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Gender Expression Differences in Same-Sex Intimate Partner Violence Victimization, Perpetration, and Attitudes among LGBTQ College Students

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Intimate partnerviolence (IPV) occurs in same-sex relationships at greater rates compared to heterosexual relationships. Despite these elevated same-sex IPV, limited research exists on risk and protective factors (e.g., gender expression) related to victimization, perpetration, and attitudes about violence. Due to scarce research on characteristics of same-sex IPV, the study measured differences between feminine and masculine lesbian, gay, bisexual, transgender, queer (LGBTQ) college students (N = 266) in their self-reported victimization, perpetration, and acceptance of IPV. Results identified that masculine LGBTQ-identifying students reported higher levels of victimization, perpetration, and acceptance of violence, providing implications when assessing for risk and protective factors of same-sex IPV.

KEYWORDS intimate partner violence, gender expression, LGBTQ, same-sex relationships

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The majority of intimate partner violence (IPV) research focuses on risk and protective factors of violence within opposite-sex relationships (Alexander, 2008; Andrews, Foster, Capaldi, & Hops, 2000). However, IPV exists within lesbian, gay, bisexual, transgender, and queer (LGBTQ) individuals' same-sex relationships at similar rates compared to heterosexual relationships, with most research identifying higher rates of same-sex IPV (e.g., Alexander, 2008; McKenry, Serovich, Mason, & Mosack, 2006; Turell, 2000). For example, Turell (2000) found that approximately 83% of LGBTQ adults reported suffering emotional abuse and coercion within their same-sex relationship; 32% of LGBTQ adults reported some form of physical abuse, and 52% experienced being threatened by their same-sex partner. Although high prevalence rates of same-sex IPV exists, little is known regarding the risk and protective factors of IPV. Furthermore, the limited research on this population focused on LGBTQ adults (e.g., McKenry et al., 2006) and has not included young, emerging adults in college. Yet the individual and relational development of college students remains important, and healthy relationship patterns serve as a protective factor to violence in their adult relationships (Demir, 2010; Kaura & Lohman, 2009) due to the lack of role models displaying healthy relationship behaviors for LGBTQ-identifying individuals. Further, though numerous on-campus programs (e.g., counseling, crisis counseling, and victim services) address dating violence, sexual assault, and rape, these services typically target the heterosexual population; little is known about same-sex IPV among LGBTQ-identifying young adults, and these services remain adversely affected. Thus, there is a need for updated resources on assessing and treating IPV in same-sex relationships (Duke & Davidson, 2009). Therefore, this study addressed the gap in the literature in an effort to more effectively inform counseling literature and practice to better serve those individuals experiencing same-sex IPV.

As noted, high IPV incidence rates in LGBTQ individuals' relationships (Eaton et al., 2008; McKenry et al., 2006; Turell, 2000) and in college students' relationships (Allen, Swan, & Raghavan, 2009; Kaura & Lohman, 2009) underscored the importance of IPV as a social and counseling issue across the life span. Therefore, counselors may be working with college student clients that are victims and perpetrators of violence more often than realized. Many LGBTQ individuals and couples seek help through counseling (Burckell & Goldfried, 2006). However, given the lack of awareness about the extent of IPV in the LGBTQ college student population, counselors and helping professionals may not be assessing for violence in same-sex relationships. For example, counselors may believe that males cannot harm males and females cannot harm females (Duke & Davidson, 2009; Eaton et al., 2008), resulting in a faulty belief that same-sex violence is a mutual fight between partners. As a result, the IPV effects become minimized or denied when counselors experience difficulty in acknowledging that same-sex IPV occurs. As IPV in same-sex couples only recently presented in the forefront of literature, many counselors may lack exposure to same-sex IPV theory, assessment,

and treatment in their education and training (McKenry et al., 2006), further reinforcing misconceptions and false beliefs that affect the counseling process. Given that the American Counseling Association (ACA) requires counselors to learn about IPV in LGBTQ relationships (Duke & Davidson, 2009), there is a clear need to develop and provide research and curricula that addresses levels of victimization, perpetration, and attitudinal acceptance of IPV for counselors in training, professional counselors, counselor educators, and for the general population.

In regard to IPV theory of power and control, the continuum of conflict and control (CCC; Carlson & Jones, 2010) describes assigned, biological sex as a strong predictor of risk and protective factors for heterosexual individuals, yet the theory does not provide the same assessment for LGBTQ clients potentially falling into victimization or perpetration. For example, Carlson and Jones (2010) identified that males tend to perpetrate more than their female counterparts, providing counselors an assigned biological sex marker of risk factors of perpetration when working with heterosexual couples. However, an individual's assigned biological sex does not provide the same IPV-identifying function and information when working with a same-sex couple, whether the partners identify as lesbian, gay, or bisexual, and characteristics such as gender expression may provide the greatest insight into typical IPV patterns. Gender expression is an individual's external expression about their gender identity including (1) masculinity and (2) femininity (Bornstein, 1998), which may provide the greatest insight into typical IPV patterns and risk factors. Therefore, the purpose of this study was to investigate possible differences between masculine and feminine LGBTQ college students among their respective levels of reported physical and sexual victimization (Foshee, 1996), emotional and psychological victimization (Foshee, 1996), physical and sexual perpetration (Foshee, 1996), emotional and psychological perpetration (Foshee, 1996), and attitudinal acceptance of IPV (Foshee et al., 1998; Foshee, Fothergill, & Stuart, 1992). Specifically, our research questions included (1) Do differences exist between gender expressions (based on participants' assigned sex) of LGBTQ college students in their levels of victimization (Victimization in Dating Relationships (VDR) and Safe Dates-Psychological Abuse Victimization (SD-PAV)) and perpetration (Perpetration Dating Relationships (PDR) and Safe Dates-Psychological Abuse Perpetration (SD-PAP))? and (2) Do differences exist between gender expressions (based on participants' assigned sex) of LGBTQ college students in their levels of attitudinal acceptance of IPV (Acceptance of Couple Violence (ACV))?

METHOD

The data analyzed in this study focused on the identifying of levels of victimization, perpetration, and attitudinal acceptance of IPV in LGBTQ college students. The investigation employed a correlational research design with the

tailored design method (TDM; Dillman, Smith, & Christian, 2008). Through partnerships with university LGBTQ organizations, the study used purposive sampling to recruit LGBTQ college students engaging in at least one same-sex relationship over their lifetime. Upon Institutional Review Board (IRB) for human subjects research approval, the sampling procedure included constructing a list of 156 LGBTQ university organizations and randomly selecting a list of 40 university organizations to ensure a nationwide sample. We then contacted the LGBTQ student organization leaders and sent a request for their assistance in disseminating study information to their organization members. Upon expressed interest, they were sent a document providing an overview of the study along with the sample e-mail to be forwarded to their student membership. The sample e-mail included a link to the survey instruments hosted online. To increase response rates, we utilized follow-up at 7, 21, and 35 days after the initial recruitment e-mail including $5.00 gift card incentive (Dillman et al., 2008).

Participants

Initially, approximately 1,960 participants received the study link via e-mail through various university LGBTQ organizations. Of these potential participants, 290 (14.8%) completed the informed consent. Among those completing the informed consent, 278 (95.8%) completed all instrument items. After a careful review of those participants providing partial data, deleting 12 cases appeared appropriate considering that these cases represented less than 5% of the total data, suggesting the cases were missing completely at random (MCAR; Tabachnick & Fidell, 2013). The deletion resulted in a reduced sample from 290 to 278 LGBTQ participants. The preliminary analyses identified outliers, means, standard deviations, and frequencies of all demographic, independent, and dependent variables including an analysis of whether any outliers exercised strong influence on the data; findings indicated that no outliers existed for the variables. To ensure statistical assumptions were met, frequency tables were examined to evaluate normal distribution. Next, following a review of univariate outliers, we found no outliers in the dependent variables, and we found no outliers in the independent variables of interest. Upon further review, we checked for multivariate outliers and cases of the dependent variables with a Mahalanobis distance score above the critical value (18.47) for the four dependent variables, which resulted in eight total cases removed from the data (Pallant, 2010). For the acceptance of couple violence (ACV) and four subscales of ACV dependent variables, we checked for multivariate outliers and cases with a Mahalanobis distance score above the critical value (20.52) for five dependent variables resulting in four total cases removed (Pallant, 2010). Altogether, the complete data represented LGBTQ college student participants who were enrolled in a private or

public university, either small or larger, in the United States ($N = 266$; a usable response rate of 13.6%).

The targeted sample demographics included (1) participants identifying as LGBTQ, (2) college students, (3) males and females, (4) participants identifying as masculine or feminine (Balsam & Szymanski, 2005; McKenry et al., 2006), and (5) participants engaging in a same-sex relationship in their lifetime. In other words, the identified sample contained LGBTQ college students who have engaged in at least one same-sex relationship. In addition, the IPV assessment focused on same-sex victimization, perpetration, and attitudinal acceptance of IPV in this sample of LGBTQ college students. These sample demographics were based on previous research on levels of IPV (Eaton et al., 2008; McKenry et al., 2006), attitudes of IPV (Sorenson & Thomas, 2009), and college students' IPV incidence rates (Fass, Benson, & Leggett, 2008).

Descriptive data and measures of central tendency indicated that males (41.4%, $n = 115$) represented a smaller portion of the sample, and the majority of participants identified their assigned biological sex as female (58.6%, $n = 163$). Regarding participants' sexual orientation, participants self-identified as gay (39.2%, $n = 109$), lesbian (36.3%, $n = 101$), or bisexual (24.5%, $n = 68$). Concerning participants' gender identity, the participants self-identified as cisgender (38.1%, $n = 161$), bigender (21.6%, $n = 60$), transgender (24.1%, $n = 67$), genderless (7.6%, $n = 21$), genderqueer (6.8%, $n = 19$), or two-spirit (1.8%, $n = 5$). Although we asked participants' about their gender identity, we instructed participants to respond to each instrument item based on a previous or current same-sex relationship. The mean score of gender expression was 3.69 ($SD = 1.307$; range, 1–6). The participants reported a self-identifying gender expression of the following: feminine (6.8%, $n = 19$), mostly feminine (16.5%, $n = 46$), somewhat feminine (12.6%, $n = 35$), somewhat masculine (30.2%, $n = 84$), mostly masculine (32%, $n = 89$), or masculine (1.8%, $n = 5$). The mean age of the participants was 23.7 ($SD = 5.21$, range, 17–51). The mean number of years in education for the participants was 14.88 ($SD = 1.99$, range, 0–21). Regarding reported ethnicity/race, the participants self-identified as White or Caucasian (72.3%, $n = 201$), Black or African American (9%, $n = 25$), Hispanic or Latino (8.6%, $n = 24$), American Indian or Alaskan Native (2.5%, $n = 7$), Asian (2.5%, $n = 7$), Native Hawaiian or other Pacific Islander (1.4%, $n = 4$), Biracial (1.8%, $n = 5$), or Other (1.8%, $n = 5$).

Instrumentation

The demographic information questionnaire collected self-reported information from the participants within several areas: (1) age, (2) assigned sex, (3) sexual orientation, (4) gender expression (Balsam & Szymanski, 2005;

McKenry et al., 2006), and (5) ethnicity. We asked about assigned biological sex on a categorical scale as (1) male or (2) female. We inquired about sexual orientation on a categorical scale in which participants self-identified as (1) gay, (2) lesbian, or (c) bisexual. We measured gender expression on a 6-item Likert-type scale ranging from 1 (*feminine*) to 6 (*masculine*). The gender expression construct is relatively new, and the term includes more than the two categories of masculinity and femininity. Although a clear, universally accepted definition of *gender expression* continues to evolve, there is agreement that gender expression exists on a continuum and may vary in definition from individual to individual. Recognizing the continued development of gender expression as a construct, we separated the six categories into a dichotomous variable, based on previous research (Balsam & Szymanski, 2005), and participants identified across the gender expression spectrum. For the purpose of analyses, we divided the spectrum and categorized participants' responses as either feminine or masculine. We conducted reliability analyses of the Likert-type scale, and results concluded high internal consistency ($\alpha = .73$). The results of the responses appeared consistent with previous research (e.g., Balsam & Szymanski, 2005; McKenry et al., 2006), which suggests validity. Lastly, we asked about ethnicity on a categorical scale and participants identified as (1) Asian, (2) Caucasian or White, (3) African American or Black, (4) Hispanic, (5) Native Hawaiian or Pacific Islander, (6) American Indian or Alaska Native, (7) biracial, or (8) other (Please be specific).

We measured victimization and perpetration using several scales. We operationally defined these times based on previous literature (e.g., Foshee, 1996; Foshee et al., 1998). *Victimization* refers to incidences of abuse toward a victim, including physical, emotional, and sexual harm. For the purpose of this study, victimization exists when a targeted person has less power and becomes the victim of minor or severe physical, psychological, emotional, or sexual abuse. On the other hand, *physical perpetration* refers to any harmful behavior that a perpetrator directs toward an intimate partner in the form of physical, sexual, or emotional abuse. For the purpose of this study, perpetration exists when an individual uses power and control dynamics and targets a victim, inflicting minor or severe physical, psychological, or sexual abuse. The perpetration exists in the form of using a weapon or from the use of the perpetrator's body.

The Victimization in Dating Relationships Scale (VDR; Foshee, 1996) measures victimization and violence using a norming sample of adolescents age 14 through 18. The VDR is an 18-item self-report measure, assessing for physical and sexual victimization in dating relationships rated on a 4-point Likert-type scale ranging from 0 to 3: *never, 1–3 times, 4–9 times*, and *10+ times*. The instructions requested that participants report if a partner had done the following to them and to base their answer on at least one same-sex relationship. Examples of questions include (1) scratched me,

(2) hit me with their fist, and (3) assaulted you with a knife or gun. Dahlberg, Toal, Swahn, and Beherns (2005) reported an internal consistency score (α = .90) when using the instrument with youth compared to the strong internal consistency (α = .97) of this study. In terms of the VDR validity, Foshee (1996) reported validity on the victimization scale in comparison with previous studies. She stated that because the self-report victimization scores fell in the moderate violence range, the participants were less likely to report their playful gestures as violent behaviors, and the participants' responses indicated actual violence in their relationships.

The Safe Dates - Psychological Abuse Victimization scale (SD-PAV; Foshee et al., 1996) is a 14-item self-report measure, rated on a 4-point scale, which measures victimization of psychological abuse within dating relationships. The SD-PAV contains a 4-point Likert-type scale ranging from 0 to 3: *never, seldom, sometimes,* and *very often*. Specifically, the instructions requested participants to report if a same-sex partner had done the following to them. Examples of SD-PAV questions include (1) insulted me in front of others, (2) started to hit me but stopped, and (3) blamed me for bad things they did. The SD-PAV has sound internal consistency reliability (α = .91; Foshee, 1996; Foshee et al., 1998) with a norming population of youth, which appears consistent with this study's internal consistency reliability (α = .95). In addition, Foshee (1996) identified sound construct validity.

The Perpetration in Dating Relationships (PDR; Foshee et al., 1996) measures perpetration and violence with a norming sample of youth, age 14 to 18. The PDR contains 18 self-report items, rated on a 4-point scale, which measure perpetration of physical violence within dating relationships. The questionnaire consists of a 4-point Likert-type scale ranging from 0 to 3: *never, 1–3 times, 4–9 times,* and *10+ times*. The instructions requested participants to report if the participant had done the following to a same-sex partner. Examples of questions include (1) scratched them, (2) hit them with my fist, and (3) assaulted them with a knife or gun. Dahlberg et al. (2005) reported an internal consistency score (α = .93) with their data collected on youth, which compares to the internal consistency reliability (α = .98) of this study's college student norming group. Foshee, Bauman, Ennett, Bennefield, and Suchidran (2005) explored adolescent perpetration (N = 1,760) using PDR and identified a high internal consistency (α = .97) with a norming group of adolescent youth. Finally, Foshee et al. (2009) evaluated perpetration in adolescents (N = 788) using PDR and found a high internal consistency (α = .95). Consistent with similar instruments developed to measure victimization and perpetration (Foshee, 1996), PDR holds validity as the study held similar results of victimization rates to those from previous studies (e.g., Foshee, Linder, MacDougall, & Bangdiwala, 2001).

The Safe Dates—Psychological Abuse Perpetration scale (SD-PAP; Foshee, 1996) consists of a 14-item self-report measure, rated on a 4-point

scale, which measures perpetration of psychological abuse within dating relationships. The SD-PAP contains a 4-point Likert-type scale ranging from 0 to 3: *never, seldom, sometimes,* and *very often*. The instructions requested participants to report if they had ever done the following to a same-sex partner. Specific examples of SD-PAP questions include (1) insulted them in front of others, (2) started to hit them but stopped, and (3) blamed them for bad things you did. Foshee (1996) reported internal consistency for the paralleled perpetration measures ($\alpha = .88$) with their data. Furthermore, Foshee et al. (1998) found that the SD-PAP held a high internal consistency ($\alpha = .95$), which appears comparable to the current study ($\alpha = .96$). Additionally, Foshee et al. (1998) evaluated adolescents ($N = 1{,}886$) on their levels of victimization, reporting internal consistency ($\alpha = .88$) for the SD-PAP, with their data. Lastly, Foshee et al. (2009) evaluated psychological perpetration in adolescents ($N = 788$) using SD-PAP and found a sound internal consistency ($\alpha = .87$). The SD-PAP holds validity considering that the study held similar results of perpetration rates to those from past research studies (Foshee, 1996).

Finally, the modified Acceptance of Couple Violence (ACV; Foshee et al., 1998) scale consists of four factors/subscales. The first subscale, acceptance of prescribed norms, included examples of accepting violence under specific circumstances. The second subscale, acceptance of proscribed norms, included examples of "norms considering dating violence unacceptable under all circumstances" (Foshee et al., 1998, p. 47). The third and fourth subscales measured perceived positive consequences and perceived negative consequences. The ACV consists of a Likert-type scale with options ranging from 0 (e.g., *strongly disagree*) to 3 (e.g., *strongly agree*). Foshee et al. (1992) originally found ACV holds a moderate internal consistency ($\alpha = .71, .73, .74$) within a norming group of adolescents in their unpublished results, yet the ACV remains one of the few measures of acceptance of IPV to date. For this study, we modified the ACV to measure and compare acceptance of IPV in opposite-sex versus same-sex relationships, especially considering the research gap in utilizing LGBTQ samples to measure attitudes. We modified any items on the ACV containing the terms *boyfriend* and *girlfriend* to the terms *male partner* and *female partner*. We added six items, three measuring male-on-male violence attitudes and three measuring female-on-female violence attitudes. The six items included (1) A man angry enough to hit his male partner must love him very much, (2) Men sometimes deserve to be hit by the men they date, (3) A man who makes his male partner jealous on purpose deserves to be hit, (4) Women sometimes deserve to be hit by the women they date, (5) A woman angry enough to hit her female partner must love her very much, and (6) A woman who makes her female partner jealous on purpose deserves to be hit. The ACV reliability with these data from this study showed strong ($\alpha = .98$) internal consistency. For each of the five subscales, the following alpha reliability coefficients existed:

(1) male-on-female ($\alpha = .87$), (2) male-on-male ($\alpha = .90$), (3) female-on-female ($\alpha = .85$), (4) female-on-male ($\alpha = .88$), and (5) general violence ($\alpha = .93$).

Data Analysis

Multivariate analysis of variance (MANOVA) was used to investigate the research questions, considering the theoretical similarity among the constructs. Tabachnick and Fidell (2013) stated that despite multicollinearity, the use of several dependent variables appears appropriate with the related constructs. In terms of test power (β), parametric tests hold more power compared to nonparametric tests resulting in a decreased Type II error, which would indicate accepting the null hypothesis when it is not true (Pallant, 2010). For the purpose of this study, a reduced Type II error remained most important because finding no differences between groups and accepting the null hypothesis could create a false negative. Considering the instruments measured violence in relationships, a false negative could create a concern for interpreting results and drawing implications in working with LGBTQ individuals and couples experiencing IPV. Furthermore, mental health professionals could potentially lack accurate information about the nature and scope of same-sex IPV in LGBTQ college students; in other words, suggesting that IPV did not occur when violence in relationships was occurring. To control for inflated Type I error rates, we ran two separate MANOVAs for each research question (Pallant, 2010; Tabachnick & Fidell, 2013) because the chances of finding significance that did not truly exist decreased and the chance of rejecting the null hypotheses when it was actually true decreased. One other step to further control for inflated Type I error was to use a Bonferroni adjustment to strengthen the alpha cut-off scores (Pallant, 2010).

We conducted a power analysis using G*POWER 3.1 (Faul, Erdfelder, Lang, & Buchner, 2009) to distinguish the sample size for identifying statistically significant regression coefficients and MANOVA. Statistical calculations included the following standards: (1) target power (beta; $\beta = .80$; (2) target alpha level; $\alpha = .05$; and (3) large effect size for MANOVA, effect size = .15 (Cohen, 1992). The power analysis calculation resulted in a need for at least 48 participants; thus, the sample size ($N = 266$) sufficed. The data represented participants self-reporting their assigned sex as male ($n = 112$) or female ($n = 154$) and self-reporting gender expression as feminine ($n = 96$) or masculine ($n = 170$). These cell sizes remained consistent for the MANOVAs. To address multivariate normality, approximately 20 cases in the smallest cell must exist to warrant robustness (Tabachnick & Fidell, 2013) and at least needs to exceed the number of dependent variables for any particular analysis (Pallant, 2010). Therefore, the cell sizes appeared appropriate for MANOVA analyses.

TABLE 1 Null Hypothesis 1

MANOVA Full Model Test	Values	$F(4, 259)$	p	η^2_P
Pillai's Trace	.15	7.13	.00	.15
Wilks's lambda	.85	7.30	.00	.15
Hotelling's Trace	.18	7.47	.00	.15
Roy's largest root	.18	14.94	.00	.15
Bonferroni adjustment				
Instrument variables	Instrument Description	$F(1, 262)$	p	η^2_P
VDR	Physical and sexual victimization	33.27	.00	.11
SD-PAV	Psychological victimization	18.33	.00	.07
PDR	Physical and sexual perpetration	43.17	.00	.14
SD-PAP	Psychological perpetration	36.72	.00	.12

VDR = Victimization in Dating Relationships; SD-PAV = Safe Dates-Psychological Abuse Victimization; PDR = Perpetration Dating Relationships; SD-PAP = Safe Dates-Psychological Abuse Perpetration.

RESULTS

Research Question 1

To test the first research question exploring what differences exist between gender expressions (based on participants' assigned sex) of LGBTQ college students in their levels of victimization (VDR and SD-PAV) and perpetration (PDR and SD-PAP); we employed a two-way, between-subjects MANOVA identifying a statistically significant overall model (Table 1): $F(4, 259) = 7.30$, $p < .01$, Pillai's Trace = .15, Wilks's LAMBDA = .85; partial eta squared (η^2_P) = .15, suggesting a large effect size. The large effect size suggests that the differences in relationship among gender expression, victimization, and perpetration are substantial and that these results can inform counseling assessment and interventions due to the strength. Univariate tests using the Bonferroni adjustment (p = .025) indicated statistically significant differences existed across the four dependent variables based on gender expression and assigned sex of participants (Table 1). Moreover, masculine and feminine participants (based on their assigned sex) reported differences on the PDR dependent variable with a large effect size; the VDR, SD-PAV, and SD-PAP variables produced a medium effect size. Post-hoc pairwise comparisons identified statistical significance ($p < .01$, $\eta^2_P = .07$) on reporting levels of psychological and emotional victimization (SD-PAV) between masculine participants (M = 29.42, SD = 10.59) compared to feminine (M = 21.30, SD = 7.38) participants. The results identified a moderate effect size in that those college students self-identifying as masculine tended to report greater amounts of past psychological and emotional victimization. The moderate effect size indicates a strong relationship among gender expression, victimization, and perpetration, thereby suggesting that counselors should be aware of this information to inform their practice.

After interpreting the results for the PDR variable, post-hoc comparisons indicated statistical significance ($p < .01$, $\eta^2_P = .14$) on reporting levels of

TABLE 2 Null Hypothesis 2

MANOVA Full Model Test	Values	$F(5, 258)$	p	η^2_P
Pillai's Trace	.16	9.57	.00	.16
Wilks's lambda	.84	9.57	.00	.16
Hotelling's Trace	.19	9.57	.00	.16
Roy's largest root	.19	9.57	.00	.16
Bonferroni adjustment				
Instrument Variables	Instrument Description	$F(1, 262)$	p	η^2_P
ACV-M Total	Attitudinal acceptance of IPV	42.65	.00	.14
ACV-M M-on-M	Male-on-male subscale	40.29	.00	.13
ACV-M M-on-F	Male-on-female subscale	25.81	.00	09
ACV-M F-on-F	Female-on-female subscale	38.26	.00	.13
ACV-M F-on-M	Female-on-male subscale	34.93	.00	.12

ACV = Acceptance of Couple Violence.

physical and sexual perpetration (PDR) between masculine participants (M = 36.09, SD = 14.44) compared to feminine (M = 20.73, SD = 5.21) participants. These differences suggested a large effect size, where those reporting more masculinity reported greater amounts of past physical and sexual perpetration compared to feminine participants. The strength of the relationship between masculinity and perpetration appears strong and counselors can use this information when making informed, data-driven clinical decisions. Furthermore, upon evaluating results for the SD-PAP variable, post-hoc pairwise comparisons indicated statistical significance ($p < .01$, $\eta^2_P = .12$) on reporting levels of psychological and emotional perpetration (PDR) between masculine participants (M = 28.34, SD = 10.64) compared to feminine (M = 17.86, SD = 4.60) participants. These mean differences identified a moderate effect size in that males and females, indicating more masculinity reported greater amounts of past psychological and emotional perpetration compared to participants reporting a feminine gender expression.

Research Question 2

To test the second research question exploring what differences exist between gender expressions (based on participants' assigned sex) of LGBTQ college students in their levels of attitudinal acceptance of IPV (ACV), we employed a two-way, between-subjects MANOVA identifying an overall statistically significant model (Table 2): $F(5, 258) = 9.57$, $p < .01$; Pillai's Trace = .16; Wilks's lambda = .84; partial eta squared (η^2_P) = .16, indicating a large effect size. The strength of the relationship between gender expression and attitudes of IPV was strong, suggesting that whether someone identifies as masculine or feminine strongly relates to their attitudes and perceptions of same-sex IPV. Univariate tests using the Bonferroni adjustment ($p = .025$)

identified statistically significant differences (Table 2) for all five attitudinal acceptance dependent variables. The attitudinal acceptance of general IPV (ACV) and the female-on-male subscale indicated a large effect size; the male-on-male IPV, male-on-female violence, and female-on-female violence identified medium effect sizes. Post-hoc comparisons indicated statistical significance ($p < .01$, $\eta^2_P = .14$) with a large effect size in self-reported attitudinal acceptance of IPV between masculine participants ($M = 34.93$, $SD = 13.17$) compared to feminine participants ($M = 20.46$, $SD = 6.52$): participants identifying a masculine gender expression accepted IPV more and the relationship appears strong when compared to feminine participants. Next, when evaluating results for the male-on-male IPV variable, post-hoc comparisons indicated statistical significance ($p < .01$, $\eta^2_P = .13$) with a moderate effect size in self-reported male-on-male attitudinal acceptance of IPV between masculine participants ($M = 6.27$, $SD = 2.29$) compared to feminine participants ($M = 3.70$, $SD = 1.40$), indicating that participants identifying a masculine gender expression accepted male-on-male IPV compared to feminine participants. Subsequently, after evaluating results for the male-on-female variable, post-hoc comparisons indicated statistical significance ($p < .01$, $\eta^2_P = .09$) with a moderate effect size on self-reported levels of male-on-female attitudinal acceptance of IPV between masculine participants ($M = 5.66$, $SD = 2.53$) compared to feminine ($M = 3.32$, $SD = 0.85$) participants. These results identified that masculine participants accepted male-on-female IPV more than their feminine complements.

In evaluating results for the female-on-female variable, post-hoc comparisons indicated statistical significance ($p < .01$, $\eta^2_P = .13$) with a moderate effect size on self-reported female-on-female attitudinal acceptance of IPV between masculine participants ($M = 6.21$, $SD = 2.48$) compared to feminine participants ($M = 3.52$, $SD = 1.10$). These results identified that masculine participants accepted female-on-female IPV more than feminine participants accepted same-sex female IPV. After evaluating results for the female-on-male variable, post-hoc comparisons indicated statistical significance ($p < .01$, $\eta^2_P = .12$) with a moderate effect size on self-reported female-on-male attitudinal acceptance of IPV between masculine participants ($M = 6.34$, $SD = 2.54$) compared to feminine participants ($M = 3.59$, $SD = 1.18$). These results identified that masculine LGBTQ co-eds accepted female-on-male IPV at higher levels compared with feminine participants.

Limitations

The findings from the study were drawn from data with a low response rate, creating a limitation in generalizing the results. Researchers (Riggle, Rostosky, & Reedy, 2005; Wheeler, 2003) noted the importance of trust in conducting

research within the LGBTQ community, making note of the challenges that present when attempting to conduct research with a marginalized group. For example, LGBTQ-identifying samples may provide low response rates due to fear and mistrust of the information uncovering shortcomings or the risk of researchers reinforcing stigmas about their community (Riggle et al., 2005; Wheeler, 2003). Furthermore, survey research comparing web- and mail-based surveying continues to produce inconsistent findings (e.g., Greenlaw & Brown-Welty, 2009; Shih & Fan, 2009; Converse, Wolfe, & Oswald, 2008). For the most part, web-based surveys produce lower response rates compared to mail surveys (Shih & Fan, 2009); one exception exists where a web-based survey returned a higher response rate compared to those surveys sent via mail (Greenlaw & Brown-Welty, 2009). Nonetheless, these inconsistent findings in response rates may present in the literature due to differences in study design or study administration (Couper & Miller, 2008; Dillman et al., 2008). As a whole, low response rate studies carry potential as a viable tool yet results must be interpreted with caution.

Another limitation to this study included threats to validity such as testing threat, meaning that the responses to the first instrument influenced the answers to subsequent instruments' items. In addition, the sample included predominately White college students, creating a limitation in generalizing the results and suggesting the need to increase ethnic, race, and education level variance within the sample. In regard to instrument questions, we measured gender expression including femininity to masculinity on a 6-item, Likert-type scale ranging from 1 (*feminine*) to 6 (*masculine*). However, the participants' self-reporting masculinity and femininity does create limitations in reproducing the study considering individuals' variability in defining femininity versus masculinity. Thus, future research warrants the use of a psychometrically sound femininity–masculinity measurement. However, due to the limited amount of instrumentation normed for LGBTQ-identifying college students, the results from this study contribute to the body of counseling literature and measurement error was low considering the previously reported validity and reliability of the normed scales.

DISCUSSION

Outcomes from this research add to the limited body of literature regarding risk and protective factors of same-sex IPV. Findings from this study support and challenge prior research on comparable middle-aged study samples (e.g., Balsam & Szymanski, 2005; McKenry et al., 2006). These results identified that those reporting greater masculinity tended to report higher amounts of victimization and perpetration compared to their feminine counterparts. Specifically, masculine females and males reported higher levels of

victimization and perpetration. A possible explanation includes the fact that females identifying as masculine could experience masculine gender-role expectations (e.g., aggressive, strong, hard), and these assumed expectations might influence these masculine females perpetrating more than feminine females. In other words, many of the females in this sample identified as masculine, and an associated behavior with masculinity includes aggression, which potentially explained the high rates of female perpetration. These explanations remain consistent with past research identifying that perpetrators appear more masculine, regardless of assigned biological sex (e.g., McKenry et al., 2006; Seelau & Seelau, 2005). Additionally, masculine females reported greater attitudinal acceptance of IPV, which potentially influences their perpetrating behaviors. LGBTQ individuals often report internalized homophobia (McKenry et al., 2006) that may influence verbal and physical perpetration. Finally, masculine females reported victimization, which may be result of their perpetrating partners may have expected them to express their gender within social norms (i.e., females must express themselves in a feminine nature, not through masculinity). The results identified that masculine, male participants self-reported greater victimization and greater acceptance of IPV, indicating that victims and perpetrators justify violence in their relationships.

When considering the results for the attitudinal acceptance variables, masculine LGBTQ college students contained higher levels of attitudinal acceptance of IPV in general when compared with their feminine equivalents, which is consistent with data using heterosexual samples (e.g., Seelau & Seelau, 2005). Furthermore, when using gender expression as a more accurate identifier of potential victimization, perpetration, and attitudinal acceptance, those mostly associated with masculinity reported greater acceptance of IPV than their feminine counterparts. These possibilities in explaining the findings could suggest the need to modify same-sex IPV theory (e.g., McKenry et al., 2006) to include assigned biological sex and gender expression in conceptualizing IPV.

Implications for Practice and Research

Altogether, results from this investigation produce new information for helping professionals working with LGBTQ clients, including that counselors consider assigned sex and gender expression when assessing risk and protective factors of IPV. Counselors necessitate the understanding that in an emerging adult same-sex couple, college students identifying and presenting as more masculine become at risk for perpetrating violence in their relationship. On the contrary, counselors need awareness on the risk to victimization that those presenting as feminine experience. For example, the knowledge

of these risk and protective factors along with practical implications such as incorporating a sex role type inventory and IPV assessments appears pertinent to capturing a true picture of college student characteristics posing more risk or protection to victimization and perpetration. In addition to contributing to the body of counseling literature, results of the study inform the practice of many helping professionals and provide knowledge on same-sex IPV for individuals apart of the LGBTQ community.

In the area of counselor competence, this study provides new research indicating the need to challenge misconceptions about same-sex IPV considering the high amounts of violence in these relationships. Furthermore, counselors need to understand demographics contributing to risk and protective factors of IPV to effectively work with LGBTQ-identifying college students. In addition, the results identify indicators in the form of physical traits and expressiveness that may highlight one's potential for victimization or perpetration. Thus, helping professionals can use the research to guide their own decision making in IPV assessment when working with same-sex college student couples. Counselors' knowledge that those identifying as masculine tend to accept violence more than their feminine counterparts can inform counselors' practice and psychoeducational approaches to reducing acceptance within this subgroup of the LGBTQ college student community. Lastly, the study findings offer a foundation to other researchers exploring and examining IPV manifesting in the LGBTQ college population; it may be that issues around power and control in heterosexual couples differ from those issues presenting within same-sex intimate relationships. Still, future research needs to examine factors such as gender expression and attitudinal acceptance of IPV to better understand same-sex victimization and perpetration in intimate relationships.

CONCLUSION

Healthy relationship development is an important consideration when counseling LGBTQ college students, as the patterns that these emerging adults develop during this time may carry out into their older adulthood relationships. Considering these emerging adult college students are early in their development, prevention and intervention of IPV remains a necessity in reinforcing healthy relationship patterns while decreasing risk factors of IPV. Findings from the study suggest that risk factors of IPV include those identifying as masculine may be prone to perpetration and feminine-identifying LGBTQ college students may be at risk for victimization. Therefore, the developing trends of same-sex IPV provide LGBTQ college students and counselors with information to aide in the prevention and intervention of violence in intimate relationships.

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