

PERCEPTIONS OF SAME SEX AND OPPOSITE SEX INTERPERSONAL
VIOLENCE: A COMPARISON OF PSYCHOLOGISTS AND
LAW ENFORCEMENT PERSONNEL

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DENTON, TEXAS

DECEMBER 2008

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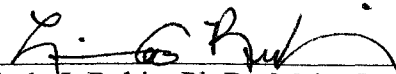
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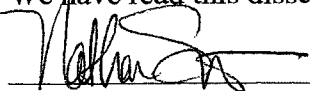
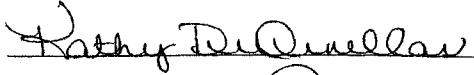
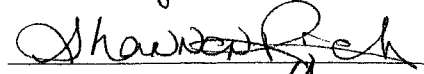

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To the Dean of the Graduate School:

I am submitting herewith a dissertation written by Adrienne A. Paulson entitled "Perceptions of Same Sex and Opposite Sex Interpersonal Violence: A Comparison of Psychologists and Law Enforcement Personnel." I have examined this dissertation for form and content and recommend that it be accepted in partial fulfillment of the requirements for the degree of Doctorate of Philosophy with a major in Counseling Psychology.

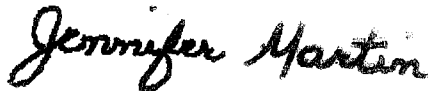

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ABSTRACT

ADRIENNE A. PAULSON

PERCEPTIONS OF SAME SEX AND OPPOSITE SEX INTERPERSONAL VIOLENCE: A COMPARISON OF PSYCHOLOGISTS AND LAW ENFORCEMENT PERSONNEL

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Research has suggested that same sex couples experience interpersonal violence (IPV) at similar rates to opposite sex partners. Within the mental health and law enforcement communities, there has been a limited, but growing awareness of same sex IPV (SSIPV). The presence of heterosexism and endorsement of domestic violence myths among psychologists and police officers has the potential to undermine the recognition of SSIPV and contribute to unequal and insufficient services for sexual minority victims compared to heterosexual victims. Social scientists had not yet compared police officers' and psychologists' perceptions of SSIPV or examined how these professionals' perceptions were influenced by the endorsement of heterosexist attitudes and domestic violence myths. To investigate these relationships, the present study compared male and female police officers' and psychologists' perceptions of IPV in same sex and opposite sex partnerships. Using a combined sample of 137 psychologists and law enforcement personnel, fictitious vignettes of SSIPV and opposite sex IPV (OSIPV) were presented online. Participants answered researcher-generated questions about perceptions of

violence, as well as self-report measures of heterosexism and domestic violence myth acceptance. Results showed that police officers and psychologists, regardless of sex, did not differ in their perceptions of same sex and other sex IPV. However, differences did emerge in general measures of IPV severity, sexual prejudice, and beliefs in justified violence. Police officers perceived IPV incidents as less severe, perceived the couple as more likely to resolve future conflict nonviolently, and recommended the couple contact law enforcement at a higher frequency than psychologists. Police officers also endorsed more domestic violence myths and heterosexist attitudes than psychologists, and male officers endorsed the most myths and heterosexist beliefs. Finally, domestic violence myth acceptance significantly predicted participants' perceptions of violence severity, and both myth acceptance and participants' occupation predicted their perceptions of mutual partner responsibility. The findings suggested that first responders and psychologists acknowledge the reality and seriousness of SSIPV, but sexual prejudice and beliefs in justified violence persist. Given the potential for these biases to undermine the provision of adequate victim services, the need for continued training among police and psychologists was discussed.

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CHAPTER I

INTRODUCTION

According to the National Coalition of Anti-Violence Programs (NCAVP; 2007), 3,534 lesbian, gay, bisexual, and transgendered (LGBT) individuals reported being victimized by their partners during 2006. This number represented only a small percentage of sexual minority victims, given that the statistical data were submitted by 12 community-based, anti-violence organizations located across the United States. Many LGBT individuals in partnered relationships have suffered in silence. A number of explanations for the underrepresentation of LGBT interpersonal violence (IPV) victims in national domestic violence statistics have been proffered. A few of the most prominently identified reasons have included victims' unwillingness to identify their experiences as abusive (Turrell, 2000), a reluctance to label their partners as batterers (McClennen, Summers, & Vaughn, 2002b; Peterman & Dixon, 2003), and a resistance to leaving their partners and seeking help (McClennen et al., 2002b; Wolf, Ly, Hobart, & Kenic, 2003).

The aforementioned explanations have also been suggested in reference to the underreporting of violence among other sex IPV (OSIPV) victims. Unlike OSIPV victims, however, sexual minority victims have faced a number of additional obstacles to coming forward. For example, same sex IPV (SSIPV) victims have battled the combined effects of homophobia and heterosexism. The perception of other sex relationships as

normative and valid has reduced the visibility of same sex violence. By viewing sexual minorities as deviant and possessing low moral character, social institutions have undermined both the legitimacy of same sex relationships and the ability of IPV victims to seek legal and social services (Potoczniak, Mourot, Crosbie-Burnett, & Potoczniak, 2003). Sexual prejudice has isolated victims by raising the stakes for those who choose not to identify themselves as battered. Victims have risked exposing their sexual orientation and confronting discrimination from those charged with helping them access legal protection and mental healthcare. Consequently, SSIPV victims have not always received services that are equal in quality and quantity to those received by OSIPV victims (NCAVP, 2007).

While nearly every state has ratified laws to assist OSIPV victims, the majority of states have failed to extend those protective rights to victims of SSIPV (Girshick, 2002). Social service agencies have also failed to expand their resources to meet the unique needs of SSIPV victims. For example, domestic violence shelters have often refused SSIPV victims admittance into their facilities and have resisted additional diversity training for their employees (Girschick; Renzetti, 1989; Waldon, 1996). The NCAVP (2007) noted that social service workers may be resistant to receiving additional education with regard to SSIPV. Recognizing that many of these individuals have historically been overworked and underpaid, the NCAVP has suggested that some employees may be open to learning new information, while others may express resentment to perceived “liberal propaganda” (p. 6). Many individuals have failed to see the danger in treating all IPV victims the same and have not acknowledged that

maintaining the status quo perpetuates heterosexism (NCAVP). Moreover, sexual minority victims have frequently cited homophobia among shelter employees and selective mental health workers as a principal reason for remaining silent about their victim status (McClennen, Summers, & Daly, 2002a; Merrill & Wolfe, 2000; Rudolph, 1988).

Ignorance about the impact of bias on SSIPV victims has been perpetuated by heteronormative explanations of domestic violence (NCAVP, 2007). Based largely on sex norms, domestic violence myths have promulgated the ideas that IPV between same sex partners is neither serious nor common (Potoczniak et al., 2003). For example, sex stereotypes have dictated that gay men cannot be victimized and lesbian women cannot be perpetrators. By suggesting that masculine men should be able to defend themselves and feminine women should act non-aggressively and docile, sex stereotypes have excluded the possibility of violence between same sexed partners. Younglove, Kerr, and Vitello (2002) argued that the feminization of gay men, labeling female violence as merely “cat fights,” (p. 764) and perceiving same sexed couples as promiscuous have invalidated SSIPV and reduced citizens’ responsibility to support and protect same sexed victims.

The NCAVP (2007) stated that the adoption of these biased attitudes among law enforcement personnel has denied SSIPV and OSIPV victims equal protection. Police officers, acting as first responders to IPV and legal system gatekeepers, have largely determined whether victims can access the criminal justice system (Younglove et al., 2002). Heterosexism has acted as the lens through which law enforcement officers have

filtered their perceptions of same sex couple violence (Heany, 2005; Younglove et al.). The failure to correctly identify perpetrators, as evidenced by labeling same sexed violence as mutual combat, has reflected officers' comfort with minimizing the seriousness and validity of SSIPV victims' experiences. Thus, by mirroring society's prejudicial attitudes and viewing sexual minorities as perverse and criminal, police officers have ensured the inability of SSIPV victims to receive the same services and treatment as OSIPV victims.

Few studies have examined the impact of diversity training on officers' perceptions and responsiveness to SSIPV. Pattavina, Hirschel, Buzawa, Faggiani, and Bentley (2007) reported that officers were more likely to arrest lesbian perpetrators when domestic violence legislation was present, and officers were more likely to arrest gay male perpetrators when legislation was written with inclusive language. This finding has contradicted earlier studies that showed officers' reluctance to intervene in IPV situations involving sexual minorities (Aulivola, 2004; Bernstein & Kostelac, 2002; Comstock, 1991).

Unlike police officers, mental health professionals have been exposed to greater amounts of diversity training in recent years. With respect to sexual diversity, in 2000, the American Psychological Association (APA) published a set of guidelines for practitioners to follow when working with sexual minorities. Perhaps in partial response to practitioners' increased training to work competently with sexual minorities, recent studies have cited low levels of homophobia and strong gay affirming attitudes among mental health practitioners (Berkman & Zinberg, 1997; Jones, 2000).

Unfortunately, the impact of mental health practitioners' increased awareness and sensitivity in working with sexual minorities has not been adequately investigated within the narrow domain of IPV. A few studies have suggested that practitioners identify incidents of SSIPV at similar rates to incidents of OSIPV (Blasko, Winek, & Bieschke, 2007; Potoczniak, 2005), but the majority of research concerning attitudes toward SSIPV has been conducted among college-aged students (Harris & Cook; 1994; Poorman, Seelau, & Seelau, 2003; Seelau & Seelau, 2005). These studies have not directly assessed how respondents' endorsement of heterosexist attitudes impact their perception of SSIPV compared to OSIPV. Additionally, these studies have not examined whether practitioners' belief in sex-typed domestic violence myths is associated with their perceptions of IPV.

Given the growing awareness of SSIPV within the mental health and law enforcement communities, as well as the high prevalence of IPV within same sexed partnerships, there existed a need to know how these two groups of professionals perceived SSIPV. Additional information regarding factors that may influence these professionals' perceptions of SSIPV, including their expression of heterosexist attitudes and belief in sexist-based domestic violence myths, was sought. Differences between and within these two groups may help elucidate how prejudice negatively impacts mental health and law enforcement personnel's ability to intervene successfully on behalf of SSIPV victims.

CHAPTER II

LITERATURE REVIEW

Same Sex Domestic Violence Definition and Prevalence

Rohrbaugh (2006) reported that researchers have traditionally ignored the existence and unique dynamics of same sex domestic violence (SSIPV). Many have seen domestic violence as a phenomenon that is exclusive to heterosexual relationships. Among researchers who have attended to the issue, the lack of uniformity in definitions of SSIPV has resulted in a body of contrasting data concerning the prevalence, severity, and etiology of the problem (Potoczniak, Mourot, Crosbie-Burnett, & Potoczniak, 2003). Potoczniak et al. further contended that what little is known about SSIPV is largely the result of anecdotal data rather than solid empirical investigations.

McClennen (2005) acknowledged that the term interpersonal partner violence (IPV) has started to replace the use of the term domestic violence in an effort to distinguish child and elderly abuse from couple violence. Additionally, use of IPV has allowed for the inclusion of same sex partner abuse without discriminating by sex or age. Harris and Cook (1994) noted that the majority of social science research has focused exclusively on male perpetrated violence against female partners. Tjaden and Thoennes (2000) found that 30.4% of women living with a male partner reported being raped, physically assaulted, or stalked. By comparison, violence toward men has been

downplayed despite statistics that have cited male perpetrated violence at 15% and female perpetrated violence at 7.7% (Tjaden & Thoennes). Although violence against female partners is more prevalent, male victims have been ridiculed and often shamed into silence, which may have contributed to their underrepresentation in the intimate partner violence literature (Harris & Cook).

Lack of Uniform Definitions for IPV

The public has shown much variation in their definitions of IPV. Carlson and Worden (2005) found that New York residents identified punching, slapping, and forcing sex as violent and illegal behaviors when committed by men. Respondents were less likely to endorse these behaviors as violent and illegal when the perpetrator was female. Moreover, Carlson and Worden reported that social background and demographic characteristics inconsistently differentiated respondents' perceptions of selected behaviors (i.e., slapping and stalking) as violent, unlawful, or pervasive. For example, married male respondents were significantly more likely to identify wife slapping as an act of domestic violence, but they did not label husband slapping, following a girlfriend all over town, or following a boyfriend all over town as violent acts (Carlson & Worden). Carlson and Worden also found that a high school education was significantly associated with labeling husband slapping as domestic violence but was not associated with labeling wife slapping or following behaviors as forms of violence. Based on their findings, the authors concluded that social characteristics cannot independently explain differences in the general public's attitudes and opinions about interpersonal violence.

West (2002) noted that researchers have relied on small, self-selected samples in their investigations of same sex interpersonal violence. These samples have predominantly consisted of White, middle-class, educated lesbians in specific geographic locations where sampling is more convenient (i.e., San Francisco). Random sampling was nearly impossible given the social biases gays and lesbians must confront when choosing to out themselves (Turell, 2000). The fear of being outed as an IPV victim and the operational definitions researchers have used to categorize types of violence and aggression have also contributed to variability in reported prevalence figures (Turell). Methodological problems concerning time frame of abuse (i.e., present vs. past), failure to specify victim/perpetrator status, and failure to define couples' relationship stage have impaired researchers' ability to know how common SSIPV is (Rohrbaugh, 2006; West). Consequently, rates of SSIPV have been shown to vary according to the sampling frame used in each study (Rohrbaugh).

The myth that SSIPV is less common and violent than heterosexual IPV has failed to receive empirical support. Current research has suggested that IPV among same sex couples is as frequent and severe as other sex couples, yet it is more invisible and underreported (Pattavina, Hirschel, Buzawa, Faggiani, & Bentley, 2007; Potoczniak et al., 2003). Knauer (1999) suggested that among sexual minorities, IPV is more common than antigay violence. Peterman and Dixon (2003) stated that partner abuse has been cited among the top five health problems confronting gay men, ranking just behind substance abuse and HIV/AIDS.

Turell (2000) reported results from a survey of 499 ethnically diverse gay and lesbian individuals living in the Houston area about their experience of abusive behaviors in romantic relationships. Results indicated that the frequency of violence in this sample was comparable to statistics cited in the literature about frequency of heterosexual IPV. Forty-four percent of gay men indicated being physically victimized, while 13% said they had been sexually assaulted. Higher numbers of lesbians indicated having been physically abused (55%), threatened (59%), and emotionally abused via coercion (61%) and shame (78%) than gay men (44%, 45%, 41%, and 63%, respectively). Socialization norms that permit women, but not men, to safely identify with a victim role may have resulted in the underreporting of IPV among gay men and resulted in more SSIPV research within the lesbian community. Significant differences among ethnic groups were found in the reporting of physical abuse and emotionally coercive strategies across sexual orientations (Turell). Native Americans and multi-ethnic individuals reported the highest frequency of coercion and Native Americans also reported the highest frequency of physical violence.

The majority of studies examining violence within lesbian relationships have found that, during their lifetime, 30-40% of lesbians report being physically abused by a female partner (West, 2002). In a non-clinical sample of 284 self-selected lesbians, 18-36% of the sample reported experiencing mild forms of physical abuse (e.g., throwing objects, throwing objects at partner, pushing, shoving, and slapping) during the past year (Miller, Greene, Causby, White, & Lockhart, 2001). Fourteen percent of the sample acknowledged having used or been victimized by serious forms of violence, including

kicking, using an object to hit, and threatening a partner with either a knife or gun. Still, 54% of respondents indicated they had not experienced any form of physical aggression.

Ristock (2003) found that 49% of women who identified having intimate relationships with women labeled their first female partnership as abusive. Results from the National Lesbian Health Care Survey, which included a sample of 1,925 lesbians, revealed that 53% of respondents noted at least one experience of being physically abused by a lover and 10% reported sexual victimization by a partner (Bradford, Ryan, & Rothblum, 1994). Using an ethnically diverse sample of 2,431 lesbian and bisexual women recruited from various lesbian and feminist organizations across the United States, Morris and Balsam (2003) found that 9.2% reported being physically assaulted by a female partner and 9.3% by a male partner. Most women who reported intimate partner violence were abused by both male and female perpetrators. This finding was particularly noteworthy given the failure of most studies to inquire about perpetrators' sex. That being said, the majority of respondents (62.3%) indicated having been the victim of a sexual orientation hate crime.

Turell (2000) noted that studies focusing on gay male IPV have been much less prolific than studies about lesbians. Compiling statistics from previous studies, Stanley, Bartholomew, Taylor, Oram, and Landolt (2006) cited the prevalence of IPV among gay males as ranging from 21-50%. In the 2003 National Coalition of Anti-Violence Programs (NCAVP) report, two out of five gay and bisexual men were identified as victims of IPV. Bryant and Demian's (1994) national survey found that 11% of 506 gay couples reported violence in their relationships. Rates of violence have varied depending

on the definition used. Including psychological violence in the description of IPV has resulted in larger numbers of self-reported victims (i.e., 80%; Stanley et al.).

In a survey of 52 gay men seeking domestic violence services in large metropolitan communities across the United States, Merrill and Wolfe (2000) found that 87% of the men reported being physically victimized. The majority of respondents also identified as having been emotionally, financially, and sexually abused. However, 77% of these men had left their perpetrators (Merrill & Wolfe). A convenience sample of 302 gay Puerto Rican men seeking social services, living in either New York or Puerto Rico, reported less physical violence (26%) and sexual violence (25%) than emotional violence (48%; Toro-Alfonso & Rodriguez-Madera, 2004).

Summary

Despite the public perception that SSIPV rarely occurs, current research has suggested that IPV among same sex couples is as frequent and severe as in other sex couples. The lack of uniformity in definitions of SSIPV has resulted in a body of contrasting data concerning the prevalence, severity, and etiology of the problem (Potoczniak et al., 2003). Cited rates of abuse among same sex couples have varied depending on researchers' definition of violence, restricted sampling frames, and victims' fear of discrimination.

Research and Training on SSIPV

Despite the prevalence of SSIPV, no formal training models have been developed that explain the existence of partner violence among sexual minorities. Renzetti (1989) noted that power differentials between partners, social class differences, and conflict

resulting from differences in intelligence have all been associated with SSIPV.

Differences in partners' need for independence have also been cited as a precipitating condition for conflict and abuse (Renzetti). Given that many of these contextual factors have been cited in the same sex and other sex IPV literature, counselors may be predisposed to respond to other sex and same sex partners similarly.

The majority of individual and family therapy models were developed for clients from the dominant culture. Ristock (2001) and McClennen (2005) acknowledged that sex-based models of domestic violence, which conceptualize partner aggression through the lens of misogyny and patriarchy, fail to adequately explain same sex IPV. Although the feminist conceptualization of violence as a method for maintaining power, control, and privilege in relationships has been empirically supported among other sex couples (Girshick, 2002), this framework has not fully accounted for other dimensions of oppression that contribute to same sex IPV. For example, a uniquely cited dimension of same sex IPV has been gay and lesbians' experience of self-hatred and perceived deservedness of victimization resulting from internalized social homophobia (Peterman & Dixon, 2003).

McClennen (2005) acknowledged that the roots of power imbalances in gay male partnerships tend to be under researched. Contrastingly, McClennen, Summers, and Daly (2002a) cited communication and social skills deficits, intergenerational transmission of violence, internalized homophobia, substance abuse, faked illness, and status differentials as observed correlates of power imbalances in lesbian IPV. Ristock (2001) argued that

service providers need to examine both similarities and differences in same sex and other sex relationship dynamics in order to appropriately respond to same sex violence victims.

In addition to ignoring unique causes of SSIPV, clinicians have also overestimated SSIPV victims' willingness to seek help. Numerous reasons have been cited for sexual minorities' reluctance to seek assistance following incidents of IPV. Viano (1996) aptly noted that victims may not recognize themselves as victims due to the presence of social mores and legal statutes that sanction and condone victimization. Additionally, fewer legal and community resources have been created (i.e., shelters and laws) to assist SSIPV than OSIPV victims (Turell, 2000).

Renzetti (1989) found that 78 of 100 self-selected lesbians who participated in a national survey on lesbian battering sought help. The majority reported that institutional resources (e.g., police, attorneys, physicians, and women's shelters) were perceived as unhelpful. Respondents indicated that such providers were commonly heterosexist, blaming, and unwelcoming. Results from the National Lesbian Health Care Survey indicated that lesbians sought help from friends most commonly (29%), followed by police (17%) and counselors (16%; Bradford, Ryan, & Rothblum, 1994). Among those who sought help from counselors and friends, 50% of respondents believed they received adequate help (Bradford et al.).

With respect to the legal system, Viano (1996) noted that crime victims often perceive the price of pursuing legal redress to be too high. The justice system's heterosexist and androcentric biases threatened same sex IPV victims' sense of autonomy and engender distrust of the law and the individuals sworn to uphold it (Viano).

Heterosexist assumptions have been built into state laws because historically perpetrators were assumed to be male and victims were assumed to be female (Girshick, 2002). While every state has passed some form domestic violence legislation to protect IPV victims, most laws failed to define whether those rights extend to victims of SSIPV because acknowledgement of this form of violence means recognizing same sex relationships (Pattavina et al., 2007) and broadening the definition of family (Aulivola, 2004). Aulivola (2004) noted that five states (i.e., Delaware, South Carolina, Montana, New York, and Virginia) exclude same sex victims from provisions that support the issuance of protective orders; most states have carefully constructed laws of sex neutrality that leave it open for interpretation as to whether same sex couples have the right to legal protection. Knauer (1999) stated that the presence of sodomy laws on three states' books means that victims must out themselves and risk punishment for illegal sex acts. One of those three states, Texas, recently had its sodomy law repealed when the United States Supreme court overruled the long-standing statute (*Lawrence v. Texas*, 2003). Aulivola cited six states (i.e., Hawaii, Ohio, Illinois, Kentucky, New Jersey, and Pennsylvania) that have specified protection for same sex victims in their laws.

With respect to social services, IPV shelters and counseling groups have often failed to include services for sexual minorities. Shelters have typically left out information about SSIPV victims in their diversity training (Girshick, 2002). Several lesbian respondents acknowledged being turned away by women's shelters. Lesbians who were not turned away acknowledged that shelter employees appeared reluctant to identify their experiences as battering (Renzetti, 1989). Waldon (1996) charged social

service agencies with a failure to adequately reach out to lesbians of color whose primary identification may not be as lesbian or bisexual women or who do not identify as battered. Consequently, Waldon recommended that agencies be sensitive to the intersections of race, sex, and sexual orientation and implement plans to deal with institutional racism and homophobia.

Shelters that have offered services to SSIPV victims have risked loss of funding if those who provide the money are homophobic (Girshick, 2002). If admitted to a shelter, same sex victims have had to contend with potential homophobia of those providing and seeking services (Girshick). Negative attitudes about homosexuality and lack of understanding are frequently cited as reasons for sexual minorities' dissatisfaction with mental health practitioners (Rudolph, 1988) and with shelters which have typically not admitted gay victims of abuse.

Reasons for Not Using Social or Legal Services

Many SSIPV victims have cited fears of not being taken seriously or believed as reasons for not seeking assistance. Dunbar (2006) reported that in Los Angeles county hate crimes motivated by sexual orientation bias (35.8%) were less likely to be reported to law enforcement than hate crimes motivated by racial/ethnic or religious bias (63.8%). Analyzing data from a nonprobability convenience sample, Kuehnle and Sullivan (2003) found that 48.6% of same sex domestic violence incidents were reported to police compared to 63.6% of sexual orientation bias (i.e., hate) crimes. Further analysis revealed that nearly two-thirds of lesbian victims reported domestic violence incidents to the police compared to less than half of gay victims. Lesbians were also equally likely to

report domestic violence and bias crimes, while gay men were significantly less likely to report domestic violence than bias crimes.

Island and Letellier (1991) reported that the gay and lesbian community downplays the frequency of violence in their community, which has contributed to an absence of provisions for victims within the gay and lesbian community (McLaughlin & Rozee, 2001). Studies investigating resources used by SSIPV victims have found that lesbians are more likely to consult a friend or therapist versus the police (Girshick, 2002; Renzetti, 1989; Ristock, 2003). Citing numerous studies, Bieschke, McClanahan, Tozer, Grzegorek, and Park (2001) stated that lesbians and gays have been shown to utilize therapy at high rates, and Liddle (1996) reported that their use of this resource exceeds that of heterosexuals. The authors noted that the majority of these studies were conducted with middle class, well-educated, and White participants.

Beyond looking at access to services, several studies have assessed gays and lesbians perceptions of helpfulness. In one study, 65% of lesbian respondents who sought help from a counselor rated the professional as either somewhat or very helpful (Renzetti, 1989). Among those lesbians who sought assistance from friends, 43% said they were only slightly helpful or not at all helpful. Many reported feeling blamed and dismissed and some stated that friends worked cooperatively with, rather than challenging, the perpetrator (Renzetti). Renzetti reported that lesbian respondents rated police, attorneys, and medical personnel as least helpful, and she hypothesized that third parties' failure to adequately respond to victims has diminished perpetrator accountability and impeded victims' attempts to leave abusive relationships.

IPV victims of color, whose communities have experienced brutality at the hands of racist police officers, often have resisted reporting abuse to law enforcement for fear of being met with racist, as well as homophobic, responses (Waldon, 1996; Wolf, Ly, Hobart, & Kernic, 2003). Victims of marginalized communities cited slower response times and fears that racist officers may use brutal force against the perpetrator as justification for their mistrust of police (Wolf et al.). Buzawa and Austin (1993) analyzed 110 randomly selected interviews with victims who previously filed IPV reports with the Detroit police department. Their results indicated that officers more often arrested Black perpetrators (34%) than White perpetrators (24%).

Merrill and Wolfe (2000) reported that 65% of gay men in their study sought help from police, while 85% said that they consulted friends. Women's shelters were seen as the least helpful resource, while other non-gay social service agencies, HIV-related agencies, and individual counselors were frequently endorsed as "somewhat" or "extremely helpful" (Merrill & Wolfe, p. 17). McClennen et al. (2002b) examined the responses of 63 gay male IPVs recruited from the caseload of 300 randomly selected social workers. The authors utilized survey materials originally constructed by Renzetti (1992) for use among an exclusively lesbian population. The majority of respondents were White and between the ages of 26 and 50. Among possible resources sought for assistance, victims turned to friends most often and looked to attorneys and women's shelters the least. Unlike Merrill and Wolfe's (2000) sample, less than 30% of McClennen et al.'s (2002b) respondents considered counselors, social workers, and psychiatrists helpful.

The gay and lesbian community has also downplayed abuse out of fear of reinforcing negative perceptions of same sex relationships and subsequent backlash from mainstream community members (Aulivola, 2004; Girshick, 2002). Rohrbaugh (2006) cited pressure among gays and lesbians to present harmonious relationships in order to counteract negative attitudes toward homosexuality. Ristock (2003) noted that lesbians have shown resistance to seeking services because they felt shamed at having been abused by another woman and did not want to violate an unspoken code of confidentiality within the small lesbian community. Other lesbians have acknowledged that outing themselves as victims destroys the idea of a “lesbian utopia” in which egalitarianism and nonviolence are hallmark elements (Girshick, p. 5). Despite efforts to preserve a utopian ideal, research has failed to support lesbians’ immunity from the effects of living in a sexist and misogynistic culture (Miller, Greene, Causby, White, & Lockhart, 2001), and lesbians have been forced to acknowledge that there is no sphere of safety for women.

Mutual Battering

The general public, including police, have been more likely to perceive SSIPV as “common couple violence” (Pattavina et al., 2007, p. 377). Common couple violence has typically referred to the use of minor forms of violence to resolve partner conflict. The sexist belief that power differentials do not exist between same sex couples has encouraged this perception (Aulivola, 2004). Girshick (2002) argued that the idea that women can be violent defies traditional sex norms since women are stereotyped to be nurturers and not aggressors. Battered lesbians have cited police homophobia and

butch/femme stereotyping, which has led to misidentification of victims and perpetrators, as reasons for not seeking assistance (Wolf et al., 2003).

Citing the premise that violence is reciprocal, the myth of mutual battering has failed to account for victims' efforts to secure their own safety by use of force (West, 2002). McClennen (2005) asserted that individuals who voluntarily choose to aggress against their partners are distinguishable from individuals who use self-defense against unwanted aggression. Some theorists have argued that the motivation of violence, and specifically the intent to control intimate partners, should be the basis for definition, rather than who initiated the violence (Stanley et al., 2006). Potoczniak et al. (2003) suggested that the concept of self-defense is often applied to gay male relationships in light of boys' socialization never to appear vulnerable. Given the sex norms, males who experience IPV have had trouble identifying themselves as victims, and witnesses have tended to perceive both parties as equal participants in the violence. Merrill and Wolfe (2000) reported that 83% of their self-selected sample of gay IPV victims believed that defending themselves when attacked did not constitute mutual battering. Only 6.3% of McClennen et al.'s (2002b) sample of gay men perceived themselves as responsible for their abusive relationships. Ristock's (2003) self-selected sample of lesbian respondents showed varying levels of response to partner abuse, including fighting back with the intent to injure the perpetrator (9%), self-defense throughout the entire course of the relationship (16%), and self-defense toward the end of the relationship (11%).

Difficulties establishing who is a perpetrator and who is a victim have contributed to the idea of mutual battering. Some studies' respondents acknowledged being both the

victim and aggressor in their same sex relationships (Stanley et al., 2006). Stanley et al. interviewed 69 gay men about their experiences of relationship violence. Of those who identified an incident of violence, a large proportion (44%) cited reciprocal abuse, with each partner perceived as having perpetrated equal amounts of physical and emotional abuse during the incident. Examination of contextual factors contributing to the identified incidents showed anger and frustration about unmet emotional and attachment needs to be larger determinants of violence than the presence of a controlling partner.

Fears of Being Outed

As Herek (2003b) noted, lesbians and gays risk serious social prejudice, discrimination, and sanctioning by disclosing their sexual orientation. Some negative consequences that frequently result from public identification as a sexual minority have included loss of child custody, employment discrimination, housing discrimination, harassment, and physical violence. Batterers have often threatened to expose their victims' identity to family and friends as a form of homophobic control, or threatened to infect them with HIV (Girshick, 2002; West, 2002). Waldon (1996) noted that being lesbians and women of color gives female perpetrators more leverage in making threats. Using cultural racism as leverage, perpetrators have threatened to out their victims within homophobic communities of color as a means of eliciting their silence and to discourage help-seeking behaviors. If victims choose to protect themselves by looking for outside support, Waldon acknowledged that they often confront the racism of service providers, in addition to sexist and homophobic attitudes.

Summary

No formal training models have been developed that explain the existence of partner violence among sexual minorities. Sex-based models of domestic violence, which conceptualize partner aggression through the lens of misogyny and patriarchy, failed to adequately explain SSIPV. Numerous reasons have been cited for sexual minorities' reluctance to seek assistance following incidents of intimate partner violence, including the belief of mutual battering and the absence of legal protection and social services for same sex victims. Many SSIPV victims have cited fears of not being taken seriously or being outed.

Attitudes Toward Sexual Minorities

Defining the Problem

Sexual minorities have reported varying perceptions of helpfulness in response to victim assistance programs and differing levels of resistance to seeking services due in part to the presence of institutional homophobia and heterosexism. Social psychological research has attempted to elucidate the relationships among stereotypes, attitudes, and prejudice. Theorists have generally differentiated attitudes from stereotypes, with stereotypes being conceptualized as foundational to attitude development. Stereotypes have been defined as individuals' beliefs about a social group based on perceived personal attributes of the group in question (Simon, 1998). Haddock, Zanna, and Esses (1993) defined an attitude as "an overall categorization of an attitude object along an evaluative dimension" (p. 1106), a definition consistent with Fishbein and Ajzen's (1975) conceptualization of attitudes as the combination of beliefs about an

object and subjective evaluations of those beliefs. Triandis (1971) articulated three components of an attitude: cognitions, feelings, and behaviors. Haddock et al. proposed that stereotypic beliefs as well as symbolic beliefs (i.e., the perceived values, customs, and traditions social groups violate or promote) comprise the cognitive component of attitudes. Haddock et al. further explicated the behavioral component as consisting of both past behaviors and behavioral intentions toward the attitudinal object.

Based on the aforementioned definitions, most theorists have conceptualized prejudice as a type of attitude associated with negative stereotypes about attitudinal objects. Simon (1998) summarized research about the stereotype-attitude connection and reported that negative stereotypes about various social groups have moderately predicted prejudice. The absence of a perfect correlation between stereotypes and attitudes has been reflected in counterintuitive findings. For example, individuals possessing negative stereotypes have endorsed positive attitudes toward targeted groups and individuals who presented as non-prejudiced have endorsed negative beliefs about attitudinal targets (Simon). While stereotypes are an important component of attitude development, the presence of a moderate association between these two variables has suggested that other factors beyond negative cognitions have contributed to attitude formation. Notably, efforts to identify these factors have been limited, and the majority of research examining prejudice has focused on the role of stereotypes (Simon).

Allport (1954) suggested that individuals' prejudicial attitudes are born through the adoption of stereotypes toward groups of people for whom they have little knowledge or experience. Because people categorize their social world into smaller groups, those

perceived as different are labeled out-group members. The most readily available information supporting perceived differences between in-groups and out-groups is selectively attended to and processed, while information minimizing differences is ignored (Yarhouse, 1999). Thus, it is predicted that heterosexuals will perceive other heterosexuals as in-group members and will assimilate new information in ways that support their preexisting stereotypes of out-group members (i.e., gays and lesbians). These stereotypes become reinforced by other in-group members and eventually become part of individuals' automatic thought processes. Given the cognitive effort needed to stop automatic thought processes, Herek (2003b) noted that stereotyped beliefs are very resistant to change.

Herek (2003a) identified a series of underlying motivations to sexual prejudice, including generalization of negative experiences with sexual minority members as well as individuals' fears about their own sexual impulses and conformity to sex norms. A common obstacle to overcoming sexual prejudice has been the perception that the values held by sexual minorities directly conflict with values held by members of the heterosexual community (Herek, 2003a). Research has shown that attitudes toward gays and lesbians are not the same as attitudes toward civil rights for sexual minorities. Individuals have been shown to support hate crime legislation and legislation against discrimination while simultaneously reporting hatred toward gays and lesbians (Herek, 1991). In a sample of 222 heterosexual officers, 42% of officers surveyed had negative attitudes toward gays and lesbians (26%) but only 7.4% opposed civil liberties for sexual minorities (Bernstein & Kostelac, 2002).

Fiske and Taylor (1991) noted that illusory correlations also contributed to prejudicial attitudes. Overestimating the strength of a relationship between two variables, such as pedophilia and homosexuality, contributes to the formation of negative stereotypes about sexual minorities (Yarhouse). Sakalli (2002) examined how attributions of controllability explained prejudice toward gays and lesbians. In essence, Sakalli's hypothesis suggested that individuals perceive gay and lesbian lifestyles and sexual attractions as deviant choices that can be controlled. Among a sample of Turkish undergraduate students, Sakalli found a significant relationship between negative attitudes toward sexual minorities and the perception that homosexuality is controllable. Additionally, Sakalli found that endorsement of negative cultural values about homosexuality also predicted prejudicial responses.

Historically, researchers used the term homophobia to label the emotional response individuals reported when in close proximity to gays and lesbians. Coined by psychologist George Weinberg in the 1960s, the term homophobia was defined as an irrational fear and hatred toward individuals in same sex relationships and included homosexuals' self-directed disparagement of their own sexuality (Herek, 2003a). Herek (2003a) noted that heterosexism emerged as a term in the early 1970s in reference to institutional oppression shown toward non-heterosexual individuals. Heterosexism was defined as a belief that romantic partnerships between members of the other sex were normative and superior to homosexuality and has been associated with the expression of sexual prejudice (Herek, 2003a; West, 2002). According to Logan (1996), the display of anti-homosexual responses, in both its covert and overt forms, has been commonplace in

Western culture. Summarizing several studies conducted since the 1970s, Herek (2003b) noted that over one-half of surveyed adults living in the United States labeled homosexuality and homosexual sexual behavior as sinful and morally deviant, unnatural, and disgusting.

Logan (1996) argued that the term homophobia does not accurately describe the anti-homosexual responses to which it refers. The term phobia has more recently been used as a diagnostic label for irrational fear and avoidance responses and resultant behaviors of such fear (i.e., discrimination). Given that violence has been a common outcome of negative attitudes toward gays and lesbians, and given the absence of violence in response to phobic stimuli, Logan suggested that the term homophobia replace the use of homophobia. Logan posited that homophobia incorporates hostile and negative attitudes toward gays and lesbians based on limited and/or inaccurate information, which Aronson (1979) used as the criteria for defining non-specific prejudice. Noting that people who are homophobic fail to see their fear of homosexuality as irrational, but do perceive their hatred as justified, Logan further detailed how anti-homosexual responses are commensurate with other forms of prejudice.

Herek (2003a) later offered the term sexual prejudice to encapsulate prejudicial attitudes shown toward any sexual orientation, although he acknowledged that the majority of prejudicial attitudes have been directed toward same sex partnerships. Like other forms of prejudice, Herek (2003a) acknowledged that sexual prejudice consists of negative, often hostile, evaluations of a social group's members. Additionally, Herek

(2000) recognized that espousing these negative attitudes has been used to assert heterosexual identity and conformity to culturally sanctioned sex roles.

Prejudicial attitudes about gays and lesbians have been based on limited or false information about sexual orientation. Herek (2003b) highlighted common stereotypes applied to sexual minority members, including perceptions that gays and lesbians are hypersexual, gay men are effeminate, lesbians are masculine, and both groups pose threats to children's safety and well-being. In an article addressed to members of the legal and political communities, Herek (1991) both identified and refuted a number of inaccurate characterizations concerning homosexuality. Speaking to assertions that homosexuality is a rare and deviant choice, he highlighted several social science studies that identified homosexual behavior as commonplace in nonhuman species and a large number of human societies. Herek (1991) also cited empirical studies that failed to find a relationship between sexual orientation and psychopathology. The misconception that sexual minority members experience greater psychological distress than heterosexuals has failed to account for the similarity in responses shown by other members of stigmatized groups (e.g., racial, religious, and ethnic minorities). Herek (1991) noted that the majority of gays and lesbians successfully function in a prejudicial and discriminatory society due to their use of adaptive coping strategies or what Bumiller (1988) referred to as their "ethic of survival" (p. 88). Sexual minorities also reported similar levels of relational satisfaction compared to their heterosexual peers. This finding contradicts assumptions about promiscuity and infidelity within the gay and lesbian communities (Aulivola, 2004). In response to myths about sexual orientation and children, Herek

(1991) indicated that research has failed to show that children raised by gay or lesbian parents are harmed by growing up in a gay-affirming household.

Individual Differences Associated with Sexual Prejudice

A number of personal characteristics (i.e., authoritarianism, sex, race, education, religiosity, and geographic location) have been associated with negative attitudes toward sexual minorities (Herek, 2000; 2003a). Individuals who scored high on measures of right-wing authoritarianism (RWA) have reported negative attitudes toward sexual minorities (Haddock et al., 1993). Research has shown that high authoritarians express commitment to a traditional value system and use their value system to guide their everyday decisions (Haddock & Zanna, 1998). Haddock et al. identified authoritarianism as self-righteousness informed by an adherence to Judeo-Christian values and exemplified by submission to legitimate authority and a willingness to aggress against individuals who oppose aforementioned values. Individuals who hold fundamental religious beliefs have argued that the sole purpose of sexual activity is procreation, and they have deemed activities not capable of produce offspring as deviant (Logan, 1996). Using scripture passages to support their position, individuals who adhere to the aforementioned premises have also associated homosexual behavior with promiscuity and perceived it as a threat to heterosexual marriage and the nuclear family (Logan).

Based on a sample of 145 college students, Haddock et al. (1993) found that respondents who scored high on measures of RWA expressed more negative stereotypes, symbolic beliefs (i.e., “beliefs that social groups violate or promote the attainment of cherished values, customs, and traditions,” p. 1106), and feelings toward gays and

lesbians than students scoring low on RWA. Symbolic beliefs and perceived value discrepancies were the most significant attitude predictors among high RWAs. Greater perceived value dissimilarity among high RWAs and sexual minorities was associated with more negative symbolic beliefs (Haddock & Zanna, 1998). In Haddock and Zanna's study of antigay attitudes and discriminatory behavior, college students who endorsed negative symbolic beliefs about gays and lesbians were more likely to show discrimination toward a gay and lesbian university organization than students with either neutral or favorable attitudes.

Another well-researched characteristic associated with sexual prejudice has been individuals' sex. Based on results from a meta-analysis, Kite and Whitley (1998) found that straight men reported more negative attitudes toward gay targets and homosexual behavior than straight women. Comparisons across populations of undergraduates, graduate students, professionals, and nonprofessional adults revealed the smallest sex differences in negative attitudes among nonprofessionals, moderate differences among graduate students and professionals, and the largest sex differences among undergraduates.

In a more recent study comparing heterosexual college students' attitudes toward different sexual orientations, the respondents expressed colder and more negative reactions to both gays and lesbians (Herek, 2000). Both men and women identified greater discomfort with same sex targets; however, heterosexual males indicated more hostile attitudes toward gay males than heterosexual women reported for both lesbian and gay male targets. Interestingly, male responses were influenced by the order in which gay

and lesbian targets were presented. Male respondents expressed less sexual prejudice toward lesbians when asked about their feelings toward lesbian targets first. When their attitudes toward gay males were assessed first, male respondents indicated more negative attitudes toward lesbian targets (Herek, 2000).

Offering a partial explanation for these findings, Kite & Whitley (1998) cited the power of sex roles. Kite and Whitley acknowledged that men who violate traditional masculine sex roles (i.e., gay men) have been judged more harshly than females who do not conform to traditional female sex roles (i.e., lesbians). The intense pressure for American males to show male-typed traits combined with perceived flexibility of the female sex role may partially explain heterosexual men's endorsement of anti-gay attitudes and straight women's more tolerant attitudes (Kite & Whitley). Kite and Whitley argued that lesbianism may have been perceived as less of a sex role violation than gay male sexual activity resulting in less censure. The cumulative findings of Kite and Whitley's meta-analysis and Herek's (2000) survey supported the power of sex-role stereotyping and rigid sex socialization to negatively shape individuals' perceptions of acceptable sexual expression.

Focusing on the interaction between sex and racial differences in attitudes toward sexual minority members, Herek and Capitanio (1995) reported that Black men held more negative attitudes toward gay men than Black women, while no differences were noted in their attitudes toward lesbians. Herek and Capitanio (1999) reported that heterosexual Black and White men endorsed more hostility toward gay males when presented a gay target first. In contrast, Black and White men expressed more positive

attitudes toward lesbians unless they were presented with gay targets first. White women reported less disgust toward gay men as compared to Black and White men, while Black women were more likely to perceive gay men as disgusting if asked about lesbianism in advance. Black and White women were less likely to perceive lesbian sexual activity as wrong when lesbian targets were presented first. Similar sexed results were found among respondents of Mexican decent (Herek & Gonzalez-Rivera, 2006). Herek and Capitanio (1995) suggested that the observed differences in factors predicting Black respondents' attitudes may reflect cultural differences in the social construction of human sexuality. Herek and Gonzalez-Rivera concluded that the psychological processes underlying attitude development warranted further investigation and comparison across cultures.

In addition to sex and race, Herek (2003a) noted that individuals' geographic location, education level, and religious beliefs have all been correlated with attitudes toward sexual minorities. Herek (2003a) found that having less education and living in rural areas, the South, and Midwestern United States was associated with greater sexual prejudice. With respect to religiousity, individuals who identified with a fundamentalist denomination and attended religious services have reported greater sexual prejudice than members of liberal religious communities and those who identify as nonreligious (Bernstein, 2004; Herek, 2003a). Factors associated with reduced sexual prejudice among Black respondents and respondents of Mexican decent included attending church infrequently, being well-educated, being registered to vote, and having personal relationships with sexual minorities (Herek & Capitanio, 1995; Herek & Gonzalez-Rivera, 2006).

The Contact Hypothesis

An absence of contact with minority groups has been shown to maintain negative stereotypes (Bernstein, 2004). According to the contact hypothesis, prejudice and intergroup hostility diminish when out-group and in-group members come together to achieve a common goal (Allport, 1954). Lower levels of sexual prejudice have been found among individuals who have social contacts with sexual minority members (Herek, 2000; 2003a; 2003b). Herek and Glunt (1993) found that contact with gay men more accurately predicted respondents' attitudes toward gay men as a social group than any other demographic variable. The majority of studies examining the contact hypothesis have focused on individuals who belong to an identifiable minority group. Given that homosexuality is a concealable stigma, gays and lesbians have frequently developed relationships with non-sexual minority members prior to these individuals learning of their gay or lesbian orientation. Herek and Glunt reported that attitudes were more positive among heterosexual respondents who had personal contact with a self-identified sexual minority member compared to respondents with no previous contact. Differences among liberals and conservatives in this nationally representative sample were also observed. Specifically, Herek and Glunt noted that liberal respondents who had contact with gays and lesbians endorsed significantly more positive attitudes than conservative respondents and liberal respondents with no known sexual minority contacts. Herek and Capitanio (1996) found that the closeness of such relationships and having direct discussions about sexual orientation within those relationships were identified as moderators of the aforementioned exposure effect. Additionally, Herek and Capitanio

noted that the more sexual minority members respondents knew, the more favorable their attitudes toward gays and lesbians in general.

Herek (2003b) investigated the context under which disclosures of sexual orientation were made to heterosexual respondents. Among a nationally representative sample, the author found that close friends or relatives were the most common disclosers whereas disclosures between acquaintances, casual friends, or distant relatives were the least likely to occur (Herek, 2003b). Moreover, the most favorable attitudes toward gays and lesbians have been shown by respondents with a gay or lesbian friend or close family member (Herek & Capitano, 1996). The author hypothesized that intimate contact with sexual minorities (i.e., through family relationships or friendship networks) challenged respondents to reconcile the dissonance created by inconsistencies in their stereotypic thinking, affect, and behavioral observations. Herek and Glunt (1993) speculated that a reciprocal relationship exists between heterosexuals' contact with sexual minorities and their attitudes toward gays and lesbians. Contact may have reduced prejudicial attitudes, but heterosexuals who possess less prejudice may have been more likely to experience contact with this population.

Summary

Homophobia has been defined as an irrational fear of close contact with a sexual minority member, while heterosexism has been identified as a belief in the superiority of other sex relationships to same sex partnerships. Heterosexism has been associated with sexual prejudice or the adoption of negative stereotypes toward sexual minorities based on minimal, and/or erroneous, knowledge or experience. Herek (1991; 2000a; 2003a)

debunked a number of negative stereotypes attributed to same sex couples and suggested that increasing contact with sexual minorities decreases sexual prejudice. A number of motivations have been postulated as the basis for sexual prejudice, including generalizing negative experiences with a sexual minority member, individuals' fears about their own sexual impulses, conformity to sex norms, and the perception of same sex attractions as deviant. Studies have suggested that a number of demographic characteristics also show strong associations with sexual prejudice, including sex, race, political affiliation, education, religiosity, and geographic location.

Domestic Violence Myths

Both sexual and sex prejudice have been instrumental in the development and endorsement of domestic violence myths. Peters (2003) defined domestic violence myths as "stereotypical attitudes and beliefs that are generally false but are widely and persistently held, and which serve to minimize, deny, or justify physical aggression against intimate partners" (p. 17). Peters identified three primary functions of all types of violence myths, including (1) blaming the victim, (2) excusing the perpetrator, and (3) minimizing the crime. One consequence of myth endorsement has been the reduction of positive feelings toward victims and a willingness to assist them. By impugning their character and believing them to be culpable, victims have been rendered unworthy of public sympathy and deserving of their victimization (Peters). Peters also noted that the stereotypic thinking, which characterizes IPV myth endorsement, has minimized significant differences among victims.

The predominant myth cited in research focusing on heterosexual IPV has been the belief that female victims bare ultimate responsibility for the abuse perpetrated against them (Harrison & Esqueda, 1999). Coinciding with this myth has been the notion that real victims attempt to leave the abusive relationship (Pierce & Harris, 1993). Worden and Carlson (2005) reported that over 60% of respondents agreed that women have the power to leave violent relationships if they want. Society has labeled women who choose not to leave as pathologically deficient, and often times, as depressed (Harrison & Esqueda). Domestic violence victims cited cultural differences about women's rights and marital roles as reasons for tolerating abuse longer than majority culture members perceive as reasonable (Wolf et al., 2003). For members of non-Western cultures, involving the police has meant ruining family honor, destroying personal reputations, and upsetting collective harmony (Wolf et al.). Seamans, Rubin, and Stabb (2007) reported that female IPV victims did not call the police because their male partners had the power to manipulate the criminal justice system through use of monetary influence or social connections with the law enforcement community.

Merrill and Wolfe (2000) noted that gay male victims who are HIV positive may choose to stay in abusive relationships out of fear of not having their physical and emotional needs met. Similarly, gay men may choose not to leave HIV-infected perpetrators out of guilt or strong feelings of obligation. Peterman and Dixon (2003) stated that the presence of societal homophobia and heterosexism has resulted in gay and lesbian community members feeling increased responsibility and obligation toward each other. For members who have been rebuffed by family, friends, and religious institutions

because of their sexual orientation, they may perceive leaving their abusive partner as abandonment. Similarly, they may refuse help from non-community members in an effort to protect their partner and the larger gay and lesbian community from hostility and judgment. McClennen et al. (2002b) noted that gay men have chosen not to report partner abuse in order to prevent further stigmatization of their community.

McClennen et al. (2002b) cited a lack of awareness about same sex IPV and lack of knowledge of victims' community resources as explanations for why battered gay men and lesbians remain in abusive relationships. Additionally, McClennen et al. (2002b) noted that both same sex and other sex victims have stayed in abusive partnerships for similar relational reasons, namely love, commitment, and fears of retaliation. IPV victims frequently cited economic dependence and a lack of resources as reasons for not leaving (Wolf et al., 2003). Peterman and Dixon (2003) noted that older gays and lesbians who have been in long-term relationships are more economically tied to their partners in the forms of joint accounts, retirement funds, and homes. Choosing to leave the relationship has resulted in both economic instability and lack of legal recourse in states that do not recognize same sex unions.

A second commonly held myth has suggested that battered women are masochistic and enjoy receiving pain, while a separate but related myth has propagated the notion that women's actions (i.e., committing adultery, nagging) incite beatings (Worden & Carlson, 2005). In a survey of New York residents, almost half the sample agreed that men are justified in their use of violence because of their partners' actions

(Worden & Carlson). Nearly 25% of respondents endorsed the myth that women want their partners to hurt them, and one-third stated that IPV is a normative experience.

A number of derogatory myths concerning female victims' character have been perpetuated, including perceptions of helplessness, dependency, unassertiveness, passive femininity, and defenselessness (Harrison & Esqueda, 1999). Pierce and Harris (1993) aptly noted that victims have been placed in a double bind. These victims have been besmirched by the assertion that they act too submissively, and in choosing not to fight back, they openly invite victimization. However, women who have used aggressive strategies to avoid assaults from their partners have also been maligned and identified as perpetrators because they violated traditional female sex norms (Harrison & Esqueda). Accordingly, victims have learned that they will be afforded victim status only by possessing socially sanctioned traits and engaging in narrowly scripted behaviors that characterize the stereotyped image of victims (Harrison & Esqueda).

In heterosexual relationships, women were perceived as provoking relationship violence and bearing partial responsibility for their partners' violent actions (Lavoie, Jacob, Hardy, & Martin, 1989). Disputing this myth, Seamans et al. (2007) found that female perpetrators physically retaliated, as opposed to instigating violence, in response to physically and emotionally abusive actions perpetrated against them by their male partners. Marital violence, in general, has been rationalized as an unfortunate, but acceptable, outcome of family conflict (Harrison & Esqueda, 1999). Citing a lack of purview in matters of domestic disturbance, the law enforcement community has traditionally tried to avoid involvement in resolving violent exchanges among intimate

partners (Harrison & Esqueda). Consequently, victims who have internalized blame have been less willing to report violent acts committed against them (Viano, 1996).

Speaking again to violence in heterosexual relationships, the myth that only men are perpetrators has contributed to the underreporting of IPV committed by female partners (Viano, 1996). Pierce and Harris (1993) investigated 469 undergraduates' responses to hypothetical reports of a domestic violence incident in which the perpetrator's race and the presence of a provoking statement made by the female victim varied. Results found that if the wife was described as verbally aggressive (e.g., a traditional female role violation), participants were more likely to perceive her as responsible for the battering incident and were less sympathetic toward her than if she had not provoked her partner (Pierce & Harris). Further analysis found the trend was more pronounced among male participants. Females saw the perpetrator as responsible regardless of provocation. Male participants believed that, if provocation was involved, there was justification for use of force. In a noteworthy interaction effect, male participants perceived White batterers as more justified in using force, if they were provoked and injured during the hypothetical dispute. In contrast, male respondents perceived identical incidents involving Black batterers as less serious (Pierce & Harris).

Using a methodology similar to Pierce and Harris (1993), Esqueda and Harrison (2005) found that a majority of White university students perceived Black female victims as more culpable than White female victims. Additionally, female victims, independent of race, were seen as more responsible for the incident, if they had provoked the male perpetrator and if the student respondents endorsed traditional sex roles. With respect to

arresting the perpetrator, respondents were less likely to support mandatory arrest, if the female victim had provoked him and if the respondents held traditional sex beliefs. Thus, individuals who supported traditional sex roles showed responses consistent with endorsement of victim responsibility myths and bias against non-White violence victims.

Kassing, Beesley, and Frey (2005) summarized a series of male rape myths that have appeared relevant to harmful attitudes about non-sexual IPV involving male victims. The authors' compiled list of myths included: (1) men's strength protects them from being overpowered; (2) men are rarely assaulted; (3) men cannot be violated outside of a prison setting; (4) men cannot be assaulted by women; (5) men who are violated by other men are gay; and (6) men make themselves susceptible to male sexual assault by engaging in risky behaviors. These myths have suggested that sex role stereotypes (e.g., behaviors and qualities seen as both desirable and typical for men) and homophobia play a critical role in shaping individuals' perceptions about the frequency of male assault and the personal attributes of male assault victims.

Mitchell, Hirschman, and Hall (1999) reported that among 396 undergraduates gay male rape victims were seen as more responsible for the assault and less likely to be traumatized than heterosexual male rape victims. Kassing et al. (2005) examined various hypothesized correlates of male rape myth acceptance. Using a convenience sample of predominantly White, heterosexual males, who were gainfully employed in a large Midwestern city, Kassing et al. found a significant, positive relationship between negative attitudes toward gay men and endorsement of male rape myths. An examination

of demographic variables also showed that male rape myth acceptance and homophobic attitudes were more common among older and less educated men.

Summary

Domestic violence myths have been postulated to reduce positive feelings toward victims and to minimize a willingness to assist them. Blaming the victim, excusing the perpetrator, and minimizing the crime have been common strategies for impugning victims' character and justifying their victimization. A number of IPV myths (e.g., true victims will leave their abusers; victims provoke violence from their partners) have been endorsed for both same sex and other sex couples. Domestic violence myth acceptance has been associated with a belief in traditional sex role stereotypes and homophobia.

Mental Health Trainees' and Professionals' Attitudes Toward Sexual Minorities

While not directly assessed, to the extent that mental health professionals rebuff sex stereotypes and heterosexism, they would be predicted to refute domestic violence myths. The aforementioned assumptions and stereotypes about sexual minorities have been documented in helping professions, including social workers, nurses, doctors, and psychologists (Malley & Tasker, 1999). Prior to being removed from the *Diagnostic and Statistical Manual of Mental Disorders (DSM)* in 1973 (Boysen, Vogel, Madon, & Wester, 2006), the mental health community had reinforced social perceptions of homosexuality as both an inferior form of sexual expression and psychopathological deviancy (Logan, 1996). Sexual minorities have faced unique mental health concerns, including the intersection of internalized homophobia (Murphy, Rawlings, & Howe, 2002), the impact of real or imagined heterosexism (Berkman & Zinberg, 1997), and

diagnosable mental disorders. Dillon and Worthington (2003) summarized a number of studies that reported graduate students' beliefs that they lack sufficient coursework and supervision to respond effectively to gay and lesbian issues.

Trainees' Attitudes

Buhrke (1989) reported the results of an American Psychological Association (APA) sponsored survey of 213 female graduate students' exposure to gay and lesbian issues in their doctoral programs during the mid-1980s. Almost 30% of students reported having no exposure to gay and lesbian issues during their training. On average, less than two graduate classes addressed such content relevant to sexual minorities and most commonly these were counseling-oriented classes. Nearly 50% of respondents had not seen any gay or lesbian clients, and the majority was significantly more comfortable seeing non-sexual minority clients. Buhrke indicated that the students perceived general supervision as more helpful than supervision tailored to working with gay and lesbian clients. This view may have been a consequence of graduate students perceiving themselves as more aware and accepting of gay and lesbian issues and more gay-affirming than their supervisors, faculty, and other students. More than 50% of graduate students indicated that they had not been exposed to a sexual minority professional role model.

Phillips and Fischer (1998) surveyed 38 clinical and 39 counseling psychology students, prior to internship, about their doctoral training in sexual minority issues. The majority of students self-identified as ill-prepared to work with sexual minorities, although they had more experience with gay clients compared to lesbian and bisexual

clients. The modal number of practicum training hours focused on lesbian, gay, and bisexual (LGB) issues was zero. In general, counseling psychology students reported greater integration of LGB issues into coursework, greater comfort working with LGB clients, and were more likely to have explored heterosexist bias than clinical psychology students. Phillips and Fischer found that over 75% of the sample said LGB issues were not integrated into their comprehensive exams and the majority had no exposure to LGB faculty. Students' formal training appeared to be a unique predictor of their self-reported preparedness to work with this population.

Jones (2000) conducted a survey in Australia with 43 psychologists, 44 undergraduate psychology students, and 17 postgraduate psychology students to assess the presence of homophobic reactions. Results showed that all three groups reported low levels of homophobic cognitions and intentional homophobic behavior in a variety of settings; however, undergraduates showed significantly more homophobic thoughts, behaviors, and feelings of fear or discomfort (i.e., homophobic guilt) than psychologists. Postgraduates were not significantly different than the other two groups, and psychologists and students did not show strong positive feelings toward gays and lesbians (Jones). The only noted sex difference was that male respondents showed greater homophobic guilt toward gay men than female respondents.

Barrett and McWhirter (2002) surveyed counseling and counseling psychology graduate students attending public universities in the United States for levels of homophobia and their assignment of favorable/unfavorable adjectives to straight and gay hypothetical clients. Levels of homophobia significantly predicted respondents'

assignment of unfavorable adjectives to clients regardless of clients' sexual orientation (Barrett & McWhirter). As male trainees' homophobic scores increased, they showed increased use of unfavorable adjectives. Trainees assigned significantly more unfavorable adjectives to heterosexual clients, thus they were not significantly more negative toward gay and lesbian clients. Barrett and McWhirter suggested that a social desirability bias and an unwillingness to appear negatively biased may have influenced the results. In general, higher homophobia scores were associated with more negative adjectives for lesbian but not gay clients. Significantly fewer positive adjectives were assigned to gay and lesbian clients than heterosexual ones by trainees with higher homophobic scores, while the opposite was true for less homophobic trainees (Barrett & McWhirter). Trainees with low homophobic scores also had more gay and lesbian friends. Lower homophobic scores were found among trainees who had gay or lesbian friends than those who did not have any such friendships.

Boysen et al. (2006) assessed the degree to which 293 undergraduates differed from 49 master's level counseling students in their endorsement of stereotypes about gay men's mental health. The authors differentiated strength of a stereotype (i.e., the degree to which individuals believe the content of a stereotype) from stereotype accuracy (i.e., how well perceived group differences actually reflect true group differences). Highly endorsed stereotype content for gay men included symptoms of anxiety, personality disorders, mood disorders, eating disorders, and sexual/sex identity disorders. In general, respondents perceived gay men as being like women, and as such, saw gay men as having disorders more commonly diagnosed in women (Boysen et al.).

Differences between therapists and students emerged for two symptoms (Boysen et al., 2006). Therapists more frequently endorsed the stereotype that gay men were unsatisfied with their appearance, while students endorsed the stereotype that gay men touch strangers (Boysen et al.). Beyond these two examples, both samples endorsed similar stereotype content and showed similar levels of stereotype strength. Thus, no significant differences could be attributed to respondents' education or career.

Using the same group of master's students and 77 different undergraduates, Boysen et al. (2006) measured the association between attitudes toward homosexuality and stereotype strength. The authors found that trainees had lower heterosexism scores than college students, which indicated more positive attitudes toward homosexuality. Additionally, Boysen et al. reported a positive correlation between heterosexism scores and stereotype strength. This association suggested that respondents' attitudes about homosexuality were related to stereotypes.

Practicing Professionals' Attitudes

While 53% of American Psychiatric Association members supported the decision to depathologize homosexuality, other later surveys revealed professional ambivalence. Rudolph (1988) reviewed surveys conducted after 1970 that assessed mental health practitioners' attitudes toward homosexuality. Some psychiatrists saw homosexuality as a developmental anomaly, lifestyle choice, pathway to relationship dysfunction, and unacceptable. Over 50% of master's and doctoral counseling students in one study stated that sexual orientation was irrelevant; 25% did not want their children to have gay and lesbian teachers; and one-third did not think gays and lesbians would make a good

president (Rudolph, 1988). A majority of San Francisco counselors polled said they would not be inclined to change clients' sexual orientation, believed gays and lesbians could function well in society, and believed gays and lesbians' sexual behavior should not be considered criminal (Fort, Steiner, & Conrad, 1971). However, over 75% of these San Francisco practitioners deemed homosexuality a "personality disorder" or "sexual deviation" (Fort et al., p. 349). In a separate survey, Rudolph (1988) reported that slightly more than 50% of participants believed that being gay or lesbian would not negatively impact individuals' general functioning. These findings reflected mixed messages practitioners receive from their profession and society at large. Rudolph (1988) postulated that such conflict could negatively impact the quality of the therapeutic context and contribute to sexual minorities' dissatisfaction with services.

Rudolph (1989) compared the attitudes and counseling effectiveness of 21 mental health practitioners and trainees (e.g., clinical experience averaged between one and two years), who participated in a workshop on counseling gay and lesbian clients, with a control group of 31 counselor education graduate students (e.g., clinical experience was less than one year), who did not participate in the workshop. The three-day workshop consisted of information about issues largely experienced by sexual minorities (i.e., AIDS/HIV, homophobia, research on reorientation therapy) and guidance on how to conduct gay and lesbian affirming therapy (e.g., reviewed identity development models, discussed internalized homophobia). Rudolph (1989) reported that the treatment group showed higher tolerance and greater counseling effectiveness compared to the control group. At an eight-week follow-up, positive attitudes toward sexual minorities were

maintained in the treatment group. Rudolph (1989) concluded that appropriate training, in both length and scope, resulted in participants' attitude change toward socially stigmatized groups.

Berkman and Zinberg (1997) examined attitudes of 187 heterosexual social workers toward gays and lesbians. Nearly 90% of the sample reported being non-homophobic, and attitudes toward gays and lesbians were positive, but not strongly positive, which showed evidence of some heterosexism. Homophobia was greatest for gay men, especially among male heterosexual respondents. Women respondents were less heterosexist than men, and Berkman and Zinberg found a negative association between knowing a sexual minority and self-reported homophobia. Respondents' amount of education on issues related to homosexuality was not related to their attitudes. Social workers who cited religion as "an extremely important aspect of their lives" (Berkman & Zinberg, p. 325) showed higher levels of homophobia and heterosexism. Social workers, who were currently receiving or had received psychotherapy experience in the past, reported lower levels of homophobia and heterosexism.

Bieschke, McClanahan, Tozer, Grzegorek, and Park (2001) reported that therapists typically endorse more positive attitudes toward sexual minorities than the general public when queried by survey methodology. However, researchers who utilized indirect methods for assessing attitudes found that therapists make cognitive errors when processing information about LGB clients and engage in avoidance behaviors (Bieschke et al.). The inconsistencies in these findings may best be explained by the social

desirability bias (i.e., therapists wanted to appear culturally sensitive), a confounding factor in survey research.

One hundred twenty-five APA psychologists were queried about their caseload of LGB clients, LGB training experiences, and concerns they perceived as particularly relevant with this population (Murphy et al., 2002). Respondents identified that 3% of their average caseload consisted of gay and lesbian clients and less than 1% were bisexual. Murphy et al. found a positive correlation between the amount of training received in LGB issues and proportion of LGB clients in current caseload. Fifty-six percent of respondents stated that they had seen at least one LGB client during the past week but this was not significantly related to amount of training they received. Lesbian and bisexual female clients were significantly more likely to be seen by lesbian therapists, first, and heterosexual female therapists, second. Similar sex and sexual orientation interaction was found among gay and bisexual male clients. The most frequently reported concerns of LGB clients seen in the past week were relationship issues, self-esteem, depression, and anxiety. Respondents rated antigay violence, relationship violence, and internalized homophobia as lesser concerns of current clients; however, participants perceived lesbian clients' recovery from sexual assault or abuse as a principal concern in therapy as compared to gay men. Consequently, psychologists perceived training in relationship violence to be particularly helpful in working with lesbians and training in living with HIV/AIDS helpful in working with gay men.

According to Murphy et al. (2002), the types of training psychologists received were ranked as follows: reading articles (46%); supervision (46% with 23% of this group

reporting that supervisors were knowledgeable about LGB issues); continuing education (46%); seeing presentations (36%); and reading books (32%). Less than a quarter of respondents completed a formalized course on LGB issues in graduate school. Twenty-two percent received training through seminars or modules; 18% reported other training, including peer supervision and case consultation; while 14% received training during internship or postdoctoral experiences. The publication of *Guidelines for Psychotherapy with Lesbian, Gay, and Bisexual Clients* (APA, 2000) is an acknowledgement of the need for specialized training to work with this population in order that quality services may be provided.

Eliason and Hughes (2004) compared 242 rural and 109 urban substance abuse counselors' knowledge of and attitudes toward lesbian, gay, bisexual, and transgendered (LGBT) clients using the ATLG (Herek, 2000) and questions about experience, knowledge, and familiarity working with this population. Urban providers reported more experience working with gay men, bisexual men and women, and transgendered men and women, but no differences in knowledge or comfort with LGBT individuals. Both groups reported more negative attitudes toward bisexual and transgendered individuals than lesbians and gay (Eliason & Hughes). Urban workers self-reported significantly more LGBT education. Most urban and rural providers indicated little knowledge of legal issues, domestic partnerships, and family concerns. More than 45% of both groups had minimal knowledge of internalized homophobia and the coming out process. Five variables associated with negative attitudes toward LGBT clients were: (1) fundamentalist/conservative religious beliefs; (2) identifying as heterosexual; (3) less

formal education; (4) fewer continuing education hours; (5) and feelings of discomfort when near LGBT individuals (Eliason & Hughes).

Kidd (2004) compared reported homophobia among 102 randomly selected male and female marriage and family therapists (MFT) and assessed how such attitudes influenced their perceptions of their working alliances with gay and lesbian clients. The majority of participants were White, female, and heterosexual, and 97% said they have worked with gay and lesbian clients. Kidd found that male and female respondents did not show significant differences in prejudicial attitudes. Male MFTs self-reported stronger working alliances with sexual minority clients than female therapists. Male therapists with lower prejudice also reported strong working alliances. Among female therapists, a significant negative relationship between self-reported prejudice and their working alliance with lesbian, but not gay, clients emerged (Kidd).

A sample of 130 systemic therapists practicing in the UK responded to survey questions about their training and current work with lesbian and gay couples and families (Malley & Tasker, 2004). More than 90% of respondents recalled spending less than five hours in discussion or training on LGBT issues throughout a four-year course of training. Respondents showed a range of responses, when queried about the influence of a systemic background to work effectively with sexual minorities, with some respondents noting that gay and lesbian couples were just another system (Malley & Tasker, 2004). The majority of therapists had not worked with sexual minorities, but those who had were more likely to have seen lesbians.

Malley and Tasker (2004) reported that over one half of the surveyed therapists approached working with gays and lesbians in a slightly different manner than they approached working with straight couples. Seventy-eight percent said that the majority of their contacts with gays and lesbians came in the professional realm versus through family or social contact. Malley and Tasker (2004) found an association between lower reported prejudice and greater family, social, and professional contact as well as an atheistic or agnostic religious orientation. Finally, female and male therapists showed no difference in prejudicial attitudes, and their total hours of training were also rendered unrelated to their attitudes (Malley & Tasker, 2004).

Estensen (2005) examined 90 Midwestern mental health workers' and trainees' competencies in working with LGBT clients using a survey of open-ended questions. The majority of participants were straight, and the sample had a nearly equal representation of psychologists, counselors, social workers, and students. Almost 90% of the sample reported having a LGBT relative or friend and over 80% had positive experiences interacting with LGBT individuals. Nearly 60% of respondents believed their LGBT training was inadequate, but two-thirds of the sample felt competent to provide treatment to LGBT individuals.

Estensen (2005) concluded that differences between the mental health workers and trainees may have reflected the influence of non-academic training experiences or respondents' overestimation of their competence. The failure of most respondents to answer the open-ended questions resulted in very limited data and generalizability. That being said, the majority of participants stated a belief in the need for mental health

workers to provide the same type of treatment to LGBT individuals as they would any other client. Estensen suggested that respondents lacked awareness of subtle heterosexism and issues that uniquely affect the LGBT population.

Matthews, Selvidge, and Fisher (2005) surveyed 179 addiction counselors for factors that predicted affirming attitudes and behaviors toward LGB clients. Years of experience and counselors' sex emerged as significant predictors of affirming behaviors. Matthews et al. reported that the most experienced counselors and female therapists were the most LGB affirming. Having positive attitudes toward working with sexual minorities, working in a non-heterosexist organization, and self-identifying as LGB also acted as significant predictors of counselors' affirming behaviors. Education level did not significantly predict an affirming orientation, albeit less than 50% of sample had advanced education such as master's degrees. This finding suggested that factors related to affirming attitudes do not exclusively develop through graduate school training.

Mental Health Professionals' Responses to SSIPV

Wise and Bowman (1997) assessed 71 counseling psychology students' responses to hypothetical scenarios of domestic violence in heterosexual and lesbian couples. Fewer than 50% of respondents had completed a course in LGBT issues or domestic violence. Results showed that straight couple battering was rated as more violent than lesbian battering. Students were more likely to charge males with battering and perceived male batterers as more responsible than female batterers. Respondents were less likely to endorse calling the police or going to a shelter as viable options for lesbian victims than heterosexual victims. Wise and Bowman found that students more

often recommended that lesbian couples try to work things out rather than leave the relationship, as evidenced by recommendations to seek couple's counseling at greater frequency than straight couples. In general, the study's findings revealed a need for more training in IPV across intimate partnerships.

Potoczniak (2005) compared counselor trainees' responses to hypothetical gay male IPV situations versus other sex IPV situation and how trainees' personal characteristics influenced their responses. The only personal characteristic associated with trainees' perceived degree of urgency to a SSIPV situation was their previous contact with gay males, which supported the contact hypothesis. The trainees also identified the presence of SSIPV at similar rates to OSIPV. Open-ended responses to questions about trainees' beliefs about IPV revealed that a number of trainees detected symptoms of anxiety and depression in the vignettes but did not attribute these responses to IPV. Despite previous IPV training, participants' failure to consider how situational factors, like IPV, influence the presence of such symptoms may reveal a training oversight.

Blasko, Winek, and Bieschke (2007) examined 347 marriage and family therapists' assessment of hypothetical domestic violence situations, while varying the sexual orientation of the couple. Respondents were randomly assigned a couple (i.e., heterosexual male-perpetrated, gay, and lesbian), asked a series of Likert questions about the situation, and completed the Homosexuality Attitude Scale (HAS; Kite & Deaux, 1986). Over 95% of respondents identified the scenarios as examples of IPV involving physical, verbal, and emotional abuse. According to Blasko et al., attitudes toward

homosexuality showed no relationship to identification of perpetrator or identification of victim. However, the couple's sexual orientation influenced respondents' identification of the victim. The woman (i.e., labeled as the non-initiator in the scenario) was most frequently identified as the victim in the heterosexual situation and the man was most frequently identified as the perpetrator (Blasko et al.). Respondents more frequently identified both partners as victims and perpetrators in the same sex couple incidents than the heterosexual situation. Therapists perceived the woman in the heterosexual situation as having less power than the victims in the same sex situations. The man (i.e., initiator) was seen as having more power in the heterosexual scenario as compared to the perceived gay and lesbian initiators. Results revealed different assumptions about who constitutes the victim and perpetrator in same sex IPV scenarios and was indicative of a bias in perceptions of relational dynamics.

Summary

Early research has suggested that both counselor trainees and practicing professionals have historically received inadequate LGB training. Many trainees reported working with few LGB clients and even fewer LGB mentors. However, studies have found lower levels of sexual prejudice among mental health professionals and trainees compared to the general public. More contemporary research has indicated a shifting trend in the field, with growing numbers of practitioners receiving formal training to work with sexual minorities.

Few studies have examined mental health professionals' perceptions of SSIPV. Current research has failed to show significant associations among professionals'

attitudes toward same sex partnerships, their recognition of SSIPV, and clear identification of IPV perpetrators and victims.

Police Officers' Perceptions of Domestic Violence

While mental health professionals have been somewhat more affirming of same sex couples, research has found law enforcement personnel who interact with individuals experiencing SSIPV to be less affirming. Law enforcement personnel have characteristically shown negative attitudes toward IPV victims. Heany (2005) interviewed 152 Midwestern police officers regarding their perceptions of domestic violence. The majority of officers agreed that IPV is a punishable crime and should be policed, but they also acknowledged circumstances in which IPV was believed to be understandable and police intervention unwarranted (i.e., cases of infidelity, victim instigated the violence). In a comparison of police officers' and IPV advocates' attitudes, Heany found that officers were more likely to believe that wife beating was justified and less likely to support punishing offenders. Officers perceived IPV victims as responsible for leaving and responsible for putting themselves in a violent environment (Heany). Some officers acknowledged that victims might choose to stay with a perpetrator out of fear of inciting greater violence, but these officers were in the minority. The majority of officers believed IPV victims bore some responsibility for their victimization, especially when they chose not to utilize available social and legal services. That being said, officers who were interviewed also perceived the police department as the least effective resource for victims. Officers believed that social service resources were better suited to provide victim assistance (Heany).

With respect to IPV training, officers reported that the training they received in the academy did not adequately prepare them for real-life situations (Heany, 2005). The focus of these trainings was predominantly procedural and included a discussion about community resources. Less than half the officers surveyed believed they would respond more effectively if they better understood IPV, worked more closely with IPV services, or knew more about resources. Officers also doubted that sensitivity training or instruction in how to communicate with victims would improve their overall responsiveness. Less than 50% of Heany's sample requested more IPV training. Many officers felt that changing stereotypes and reducing frustration associated with this line of work would be difficult.

In their review of early studies of police officers' attitudes, Lavoie et al. (1989) reported that officers reported contrasting perceptions. While some officers perceived women as responsible for all marital problems, others held husbands more responsible in situations of partner abuse. Lavoie et al. analyzed the responses of 235 municipal police officers in the Canadian province of Quebec who read a vignette about partner violence. In the vignette, the officers were told they were responding to a call about a domestic disturbance in which the common-law husband was said to have been violent toward his wife. Following the vignette, they were asked a series of questions as to the amount of responsibility they attributed to the wife, husband, and socioeconomic and contextual factors. Results indicated that officers were more likely to see both parties as responsible in the absence of alcohol consumption and were inclined to attribute greater responsibility to the couple's socioeconomic status when they were perceived as poor.

In situations involving physical violence, as opposed to threats only, officers held the husband more responsible (Lavoie et al., 1989). Evidence of verbal antagonism resulted in officers perceiving the wife as increasingly responsible for the disturbance. Consequently, officers saw the couple as sharing responsibility. The legal status of the couple's relationship did not significantly influence the officer's attributions. Connolly, Huzurbazar, and Routh-McGee (2000) reported contrasting findings after analyzing actual police reports. Connolly et al. found that police were less likely to arrest the perpetrator in a domestic violence incident when the couple was married compared to cohabitating. However, if the crime was defined as an assault, police were more likely to make an arrest if the couple was married.

According to Heany (2005), victims' preferences played an important role in officers' decisions to make arrests. Officers were more likely to make arrests when victims said they would prosecute the perpetrators and less likely to arrest when victims asked them to do nothing. Police officers also negatively perceived victims who called the police without any intention of following through with legal consequences (Heany). Viano (1996) noted that officers have approached domestic disputes with perceived biases about the victims' willingness to cooperate and/or pursue prosecution. Based on past experiences, officers have perceived victims, who exaggerate their injuries, are abused by multiple partners, or call for temporary safety, as less likely to pursue criminal charges (Heany). Officers also acknowledged that they believe some victims request police intervention in order to manipulate the situation and to seek revenge on their partners (i.e., get partners in trouble and retrieve stolen property). The consequences of

such assumptions have resulted in a lack of law enforcement and an absence of protection for victims.

Using hypothetical vignettes, Saunders (1995) found a relationship between Wisconsin police officers' propensity to arrest IPV victims, their belief that IPV is justified in cases of infidelity, and their lack of comfort communicating with victims. Saunders found no relationship between attitudes toward women or attitudes toward battered women and the likelihood of arresting female victims. Officers in Heany's (2005) study indicated that they did not see sex as a relevant factor in IPV incidents. In contrast, Connolly et al. (2000) reported that Wyoming police were twice as likely to arrest male perpetrators as female perpetrators based on documented domestic violence reports. Buzawa and Austin (1993) found that Detroit police officers were more likely to make an arrest in domestic violence incidents when the victims and perpetrators lived together, although couples' marital status failed to be a significant predictor of police response. The analysis revealed no significant difference in arrest rates among common-law versus legally married couples.

According to Heany (2005), the majority of officers endorsed belief in common couple violence (i.e., victims were seen as instigating the fight or assaulting their partners during the incident) and were ignorant to issues of power, control, and patriarchy. Domestic violence was largely attributed to individuals' out-of-control emotions and rage (Heany). Officers judged whether victims deserved violent treatment based on lifestyle choices (i.e., use of substance, number of partners, and children) and ignored issues of social oppression as explanations (Heany). Heany concluded that officers' biased

schemas informed attitudes and behaviors toward victims, while simultaneously helping officers manage the frustration and danger inherent in their work. For example, by believing IPV victims bear responsibility for being assaulted, officers were able to accept their inability to protect victims from future assaults, especially if the victims chose to stay with the perpetrators (Heany).

Earlier research suggested that some officers' feared for their own safety in responding to domestic disputes, while others perceived responding to domestic complaints as light police work (Viano, 1996). More current research has suggested that officers perceive both the perpetrators and victims as lying about aspects of violent incidents (Heany, 2005). Victims are seen as lying for sympathy. Operating from this assumption, officers acknowledged that they often stereotype calls and develop expectations about the victims and the assaults prior to arriving on the scenes (Heany). For example, when identification of perpetrators has been difficult, officers have mistakenly identified perpetrators by size, assuming that the larger individuals are the abusers (Peterman & Dixon, 2003).

Police Officers' Responses to SSIPV

Police culture has traditionally been one that is opposed to both feminism and homosexuality (Connell, 2005). Aulivola (2004) noted that police departments in cities with large gay and lesbian communities (i.e., San Diego, Seattle, New York, Los Angeles) have actively trained police officers to respond to same sex domestic violence. However, in the majority of police departments across the country, police have been charged with enforcing institutionalized homophobia (Aulivola).

Several police departments have been cited for their opposition toward hiring sexual minorities (Bernstein & Kostelac, 2002). In a study of police attitudes, Bernstein and Kostelac reported that the majority of officers were neutral about the ability of gay and lesbian officers to perform their jobs well. Some respondents believed that sexual minorities undermined the community's perceptions of police officers as role models (15.4%) and others stated that actively recruiting gay and lesbian officers undermined group morale (25%). Although surveyed officers held negative perceptions of gay men, they also saw gay men as more capable officers than lesbians. Negative attitudes toward sexual minorities were associated with avoiding contact and vocalized opposition to working with them. Moreover, Bernstein and Kostelac found that 25% of officers self-reported engaging in a form of disrespectful or harassing behaviors toward sexual minorities. Female officers held more positive attitudes toward gay men than male officers, but the two groups showed no differences in their views of lesbians. Bernstein and Kostelac also found no significant differences in general attitudes toward sexual minorities or support for civil liberties between White and non-White officers.

Younglove et al. (2002) suggested that police officers' homophobia and lack of knowledge about sexual minorities reflects the attitudes endorsed by the larger society. Consequently, Johnson and Ferraro (2000) proffered that officers' lack of training in SSIPV could result in false perceptions of mutual battering. Viano (1996) reported that prejudice among law enforcement leads to assumptions that violence is a legitimate means for resolving relational disputes within marginalized social groups, including immigrants, people of color, and sexual minorities. Differential responses shown toward

SSIPV, as compared to OSIPV, have reflected officers' failure to affirm the validity of same sex relationships (Girshick, 2002; Younglove et al.). Moreover, stereotypes that feminize gay men (e.g., battering is a masculine behavior) and attribute masculine qualities to lesbians (e.g., violence between women is nothing more than a cat fight) preclude the acceptance of violence in these relationships (Younglove et al.).

In the literature, there has been a dearth of contradictory information about law enforcements' response to SSIPV. Pattavina et al. (2007) analyzed findings from the National Incident Based Reporting System (NIBRS), which compiled information from intimate partner assaults and intimidation incidents reported to the police. Using data collected from 19 states during the year 2000, the NIBRS researchers examined the impact of various independent variables on the likelihood of arrest. Less than 1% of the incidents involved same sex couples, but an equal number of same sex and heterosexual cases resulted in arrest. Looking at sex differences, Pattavina et al. found that cases with male victims resulted in arrest more often than cases involving female victims; however, victim sex was not a significant predictor of arrest in same sex couples.

Pattavina et al. (2007) also found that charging violent partners with intimidation was less likely to result in arrests than filing assault charges, regardless of the couple's sexual orientation. In general, incidents that occurred in states with mandatory arrest laws had higher probability of arrest. The presence of domestic violence legislation significantly predicted arrest for lesbian perpetrators, but the use of inclusive language in the legislation was shown to increase the probability of arrest for males. Incidents involving ethnic minority victims were less likely to result in arrest, independent of sex.

Younglove et al. (2002) found that officers' responded to scenarios of IPV, in which the sexual orientation of the couple varied, with no significant differences. The officers may have been responding to demand characteristics and social desirability factors. Also, the study took place in California, where officers received training about responding to SSIPV. These officers' compliance with legal and departmental policy may not generalize to other police departments that fail to teach officers how to respond to domestic disputes between same sex couples.

In contrast to Younglove et al.'s (2002) findings, a number of other studies suggested that officers refuse to intervene in domestic matters involving sexual minorities (Bernstein & Kostelac, 2002). Minimizing the seriousness of the incident and blaming the victim have been strategies used to rationalize officers' indifference (Comstock, 1991). These minimizing and blaming orientations have led officers to ignore arrest procedures, while others have refused to intervene (Aulivola, 2004; Comstock, 1991). Officers have also erroneously identified the primary aggressors solely on the basis of physicality (Peterman & Dixon, 2003). Acting on the stereotype that the primary aggressors appear bigger or more masculine, the police have mistakenly arrested victims (Aulivola, 2004). Similarly, Chesney-Lind and Pasko (2004) reported that police have acted more harshly toward women who commit crimes generally committed by men.

Summary

Police culture has traditionally been one that is opposed to both feminism and homosexuality. There has been very little research in the area of police response to SSIPV. Limited research has shown that many law enforcement officers believe IPV is a

punishable crime and should be policed. Officers have articulated a number of factors they consider when forming attributions of responsibility and considering whether to make an arrest. Some officers have acknowledged circumstances in which IPV is perceived as understandable and police intervention unwarranted. With respect to IPV training, officers have reported that the academy did not adequately prepare them for real-life situations and most officers received very little guidance in responding to SSIPV. While some findings suggested that officers show no differential response to couples, other studies indicated that officers refuse to intervene in domestic matters involving sexual minorities due in part to beliefs of mutual battering.

Attitudes Toward Hypothetical IPV Scenarios

The majority of research assessing responses to SSIPV has been conducted among undergraduate students using hypothetical scenarios. Poorman, Seelau, and Seelau (2003) cited biased attitudes toward same sex couples in a study with 252 undergraduates who were presented four vignettes of IPV in which the sex of both the victims and perpetrators was varied. Regardless of the hypothetical couple's sexual orientation, when the victim was female, students rated the incident more serious, recommended police issue a citation or make arrest, and recommended more intervention from others. The scenario depicting a male perpetrator and female victim was rated significantly more serious than the others and participants were more likely to recommend that the victim in this scenario press charges. Support for participants' belief in traditional sex-role stereotypes was further evidenced by their assertion that male victims held greater responsibility for the violent incident when the perpetrator was female. Poorman et al.

posited that participants may have chosen to believe that the male victim provoked the female perpetrator in order to justify her violation of sex-typed passivity and non-aggressiveness.

When asked to imagine themselves as jury members listening to the hypothetical accounts, participants indicated they would render guilty verdicts more often when the hypothetical victim was female, irrespective of participant, or perpetrator sex (Poorman et al., 2003). Similarly, when queried about the believability of reported accounts, participants stated that victims were more believable than perpetrators, regardless of victim sex or perpetrator sex. Thus, the results suggested that the participants' attitudes toward same sex couples did not negatively influence their perceptions of IPV. However, in the absence of any assessment of homophobia, the authors recommended that future studies examine the relationship between such prejudice and perceptions of IPV.

Replicating their earlier work, Seelau and Seelau (2005) assessed 192, mostly White, undergraduate students' perceptions of IPV using the four vignette methodology previously described. Results indicated that, although students perceived all four incidents of abuse as serious, they deemed the dynamic of a male perpetrator and female victim to be the most serious. Male participants appeared more likely to recommend that no action be taken to assist the couple regardless of perpetrator or victim sex. Contrastingly, over 50% of female participants recommended that the victim call the police or a hotline if the victim was female. When the identified victim was male, the majority of female students recommended that the couple be left alone. In general, participants were more likely to endorse calling the police if the victim was female and

leaving the couple alone if the victim was male. With respect to police involvement, participants recommended that officers issue a citation or make an arrest when the victim was female. However, they suggested that officers should give only a verbal warning for female perpetrators. Similar to Poorman et al.'s (2003) findings, Seelau and Seelau reported that participants considered same sex relationships to be as close and stable as heterosexual partnerships. The authors concluded that attitudes toward gays and lesbian did not negatively influence their perceptions of IPV.

Within a sample of 72 undergraduates, Hill (2000) found that respondents were more likely to issue guilty verdicts to hypothetical stranger assault cases when the victim was straight and the perpetrator was a sexual minority. Gay and lesbian victims were the least likely to see perpetrators charged with a guilty verdict. Harris and Cook (1994) compared responses of 372 college undergraduates using three hypothetical scenarios of IPV involving male battering female, female battering male, and male battering male. Main effects for sex showed that female respondents perceived the scenarios as more violent, were more likely to call the police if they witnessed the event, and perceived the batterer as more responsible. Irrespective of sex, respondents saw the wife beating scenario as more serious and were more likely to call the police than they were in the other two situations (Harris & Cook). Additionally, victims were held least responsible for battering when there was no mention of provocation. Students perceived female victims as less responsible than heterosexual male victims, and heterosexual male perpetrators were seen as the most deserving of an assault conviction. Harris and Cook also found that heterosexual male batterers were perceived as having a history of physical

assault compared to female and gay perpetrators. Respondents endorsed more positive feelings toward female victims than all other victims, but heterosexual victims were liked more than gay victims. Gay men were most seen as needing to leave their partners more than straight female and male victims. Harris and Cook (1994) concluded that these result supported negative attitudes toward gay men and the quality of their relationships.

Summary

A few studies using hypothetical scenarios have examined undergraduates' perceptions of SSIPV in comparison to perceptions of OSIPV. Results have suggested that male perpetrated violence against women is viewed as the most serious. Male victims were infrequently identified as recipients of legal intervention, and compared to other perpetrators, females were seen as the least responsible. None of these studies directly assessed for heterosexist bias, thus no associations between sexual prejudice and perceptions of SSIPV could be inferred.

Concluding Summary

Research has suggested that the general population does not see all instances of IPV as equal. Non-uniform definitions of IPV, in combination with stereotypic myths about perpetrators' sex and the causes of violence, have led to misconceptions about the prevalence and severity of partner abuse. Additionally, the presence of homophobia has perpetuated the belief that SSIPV is less common and less serious than OSIPV.

Within the mental health and law enforcement communities, there has been a limited, but growing awareness of SSIPV. The presence of homophobia and heterosexism among social service professionals and police officers has undermined the

recognition of SGPIV and resulted in unequal and insufficient services for sexual minority victims compared to heterosexual victims (Potoczniak et al., 2003). Given the dearth of legal, sociological, and psychological research in this area (Potoczniak et al.), individuals charged with providing victim assistance have been ill-prepared to meet the unique needs of same sex couples experiencing violence. Research has not fully examined the interaction between police officers' and mental health professionals' perceptions of same sex IPV and the training they have received to work with sexual minority victims. The documented homophobic culture of police departments (Heany, 2005) has suggested that law enforcement personnel would be less likely to receive training in working with same sex IPV victims. In contrast, the push for more diversity training within the mental health community, combined with sexual minorities' growing use of counseling services, has likely increased counselors' awareness of SSIPV.

The majority of research examining perceptions of IPV and attitudes toward sexual minorities have been conducted among college aged students or professionals-in-training. Studies that have assessed endorsement of IPV myths have predominantly been conducted within the general population and in college communities. Consequently, there exists a need for researchers to assess the generalizability of previous findings to the populations directly in contact with IPV victims, namely police and mental health professionals. As Poorman et al. (2003) noted, if law enforcement and mental health workers' perceptions of SSIPV mirror those of the general public, sexual minorities will continue to be marginalized by both the justice and social service systems.

Purpose of the Study

Although some mental health associations (e.g., the American Psychological Association) and law enforcement agencies have worked to increase their members' sensitivity and skill in working with sexual minorities, few studies have explored whether heterosexism indirectly influences these professionals' perceptions of violence among lesbians and gay men. The present study examined police officers' and psychologists' perceptions of IPV in same sex and other sex partnerships. Based on previous research regarding perceptions of SSIPV and OSIPV and psychologists' and police officers' training to work with victims of violence, the following hypotheses were proposed, with stated differences achieving statistical significance.

- 1A. Police officers would perceive violence between same sex partners, depicted in a hypothetical scenario, as less serious than psychologists.
- 1B. Male police officers would be the least likely to perceive violence between same sex partners, depicted in a hypothetical scenario, as serious.
- 1C. Psychologists and police officers would show no difference in their perception of violence severity, depicted in a hypothetical scenario, between other sex partners.
- 1D. Psychologists and police officers would show no difference in labeling a hypothetical scenario of partner conflict between other sex partners as domestic violence.
- 1E. A greater number of psychologists would label a hypothetical scenario of partner conflict between same sex partners as domestic violence than police

officers.

- 1F. Female psychologists would be the most likely to label a hypothetical scenario of partner conflict between same sex partners as domestic violence.
- 1G. Police officers and psychologists would show no difference in recommending hypothetical victims of other sex violence contact law enforcement.
- 1H. A greater number of psychologists would recommend that hypothetical victims of same sex violence contact law enforcement than police officers.
- 1I. Female psychologists would be the most likely to recommend that hypothetical victims of same sex violence contact law enforcement.
- 1J. Police officers and psychologists would show no difference in their perceptions of other sex couples' ability to resolve future conflict with nonviolence.
- 1K. Psychologists would perceive same sex couples as more capable of resolving future conflict with nonviolence than police officers.
- 1L. Female psychologists would be the most likely to perceive same sex couples as more capable of resolving future conflict with nonviolence.
- 1M. A greater number of police officers would perceive partners in a hypothetical same sex couple as sharing responsibility for the use of violence than psychologists.
- 1N. Male police officers would be the most likely to perceive partners in a hypothetical same sex couple as sharing responsibility for the use of

violence.

- 1O. Female psychologists would show the least difference in their perception of mutual responsibility for hypothetical other sex and same sex couples.
- 1P. Police officers and psychologists would show no difference in their recommendation that hypothetical other sex couples seek counseling to resolve future conflict.
- 1Q. A greater number of psychologists than police officers would recommend that hypothetical same sex couples seek counseling to resolve future conflict.
- 1R. Female psychologists would be the most likely to recommend that hypothetical same sex couples seek counseling to resolve future conflict.
- 2A. Police officers would endorse more heterosexist attitudes than psychologists.
- 2B. Male police officers would endorse the most heterosexist attitudes.
- 3A. Police officers would endorse greater domestic violence myth acceptance than psychologists.
- 3B. Male police officers would endorse the most domestic violence myth acceptance.
- 4. Occupation status, participant sex, hypothetical IPV scenario received, endorsement of heterosexist attitudes, and domestic violence myth acceptance would significantly predict the perception of violence severity.
- 5. Occupation status, participant sex, hypothetical IPV scenario received, endorsement of heterosexist attitudes, and domestic violence myth acceptance would significantly predict the perception of mutual partner responsibility.

CHAPTER III

METHODS

Participants

Participants in this study included 73 self-selected police officers and 64 self-selected psychologists. The researcher recruited psychologists who were members of the American Psychological Association (APA) using a randomly generated mailing list obtained from this organization. The psychologists were sampled from two APA major fields (i.e., Counseling and Clinical Psychology) and two APA special interest areas (i.e., Family Processes and Family Therapy). Police officers were recruited from two Texas police departments: the City of Denton Police Department and Grand Prairie Police Department. Research team members recruited Grand Prairie police officers during officers' daily briefings, and a lieutenant with the Denton Police Department forwarded a recruitment letter (see Appendix A) to members of an internal electronic listserv. Given the potential for a low response rate to a mail survey request and the researcher's limited financial resources, the researcher also employed a snowball sampling technique using the Internet.

Welch (1975) observed that a significant discrepancy between the resources needed to obtain an adequate random sample and researchers' financial resources can stymie the data collection process. Welch noted that one possible resolution of this dilemma involves recruiting participants through an informal referral method, such as

snowballing. Snowball sampling has been effective at identifying members of traditionally hidden populations that are small in number and difficult to contact as well as populations whose members fear publically responding to questions deemed to be sensitive in nature (i.e., sexual content; Browne, 2005). The snowball sampling method involves identifying and asking a small number of target population members to participate in the research project and then asking those participants to inform other target members about the opportunity to participate. Using this methodological technique, the researcher contacted police officers and psychologists via e-mail, invited them to participate in the survey, and invited them to refer known colleagues to participate.

Although a total of 173 individuals began the survey, some participants ($n = 25$) chose not complete all of the materials and were excluded from further analysis. The researcher also excluded data collected from participants who identified as psychologists but who had not completed a doctoral degree ($n = 11$). Of the remaining 137 participants, the reported mean age was 42 years ($SD = 11.28$). Further analysis revealed that law enforcement personnel ($M = 38.42$, $SD = 9.16$) were significantly younger ($F(1, 123) = .66$; $p < .01$) than psychologists ($M = 45.67$, $SD = 12.24$). Additional demographic characteristics of the sample appear in Table 1. The majority of participants ($n = 66$; 39.50%) identified Texas as their home state, and the next largest majority ($n = 11$; 6.60%) identified Utah as their geographic home. The remaining participants were distributed across various regions of the country (see Table 2). Information about law enforcement personnel's and psychologists' receipt of training around issues of domestic violence and same sex relationships appears in Tables 3 and 4, respectively.

Table 1

Demographic Characteristics (N = 137)

Variable	<u>Law Enforcement</u> (<i>n</i> = 73)		<u>Psychologist</u> (<i>n</i> = 64)	
	Frequency	%	Frequency	%
Gender				
Female	15	20.55	42	65.63
Male	58	79.45	22	34.37
Ethnicity				
African American	2	2.74	3	4.69
Asian American	2	2.74	3	4.69
Caucasian	62	84.93	56	87.50
Hispanic/Latina/o	1	1.37	1	1.56
Native American/Alaskan	4	5.48	0	0.00
Native Hawaiian/Pacific Islander	1	1.37	0	0.00
Biracial	1	1.37	1	1.56
Sexual Orientation				
Exclusively Heterosexual	68	93.15	41	64.06
Primarily Heterosexual	0	0.00	13	20.31
More Heterosexual than Homosexual	1	1.37	2	3.13
Bisexual	1	1.37	3	4.69
More Homosexual than Heterosexual	1	1.37	0	0.00
Primarily Homosexual	0	0.00	1	1.56
Exclusively Homosexual	2	2.74	4	6.25
Relationship Status				
Single	11	15.07	10	15.63
Committed Relationship	16	21.92	6	9.37
Domestic Partnership/Married	41	56.16	44	68.75
Widowed	0	0.00	1	1.56
Separated	2	2.74	1	1.56
Divorced	3	4.11	2	3.13
Religious/Spiritual Identity				
Very Religious/Spiritual	10	13.70	14	21.88
Somewhat Religious/Spiritual	28	38.36	24	37.50
Slightly Religious/Spiritual	30	41.09	14	21.88
Not at all Religious/Spiritual	5	6.85	11	17.18
Don't Know	0	0.00	1	1.56

Political Ideology				
Very Conservative	7	9.59	0	0.00
Conservative	22	30.14	2	3.13
Somewhat Conservative	29	39.73	4	6.25
Somewhat Liberal	12	16.44	14	21.88
Liberal	3	4.10	31	48.44
Very Liberal	0	0.00	12	18.74
Don't Know	0	0.00	1	1.56
Education (Highest Degree Completed)				
High School/GED	7	9.59	0	0.00
Technical/Trade School	8	10.96	0	0.00
Associates	9	12.33	0	0.00
Bachelors	39	53.42	0	0.00
Masters	7	9.59	0	0.00
Doctorate	2	2.74	64	100.00
Other	1	1.37	0	0.00

Table 2

Participants' Geographic Location (N = 136)

United States Region	<u>Law Enforcement</u> (n = 72)		<u>Psychologist</u> (n = 64)	
	Frequency	%	Frequency	%
Northeast	0	0.00	15	23.44
South	61	84.72	19	29.68
Midwest	4	5.55	16	25.00
Northwest	1	1.39	4	6.25
Intermountain West	3	4.17	8	12.50
West	3	4.17	2	3.13

Table 3

Law Enforcement Training (n = 73)

Type of Training	<u>Received</u>		<u>Did Not Receive</u>	
	Frequency	%	Frequency	%
Training at Police Academy				
Domestic Violence	69	94.50	4	5.50
Same Sex Relationships	43	58.90	30	41.10
Class in Technical/Trade School				
Domestic Violence	7	9.60	66	90.40
Same Sex Relationships	2	2.70	71	97.30
Class in College/University				
Domestic Violence	22	30.10	51	69.90
Same Sex Relationships	10	13.70	63	86.30
Training Seminar at Police Department				
Domestic Violence	57	78.10	16	21.90
Same Sex Relationships	34	46.60	39	53.40
Other				
Domestic Violence	18	24.70	55	75.30
Same Sex Relationships	19	26.00	54	74.00

Table 4

Psychologist Training (n = 64)

Type of Training	<u>Received</u>		<u>Did Not Receive</u>	
	Frequency	%	Frequency	%
Class/es in Graduate School				
Domestic Violence	22	34.40	42	65.60
Same Sex Relationships	31	48.40	33	51.60
Practicum Seminar				
Domestic Violence	17	26.60	47	73.40
Same Sex Relationships	27	42.20	37	57.80
Formal Supervision				
Domestic Violence	24	37.50	40	62.50
Same Sex Relationships	33	51.60	31	48.40
Continuing Education				
Domestic Violence	26	40.60	38	59.40
Same Sex Relationships	24	37.50	40	62.50
Conference Seminar				
Domestic Violence	28	43.80	36	56.30
Same Sex Relationships	30	46.90	33	51.60
Other				
Domestic Violence	16	25.00	48	75.00
Same Sex Relationships	15	23.40	49	76.60

Measures

Demographic Questionnaire

The researcher-developed demographic questionnaire (see Appendix B) assessed personal characteristics of the study's participants and variables hypothesized to correlate with perceptions of a hypothetical domestic violence incident, domestic violence myth endorsement, and attitudes toward sexual minorities. The measure consisted of 14 items framed in either open-ended, closed-ended, or Likert scale format. The questionnaire asked

for information regarding participants' age, sex, sexual orientation, ethnicity, religious/spiritual participation, education level, relationship status, geographic region, political ideology, occupation, training in domestic violence, and training in lesbian, gay, and bisexual (LGB) issues.

Interpersonal Violence Vignettes

Two fictitious descriptions of interpersonal violence (IPV) were presented to the participants (see Appendices C & D). Borrowing ideas and rewording questions used in previously constructed IPV scenarios (Harris & Cook, 1994; Seelau, Seelau, & Poorman, 2003), the two stories were identical with the exception of identifying the couple as either heterosexual or same sex. Sex neutral names (i.e., Chris, Jamie) were given to the fictitious characters so that the sex of the perpetrator remained ambiguous. The vignettes included a description of both psychological violence (i.e., name calling; threatening) and physical violence (i.e., shoving; grabbing). At the end of the vignette, participants were asked to identify whether the story they read described a same sex or other sex partnership. This manipulation check yielded information about the participants' understanding of the fictitious couples' sexual orientation.

Thirty-five (54.69%) psychologists and 41 (56.16%) law enforcement personnel were randomly assigned a heterosexual vignette. Of the 32 (43.84%) police officers who received a same sex vignette, 17 (53.13%) officers identified the couple as gay and 11 (34.38%) officers identified the couple as lesbian. Four (12.50%) police officers were randomly assigned a same sex vignette and identified the couple as heterosexual. One police officer (1.37%) was assigned an other sex vignette and identified the couple as

lesbian. Twenty-nine (45.31%) psychologists were randomly assigned the same sex vignette, and 15 (51.72%) psychologists identified the couple as gay and 11 (37.93%) psychologists identified the couple as lesbian. Five (17.2%) psychologists were randomly assigned a same sex vignette and identified the couple as heterosexual. One psychologist was assigned an other sex vignette and identified the couple as lesbian. Overall, the manipulation check revealed that the majority of participants accurately identified the fictitious couples' sexual orientation. To determine the impact of misidentifying the sexual orientation of the couple in the vignette, statistical analyses were computed that both included and excluded the 11 participants who incorrectly identified the couple. Results showed that excluding participants who misidentified the couple's sexual orientation had no impact on the general pattern of results. Further analyses included all 137 participants in order to maximize statistical power.

Perceptions of Interpersonal Violence Incident Questionnaire

This eight-item questionnaire (see Appendix E) was designed to assess participants' perceptions of a hypothetical IPV scenario. The researcher combined questions posed in studies assessing perceptions of domestic violence among California police officers (Younglove, Kerr, & Vitello, 2002) and undergraduate students (Poorman, Seelau, & Seelau, 2003; Seelau et al., 2003). Specifically, the current questionnaire assessed the following dependent variables: (1) seriousness of incident; (2) willingness to define the incident as domestic violence; (3) recommendation to contact police; (4) recommendation to press charges against the perpetrator; (5) perceived believability of the victim; (6) perception of couple's ability to resolve future conflict with nonviolence;

(7) perception that partners share responsibility for violence; and (8) recommendation to seek counseling. Participants were asked to rate their responses on a Likert scale ranging from 1 (*very unlikely; very unbelievable; very incapable*) to 5 (*very likely; very believable; very capable*).

The Domestic Violence Myth Acceptance Scale (DVMAS)

Peters (2003) developed the DVMAS (see Appendix F) to “assess the extent and pervasiveness of domestic violence myths among groups who have personal or professional contact with domestic violence victims” (p. 40). The scale is comprised of 18 domestic violence stereotypes that defensively blame the victim, exonerate the perpetrator, or minimize the seriousness and prevalence of the issue. Using a mixed-sex sample of undergraduate and graduate students, faculty, and staff at a large Northeastern university, Peters examined the reliability and validity of this instrument. The DVMAS showed adequate reliability, with a Chronbach’s coefficient of .88, and moderate to strong correlations of construct validity (.47 to .65) with measures of conservative sex-role attitudes and rape myths. Participants rated their responses on the DVMAS using a Likert scale ranging from 1 (*strongly disagree*) to 7 (*strongly agree*). DVMAS scores were calculated by averaging responses across all 18 items, with higher scores representing greater myth endorsement.

The Heterosexism Scale (HS)

Park (2001) developed the HS (see Appendix G) to measure subtle expressions of bias and prejudice toward sexual minorities. The construct of heterosexism can be defined as an ideological belief system that values heterosexuality as normative and

devalues non-heterosexual expressions of sexuality (Park). Working from this definition, the HS assesses the impact of heterosexism on both the targeted population (i.e., lesbians, gays, and bisexual individuals) as well as individuals who hold negative attitudes toward the targeted group. Additionally, by identifying subtle and indirect expressions of heterosexist bias, the HS has the potential to assess conflicting and ambivalent attitudes toward sexual minorities, especially among individuals who have received training in sexual prejudice. The unitary construct of heterosexism also allows for the use of one scale rather than assessing attitudes toward LGBs separately.

The HS (Park, 2001) assessed participants' agreement with 34 statements using a 6-point Likert scale ranging from 1 (*strongly disagree*) to 6 (*strongly agree*). Each participant's HS score was calculated by averaging responses across all statements, including 17 reverse scored items (i.e., 1, 3, 4, 5, 9, 10, 12, 13, 15, 16, 18, 19, 24, 27, 28, 31, and 34). High scores on the HS represented strong endorsement of heterosexist attitudes.

Park (2001) reported good construct validity between the HS and a series of attitude questionnaires, including attitudes toward ethnic minorities (Modern Racism Scale; McConahay, 1986; $r = .47$), attitudes toward women (Modern Sexism Scale; Swim, Aikin, Hall, & Hunter, 1995; $r = .45$), and authoritarian attitudes (Right-Wing Authoritarianism Scale; Altemeyer, 1981; $r = .59$). With respect to convergent validity, the HS was significantly correlated with the Modern Homophobia Scale-Lesbian subscale (MHS-L; Raja & Stokes, 1998; $r = -.86$) and the Modern Homophobia Scale-Gay subscale (MHS-G; Raja & Stokes; $r = -.88$). Park assessed discriminant validity by

comparing mean HS scores between an LGB-affirming sample and a general college student sample. Results showed that the LGB-affirming sample scored statistically significantly lower than the general college sample.

Park's (2001) analysis of internal consistency showed an acceptable range of inter-item correlation coefficients (.15-.60) for all HS statements as well as a strong coefficient alpha of .96. In a separate study of undergraduate students, Boysen, Vogel, and Madon (2006) reported a similarly robust measure of internal consistency. To assess the influence of social desirability, Park calculated correlation coefficients between individual items of the HS with total and subscales scores of the Balanced Inventory of Desirable Responding (BIDR; Paulhus, 1988). The HS was poorly correlated with the BIDR as evidenced by coefficients ranging from .22 to .29.

Procedure

When reporting for their daily briefing, police officers were given a brief speech (see Appendix H) and handed a recruitment letter (see Appendix A) explaining the purpose of the study and outlining instructions to access survey materials online. Psychologists were sent an identical cover letter in the mail. In the cover letter, participants were given a URL link to a World Wide Web site that contained the study's materials. One week after mailing the initial cover letter, the researcher mailed a reminder postcard to the sampled psychologists (see Appendix I). Additional psychologists and police officers were recruited via e-mail snowballing methods. Once they accessed the online site, participants were asked to read and electronically sign an informed consent document (see Appendix J). Those who provided their electronic

signature were directed to a new page that contained one of two IPV scenarios that differed by sexual orientation of the couple (i.e., same sex, other sex). Police officers and psychologists were randomly selected to receive either the same sex vignette or the other sex vignette. Participants were asked to read the IPV scenario and answer questions about their perceptions of the incident. Afterward, the participants were asked to complete the demographic questionnaire, the HS, and the DVMAS, in that order. The demographic questionnaire, HS, and DVMAS were administered after reading the vignette to avoid priming the participants' response to the IPV scenario. Following their submission of survey materials, participants were presented a debriefing page (see Appendix K).

Statistical Analysis

Hypotheses 1A-1R

A 2 (police officer; psychologist) X 2 (same sex couple; other sex couple) X 2 (male participant; female participant) Multiple Analyses of Variance (MANOVA) test was performed on the following dependent measures: (1) seriousness of IPV scenario; (2) willingness to label the incident as domestic violence; (3) recommendation to contact the police; (4) perception of future conflict to be resolved nonviolently; (5) perception of mutual responsibility of violence; and (6) recommendation for the couple to seek counseling. All hypotheses were tested with $\alpha = .05$.

Hypothesis 2A-2B

A 2 (police officer; psychologist) X 2 (male; female) Analysis of Variance (ANOVA) was calculated using mean HS scores as the dependent measure. The hypothesis was tested with $\alpha = .05$.

Hypothesis 3A-3B

A 2 (police officer; psychologist) X 2 (male; female) ANOVA was calculated using mean DVMAS scores as the dependent measure. The hypothesis was tested with $\alpha = .05$.

Hypothesis 4

A standard regression equation was calculated, with perception of violence severity serving as the criterion variable. The following predictor variables were all entered into the equation in one step: (1) participant occupation (police officers; psychologist), (2) participant sex (female; male), (3) scenario (same sex; other sex), (4) mean HS scores, and (5) mean DVMAS scores. The hypothesis was tested with $\alpha = .05$.

Hypothesis 5

A standard regression equation was calculated, with perception of mutual partner responsibility serving as the criterion variable. The following predictor variables were all entered into the equation in one step: (1) participant occupation (police officers; psychologist), (2) participant sex (female; male), (3) scenario (same sex; other sex), (4) mean HS scores, and (5) mean DVMAS scores. The hypothesis was tested with $\alpha = .05$.

CHAPTER IV

RESULTS

Police Officers' and Psychologists' Perceptions of Interpersonal Violence (IPV)

The first hypothesis stated that female and male police officers and psychologists would show significant differences in their perceptions of same sex IPV (SSIPV) and other sex IPV (OSIPV) in a hypothetical vignette. Specifically, the researcher predicted that female psychologists, as compared to male psychologists and male and female police officers, would (1) perceive violence between same sex partners as the most severe; (2) be most likely to label same sex partner conflict as domestic violence; (3) be most likely to recommend that same sex couples contact law enforcement; (4) be most likely to perceive same sex couples and other sex couples as equally capable of resolving future conflict with nonviolence; (5) be least likely to perceive differences in mutual responsibility between same sex and other sex couples; and (6) be most likely to recommend that same sex couples seek counseling. The researcher also predicted that female and male psychologists and female and male police officers would not show significant differences in their (1) perception of violence severity for other sex partners; (2) labeling a scenario of other sex partner conflict as domestic violence; (3) recommendation that other sex partners contact the police; (4) perception of other sex partners' ability to resolve future conflict with nonviolence; (5) recommendation that

other sex couples seek counseling to resolve future conflict. A three-way Multivariate Analysis of Variance (MANOVA) was used to examine the differences between occupation status (police officer; psychologist), hypothetical vignette assignment (same sex; other sex), and participant sex (female; male) on the six questions included in the *Perceptions of Interpersonal Violence Incident Questionnaire* (i.e., severity of violence; labeling scenario as domestic violence; recommendation to contact police; resolution of future conflict; mutual partner responsibility; and recommendation for counseling).

Multivariate test results revealed no interaction effect between occupation status, hypothetical vignette assignment, and participant sex. All additional interaction effects were also not significant, and there were no main effects for vignette assignment and participant sex (all F s, ns). A significant main effect was found for occupation status ($F(7, 129) = 5.93; p < .001$); however, Levene's F test for homogeneity of variance showed unequal variances across three of the dependent variables (resolution of future differences; recommendation for counseling; perception of mutual partner responsibility). Out of these three variables, only resolution of future differences using nonviolence was significant ($F(7, 129) = 4.42; p < .05$), with psychologists perceiving the couple as less capable of resolving future problems nonviolently ($M = 2.56, SD = 0.96$) than police officers ($M = 2.89, SD = 1.10$; see figure 1). Field (2005, p. 212) noted that Analysis of Variance (ANOVA) is robust to violations of homogeneity of variance when sample sizes are equal; however, when samples are unequal and the variance of the larger sample is greater than the variance of the smaller sample, the F -ratio tends to be conservative and more likely to produce a Type II error (Field). Because the largest subsample in this

analysis (i.e., police officers) also had the largest variance, and the reported effect for future differences was significant at an alpha level below .05, one can assume that the observed difference between police officers and psychologists was greater than expected by chance.

Among the three dependent variables that showed equal variances across groups, police officers and psychologists showed significant differences in their perceptions of violence severity ($F(7, 129) = 5.33; p < .05$) and recommendation for contacting the police ($F(7, 129) = 10.63; p < .01$). As shown in Figure 1, psychologists ($M = 4.20, SD = 0.76$) perceived partner conflict depicted in the two hypothetical vignettes as more severe than law enforcement personnel ($M = 3.75, SD = 0.91$). With respect to contacting the police, psychologists ($M = 2.89, SD = 1.21$) were less likely to recommend that partners in the two vignettes contact the police as compared to law enforcement personnel ($M = 3.70, SD = 1.39$; see Figure 1).

Endorsement of Heterosexist Attitudes and Domestic Violence Myths

The second hypothesis stated that police officers would endorse more heterosexist attitudes than psychologists and predicted that male police officers would endorse the most heterosexist attitudes. A 2 X 2 ANOVA was used to examine the differences between occupation status (law enforcement; psychologist) and gender (female; male) on the endorsement of heterosexist attitudes. ANOVA test results revealed no interaction effect for occupation status and gender ($F(1, 137) = ns$). Significant main effects for occupation status ($F(1, 137) = 62.75, p < .001$) and gender ($F(1, 137) = 5.09, p = .026$) were found; however, Levene's F test for homogeneity of variance showed unequal

variances across the groups. Given that the largest subsamples in this analysis (i.e., police officers and males) also had the largest variances and the observed main effects were significant at an alpha level below .05, one can assume greater confidence in the observed differences than expected by chance. As shown in Figure 2, police officers ($M = 2.99$, $SD = 0.13$) endorsed significantly more heterosexist attitudes than psychologists ($M = 1.56$, $SD = 0.12$), and men ($M = 2.48$, $SD = 0.12$) endorsed significantly more heterosexist attitudes than women ($M = 2.07$, $SD = 0.14$).

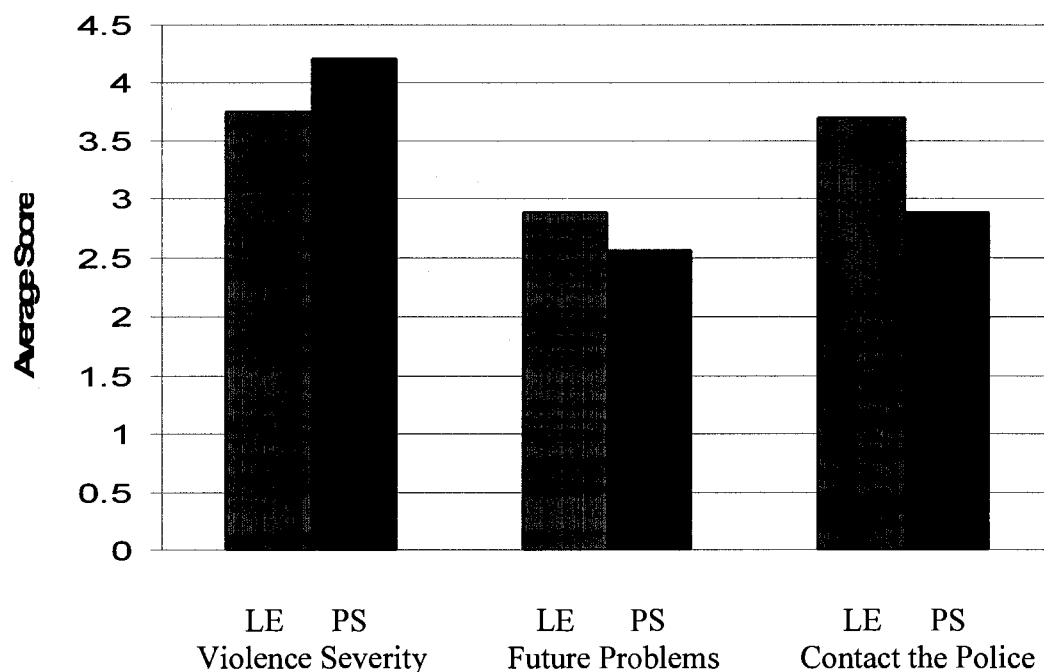


Figure 1. Law Enforcement Officers' (LE) and Psychologists' (PS) Average Perceptions of Violence Severity, Resolution of Future Problems, and Recommendation to Contact the Police.

The third hypothesis stated that police officers would endorse more domestic violence myths than psychologists and predicted that male police officers would endorse the most domestic violence myth acceptance. A 2 X 2 ANOVA examined the differences between occupation status (law enforcement; psychologist) and gender (female; male) on

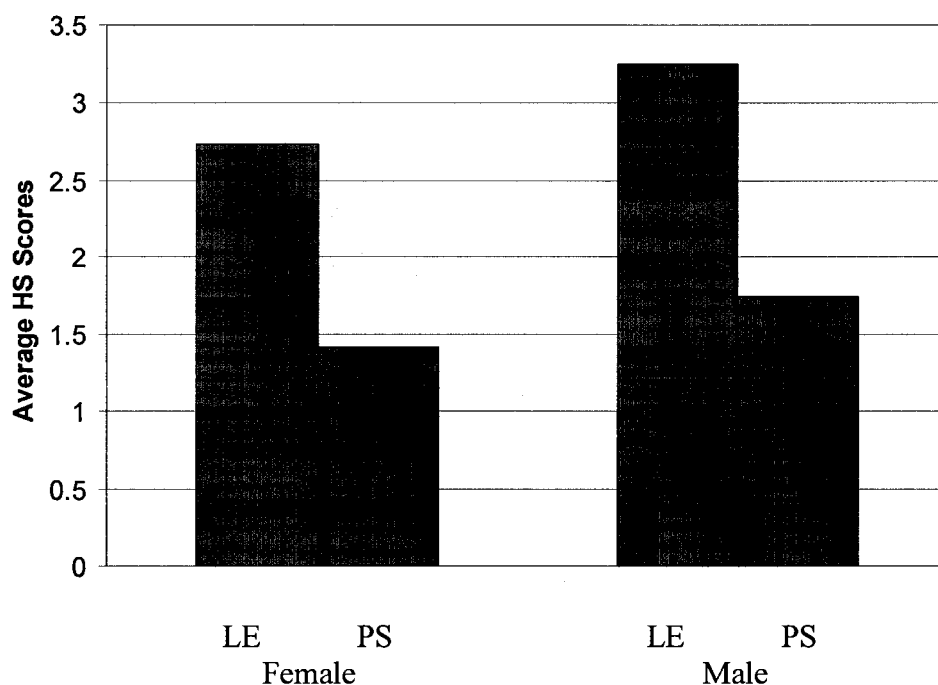


Figure 2. Average Heterosexism Scale (HS) scores for Female and Male Law Enforcement Officers (LE) and Psychologists (PS).

the endorsement of domestic violence myths. Levene's *F* test indicated equal variances across all groups. Univariate test results revealed that the interaction of occupation status and gender had a marginally significant effect on domestic violence myth endorsement

($F(1, 137) = 3.74$ $p = .055$). As shown in Figure 3, male law enforcement officers endorsed the greatest number of domestic violence myths ($M = 3.07$, $SD = 0.86$), while female psychologists endorsed the least number of domestic violence myths ($M = 1.86$, $SD = 0.56$). ANOVA results also found a significant main effect for occupation status ($F(1, 137) = 25.65$ $p < .001$) and gender ($F(1, 137) = 11.56$, $p < .01$). In general, police

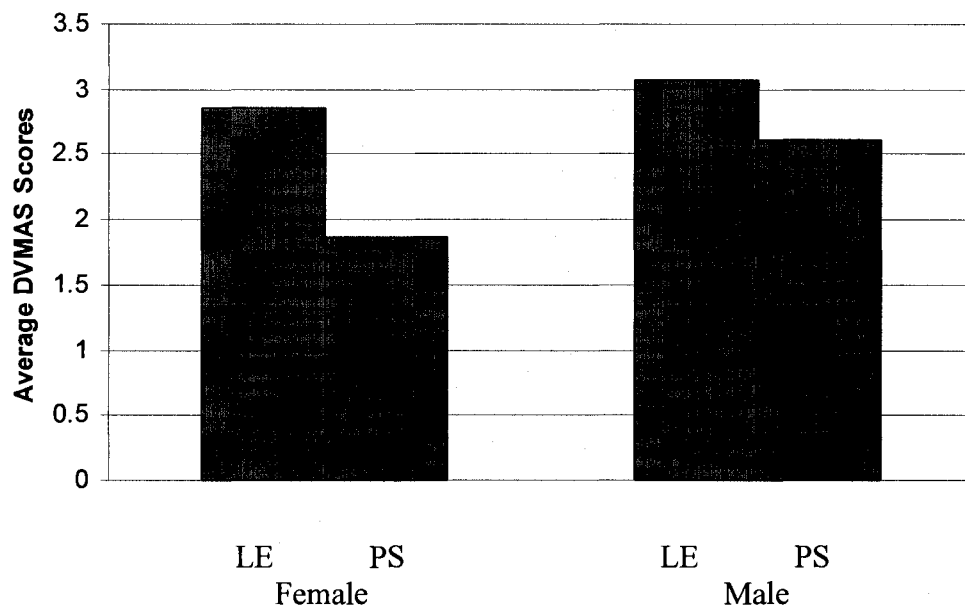


Figure 3. Average Endorsement of Domestic Violence Myth Acceptance Scale (DVMAS) scores for Female and Male Law Enforcement Officers (LE) and Psychologists (PS).

officers ($M = 3.03$, $SD = .82$) endorsed significantly more domestic violence myths than psychologists ($M = 2.12$, $SD = 0.71$), and men ($M = 2.95$, $SD = 0.90$) endorsed significantly more domestic violence myths than women ($M = 2.12$, $SD = 0.74$).

Predictors of Police Officers' and Psychologists' Perceptions of Violence Severity and Mutual Partner Responsibility

Using regression analysis, factors predicting perceptions of violence severity and mutual partner responsibility in a hypothetical IPV scenario were examined. The researcher hypothesized that participants' occupation, sex, assignment of a same sex or other sex vignette, and their average scores on measures of heterosexist attitudes and domestic violence myth acceptance would significantly predict participants' perceptions of violence severity and partner responsibility. Using an alpha level of .05, the aforementioned variables (i.e., occupation status, participant sex, vignette assignment, endorsement of heterosexist attitudes, and endorsement of domestic violence myth acceptance) were entered into two separate regression equations to determine whether they significantly accounted for differences in the perception of violence severity and mutual partner responsibility.

The standard regression for violence severity was significant ($F(5, 131) = 4.95$, $p < .001$). The model accounted for 15.90% of variance in participants' scores, and domestic violence myth acceptance significantly and negatively predicted participants' perceptions of violence severity (see Table 5 for regression coefficient values). Participants who endorsed more domestic violence myths perceived the IPV scenario as less severe.

The standard regression for mutual partner responsibility was also significant ($F(5, 131) = 4.40, p = .001$). The model accounted for 14.40% of variance in participants' scores, and both occupation status and domestic violence myth acceptance significantly and positively predicted participants' perceptions of partner responsibility (see Table 6 for regression coefficient values). Participants who endorsed more domestic violence myths perceived partners as sharing responsibility for the IPV incident, and being a psychologist was predictive of perceiving partners as mutually responsible.

Table 5

Predictors of Police Officers' and Psychologists' Perceptions of Violence Severity

Variable	B	SE B	β	<i>t</i>
Occupation	0.21	0.60	0.12	1.10
Participant Sex	-0.14	0.17	-0.08	-0.79
Vignette Assignment	0.16	0.15	0.09	1.09
Heterosexism	0.06	0.08	0.09	0.80
Domestic Violence Myth Acceptance	-0.31	0.10	-0.32	-3.12***

*** $p = .002$.

Table 6

Predictors of Police Officers' and Psychologists' Perceptions of Partner Responsibility

Variable	B	SE B	β	<i>t</i>
Occupation	0.65	0.30	0.25	2.19**
Participant Sex	0.09	0.26	0.03	0.33
Vignette Assignment	0.22	0.22	0.09	1.01
Heterosexism	0.01	0.12	0.01	0.08
Domestic Violence Myth Acceptance	0.60	0.15	0.41	4.01***

** $p < .05$. *** $p < .001$.

CHAPTER V

DISCUSSION

The current study compared psychologists' and law enforcement personnel's perceptions of same sex and other sex interpersonal violence (IPV). A hypothetical description of an IPV incident was used to assess whether occupation status, participant sex, and a couple's sexual orientation influence psychologists' and police officers' perceptions of IPV. Female and male psychologists' and police officers' endorsement of heterosexist attitudes and domestic violence myth acceptance were also assessed to determine whether occupation status and sex were differentially associated with heterosexism and myth acceptance. Finally, all of the aforementioned factors (i.e., occupation status, sex, hypothetical IPV scenario, heterosexist attitudes, and domestic violence myth acceptance) were examined as potential predictors of the variance associated with psychologists' and police officers' perceptions of IPV severity and mutual partner responsibility. The study's findings suggested that psychologists and police officers differed in their perceptions of IPV severity and the couple's ability to resolve future problems nonviolently, and they differed in their recommendation for the couple to contact police. Psychologists and police officers, as well as females and males, were shown to differ in their endorsement of heterosexist attitudes and domestic violence myth acceptance. Endorsement of domestic violence myths was shown to partially explain the variance in psychologists' and police officers' perceptions of IPV severity,

and domestic violence myth acceptance and occupation status partially explained the variance in perceptions of mutual partner responsibility.

Perceptions of Same Sex and Other Sex IPV

Psychologists and law enforcement officers, regardless of sex, did not differ in their perceptions of other sex IPV, as predicted by the first hypothesis. For an IPV incident involving an other sex couple, police officers and psychologists did not differ in their perceptions of (1) incident severity; (2) willingness to label the incident as domestic violence; (3) recommendation to contact the police; (4) perception of future conflict to be resolved nonviolently; (5) perception of mutual responsibility of violence; and (6) recommendation for the couple to seek counseling. Contrary to the researcher's predictions in the first hypothesis, psychologists and law enforcement personnel did not differ from one another in their perceptions of same sex IPV, and there was an absence of sex differences between the two occupations. These findings suggested that psychologists' and police officers' attitudes toward couples in conflict were not biased by knowledge of the couple's sexual orientation or their own sex.

Such results supported earlier findings that suggested both counselors (Blasko, Winek, & Bieschke, 2007; Potoczniak, 2005; Renzetti, 1989) and law enforcement officers (Younglove et al., 2002) respond similarly to descriptions of other sex and same sex IPV. The majority of police officers in this study were male (79%), were living in the South (61%), and identified with a form of political conservatism. Herek (2000, 2003a) noted that all three of the aforementioned characteristics have shown positive associations with sexual prejudice. Comparatively, psychologist respondents were more

evenly distributed between the South, Midwest, and Northeast, and greater than 50% of psychologists identified with a form of political liberalism. As compared to the police sample, surveyed psychologists were predominantly female (66%). Given police officers' and psychologists' noted demographic differences, the absence of significant differences in their appraisals of same sex and other sex IPV scenarios suggested that personal characteristics typically associated with greater sexual prejudice and negative attitudes toward IPV victims may not have biased these respondents' perceptions.

Assuming that training in IPV and same sex issues translates into less biased perceptions of same sex IPV (Younglove et al., 2002; Wise & Bowman, 1997), different training experiences among sampled police and psychologists did not explain the absence of significantly different same sex IPV response patterns between these groups. The majority (i.e., greater than 50%) of surveyed psychologists reported that they had not received training in either same sex or IPV issues. In contrast, over 75% of police officers reported having received IPV training at the police academy and at their respective police departments. A little more than 40% of surveyed officers reported that they had not received training in same sex issues at the police academy, and greater than 50% of officers reported not having received same sex training in other venues. Psychologists and police officers appeared to receive comparable training around the unique concerns of same sex couples, but police officers reported receiving much greater training about IPV. Although police may have received more training in how to respond to reports of IPV, this training did not appear to predispose them to perceive same sex and other sex

IPV incidents significantly different from professionals with less training (i.e., psychologists).

The lack of differences between police officers' and psychologists' perceptions of hypothetical same sex and other sex IPV may be viewed optimistically by same sex IPV victims as well as those who are working to increase the visibility of same sex IPV. Past research has suggested that same sex IPV victims have been less likely to contact the police, compared to mental health professionals, due to perceptions that the police were unhelpful, heterosexist, and believed in mutual battering (Girschick; 2002; Renzetti, 1989). The current results suggested that individuals who first encounter IPV victims (i.e., police), as well as those who intervene at later stages (i.e., psychologists), understand that IPV occurs in all forms of relationships and do not appear to base perceptions of IPV on couples' sexual orientation. Although perceptions of hypothetical descriptions may not accurately reflect individuals' responses to actual IPV incidents, this study's findings suggested that encouraging same sex IPV victims to contact law enforcement may result in better than expected responses.

While psychologists and police officers, as well as females and males, showed no significant differences in their perceptions of same sex and other sex IPV, they did demonstrate significantly different perceptions of IPV in general. Irrespective of the hypothetical couple's sexual orientation, psychologists perceived the IPV incidents as more severe than law enforcement personnel, psychologists perceived the couple as less capable of resolving future conflict nonviolently, and a significantly greater number of law enforcement personnel recommended the couple contact the police than did

psychologists. The tendency for law enforcement personnel to recommend contacting the police at a greater frequency than psychologists may have reflected their reported level of training around IPV concerns, which exceeded the training reported by psychologists. Not only did police officers report receiving more IPV training than psychologists, but they were likely more familiar with laws that govern the definition of IPV and laws that regulate how police respond to IPV. Police officers may have identified the hypothetical IPV scenario as meeting the legal definition of domestic violence and recommended the couple contact the police to intervene and offer victim assistance.

In contrast, psychologists may have feared that contacting the police would unnecessarily complicate the couple's lives. After contacting the police, the couple would be forced to interact with a confusing and bureaucratic legal system (Bennett, Goodman, & Dutton, 1999), which could undermine their ability to address their relational difficulties. Psychologists may also have been less likely to recommend contacting law enforcement due to a lack of familiarity with IPV laws and perceived likelihood of police responsiveness. If psychologists perceived the police in a manner similar to that which has been reported by IPV victims (i.e., misogynistic, heterosexist, blaming; Girshick, 2002; Renzetti, 1989; Viano, 1996), then psychologists may have been less willing to recommend the couple seek police assistance. This pattern of response reveals psychologists' bias to perceive law enforcement personnel as prejudicial and potentially harmful to IPV victims. Given the aforementioned absence of differences between police officers' and psychologists' perceptions of same sex and other sex IPV, this bias may be unfounded.

With respect to differences in perceived severity and capability of resolving future problems nonviolently, police officers have likely had exposure to a broader range of IPV victims and perpetrators due to the nature of their work. Psychologists, in contrast, may have had much less exposure to IPV. Some psychologists may have seen few, if any, victims or perpetrators of IPV, while others may have done extensive work with repeated IPV offenders or severely traumatized victims. Being in the position of first responders, law enforcement personnel have undoubtedly made decisions about responding to IPV incidents based on the perceived severity of the situation when they arrived on scene. The choice of response was likely dependent upon their independent observations and the couple's self-report. The description of the hypothetical IPV incident in this study included several examples of psychological and emotional violence and two examples of physical violence (i.e., shoving and grabbing). Although the description of force included a reference to physical bruising, there was no mention of bodily injury severe enough to warrant emergency care. The description also did not state that a weapon was used during the conflict. It seems reasonable to assume that, compared to psychologists, police officers were more likely to encounter victims who have been assaulted with a weapon and/or physical force strong enough to maim or disfigure. The police participants in this study may not have perceived the victim's physical injuries as severe in comparison to their own, real-world experiences with IPV victims. Given the wording of domestic violence legislation, police would unlikely have arrested or removed a perpetrator from a residence on the basis of minor physical assault and reported emotional violence (Trujillo & Ross, 2008).

An absence of information may have played an important role in shaping police officers' perceptions of future violence. Compared to psychologists, police officers perceived the couple as equally capable of resolving future conflict with nonviolence as violence. Officers may have believed that they did not have enough information to make a future prediction. Trujillo and Ross (2008) found that degree of physical violence did not significantly predict police officers' perceptions of a couple's future risk for violence, whereas victims' expression of fear, the escalation of violence, and a history of violent incidents significantly predicted officers' perceptions of a future assault. Trujillo and Ross reported that police officers were more likely to rate future violence as "likely or almost certain" (p. 465), if they were responding to the first violent incident and if the victim was extremely fearful. The absence of information in the current study regarding couples' relational history and victims' level of fear may have compromised police respondents' ability to predict the likelihood of a future offense. Rather than under- or overestimate the potential for future violence, officers may have chosen to endorse a more neutral assessment of the couple's future conflict resolution strategies.

Psychologists, in contrast, may have expressed a stronger reaction than law enforcement to the presence of emotional violence. Psychological violence has been cited as more prevalent than physical violence (Hennings & Klesges, 2003). Follingstad, Rutledge, Berg, Hause, and Polek, (1990) found that 72% of participants reported experiencing four or more types of emotional abuse and rated this form of violence as more destructive than physical abuse. The frequency with which perpetrators employed psychological violence suggested that perpetrators repeatedly engaged in this behavior

and such behaviors were difficult to extinguish. Psychologists' likely possessed a greater understanding of how emotional violence negatively impacts individuals' psychological and relational well-being. Among women seeking legal assistance for domestic violence, Dunnett, Goodman, and Bennett (2001) reported that psychological abuse more accurately predicted the presence of posttraumatic stress disorder (PTSD) symptoms than did physical violence, and Arias and Pape (2001) found that psychological abuse significantly predicted battered women's intentions to dissolve their partnership. Consequently, psychologists may have perceived the combination of emotional and physical violence in the hypothetical vignette as more severe than law enforcement personnel. Their perception of violence severity and understanding of human behavior may have negatively shaped psychologists' perceptions of future conflict. A repeated finding in behavioral research has been that future behavior is often best predicted by past behavior (Azjen, 1991; Oullette & Wood, 1998). Because the hypothetical IPV couple was described as using psychological violence, psychologists, as compared to police officers, may have seen this behavior as predictive of the couple's future conflict resolution strategies and perceived the couple as less capable of using nonviolence.

Endorsement of Heterosexist Attitudes and Domestic Violence Myth Acceptance

Although participants' sex was not significantly related to their perceptions of IPV, women and men demonstrated significant differences in their endorsement of heterosexist attitudes and domestic violence myth acceptance. These sex differences, in combination with observed differences between psychologists and law enforcement personnel, provided support for the researcher's second and third hypotheses. As

predicted, police officers reported more heterosexist attitudes and stronger agreement with domestic violence myths than psychologists. Heterosexist attitudes and domestic violence myth acceptance were highest among male police officers and lowest among female psychologists. These results appeared consistent with general perceptions of police culture as homophobic (Aulivola, 2004; Connell, 2005; Younglove et al., 2002) and supported previously noted sex differences among officers' perceptions of same sex individuals (Bernstein & Kostelac, 2002; Girshick, 2002; Younglove et al.). Police officers' stronger endorsement of domestic violence myths also corresponded with their negative perceptions of IPV victims (i.e., perceiving violence as justifiable; holding the victim responsible; Connolly, Huzurbazar, & Routh-McGee, 2000; Heany, 2005; Lavoie, Jacob, Hardy, & Martin, 1989; Saunders, 1995). Moreover, the majority of law enforcement personnel in this study identified as both male (79%) and exclusively heterosexual (93%). Both of these characteristics have shown strong associations with sexual prejudice (Herek, 2000; Kite & Whitley, 1998).

In contrast, the psychologist sample included a greater number of women (65%) and fewer individuals who identified as exclusively heterosexual (64%). The sample's endorsement of fewer heterosexist attitudes as compared to police officers may have reflected differences in the two sample's demographic characteristics and training experiences. Attention to the unique concerns of same sex individuals within the psychological community has increased over the years, as evidenced by the publication of *Guidelines for Psychotherapy with Lesbian, Gay, and Bisexual Clients* (APA, 2000). Moreover, approximately half of the current sample (52%) reported receiving formal

supervision around same sex concerns, and nearly half (48%) indicated that they had taken a class in graduate school that attended to same sex relationships. These findings may reflect a cohort effect, whereby psychologists who recently completed their doctorate education may have received greater exposure to same sex issues during graduate training. The study's results also supported earlier research by Murphy (2002), who found that a similar number of psychologists (46%) received same sex education as part of formalized supervision training, but less than a quarter of that sample received training as part of their graduate coursework. Given the knowledge that same sex individuals tended to utilize therapy at higher rates than heterosexuals (Bieschke, McClanahan, Tozer, Grzegorek, & Park, 2001; Liddle, 1996) and were more reluctant to seek assistance from law enforcement (Island & Letellier, 1991; Kuehnle & Sullivan, 2003; Renzetti, 1989), psychologists were likely to have had greater contact with same sex individuals than police officers. The contact hypothesis suggested that psychologists' increased exposure to same sex individuals would reduce prejudicial attitudes toward them (Herek, 2000; 2003a; 2003b).

Although the current study's results indicated that psychologists possessed less sexual prejudice than law enforcement personnel, these findings may be biased by psychologists' presentation of a socially, and occupationally, desirable response. Several authors have noted that psychologists tend to endorse more affirming attitudes toward sexual minorities than the general public (Barrett & McWhirter, 2002; Bieschke et al.), especially when responding to anonymous surveys. This finding may also have explained psychologists' endorsement of fewer domestic violence myths as compared to police

officers. The tendency to respond in a socially desirable manner may have extended to IPV victims as well as sexual minorities.

The endorsement of domestic violence myths has been an under researched phenomenon. The majority of studies examining perceptions of domestic violence victims and perpetrators have involved undergraduate students (Esqueda & Harrison, 2005; Harrison & Esqueda, 1999; Peters, 2003; Pierce & Harris, 1993). To date, no study of domestic violence myths has reported the perceptions of psychologists or any other mental health professional. In the current study, psychologists reported receiving less domestic violence training (the most frequently endorsed training venue was a conference seminar, 43%) than law enforcement personnel (the most frequently endorsed training venue was the police academy, 94%), but psychologists endorsed significantly more favorable attitudes toward IPV victims. Thus, IPV training did not appear to explain myth endorsement. The majority of domestic violence myths were rooted in misogynistic and heterosexist values, and previous research has suggested that agreement with traditional sex roles is positively related to heterosexist attitudes (Herek, 2000; Kite & Whitley, 1999). Although psychologists' attitudes toward women and men were not directly assessed, their lower endorsement of heterosexist attitudes suggested that they would be less likely to agree with traditional sex roles. Having a value system that is less prejudicial toward sexual minorities and women may have positioned psychologists to be less accepting of domestic violence myths.

Predictors of Violence Severity and Mutual Partner Responsibility

The fourth and fifth hypotheses proposed an equation that would significantly explain the variance in participants' perceptions of violence severity and mutual partner responsibility. The two hypotheses were supported, but only two of the predictors (i.e., domestic violence myth acceptance and occupation status) accounted for a statistically significant portion of the variance in participants' scores when controlling for the other predictors. Domestic violence myth acceptance significantly predicted psychologists' and law enforcement personnel's perceptions of violence severity and mutual partner responsibility. Greater domestic violence myth endorsement was associated with perceiving the hypothetical IPV scenario as less severe. Acceptance of IPV myths helped to minimize the perception of perpetrators' responsibility and the negative impact of physical and psychological aggression directed toward victims (Peters, 2003). Strong endorsement of IPV myths supported the idea that domestic violence is not a serious problem. Consequently, respondents' who endorsed a higher number of domestic violence myths were expected to interpret a hypothetical IPV incident as less severe than those who endorsed fewer myths.

Stronger endorsement of domestic violence myths was also associated with perceiving both partners as responsible for the reported violence. This finding appeared consistent with previous reports about mutual battering. Harris and Esqueda (1999) noted that perceiving female victims as responsible for the violence perpetrated against them is a common heterosexual IPV myth, and partners in same sex relationships have expressed difficulty identifying the aggressor and victim in their own relationships (Stanley,

Bartholomew, Taylor, Oram, & Landolt, 2006). As previously noted, respondents who endorsed a greater number of domestic violence myths were less likely to perceive the IPV scenario as severe. One means for minimizing the severity of a violent exchange has been to perceive a partner's use of psychological and physical aggression as a proportionate response to another individual's provocation. By perceiving an aggressive response as provoked, both partners may be seen as sharing responsibility for the final outcome. Past research has shown that male respondents, as compared to female respondents, were more likely to see female victims as having provoked their male partner to aggress against them (Esqueda & Harrison, 2005; Pierce & Harris, 1993). Mitchell, Hirschman, and Hall (1999) found that respondents perceived gay victims as more responsible for the violence they received than the male who perpetrated the aggressive actions. Given that 58% of the current sample identified as male and male respondents' endorsed a greater number of domestic violence myths than female respondents, the ability of domestic violence myth acceptance to predict perceptions of partner responsibility may have been driven by differences in respondents' sex.

Beyond domestic violence myth acceptance, the second significant predictor of mutual partner responsibility was respondents' occupation. Being a psychologist significantly predicted the perception that partners were mutually responsible for the IPV incident. This finding appeared to contradict the previously hypothesized relationship between police officers' and psychologists' perceptions of mutual partner responsibility. The researcher predicted that a greater number of police officers would perceive same sex couples as sharing responsibility for IPV. As reported earlier, law enforcement

personnel and psychologists did not show significant differences in their perceptions of shared partner responsibility for either same sex or other sex couples. However, an examination of mean group differences revealed that psychologists perceived partners as sharing responsibility for violence only slightly more than police officers. Furthermore, male psychologists were the most likely to see partners as sharing responsibility, followed by female police officers, then male police officers, and lastly, female psychologists.

The finding that male psychologists' perceptions of mutual responsibility more closely matched those of female, rather than male, police officers was surprising and contradicted previous literature reports. Pierce and Harris (1993) and Esqueda and Harrison (2005) found that male, more than female, participants perceived an IPV victim as sharing responsibility for relational violence when the victim was attributed with having instigated the exchange. Blasko, Winek, and Bieschke (2007) reported that marriage and family therapists perceived same sex partners as equally responsible for relational violence but perceived males as more responsible for other sex violence. This study's unexpected finding may have reflected the limiting effect of a small sample. Female police officers and male psychologists comprised the two smallest subsamples, and the variance in their scores largely determined the observed difference between psychologists' and police officers' perceptions of mutual partner responsibility. Consequently, the smallest group of participants appeared to have shaped the direction of association between occupation status and perceptions of shared responsibility. Because this finding contradicted earlier literature reports, a larger sampling of male psychologists

and female police officers is needed to clarify the discrepancy between observed and predicted results.

Implications and Limitations

Training and Practice Implications

Police officers and psychologists did not show significant differences in their perceptions of same sex and other sex IPV; however, additional findings suggested that both groups may benefit from receiving further education about IPV and the negative effects of heterosexism. Police officers' responses to the domestic violence myth acceptance scale suggested that future IPV trainings need to include factual information that exposes the misogyny and heterosexism embedded within domestic violence myths. Police trainings also need to educate officers about similarities and differences between same sex and other sex IPV. Given that law enforcement personnel endorsed the strongest heterosexist attitudes, police need to be informed about the ways in which heterosexism biases their responsiveness to IPV victims and undermines victims' efforts to seek legal assistance. Police may be more open to receiving this information if presented by individuals who show respect for officers' "experience-based conception of domestic violence" (Heany, 2005, p. 223) and who understand the psychological stress associated with being a first responder. Additionally, police leadership needs to assume responsibility for establishing a climate that is intolerant to sexual prejudice and rewards members who make positive contributions toward this goal. Reinforcing the expression of attitudes that are neither heterosexist nor victim blaming assists law enforcement personnel in responding to IPV incidents with greater sensitivity and discernment.

Although psychologists endorsed fewer domestic violence myths and heterosexist attitudes than police officers, their perceptions of same sex and other sex IPV were not bias free. The nationally reported prevalence of IPV (1.3 million women and 850,000 men are physically assaulted each year; Tjaden & Thoennes, 2000) increases the likelihood that most practicing psychologists will encounter an IPV victim or perpetrator during their careers. Psychologists' survey responses and self-reported IPV training experiences suggested that they are not adequately prepared for this eventuality. Graduate training programs need to educate students about IPV and assist them in recognizing how contextual variables negatively shape perceptions of victims and perpetrators. Exposure to an inclusive model of IPV, which validates the reality of same sex violence, needs to be an integral part of all graduate students' diversity training. Additionally, regular monitoring of individuals' biases (e.g., heterosexist, androcentric) through consultation and professional diversity training will assist practitioners in responding to IPV victims in an affirming, and less marginalizing, manner.

Finally, psychologists are frequently in the position of helping IPV victims navigate the legal system. Many victims will present to psychologists after an encounter with law enforcement personnel, and they may have experienced the system to be discriminatory and unhelpful. Consequently, psychologists need to be affirming, attentive to the creation of a safe working alliance, and prepared to act as victim advocates. Being a victim advocate requires psychologists to have an understanding of the legal system and knowledge of how to assist victims in obtaining what they need from the system.

Psychologists would also do well to check for personal biases regarding law enforcement

personnel. Perceiving law enforcement as sexually prejudiced may hinder psychologists from recommending that IPV victims contact police. While psychologists must consider how IPV victims could be harmed by interactions with prejudicial members of the legal system, failure to acknowledge that many police officers do not discriminate against IPV victims may create undue harm. Many victims need the assistance of law enforcement personnel to protect them from further victimization. Psychologists who show reticence in referring IPV victims to local law enforcement personnel may unknowingly prevent victims from receiving available aid. Psychologists may be better equipped to make these recommendations and assume the role of advocate by establishing positive relationships with local law enforcement in their communities. Psychologists should be encouraged to make personal connections with law enforcement personnel and identify same sex allies in local police organizations. Having personal knowledge of law enforcement allies may assist psychologists in confidently referring victims to *safe* individuals in their communities.

Research Implications and Study Limitations

The current study represented an effort to obtain a nationally representative sample of psychologists and police officers. Difficulties with recruitment required the use of snowballing strategies, which resulted in a sample that was less representative than originally intended. The majority of police officers and psychologists identified as Caucasian, heterosexual, and living in Texas. Additional research is needed to determine whether the responses given by participants in this study reflect the attitudes of professionals from varying ethnic backgrounds, sexual orientations, and geographic

regions. Moreover, the failure to obtain an equal number of female and male psychologists and police officers resulted in cautionary interpretations of two statistical tests (i.e., Multivariate Analysis of Variance; MANOVA, Univariate Analysis of Variance; ANOVA). Some authors have suggested each ANOVA cell have at least as many cases as there are dependent variables, while other authors recommend having at least 20 cases per cell to achieve minimum statistical power (Meyers, Gamst, & Guarino, 2006). The current sample contained fewer numbers of male psychologists and female police officers. In the future, researchers may want to tailor their recruitment efforts so that underrepresented subgroups of psychologists and police officers are better represented and the power of the study's statistical tests is increased.

Accessing law enforcement personnel proved to be a challenging endeavor. The difficulties this researcher experienced gaining entry into police organizations mirrors Heany's (2005) observation that law enforcement personnel are frequently wary of outsiders. The sensitive nature of this study's subject matter (i.e., attitudes toward sexual minorities and victims of partner violence) also may have been an obstacle to officers' willingness to participate. Several police officers who began the study discontinued their participation prior to answering questions about domestic violence myth acceptance ($n = 1$) and heterosexism ($n = 6$). Future efforts to understand law enforcement personnel's attitudes about IPV and sexual minorities may be aided by engaging in relationship building strategies. Talking one-on-one with law enforcement personnel about their general experiences, successes, and frustrations in policing IPV may help officers' feel more comfortable responding to survey questions about sensitive subject matter.

Generally speaking, internet survey research has presented a number of methodological limitations. The benefit of preserving respondents' anonymity came at the expense of not being certain that their responses were genuine. Participants had the choice to accurately represent themselves, as best they were aware, or present an image they deemed socially desirable. When questioning individuals about sensitive material (e.g., attitudes toward sexual minorities), there was the risk that respondents would feel uncomfortable sharing their true reactions. As stated earlier, several police officers stopped participating when asked to respond to questions about domestic violence myths and heterosexism. A few psychologists also discontinued their participation prior to answering questions about domestic violence myth acceptance ($n = 1$) and heterosexism ($n = 3$). The researcher cannot know why some individuals chose to prematurely terminate their participation or why some individuals chose not to participate.

Inevitably, there were differences between responders and non-responders. There may have been a self-selection bias among psychologists and police officers who chose to complete the survey. These individuals may have been more sympathetic to the concerns of IPV victims, and same sex victims, in particular. The selected methodology did not provide a means for clarifying individuals' responses and decision making processes. Consequently, the findings may not be generalizable to a larger population of police officers and psychologists.

An alternative approach, and direction for future research, would be the use of qualitative interview methods. Interviewing psychologists and police officers directly may result in a more nuanced and detailed understanding of their attitudes toward sexual

minorities and same sex and other sex IPV. An interview process would also provide opportunities to probe participants' about their unique experiences with IPV victims and sexual minorities, an area not examined in the current study.

Rather than directly asking participants about their experiences with same sex and other sex IPV, the researcher used a hypothetical vignette to ascertain psychologists' and police officers' perceptions of IPV. Vignettes are helpful research tools when ethical and realistic constraints prevent researchers from manipulating the variables under investigation (i.e., relational violence; sexual orientation; Finch, 1987) and when topics being investigated involve sensitive material (Hughes & Huby, 2002). Participants' responses to vignettes, however, may not have reflected their responses to real-world events. Because participants' responses to the two IPV vignettes cannot accurately predict their perceptions of an actual same sex or other sex IPV scenario, the generalizability of the reported findings was limited.

Another aspect of the vignettes that limited their generalizability was the description of the IPV scenario. The two hypothetical vignettes were written to include examples of psychological and physical violence. Although often perceived as less severe, psychological violence has been shown to frequently proceed, and occur in conjunction with, physical assault (Hennings & Klesges, 2003; Murphy & O'Leary, 1989; Stets, 1990). The description of physical violence included examples of shoving and bruising to avoid appearing obviously severe. Undoubtedly, participants would have responded differently to the vignettes if they had been written to exclude examples of psychological violence or contained more severe descriptions of physical assault (e.g., an

injury resulting in bleeding or requiring immediate medical attention). Moreover, the study included only one example of other sex IPV and one example of same sex IPV. The hypothetical partners' names were gender neutral and their sex was not identified, which allowed each participant to label the sex of the perpetrator. The inclusion of only two vignettes helped simplify the study's methodology, but did not allow the researcher to compare participants' perceptions of male and female perpetrators. Future researchers may want to clarify psychologists' and police officers' perceptions of male and female same sex and other sex perpetrators.

The proposed means for assessing how participants identified the sex of the perpetrator was a manipulation check. In the current study, a manipulation check was utilized to assess whether participants accurately identified the hypothetical couple's sexual orientation. The manipulation check allowed participants to identify the couple as heterosexual, lesbian, or gay. The lesbian and gay response options were used to distinguish whether participants' perceived the same sex perpetrator as female or male. No response option was given for assessing the sex of the other sex perpetrator. To ensure that each participant responded to the manipulation check, participants were not allowed to continue the study until they answered this question. This methodological consideration may have unwittingly reduced the overall sample size. Three police officers and 11 psychologists chose not to continue their participation after reading the vignette. Although the researcher cannot know what prompted these participants to discontinue, some individuals may not have known how to answer the manipulation check. Individuals randomly assigned to the same sex IPV vignette may have been unwilling to

choose the identity of the perpetrator and were forced to terminate their participation. Some or all of these participants may have moved forward in the study had they been given the choice to continue. Participant attrition may have been avoided by allowing participants to identify the same sex couple as homosexual rather than forcing them to choose gay or lesbian. Although some information would have been lost (i.e., perceived sex of the perpetrator), the researcher may have gained additional participants and increased the power of the results.

Concluding Summary

Victims of IPV have faced many challenges. Their efforts to secure legal and social services have frequently been impeded by the biases of those who hold positions of power. Myths about victim culpability, beliefs in justified violence, and institutionalized heterosexism have worked together to marginalize and silence same sex and other sex victims. Police officers and psychologists have not been made immune to the social forces that promote false ideas about IPV and encourage sexual prejudice, and their endorsement of domestic violence myths and heterosexist attitudes can profoundly shape victims' ability to receive necessary recognition and aid.

The current study illustrated that police officers and psychologists hold biased attitudes toward IPV victims and sexual minorities. Their endorsement of IPV myths was shown to predict their perceptions of an IPV incident, including how severe the incident appeared and whether the victim was seen as sharing responsibility for the violence. Fortunately, police officers' and psychologists' biased attitudes did not predispose them to perceive same sex IPV differently than other sex IPV. This finding highlighted the

potential for greater numbers of first responders and mental health professionals to recognize IPV as a legitimate experience shared by same sex and other sex couples alike. Taken collectively, the study's findings revealed that additional work is needed to educate police and psychologists about IPV and the ways in which biased attitudes toward victims and sexual minorities undermine their ability to effectively meet the needs of couples affected by relational violence.

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APPENDIX A

Recruitment Letter

Hello. My name is Adrienne Paulson. I am a doctoral student in the counseling psychology program at Texas Woman's University. Under the supervision of Linda Rubin, Ph.D., I have designed a research study to investigate and compare law enforcement personnel and psychologists' attitudes about intimate partner violence and diverse romantic relationships.

My study is comprised of a series of anonymous questionnaires that are posted on the Internet. Your answers to all online survey materials are completely anonymous; however, there is a potential loss of confidential information in all email, downloading, and internet transactions. I am currently recruiting law enforcement personnel and psychologists to voluntarily participate in this study. Participation should take no more than 25 minutes.

This study has been reviewed by the Institutional Review Board of Texas Woman's University and has been approved. For detailed information regarding the study or to participate, please follow the link provided below:

<https://www.psychdata.com/s.asp?SID=123805>

Thank you. Please let me know if you have any questions.

Adrienne A. Paulson, M.A.
Email: xxx@twu.edu
Phone: xxx-xxxx

APPENDIX B
Demographic Questionnaire

Please provide some basic demographic information by responding to the items below.

1. Age _____

2. Gender (check appropriate one)

Male _____ Female _____

3. Please indicate your ethnicity (select all that apply) _____

- (a) African American
- (b) Asian American
- (c) Native Hawaiian/Pacific Islander
- (d) Caucasian
- (e) Hispanic/Latina(o)
- (f) Native American/Alaskan Native
- (g) Other (Please specify) _____

4. Generally, I consider myself to be: (select one) _____

- (a) Exclusively heterosexual
- (b) Primarily heterosexual
- (c) More heterosexual than homosexual
- (d) Bisexual
- (e) More homosexual than heterosexual
- (f) Primarily homosexual
- (g) Exclusively homosexual
- (h) Don't know

5. Please indicate your current relationship status: (select one) _____

- (a) Single
- (b) Committed relationship
- (c) Domestic Partnership/Married
- (d) Widowed
- (e) Separated
- (f) Divorced

6. By my own definition, I would consider myself to be: (select one) _____

- (a) Very conservative
- (b) Conservative

- (c) Somewhat conservative
- (d) Somewhat liberal
- (e) Liberal
- (f) Very liberal
- (g) Don't know

7. What state do you consider to be your home?

8. By my own definition, I would consider myself to be: (select one) _____

- (a) Very religious/spiritual
- (b) Somewhat religious/spiritual
- (c) Slightly religious/spiritual
- (d) Not at all religious/spiritual
- (e) Don't know

9. Please indicate your **HIGHEST** completed education level: (select one) _____

- (a) High school/GED
- (b) Technical or trade school training
- (c) Associate's Degree
- (d) Bachelor's Degree
- (e) Master's Degree
- (f) Doctoral Degree
- (g) Other _____

The following two questions (10-11) are for LAW ENFORCEMENT PERSONNEL ONLY. Psychologists should not answer these questions. Please answer questions 13 and 14 instead. Then, proceed to question 14.

10. What formal training or education have you received in domestic violence? (please select all that apply)

- (a) Training through the Police Academy
- (b) A class in technical or trade school
- (c) A class at a college or university
- (d) A training seminar through the Police Department
- (e) Some other training/education (please describe) _____

11. What formal training or education have you received in working with sexual minorities (i.e., gay, lesbian, or bisexual individuals)? (please select all that apply)

- (a) Training through the Police Academy
- (b) A class in technical or trade school
- (c) A class at a college or university
- (d) A training seminar through the Police Department
- (e) Some other training/education (please describe) _____

The following two questions (12-13) are for PSYCHOLOGISTS ONLY. Law enforcement personnel should not answer these questions. Please move ahead to question 14.

12. What formal training or education have you received in domestic violence? (please select all that apply)

- (a) Class/es in graduate school
- (b) Practicum seminar
- (c) Formal supervision
- (d) Continuing education course/s
- (e) Conference seminar
- (f) Some other training/education (please describe) _____

13. What formal training or education have you received in working with sexual minorities (i.e., gay, lesbian, or bisexual individuals)? (please select all that apply)

- (a) Class/es in graduate school
- (b) Practicum seminar
- (c) Formal supervision
- (d) Continuing education course/s
- (e) Conference seminar
- (f) Some other training/education (please describe) _____

14. Please indicate your chosen occupation: (select one) _____

- (a) Law Enforcement Personnel
- (b) Psychologist

APPENDIX C

Same Sex Interpersonal Violence Vignette

Chris, a 28-year-old interior designer, and Jamie, a 29-year-old sales representative, are a same sex couple who have lived together for two years.

Last Monday, Jamie arrived home late from work and became angry because Chris was on the phone. Jamie went into the kitchen to prepare dinner. Ten minutes later, Chris went to find Jamie.

As soon as Chris entered the kitchen, Jamie began complaining that Chris never helps with dinner or other household chores. Chris accused Jamie of always getting angry about "dumb stuff." Jamie continued to complain until Chris started yelling obscenities and called Jamie "a stupid idiot."

Jamie stopped working on dinner preparations and started to walk out of the kitchen when Chris grabbed Jamie's shoulder from behind and said, "Don't walk away from me while I'm talking to you." Jamie turned around, shoved Chris, and started to walk away again.

Chris quickly moved forward, grabbed Jamie's arms, and squeezed them with enough force to leave bruises. Chris yelled, "You better calm down or else you'll regret ever touching me." Eventually, Chris let Jamie go. Jamie ran out of the room crying and threatening to leave.

Please identify which of the following best matches the couple identified in the story you just read:

- (1) heterosexual couple
- (2) gay couple
- (3) lesbian couple

APPENDIX D

Opposite Sex Interpersonal Violence Vignette

Chris, a 28-year-old interior designer, and Jamie, a 29-year-old sales representative, are a heterosexual couple who have lived together for two years.

Last Monday, Jamie arrived home late from work and became angry because Chris was on the phone. Jamie went into the kitchen to prepare dinner. Ten minutes later, Chris went to find Jamie.

As soon as Chris entered the kitchen, Jamie began complaining that Chris never helps with dinner or other household chores. Chris accused Jamie of always getting angry about “dumb stuff.” Jamie continued to complain until Chris started yelling obscenities and called Jamie “a stupid idiot.”

Jamie stopped working on dinner preparations and started to walk out of the kitchen when Chris grabbed Jamie’s shoulder from behind and said, “Don’t walk away from me while I’m talking to you.” Jamie turned around, shoved Chris, and started to walk away again.

Chris quickly moved forward, grabbed Jamie’s arms, and squeezed them with enough force to leave bruises. Chris yelled, “You better calm down or else you’ll regret ever touching me.” Eventually, Chris let Jamie go. Jamie ran out of the room crying and threatening to leave.

Please identify which of the following best matches the couple identified in the story you just read:

- (1) heterosexual couple
- (2) gay couple
- (3) lesbian couple

APPENDIX E

Perceptions of Interpersonal Violence Incident Questionnaire

The following questions pertain to the scenario you just read. For each item, please mark the response that best represents you.

(1) How serious do you consider this incident to be?

1	2	3	4	5
Not at all serious	Somewhat not serious	Neither serious nor not serious	Somewhat serious	Very serious

(2) How likely would you consider this scenario a “domestic violence” incident (as opposed to another form of violence, e.g., simple assault or battery?)

1	2	3	4	5
Very unlikely	Somewhat unlikely	Neither likely nor unlikely	Somewhat likely	Very likely

(3) How likely would you recommend the alleged victim in this scenario contact the police?

1	2	3	4	5
Very unlikely	Somewhat unlikely	Neither likely nor unlikely	Somewhat likely	Very likely

(4) How capable do you think this couple will be at resolving future differences in a nonviolent manner?

1	2	3	4	5
Very uncapable	Somewhat uncapable	Neither capable nor incapable	Somewhat capable	Very capable

(5) How likely would you perceive both individuals as sharing responsibility for the use of violence?

1	2	3	4	5
Very unlikely	Somewhat unlikely	Neither likely nor unlikely	Somewhat likely	Very likely

(6) How likely would you recommend both individuals seek counseling to resolve their differences?

1
Very
unlikely

2
Somewhat
unlikely

3
Neither likely
nor unlikely

4
Somewhat
likely

5
Very
likely

APPENDIX F

Domestic Violence Myth Acceptance Scale

Please use the following scale to make your responses.

1	2	3	4	5	6	7
<i>Strongly Disagree</i>			<i>Neither Agree Nor Disagree</i>			<i>Strongly Agree</i>

- ___ 1. Domestic violence does not affect many people.
- ___ 2. When individuals are violent, it is because they lost control of their temper.
- ___ 3. If people continue living with their partner who beats them, then it's their own fault if they are beaten again.
- ___ 4. Making your partner jealous is asking for it.
- ___ 5. Some people unconsciously want their partners to control them.
- ___ 6. A lot of domestic violence occurs because people keep on arguing about things with their partners.
- ___ 7. If people who are beaten don't like it, they can leave.
- ___ 8. Most domestic violence involves mutual violence between partners.
- ___ 9. Abusive partners lose control so much that they don't know what they're doing.
- ___ 10. I hate to say it, but if individuals stay with the person who abused them, they basically deserve what they get.
- ___ 11. Domestic violence rarely happens in my neighborhood.
- ___ 12. Partners who flirt are asking for it.
- ___ 13. People can avoid physical abuse if they give in occasionally.
- ___ 14. Many people have an unconscious wish to be dominated by their partners.

- ____ 15. Domestic violence results from a momentary loss of temper.
- ____ 16. I don't have much sympathy for battered people who keep going back to their abuser.
- ____ 17. Women instigate most family violence.
- ____ 18. When people go back to their abusers, that is a reflection of something in their character.

APPENDIX G

The Heterosexism Scale

The following survey contains various statements about attitudes concerning sexual orientation. Please read each statement carefully and rate the items according to the extent to which you agree with the statement. For the items that do not completely apply to you, please try to imagine what your responses would be if it DID apply to you, and answer accordingly. Please use the following scale to make your responses.

- | | | | | | |
|------------------------------|-----------------|------------------------------|---------------------------|--------------|---------------------------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| <i>Strongly
Disagree</i> | <i>Disagree</i> | <i>Slightly
Disagree</i> | <i>Slightly
Agree</i> | <i>Agree</i> | <i>Strongly
Agree</i> |
-
- _____ 1. All sexual orientations are natural expressions of human sexuality.
 - _____ 2. When I hear about a romantic relationship, I tend to assume that the partners are of the opposite sex.
 - _____ 3. I find it desirable that lesbian, gay, and bisexual individuals have become more visible in society.
 - _____ 4. I would feel comfortable putting up a sign that supports lesbian, gay, and bisexual individuals.
 - _____ 5. Positive aspects of various sexual orientations should be included in public education.
 - _____ 6. I believe the lives of lesbian, gay, and bisexual individuals could not be as fulfilling as those of heterosexual individuals.
 - _____ 7. Only heterosexual individuals are appropriate religious leaders.
 - _____ 8. The thought of two people of the same sex being romantically involved bothers me.
 - _____ 9. Lesbian, gay, or bisexual individuals are as qualified as heterosexual individuals for leadership positions.
 - _____ 10. I think society will benefit from fostering equal opportunity employment for lesbian, gay, and bisexual individuals.
 - _____ 11. Heterosexual couples make better candidates for parents than do same-sex couples for adoption.

- _____ 12. I would accept my sibling's partner regardless of his or her sex.
- _____ 13. No one sexual orientation is better than any other sexual orientation.
- _____ 14. I would be hesitant to vote for a political candidate who was not heterosexual.
- _____ 15. An anti-discrimination clause is incomplete without the inclusion of sexual orientation.
- _____ 16. There is no reason to restrict lesbian, gay, and bisexual individuals from working in the military.
- _____ 17. I think lesbian, gay, and bisexual individuals are unfit as teachers.
- _____ 18. My relationship with my son or daughter would remain the same even if I found out that he or she was romantically involved with a person of the same sex.
- _____ 19. I would not think less of my co-worker if I found that he or she was a lesbian, gay man, or bisexual individual.
- _____ 20. It would make me uneasy to witness a public display of romantic affection between two people of the same sex.
- _____ 21. I would be hesitant to support lesbian, gay, and bisexual individuals for fear of being perceived as one.
- _____ 22. Bisexual individuals are in denial about their true sexual orientation.
- _____ 23. I would feel uneasy if my child's babysitter was not heterosexual.
- _____ 24. I believe same-sex parents are as capable of being good parents as heterosexual parents.
- _____ 25. I would not want to associate myself with groups that support lesbian, gay, and bisexual individuals.
- _____ 26. My relationship with my friend would change if I found out that he or she was not heterosexual.
- _____ 27. I make sure to invite the partner of my lesbian or gay friend to social functions.

- ____ 28. Lesbian, gay, and bisexual individuals are capable of maintaining long-term relationships.
- ____ 29. In general, heterosexual individuals are more psychologically adjusted than lesbian, gay, and bisexual individuals.
- ____ 30. Legalization of same-sex marriages will dismantle the fundamental foundations of society.
- ____ 31. It would be beneficial for our society to affirm the lifestyles of lesbian, gay, and bisexual individuals.
- ____ 32. I cannot approve of church congregations or denominations that openly accept lesbian, gay, and bisexual individuals.
- ____ 33. I would feel uneasy if I found out that my doctor was not heterosexual.
- ____ 34. I would feel comfortable being seen at a social function for lesbian, gay, or bisexual individuals.

APPENDIX H
Recruitment Speech

Hello. My name is insert name of team member. I am here to ask for your participation in a research project. Your responses will help generate new knowledge about law enforcement attitudes toward intimate partner violence, an area that is severely under-researched. Given that police officers are often the first responders to incidents of intimate partner violence, your perceptions of these situations are very important. Your perceptions have the potential to influence victims' and perpetrators' use of legal and social services. Thus, it is important that more be known about your thoughts and reactions to these emotionally intense and complicated situations.

The project is being conducted by Adrienne Paulson, a doctoral student in the counseling psychology program at Texas Woman's University. Under the supervision of Dr. Linda Rubin, Adrienne has designed a research study to investigate and compare law enforcement personnel's and psychologists' attitudes about intimate partner violence and diverse romantic relationships. We are currently recruiting law enforcement personnel from selected cities to voluntarily participate in this study.

The study is made up of a few anonymous questionnaires that are posted on the Internet. The questionnaires are short, and the total amount of time needed to answer them is anticipated to be less than 25 minutes.

I will hand out a sheet of additional information that includes the Internet link needed to access the study, and I invite you to participate. You may complete the survey at a time and place of your choosing, and you will have access to the composite results once all the data has been analyzed.

We understand that your time is valuable, and we hope that with your help, valuable and important information about your experience will be gathered.

Thank you for allowing me to share this research opportunity with you. Please let me know if you have any questions.

APPENDIX I
Reminder Postcard

This is a reminder that you have been invited to participate in a dissertation project investigating law enforcement personnel and psychologists' attitudes about intimate partner violence and diverse romantic relationships. Please consider taking part in this online survey. All answers to the survey questions are anonymous, and the survey requires no more than 25 minutes to complete. This study has been approved by the Institutional Review Board of Texas Woman's University. For detailed information regarding the study or to participate, please follow the link provided below:

<https://www.psychdata.com/s.asp?SID=123805>

Thank you for your consideration of this request!

Sincerely,

Adrienne Paulson, M.A.

APPENDIX J
Informed Consent Document

TEXAS WOMAN'S UNIVERSITY
CONSENT TO PARTICIPATE IN RESEARCH

Title: Perceptions of Same Sex and Opposite Sex Interpersonal Violence: A Comparison of Psychologists and Law Enforcement Personnel

Principal Investigator: Adrienne A. Paulson, Doctoral Candidate

Phone : (xxx) xxx-xxxx

E-mail : xxx@twu.edu

Faculty Advisor: Linda J. Rubin, Ph.D.

Phone: (xxx) xxx-xxxx

E-mail: xxx@mail.twu.edu

Explanation and Purpose of the Research

The principal investigator, Adrienne A. Paulson, M.A., is conducting the present study under the direction of Linda J. Rubin, Ph.D., to fulfill a doctoral dissertation requirement at Texas Woman's University. The purpose of this research project is to investigate and compare law enforcement personnel and psychologists' attitudes about intimate partner violence and diverse romantic relationships.

Research Procedures

If you agree to participate, you will be asked to complete several questionnaires. One questionnaire asks for demographic information (e.g., ethnicity, gender, and occupation) and information about your training experiences. One questionnaire asks you specific questions related to a hypothetical description of a couple. Another questionnaire measures your attitudes toward intimate partner violence, and a separate questionnaire inquires about your attitudes toward sexual diversity. Your maximum time commitment for this study is estimated to be less than 20 minutes.

Confidentiality

Confidentiality will be protected to the extent that is allowed by law. Your answers to all survey materials are completely anonymous. You will not be asked to provide any personally identifying information (e.g., name or phone number), and the information you provide will be used to inform general statements made about the total group of participants. The data collected in this study will be used for training and research purposes only. It is anticipated that the data will be published in the researcher's dissertation, scholarly journals and/or books, and presented at conferences; however, no participants' identifying information will be included in any publication.

Please note that absolute confidentiality cannot be wholly guaranteed, and there is a potential risk of loss of confidentiality in all email, downloading, and internet transactions. One way that the loss of confidentiality will be minimized is that you will not be asked to provide any personal identifying information. Computer Internet Provider (IP) addresses will not be traced. During transmission, the survey link and survey pages will be protected using SSL encryption and all data will be secured in a database accessible through the use of a username and password known only to the principal investigator and faculty advisor. Note that if you do not properly exit or close your Internet browser when you are finished with your surveys, it is possible that an outside party could view your responses. Be sure to close your browser after you have submitted your responses, or if you choose to discontinue participation.

After data collection, all data related to this study will be locked in a secure location in the primary investigator's private residence. All data will be destroyed by erasing related data files on the hard drive of the computer of the principal investigator and on any storage device that contains this information. All collected data will be destroyed within five years of study completion.

Potential Risks

Potential risks to you as a result of your participation are loss of time completing the questionnaires and emotional discomfort. If you experience emotional discomfort during any portion of the study, you may choose to stop the task and withdraw participation without penalty. If you feel as though you need to discuss your emotional discomfort with a professional, the American Psychological Association provides a psychologist locator service that you may access by calling 1-800-964-2000 or by visiting the following web page: <http://locator.apahelpcenter.org/>. Please note that neither the principal investigator, the faculty advisor, nor TWU assumes financial responsibility for these services.

Participation and Benefits

Your participation in this study is completely voluntary. You may withdraw from the study at any time, without penalty. Also, if there is any item that you do not want to answer, you may leave it blank. There will be no penalty or negative effects associated with this action.

While this study will probably not benefit you directly, the information gained may be used to enhance the knowledge and experience of those who respond to the needs of victims of intimate partner violence. A second benefit to you is the opportunity to request that a summary of the results of this study be sent to you, upon its completion, by contacting the principal investigator using the contact information above.

Questions Regarding the Study

If you have any questions about this research study, you may ask either the principal investigator or faculty advisor, for whom contact information appears above. If you have any questions about your rights as a participant in research or the way in which this study is conducted, you may contact the TWU Office of Research and Sponsored Programs at 940-898-3378 or via e-mail at IRB@TWU.EDU.

Any question or concern that you relay to the researcher will not be linked to the individual responses that you provide as a result of your participation in this study.

If you agree to participate in this research study, please print a copy of this consent form for your records before proceeding. Please note that you will also have access to the researcher's contact information, as well as detailed information about the study, after you complete the survey materials.

Please click the "Continue" button below to indicate your consent and complete the surveys. Clicking the "Continue" button implies you have read and agree to the above information. Otherwise, close your browser to exit.

APPENDIX K

Debriefing Form

Thank you!

Your survey responses have been entered in the database for this study.

I appreciate you taking the time to respond to this project. Your responses will help generate new knowledge about law enforcement and mental health professionals' attitudes toward intimate partner violence. More information about the study is available below.

Research has suggested that the general population does not see all instances of intimate partner violence (IPV) as equal. Non-uniform definitions of IPV, in combination with stereotypic myths about perpetrators' gender and the causes of violence, have led to misconceptions about the prevalence and severity of partner abuse. One such misconception is the belief that same gender IPV is less common than heterosexual IPV.

The majority of research examining perceptions of IPV and attitudes toward sexual minorities have been conducted among college aged students or professionals-in-training. Studies that have assessed endorsement of IPV myths have predominantly been conducted within the general population and in college communities.

Within the mental health and law enforcement communities, there has been a limited, but growing awareness of same gender IPV. This study examines police officers' and mental health professionals' perceptions of IPV in same gender and opposite gender partnerships.

Questions included in this survey assessed your endorsement of domestic violence myths and attitudes (both positive and negative) toward sexual minorities. The comparison of police officers and law enforcement personnel's responses to these questions will help determine whether previous findings in the general population (related to perceptions of IPV in same gender and opposite gender partnerships) correspond with the perceptions of those in direct contact with IPV victims, namely police and counselors.

If you would like any additional information about this study, please do not hesitate to contact me at the address below. Again, many thanks for your participation in this study.

Adrienne A. Paulson, M.A.
E-mail: xxx@twu.edu

Adrienne A. Paulson, M.A.

3225 Maine Prairie Road Apt. 304 St. Cloud, MN 56301

Mobile: (713) 557-3495

Email: aapaulson@msn.com

EDUCATION

Ph.D

2008

Texas Woman's University, Denton, Texas

Counseling Psychology, APA Accredited Program

Dissertation: *Perceptions of same sex and opposite sex interpersonal violence: A comparison of psychologists and law enforcement personnel*

Chair: Linda J. Rubin, Ph.D.

2007-2008

University of Utah University Counseling Center

Pre-Doctoral Internship, APA Accredited

M.A.

2005

Texas Woman's University, Denton, Texas

Counseling Psychology

Thesis: *Feminist identity, the thin-ideal, and body esteem*

B.A.

1999

Texas Lutheran University, Seguin, Texas

Psychology

Summa cum Laude

CLINICAL EXPERIENCE

2008

Staff Psychologist, St. Cloud State University Counseling Center

Provide individual, group, and crisis intervention services and deliver psychoeducational campus outreach presentations.

2007-2008

Pre-Doctoral Psychology Intern, University of Utah Counseling Center
APA Accredited

Provided individual, group, and couples therapy, and crisis intervention services; delivered psychoeducational campus outreach presentations; conducted assessment batteries; taught two undergraduate psychology courses; and provided clinical supervision. Supervisors: Brian Riedesel, Ph.D. and Glade Ellingson, Ph.D.

2006-2007

Contract Therapist – LPC-Intern, Counseling Center of Denton,
Denton, TX

Provided counseling to diverse adults, adolescents, children, couples, and families at sliding scale fees. Managed billing and appointments, and attended to on-call service. Supervisor: Shelly Turner, M.Ed., LPC

2003

Assessment with Female Forensic Population, Federal Medical Center,
Carswell, United States Department of Justice Federal Bureau of Prisons,
Fort Worth, TX

Conducted full battery psychological evaluations of incarcerated adults enrolled in FMC's residential drug treatment program. Tests administered, included the *Rorschach*, *Minnesota Multiphasic Personality Inventory-II*, *Rotter Incomplete Sentence Blank*, *Woodcock Johnson-3*, *Wechsler Adult Intelligence Scale-Third Edition*, *Eating Disorders Inventory*, *Thematic Apperception Test*, and *Personality Assessment Inventory*. Supervisors: Theresa Johnson, Ph.D., Site Supervisor; Linda Rubin, Ph.D., TWU Supervisor

2002-2003 **University Counseling Center**, Texas Woman's University, Denton, Texas
 Provided individual therapy to a diverse student population using a brief (12 sessions) therapy model of treatment. Supervisors: Cindi McMahon, M.S., Ph.D. Intern, and Lisa Wechsler, M.A., Ph.D. Intern, Site Supervisors; Linda Rubin, Ph.D., TWU Supervisor

2000-2001 **Community Mental Health Practicum**, Galaxy Counseling Center, Garland, Texas
 Conducted intake interviews and provided individual, couples, and family therapy for diverse youth and adult clients. Supervisors: Brian Pifferini, M.A., PsyD Intern, and Joyce Webb, Ph.D., Site Supervisors; Shelley Riggs, Ph.D., TWU Supervisor

2000 **Community Mental Health Practicum**, Family Services, Inc., Fort Worth, Texas
 Provided individual, couples, family, and play therapy to diverse population of youth and adult clients. Supervisors: Margaret Blakeley, M.Ed., LPC, Site Supervisor; Sally Stabb, Ph.D., and Linda Rubin, Ph.D., TWU Supervisors

SUPERVISORY EXPERIENCE

2007-2008 **Clinical Supervisor**, University of Utah Counseling Center
 Provided supervision to three doctoral practicum counselors conducting individual therapy.

TEACHING EXPERIENCE

2008 **Introduction to Multicultural Issues**, Co-Instructor, University of Utah
 Facilitated group discussion, lectured, and graded assignments.

2007 **Career and Life Planning**, Instructor, University of Utah
 Facilitated students' career-making decisions by leading class discussions and lecturing. Administered the Strong Interest Inventory and Myers Briggs Type Indicator and graded students' written and oral assignments.

2006 **Experimental Psychology**, Instructor, Texas Woman's University
 Modified lectures and exams; facilitated and designed in-class activities and assignments; graded exams; supervised students' research projects; and held office hours.

- 2005 **Abnormal Psychology**, Instructor, Texas Woman's University
Prepared lectures and exams; facilitated and designed in-class activities; graded exams and assignments; and held office hours.
- 2004-2005 **Counseling Theory & Practice**, Instructor, Texas Woman's University
Prepared lectures and exams; facilitated and designed in-class activities; graded exams and term papers; and held office hours.
- 2001-2004 **Introduction to Psychology**, Instructor, Texas Woman's University
Modified lectures, exams, and assignments; graded exams; and held office hours.
- 2001-2007 **Teaching Assistant**, Texas Woman's University
Assisted in the instruction of four classes: Introduction to Psychology, Psychology of Women, Experimental Psychology, and Professional Development in Psychology. Guest lectured; graded exams and assignments; and held office hours.

OUTREACH PRESENTATIONS

- 2007 **White Privilege**, University of Utah
Co-facilitated three presentations on white privilege for undergraduate psychology courses. Presentations included didactic information, audio-visual material, and group discussion.
- 2007 **Myers-Briggs Type Indicator**, University of Utah
Co-facilitated two presentations on the MBTI to nursing and occupational therapy students. Presentation included didactic information, group interpretation of MBTI results, and group discussion.
- 2007 **Time Management**, University of Utah
Co-facilitated presentation of time management and stress management skills to undergraduate athletes. Created didactic information, handouts, and co-led group discussion.
- 2007 **Wellness Fair**, University of Utah
Administered, scored, and interpreted Depression Screening Inventories for students.
- 2008 **Suicide Prevention Gatekeeper Training**, University of Utah
Co-facilitated presentation about recognizing and responding to students in distress and those who express suicidal ideation.
- 2008 **Choosing a Major**, University of Utah
Co-facilitated workshop with members of the departments of College Advising and Career Services to assist students with the process of selecting a major.

PUBLICATIONS

- Riggs, S. A., Greenwald, E., Sahl, G., Atkinson, H., Paulson, A., & Ross, C. A. (2007). Family environment and adult attachment as predictors of psychopathology and personality dysfunction among inpatient abuse survivors. *Violence and Victims*, 22, 575-599.
- Riggs, S. A., Paulson, A., Tunnell, E., Sahl, G., Atkinson, H., & Ross, C. A. (2007). Attachment, personality, & psychopathology among adult inpatients: Self-reported romantic attachment style vs. AAI states of mind. *Development and Psychopathology*, 19, 263-291.

CONFERENCE PRESENTATIONS

- Platt, L. F., Hatch, D., Sexton, M., & Paulson, A. A. (2007, October). Differences in initial severity and therapeutic outcome between traditional and non-traditional students seeking counseling center services. Poster presented at the Utah University and College Counseling Centers Conference, Park City, UT.
- Sexton, M., Paulson, A. A., Platt, L. F., & Hatch, D. (2007, October). Barriers to returning to therapy: Differences between LDS and non-LDS university students. Poster presented at the Utah University and College Counseling Centers Conference, Park City, UT.
- Riggs, S. A., Tunnell, E., Sahl, G., Paulson, A., Atkinson, H., & Ross, C. A. (2006, August). Predictors of outcomes among inpatient abuse survivors: Family and attachment processes. Poster presented at the American Psychological Association annual convention, New Orleans, LA.
- Ross, C. A., Riggs, S. A., Paulson, A., Tunnell, E., Clough, G., and Atkinson, H. (2005, November). Adult Attachment Interview profiles of 75 trauma program patients. Paper presented at the International Society for the Study of Dissociation Conference, Toronto, Canada.
- Riggs, S. A., Clough, G., Helmer, H., Paulson, A., Tunnell, E., & Ross, C. A. (2003, August). Adult attachment, dissociation, and personality style among trauma survivors. Poster presented at the American Psychological Association annual convention, Toronto, Ontario, Canada.

RESEARCH EXPERIENCE

- 2007 **Growing with EASE Project**, Research Assistant, Texas Woman's University; Shannon S. Rich, Ph.D., Principal Investigator
 Wrote 12 newsletter articles for families with small children regarding ways to facilitate positive self-esteem and prevent childhood obesity.
 Assisted with data collection.
- 2005 **Master's Thesis Equivalency:** *Feminist identity, the thin-ideal, and body esteem*
 Chair: Shannon S. Rich, Ph.D.
 Correlational study that examined whether feminist and ethnic identity differentially influenced female college students' media consumption, internalization of sociocultural appearance standards, and feelings about their bodies. Results indicated that feminist identity was unrelated to the

aforementioned variables but that ethnic identity influenced women's responses to media images, amount of media exposure, and body satisfaction.

2001-2002

Trauma and Attachment Research Project, Research Team Member, Texas Woman's University; Shelley Riggs, Ph.D., and Colin Ross, M.D., Co-Principal Investigators

Explored the relationships among Colin Ross' *Trauma Model*, childhood traumatic experience, adult attachment style, family functioning, and individual psychopathology among inpatients at Timberlawn Psychiatric Hospital in Dallas, TX. Assisted in gathering literature, designing protocol, recruiting participants, collecting data, constructing data files, and administering the *Adult Attachment Interview*, *Family Environment Scale*, *Dissociative Experiences Scale*, *Millon Multiaxial Clinical Inventory-III*, *Dissociative Disorders Interview Schedule*, and *Experiences in Close Relationships Scale*.

PROFESSIONAL SERVICE

2004-2005

Doctoral Student Representative to Counseling Psychology Faculty, Texas Woman's University

Participated in regular monthly meetings of the Counseling Psychology Program Core Faculty; posted meeting minutes on the student listserv; and organized the annual social meeting for doctoral candidates seeking program admission.

2004

APA Re-Accreditation of Texas Woman's University Counseling Psychology Doctoral Program, Linda Rubin, Ph.D., Faculty Advisor

Assisted in writing a section of program's re-accreditation survey pertaining to faculty membership and responsibilities.

2002

Member of APA division 17 & 35 Joint Taskforce to Develop Guidelines for Psychological Practice with Girls and Women,

Pam Remer, Ph.D., Sub-Committee Chairperson

Participated in weekend-long taskforce meeting to develop working draft of guidelines. Assisted in writing guidelines regarding psychologists' attention to issues of diversity, including intersecting social identities and individuals' experiences of privilege and oppression.

PROFESSIONAL ASSOCIATIONS

American Psychological Association, Graduate Student Affiliate

Member of Division 17, Counseling Psychology, Student Affiliate

Member of Division 35, Society for the Psychology of Women, Student Affiliate

Member of Division 56, Trauma Psychology, Student Affiliate

OTHER WORK EXPERIENCE

- 2006-2007 **Undergraduate Advisor**, Psychology Department, Texas Woman's University
 Advised students on course selection options; updated students' records; and created degree plans.
- 1998-1999 **Supplemental Instruction**, Mentor, Texas Lutheran University, Seguin, TX
 Provided tutoring in undergraduate psychology courses; organized study sessions; and reviewed lecture material with students.
- 1996-1997 **Copy Editor**, College Newspaper
 Read proofs; corrected errors in spelling, grammar, usage, and style; and rewrote poorly constructed headlines, captions, and articles for the *Lone Star Lutheran*.

REFERENCES

Linda Rubin, Ph.D., Associate Professor, Texas Woman's University, Department of Psychology & Philosophy
 Faculty Advisor, Dissertation Chair, Clinical Supervisor
 P.O. Box 425470
 Denton, TX 76204
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Glade Ellingson, Ph.D., Staff Psychologist, University of Utah Counseling Center
 APA Pre-Doctoral Internship Supervisor
 201 South 1460 East, Room 426
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 Email: gellingson@sa.utah.edu

Brian Riedesel, Ph.D., Staff Psychologist, University of Utah Counseling Center
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 201 South 1460 East, Room 426
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