procedures that impact male survivors of sexual violence. Secondly, the descriptive analysis of qualitative responses in the third study was limited by the responses' brevity and lack of depth. Future research

could focus on eliciting more detailed narrative responses from the public. By employing methodologies such as Anderson (2007) and Davies and colleagues (2013), researchers could invite participants to provide extensive narratives in response to specific prompts. This approach would allow for the application of Thematic or Discourse Analysis, offering more profound insights into the public's creation, maintenance, and deconstruction of rape myths. Such narratives could be particularly enlightening in understanding the views of potential jurors and the public, providing crucial data for designing interventions that effectively challenge and alter prevailing male rape myths.

Thirdly, this study primarily focused on cisgender participants, aligning with the gender-specific framework of English Law, which predominantly recognises and supports cisgender male survivors. This approach, however, overlooks the experiences of non-binary and transgender individuals, highlighting a significant gap in legal and social recognition. Future research should, therefore, encompass a broader spectrum of gender identities to ensure a more inclusive understanding of sexual violence. By engaging with gender-diverse populations and utilising inclusive research methods, future studies can uncover the unique challenges these groups face and how rape myths affect them differently or similarly. This inclusive research approach would provide a richer, more comprehensive understanding of sexual violence, informing policies and practices that cater to the diverse needs of all survivors beyond the cisgender male experience. In practical terms, future studies could employ targeted recruitment strategies and methodological designs that specifically invite participation from gender-diverse populations. This could involve collaborating with LGBTQIA+, sexual violence support, and general sexual health organisations and communities to ensure the research reaches and resonates with a broad spectrum of survivors. Additionally, adapting research tools and language to be explicitly inclusive and respectful of all gender identities would be crucial in facilitating the engagement of diverse participants.

Fourthly, the applicability of this study's findings is somewhat constrained by its specific temporal context—the early 2020s during and following the COVID-19 pandemic in England and Wales, with broader implications in the UK for the third study. To address the limitation related to this study's specific temporal and geographical context, future research should aim to replicate and extend the investigation of MRMs, FRMs and gender-considerate rape myths in various settings. This could involve conducting similar mixed methods studies in different cultural contexts or at different times, allowing for a comparison of how rape myths may evolve or vary across regions and periods. This approach would broaden the scope of the research and enhance transferability, contributing to a more

comprehensive and nuanced global understanding of sexual violence across the spectrum of gender identities.

Lastly, the focus of this study on MRMs provided critical insights into societal perceptions and the experiences of survivors, highlighting areas for improvement in support and understanding. However, this emphasis meant that specific practical advice on training professionals, streamlining survivor testimony, and other procedural improvements were not directly addressed. Addressing these areas is a crucial next step for future research. To address the gap in practical advice on training professionals and streamlining survivor testimony, future research could adopt an action research design, engaging directly with survivors, forensic or health psychologists, sexual trauma specialists, Independent Sexual Violence Advisors, and support service providers. This design would involve iterative cycles of planning, action, observation, and reflection, aiming to develop, implement, and evaluate training modules and procedural guidelines informed by both the insights into MRMs from this study and the lived experiences of survivors. Collaborating with these stakeholders, the research could focus on creating interventions that effectively challenge MRMs, enhance empathy, and improve the legal and support process for survivors. This approach would ensure that the research outcomes are immediately applicable and beneficial in real-world settings, contributing to a more informed and supportive environment for all survivors of sexual violence.

7.4 Conclusion

To conclude, this mixed-methods investigation sought to enhance the comprehension of MRMs through a sequential design. It unveiled three critical perspectives for understanding MRMs. First, the discourses from service providers and health professionals shed light on the genesis of rape myths beyond merely cataloguing established myths. The qualitative narratives and the quantitative study's significant regression models demonstrated that both subtle and overt rape and sexual assault myths significantly influence blame attribution, underlining victim-blaming as a direct outcome of MRMs (Burt, 1980). This revelation underscores the urgency to reassess and enrich our collective perception of male rape to create a more empathetic and informed support system for survivors. Additionally, the study revealed that MRMs' complexities extend beyond the scope of hegemonic masculinity theory (Connell, 2005; Connell & Messerschmidt, 2005) alone, touching upon the broader implications for survivors' well-being post-assault, the role of practitioners in providing support, and the potential biases of public jurors. This called for a comprehensive framework that encompasses gender relations theory (Connell, 2012; Connell & Pearse, 2015), gender role strain theory (Harrington et al., 2022; Levant & Powell,

2017; Pleck, 1995), and relational cultural theory (Di Bianca & Mahalik, 2022; West, 2005), thereby offering a richer conceptual lens to understand MRMs. This integrated approach accentuates the dynamic interplay of societal norms, individual experiences, and cultural contexts in shaping male rape perceptions and survivorship. It highlights the necessity of acknowledging gender's multifaceted influence on the formation and perpetuation of rape myths. Furthermore, the study highlighted the legal system's and societal norms' disciplinary power over male survivors' recovery journeys. It pointed out the procedural and bureaucratic hurdles that can amplify survivors' trauma, resulting in secondary victimisation (Campbell, 2006), encouraging systemic reforms and the adoption of trauma-informed practices across all supportive and legal frameworks. These insights hold value for stakeholders such as male survivors, survivors of sexual violence, support services for male survivors of rape and sexual assault, policymakers, the public, researchers, and academics. Future research is encouraged to explore the experiences of a more diverse participant population in terms of gender expression, further enriching our understanding of rape myths and their impact.

7.5 Solitary Functional Reflection

In this section, I reflected on what went well and what I could have done differently if I were to redo the research. I focused on the research process, the outcomes, and me.

7.5.1 *Evaluation of the research process*

Reflecting on the methodology of conducting three distinct studies under the pragmatic worldview has been a formidable journey. The process required meticulous planning, extensive reading, and a deep understanding of the best methods to address the research questions. Initiating the design of the first study, navigating through ethics approval, conducting the research, analysing the findings, and then replicating this rigorous process for the subsequent two studies demanded significant time and resources. Opting for discourse analysis in the initial two studies was a decision I now view as pivotal. This approach allowed me to explore not just the surface-level myths about male rape but the more profound, nuanced understandings held by professionals and survivors. This methodological choice moved the research beyond potentially accusatory direct questions about myths towards a more comprehensive understanding of the perspectives of those directly involved in supporting survivors or navigating their recovery. The discourse analysis illuminated the intricate power dynamics at play, the construction, maintenance, and deconstruction of discourses around male rape. It highlighted additional processes, such as navigating the criminal justice system and seeking support.

Additionally, the quantitative phase of the study aimed to extend these insights by examining the broader public's perceptions and attributions of blame in rape scenarios, employing a novel variable developed from the qualitative findings. This phase was instrumental in testing the applicability and predictive power of subtle and overt rape myths in a broader context, further validating the qualitative insights. If allowed to redesign the study, I would have placed a stronger emphasis on diversifying the sample in terms of ethnicity, gender identity, and sexual orientation to ensure a broader representation of experiences and perceptions regarding MRMs. This would address potential gaps in understanding the cultural and intersectional dimensions of male rape myths and their impact on survivors from diverse backgrounds.

7.5.1 Evaluation of Outcomes

Reflecting on the outcomes of this research, it is becoming clear that traditional notions of masculinity may not be the barrier they once were. Despite societal expectations aligning with hegemonic masculinity ideals, which theoretically could impose a trauma strain, narratives from both professionals and survivors in this study illuminate a different reality. These individuals not only sought support but found it beneficial, challenging the assumption

that adhering to masculine norms precludes the possibility of seeking help or participating in research on sensitive topics like sexual violence. This observation underscores the need for a shift in perspective within the research and societal discourse surrounding male survivors of sexual violence. Persisting in a dichotomous divide between genders in addressing sexual violence is counterproductive. Such an approach, fixated on definitions and eligibility of victimhood, inadvertently fosters a hierarchy of suffering, which does little to advance the understanding or support for survivors. Recognising the gendered aspects of this crime is crucial, but it should not occur in isolation. A comprehensive understanding requires considering the experiences across all genders, suggesting a move towards more inclusive research and support frameworks.

If I could do this study again, I would still have focused on male rape myths. Still, I would also have expanded the application of rational gender theory to include discussions among survivors from different gender identities (e.g., women, transgender individuals, and non-binary people), as this could be particularly enlightening. Such an approach would be pivotal in understanding the interaction of gender orders to gain a more nuanced comprehension of sexual violence dynamics across gender spectra. Furthermore, I noticed a noticeable cultural gap in our understanding of male rape myths, predominantly framed within a Global Northern, specifically Western European context. Thus, if I could do it again, I would look beyond these geographical and cultural confines, e.g. examining the strategies and insights from countries like South Africa, which is actively working to shed its "rape capital" label, which could offer fresh perspectives. Their efforts to challenge and change the narrative around sexual violence might provide critical lessons for addressing male rape myths more effectively in contexts like England and Wales. By comparing different cultural approaches to understanding and dismantling harmful myths about sexual violence, we can broaden our knowledge and develop more effective interventions.

7.5.2 Personal Evaluation

Reflecting on this journey, I recall the advice given to me early on about assessing my long-term commitment to my research topic. I was asked to consider if I could maintain interest and motivation over four years, especially on days when my enthusiasm might wane. At first, I was confident in my ability to manage emotionally. However, I realised that navigating this research as a neurodivergent individual would present unforeseen challenges. This project was intellectually demanding and emotionally taxing. The choice to use Foucauldian Discourse Analysis for qualitative analysis, coupled with my dyslexia, which affects my reading speed, writing clarity, and grasp of grammar, initially made applying discursive analytical tools daunting. Furthermore, learning R Studio Code for my third study

posed its own set of difficulties. Despite these hurdles, the moments when everything finally clicked into place were immensely rewarding.

Moving on to the complexity and emotional weight of focusing on male survivors of sexual violence required a depth of analysis that pushed my limits. Mastering the methodologies involved became a source of personal invigoration. To cope with the mental and emotional strain, I developed a comprehensive self-care regimen, supported by breaks, and outlined in my reflexivity section (Chapter Six). This strategy was vital for sustaining my capability to persist with this critical work. I take great pride in managing this research journey and engaging with professionals, male survivors, and the general public. If I were to do anything differently, it would be to better plan for personal milestones and accommodate my dyspraxia, which affects my processing speed and my self-esteem. Additionally, I would communicate more openly about my learning differences with my supervisors from the outset to ask for constructive feedback to understand why something needed amending, as I sometimes found the feedback challenging to decipher.

Summary of chapter

This chapter provides a comprehensive summary of the findings from all three studies, offering a deeper understanding of Male Rape Myths through both qualitative and quantitative lenses. It revisits critical insights from each study, consolidating the overarching arguments that emerge from the research. The discussion highlights the strengths and implications of employing a mixed methods approach and acknowledges the limitations encountered during the study. Recommendations for future research directions are proposed, emphasising the importance of building on the foundational knowledge established by this work. The chapter concludes with a final reflection, underscoring the significance of the combined findings in contributing to the broader discourse on MRMs and advocating for informed changes in societal perceptions and legal frameworks.

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Appendices

8 Appendix A: Study One Organisation Gatekeeper Email

Dear [Name]

I am writing to ask your permission to conduct research within your [organisation/trust/department/charity] for a study titled A Mixed Methods Study of Society's Perception of Male Rape, which will be submitted for ethical approval.

This is being conducted by myself Ngosa Kambashi MBPsS from De Montfort University Leicester as part of my Postgraduate Research Degree in Psychology. The study will be approved by Health and Life Sciences Research Ethics Committee. As part of the approval process, I am required to obtain gatekeeper permission from sites where I recruit participants and go through your ethical approval process.

The aim of the study is to explore professionals' perceptions of male rape in the UK. Particularly professionals who may work with male survivors of rape on a day to day basis. I have attached the study information sheet, and interview schedule for more details. The intent of the study is to bring awareness to the under-researched area of male survivors of rape. The study consists of a face-to-face or online interview that can last up to 60 minutes depending on participants' availability and how much detail they wish to provide.

I would like to invite you to assist me in conducting the research study, through providing feedback on the interview schedule, allowing me to recruit members of staff from your [organisation/trust/department/charity], and helping me distribute the study poster within your organisation [organisation/trust/department/charity].

If you are interested and would like to further discuss the study please contact me via email Ngosa.kambashi@my365.dmu.ac.uk .

If you are willing to be involved in the research, then please sign the attached permission statement form and return it to this email. Alternatively, you can reply to this email explicitly giving permission for the study to be conducted within your [organisation/trust/department/charity].

9 Appendix B: Study One Adverts

Participants needed!

Title of project: A Mixed Methods Study of Professionals', Survivors', and Community Perceptions of male rape myths

My name is Ngosa Kambashi, I am a PhD student in Psychology at De Montfort University, and I would like to invite you to participate in a study.

What is the purpose of the study?

The purpose of the research is to explore professionals' perceptions of male rape victims.

Who can take part in the study?

I would like to speak to professionals who may encounter male victims of rape as part of their normal day to day work. Your views will provide in-depth and meaningful insight on the topic of male rape in social research.

What do I need to do?

You will need to be 18 and over to participate. You will take part in a face-to-face or online interview, which will take up to 60 minutes.

10 Appendix C: Study One Information Sheet

Title of project: A Mixed Methods Study of Professionals', Survivors', and Community Perceptions of male rape myths

You have been invited to take part in a study: Before you decide whether to take part it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully and take time to decide whether you wish to take part. Feel free to ask us if there is anything that is not clear or if you would like more information.

What is the study about?
I am a PhD student at De Montfort University supervised by Dr Amanda Wilson (amanda.wilson@dmu.ac.uk), Dr Joanne Rechdan (joanne.rechdan@dmu.ac.uk) and Dr Elizabeth Noon (enoon@dmu.ac.uk). The main aim of the study is to explore professionals', survivors', and lay people's perceptions of male rape. The research will concern the topic of rape, if you feel upset by this information then details to Samaritans and other external support contact information are available for you at the end of the information sheet.

Why have I been chosen?
I would like to speak to professionals who may encounter male survivors of rape as part of their normal day to day work. Your views will provide in-depth and meaningful insight on the topic of male rape.

What does the study involve?
The study will involve an interview where we will discuss your experience of working with male survivors of rape and you will be asked to read a short non-graphic story about a sexual assault. The interview will take place face-to-face or online (e.g. skype or similar platforms). The interview will last up to an hour depending on how much information you wish to provide and your availability. Rape is a sensitive topic to discuss, and you may feel upset because of taking part in the study. If you feel upset during the interview it can be stopped immediately, and you can do this by saying "Stop". You also have the right to refuse any questions you do not want to answer, and you can do this by saying "pass" or "I do not want to answer that question". Only an audio recording of the interview will be made with your permission. You are free to contact the researcher within 48 hours of the interview to ask any questions you have about your interview. You can also withdraw from the study during the study and up to 48 hours after your interview, by sending an email to the researcher with your participation number and request to withdraw from the study. You do not need to give a reason for withdrawing from the study at any point. External emotional support contact information is available to you at the end of the information sheet.

Do I have to take part?
You are not required to take part. Participation is completely voluntary, and it is up to you to decide if you want to take part or not. If you do choose to take part, you will be given this information sheet to keep and be asked to give informed consent on an online form. If you choose to take part, you can still withdraw from the study at any time during the study and up to 48 hours after the interview without giving any reason. For details on how to withdraw see section 8 and see the end of this information sheet for external emotional support contact details.

I am interested in taking part, what do I do next?
You can contact the researcher via email ngosa.kambashi@my365.dmu.ac.uk.

What if I agree to take part and then change my mind?

You have the right to withdraw from the study at any time without giving any reason, and up to 48 hours after the interview without giving any reason. For details on how to withdraw see section 8.

Will my taking part in this study be kept confidential?
All information collected during the research will be kept on a password protected database which is General Data Protection Regulation (GDPR) 2018 compliant and strictly confidential. The audio recorded interviews will be transcribed. During transcription your personal information, and any information that could be used to identify you will be removed or altered. Your email address or contact number will be required for the researcher's use only (i.e. to book the interview). All audio recordings and transcripts will be kept up to 5 years after the study has been completed in accordance with De Montfort University's Data retention policy, and GDPR 2018. My three supervisors and myself will have access to your interview recordings, and interview transcripts. Members of the Faculty Human Research Ethics committee may require access to check that the study has been conducted in accordance with the ethical requirements for approved research.

Any identifiable information about your organisation will not be included in the study, though organisations who wish to be acknowledged in the study can do so by granting permission. Additionally, In accordance to the British Psychology Society's (2014) Code of Human Research Ethics and GDPR 2018, you should be aware that I may be duty bound to pass on information you may provide which reveals that: there is a risk of harm to you or someone else, or harm has occurred to a child or vulnerable individual.

What are the possible disadvantages and risks of taking part?
Rape is a sensitive topic to discuss, and you may feel upset as a result of taking part in the study. If you feel upset during the interview it can be stopped immediately, and you can do this by saying "Stop". You have the option to continue the interview, arrange to continue another day, or withdraw from the study completely. During the interview, you can withdraw from the study by saying that you wish to withdraw. If you reschedule to complete an interview but change your mind, you can email the researcher with your participation number and request to withdraw from the study. You can also withdraw from the study up to 48 hours after the interview by sending an email to the researcher with your participation number and request to withdraw from the study. You do not need to give a reason for withdrawing from the study at any point. My contact details are available to you at the end of the information sheet if you wish to discuss any concerns you have about the study. Contact information for external charities will be provided for support and training at the end of the information sheet.

What if something goes wrong?
If you are harmed by taking part in this research project, there are no special compensation arrangements. If you are harmed due to someone's negligence, then you may have grounds for a legal action, but you may have to pay for it. Regardless of this, if you wish to complain, or have any concerns about any aspect of the way you have been approached or treated during this study, the normal University complaints mechanisms should be available to you.

Who can I complain to?
If you have a complaint regarding anything to do with this study, you can initially approach me. If this achieves no satisfactory outcome, you should then contact my supervisors. If this achieves no satisfactory outcome, you should then contact the Administrator for the Faculty Research Ethics Committee, Research & Innovation Office, Faculty of Health & Life Sciences, 3.35 Edith Murphy House, De Montfort University, The Gateway, Leicester, LE1 9BH or hlsfro@dmu.ac.uk

What will happen to the results of the research study?

The findings of the research will be presented in my PhD Thesis, conferences, and publications. No participants and organisation will be identifiable by information in my PhD thesis, conferences, and publications. However, organisations can give permission to be acknowledged in the information in my PhD Thesis, conferences, and publications should they wish. You can email me if you would like a copy of the findings. It is hoped that these findings will assist in providing awareness to the topic of men who have been raped.

Thank you for taking the time to read this information sheet

Contact for Further Information

Researcher: Ngosa Kambashi
Email:
ngosa.kambashi@my365.dmu.ac.uk
Tel: 07593 267 957

First academic supervisor: Dr Amanda Wilson
Email: amanda.wilson@dmu.ac.uk
Tel: 01162 078 815

Second academic supervisor: Dr Joanne Rechdan
Email: joanne.rechdan@dmu.ac.uk
Tel: 01162 078 861

Third academic supervisor: Dr Elizabeth Noon
Email: enoon@dmu.ac.uk
Tel: 0 1162 577 823

External support information

Samaritans
Website: http://www.samaritans.org/
Email: jo@samaritans.org.
Helpline: 08457 909 090 or 116 123

Support Line
Website: http://www.supportline.org.uk
Email: info@supportline.org.uk.
Tel: 01708 765 200

Turning Point Leicester
Website: http://wellbeing.turning-point.co.uk/leicestershirementalhealth/
Email: Leicestershire.crisis@turning-point.co.uk
Helpline: 08088 003 302
Men's Advice Line: 08088 010 327
Confidential helpline for men experiencing domestic violence from a partner or ex-partner

11 Appendix D: Study One Consent Form

Title of project: A Mixed Methods Study of Professionals', Survivors', and Community Perceptions of male rape myths
Name of researcher: Ngosa Kambashi

I confirm that I have read and understood the information sheet [17/06/20 – version 4] for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.
I understand that taking part in this study will involve discussing rape and reading a non-graphic scenario about a rape. Participation will take 60 minutes.
I understand that taking part in this study is completely voluntary, and that I can withdraw from the study during participation without giving any reason. I can do this by saying 'I wish to withdraw from the study'.
I understand that I can withdraw my data from the study up to 48 hours after I have taken part. I can do this by emailing the researcher with my participant number and request to withdraw from the study.
I understand that I can ask questions at any time by emailing the researcher. If I have any concerns about the study, I can contact the researcher or supervisors (contact details on information sheet).
I agree that non-identifiable written quotes may be included in the researcher's PhD thesis, published in articles, and used in conference presentations.
I agree to the interview being digitally audio recorded.
I understand that, in accordance with the General Data Protection Regulation (2018) and DMU's Data Retention Policy my data will be retained up to 5 years after completion of the research.
I understand that data collected during the study may be looked at by the researcher's supervisors, and members of the faculty human research ethics committee from De Montfort University. I give permission for the supervisors and ethics committee to have access to my data.
I understand that at the end of the study, I will be provided with supplementary information and feedback.
I understand that I need to be 18 and over to participate in the study.

Do you consent to take part in the study?

Yes

No

12 Appendix E: Study One Demographic Information Form

Age: _____

Gender:
Male
Female
Prefer to self-describe _____
Prefer not to say

Are you the same gender as your assigned sex at birth?
Yes
No
Prefer not to say

Sexual orientation:
Homosexual/Gay
Homosexual/Lesbian
Heterosexual/Straight
Bisexual
Asexual
Pansexual
Questioning
Prefer to self-describe _____
Prefer not to say

Ethnicity: _____

What type of interview are you participating in?
Online (Skype or similar platform)
Face-to-Face

13 Appendix F: Study One Interview Schedule

Title of project: A Mixed Methods Study of Professionals', Survivors', and Community Perceptions of male rape myths

To be conducted with retired police or security who may work with men who have been raped to explore their perceptions of male rape victimisation.

Retired police or security interview schedule

Interviewer: Thank you for participating in this interview. Before we start the interview, I would like to confirm that you consent to take part in the study and you are aware that you do not have to answer all of the questions asked; you can stop the interview any time; and you can withdraw from the interview without providing a reason.

Building Rapport

Interviewer: I am a PhD Student at De Montfort University, and I am conducting this project to gain more insight into perceptions of male rape in the UK. This interest stemmed from completing my master's final year project and understanding how under researched the topic of male rape is, and this has led me to conduct the current research. The interview will consist of two parts, the first part will consist of some questions, and the second part will consist of reading one short story about a non-graphic rape and answering some questions surrounding the story.

Can you tell me a little about your responsibilities in your job role?

How often do you hear about rape cases?

How often do you come across rape cases?

What experience have you had with working with men who have been raped in their adulthood?

Would you prefer to refer to individuals who have been raped as victims or survivors?

Part 1: The Interview

(Note: I will pose further questions to elicit details and meaning of the initial responses. I will also allow silent pause to allow the participant time to think longer).

In your own words, do you think male rape is an issue in the United Kingdom?

What issues do you think men who have been raped may encounter when reporting the offence?

What do you think the barriers are for men who have been raped when reporting the offence?

What do you think the barriers are for men who have been raped when seeking medical support?

What do you think the barriers are for men who have been raped when seeking out psychological support?

Do you think the probability of man being a victim of rape is related to his sexuality?

If ‘yes’: In your own words, how does sexuality relate to the probability of a man being a victim of rape?

If ‘no’: In your own words, how does sexuality not relate to the probability of a man being a victim of rape?

Have you received training in relation to working with men who have been raped?

If ‘yes’ or ‘no’: What do you think about this?

From your professional experience as retired police or security, what recommendations would you give to encourage men who have been raped to report the offence?

From your professional experience as retired police or security, what recommendations would you give to encourage men who have been raped to seek medical support?

From your professional experience as retired police or security, what recommendations would you give to encourage men who have been raped to seek psychological support?

What does “rape myth” mean to you?

As part of this research, I will also be interviewing men who have been raped during their adulthood. Are there any approaches I could use to avoid distressing them when interviewing them?

Is there anything else you want to share?

Is there anything you would like to ask me?

Part 2: Scenario and questions

Interviewer: this section of the interview will consist of reading a short non-graphic scenario and then answering some questions around it. The purpose of this section is to seek your professional opinion on the story to help create a research tool that can be used for future research.

(Note: participants in this interview will be shown one of four scenarios at random and asked some questions surrounding the scenarios. See appendix VI for the scenarios.)

Example scenario:

Mark/Carol left the cinema at 11pm, after going on a date with his/her new girlfriend/boyfriend. He/she walks alone back to his/her apartment block and enters the lift to take him/her up to his/her floor. As the doors were closing a man Mark/Carol did not recognise enters the lift. He tells Mark/Carol that he'd like to have sexual intercourse with him/her. Mark/Carol refuses but despite his/her protests, both verbal and physical, intercourse occurs. (Wakelin & Long, 2003, p. 480)

Instruction: Based on what you have read and your professional experience as retired police or security:

What perceptions do you think the general public may have about the victim in the story?

Do you think their perceptions would change if the victim were male/female?

if 'yes' or 'no': Can you expand on that?

Do you think the public's perceptions would change if the victim were homosexual/heterosexual?

if 'yes' or 'no': Can you expand on that?

Do you think their perceptions would change if the perpetrator were an acquaintance?

if 'yes' or 'no': Can you expand on that?

I will be conducting further research with the general public; do you think it is appropriate to use this story as an example in the further research?

From your professional experience, what kind of context does rape usually happen?

E.g. unknown/known attacker, in public/private setting…etc.

Closing questions

Is there anything else you want to share?

Is there anything you would like to ask me?

Appendix F.1

These scenarios were sampled from Wakelin and Long (2003).

Scenario one

Mark left the cinema at 11pm, after going on a date with his new girlfriend. He walks alone back to his apartment block and enters the lift to take him up to his floor. As the doors were closing a man Mark did not recognise enters the lift. He tells Mark that he'd like to have sexual intercourse with him. Mark refuses but despite his protests, both verbal and physical, intercourse occurs.

Scenario two

Mark left the cinema at 11pm, after going on a date with his new boyfriend. He walks alone back to his apartment block and enters the lift to take him up to his floor. As the doors were closing a man Mark did not recognise enters the lift. He tells Mark that he'd like to have sexual intercourse with him. Mark refuses but despite his protests, both verbal and physical, intercourse occurs.

Scenario three

Carol left the cinema at 11pm, after going on a date with her new girlfriend. She walks alone back to her apartment block and enters the lift to take her up to her floor. As the doors were closing a man Carol did not recognise enters the lift. He tells Carol that he'd like to have sexual intercourse with her. Carol refuses but despite her protests, both verbal and physical, intercourse occurs.

Scenario four

Carol left the cinema at 11pm, after going on a date with her new boyfriend. She walks alone back to her apartment block and enters the lift to take her up to her floor. As the doors were closing a man Carol did not recognise enters the lift. He tells Carol that he'd like to have sexual intercourse with her. Carol refuses but despite her protests, both verbal and physical, intercourse occurs.

14 Appendix G: Study One Debrief Sheet

Title of project: A Mixed Methods Study of Professionals', Survivors', and Community Perceptions of male rape myths

Name of researcher: Ngosa Kambashi

The purpose of the study is to explore professionals' perceptions of male rape in the UK. You were interviewed to gather your views on male rape, particularly views surrounding barriers to reporting male rape, barriers in seeking medical and psychological support, training and resources relating to male rape and sexuality. Research suggests that perceptions of male rape may contain misconceptions about male rape and these misconceptions can lead to barriers to reporting, disclosing, and seeking of support. The intent of this research is to contribute to the current research on male rape, gender, and sexuality in psychology, by increasing awareness of the topic of male rape, which has been largely under-researched.

The findings of the research will be presented in my PhD thesis, at conferences, and in publications. The findings may also be used to formulate a research tool that is sensitive to the topic of male rape. For this reason, you were also asked to provide your opinion on a scenario depicting a fictitious rape based on your professional experience. You can email me if you would like to receive a copy of the findings. It is hoped that these findings will increase awareness of the topic of male survivors of rape in the UK. You will not be identifiable by information that will be published.

If you have been affected in any way by the study, you can withdraw your data from the study. This can be done by emailing the researcher a request to withdraw from the study within 48 hours of the interview, quoting your 5-digit participant number, which is on this page. Your data will then be removed from the study and destroyed in accordance with the DMU data retention policy.

If you have a complaint regarding anything to do with this study, you can initially approach me. If this achieves no satisfactory outcome, you should then contact my supervisors. If this achieves no satisfactory outcome, you should then contact the Administrator for the Faculty Research Ethics Committee, Research & Innovation Office, Faculty of Health & Life Sciences, 3.35 Edith Murphy House, De Montfort University, The Gateway, Leicester, LE1 9BH or hlsfro@dmu.ac.uk

Additionally, if you have any concerns raised by the topics discussed in the research, for support you can contact Samaritans, Support Line, Turning Point Leicester, The Survivors Trust, Men's Advice Line, and Male Survivors partnership.

Thank you for participating!

00000 your participant number.

Contacts

Researcher: Ngosa Kambashi
Email: ngosa.kambashi@my365.dmu.ac.uk
Tel: 07593 267 957

First academic supervisor: Dr Amanda Wilson
Email: amanda.wilson@dmu.ac.uk
Tel: 01162 078 815

Second academic supervisor: Dr Joanne Rechdan
Email: joanne.rechdan@dmu.ac.uk
Tel: 01162 078 861

Third academic supervisor: Dr Elizabeth Noon
Email: enoon@dmu.ac.uk
Tel: 0 1162 577 823

External support information

Samaritans
Website: http://www.samaritans.org/
Email: jo@samaritans.org.
Helpline: 08457 909 090 or 116 123

Support Line
Website: http://www.supportline.org.uk
Email: info@supportline.org.uk.
Tel: 01708 765 200

Turning Point Leicester
Website: http://wellbeing.turning-point.co.uk/leicestershirementalhealth/
Email: Leicestershire.crisis@turning-point.co.uk
Helpline: 08088 003 302

Men's Advice Line: 08088 010 327
Confidential helpline for men experiencing domestic violence from a partner or ex-partner

The Survivors Trust
Website: https://thesurvivorstrust.eu.rit.org.uk/
Email: info@thesurvivorstrust.org
Tel: 08088 010 818

Male Survivors partnership
Website: https://www.malesurvivor.co.uk/support-for-male-survivors/
Helpline: 08088 005 005

15 APPENDIX H: Gatekeeper Permission

[Confidential Information Removed]

16 Appendix I: Safeguarding Training Certificate

[Confidential Information Removed]

Policies and procedures for working with male survivors – continued personal development.

[Confidential Information Removed]

17 Appendix J: Study One Ethics Approvals

17.1 Appendix J.1: Study One First Approval

Dear Ngosa

Re: Ethics Application – Project Title: A Mixed Methods Study of Society's Perception of Male Rape - Ref: 3635

I am writing regarding your application for ethical approval for a research project titled to the above project. This project has been reviewed in accordance with the Operational Procedures for De Montfort University Faculty of Health and Life Sciences Research Ethics Committee. These procedures are available from the Faculty Research and Commercial Office upon your request.

I am pleased to inform you that your application has received a favourable opinion.

The Faculty has taken the decision to suspend all face-to-face data collection until further notice. As a guide, this means face-to-face interviews and focus groups, either on-site or off-site should not take place. We advise against travel for the purposes of research data collection and 'fieldwork'. This applies to both staff and students (UG, PGT and PGR). Research supervisors (UG, PGT and PGR) should ensure that students are aware of these measures.

Should there be any amendments to the research methods or persons involved with this project you must notify the Chair of the Faculty Research Ethics Committee immediately in writing. Serious or adverse events related to the conduct of the study need to be reported immediately to your Supervisor and the Faculty Head of Research Ethics.

The Faculty Research Ethics Committee should be notified by e-mail to hlsfro@dmu.ac.uk when your research project has been completed.

Yours sincerely,

Dr Douglas Gray
Faculty Head of Research Ethics
Faculty of Health & Life Sciences
De Montfort University

Faculty of Health & Life Sciences, Faculty Research Ethics Committee,
Edith Murphy House, The Gateway, Leicester LE1 9BH, hlsfro@dmu.ac.uk

17.2 Appendix J.2: Study One Amendment Approvals

Dear Ngosa

Re: Ethics Amended Application – Project Title: A Mixed Methods Study of Society's Perception of Male Rape. - Ref: 3635

I am writing regarding your amended application for ethical approval for a research project titled to the above project. This project has been reviewed in accordance with the Operational Procedures for De Montfort University Faculty of Health and Life Sciences Research Ethics Committee. These procedures are available from the Faculty Research and Commercial Office upon your request.

I am pleased to inform you that your amended application has received a favourable opinion.

The Faculty has taken the decision to suspend all face-to-face data collection until further notice. As a guide, this means face-to-face interviews and focus groups, either on-site or off-site should not take place. We advise against travel for the purposes of research data collection and 'fieldwork'. This applies to both staff and students (UG, PGT and PGR). Research supervisors (UG, PGT and PGR) should ensure that students are aware of these measures.

Should there be any further amendments to the research methods or persons involved with this project you must notify the Chair of the Faculty Research Ethics Committee immediately in writing. Serious or adverse events related to the conduct of the study need to be reported immediately to your Supervisor and the Faculty Head of Research Ethics.

The Faculty Research Ethics Committee should be notified by e-mail to hlsfro@dmu.ac.uk when your research project has been completed.

Yours sincerely,

Dr Douglas Gray
Faculty Head of Research Ethics
Faculty of Health & Life Sciences
De Montfort University

http://www.dmu.ac.uk/research/ethics-and-governance/faculty-specific-procedures/health-and-life-sciences-ethics-procedures.aspx

Faculty of Health & Life Sciences, Faculty Research Ethics Committee,
Edith Murphy House, The Gateway, Leicester LE1 9BH, hlsfro@dmu.ac.uk

18 Appendix K: Study One and Two Transcription Strategy

Transcription strategy

The following framework on orthographic transcription was utilised when transcribing the interviews. This framework was developed by Jefferson (2004), who adapted it from Braun and Clarke (2013). In addition, the UK Data Service (n.d.) was also consulted to anonymise the transcripts. Therefore, the framework below also implements how to address the issues encountered during transcription.

Table 18.1

Table of Transcription Strategy Adapted from (Jefferson, 2004; Braun & Clarke, 2013)

Interviewer	Interviewer: or int:
Participant	Participant number: or ppt
Laughing or coughing	((laughs)) ((coughs)) When one is laughing or coughing. Alternatively, ((general laughter)) when both are laughing.
Pausing	(.) for short 1 second pause or less ((long pause)) for a longer pause lasting more than a second. The longer pause must not be included – it must be longer than one second.
Overlapping speech	((in overlap)) talking over each other, or one cuts in
Inaudible speech	((inaudible)) (for best guess)
Non-verbal utterances	‘err’ ‘, erm’ ‘, um’ or similar utterances. Should be included
Punctuation	Using it can change the meaning, so leave it for now. However, the textbook suggests adding punctuation when you quote a segment in the write-up phase.
Cut-off speech and speech sounds	Sound you hear and a- (but not needed for this type of analysis)
Emphasis on particular words	The textbook suggests this is unnecessary for the FDA, but it can be added by underlining the emphasised word.
Reported speech	Someone’s account of someone else’s speech uses ‘for example’.
Accents, abbreviations, vernacular, usage, mispronunciation	Use the words as they say them. The definition be added in brackets next to the word. Misspeaking must not be corrected.
Identifying information	People’s names, organisations, and places. For example. Cambridge might be replaced with [Large city], organisation name with Organisation], or most prominent organisation in Swindon might be replaced with [Size of organisation in a city] and can include the size of the city [Large city]

19 Appendix L: Study One Final Code Book

NVivo-NK-Professionals-Analysis-08-01-23

Table 19.1

Codes\\ NK-Professionals-Analysis- Finial codes

Name	Files (Interviews)
D1 Professionals' Insights into Societal Perceptions, Acquaintance Rape, and Legal Challenges	13
Acquaintance rape	12
Rape Law	13
Societal perceptions of male rape	12
D2 Re-Traumatisation, Power Dynamics, and the Struggle for Support	13
Criminal justice system	12
Revictimsation	10
The effect	9
D3 Victim-Survivor Identity and the Importance of Specialist Services and Inclusive Support for Male Survivors	13
Specialist services	13
Victim-Survivor debate	13
NCS1 Consent becomes the issue	4
NCS2 Gender Norms, Masculinity, and Survivor's Sexual Orientation	6
Consent in Acquaintance rape	6
Gay men	5
Masculinity	6
Note. NCS = Negative Case Study	

19.1 Appendix K.1 Example transcript

[Confidential Information Removed]

20 Appendix M: Study One Example Theory Development Table

This is an example of the 5th stage of the analysis framework.

	Approach (full references in Nvivo)	Notes	Keys
Stages two and three	Theme In-vivo: Male rape		
	Theme Description: Misconceptions about male rape informed by misinformation and pre-existing perceptions about male rape.	Mythology, Misinformation and Pre-existing Perceptions about male rape	
Stage Six and seven	No, it is not described by the ways of talking identified in the theme of gay men, rape in law, or specialist services.		
Stage four	Type 1: Male rape is not talked about by everyone Type 2: Male rape as contrary to the male image Type 3: Male rape as a question of belief Type 4: Male rape is the responsibility of the victim Type 5: Male rape as different from FR Type 6: Male rape survivors as going to be perps Type 7: Men can't be raped Type 9: Social attitudes around Male rape Type 10 Victim-Survivors of male rape know their attacker Type 11: Male rape victims as asking for it Type 12: Male rape victims enjoyed it Type 13: Male rape as needing immediate action Type 14: Male rape survivors as led them on Type 15: Male rape as mysterious Type 17: Male rape questioned to allow for VB Type 18: Male rape needs to be talked about Type 19: Male rape as judged by society Type 20 Perpetrators of male rape are female	Type 1, Regardless of subject positions, by society and survivors Type 12 is only spoken about once	Related ways Contradicting ways Rape myths

	Type 21 Male rape as part of domestic violence Type 23 Male rape as part of intimate partner violence Type 24 Starts off consensual and then its not Type 25 Male rape assumed cover up of consensual sex Type 26 Consent becomes blurry when perpetrator of male rape is known to the victim Type 27 Male rape is an issue in society		
Stage five	Male rape is an issue in society. However, male rape is not discussed by those who occupy the subject positions of survivors and society for many reasons. Society perceives male rape as not possible or as mysterious, and it is different from female rape, so people may find it hard to comprehend as it challenges the masculine image. They may question the male rape survivors to find reasons why it happened to them as belief in the victim is negotiated. Essentially, to confirm the assumption that it is the victim's responsibility and, consequently, question the male rape survivors' functions as an avenue for victim blaming. Thus, the rape survivors are judged by society for allowing it to happen. Society may even hold misconceptions such as male rape victims are not victims because the victim is claiming rape to cover it up, particularly if the victim knows their attacker. They may assume male rape victims led their rapist, they asked for it, and male survivors will become perpetrators. Male survivors are aware of the questions of belief, masculinity, and misconceptions, so they would rather not talk about their experience in fear of this. Male rape needs to be discussed to bring awareness to the issue and dispel misconceptions society may hold, e.g. make people aware that it doesn't usually happen in stranger rape contexts. For	The concept of a man being the victim of rape challenges society's views of rape as something that only happens to women. At times there may be a grain of belief. However, questions are present to make it the responsibility of the victim. Ambivalent sexism - Just World theory Blame attribution theory Education as social action for reform	

	instance, professionals state the victim-survivor usually knows who their attacker is, and this mostly occurs in acquaintance situations. Male rape is characterised as part of domestic violence where the attack is a family member or a housemate. The attacker is not always male either, particularly in intimate partner violence. The perp can be female. This presents an issue that is elaborated upon in the Rape in Law theme. When it has been established that the victim-survivor knows their attacker, the issue becomes about the consent aspect of rape. People may perceive that if the rapist is known, then there must have been consent; therefore, how is it counted as rape? Notably, the consent might have been present at the start, though individuals can withdraw their consent at any time during the act. Conversely, people might argue that it is not possible for there to be rape in intimate romantic relationships. This is supported by the law concerning rape in marriage being relatively recent in the UK.		

21 Appendix N: Study Two Adverts

Participants needed!

Title of project: Survivors' Perceptions of male rape

My name is Ngosa Kambashi, I am a PhD student in Psychology at De Montfort University, and I would like to invite you to participate in a study.

What is the purpose of the study?

The purpose of the research is to explore survivors' perceptions of male rape.

Who can take part in the study?

I would like to speak to men aged 18 and over who have experienced sexual violence during adulthood. Your views will provide in-depth and meaningful insight on the topic of male rape in social research.

What do I need to do?

You will take part in an online interview or complete an online questionnaire, which will take up to 60 minutes. Voucher available upon completion.

How can I take part?

You can check your eligibility and register your interest to participate in the research here **[Hyperlink]**. You also can contact the researcher via email **ngosa.kambashi@my365.dmu.ac.uk.**

Supervisor's contacts:

First academic supervisor: Dr Amanda Wilson

Email: amanda.wilson@dmu.ac.uk

Draft text advert version

My name is Ngosa, and I am a PhD Student. I would like to invite men aged 18 and over who have experienced sexual violence during adulthood to participate in the research. The purpose of the research is to explore survivors' perceptions of male rape, and you will be making a real contribution to research on this important issue of male rape as well as potentially inform further research and resources on this issue. You can choose to take part in an online interview or complete an online questionnaire, which can take up to 60 minutes. A small thank you voucher is available upon completion. If you feel upset by the topic, details for external support will be provided to you on the information sheet and the debrief sheet.

If you are interested in taking part, you can check your eligibility and register your interest to participate in the research here [Hyperlink]. You also can contact the researcher via email ngosa.kambashi@my365.dmu.ac.uk.

22 Appendix O: Study Two Information Sheet

Title of project: Survivors' Perceptions of Male Rape

You have been invited to take part in a study. Before you decide whether to take part it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully and take time to decide whether you wish to take part. Feel free to ask us if there is anything that is not clear or if you would like more information.

1. What is the study about?

I am a PhD student at De Montfort University supervised by Dr Amanda Wilson (amanda.wilson@dmu.ac.uk), Dr Joanne Rechdan (joanne.rechdan@dmu.ac.uk) and Dr Elizabeth Noon (enoon@dmu.ac.uk). The main aim of the study is to explore survivors' perceptions of male rape. The research will concern the topic of rape, if you feel upset by this information then details to Samaritans and other external support contact information are available for you at the end of the information sheet.

2. Why have I been chosen?

I would like to speak to men aged 18 and over who have experienced sexual violence during adulthood. Adulthood in this context is defined as 16 years old and over at the time of the incident, and you must be living in the UK. Your views will provide in-depth and meaningful insight on the topic of male rape. Your involvement allows for you to be included in research that concerns you. Your participation would contribute to bringing awareness to the issue of male rape and assist in challenging false beliefs that can lead to re-traumatisation of male survivors.

3. What does the study involve?

The study will involve either a one-to-one interview or an online questionnaire where topics surrounding male survivors of sexual violence in the UK will be discussed. You can choose to take part in the interview or questionnaire. You will not be asked to give details of the assault itself. An example of the type of question you may be asked is "What do you think about the available services for male survivors in the UK?". The interview will take place online (e.g., Microsoft Teams), and the questionnaire is hosted online. Both the interview and questionnaire can last up to an hour depending on how much information you wish to provide and your availability. Rape is a sensitive topic to discuss, and you may feel upset because of taking part in the study. If you feel upset during the interview it can be stopped immediately, and you can do this by saying "Stop". You also have the right to refuse any questions you do not want to answer, and you can do this by saying "pass" or "I do not want to answer that question". Only an audio recording of the interview will be made with your permission. If you choose to complete the questionnaire you can withdraw by skipping to the end. You are free to contact the researcher within 48 hours of the interview or completion of the questionnaire to ask any questions you have about your participation. For details on how to withdraw see section 8. A small thank you for your time voucher will be provided to acknowledge your valuable contribution.

4. Do I have to take part?

You are not required to take part. Participation is completely voluntary, and it is up to you to decide if you want to take part or not. If you do choose to take part, you will be given this information sheet to read via a link, you will be asked to fill out a preliminary questionnaire online and then give informed consent on an online form. If you choose to take part, you can still withdraw from the study at any time during the study and up to 48 hours after completing the interview or questionnaire without giving any reason.

5. I am interested in taking part, what do I do next?
If you are interested in taking part, please complete the following survey [Hyperlink] to check your eligibility and register your interest to participate for an interview or complete the questionnaire immediately. You also can contact the researcher via email ngosa.kambashi@my365.dmu.ac.uk.

6. What if I agree to take part and then change my mind?
You have the right to withdraw from the study at any time without giving any reason, and up to 48 hours after participation without giving any reason. For details on how to withdraw see section 8.

7. Will my taking part in this study be kept confidential?
All information collected during the research will be kept on a password protected database which is General Data Protection Regulation (GDPR) 2018 compliant and strictly confidential; please see DMU's Privacy Notice on how your personal information will be used. The audio recorded interviews will be transcribed. During transcription your personal information, and any information that could be used to identify you will be removed or altered. Your email address will be required for the researcher's use only (e.g. to book the interview). If you completed the questionnaire, information that could be used to identify you will be removed from your responses. All email threads, audio recordings, transcripts, and questionnaire responses will be kept up to 5 years after the study has been completed and then destroyed in accordance with De Montfort University's Data retention policy, and GDPR (2018). My three supervisors and myself will have access to your interview recordings, interview transcripts and questionnaire responses. Members of the Faculty Human Research Ethics committee may require access to check that the study has been conducted in accordance with the ethical requirements for approved research.

Additionally, in accordance with the British Psychology Society's (2014) Code of Human Research Ethics and GDPR (2018), you should be aware that I am duty bound to pass on information you may provide which reveals that: there is a risk of harm to you or someone else, or harm has occurred to a child or vulnerable individual.

8. What are the possible disadvantages and risks of taking part?
Rape is a sensitive topic to discuss, and you may feel upset as a result of taking part in the study. If you feel upset during the interview it can be stopped immediately, and you can do this by saying "Stop". You have the option to continue the interview, arrange to continue another day, or withdraw from the study completely. During the interview, you can withdraw from the study by saying that you wish to withdraw. If you reschedule to complete an interview but change your mind, you can email the researcher with your participation number and request to withdraw from the study. You can also withdraw from the study up to 48 hours after the interview by sending an email to the researcher with your participation number and request to withdraw from the study. If you completed the questionnaire you can click the "I wish to withdraw" button to withdraw from the study in the questionnaire or you can email the researcher with your request to withdraw with your participant number. You do not need to give a reason for withdrawing from the study at any point. My contact details are available to you at the end of the information sheet if you wish to discuss any concerns you have about the study. If you decide to withdraw from the study, your access to services for support will not be impacted by your choice. Contact information for external charities will be provided for support and training at the end of the information sheet and debrief sheet.

9. What if something goes wrong?
If you are harmed by taking part in this research project, there are no special compensation arrangements. If you are harmed due to someone's negligence, then you may have grounds for a legal action, but you may have to pay for it. Regardless of this, if you wish to complain,

or have any concerns about any aspect of the way you have been approached or treated during this study, the normal University complaints mechanisms should be available to you.

10. Who can I complain to?
If you have a complaint regarding anything to do with this study, you can initially approach me. If this achieves no satisfactory outcome, you should then contact my supervisors. If this achieves no satisfactory outcome, you should then contact the Administrator for the Faculty Research Ethics Committee, Research & Innovation Office, Faculty of Health & Life Sciences, 3.35 Edith Murphy House, De Montfort University, The Gateway, Leicester, LE1 9BH or hlsfro@dmu.ac.uk

11. What will happen to the results of the research study?
The findings of the research will be presented in my PhD Thesis, conferences, and publications. No participants will be identifiable by information in my PhD thesis, conferences, and publications. You can email me if you would like a copy of the findings. It is hoped that these findings will assist in providing awareness to the topic of male rape.

Thank you for taking the time to read this information sheet

Contact for Further Information

Researcher: Ngosa Kambashi
Email:
ngosa.kambashi@my365.dmu.ac.uk
Tel: 07593 267 957

First academic supervisor: Dr Amanda Wilson
Email: amanda.wilson@dmu.ac.uk
Tel: 01162 078 815

Second academic supervisor: Dr Joanne Rechdan
Email: joanne.rechdan@dmu.ac.uk
Tel: 01162 078 861

Third academic supervisor: Dr Elizabeth Noon
Email: enoon@dmu.ac.uk
Tel: 0 1162 577 823

External support information

Samaritans

Website:
http://www.samaritans.org/

Email: jo@samaritans.org.

Helpline: 08457 909 090 or 116 123

Safeline National Male Survivor Helpline

Website:
https://www.safeline.org.uk/

Helpline: 0808 800 5005

Support Line

Website:
http://www.supportline.org.uk

Email: info@supportline.org.uk.

Helpline: 01708 765 200

SurvivorsUK

Website:
https://www.survivorsuk.org/

Email: help@survivorsuk.org

Tel: 02035 983 898

Men's Advice Line: 08088 010 327

Confidential helpline for men experiencing domestic violence

The Survivors Trust

Website: https://www.thesurvivorstrust.org/

Helpline: 08088 010 818

Male Survivors partnership

Website: https://www.malesurvivor.co.uk/support-for-male-survivors/

Helpline: 08088 005 005

23 Appendix P: Study Two Preliminary Form (Inclusion/Exclusion Form)

1. Age: _____

2. Do you live in the UK?
Yes
No

3. Did the assault(s) happen after your 16th birthday?
   Yes

   No

4. Did the assault(s) occur within the last year?
   Yes

   No

If the participant answers "no" to questions 2 & 3 ("yes" for 4) then the participant will be taken to the end of the survey and shown the following message:

"Thank you for taking the time to fill out this questionnaire. Unfortunately, you do not meet the eligibility requirements for this research. If you have any questions about the research, please feel free to contact the researcher at ngosa.kambashi@my365.dmu.ac.uk or on [Research phone number]

If the participant qualifies for the research, then they will be presented with the following questions.

5. How would you like to participant in the study?

One-to-one online interview on Microsoft Teams
Online open questionnaire

If the participant chooses to participate in the online interview then they will be presented with the following questions.

_____

6. Is it safe to contact you via email to arrange the interview?

Yes
No

If no, then the participant will be taken to the end of the survey and shown the following message:

"Thank you for taking the time to fill out this questionnaire. Unfortunately, it will not be possible to conduct the interview without an email address as it will be required to set up the interview. If you have any questions about the research, please feel free to contact the researcher on [Research Phone number]"

If yes, the following question will appear:

7. What is your email address?

_____

Potential participants will see the following end survey message:

"Thank you for completing this form.

The researcher will be in contact with you shortly about gaining consent and booking the interview. In the meantime, if you have any questions about the research, please feel free to contact the researcher at ngosa.kambashi@my365.dmu.ac.uk or on [Research Phone number]"

24 Appendix Q: Study Two Consent Form

24.1 Interview Consent Form

Title of project: Survivors' Perceptions of male rape

Name of researcher: Ngosa Kambashi

I confirm that I have read and understood the information sheet [14/06/2021] for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.
I understand that taking part in this study will involve discussing rape and participation will take 60 minutes in a one-to-one interview.
I understand that taking part in this study is completely voluntary, and that I can withdraw from the study during participation without giving any reason. I can do this by saying 'I wish to withdraw from the study'.
I understand that I can withdraw my data from the study up to 48 hours after I have taken part. I can do this by emailing the researcher with my participant number and request to withdraw from the study.
I understand that I can ask questions at any time by emailing the researcher. If I have any concerns about the study, I can contact the researcher or supervisors (contact details on information sheet).
I agree that non-identifiable written quotes may be included in the researcher's PhD thesis, published in articles, and used in conference presentations.
I agree to the interview being digitally audio recorded.
I understand that, in accordance with the General Data Protection Regulation (2018) and DMU's Data Retention Policy my data will be retained up to 5 years after completion of the research.
I understand that if I disclose a new crime that concerns a child, vulnerable adult, or myself, then the researcher will have to break confidentiality and inform the police.
I understand that data collected during the study may be looked at by the researcher's supervisors, and members of the faculty human research ethics committee from De Montfort University. I give permission for the supervisors and ethics committee to have access to my data.
I understand that at the end of the study or if I withdraw from the study, I will be provided with supplementary information and feedback.
I confirm am 18 years old and over.

Do you consent to take part in the study?
Yes
No

24.2 Questionnaire Consent Form

Title of project: Survivors' Perceptions of male rape

Name of researcher: Ngosa Kambashi

I confirm that I have read and understood the information sheet [14/06/2021] for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.
I understand that taking part in this study will involve completing an open questionnaire which can take up to 60 minutes to complete.
I understand that taking part in this study is completely voluntary, and that I can withdraw from the study during participation without giving any reason. I can do this by clicking 'I wish to withdraw'.
I understand that I can withdraw my data from the study up to 48 hours after I have taken part. I can do this by emailing the researcher with my participant number and request to withdraw from the study.
I understand that I can ask questions at any time by emailing the researcher. If I have any concerns about the study, I can contact the researcher or supervisors (contact details on information sheet).
I agree that non-identifiable written quotes may be included in the researcher's PhD thesis, published in articles, and used in conference presentations.
I understand that, in accordance with the General Data Protection Regulation (2018) and DMU's Data Retention Policy my data will be retained up to 5 years after completion of the research.
I understand that if I disclose a new crime that concerns a child, vulnerable adult, or myself, then the researcher will have to break confidentiality and inform the police.
I understand that data collected during the study may be looked at by the researcher's supervisors, and members of the faculty human research ethics committee from De Montfort University. I give permission for the supervisors and ethics committee to have access to my data.
I understand that at the end of the study or if I withdraw from the study, I will be provided with supplementary information and feedback.
I confirm am 18 years old and over.

Do you consent to take part in the study?

Yes
No

25 Appendix R: Study Two Demographic Information Form

00000 your participant number.

Age: _____

Gender:

Man

Woman

Self-describe _____

Prefer not to say

Are you the same gender as your assigned sex at birth?

Yes

No

Prefer not to say

Sexual orientation:

Homosexual/Gay

Heterosexual/Straight

Bisexual

Asexual

Pansexual

Questioning

Self-describe _____

Prefer not to say

Ethnicity: _____

What was the gender of your attacker(s)?

Man/Men

Woman/Women

Self-describe_____

Would you prefer to refer to individuals who have been raped as victims or survivors?

_____

26 Appendix S: Study Two Interview Schedule

26.1 Interview Schedule

Title of project: Survivors' Perceptions of male rape

Semi-structured interview to be conducted with adult sexual violence in the UK, in efforts to explore their perceptions of male rape in the UK. The questions below may not be asked in the order presented or asked at all, as it is anticipated that questions may be addressed in earlier answers (Rubin & Rubin, 2012). When asking the questions, the author may pose further follow up questions depending on the initial response. Some follow up questions have been italicised to make it easier to distinguish the two forms of questions. Though this is not an exhaustive list of the possible follow up questions and prompts as it is not possible to fully account for those (Brinkmann & Kvale, 2015). The author will also allow silent pause to allow the participant time to process the question (Brinkmann & Kvale, 2015).

Survivors interview schedule

Interviewer: Thank you for participating in this interview. Before we begin, I would like to confirm that you consent to take part in the study, and you are aware that you do not have to answer all the questions asked; you can stop the interview any time; and you can withdraw from the interview without providing a reason.

Building Rapport

Interviewer: I am a PhD Student at De Montfort University, and I am conducting this project to gain more insight into perceptions of male rape in the UK. This interest stemmed from completing my master's final year project and understanding there is room to learn more about the topic of male rape in the UK, and this has led me to conduct the current research. The interview will consist of answering some questions. I am aware that the subject matter can be upsetting and difficult to talk about, so I encourage you to take your time when answering and you can take breaks during the interview if you need to.

1. What industry do you work in?

Disclosure

2. Have you told anyone about your abuse? (e.g., Family, friends)
    a. *If yes, how did you decide to tell them?*
        i. *How soon after the incident(s) did you disclose to them?*
    b. *If no, were there times you came close to tell your family? Friends?*
        i. *What stopped you?*
3. Have you accessed any medical services? (e.g., GP, forensic medical examiners, sexual assault referral centres)
    a. *If yes, how did you decide to seek help?*
        i. *How soon after the incident(s) did you disclose to them?*

   b. *If no, what made you decide to choose not to?*
4. Have you accessed any psychological support services? (e.g., Charities, therapy*)*
   a. *If yes, how did you decide to seek help?*
      i. *How soon after the incident(s) did you disclose to them?*
   b. *If no, what made you decide to choose not to?*
5. Have you reported the abuse to the police?
   a. *If yes, how did you decide to seek help?*
      i. *How soon after the incident(s) did you disclose to them?*
   b. *If no, what made you decide to choose not to?*
6. Has disclosing to [family/friends/services] about the incident(s) helped your recovery?
   a. *If yes, in what way has disclosure helped your recovery?*
   b. *If not, how has it not helped your recovery?*

7. How has this experience impacted you?
8. Based on your experience are there any specific things that [person disclosed to/type of service] can improve? (If disclosed)
9. Based on your experience are there any specific things that were positive about disclosing to [person disclosed to/type of service]? (If disclosed)

Sexuality

10. How would you describe your sexuality?
11. How do you think your sexuality may have influenced your choice to disclose the incident(s)? (If disclosed)
12. How do you think your sexuality may influence your choice to disclose the incident(s)? (If not disclosed)
13. How do you think your sexuality influenced how people reacted to your disclosure? (If disclosed)
14. How do you think your sexuality may influence how people react to your disclosure? (If not disclosed)

Barriers

15. Do you think there are barriers for men who have been raped when reporting the offence?
   a. *If Yes, what issues do you think men who have been raped may encounter when reporting the offence?*
   b. *If no, can you expand on that?*
16. Do you think there are barriers for men who have been raped when seeking help?
   a. *If yes,*
      i. *What do you think the barriers are for men who have been raped when seeking medical support?*
      ii. *What do you think the barriers are for men who have been raped when seeking psychological support?*
   b. *If no, can you expand on that?*

17. What does “rape myth” mean to you?
18. Are you aware of the legal definition of rape?
    a. *If yes, what are your thoughts on it?*
    b. *If no, the researcher is to inform the participant that currently only men can be perpetrators of rape, and then ask the participants what their thoughts on this are*

Awareness/resources

19. What are your thoughts (comments) on how aware the general public is about male rape?
20. What do you think about the available services for male survivors in the UK?
21. What suggestions do you have that can make it safer for survivors to come forward?
22. What specific things could have helped you seek support? (if not disclosed)
23. What recommendations would you give to encourage men who have been raped to report the offence? (if disclosed)
24. What recommendations would you give to encourage men who have been raped to seek medical support? (if disclosed)
25. What recommendations would you give to encourage men who have been raped to seek psychological support? (if disclosed)

Closing

26. Is there anything else you want to share?
27. Is there anything you would like to ask me?

Check in (recommended by professionals)

28. How are you feeling after the interview?
29. What do you have planned to do after this interview?

26.2 Qualitative Questionnaire

Title of project: Survivors’ Perceptions of male rape

These questions are the same as the interview questions that will appear on the Qualtrics questionnaire. Qualtrics survey display logics and skip logics will be implemented to ensure that participants only answer questions that apply to them, for example if they have disclosed the assault then they see questions that are intended for those who have disclosed. These questions will allow for ‘essay type answers’ as they are labelled by Qualtrics. There will be no forced choice questions.

Instructions: Thank you for participating in this questionnaire. You do not have to answer all questions asked, and you can do this by leaving the text box blank. You can stop participating at any time. You can withdraw from the study by clicking “I wish to withdraw” which will be located at the bottom of each page. You do not need to provide a reason for skipping questions or withdrawing from the participation.

Below you will find a series of questions about topics surrounding male survivors of sexual violence in the UK. You are encouraged to answer the questions truthfully based on your experience and knowledge with as much detail as you wish. There is no right or wrong way to answer these questions.

1. What industry do you work in?
2. Have you told anyone about your abuse? (e.g., Family, friends)
    a. *If yes, how did you decide to tell them?*
        i. *How soon after the incident(s) did you disclose to them?*
    b. *If no, were there times you came close to tell your family? Friends?*
        i. *What stopped you?*
3. Have you accessed any medical services? (e.g., GP, forensic medical examiners, sexual assault referral centres)
    c. *If yes, how did you decide to seek help?*
        i. *How soon after the incident(s) did you disclose to them?*
    d. *If no, what made you decide to choose not to?*
4. Have you accessed any psychological support services? (e.g., Charities, therapy*)*
    e. *If yes, how did you decide to seek help?*
        i. *How soon after the incident(s) did you disclose to them?*
    f. *If no, what made you decide to choose not to?*
5. Have you reported the abuse to the police?
    g. *If yes, how did you decide to seek help?*
        i. *How soon after the incident(s) did you disclose to them?*
    h. *If no, what made you decide to choose not to?*
6. Has disclosing to [family/friends/services] about the incident(s) helped your recovery?
    i. *If yes, in what way has disclosure helped your recovery?*
    j. *If not, how has it not helped your recovery?*

7. How has this experience impacted you?
8. Based on your experience are there any specific things that [person disclosed to/type of service] can improve? (If disclosed)
9. Based on your experience are there any specific things that were positive about disclosing to [person disclosed to/type of service]? (If disclosed)
10. How would you describe your sexuality?
11. How do you think your sexuality may have influenced your choice to disclose the incident(s)? (If disclosed)
12. How do you think your sexuality may influence your choice to disclose the incident(s)? (If not disclosed)
13. How do you think your sexuality influenced how people reacted to your disclosure? (If disclosed)

14. How do you think your sexuality may influence how people react to your disclosure? (If not disclosed)
15. Do you think there are barriers for men who have been raped when reporting the offence?
    k. *If Yes, what issues do you think men who have been raped may encounter when reporting the offence?*
    l. *If no, can you expand on that?*
16. Do you think there are barriers for men who have been raped when seeking help?
    m. *If yes,*
        i. *What do you think the barriers are for men who have been raped when seeking medical support?*
        ii. *What do you think the barriers are for men who have been raped when seeking psychological support?*
    n. *If no, can you expand on that?*
17. What does “rape myth” mean to you?
18. Are you aware of the legal definition of rape?
    o. *If yes, what are your thoughts on it?*
    p. *If no, the researcher is to inform the participant that currently only men can be perpetrators of rape, and then ask the participants what their thoughts on this are*
19. What are your thoughts (comments) on how aware the general public is about male rape?
20. What do you think about the available services for male survivors in the UK?
21. What suggestions do you have that can make it safer for survivors to come forward?
22. What specific things could have helped you seek support? (if not disclosed)
23. What recommendations would you give to encourage men who have been raped to report the offence? (if disclosed)
24. What recommendations would you give to encourage men who have been raped to seek medical support? (if disclosed)
25. What recommendations would you give to encourage men who have been raped to seek psychological support? (if disclosed)
26. Is there anything else you want to share?
27. Is there anything you would like to ask me?
28. How are you feeling after the questionnaire?

29. How would you prefer to receive the e-voucher code?

Email (I confirm it is safe you to contact me through email)

Text Message

If email is selected, the following question will appear:

30. What is your email address?

_____

Potential participants will see the following end survey message:

"Thank you for completing this form.

The researcher will be in contact with you shortly with your e-voucher code. In the meantime, if you have any questions about the research, please feel free to contact the researcher at ngosa.kambashi@my365.dmu.ac.uk or on 07593 267 957"

If text message is selected, then the participant will be provided with the research's research telephone number

then the participant will be taken to the end of the survey and shown the following message:

"Thank you for taking the time to fill out this questionnaire. Please text the researcher on [Research Phone Number] with your 5-digit participant number to redeem your e-voucher code"

27 Appendix T: Study Two Debrief Sheet

27.1 Interview Debrief Sheet

Title of project: Survivors' Perceptions of male rape

Researcher: Ngosa Kambashi

The purpose of the study is to explore survivors' perceptions of male rape in the UK. Research suggests that perceptions of male rape may contain misconceptions about male rape and these misconceptions can lead to barriers to reporting, disclosing, and seeking of support. The literature suggests that sometimes these misconceptions can be influenced by beliefs surrounding sexuality. Consequently, you were interviewed to gather your views on the issues mentioned above. The intent of this research is to contribute to the current research on male rape, gender, and sexuality in psychology, by increasing awareness of the topic of male rape, which has been largely under-researched.

The findings of the research will be presented in my PhD thesis, at conferences, and in publications. The findings may also be used to formulate a research tool that is sensitive to the topic of male rape. You can email me if you would like to receive a copy of the findings. It is hoped that these findings will increase awareness of the topic of male survivors of rape in the UK. You will not be identifiable by information that will be published.

If you have been affected in any way by the study, you can withdraw your data from the study. This can be done by emailing the researcher a request to withdraw from the study within 48 hours of the interview, quoting your 5-digit participant number, which is on this page. Your data will then be removed from the study and destroyed in accordance with the DMU data retention policy. If you decide to withdraw your access to services for support will not be impacted by this.

If you have a complaint regarding anything to do with this study, you can initially approach me. If this achieves no satisfactory outcome, you should then contact my supervisors. If this achieves no satisfactory outcome, you should then contact the Administrator for the Faculty Research Ethics Committee, Research & Innovation Office, Faculty of Health & Life Sciences, 3.35 Edith Murphy House, De Montfort University, The Gateway, Leicester, LE1 9BH or hlsfro@dmu.ac.uk. Please see DMU's Privacy Notice on how your personal information will be used

Additionally, if you have any concerns raised by the topics discussed in the research, for support you can contact Samaritans, Support Line, Safeline National Male Survivor Helpline, The Survivors Trust, SurvivorsUK, Men's Advice Line, and Male Survivors partnership.

Thank you for participating!

00000 your participant number.

Contacts

Researcher: Ngosa Kambashi
Email:
ngosa.kambashi@my365.dmu.ac.uk
Tel: 07593 267 957

First academic supervisor: Dr Amanda Wilson
Email: amanda.wilson@dmu.ac.uk
Tel: 01162 078 815

Second academic supervisor: Dr Joanne Rechdan
Email: joanne.rechdan@dmu.ac.uk
Tel: 01162 078 861

Third academic supervisor: Dr Elizabeth Noon
Email: enoon@dmu.ac.uk
Tel: 0 1162 577 823

External support information

Samaritans
Website: http://www.samaritans.org/
Email: jo@samaritans.org.
Helpline: 08457 909 090 or 116 123

Safeline National Male Survivor Helpline
Website: https://www.safeline.org.uk/
Helpline: 0808 800 5005

Support Line
Website: http://www.supportline.org.uk
Email: info@supportline.org.uk.
Helpline: 01708 765 200

SurvivorsUK
Website: https://www.survivorsuk.org/
Email: help@survivorsuk.org
Tel: 02035 983 898

Men's Advice Line: 08088 010 327
Confidential helpline for men experiencing domestic violence

The Survivors Trust
Website: https://www.thesurvivorstrust.org/
Helpline: 08088 010 818

Male Survivors partnership
Website: https://www.malesurvivor.co.uk/support-for-male-survivors/
Helpline: 08088 005 005

27.2 Questionnaire Debrief Sheet

Title of project: Survivors' Perceptions of male rape

Researcher: Ngosa Kambashi

The purpose of the study is to explore survivors' perceptions of male rape in the UK. Research suggests that perceptions of male rape may contain misconceptions about male

rape and these misconceptions can lead to barriers to reporting, disclosing, and seeking of support. The literature suggests that sometimes these misconceptions can be influenced by beliefs surrounding sexuality. Consequently, you completed this questionnaire to gather your views on the issues mentioned above. The intent of this research is to contribute to the current research on male rape, gender, and sexuality in psychology, by increasing awareness of the topic of male rape, which has been largely under-researched.

The findings of the research will be presented in my PhD thesis, at conferences, and in publications. The findings may also be used to formulate a research tool that is sensitive to the topic of male rape. You can email me if you would like to receive a copy of the findings. It is hoped that these findings will increase awareness of the topic of male survivors of rape in the UK. You will not be identifiable by information that will be published.

If you have been affected in any way by the study, you can withdraw your data from the study. This can be done by emailing the researcher a request to withdraw from the study within 48 hours of the interview, quoting your 5-digit participant number, which is on this page. Your data will then be removed from the study and destroyed in accordance with the DMU data retention policy. If you decide to withdraw your access to services for support will not be impacted by this.

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Additionally, if you have any concerns raised by the topics discussed in the research, for support you can contact Samaritans, Support Line, Safeline National Male Survivor Helpline, The Survivors Trust, SurvivorsUK, Men's Advice Line, and Male Survivors partnership.

Thank you for participating!

00000 your participant number.

Contacts

Researcher: Ngosa Kambashi
Email:
ngosa.kambashi@my365.dmu.ac.uk
Tel: 07593 267 957

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Email: amanda.wilson@dmu.ac.uk
Tel: 01162 078 815

Second academic supervisor: Dr Joanne Rechdan
Email: joanne.rechdan@dmu.ac.uk
Tel: 01162 078 861

Third academic supervisor: Dr Elizabeth Noon
Email: enoon@dmu.ac.uk
Tel: 0 1162 577 823

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Email: jo@samaritans.org.
Helpline: 08457 909 090 or 116 123

Safeline National Male Survivor Helpline
Website: https://www.safeline.org.uk/
Helpline: 0808 800 5005

Support Line
Website: http://www.supportline.org.uk
Email: info@supportline.org.uk.
Helpline: 01708 765 200

SurvivorsUK
Website: https://www.survivorsuk.org/
Email: help@survivorsuk.org
Tel: 02035 983 898

Men's Advice Line: 08088 010 327
Confidential helpline for men experiencing domestic violence

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Website: https://www.thesurvivorstrust.org/
Helpline: 08088 010 818

Male Survivors partnership
Website: https://www.malesurvivor.co.uk/support-for-male-survivors/
Helpline: 08088 005 005

28 Appendix U: Study Two Ethics Approvals

28.1 Appendix U.1: Study Two First Approval

HLS FREC Ref: 412092

14 June 2021

Ngosa Kambashi
PGR Student
P2564976@my365.dmu.ac.uk

Dear Ngosa

Re: Ethics Application – Project Title: Survivors' Perceptions of male rape - Ref: 412092

I am writing regarding your application for ethical approval for a research project titled to the above project. This project has been reviewed in accordance with the Operational Procedures for De Montfort University Faculty of Health and Life Sciences Research Ethics Committee. These procedures are available from the Faculty Research and Innovation Office upon your request.

I am pleased to inform you that your application has received a favourable opinion.

It is a condition of approval for research involving any of the following activities:

- Face to face research interactions, including interviews, focus groups, workshops etc.,
- Travel for research purposes
- Any activity that could be considered 'fieldwork'

That the principal investigator monitors government guidelines, and reviews regularly the implications of any changes to guidelines on the research study. Any restrictions imposed must be adhered to. The investigator must notify the approving FREC of any changes required in response to government restrictions. The principal investigator remains responsible for ensuring all necessary governance arrangements are satisfied, including Health and Safety and consideration of appropriate insurance cover for the proposed activities.

Should there be any amendments to the research methods or persons involved with this project you must notify the Chair of the Faculty Research Ethics Committee immediately in writing. Serious or adverse events related to the conduct of the study need to be reported immediately to your Supervisor and the Faculty Head of Research Ethics.

The Faculty Research Ethics Committee should be notified by e-mail to hlsfro@dmu.ac.uk when your research project has been completed.

Yours sincerely,

Dr Douglas Gray
Faculty Head of Research Ethics
Faculty of Health & Life Sciences
De Montfort University
http://www.dmu.ac.uk/research/ethics-and-governance/faculty-specific-procedures/health-and-life-sciences-ethics-procedures.aspx

Faculty of Health & Life Sciences, Faculty Research Ethics Committee,
Heritage House, The Gateway, Leicester LE1 9BH, hlsfro@dmu.ac.uk

28.2 Appendix U.2: Study Two Amendment Approvals

DE MONTFORT UNIVERSITY LEICESTER

08 September 2021

Ngosa Kambashi

Dear Ngosa Kambashi

I am writing regarding your application for ethical approval for the research study summarised below which has now been reviewed in accordance with De Montfort University's Research Ethics Code of Practice. I am pleased to inform you that the study has been approved.

It is your responsibility to ensure your research adheres to the standard conditions of approval below. You should ensure that the ethics of your study is kept under review as the research progresses, and in response to any external changes that might affect the approval. As noted below, changes in your research may require you to apply for an amendment to your application. As always, you should feel free to ask your Faculty Research Ethics committee or ethics@dmu.ac.uk for advice and support.

Study Title:	Survivors' Perceptions of male rape Ref 412092
WorkTribe Ref:	412092
Committee:	Faculty of Health and Life Sciences
Approval Date:	8 Sep 2021, 17:00
End Date:	[3 years from approval date]
Risk category:	Medium
Status:	**Approved**

Standard Conditions of Approval:

All research projects are subject to the same standard conditions:

1. It is a condition of approval for research involving any of the following activities:

   - Face to face research interactions, including interviews, focus groups, workshops etc.
   - Travel for research purposes
   - Any activity that could be considered 'fieldwork'

   That the principal investigator monitors government guidelines, and reviews regularly the implications of any changes to guidelines on the research study. Any restrictions imposed must be adhered to. The investigator must notify the approving FREC of any changes required in response to government restrictions. The principal investigator remains responsible for ensuring all necessary governance arrangements are satisfied, including Health and Safety and consideration of appropriate insurance cover for the proposed activities.

2. Researchers must comply with ethical, legal and professional frameworks, obligations and standards as required by the University (including the Research Ethics Code of Practice), statutory and regulatory authorities, and by funders and other relevant stakeholders.

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3. Approval is based on the information provided including supporting documentation. Any changes to the protocols or documentation must be approval by the relevant ethics committee before being implemented.

4. The standard period of approval is three years. If necessary, re-approval must be sought before the end of the three-year approval period, ensuring that the study, and consideration of ethical issues, remains valid.

5. Any adverse or unforeseen events must be reported within 24 hours to the approving Ethics Committee. This includes any near misses that but for luck, skill or judgement, would in all probability have been an adverse or unforeseen event.

6. The University's protocols for seeking external approvals (including Health Research Authority approval) must be followed, and those permissions must be acknowledged by the University before research commences.

7. External permissions including use of resources and access to participants, where required, must be sought before research commences.

8. The study must comply with the Data Protection Act 2018 and General Data Protection Regulation (GDPR), and necessary arrangements should have been, or will be, made with regard to the storage and processing of participants' personal information and generally, to ensure confidentiality of such data supplied and generated in the course of the research including the need for a Data Protection Impact Assessment.

9. The principal investigator for a research study meeting the criteria for **high risk** will ensure that:

    a. There is adequate insurance cover for the approved study.

    b. An annual progress report is submitted to the approving Committee.

10. Research records/data may be subject to inspection for audit purposes if required in future and should be legible and well organised.

11. At the end of the study the principal investigator ensures:

    a. The relevant WorkTribe ethics record should be 'marked complete'.

    b. There are clear plans to ensure relevant actions are taken at appropriate time points regarding the destruction of data.

12. The Principal Investigator on the research project takes full responsibility for the actions of the research team and individuals supporting the study, and must ensure all those involved are given training relevant to their role in the study. All members of the research team should understand the expected standards of rigour and integrity and must maintain these at all times.

Yours sincerely, Faculty Head of Research Ethics

17 November 2021
Ngosa Kambashi

Dear Ngosa Kambashi

I am writing regarding your **amended** application for ethical approval for the research study summarised below which has now been reviewed in accordance with De Montfort University's Research Ethics Code of Practice. I am pleased to inform you that the amendments to the study have been approved.

It is your responsibility to ensure your research adheres to the standard conditions of approval below. You should ensure that the ethics of your study is kept under review as the research progresses, and in response to any external changes that might affect the approval. As noted below, changes in your research may require you to apply for an amendment to your application. As always, you should feel free to ask your Faculty Research Ethics Committee or ethics@dmu.ac.uk for advice and support.

Study Title:	Survivors' Perceptions of male rape Ref 412092
WorkTribe Ref:	412092
Committee:	School of Applied Social Sciences
Approval Date:	17 Nov, 2021, 17:00
End Date:	8 Sep 2023, 17:00
Risk category:	Medium
Status:	**Amendment Approved**

Standard Conditions of Approval:

All research projects are subject to the same standard conditions:

1. It is a condition of approval for research involving any of the following activities:

   - Face to face research interactions, including interviews, focus groups, workshops etc.
   - Travel for research purposes
   - Any activity that could be considered 'fieldwork'

   That the principal investigator monitors government guidelines, and reviews regularly the implications of any changes to guidelines on the research study. Any restrictions imposed must be adhered to. The investigator must notify the approving FREC of any changes required in response to government restrictions. The principal investigator remains responsible for ensuring all necessary governance arrangements are satisfied, including Health and Safety and consideration of appropriate insurance cover for the proposed activities.

2. Researchers must comply with ethical, legal and professional frameworks, obligations and standards as required by the University (including the Research Ethics Code of Practice), statutory and regulatory authorities, and by funders and other relevant stakeholders.

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3. Approval is based on the information provided including supporting documentation. Any changes to the protocols or documentation must be approval by the relevant ethics committee before being implemented.

4. The standard period of approval is three years. If necessary, re-approval must be sought before the end of the three-year approval period, ensuring that the study, and consideration of ethical issues, remains valid.

5. Any adverse or unforeseen events must be reported within 24 hours to the approving Ethics Committee. This includes any near misses that but for luck, skill or judgement, would in all probability have been an adverse or unforeseen event.

6. The University's protocols for seeking external approvals (including Health Research Authority approval) must be followed, and those permissions must be acknowledged by the University before research commences.

7. External permissions including use of resources and access to participants, where required, must be sought before research commences.

8. The study must comply with the Data Protection Act 2018 and General Data Protection Regulation (GDPR), and necessary arrangements should have been, or will be, made with regard to the storage and processing of participants' personal information and generally, to ensure confidentiality of such data supplied and generated in the course of the research including the need for a Data Protection Impact Assessment.

9. The principal investigator for a research study meeting the criteria for **high risk** will ensure that:

    a. There is adequate insurance cover for the approved study.

    b. An annual progress report is submitted to the approving Committee.

10. Research records/data may be subject to inspection for audit purposes if required in future and should be legible and well organised.

11. At the end of the study the principal investigator ensures:

    a. The relevant WorkTribe ethics record should be 'marked complete'.

    b. There are clear plans to ensure relevant actions are taken at appropriate time points regarding the destruction of data.

12. The Principal Investigator on the research project takes full responsibility for the actions of the research team and individuals supporting the study, and must ensure all those involved are given training relevant to their role in the study. All members of the research team should understand the expected standards of rigour and integrity and must maintain these at all times.

Yours sincerely, Faculty Head of Research Ethics

29 Appendix V: Study Two Final Codes

Table 0.2

Codes\\ NK-Professionals-Analysis- Finial codes

Name	Files (Interviews or questionnaire responses)
1. Accurate portrayal	8
2. (Un)Disclosed Experiences	9
3. Acquaintanceship Adds Complexity	9
4. Emotional turmoil	8
5. Getting justice	7
6. Helpful support	9
7. Survivors' Mental Well-being	9
8. Man up	9
9. LGBTQIA+ Support	4
10. Survivors' Physical Well-being'	8
11. Male Rape Conceptualisation	9

30 Appendix W: Study Two Example Theory Development Table

	Approach (full references in Nvivo)	Notes	Keys
Stages two and three	Theme In-vivo: Emotional turmoil		
	Theme Description: Intense and complex emotions that male survivors experienced after the rape and its aftermath, including fear, shame, self-blame, and mistrust. Emotional impact, being judged, and fear are complex psychological experiences that can significantly affect a person's thoughts, feelings, and behaviours.		
Stage Six and seven	**No, the ways of talking have not been explained by the other themes**		
Stage four	Type 1 Emotional turmoil is different for heterosexual men Type 2 Emotional turmoil is shame and embarrassment Type 3 Emotional turmoil as being mocked Type 4 Emotional turmoil is fear as a barrier to reporting Type 5 Emotional turmoil is scared of not being believed Type 6 Emotional turmoil is self-blame	All in related ways Gener relations theory, cathexis domain	
Stage five	Emotional turmoil is described as shame, embarrassment, mocking, a barrier to reporting, self-blame and fear of not being believed. However, Emotional turmoil is constructed as different for straight men compared to gay men.		

31 Appendix X: Study Three Study Three Adverts

Participants needed!

Title of project: Community samples' Perceptions of Male Rape and Sexual Assault

My name is Ngosa Kambashi, I am a PhD student in Psychology at De Montfort University, and I would like to invite you to participate in a study.

What is the purpose of the study?

The purpose of the research is to explore people's perceptions of male rape. I would like to collect your views on the topic of male rape in the UK.

Who can take part in the study?

You must live in the UK and be 18 years and older to take part.

What do I need to do?

You will complete a short 25-minute questionnaire online.

How can I take part?

Follow the link the post or scan the QR Code. You also can contact the researcher via email **ngosa.kambashi@my365.dmu.ac.uk.**

[QR CODE HERE]

Supervisor's contacts: 1st Dr A. Wilson ✉ amanda.wilson@dmu.ac.uk, 2nd Dr J. Rechdan ✉ jrechdan@bournemouth.ac.uk, 3rd Dr E. Noon ✉ enoon@dmu.ac.uk

Support services: Samaritans http://www.samaritans.org/ The Survivors Trust https://www.thesurvivorstrust.org/

32 Appendix Y: Study Three Information Sheet

Title of project: Community samples' Perceptions of Male Rape and Sexual Assault

Trigger warning: this information sheet will mention rape and sexual violence, this may be triggering to readers with similar experiences.

You have been invited to take part in a study: Before you decide whether to take part it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully and take time to decide whether you wish to take part. Feel free to ask us if there is anything that is not clear or if you would like more information.

1. What is the study about?

I am a PhD student at De Montfort University supervised by Dr Amanda Wilson (amanda.wilson@dmu.ac.uk), Dr Joanne Rechdan (jrechdan@bournemouth.ac.uk) and Dr Elizabeth Noon (enoon@dmu.ac.uk). The main aim of the study is to explore the general public's perceptions of male rape. The research will concern the topic of rape, if you feel upset by this information then details to Samaritans and other external support contact information are available for you at the end of the information sheet.

2. Why have I been chosen?

I would like to explore the UK general public's views on male rape. You will need to be 18 years old and over and you must be currently living in the UK. Your participation will contribute to bringing awareness to the issue of male rape and assist in producing informative resources.

3. What does the study involve?

Trigger and content warning: the study will be focused on the topics surrounding male rape and sexual violence in the UK.

The study will involve you completing an online survey and you will need to find a safe space where you can complete it. You will be asked two questions on if you or someone you know has experienced sexual violence (responses: Yes/No/Prefer not to say). You will not be asked to give details of the assault itself. You will also be asked to read a short non-graphic story that features accounts of sexual violence including rape and sexual assault. This may be triggering to readers with similar experiences. Then, you will be asked to

answer short questions as part of the survey, and it is estimated that this whole process will take you around 25 minutes to complete. After providing consent to participate you will be able to start the survey, please be mindful that you will need to find an uninterrupted 25 minutes in which you can complete the survey from start to finish.

Rape is a sensitive topic to discuss, and you may feel upset because of taking part in the study. If you feel upset during the questionnaire you can withdraw from the study by clicking on “Yes” on the “I wish to withdraw from the study” question at the bottom of each page.

4. Do I have to take part?

You are not required to take part. Participation is completely voluntary, and it is up to you to decide if you want to take part or not. If you do choose to take part, you can download or print this information sheet for you to keep. You will be asked to fill out a preliminary questionnaire online to check your eligibility for the study (18 years old and over, living in the UK). You will need to provide informed consent before the study. If you choose to take part, you can still withdraw from the study at any time before completing the survey and during the survey.

5. I am interested in taking part, what do I do next?

If you are interested in taking part, please complete the following survey [Hyperlink] to check your eligibility. If you are eligible then you can provide informed consent and complete the questionnaire immediately.

6. What if I agree to take part and then change my mind?

You have the right to withdraw from the study at any time when completing the questionnaire without giving any reason. For details on how to withdraw see section 8.

7. Will my taking part in this study be kept confidential?

All information collected during the research will be kept on a password protected database which is General Data Protection Regulation (GDPR) 2018 compliant and strictly confidential; please see **DMU’s Privacy Notice** on how your personal information will be used. Personal information, and any information that could be used to identify you will be removed or altered from your survey responses. All consent forms and survey responses will be kept up to 5 years after the study has been completed and then destroyed in accordance with De Montfort University’s Data retention policy, and GDPR (2018). My three supervisors and myself will have access to your anonymous survey responses. Members of the Faculty Human Research Ethics committee may require access to check that the study has been conducted in accordance with the ethical requirements for approved research.

8. What are the possible disadvantages and risks of taking part?

Rape is a sensitive topic to discuss, and you may feel upset as a result of taking part in the study. If you feel upset during the survey, you can end the study and access the debrief page by clicking on “Yes” on the “I wish to withdraw from the study” question at the bottom of the page. The debrief page will have details for external support services, which can also be found at the bottom of this page. Once you submit your survey responses you will not be able to withdraw your data, because it will not be possible to link you to your anonymous responses.

If for any reason you choose to end the survey before submission your answers will not be used in the final data set and you will be unable to return to the survey to complete it. You can always start the survey again if you change your mind. My contact details are available to you at the end of the information sheet if you wish to discuss any concerns you have about the study. Be mindful that if you choose to email me, I may know your name from your email address, though I will not be able to trace whether or not you participated in the research. I will not be able to link your email to your survey responses.

9. What are the possible benefits of taking part?

I hope you will find taking part in the survey interesting. I hope to publish the findings of the study and bring awareness to the topic of male rape and sexual assault in the UK. If you agree to take part, you will be making a real contribution to research on this important issue as well as potentially inform informative resources on male rape.

10. What if something goes wrong?

If you are harmed by taking part in this research project, there are no special compensation arrangements. If you are harmed due to someone’s negligence, then you may have grounds for a legal action, but you may have to pay for it. Regardless of this, if you wish to complain, or have any concerns about any aspect of the way you have been approached or treated during this study, the normal University complaints mechanisms should be available to you.

11. Who can I complain to?

If you have a complaint regarding anything to do with this study, you can initially approach me. If this achieves no satisfactory outcome, you should then contact my supervisors. If this achieves no satisfactory outcome, you should then contact the Administrator for the Faculty of Health and Life Sciences, De Montfort University, Research and Innovation Office; 2.14 Heritage House, The Gateway, Leicester, LE1 9BH, +44 (0) 116 207 8228 / +44 (0) 116 257 7864, hlsfro@dmu.ac.uk.

12. What will happen to the results of the research study?

The findings of the research will be presented in my PhD Thesis, grants, conferences, and publications. No participants will be identifiable by information in my PhD thesis, grants, conferences, and publications.

Thank you for taking the time to read this information sheet

Contact for Further Information

Researcher: Ngosa Kambashi
Email: ngosa.kambashi@my365.dmu.ac.uk

First academic supervisor: Dr Amanda Wilson
Email: amanda.wilson@dmu.ac.uk
Tel: 01162 078 815

Second academic supervisor: Dr Joanne Rechdan
Email: jrechdan@bournemouth.ac.uk
Tel: 01162 078 861

Third academic supervisor: Dr Elizabeth Noon
Email: enoon@dmu.ac.uk
Tel: 0 1162 577 823

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Email: jo@samaritans.org.uk
Helpline: 08457 909 090 or 116 123

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Website: https://www.thesurvivorstrust.org/
Helpline: 08088 010 818

Support Line
Website: http://www.supportline.org.uk
Email: info@supportline.org.uk.
Helpline: 01708 765 200

Victim support
Website: http://www.victimsupport.org.uk/
Telephone: 08 08 16 89 111

Safeline National Male Survivor Helpline

Website: https://www.safeline.org.uk/

Helpline: 0808 800 5005

SurvivorsUK (cisgender or trans men)

Website: https://www.survivorsuk.org/

Email: help@survivorsuk.org

Tel: 02035 983 898

Men's Advice Line: 08088 010 327

Confidential helpline for men experiencing domestic violence

Male Survivors partnership

Website: https://www.malesurvivor.co.uk/support-for-male-survivors/

Helpline: 08088 005 005

Rape Crisis Centre (women)

National telephone helpline: 0808 802 9999 (daily 12pm to 2:30pm, 7pm to 9:30pm)

Galop (LGBTQ+ survivors)

Website: http://www.galop.org.uk/

Telephone: **0800 9995428** (10am to 5pm)

33 Appendix Z: Study Three Preliminary Form (Inclusion/Exclusion Form)

8. Age: _____

9. Do you live in the UK?
   Yes

   No

If the participant inputs a number below 18 and/or answers "no" to question 2 then the participant will be taken to the end of the survey and shown the following message:

Thank you for taking the time to fill out this questionnaire. Unfortunately, you do not meet the eligibility requirements for this research. If you have any questions about the research, please feel free to contact the researcher at ngosa.kambashi@my365.dmu.ac.uk. Be mindful that if you choose to email me, I may know your name from your email address, though I will not be able to trace whether or not you participated in the research. I will not be able to link your email to your survey responses.

External support information

Samaritans
Website: http://www.samaritans.org/
Email: jo@samaritans.org.uk
Helpline: 08457 909 090 or 116 123

The Survivors Trust
Website: https://www.thesurvivorstrust.org/
Helpline: 08088 010 818

Support Line
Website: http://www.supportline.org.uk
Email: info@supportline.org.uk.
Helpline: 01708 765 200

Victim support
Website: http://www.victimsupport.org.uk/

Telephone: 08 08 16 89 111

Safeline National Male Survivor Helpline
Website: https://www.safeline.org.uk/
Helpline: 0808 800 5005

SurvivorsUK (cisgender or trans men)
Website: https://www.survivorsuk.org/
Email: help@survivorsuk.org
Tel: 02035 983 898

Men's Advice Line: 08088 010 327
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Website: https://www.malesurvivor.co.uk/support-for-male-survivors/
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National telephone helpline: 0808 802 9999 (daily 12pm to 2:30pm, 7pm to 9:30pm)

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Website: http://www.galop.org.uk/
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Tel: 01162 078 861

Third academic supervisor: Dr Elizabeth Noon
Email: enoon@dmu.ac.uk
Tel: 0 1162 577 823

34 Appendix AA: Study Three Consent Form

Title of project: Community samples' Perceptions of Male Rape and Sexual Assault

Name of researcher: Ngosa Kambashi, MSc, MBPsS

I confirm that I have read and understood the information sheet [27/05/2022 – version 3] for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.
I understand that my participation is voluntary and that I am free to withdraw at any time during the survey without giving any reason by clicking "Yes" on the "I wish to withdraw from the study" question at the bottom of the page.
I understand that once I submit my anonymous responses, I cannot withdraw from the study.
I understand that, in accordance with the General Data Protection Regulation (2018) and DMU's Data Retention Policy my anonymous data will be retained up to 5 years after completion of the research.
I agree that non-identifiable data may be published in articles, grants, conferences, PhD thesis and presentations.
I understand that data collected during the study may be looked at by the researcher's supervisors, and members of the faculty human research ethics committee from De Montfort University. I give permission for the supervisors and ethics committee to have access to my anonymous data.
I understand that at the end of the study, I will be provided with a debrief and information to support services on the debrief page.
I confirm that I currently live in the UK.
I confirm that I am 18 years old and over.

Do you consent to take part in the study?

Yes

No

35 Appendix AB: Study Three Demographic Characteristics

Where in the UK do you live?

England
Wales
Scotland
Northern Ireland
Overseas territories

Gender:
Man
Woman
Non-binary
Self-describe _____
Prefer not to say

Are you the same gender as your assigned sex at birth?
Yes
No
Prefer not to say

Sexual orientation:
Gay
Lesbian
Heterosexual/Straight
Bisexual
Asexual
Pansexual
Questioning
Self-describe _____
Prefer not to say

Ethnicity:
Asian
Bangladeshi
Chinese

Indian

Pakistani

Asian other _____

Black

Black African

Black Caribbean

Black other _____

Mixed

Mixed White/Asian

Mixed White/Black African

Mixed White/Black Caribbean

Mixed other _____

White

White British

White Irish

White Gypsy/Traveller

White other

Other

Arab

Any other

Self-describe _____

Prefer not to say

Occupation: _____

Would you prefer to refer to individuals who have been raped as victims or survivors?

_____

Have you experienced sexual violence?

Yes

No

Prefer not to say

Do you know someone close to you who has experienced sexual violence?

Yes

No

Prefer not to say

36 Appendix AC: Study Three Scenarios

Factors manipulated

1. Information about the body type of the victim
2. The time
3. Location of the event
4. Drinking of alcohol
5. Gender of perpetrator (dating app they met on)
6. Type of resistance

Original by Sleath & Bull (2010)

Michael is a University student. Michael is of slight build. He had been drinking alcohol with his friends in a bar. Late that night he was walking home alone, half a mile from where he lived. His path home went through a small park. A man called out to Michael. Michael continued walking. Then the man grabbed hold of him. He began to undress Michael. Michael asked the man to let him go. The man began to push him down to the ground. Michael tried to push the man away. The man then physically forced him into sexual intercourse.

Adaptations

36.1 Male perpetrator (Control/No myth)

Michael is of average build. Michael had been talking to Dennis for some weeks through the app Grindr. He had been on a date at night with Dennis. They walked to Michael's home. At Michael's home, Dennis asked Michael for a kiss. Michael said yes. Dennis grabbed hold of him. Dennis began to undress Michael. Dennis began to push him down to the ground. Michael verbally consented and they had sexual intercourse.

36.2 Female perpetrator (Control/No myth)

Michael is of average build. Michael had been talking to Emma for some weeks through the app Tinder. He had been on a date at night with Emma. They walked to Michael's home. At Michael's home, Emma asked Michael for a kiss. Michael said yes. Emma grabbed hold of him. Emma began to undress Michael. Emma began to push him down to the ground. Michael verbally consented and they had sexual intercourse.

36.3 Male perpetrator (Low myths)

Michael is of slight build. Michael had been talking to Dennis for some weeks through the app Grindr. He had been on a date late at night with Dennis. They walked to Michael's

home. The path to his home went through a small park. In the park Dennis asked Michael for a kiss. Michael said no and continued walking. Then Dennis grabbed hold of him. Dennis began to undress Michael. Michael asked Dennis to let him go. Dennis began to push him down to the ground. Michael tried to fight off Dennis. Dennis then physically forced Michael into sexual intercourse.

36.4 Female perpetrator (Low myths)

Michael is of slight build. Michael had been talking to Emma for some weeks through the app Tinder. He had been on a date late at night with Emma. They walked to Michael's home. The path to his home went through a small park. In the park Emma asked Michael for a kiss. Michael said no and continued walking. Then Emma grabbed hold of him. Emma began to undress Michael. Michael asked Emma to let him go. Emma began to push him down to the ground. Michael tried to fight off Emma. Emma then physically forced Michael into sexual intercourse.

36.5 Male perpetrator (High myths)

Michael is of athletic build. Michael had been talking to Dennis for some weeks through the app Grindr. He had been on a date during the day with Dennis, where he had been drinking alcohol. They walked to Michael's home. At Michael's home, Dennis asked Michael for a kiss. Michael said no, but Dennis grabbed hold of him. Dennis began to undress Michael. Michael asked Dennis to let him go. Dennis began to push him down to the ground. Michael verbally protested. Dennis then physically forced Michael into sexual intercourse.

36.6 Female perpetrator (High myths)

Michael is of athletic build. Michael had been talking to Emma for some weeks through the app Tinder. He had been on a date during the day with Emma, where he had been drinking alcohol. They walked to Michael's home. At Michael's home, Emma asked Michael for a kiss. Michael said no, but Emma grabbed hold of him. Emma began to undress Michael. Michael asked Emma to let him go. Emma began to push him down to the ground. Michael verbally protested. Emma then physically forced Michael into sexual intercourse.

37 Appendix AD: Study Three Psychometric Scales

37.1 Victim and Perpetrator blame scale by Sleath & Bull (2010)

This scale will be shown together with the scenarios. This scale has been adapted to include the name of the perpetrator. In the male perpetrator condition participants will see “Dennis” and in the female perpetrator condition they will see “Emma”. 7-point likert scale with 1 = “not at all” to 7= “completely”

Below you will find a series of statements about the story you just read. Please indicate how much you agree with the statements between the scale of 1(not at all) to 7 (completely).

Item
1. How much do you blame Michael for what happened?
2. If identified, to what extent would you consider Dennis/Emma’s claim of innocence of rape to be credible?
3. In your opinion, did Michael communicate that he did not agree to sexual intercourse?
4. Overall to what extent was Dennis/Emma responsible for what happened?
5. How much do you consider the incident to be Michael’s fault?
6. How much do you blame Dennis/Emma for what happened?
7. To what extent do you consider Michael’s claim of rape to be credible?
8. How much do you consider the incident to be Dennis/Emma’s fault?
9. Overall to what extent was Michael responsible for what happened?
10. In your opinion, was Michael sexually provocative?
11. To what extent do you believe that Dennis/Emma believed that Michael was willing for sexual intercourse to occur?
12. Given Michael’s behaviour, was it reasonable for the Dennis/Emma to assume that he was interested in sexual intercourse?
13. To what extent, do you consider Dennis/Emma is guilty?

1, 3, 5, 7, and 9 measure victim blame (higher scores indicate higher victim blame)

4, 6, 8, 13 measure perpetrator blame (higher scores indicate higher perpetrator blame)

What part (or parts) of the story did you think about when deciding your answers? [Open question]

_____

37.2 Male Rape Myth Acceptance Scale by Hine, Murphy & Churchyard (2021)

Below you will find a series of statements about male rape. Please indicate how much you agree with the statements between the scale of 7(strongly disagree) to 1 (strongly agree).

7-point Likert 1 = “strongly disagree” to 7 = “strongly agree”

Item	Code
If a man is raped it does not mean he is weak	1M.C.A.R
A man who is raped must have been behaving in a way that made him appear homosexual	1S.B.A
Male on male rape only happens to homosexual men	2S.C.C.
A male victim who ejaculates during the incident has not been raped	2PL.B.C
Almost all male rape occurs in institutions such as prisons or the military	2C.T.C.
A homosexual man who rapes other men does so out of sexual desire.	2P.B.C
Most men would be able to fight off a male sexual attacker	3M.C.C.
Rape is an accepted risk of a ‘homosexual lifestyle’	3S.B.A.
Heterosexual men who commit rape do so to act upon secret homosexual desires	3P.C.C.
In ‘real’ cases of male rape, there will be some evidence of physical resistance	4M.B.C.
Heterosexual men ‘cry rape’ to hide their homosexual activities	4S.B.A.
Even if force is used to initiate sex, the victim’s erection can be interpreted as pleasure	4PL.B.C.
I would expect heterosexual victims of rape to be more traumatized than homosexual victims	4E.C.A.
A man would not rape another man if he was sexually fulfilled elsewhere	4P.B.C.

Just because a man is raped does not mean he is homosexual	5S.C.C.R
Men should feel ashamed as a result of being raped	5E.C.A.
Most cases of male rape include the use of a weapon	5C.T.C.
A homosexual man who has been raped probably enjoyed the experience to some extent	6PL.C.A.
A man is more responsible for his own rape if he frequents a known homosexual area or establishment	6C.B.A.
Only men who are big and strong are able to rape other men	6P.C.C.
I would find it difficult to consider a man a ‘real man’ if he said he had been raped	7M.C.A.
If a man has already had consensual sex with other men, I would not believe his claims of rape	7S.B.A.
A man who is raped is not as traumatized by the experience as a woman	7E.C.A.
If a man is drunk or taking drugs he is accepting rape as a possible risk	7C.B.A
Men who commit rape are naturally more aggressive in their day to day lives	7P.C.C.
It is acceptable for a ‘real man’ to show fear during a sexual attack by another man	8M.B.A.
A man who claims to have been raped probably just changed his mind after initially consenting to sex	8S.B.A.
A male victim of rape must have behaved in a way that invited the assault	8C.B.A.
A heterosexual man who had been raped would still be desirable to women	9M.C.A.R.
Male rape is a homosexual act	9S.C.C.
If a man has been raped he should be able to cope on his own	9E.C.A.

I would find it difficult to believe a man had been raped if he had previously consented to sex with the same man	9C.B.A.R
Regardless of how they identify themselves, I believe that men who rape other men are homosexual	9P.C.A
'Real men' cannot be raped	10M.C.A.
I would expect a man to be 'matter of fact' and in control of his emotions when reporting a rape	10E.B.A.
A man who has been raped did not set sexual limits understood by the perpetrator	10C.B.C.
Male victims of rape have very little emotional trauma to cope with	11E.C.A.

Code is comprised of:

a) a number denoting the position of that item within each theme,

b) a letter denoting the theme (M = Masculinity, S = Sexuality, PL = Pleasure, E = Effect, C = Context, P = Perpetrator),

c) whether the item is Behavioural (B), Characterological (C) or Typological (T), and

d) whether the item is Affective (A) or Cognitive (C).

If the item also has an R at the end of its code, this means the question is reverse scored.

Higher scores indicate acceptance of male rape myths

37.3 Ambivalence towards men scale by Glick and Fiske (1999)

Below you will find a series of statements about beliefs surrounding men. Please indicate how much you agree with the statements between the scale of 0 (disagree strongly) to 5 (agree strongly).

5-point likert 0 = “disagree strongly” to 5 = “agree strongly” with no mid-point

Even if both members of a couple work, the woman ought to be more attentive to taking care of her man at home
When men act to “help” women, they are often trying to prove they are better than women
Every woman needs a male partner who will cherish her
A woman will never be truly fulfilled in life if she doesn’t have a committed, long-term relationship with a man
Men act like babies when they are sick
Men will always fight to have greater control in society than women
Men are mainly useful to provide financial security for women
Even men who claim to be sensitive to women’s rights really want a traditional relationship at home, with the woman performing most of the housekeeping and child care
Men are more willing to put themselves in danger to protect others
When it comes down to it, most men are really like children
Men are more willing to take risks than women
Most men sexually harass women, even if only in subtle ways, once they are in a position of power over them

Scoring:

Hostility toward men = average of items 2, 5, 6, 8, 10, 12
Benevolence toward men = average of items 1, 3, 4, 7, 9, 11.

37.4 Social Desirability - Short form (SDSF) by Strahan & Gerbasi (1972)

M-C 1 (10) version.

"Read each item and decide whether it is true (T) or false (F) for you."

Items	T	F
I'm always willing to admit it when I make a mistake.		
I always try to practice what I preach.		
I never resent being asked to return a favour.		
I have never been irked when people expressed ideas very different from my own.		
I have never deliberately said something that hurt someone's feelings.		
I like to gossip at times.		
There have been occasions when I took advantage of someone.		
I sometimes try to get even rather than forgive and forget.		
At times I have really insisted on having things my own way.		
There have been occasions when I felt like smashing things.		

Items 1 to 5 are true states, and 6-10 are false statements. True = 1, False = 0. The lower the score the lower the social desirability.

37.5 Appendix AD.1 permissions

For the Male rape myths scale (Hine et al., 2021)

[Confidential Information Removed]

For Ambivalent sexism scale (Glick, 1996, 1999)

[Confidential Information Removed]

For the scenario, and blame and perpetrator blame (Sleath and Bull, 2010)

[Confidential Information Removed]

38 Appendix AE: Study Three Debrief Form

Title of project: Community samples' Perceptions of Male Rape and Sexual Assault

Name of researcher: Ngosa Kambashi, MSc, MBPsS

The purpose of the study is to explore the community's perceptions of male rape and sexual assault in the UK. Research suggests that perceptions of male rape may contain misconceptions about male rape and these misconceptions can lead to barriers to reporting, disclosing, and seeking of support. The literature suggests that sometimes these misconceptions can be influenced by beliefs surrounding gender, sexuality, ethnicity, and personal closeness to the issue of sexual violence. Consequently, you were asked to answer some questions to gather your views on the issues mentioned above. You were assigned to either a no myth, low myth and high myth condition as research suggests that sometimes gender (survivors', perpetrators' and participants') and contextual factors are related to male rape myth acceptance. You were also asked about your personal closeness to sexual violence as research suggests there is an association between closeness to the topic and male rape myth acceptance. You were asked about your views on the fundamental nature of men and roles they play in society, because these views can be related to male rape myth acceptance. The results of this questionnaire are not prescriptive. The intent of this research is to contribute to the current research on male rape, gender, sexuality, experience as/knowing a survivor in psychology by increasing awareness of the topic of male rape myths, which has been largely under-researched.

The findings of the research will be presented in my PhD thesis, at conferences, in grants, and in publications. It is hoped that these findings will increase awareness of the topic of male rape myths in the UK. You will not be identifiable by information that will be published.

If you have been affected or have any concerns raised by the topics in the study, for support you can contact Samaritans, Support Line, Safeline National Male Survivor Helpline, The Survivors Trust, Rape Crisis UK, and Galop. For contact details please scroll down to the bottom of this page. You can download and save this page for you to keep. This study is fully anonymous thus it would not be possible to withdraw your data from the study as there is no way for the researcher to identify your data from the dataset.

If you have a complaint regarding anything to do with this study, you can initially approach me. If this achieves no satisfactory outcome, you should then contact my supervisors. Be mindful that if you choose to email me, I may know your name from your email address, though I will not be able to trace whether or not you participated in the research. I will not be able to link your email to your survey responses. If contacting me achieves no satisfactory outcome, you should then contact the Administrator for the Faculty Research Ethics Committee, Research & Innovation Office, Faculty of Health and Life Sciences, De Montfort University, Research and Innovation Office, 2.14 Heritage House, The Gateway, Leicester, LE1 9BH, +44 (0) 116 207 8228 / +44 (0) 116 257 7864, hlsfro@dmu.ac.uk. Please see DMU's Privacy Notice on how your personal information will be used.

Thank you for participating!

Contact for Further Information

Researcher: Ngosa Kambashi
Email: ngosa.kambashi@my365.dmu.ac.uk

First academic supervisor: Dr Amanda Wilson
Email: amanda.wilson@dmu.ac.uk
Tel: 01162 078 815

Second academic supervisor: Dr Joanne Rechdan
Email: jrechdan@bournemouth.ac.uk
Tel: 01162 078 861

Third academic supervisor: Dr Elizabeth Noon
Email: enoon@dmu.ac.uk
Tel: 0 1162 577 823

External support information

Samaritans
Website: http://www.samaritans.org/
Email: jo@samaritans.org.uk
Helpline: 08457 909 090 or 116 123

The Survivors Trust
Website: https://www.thesurvivorstrust.org/
Helpline: 08088 010 818

Support Line
Website: http://www.supportline.org.uk
Email: info@supportline.org.uk.
Helpline: 01708 765 200

Victim support
Website: http://www.victimsupport.org.uk/
Telephone: 08 08 16 89 111

Safeline National Male Survivor Helpline
Website: https://www.safeline.org.uk/
Helpline: 0808 800 5005

SurvivorsUK (cisgender or trans men)
Website: https://www.survivorsuk.org/
Email: help@survivorsuk.org
Tel: 02035 983 898

Men's Advice Line: 08088 010 327
Confidential helpline for men experiencing domestic violence

Male Survivors partnership
Website: https://www.malesurvivor.co.uk/support-for-male-survivors/
Helpline: 08088 005 005

Rape Crisis Centre (women)
National telephone helpline: 0808 802 9999 (daily 12pm to 2:30pm, 7pm to 9:30pm)

Galop (LGBTQ+ survivors)

Website: http://www.galop.org.uk/

Telephone: 0800 9995428 (10am to 5pm)

39 Appendix AF: Study Three Ethics Approvals

40 Appendix AF.1: Study Three First Approval

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14 June 2022

Ngosa Kambashi

Dear Ngosa Kambashi

I am writing regarding your application for ethical approval for the research study summarised below which has now been reviewed in accordance with De Montfort University's Research Ethics Code of Practice. I am pleased to inform you that the study has been approved.

It is your responsibility to ensure your research adheres to the standard conditions of approval below. You should ensure that the ethics of your study is kept under review as the research progresses, and in response to any external changes that might affect the approval. As noted below, changes in your research may require you to apply for an amendment to your application. As always, you should feel free to ask your Faculty Research Ethics Committee or ethics@dmu.ac.uk for advice and support.

Study Title:	Community Perceptions of male rape REF 459073
WorkTribe Ref:	459073
Committee:	School of Applied Social Sciences
Approval Date:	14 Jun 2022
End Date:	14 Jun 2025
Risk category:	Medium
Status:	**Approved**

Standard Conditions of Approval:

All research projects are subject to the same standard conditions:

1. It is a condition of approval for research involving any of the following activities:

   - Face to face research interactions, including interviews, focus groups, workshops etc.
   - Travel for research purposes
   - Any activity that could be considered 'fieldwork'

   That the principal investigator monitors government guidelines, and reviews regularly the implications of any changes to guidelines on the research study. Any restrictions imposed must be adhered to. The investigator must notify the approving FREC of any changes required in response to government restrictions. The principal investigator remains responsible for ensuring all necessary governance arrangements are satisfied, including Health and Safety and consideration of appropriate insurance cover for the proposed activities.

2. Researchers must comply with ethical, legal and professional frameworks, obligations and standards as required by the University (including the Research Ethics Code of Practice), statutory and regulatory authorities, and by funders and other relevant stakeholders.

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3. Approval is based on the information provided including supporting documentation. Any changes to the protocols or documentation must be approval by the relevant ethics committee before being implemented.

4. The standard period of approval is three years. If necessary, re-approval must be sought before the end of the three-year approval period, ensuring that the study, and consideration of ethical issues, remains valid.

5. Any adverse or unforeseen events must be reported within 24 hours to the approving Ethics Committee. This includes any near misses that but for luck, skill or judgement, would in all probability have been an adverse or unforeseen event.

6. The University's protocols for seeking external approvals (including Health Research Authority approval) must be followed, and those permissions must be acknowledged by the University before research commences.

7. External permissions including use of resources and access to participants, where required, must be sought before research commences.

8. The study must comply with the Data Protection Act 2018 and General Data Protection Regulation (GDPR), and necessary arrangements should have been, or will be, made with regard to the storage and processing of participants' personal information and generally, to ensure confidentiality of such data supplied and generated in the course of the research including the need for a Data Protection Impact Assessment.

9. The principal investigator for a research study meeting the criteria for **high risk** will ensure that:

    a. There is adequate insurance cover for the approved study.

    b. An annual progress report is submitted to the approving Committee.

10. Research records/data may be subject to inspection for audit purposes if required in future and should be legible and well organised.

11. At the end of the study the principal investigator ensures:

    a. The relevant WorkTribe ethics record should be 'marked complete'.

    b. There are clear plans to ensure relevant actions are taken at appropriate time points regarding the destruction of data.

12. The Principal Investigator on the research project takes full responsibility for the actions of the research team and individuals supporting the study, and must ensure all those involved are given training relevant to their role in the study. All members of the research team should understand the expected standards of rigour and integrity and must maintain these at all times.

Yours sincerely,

Faculty Head of Research Ethics

41 Appendix AF.2: Study Three Amendment Approvals

24 January 2023

Dear Ngosa,

I am writing regarding your **amended** application for ethical approval for the research study summarised below which has now been reviewed in accordance with De Montfort University's Research Ethics Code of Practice. I am pleased to inform you that the amendments to the study have been approved.

It is your responsibility to ensure your research adheres to the standard conditions of approval below. You should ensure that the ethics of your study is kept under review as the research progresses, and in response to any external changes that might affect the approval. As noted below, changes in your research may require you to apply for an amendment to your application. As always, you should feel free to ask your Faculty Research Ethics Committee or ethics@dmu.ac.uk for advice and support.

Study Title:	Community Perceptions of male rape REF 459073	
WorkTribe Ref:	459073	
Committee:	Health and Life Science Faculty Research Ethics Committee (HLS FREC)	
Approval Date:	14 Jun 2022, 13:09	
End Date:	23 Jan 2026, 17:00	
Risk category:	Medium	
Status:	**Amendment Approved**	

Standard Conditions of Approval:

All research projects are subject to the same standard conditions:

1. It is a condition of approval for research involving any of the following activities:

   - Face to face research interactions, including interviews, focus groups, workshops etc.
   - Travel for research purposes
   - Any activity that could be considered 'fieldwork'

   That the principal investigator monitors government guidelines, and reviews regularly the implications of any changes to guidelines on the research study. Any restrictions imposed must be adhered to. The investigator must notify the approving FREC of any changes required in response to government restrictions. The principal investigator remains responsible for ensuring all necessary governance arrangements are satisfied, including Health and Safety and consideration of appropriate insurance cover for the proposed activities.

2. Researchers must comply with ethical, legal and professional frameworks, obligations and standards as required by the University (including the Research Ethics Code of Practice), statutory and regulatory authorities, and by funders and other relevant stakeholders.

3. Approval is based on the information provided including supporting documentation. Any changes to the protocols or documentation must be approval by the relevant ethics committee before being implemented.

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4. The standard period of approval is three years. If necessary, re-approval must be sought before the end of the three-year approval period, ensuring that the study, and consideration of ethical issues, remains valid.

5. Any adverse or unforeseen events must be reported within 24 hours to the approving Ethics Committee. This includes any near misses that but for luck, skill or judgement, would in all probability have been an adverse or unforeseen event.

6. The University's protocols for seeking external approvals (including Health Research Authority approval) must be followed, and those permissions must be acknowledged by the University before research commences.

7. External permissions including use of resources and access to participants, where required, must be sought before research commences.

8. The study must comply with the Data Protection Act 2018 and General Data Protection Regulation (GDPR), and necessary arrangements should have been, or will be, made with regard to the storage and processing of participants' personal information and generally, to ensure confidentiality of such data supplied and generated in the course of the research including the need for a Data Protection Impact Assessment.

9. The principal investigator for a research study meeting the criteria for **high risk** will ensure that:

    a. There is adequate insurance cover for the approved study.

    b. An annual progress report is submitted to the approving Committee.

10. Research records/data may be subject to inspection for audit purposes if required in future and should be legible and well organised.

11. At the end of the study the principal investigator ensures:

    a. The relevant WorkTribe ethics record should be 'marked complete'.

    b. There are clear plans to ensure relevant actions are taken at appropriate time points regarding the destruction of data.

12. The Principal Investigator on the research project takes full responsibility for the actions of the research team and individuals supporting the study, and must ensure all those involved are given training relevant to their role in the study. All members of the research team should understand the expected standards of rigour and integrity and must maintain these at all times.

Yours sincerely,

RHall

Professor Richard Hall

Faculty Head of Research Ethics, Faculty of Health & Life Sciences, De Montfort University

42 Appendix AG: Study Three the Male Rape Myths Scale EFA Output

```
      Call:
      factanal(x = ~MM1 + MM2 + MM3 + MM4 + MM5 + MM6 + MM7 + MM8 +
MM9 + MM10 + MM11 + MM12 + MM13 + MM14 + MM15 + MM16 + MM17 +     MM18
+ MM19 + MM20 + MM21 + MM22 + MM23 + MM24 + MM25 + MM26 +     MM27 + M
M28 + MM29 + MM30 + MM31 + MM32 + MM33 + MM34 + MM35 +     MM36 + MM37
, factors = 2, data = MMA_EFA_data, rotation = "varimax")

      Uniquenesses:
        MM1   MM2   MM3   MM4   MM5   MM6   MM7   MM8   MM9  MM10  MM1
1  MM12  MM13  MM14  MM15  MM16  MM17  MM18  MM19  MM20  MM21  MM22  M
M23  MM24  MM25  MM26  MM27  MM28  MM29  MM30
      0.499 0.165 0.252 0.266 0.298 0.823 0.319 0.161 0.712 0.494 0.48
9 0.624 0.504 0.296 0.682 0.248 0.704 0.230 0.139 0.208 0.210 0.197 0.
334 0.183 0.844 0.500 0.370 0.135 0.709 0.680
       MM31  MM32  MM33  MM34  MM35  MM36  MM37
      0.304 0.479 0.751 0.241 0.279 0.202 0.585

      Loadings:
           Factor1 Factor2
      MM1   0.658   0.262
      MM2   0.656   0.636
      MM3   0.519   0.692
      MM4   0.452   0.728
      MM5   0.813   0.203
      MM6   0.350   0.233
      MM7   0.762   0.318
      MM8   0.850   0.341
      MM9   0.326   0.427
      MM10  0.632   0.326
      MM11  0.352   0.622
      MM12  0.283   0.544
      MM13  0.581   0.398
      MM14  0.630   0.554
      MM15  0.329   0.458
      MM16  0.493   0.714
      MM17  0.433   0.329
      MM18  0.343   0.808
      MM19  0.799   0.472
      MM20  0.819   0.347
      MM21  0.457   0.762
      MM22  0.330   0.833
      MM23  0.665   0.473
      MM24  0.827   0.365
      MM25  0.355   0.173
      MM26 -0.472  -0.527
      MM27  0.429   0.668
      MM28  0.704   0.608
      MM29  0.429   0.327
      MM30          0.560
      MM31  0.594   0.586
      MM32 -0.332  -0.641
      MM33  0.163   0.471
      MM34  0.474   0.731
      MM35  0.606   0.595
      MM36  0.805   0.386
      MM37  0.503   0.403

                     Factor1 Factor2
      SS loadings     11.478  10.405
      Proportion Var   0.310   0.281
      Cumulative Var   0.310   0.591
```

```
Test of the hypothesis that 2 factors are sufficient.
The chi square statistic is 1288.32 on 593 degrees of freedom.
The p-value is 1.65e-53
```

42.1.1 Internal consistency for the factors

```
Reliability analysis
Call: alpha(x = MMA_factor1_items, check.keys = TRUE)

  raw_alpha std.alpha G6(smc) average_r S/N    ase mean  sd med
ian_r
      0.97      0.96    0.98      0.55  27 0.0025  2.3 1.2
0.66

    95% confidence boundaries
         lower alpha upper
Feldt     0.97  0.97  0.98
Duhachek  0.97  0.97  0.98

 Reliability if an item is dropped:
      raw_alpha std.alpha G6(smc) average_r S/N alpha se var.r
med.r
MM1        0.97      0.96    0.98      0.55  26   0.0026 0.145
0.68
MM2        0.97      0.96    0.98      0.54  24   0.0028 0.139
0.66
MM3        0.97      0.96    0.98      0.54  25   0.0027 0.141
0.66
MM4        0.97      0.96    0.98      0.54  25   0.0027 0.141
0.66
MM8        0.97      0.96    0.98      0.54  25   0.0027 0.142
0.66
MM16       0.97      0.96    0.98      0.54  25   0.0027 0.141
0.66
MM18       0.97      0.96    0.98      0.54  25   0.0026 0.141
0.66
MM19       0.97      0.96    0.98      0.54  24   0.0028 0.140
0.66
MM20       0.97      0.96    0.98      0.54  25   0.0027 0.143
0.66
MM21       0.97      0.96    0.98      0.54  25   0.0027 0.140
0.66
MM22       0.97      0.96    0.98      0.54  25   0.0026 0.140
0.66
MM23       0.97      0.96    0.98      0.54  25   0.0027 0.143
0.66
MM24       0.97      0.96    0.98      0.54  25   0.0027 0.141
0.66
MM27       0.97      0.96    0.98      0.55  25   0.0026 0.143
0.67
MM28       0.97      0.96    0.98      0.53  24   0.0028 0.139
0.66
MM29       0.97      0.96    0.98      0.56  27   0.0024 0.144
0.68
MM31       0.97      0.96    0.98      0.54  25   0.0027 0.142
0.66
MM32-      0.97      0.98    0.98      0.66  41   0.0026 0.014
0.68
MM34       0.97      0.96    0.98      0.54  25   0.0027 0.141
0.66
MM35       0.97      0.96    0.98      0.54  25   0.0027 0.141
0.66
MM36       0.97      0.96    0.98      0.54  25   0.0027 0.142
0.66
```

```
      MM37       0.97      0.96    0.98      0.56  26   0.0025 0.145
0.68

       Item statistics
              n raw.r std.r r.cor r.drop mean  sd
      MM1   196  0.69  0.68  0.66   0.65  1.8 1.5
      MM2   196  0.91  0.92  0.92   0.90  1.8 1.4
      MM3   196  0.85  0.86  0.86   0.84  1.7 1.4
      MM4   196  0.83  0.83  0.82   0.81  1.7 1.2
      MM8   196  0.86  0.86  0.86   0.85  1.9 1.6
      MM16  196  0.85  0.86  0.86   0.83  1.6 1.2
      MM18  196  0.79  0.80  0.80   0.78  1.5 1.0
      MM19  196  0.91  0.91  0.91   0.90  2.1 1.7
      MM20  196  0.84  0.83  0.83   0.81  2.4 1.9
      MM21  196  0.85  0.86  0.86   0.84  1.7 1.2
      MM22  196  0.80  0.81  0.80   0.79  1.6 1.2
      MM23  196  0.83  0.83  0.82   0.81  1.9 1.6
      MM24  196  0.87  0.85  0.85   0.85  2.2 2.0
      MM27  196  0.77  0.78  0.77   0.75  1.8 1.2
      MM28  196  0.93  0.93  0.93   0.92  1.9 1.5
      MM29  196  0.58  0.57  0.53   0.54  2.5 1.6
      MM31  196  0.84  0.84  0.83   0.82  1.8 1.3
      MM32- 196  0.70 -0.65 -0.68   0.67  5.9 1.4
      MM34  196  0.83  0.85  0.85   0.82  1.5 1.0
      MM35  196  0.86  0.85  0.85   0.84  2.0 1.5
      MM36  196  0.87  0.86  0.85   0.84  2.3 1.9
      MM37  196  0.68  0.68  0.65   0.64  6.4 1.5
      > # Calculating internal consistency for Factor 2 - Min/Ex
      > MMA_factor2_items <- MMA_EFA_data[, c("MM5", "MM6", "MM7", "M
M9", "MM10", "MM11", "MM12", "MM13", "MM14", "MM15", "MM17", "MM25",
"MM26", "MM30", "MM33")]
      > MMA_alpha_factor2 <- alpha(MMA_factor2_items, check.keys=TRUE
)
      Warning message:
      In alpha(MMA_factor2_items, check.keys = TRUE) :
        Some items were negatively correlated with the first principa
l component and were automatically reversed.
       This is indicated by a negative sign for the variable name.
      > print(MMA_alpha_factor2)

      Reliability analysis
      Call: alpha(x = MMA_factor2_items, check.keys = TRUE)

        raw_alpha std.alpha G6(smc) average_r S/N    ase mean  sd med
ian_r
            0.91      0.86     0.9      0.29 6.2 0.0093  2.7 1.1
0.37

          95% confidence boundaries
               lower alpha upper
      Feldt     0.89  0.91  0.93
      Duhachek  0.89  0.91  0.93

       Reliability if an item is dropped:
            raw_alpha std.alpha G6(smc) average_r S/N alpha se var.r
med.r
      MM5        0.90      0.85    0.89      0.28 5.5   0.0101 0.096
0.37
      MM6        0.91      0.85    0.90      0.29 5.8   0.0095 0.102
0.38
      MM7        0.90      0.84    0.88      0.28 5.4   0.0104 0.093
0.37
      MM9        0.90      0.84    0.89      0.28 5.4   0.0101 0.100
0.36
      MM10       0.90      0.84    0.89      0.27 5.3   0.0104 0.096
0.36
```

```
      MM11       0.90      0.84    0.89      0.28 5.4   0.0101 0.096
0.36
      MM12       0.90      0.85    0.89      0.29 5.6   0.0098 0.100
0.37
      MM13       0.90      0.84    0.89      0.27 5.3   0.0105 0.095
0.36
      MM14       0.90      0.84    0.88      0.27 5.1   0.0108 0.091
0.35
      MM15       0.91      0.86    0.90      0.30 6.1   0.0095 0.099
0.39
      MM17       0.90      0.85    0.89      0.29 5.6   0.0099 0.101
0.37
      MM25       0.91      0.86    0.90      0.30 6.1   0.0092 0.103
0.40
      MM26-      0.90      0.90    0.92      0.40 9.3   0.0099 0.018
0.40
      MM30       0.91      0.85    0.89      0.29 5.6   0.0096 0.100
0.37
      MM33       0.90      0.85    0.89      0.29 5.6   0.0096 0.100
0.38

       Item statistics
              n raw.r std.r r.cor r.drop mean  sd
      MM5   196  0.71  0.69  0.67   0.64  2.8 2.0
      MM6   196  0.58  0.58  0.53   0.50  3.6 1.9
      MM7   196  0.76  0.74  0.74   0.71  2.8 1.9
      MM9   196  0.69  0.72  0.70   0.64  2.7 1.6
      MM10  196  0.77  0.76  0.75   0.71  3.4 2.0
      MM11  196  0.73  0.73  0.71   0.69  2.1 1.4
      MM12  196  0.63  0.63  0.59   0.57  2.1 1.5
      MM13  196  0.78  0.78  0.77   0.73  2.5 1.8
      MM14  196  0.84  0.83  0.83   0.80  2.2 1.8
      MM15  196  0.48  0.45  0.40   0.42  1.7 1.4
      MM17  196  0.63  0.64  0.59   0.57  3.4 1.5
      MM25  196  0.46  0.47  0.40   0.37  3.3 1.7
      MM26- 196  0.66 -0.54 -0.63   0.61  1.9 1.5
      MM30  196  0.61  0.63  0.62   0.54  2.6 1.8
      MM33  196  0.62  0.63  0.61   0.54  2.6 1.9

      Non missing response frequency for each item
              1    2    3    4    5    6    7 miss
      MM5  0.37 0.23 0.04 0.13 0.09 0.04 0.09    0
      MM6  0.24 0.13 0.05 0.22 0.15 0.18 0.03    0
      MM7  0.30 0.27 0.13 0.11 0.06 0.05 0.08    0
      MM9  0.33 0.21 0.08 0.22 0.13 0.03 0.01    0
      MM10 0.26 0.16 0.10 0.14 0.14 0.12 0.08    0
      MM11 0.49 0.18 0.10 0.16 0.05 0.02 0.00    0
      MM12 0.51 0.21 0.10 0.07 0.07 0.03 0.02    0
      MM13 0.48 0.19 0.04 0.10 0.06 0.12 0.01    0
      MM14 0.55 0.19 0.05 0.07 0.04 0.08 0.03    0
      MM15 0.66 0.20 0.04 0.01 0.05 0.03 0.02    0
      MM17 0.14 0.19 0.09 0.44 0.05 0.05 0.04    0
      MM25 0.20 0.18 0.08 0.29 0.14 0.07 0.04    0
      MM26 0.02 0.04 0.04 0.05 0.04 0.21 0.61    0
      MM30 0.42 0.16 0.10 0.14 0.07 0.07 0.04    0
      MM33 0.40 0.22 0.09 0.11 0.06 0.07 0.05    0
```

43 Appendix AH: Study Three Ambivalent Towards Men Inventory EFA Output

```
factanal(x = EFA_data2, factors = 2, rotation = "varimax")
```

```
Uniquenesses:
 AMI1  AMI2  AMI3  AMI4  AMI5  AMI6  AMI7  AMI8  AMI9 AMI10 AMI11 AMI1
2
0.302 0.461 0.544 0.276 0.646 0.505 0.284 0.382 0.681 0.582 0.615 0.38
3

Loadings:
      Factor1 Factor2
AMI1  0.767   0.332
AMI2  0.202   0.706
AMI3  0.673
AMI4  0.836   0.156
AMI5          0.588
AMI6  0.282   0.645
AMI7  0.795   0.289
AMI8  0.365   0.696
AMI9  0.539   0.168
AMI10 0.141   0.631
AMI11 0.550   0.287
AMI12 0.151   0.771

               Factor1 Factor2
SS loadings      3.271   3.069
Proportion Var   0.273   0.256
Cumulative Var   0.273   0.528

Test of the hypothesis that 2 factors are sufficient.
The chi square statistic is 180.13 on 43 degrees of freedom.
The p-value is 1.05e-18
```

43.1.1 Internal consistency whole scale

```
      Reliability analysis
      Call: alpha(x = AMIScale_items, check.keys = TRUE)

        raw_alpha std.alpha G6(smc) average_r S/N   ase mean  sd medi
an_r
            0.88      0.88    0.92      0.39 7.7 0.013  2.7 1.1     0
.39

          95% confidence boundaries
               lower alpha upper
      Feldt     0.86  0.88  0.90
      Duhachek  0.86  0.88  0.91

       Reliability if an item is dropped:
            raw_alpha std.alpha G6(smc) average_r S/N alpha se var.r
med.r
      AMI1       0.87      0.87    0.90      0.38 6.6    0.015 0.024
0.37
      AMI2       0.87      0.88    0.91      0.39 7.1    0.014 0.025
0.41
      AMI3       0.88      0.88    0.91      0.40 7.5    0.013 0.023
0.41
      AMI4       0.87      0.87    0.90      0.38 6.9    0.014 0.023
0.39
```

```
      AMI5       0.88      0.88    0.91      0.41 7.5    0.013 0.023
0.41
      AMI6       0.87      0.87    0.91      0.39 6.9    0.014 0.028
0.39
      AMI7       0.87      0.87    0.90      0.38 6.6    0.014 0.024
0.37
      AMI8       0.86      0.87    0.90      0.38 6.6    0.015 0.027
0.37
      AMI9       0.88      0.88    0.91      0.40 7.4    0.013 0.024
0.40
      AMI10      0.87      0.88    0.90      0.40 7.3    0.014 0.025
0.41
      AMI11      0.87      0.88    0.90      0.39 7.0    0.014 0.026
0.39
      AMI12      0.87      0.88    0.91      0.39 7.1    0.014 0.025
0.39

       Item statistics
              n raw.r std.r r.cor r.drop mean  sd
      AMI1  196  0.76  0.77  0.76   0.70  2.0 1.5
      AMI2  196  0.64  0.64  0.61   0.56  2.4 1.6
      AMI3  196  0.57  0.56  0.52   0.46  2.7 1.9
      AMI4  196  0.70  0.71  0.69   0.63  1.9 1.4
      AMI5  196  0.57  0.56  0.52   0.47  3.0 1.7
      AMI6  196  0.69  0.69  0.65   0.61  3.6 1.6
      AMI7  196  0.76  0.77  0.75   0.70  2.0 1.4
      AMI8  196  0.76  0.76  0.74   0.70  3.0 1.7
      AMI9  196  0.58  0.58  0.54   0.49  3.3 1.6
      AMI10 196  0.62  0.61  0.59   0.53  2.7 1.6
      AMI11 196  0.66  0.66  0.63   0.58  3.4 1.6
      AMI12 196  0.66  0.66  0.63   0.58  2.9 1.7

      Non missing response frequency for each item
               1    2    3    4    5    6 miss
      AMI1  0.61 0.14 0.07 0.08 0.07 0.04    0
      AMI2  0.42 0.20 0.12 0.10 0.10 0.05    0
      AMI3  0.44 0.14 0.08 0.08 0.13 0.12    0
      AMI4  0.63 0.15 0.07 0.05 0.06 0.04    0
      AMI5  0.26 0.21 0.12 0.19 0.13 0.09    0
      AMI6  0.17 0.13 0.11 0.26 0.26 0.08    0
      AMI7  0.53 0.20 0.09 0.08 0.07 0.03    0
      AMI8  0.28 0.20 0.11 0.16 0.20 0.05    0
      AMI9  0.20 0.16 0.13 0.25 0.17 0.09    0
      AMI10 0.31 0.20 0.12 0.22 0.08 0.06    0
      AMI11 0.22 0.12 0.12 0.26 0.20 0.08    0
      AMI12 0.30 0.21 0.09 0.16 0.16 0.08    0

      >
```

43.1.2 IC for concepts

Factor one

```
Call: alpha(x = Hostility_toward_men_items, check.keys = TRUE)

  raw_alpha std.alpha G6(smc) average_r S/N   ase mean  sd median_r
      0.86      0.86    0.86       0.5 5.9 0.016  2.9 1.2      0.5

    95% confidence boundaries
         lower alpha upper
Feldt     0.82  0.86  0.88
Duhachek  0.82  0.86  0.89

 Reliability if an item is dropped:
```

```
      raw_alpha std.alpha G6(smc) average_r S/N alpha se  var.r med.r
AMI2       0.83      0.83    0.82      0.50 5.0    0.019 0.0097  0.49
AMI5       0.84      0.84    0.82      0.52 5.3    0.018 0.0075  0.53
AMI6       0.84      0.84    0.83      0.50 5.1    0.019 0.0139  0.49
AMI8       0.82      0.82    0.82      0.48 4.6    0.020 0.0143  0.45
AMI10      0.83      0.83    0.81      0.50 5.0    0.019 0.0095  0.53
AMI12      0.82      0.82    0.82      0.48 4.6    0.020 0.0136  0.46

 Item statistics
        n raw.r std.r r.cor r.drop mean  sd
AMI2  196  0.76  0.76  0.70   0.64  2.4 1.6
AMI5  196  0.72  0.72  0.66   0.58  3.0 1.7
AMI6  196  0.75  0.75  0.67   0.62  3.6 1.6
AMI8  196  0.80  0.80  0.75   0.69  3.0 1.7
AMI10 196  0.75  0.75  0.71   0.63  2.7 1.6
AMI12 196  0.80  0.80  0.75   0.69  2.9 1.7

Non missing response frequency for each item
         1    2    3    4    5    6 miss
AMI2  0.42 0.20 0.12 0.10 0.10 0.05    0
AMI5  0.26 0.21 0.12 0.19 0.13 0.09    0
AMI6  0.17 0.13 0.11 0.26 0.26 0.08    0
AMI8  0.28 0.20 0.11 0.16 0.20 0.05    0
AMI10 0.31 0.20 0.12 0.22 0.08 0.06    0
AMI12 0.30 0.21 0.09 0.16 0.16 0.08    0
```

43.1.2.1 ***Factor two***

```
      Reliability analysis
      Call: alpha(x = Benevolence_towards_men_items, check.keys = TRU
E)

        raw_alpha std.alpha G6(smc) average_r S/N   ase mean  sd medi
an_r
            0.86      0.87    0.88      0.53 6.8 0.015  2.5 1.2     0
.52

          95% confidence boundaries
               lower alpha upper
      Feldt     0.83  0.86  0.89
      Duhachek  0.83  0.86  0.89

       Reliability if an item is dropped:
            raw_alpha std.alpha G6(smc) average_r S/N alpha se var.r
med.r
      AMI1       0.83      0.84    0.84      0.51 5.2    0.020 0.017
0.51
      AMI3       0.86      0.86    0.86      0.56 6.4    0.016 0.015
0.51
      AMI4       0.83      0.83    0.83      0.50 5.0    0.020 0.016
0.50
      AMI7       0.82      0.83    0.83      0.50 4.9    0.020 0.018
0.47
      AMI9       0.86      0.86    0.85      0.56 6.4    0.017 0.017
0.53
      AMI11      0.85      0.86    0.85      0.55 6.1    0.017 0.019
0.53

       Item statistics
              n raw.r std.r r.cor r.drop mean  sd
```

```
AMI1  196  0.81  0.82  0.79   0.72  2.0 1.5
AMI3  196  0.73  0.71  0.63   0.57  2.7 1.9
AMI4  196  0.83  0.84  0.82   0.76  1.9 1.4
AMI7  196  0.84  0.85  0.82   0.76  2.0 1.4
AMI9  196  0.72  0.71  0.64   0.58  3.3 1.6
AMI11 196  0.74  0.74  0.68   0.61  3.4 1.6

Non missing response frequency for each item
         1    2    3    4    5    6 miss
AMI1  0.61 0.14 0.07 0.08 0.07 0.04    0
AMI3  0.44 0.14 0.08 0.08 0.13 0.12    0
AMI4  0.63 0.15 0.07 0.05 0.06 0.04    0
AMI7  0.53 0.20 0.09 0.08 0.07 0.03    0
AMI9  0.20 0.16 0.13 0.25 0.17 0.09    0
AMI11 0.22 0.12 0.12 0.26 0.20 0.08    0

>
```

44. Appendix AI: Study Three: Operationalising Predictor Variables – R Script

```
#The dummy codes were guided by Field et al. (2012), dummy coding
categorical predictors for regression.


##========== R Script===========##

#Dummy coding categorical data

#Gender

val_labels_Gender_1 <- labelled::val_labels(CleanData$Gender_1)
print(val_labels_Gender_1)
val_labels_Gender_2 <- labelled::val_labels(CleanData$Gender_2)
print(val_labels_Gender_2)
table_Gender_1 <- table(CleanData$Gender_1)
print(table_Gender_1)
table_Gender_2 <- table(CleanData$Gender_2)
print(table_Gender_2)
CleanData$is_Man <- ifelse(CleanData$Gender_1 == 1, 1, 0)
CleanData$is_Woman <- ifelse(CleanData$Gender_1 == 2, 1, 0)

#As Women is the largest group, it is the reference category. So
only is_man will be included in the models

#Sexual identity

# Labels for Sexual_identity
val_labels_Sexual_identity <-
labelled::val_labels(CleanData$Sexual_identity)
print(val_labels_Sexual_identity)
# Number of participants in each category for Sexual_identity
table_Sexual_identity <- table(CleanData$Sexual_identity)
print(table_Sexual_identity)
# Create the 'Straight' dummy variable
CleanData$Straight <- ifelse(CleanData$Sexual_identity == 3, 1, 0)
# Create the 'Sexually_Diverse' dummy variable
CleanData$Sexually_Diverse <- ifelse(CleanData$Sexual_identity !=
3, 1, 0)
head(CleanData[, c("Sexual_identity", "Straight",
"Sexually_Diverse")])
# Count for Straight
table_Straight <- table(CleanData$Straight)
print(table_Straight)
# Count for Sexually_Diverse
table_Sexually_Diverse <- table(CleanData$Sexually_Diverse)
print(table_Sexually_Diverse)
#Straight is the reference and Only Sexually_Diverse will be
entered

#Ethnicity
# Labels for Ethnicity_
```

```
val_labels_Ethnicity_ <- labelled::val_labels(CleanData$Ethnicity_)
print(val_labels_Ethnicity_)
# Number of participants in each category for Ethnicity_
table_Ethnicity_ <- table(CleanData$Ethnicity_)
print(table_Ethnicity_)
# Creating the White dummy variable
CleanData$White <- ifelse(CleanData$Ethnicity_ == 4, 1, 0)
# Creating the Racially Diverse dummy variable
CleanData$Racially_Diverse <- ifelse(CleanData$Ethnicity_ %in% c(1,
2, 3, 5), 1, 0)
#Racially_Diverse will be entered

#Experienced
# Labels for Experienced
val_labels_Experienced <-
labelled::val_labels(CleanData$Experienced)
print(val_labels_Experienced)
# Number of participants in each category for Experienced
table_Experienced <- table(CleanData$Experienced)
print(table_Experienced)
# Creating the Survivors dummy variable
CleanData$Survivors <- ifelse(CleanData$Experienced == 1, 1, 0)
# Creating the Non_Survivors dummy variable
CleanData$Non_Survivors <- ifelse(CleanData$Experienced == 2, 1, 0)
#Survivors will be entered

#Knows a survivor
# Labels for Known
val_labels_Known <- labelled::val_labels(CleanData$Known)
print(val_labels_Known)
# Number of participants in each category for Known
table_Known <- table(CleanData$Known)
print(table_Known)
# Creating the "Knows a Survivor" dummy variable
CleanData$Knows_Survivor <- ifelse(CleanData$Known == 1, 1, 0)
# Creating the "Unacquainted" dummy variable
CleanData$Unacquainted <- ifelse(CleanData$Known == 2, 1, 0)
#Unacquainted will be enter as, it means they do not know a
survivor

# Rape Myth Levels
# Female perp rape myth levels, low, high, or control

# Assign Female Perpetrator Myth Levels
CleanData$FPMyth_Level[!is.na(rowSums(CleanData[, paste0("VPB_2.",
1:13)]))] <- "Control"
CleanData$FPMyth_Level[!is.na(rowSums(CleanData[, paste0("VPB_4.",
1:13)]))] <- "Low"
CleanData$FPMyth_Level[!is.na(rowSums(CleanData[, paste0("VPB_6.",
1:13)]))] <- "High"
sum(is.na(CleanData$FPMyth_Level))

# Removing rows where 'FPMyth_Level' is NA
CleanData <- CleanData[!is.na(CleanData$FPMyth_Level), ]

# Create dummy variables for 'FPMyth_Level'
```

```
dummy_vars <- model.matrix(~ FPMyth_Level - 1, data=CleanData)
dummy_df <- as.data.frame(dummy_vars)
CleanData <- cbind(CleanData, dummy_df)

# Only 'Low' and 'High' will be included in the model, 'Control' is
the reference category

# Male perp rape myth levels, low, high, or control
CleanData$MPMyth_Level <- NA

# Assign Male Perpetrator Myth Levels
CleanData$MPMyth_Level[!is.na(rowSums(CleanData[, paste0("VPB_1.",
1:13)]))] <- "Control"
CleanData$MPMyth_Level[!is.na(rowSums(CleanData[, paste0("VPB_3.",
1:13)]))] <- "Low"
CleanData$MPMyth_Level[!is.na(rowSums(CleanData[, paste0("VPB_5.",
1:13)]))] <- "High"
CleanData <- CleanData[!is.na(CleanData$MPMyth_Level), ]

# Create dummy variables for 'MPMyth_Level'
dummy_vars_mpm <- model.matrix(~ MPMyth_Level - 1, data=CleanData)
dummy_df_mpm <- as.data.frame(dummy_vars_mpm)
CleanData <- cbind(CleanData, dummy_df_mpm)

# Only 'Low' and 'High' will be included in the model, 'Control' is
the reference category
```

Script Explanation

Female Perpetrator Rape Myth Levels

FPMyth_Level was categorised into "Control", "Low", and "High" based on the presence of non-missing values in specific columns.

Control: No missing values in VPB_2.1 to VPB_2.13.
Low: No missing values in VPB_4.1 to VPB_4.13.
High: No missing values in VPB_6.1 to VPB_6.13.

Dummy variables:

FPMyth_LevelLow: 1 if "Low", 0 otherwise.
FPMyth_LevelHigh: 1 if "High", 0 otherwise.

The "Control" group was used as the reference category and was not included as a dummy variable in the model. This means that the coefficients for FPMyth_LevelLow and FPMyth_LevelHigh represent differences relative to the control group.

Male Perpetrator Rape Myth Levels

MPMyth_Level was categorised into "Control", "Low", and "High" based on the presence of non-missing values in specific columns.

Control: No missing values in VPB_1.1 to VPB_1.13.
Low: No missing values in VPB_3.1 to VPB_3.13.
High: No missing values in VPB_5.1 to VPB_5.13.

Dummy variables:

MPMyth_LevelLow: 1 if "Low", 0 otherwise.
MPMyth_LevelHigh: 1 if "High", 0 otherwise.

The "Control" group was used as the reference category and was not included as a dummy variable in the model. This means the coefficients for MPMyth_LevelLow and MPMyth_LevelHigh represent differences relative to the control group.

45 Appendix AJ: Study Three Assumption Checking Console Output

45.1 Model 1

Effect size

```
# Effect size,
> R2 <- summary(model1)$r.squared
> # Calculate Cohen's f^2
> f2 <- R2 / (1 - R2)
> f2
[1] 0.6064225

>
```

#Assumptions

#Assumption of independence (not violated)

dw_test <- durbinWatsonTest(model1)

print(dw_test)

#Mulicollinearity

vif(model1)

No collinearity as none of the values are above 10, the highest is not 4 or less than 0.25

#> vif(model1)

#is_Man Sexually_Diverse Racially_Diverse Survivors Unacquainted MMAS_TotalScore

#1.129998 1.138099 1.111297 1.340708 1.308108 2.615945

#AMITotal SDSTotal FPMyth_LevelHigh FPMyth_LevelLow

#2.662373 1.068724 1.368982 1.415884

45.2 Model 2

```
# Effect size,
> R2 <- summary(model2)$r.squared
> # Calculate Cohen's f^2
> f2 <- R2 / (1 - R2)
```

```
> f2
[1] 3.365353

>
```

```
#Mulicollinearity

vif(model2)

# No collinearity as non of the values are above 10, the highest is not 4 or less than 0.25


#Residuals

residuals_model2 <- residuals(model2)

shapiro_test_result <- shapiro.test(residuals_model2)

print(shapiro_test_result)
```

```
Shapiro-Wilk normality test

data:  residuals_model2
W = 0.96664, p-value = 0.0001321
```

```
#Might need bootstrapping
```

45.3 Model 3

```
[1] 0.6634634
> # Effect size,
> R2 <- summary(model3)$r.squared
> # Calculate Cohen's f^2
> f2 <- R2 / (1 - R2)
> f2
[1] 0.6634634
```

```
#Assumptions
> #Mulicollinearity
> vif(model3)
                is_Man Sexually_Diverse Racially_Diverse
Survivors     Unacquainted  MMAS_TotalScore         AMITotal
SDSTotal MPMyth_LevelHigh
             1.129998         1.138099         1.111297
1.340708         1.308108         2.615945         2.662373
1.068724         1.368982
       MPMyth_LevelLow
             1.415884
```

```
      > # No collinearity as non of the values are above 10, the
highest is not 4 or less than 0.25
      >
      > #Residuals
      > residuals_model3 <- residuals(model3)
      > shapiro_test_result <- shapiro.test(residuals_model3)
      > print(shapiro_test_result)

        Shapiro-Wilk normality test

      data:  residuals_model3
      W = 0.94632, p-value = 1.059e-06

      > # Might need bootstrapping
      > #These are not unduly influencing the regression model3'
s estimates

      >
```

45.4 Model 4

```
>
> # Effect size,
> R2 <- summary(model4)$r.squared
> # Calculate Cohen's f^2
> f2 <- R2 / (1 - R2)
> f2
[1] 4.068564
```

```
> #Mulicollinearity
> vif(model4)
          is_Man Sexually_Diverse Racially_Diverse        Surviv
ors     Unacquainted  MMAS_TotalScore         AMITotal         S
DSTotal MPMyth_LevelHigh
        1.129998         1.138099         1.111297         1.340
708         1.308108         2.615945         2.662373         1
.068724         1.368982
 MPMyth_LevelLow
        1.415884
> # No collinearity as none of the values are above 10, the high
est is not 4 or less than 0.25
>
> #Residuals
> residuals_model4 <- residuals(model4)
> shapiro_test_result <- shapiro.test(residuals_model4)
> print(shapiro_test_result)

       Shapiro-Wilk normality test

data:  residuals_model4
W = 0.90948, p-value = 1.403e-09
```

45.5 Bootstrapping

```
> ##Reviewing boots
> library(boot)

Attaching package: ‘boot’

The following object is masked from ‘package:car’:

    logit

> load("all_boot_models.RData")
> summary(boot_model1)

Number of bootstrap replications R = 2000
    original    bootBias   bootSE   bootMed
1   9.450100 -0.05637115 1.657836  9.373931
2  -0.457400  0.03388280 0.510214 -0.433210
3   0.702057 -0.00593978 0.563624  0.704313
4  -0.752012  0.02511304 0.768016 -0.727364
5   0.240654  0.03491730 0.609875  0.277993
6   0.219119  0.02034661 0.527638  0.237961
7   0.022834 -0.00022375 0.010809  0.023140
8   0.035093  0.00068172 0.029661  0.035160
9  -0.081607  0.00290610 0.168636 -0.077186
10  4.653185 -0.00404041 0.624195  4.642889
11  4.890271 -0.01355296 0.652519  4.887474
> summary(boot_model2)

Number of bootstrap replications R = 2000
     original    bootBias   bootSE   bootMed
1  15.2616252 -0.16993384 1.917367 15.125789
2   0.3662002  0.02622788 0.661360  0.406140
3   0.7312704 -0.01709067 0.805527  0.719547
4  -1.1152050 -0.04206197 0.828990 -1.136991
5  -0.0908412  0.01771686 0.730081 -0.095399
6   0.9097695 -0.02764263 0.713987  0.875471
7  -0.0528576  0.00084560 0.014897 -0.052245
8   0.0237615 -0.00046833 0.038130  0.023050
9   0.0003747  0.01270414 0.209755  0.010571
10 16.3680839  0.04074287 0.819858 16.408161
11 13.6659046  0.05502351 0.882746 13.707704
> summary(boot_model3)

Number of bootstrap replications R = 2000
     original    bootBias   bootSE    bootMed
1  10.8189198 -2.5794e-02 1.627718 10.7821463
2  -0.3475478  2.7225e-02 0.485583 -0.3189189
3  -0.1566882 -1.9503e-02 0.620150 -0.1855341
4  -0.3600862  1.8011e-02 0.692874 -0.3519718
5  -0.0824691  1.0505e-02 0.602003 -0.0648497
6   0.1543432 -2.5460e-02 0.524625  0.1242126
7   0.0031753  6.5113e-05 0.011063  0.0030427
8   0.0225818 -3.3183e-04 0.028389  0.0228722
9   0.0375783  5.8195e-03 0.164701  0.0425152
10  5.2021016 -1.9544e-02 0.600689  5.1764828
11  5.4945577 -1.5726e-02 0.649617  5.4862123
> summary(boot_model4)

Number of bootstrap replications R = 2000
```

```
     original    bootBias   bootSE    bootMed
1  15.0321004 -0.13789158 1.537559 14.9401847
2  -0.2887672  0.02353114 0.553572 -0.2657739
3   0.1784637 -0.00643657 0.667369  0.1701456
4  -1.8102411 -0.02183010 0.723429 -1.8300511
5  -0.9172004  0.00829421 0.654925 -0.8987132
6  -0.5887833 -0.01877367 0.625043 -0.5835108
7  -0.0377442  0.00047843 0.010804 -0.0371371
8   0.0030278 -0.00012072 0.030796  0.0024317
9   0.1979194  0.01273307 0.185194  0.2067842
10 14.8512962  0.01487465 0.710506 14.8668770
11 14.1192149  0.03453080 0.761134 14.1702252
>
>
> boot.ci(boot_model1, type = "bca")
BOOTSTRAP CONFIDENCE INTERVAL CALCULATIONS
Based on 2000 bootstrap replicates

CALL :
boot.ci(boot.out = boot_model1, type = "bca")

Intervals :
Level       BCa
95%   ( 6.589, 12.970 )
Calculations and Intervals on Original Scale
> boot.ci(boot_model2, type = "bca")
BOOTSTRAP CONFIDENCE INTERVAL CALCULATIONS
Based on 2000 bootstrap replicates

CALL :
boot.ci(boot.out = boot_model2, type = "bca")

Intervals :
Level       BCa
95%   (11.74, 19.20 )
Calculations and Intervals on Original Scale
> boot.ci(boot_model3, type = "bca")
BOOTSTRAP CONFIDENCE INTERVAL CALCULATIONS
Based on 2000 bootstrap replicates

CALL :
boot.ci(boot.out = boot_model3, type = "bca")

Intervals :
Level       BCa
95%   ( 7.79, 14.16 )
Calculations and Intervals on Original Scale
> boot.ci(boot_model4, type = "bca")
BOOTSTRAP CONFIDENCE INTERVAL CALCULATIONS
Based on 2000 bootstrap replicates

CALL :
boot.ci(boot.out = boot_model4, type = "bca")

Intervals :
Level       BCa
95%   (12.06, 18.18 )
Calculations and Intervals on Original Scale
```

45.6 Bonferroni correction

```
      # Corrections
      > summary_model1 <- summary(model1)
      > summary_model2 <- summary(model2)
      > summary_model3 <- summary(model3)
      > summary_model4 <- summary(model4)
      >
      > # Extracting p-values
      > p_values_model1 <- summary_model1$coefficients[,4]
      > p_values_model2 <- summary_model2$coefficients[,4]
      > p_values_model3 <- summary_model3$coefficients[,4]
      > p_values_model4 <- summary_model4$coefficients[,4]
      >
      > all_p_values <- c(p_values_model1, p_values_model2, p_va
lues_model3, p_values_model4)
      >
      > bonferroni_adjusted_p_values <- p.adjust(all_p_values, m
ethod = "bonferroni")
      >
      > # the original p-values for comparison (just to be sure)
      > print("Original p-values:")
      [1] "Original p-values:"
      > print(all_p_values)
           (Intercept)           is_Man Sexually_Diverse Raciall
y_Diverse        Survivors     Unacquainted  MMAS_TotalScore
AMITotal         SDSTotal
          2.840965e-10     3.582721e-01     2.401464e-01     2.7
17728e-01     6.774760e-01     6.820371e-01     2.276697e-02
2.423202e-01     6.357074e-01
      FPMyth_LevelHigh  FPMyth_LevelLow      (Intercept)
is_Man Sexually_Diverse Racially_Diverse        Survivors     U
nacquainted  MMAS_TotalScore
          1.292275e-13     1.185112e-14     1.686235e-14     5.6
89701e-01     3.434167e-01     2.074700e-01     9.032798e-01
1.889978e-01     5.850009e-05
             AMITotal         SDSTotal FPMyth_LevelHigh  FPMyth
_LevelLow      (Intercept)           is_Man Sexually_Diverse Ra
cially_Diverse        Survivors
          5.395649e-01     9.986566e-01     5.791627e-53     5.7
98927e-43     3.684696e-13     4.741076e-01     7.877825e-01
5.891542e-01     8.838247e-01
          Unacquainted  MMAS_TotalScore         AMITotal
SDSTotal MPMyth_LevelHigh  MPMyth_LevelLow      (Intercept)
is_Man Sexually_Diverse
          7.673642e-01     7.437827e-01     4.401158e-01     8.2
30355e-01     9.088845e-17     3.709499e-18     7.684491e-18
6.012175e-01     7.876623e-01
      Racially_Diverse        Survivors     Unacquainted  MMAS_T
otalScore         AMITotal         SDSTotal MPMyth_LevelHigh  M
PMyth_LevelLow
          1.788573e-02     1.545058e-01     3.220851e-01     7.7
52435e-04     9.274891e-01     3.014423e-01     3.729182e-56
4.548848e-53
      >
      > # the Bonferroni-adjusted p-values
      > print("Bonferroni-adjusted p-values:")
      [1] "Bonferroni-adjusted p-values:"
      > print(bonferroni_adjusted_p_values)
```

```
          (Intercept)           is_Man Sexually_Diverse Raciall
y_Diverse        Survivors     Unacquainted  MMAS_TotalScore
AMITotal         SDSTotal
         1.250025e-08     1.000000e+00     1.000000e+00     1.0
00000e+00     1.000000e+00     1.000000e+00     1.000000e+00
1.000000e+00     1.000000e+00
     FPMyth_LevelHigh  FPMyth_LevelLow      (Intercept)
is_Man Sexually_Diverse Racially_Diverse        Survivors     U
nacquainted  MMAS_TotalScore
         5.686012e-12     5.214495e-13     7.419432e-13     1.0
00000e+00     1.000000e+00     1.000000e+00     1.000000e+00
1.000000e+00     2.574004e-03
             AMITotal         SDSTotal FPMyth_LevelHigh  FPMyth
_LevelLow      (Intercept)           is_Man Sexually_Diverse Ra
cially_Diverse        Survivors
         1.000000e+00     1.000000e+00     2.548316e-51     2.5
51528e-41     1.621266e-11     1.000000e+00     1.000000e+00
1.000000e+00     1.000000e+00
         Unacquainted  MMAS_TotalScore         AMITotal
SDSTotal MPMyth_LevelHigh  MPMyth_LevelLow      (Intercept)
is_Man Sexually_Diverse
         1.000000e+00     1.000000e+00     1.000000e+00     1.0
00000e+00     3.999092e-15     1.632180e-16     3.381176e-16
1.000000e+00     1.000000e+00
     Racially_Diverse        Survivors     Unacquainted  MMAS_T
otalScore         AMITotal         SDSTotal MPMyth_LevelHigh  M
PMyth_LevelLow
         7.869719e-01     1.000000e+00     1.000000e+00     3.4
11071e-02     1.000000e+00     1.000000e+00     1.640840e-54
2.001493e-51
     >
     > # dataframe to hold comparisons
     > comparison_df <- data.frame(
     +   Variable = names(all_p_values),
     +   Original_P_Value = all_p_values,
     +   Bonferroni_Adjusted_P_Value = bonferroni_adjusted_p_va
lues,
     +   stringsAsFactors = FALSE
     + )
     >
     > # was maintained after Bonferroni correction
     > comparison_df$Significance_Maintained <- ifelse(comparis
on_df$Original_P_Value < 0.05 & comparison_df$Bonferroni_Adjust
ed_P_Value < 0.05, "Yes", "No")
```

45.6.1 > Bonferroni Correction

45.6.2 model1

```
           Variable Original_P_Value Bonferroni_Adjusted_P_Value Signific
1       (Intercept)     2.840965e-10                1.250025e-08
2            is_Man     3.582721e-01                1.000000e+00
3  Sexually_Diverse     2.401464e-01                1.000000e+00
4  Racially_Diverse     2.717728e-01                1.000000e+00
5         Survivors     6.774760e-01                1.000000e+00
6      Unacquainted     6.820371e-01                1.000000e+00
7   MMAS_TotalScore     2.276697e-02                1.000000e+00
8          AMITotal     2.423202e-01                1.000000e+00
```

```
9          SDSTotal     6.357074e-01                1.000000e+00
10 FPMyth_LevelHigh     1.292275e-13                5.686012e-12
11  FPMyth_LevelLow     1.185112e-14                5.214495e-13
12
```

45.6.3 Model 2

Variable Original_P_Value Bonferroni_Adjusted_P_Value Significance_Maintained

```
   (Intercept)     1.686235e-14                7.419432e-13
13           is_Man     5.689701e-01                1.000000e+00
14 Sexually_Diverse     3.434167e-01                1.000000e+00
15 Racially_Diverse     2.074700e-01                1.000000e+00
16        Survivors     9.032798e-01                1.000000e+00
17     Unacquainted     1.889978e-01                1.000000e+00
18  MMAS_TotalScore     5.850009e-05                2.574004e-03
19         AMITotal     5.395649e-01                1.000000e+00
20         SDSTotal     9.986566e-01                1.000000e+00
21 FPMyth_LevelHigh     5.791627e-53                2.548316e-51
22  FPMyth_LevelLow     5.798927e-43                2.551528e-41
23
```

Model 3

Variable Original_P_Value Bonferroni_Adjusted_P_Value Significance_Maintained

```
(Intercept)     3.684696e-13                1.621266e-11
24           is_Man     4.741076e-01                1.000000e+00
25 Sexually_Diverse     7.877825e-01                1.000000e+00
26 Racially_Diverse     5.891542e-01                1.000000e+00
27        Survivors     8.838247e-01                1.000000e+00
28     Unacquainted     7.673642e-01                1.000000e+00
29  MMAS_TotalScore     7.437827e-01                1.000000e+00
30         AMITotal     4.401158e-01                1.000000e+00
31         SDSTotal     8.230355e-01                1.000000e+00
32 MPMyth_LevelHigh     9.088845e-17                3.999092e-15
33  MPMyth_LevelLow     3.709499e-18                1.632180e-16
```

34

Model 4

```
Variable Original_P_Value Bonferroni_Adjusted_P_Value Significance_Mainta
(Intercept)     7.684491e-18                3.381176e-16
35           is_Man     6.012175e-01                1.000000e+00
36 Sexually_Diverse     7.876623e-01                1.000000e+00
37 Racially_Diverse     1.788573e-02                7.869719e-01
38        Survivors     1.545058e-01                1.000000e+00
39     Unacquainted     3.220851e-01                1.000000e+00
40  MMAS_TotalScore     7.752435e-04                3.411071e-02
41         AMITotal     9.274891e-01                1.000000e+00
42         SDSTotal     3.014423e-01                1.000000e+00
```

```
43 MPMyth_LevelHigh     3.729182e-56                1.640840e-54
44  MPMyth_LevelLow     4.548848e-53                2.001493e-51
```

46 Appendix AK: Study Three Goodness of Fit

46.1 Model 1

```
#outliers, any that are -3 or 3 +
# Check which residuals are greater than 3 or less than -3
extreme_residuals_3 <- abs(standardized_residuals) > 3
# Count them
num_extreme_residuals_3 <- sum(extreme_residuals_3)
# Print the number
print(paste("Number of residuals beyond -3 and +3:",
num_extreme_residuals_3))
# Get the indices of the extreme residuals
extreme_cases_indices <- which(extreme_residuals_3)
# Print the case numbers
print(extreme_cases_indices)
# View the actual values of the extreme residuals
extreme_residual_values <-
standardized_residuals[extreme_residuals_3]
print(extreme_residual_values)
extreme_cases <- which(extreme_residuals_3, arr.ind =
TRUE)
extreme_cases_values <- data.frame(Case = extreme_cases,
ResidualValue = standardized_residuals[extreme_cases])
print(extreme_cases_values)

#there are 4 outside -/+ Case 146, 148, 156, 183

#Influential cases

cooks_d <- cooks.distance(model1)
# Cook's distance for the extreme cases
cooks_d_extreme <- cooks_d[c(146, 148, 156, 183)]
print(cooks_d_extreme)

#print(cooks_d_extreme)
#151        153        161        188
#0.03477682 0.06691688 0.07302755 0.05868134
#None of these are over 1, so the do not have undue
influence on he model

leverage <- hatvalues(model1)
# leverage for the extreme cases
leverage_extreme <- leverage[c(146, 148, 156, 183)]
print(leverage_extreme)
# 151        153        161        188
#0.03615337 0.05762537 0.06503374 0.06481358

cov_ratio <- covratio(model1)
# covariance ratios for the extreme cases
cov_ratio_extreme <- cov_ratio[c(146, 148, 156, 183)]
print(cov_ratio_extreme)
#  151       153       161       188
# 0.5901864 0.5373415 0.5586742 0.6430150
#These are within the threshold
```

46.2 Model 2

```
> #Influential cases
> cooks_d_model2 <- cooks.distance(model2)
> leverage_model2 <- hatvalues(model2)
> cov_ratio_model2 <- covratio(model2)
> specific_cases <- c(83, 194)
> cooks_d_specific <- cooks_d_model2[specific_cases]
> print(paste("Cook's distance for cases 83 and 194:", cooks_d_s
pecific))
[1] "Cook's distance for cases 83 and 194: 0.000144620703375047"
"Cook's distance for cases 83 and 194: 2.48066814010332e-05"
> leverage_specific <- leverage_model2[specific_cases]
> print(paste("Leverage for cases 83 and 194:", leverage_specifi
c))
[1] "Leverage for cases 83 and 194: 0.0618886886175588" "Leverag
e for cases 83 and 194: 0.081732315445869"
> cov_ratio_specific <- cov_ratio_model2[specific_cases]
> print(paste("Covariance ratio for cases 83 and 194:", cov_rati
o_specific))
[1] "Covariance ratio for cases 83 and 194: 1.12983716594505" "C
ovariance ratio for cases 83 and 194: 1.15569834418255"
> #Mulicollinearity
> vif(model2)
          is_Man Sexually_Diverse Racially_Diverse        Surviv
ors     Unacquainted  MMAS_TotalScore         AMITotal         S
DSTotal FPMyth_LevelHigh
        1.129998         1.138099         1.111297         1.340
708         1.308108         2.615945         2.662373         1
.068724         1.368982
 FPMyth_LevelLow
        1.415884
> #Residuals
> residuals_model2 <- residuals(model2)
> shapiro_test_result <- shapiro.test(residuals_model2)
> print(shapiro_test_result)

       Shapiro-Wilk normality test

data:  residuals_model2
W = 0.96664, p-value = 0.0001321
```

46.3 Model 3

```
> # Extract standardized residuals from model3
> standardized_residuals_model3 <- rstandard(model3)
> # Check which residuals are greater than 3 or less than -3
> extreme_residuals_3_model3 <- abs(standardized_residuals_model
3) > 3
> num_extreme_residuals_3_model3 <- sum(extreme_residuals_3_mode
l3)
> print(paste("Number of residuals beyond -3 and +3 in model3:",
num_extreme_residuals_3_model3))
[1] "Number of residuals beyond -3 and +3 in model3: 1"
```

```
> extreme_cases_indices_model3 <- which(extreme_residuals_3_mode
l3)
> print(extreme_cases_indices_model3)
188
183
> extreme_residual_values_model3 <- standardized_residuals_model
3[extreme_residuals_3_model3]
> print(extreme_residual_values_model3)
     188
3.748668
> extreme_cases_model3 <- which(extreme_residuals_3_model3, arr.
ind = TRUE)
> extreme_cases_values_model3 <- data.frame(Case = extreme_cases
_model3, ResidualValue = standardized_residuals_model3[extreme_c
ases_model3])
> print(extreme_cases_values_model3)
    Case ResidualValue
188  183      3.748668
>
> #Influential cases
> cooks_d_model3 <- cooks.distance(model3)
> leverage_model3 <- hatvalues(model3)
> cov_ratio_model3 <- covratio(model3)
> specific_cases <- c(188)
> cooks_d_specific <- cooks_d_model3[specific_cases]
> print(paste("Cook's distance for case 188:", cooks_d_specific)
)
[1] "Cook's distance for case 188: 0.0169430858693231"
> leverage_specific <- leverage_model3[specific_cases]
> print(paste("Leverage for case 188:", leverage_specific))
[1] "Leverage for case 188: 0.0683684193462047"
> cov_ratio_specific <- cov_ratio_model3[specific_cases]
> print(paste("Covariance ratio for case 188:", cov_ratio_specif
ic))
[1] "Covariance ratio for case 188: 0.978618194679991"
```

46.4 Model 4

```
      standardized_residuals_model4 <- rstandard(model4)
      > # Check which residuals are greater than 3 or less than
-3
      > extreme_residuals_4_model4 <- abs(standardized_residuals
_model4) > 3
      > num_extreme_residuals_4_model4 <- sum(extreme_residuals_
4_model4)
      > print(paste("Number of residuals beyond -3 and +3 in mod
el4:", num_extreme_residuals_4_model4))
      [1] "Number of residuals beyond -3 and +3 in model4: 2"
      > extreme_cases_indices_model4 <- which(extreme_residuals_
4_model4)
      > print(extreme_cases_indices_model4)
       84 164
       80 159
      > extreme_residual_values_model4 <- standardized_residuals
_model4[extreme_residuals_4_model4]
      > print(extreme_residual_values_model4)
            84      164
      3.487374 4.093486
```

```
      > extreme_cases_model4 <- which(extreme_residuals_4_model4
, arr.ind = TRUE)
      > extreme_cases_values_model4 <- data.frame(Case = extreme
_cases_model4, ResidualValue = standardized_residuals_model4[ex
treme_cases_model4])
      > print(extreme_cases_values_model4)
         Case ResidualValue
      84    80      3.487374
      164  159      4.093486
      >
      > #Influential cases
      > cooks_d_model4 <- cooks.distance(model4)
      > leverage_model4 <- hatvalues(model4)
      > cov_ratio_model4 <- covratio(model4)
      > # Define the specific cases you are interested in
      > specific_cases <- c(84, 164)
      >
      > # Extract the Cook's distance for these cases
      > cooks_d_specific <- cooks_d_model4[specific_cases]
      >
      > print(paste("Cook's distance for cases 84 and 164:", coo
ks_d_specific))
      [1] "Cook's distance for cases 84 and 164: 3.6149959570730
5e-06" "Cook's distance for cases 84 and 164: 0.000791655179421
05"
      >
      > leverage_specific <- hatvalues(model4)[specific_cases]
      >
      > print(paste("Leverage for cases 84 and 164:", leverage_s
pecific))
      [1] "Leverage for cases 84 and 164: 0.0606386170763016" "L
everage for cases 84 and 164: 0.0387566729140882"
      >
      > cov_ratio_specific <- covratio(model4)[specific_cases]
      >
      > print(paste("Covariance ratio for cases 84 and 164:", co
v_ratio_specific))
      [1] "Covariance ratio for cases 84 and 164: 1.129911294583
28" "Covariance ratio for cases 84 and 164: 1.09013203857531"
      >
      >
      > #These are not unduly influencing the regression model4'
s estimates

      >
```

47 Appendix AL: R Studio output of models

```
      Call:
      lm(formula = FPVBTotal ~ is_Man + Sexually_Diverse + Racia
lly_Diverse +
         Survivors + Unacquainted + MMAS_TotalScore + AMITotal
+ SDSTotal +
         FPMyth_LevelHigh + FPMyth_LevelLow, data = CleanData)

      Residuals:
```

```
     Min       1Q   Median       3Q      Max
-10.9872  -1.5444   0.3308   1.4711  10.7194

Coefficients:
                    Estimate Std. Error t value Pr(>|t|)
(Intercept)         9.450100   1.416423   6.672 2.84e-10 ***
is_Man             -0.457400   0.496657  -0.921   0.3583
Sexually_Diverse    0.702057   0.595766   1.178   0.2401
Racially_Diverse   -0.752012   0.682235  -1.102   0.2718
Survivors           0.240654   0.577703   0.417   0.6775
Unacquainted        0.219119   0.534004   0.410   0.6820
MMAS_TotalScore     0.022834   0.009943   2.297   0.0228 *
AMITotal            0.035093   0.029918   1.173   0.2423
SDSTotal           -0.081607   0.171987  -0.474   0.6357
FPMyth_LevelHigh    4.653185   0.581374   8.004 1.29e-13 ***
FPMyth_LevelLow     4.890271   0.582489   8.395 1.19e-14 ***
---
Signif. codes:  0 ‘***’ 0.001 ‘**’ 0.01 ‘*’ 0.05 ‘.’ 0.1 ‘
’ 1

Residual standard error: 3.262 on 185 degrees of freedom
Multiple R-squared:  0.3775, Adjusted R-squared:  0.3439
F-statistic: 11.22 on 10 and 185 DF,  p-value: 6.72e-15

> print(summary_model2)

Call:
lm(formula = FPPBTotal ~ is_Man + Sexually_Diverse + Racia
lly_Diverse +
        Survivors + Unacquainted + MMAS_TotalScore + AMITotal
+ SDSTotal +
        FPMyth_LevelHigh + FPMyth_LevelLow, data = CleanData)

Residuals:
     Min       1Q   Median       3Q      Max
-13.2883  -1.3968   0.2963   1.9394  12.4498

Coefficients:
                     Estimate Std. Error t value Pr(>|t|)
(Intercept)      15.2616252  1.8303349   8.338 1.69e-14 **
*
is_Man            0.3662002  0.6417924   0.571    0.569
Sexually_Diverse  0.7312704  0.7698623   0.950    0.343
Racially_Diverse -1.1152050  0.8815998  -1.265    0.207
Survivors        -0.0908412  0.7465211  -0.122    0.903
Unacquainted      0.9097695  0.6900528   1.318    0.189
MMAS_TotalScore  -0.0528576  0.0128486  -4.114 5.85e-05 **
*
AMITotal          0.0237615  0.0386609   0.615    0.540
SDSTotal          0.0003747  0.2222457   0.002    0.999
FPMyth_LevelHigh 16.3680839  0.7512647  21.787  < 2e-16 **
*
FPMyth_LevelLow  13.6659046  0.7527061  18.156  < 2e-16 **
*
---
Signif. codes:  0 ‘***’ 0.001 ‘**’ 0.01 ‘*’ 0.05 ‘.’ 0.1 ‘
’ 1

Residual standard error: 4.215 on 185 degrees of freedom
Multiple R-squared:  0.7709, Adjusted R-squared:  0.7585
```

```
F-statistic: 62.26 on 10 and 185 DF,  p-value: < 2.2e-16

> print(summary_model3)

Call:
lm(formula = MPVBTotal ~ is_Man + Sexually_Diverse + Racia
lly_Diverse +
    Survivors + Unacquainted + MMAS_TotalScore + AMITotal
+ SDSTotal +
    MPMyth_LevelHigh + MPMyth_LevelLow, data = CleanData)

Residuals:
    Min      1Q  Median      3Q     Max
-7.6821 -1.0093 -0.0288  0.8332 11.5372

Coefficients:
                     Estimate Std. Error t value Pr(>|t|)
(Intercept)         10.818920   1.381858   7.829 3.68e-13 ***
is_Man              -0.347548   0.484538  -0.717    0.474
Sexually_Diverse    -0.156688   0.581227  -0.270    0.788
Racially_Diverse    -0.360086   0.665586  -0.541    0.589
Survivors           -0.082469   0.563605  -0.146    0.884
Unacquainted         0.154343   0.520973   0.296    0.767
MMAS_TotalScore      0.003175   0.009700   0.327    0.744
AMITotal             0.022582   0.029188   0.774    0.440
SDSTotal             0.037578   0.167790   0.224    0.823
MPMyth_LevelHigh     5.202102   0.567186   9.172  < 2e-16 ***
MPMyth_LevelLow      5.494558   0.568275   9.669  < 2e-16 ***
---
Signif. codes:  0 ‘***’ 0.001 ‘**’ 0.01 ‘*’ 0.05 ‘.’ 0.1 ‘
’ 1

Residual standard error: 3.183 on 185 degrees of freedom
Multiple R-squared:  0.3988, Adjusted R-squared:  0.3663
F-statistic: 12.27 on 10 and 185 DF,  p-value: 3.3e-16

> print(summary_model4)

Call:
lm(formula = MPPBTotal ~ is_Man + Sexually_Diverse + Racia
lly_Diverse +
    Survivors + Unacquainted + MMAS_TotalScore + AMITotal
+ SDSTotal +
    MPMyth_LevelHigh + MPMyth_LevelLow, data = CleanData)

Residuals:
     Min       1Q   Median       3Q      Max
-10.3669  -0.7935   0.2418   1.3592  14.5580

Coefficients:
                     Estimate Std. Error t value Pr(>|t|)
(Intercept)         15.032100   1.572986   9.556  < 2e-16 ***
is_Man              -0.288767   0.551555  -0.524 0.601217
Sexually_Diverse     0.178464   0.661618   0.270 0.787662
Racially_Diverse    -1.810241   0.757645  -2.389 0.017886 *
Survivors           -0.917200   0.641559  -1.430 0.154506
Unacquainted        -0.588783   0.593030  -0.993 0.322085
MMAS_TotalScore     -0.037744   0.011042  -3.418 0.000775 ***
AMITotal             0.003028   0.033225   0.091 0.927489
SDSTotal             0.197919   0.190997   1.036 0.301442
```

```
MPMyth_LevelHigh 14.851296   0.645635  23.003  < 2e-16 ***
MPMyth_LevelLow  14.119215   0.646874  21.827  < 2e-16 ***
---
Signif. codes:  0 ‘***’ 0.001 ‘**’ 0.01 ‘*’ 0.05 ‘.’ 0.1 ‘
’ 1

Residual standard error: 3.623 on 185 degrees of freedom
Multiple R-squared:  0.8027, Adjusted R-squared:  0.792
F-statistic: 75.27 on 10 and 185 DF,  p-value: < 2.2e-16


>
```

```
##FP Myth level
> FPMyth_Level__freq <- table(CleanData$FPMyth_Level)  # F
requency table
> FPMyth_Level__perc <- prop.table(FPMyth_Level__freq) * 1
00  # Percentage calculation
> ##MP Myth level
> MPMyth_Level__freq <- table(CleanData$MPMyth_Level)  # F
requency table
> MPMyth_Level__perc <- prop.table(MPMyth_Level__freq) * 1
00  # Percentage calculation
> print(FPMyth_Level__freq)

Control    High     Low
     64      64      68
> print(FPMyth_Level__perc)

 Control     High      Low
32.65306 32.65306 34.69388
> print(MPMyth_Level__freq)

Control    High     Low
     64      64      68
> print(MPMyth_Level__perc)

 Control     High      Low
32.65306 32.65306 34.69388

>
```