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Attributions and Cognitive Closure: Stereotypes of Perpetrators and Victims of Child Sexual Abuse

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Abstract

Compared to low need for cognitive closure individuals, high need for cognitive closure individuals were expected to make the weakest causal and responsibility attributions about sexual abuse in dyads consisting of female adults and male adolescents compared to other dyads. To assess need for cognitive closure, 129 participants responded to 42 items on the Need for Cognitive Closure Scale utilizing a 5-point Likert scale. To assess attributions of perpetrator and victim dyads, these same participants responded to 12 items on an altered Relationship Attribution Measure utilizing a 5-point Likert scale. These hypotheses were only partially supported. Limitations of this study (e.g., using only self-report measures) and future directions (e.g., alter relationship between perpetrator and victim) for this research were also discussed.

Introduction

John Geoghan, a prisoner and former Catholic priest, was injured during an incident with another prisoner on August 23, 2002. Geoghan died later that day due to injuries inflicted during that incident. His death was attributed to an inmate who, along with other inmates, had banished Geoghan from their inner society. Geoghan was sentenced to approximately 10 years in prison for molesting a boy in a swimming pool ten years earlier. Although Geoghan was charged and sentenced for only one crime, he had been accused of molesting over 130 victims in thirty years (CNN, 2003). Clearly, even prisoners feel strongly that child sexual abusers should be condemned, but what constitutes childhood sexual victimization?

Definition of Childhood Sexual Abuse

Neither lawmakers nor researchers agree upon a standard definition of childhood sexual abuse (Helm, Cook, & Berezcz, 2005). United States Federal Government officials developed minimum standards that each state’s officials must follow when creating a state definition of childhood sexual abuse (Child Welfare Information Gateway [CWIG], 2005). A federal definition of childhood sexual abuse is any sexually explicit conduct or simulation of such sexual conduct with a child (42 U.S.C.A. § 1996). Federal officials who developed The Child Abuse Prevention and Treatment Act (CAPTA) define a “child” as a person not yet 18 years of age except in cases of childhood sexual abuse. In cases of childhood sexual abuse, officials in the state in which a victim resides determine definitions of a child (e.g., CAPTA, 42 U.S.C.A. § 1996).

State officials define childhood sexual abuse differently than do federal officials. In Florida, for example, childhood sexual abuse is defined as any sexual contact or intentional touching between genitals or anal opening of a victim and mouth or tongue of a perpetrator (Child Welfare Information Gateway [CWIG], 2005). Additionally, Florida state officials also define childhood sexual abuse as a sexual act against a victim less than 16 years of age (FL. ST. ANN., 2005). Oklahoma officials, however, define childhood
sexual abuse as a sexual act such as rape, incest, lewd or indecent acts, or proposals of such acts, by an individual responsible for a child’s health, safety, or welfare (OKL. ST. ANN., 2006). Additionally, Oklahoma state officials define childhood sexual abuse as a sexual act against a victim less than 14 years of age (OKL. ST. ANN., 2006).

Definitions of childhood sexual abuse not only vary from state to state but also vary from scholar to scholar. Burton, Miller, and Shill (2002), for example, include physical force and threats of sexual acts such as penetration, fondling, and exhibitionism as a definition in their research. Other scholars define childhood sexual abuse as kissing or touching in a sexual way, or forcing someone to kiss or touch in a sexual way when a victim is less than 18 years of age and a perpetrator is 5 or more years older than a victim (Briere & Elliott, 2003).

Unlike lawmakers and scholars, national health and welfare organizations generally agree on definitions of childhood sexual abuse. Officials at the American Academy of Pediatrics and officials at the National Center for Injury Prevention and Control define childhood sexual abuse as contact between a body part of a perpetrator and a body part of a victim by threat, intimidation, or force on a victim less than 18 years of age. The Child Welfare Information Gateway officials similarly define childhood sexual abuse. Officials of that organization, however, do not define a difference in age between perpetrator and victim of childhood sexual abuse (CWIG, 2005).

Prevalence

Perhaps variances in definitions influence individuals’ estimates of the frequency of childhood sexual victimization. Because of ambiguity in definitions, individuals may assume that childhood sexual abuse is an infrequent occurrence. Researchers, however, have found evidence to the contrary. Childhood sexual abuse is prevalent for both male and female victims (e.g., Faller & Henry, 2000; Walker, Carey, Mohr, Stein & Seedat, 2004). Sociologist David Finkelhor (1994) reported childhood sexual abuse is found in nonclinical populations in countries such as Costa Rica, France, and the United States. Finkelhor also reported 7% to 36% of females and 3% to 29% of males in North America reported histories of childhood sexual abuse. Moreover, reported numbers of childhood sexual abuse cases may be small compared to the actual incidence of childhood sexual abuse due to lack of reporting by victims (e.g., Finkelhor, 1994; Helm, et al., 2005; Shumba, 2004).

Childhood sexual abuse cases are underreported (Denov, 2003). One reason for this underreporting may be that victims of childhood sexual abuse fear disclosing their abuse (Back & Lips, 1998). These researchers note children’s lack of reporting sexual abuse may be due to fear of being blamed for their victimization. Furthermore, Finkelhor (1980) reported that childhood sexual abuse victims may not report their abuse because they did not realize what was being done to them was sexual abuse. Berlinger and Conte (1990) also reported that a majority of the children in their study did not initially realize they were being sexually abused.

Consequences of childhood sexual abuse

Some childhood sexual abuse victims may exhibit childhood sexual behaviors (Bonner, Walker, & Berlinger, 1999). That is, childhood sexual abuse victims tend to engage in behaviors that indicate greater sexual knowledge than is reasonable or appropriate for a child. A six-year-old boy who talks of oral sex acts, for example, would not be expected to know about oral sex unless he had witnessed or experienced such acts
Behaviors that may indicate precocious sexual knowledge range from non-contact behavior, such as making sexual remarks, to contact behavior, such as inappropriately rubbing against other children or touching other children’s genitals.

Additionally, victims of childhood sexual abuse may experience trauma across a lifespan (Banyard, Williams, & Siegel, 2001). Compared to adults not sexually abused in childhood, adults who were sexually abused in childhood may have different attachment styles in intimate relations (Colman & Widom, 2004). Adults sexually abused in childhood may, for example, have a propensity for less overall quality and stability of romantic partnerships compared to adults not sexually abused in childhood. Adults who received poor parental treatment in addition to being victims of childhood sexual abuse may suffer from high levels of depression and anxiety, and low levels of self-esteem (Roberts, O’Connor, Dunn, & Golding, 2004).

Perpetrator demographics

A number of researchers have reported that perpetrators of childhood sexual abuse are usually male (Helm et al., 2005; Seldak and Broadhurst, 1996; Dhaliwal et al. 1996). In other words, perpetrators of childhood sexual abuse are not usually females. Another researcher notes that this failure to identify females as perpetrators may in part be individuals’ inability to view females as perpetrators of child sexual abuse (Denov, 2004). This researcher also reported that failing to consider females as perpetrators may have dangerous implications for victims (e.g., lack of protection for targets of female perpetrators). Regardless of individuals’ perceptions, both males and females can be perpetrators of childhood sexual abuse (Burton, et al., 2002). Other researchers also suggest that the number of female perpetrators of childhood sexual abuse is underestimated and underreported (Briere & Elliott, 2003; Lewis & Stanley, 2000, respectively).

Colman and Widom (2004) reported perpetrators of childhood sexual abuse may sexually abuse as adults because they were victims of childhood sexual abuse (e.g., Loeb, Rivkin, Williams, Wyatt, Carmona, & Chin, 2002). Perpetrators in several studies, for example, report having been victims of childhood sexual abuse (e.g., Bumby & Hansen, 1997; Burton et al., 2002; Denov, 2004). Additionally, other researchers reported that perpetrators of child sexual abuse may have been maltreated as children, thereby forming poor quality attachments and decreasing their ability to competently function within interpersonal relationships with adults (Marshall, Serron, & Cortoni, 2000). In a study of inmate and non-inmate participants, Bumby and Hansen (1997) found that perpetrators of
childhood sexual abuse reported less intimacy with male and female friends than did non-
perpetrating inmates and non-inmates. These researchers also found that childhood sexual
abuse perpetrators reported greater fear of intimacy with friends and more over-all
emotional and social loneliness than did other non-perpetrating inmates and non-inmates.
Additionally, male perpetrators of childhood sexual abuse may have anxiety related to
intimate relationships. Perpetrators may, therefore, pursue intimate relations with children
to decrease a possibility of rejection (Bumby & Hansen, 1997).

Finkelhor (1990) reported most perpetrators of childhood sexual abuse have
personal relations with their victims. In a study surveying male and female college
students, Helm et al., 2005) reported that most of the childhood sexual abuse reported in
their study was perpetrated by an uncle or cousin. These researchers also reported that a
majority of childhood sexual abuse took place in victims’ homes and neighborhoods.
Other researchers reported that male victims of childhood sexual abuse are likely to be
sexually abused by strangers whereas female victims are likely to be sexually abused by
family members (Finkelhor, Hotaling, Lewis, & Smith, 1990). These researchers also
reported that 33% of female victims and 42% of male victims in their study did not report
their abuse to anyone prior to that study. In addition, one common risk factor of being a
victim of childhood sexual abuse reported in that study was living in a home without both
birth parents (Finkelhor et al., 1990). In contrast to a variety of researchers, Sedlak and
Broadhurst (1996) reported that over 25% of perpetrators in their study who committed
child sexual abuse were birth parents of their victims. Conversely, nearly 75% of
remaining perpetrators were other family members or acquaintances of their victims.
These researchers also reported nearly 89% of perpetrators of childhood sexual abuse in
their study were male and nearly 12% of perpetrators in their study were female. Other
researchers reported similar numbers when comparing male and female perpetrators (e.g.,
Silverman, Reinherz, & Giaconia, 1996; Finkelhor et al., 1990). It must once again be
noted that these differences in reported statistics may actually be a reflection of
differential reporting of male versus female perpetrated cases rather than actual
differences in rates of perpetration by males versus females.

Victim Demographics
Researchers report varied rates of childhood sexual abuse. Perhaps rates of
childhood sexual abuse vary because of disclosure discrepancies. Finkelhor (1980), for
example, reported that few male or female victims of childhood sexual abuse report being
sexually abused. Other researchers also reported that victims of childhood sexual abuse
may not perceive what is being done to them as sexual abuse and therefore may not
report their abuse (e.g., Dhaliwal et al. 1996; Finkelhor et al., 1990). Heru (2001)
reported that male victims of childhood sexual abuse may fear being stigmatized as
homosexual and therefore may not report their victimization. Male victims of childhood
sexual abuse, who report their victimization and who are not taken seriously, may be
victimized a second time by authorities and health care providers and may not be
provided needed care (e.g., Heru, 2001; Denov, 2003).

There are several examples of varied rates of childhood sexual abuse. Researchers
Cyr, Wright, McDuff, and Perron, (2002) reported that only 16% of males compared to
27% of females in their study reported being a victim of childhood sexual abuse.
Silverman et al. (1996) reported that females are eleven times more likely than males to
report childhood sexual abuse. Additionally, Helm et al. (2005) reported that only one victim of childhood sexual abuse in their study reported being sexually abused to police. Childhood sexual abuse may begin in infancy and may occur throughout adolescence (Trickett & Putnam, 1998). Researchers usually focus on female victims rather than male victims of childhood sexual abuse (e.g., Colman & Widom, 2004; Loeb et al., 2002). The general public has not yet accepted the problem of male childhood sexual abuse (Holmes, Offen, & Waller, 1997). Finkelhor (1994) reported females are 1.5 to 3 times more likely than males to become victims of childhood sexual abuse (cf. Silverman et al., 1996). Children from low income families (i.e., less than $15,000 a year) were more likely than children from higher income families to be victims of childhood sexual abuse (Sedak & Broadhurst, 1996).

A majority of childhood sexual abuse victims know their abuser(s) (Berlinger & Conte, 1990). Finkelhor (1994) reported intrafamily childhood sexual abuse is more common for female victims than for male victims. That is, female victims are more likely than male victims to be abused by family members. Furthermore, male victims are more likely than female victims to be abused by family friends and acquaintances. Berlinger and Conte (1990) also reported that of their sample of sexually abused children nearly half had been sexually abused by more than one person. Researchers Cyr, et al., (2002) reported increasing rates of childhood sexual abuse by siblings.

Stereotyping

Given the prevalence of child sexual abuse and the serious consequences for individuals and society, why do individuals hold such different perceptions of perpetrators and victims of child sexual abuse? One reason may be individuals’ reliance upon stereotypes and particularly stereotypes of males and females.

People have limited cognitive energy available to process and react to everyday events. In other words, people can only process a limited amount of information at one time. People use stereotypes, therefore, as a way to conserve cognitive resources (Hilton & von Hippel, 1996; Snyder & Miene, 1994). That is, stereotypes are shortcuts people use to save cognitive energy.

Stereotypes can be defined as beliefs (i.e., what a person accepts to be true) about people based on group membership (e.g., Howard, 1984; Macrae, Milne & Bodenhausen, 1994; Snyder & Miene, 1994). Dixon (2005) reported that men are stereotyped as sexually aggressive (i.e., sexually forceful), and women are stereotyped as sexually passive (i.e., sexually weak). Male perpetrators of child sexual abuse are frequently portrayed in the media. Conversely, female perpetrators of child sexual abuse are infrequently portrayed in the media.

Three components of stereotype use are cognitive, affective, and behavioral (Fiske, 1998). The cognitive component of stereotype use consists of what people think about a person. That is, to what people pay attention, attribute action, recall, and infer about a person.

The affective component of stereotype use consists of how people feel about a person. People can feel positive or negative feelings about a person. Positive feelings are prejudices for a person (e.g., some people may like all female neighbors) and negative feelings are prejudices against a person (e.g., some people may dislike all male neighbors).
The behavioral component of stereotype use consists of action(s) taken toward or against a person (i.e., discrimination). Discrimination toward a person may be positive (e.g., people who like all female neighbors may let their child spend time with any female neighbor). Discrimination against a person may be negative (e.g., people who dislike all male neighbors may not let their child spend time with any male neighbor).

The cognitive component of stereotype use can be separated into four elements: (a) attention, (b) attribution, (c) memory, and (d) inference. People who use stereotypes pay more attention to stereotype-confirming rather than stereotype-disconfirming information (e.g., Fiske, Neuberg, Beattie, & Milberg, 1987). When presented with sexual predators in the media, for example, people may attend more to that information when a sexual predator is male (stereotype-confirming) than when a sexual predator is female (stereotype-disconfirming). People validate previously-stored knowledge because they attend more to stereotype-confirming information than to stereotype-disconfirming information (Hilton and von Hippel, 1996). If an individual, for example, believes women are sexually submissive and incapable of being sexual predators, that individual may attend to information that matches that belief.

People not only stereotype individuals by selectively attending to their social world, people may also use a stereotype by making attributions about individuals’ behavior. People make attributions about behavior to identify a cause for behavior (e.g., Fincham & Bradbury, 1992; Hilton & von Hippel, 1996). People may attribute a person’s behavior to something internal (i.e., a person’s disposition) or to something external (i.e., a person’s situation). When a male rapist is presented in the media, for example, people may interpret that male rapist’s behavior as caused by something internal (e.g., a man is sexually aggressive). Conversely, when a female rapist is presented in the media people may interpret that female rapist’s behavior as caused by something external (e.g., a woman is not sexually aggressive but mistook a sexual situation as mutually desirable).

People not only use stereotypes when making attributions about individuals’ behavior, people also remember more stereotype-confirming information than stereotype-disconfirming information (Hilton & von Hippel, 1996). When, for example, a male rapist and a female victim (i.e., stereotype-confirming) are presented in the media, people may easily recall other media reports about male rapists and female rape victims. Conversely, when a female rapist and a male rape victim (i.e., stereotype-disconfirming) are presented in the media, people may have difficulty recalling other reports of female rapists and male rape victims. When people are asked to recall rape stories presented in the media, for example, those people may recall stories of male rapists and female rape victims (i.e., stereotype-confirming) rather than female rapists and male rape victims (i.e., stereotype-disconfirming).

People not only remember more stereotype-confirming information than stereotype-disconfirming information, people also infer stereotype-confirming information when explanations for situations are ambiguous (Hilton & von Hippel, 1996). When presented with a media story, for example, people may often infer (i.e., fill in the gaps with previously-stored knowledge) that a rapist is male and a victim is female (stereotype-confirming) when that portion of a storyline is ambiguous. Conversely, when presented with a media story, people may seldom infer that a rapist is female and a victim is male (stereotype-disconfirming) when that portion of a storyline is ambiguous.
Prejudice is the affective component of stereotype use (Snyder & Miene, 1994). Those researchers also state that prejudice is a way a person feels about certain groups of people. Often peoples’ prejudices are negative evaluations of groups of people (Hilton & von Hippel, 1996). People, for example, may feel men are sexual aggressors. Those people therefore may feel uncomfortable allowing their children to spend time with men. However, prejudice feelings are not always negative. People, for example, may feel women are nurturing. Those people may, therefore, feel comfortable allowing their children to spend time with women.

Just as prejudice is the affective component of stereotype use, discrimination is the behavioral component of stereotype use (Fiske, 1998). A parent may discriminate negatively (i.e., give negative treatment) against male neighbors if that parent does not allow his or her child to spend time with male neighbors. Conversely, a parent may discriminate positively (i.e., give favorable treatment) toward female neighbors if that parent allows his or her child to spend time with female neighbors.

In summary, people use stereotypes as a means of economizing cognitive energy. In so doing, people pay more attention to and remember more stereotype-confirming information than stereotype-disconfirming information. People also infer stereotype-confirming information when details of a situation are ambiguous. Additionally, people selectively make attributions about a person’s behavior. People are also selectively prejudiced based on that person’s stereotypes about groups of people. Furthermore, people selectively discriminate based on their prejudices through actions taken against other people. In brief, people who use stereotypes may do so because these people wish to achieve answers quickly. People may rely upon stereotypes to different degrees. Stereotype use may be linked to how an individual attributes causality and responsibility in an adult-adolescent sexual encounter.

**Attribution**

An attribution is a judgment made by a person when assigning explanations of causality and responsibility to events with negative consequences (Shaver & Drown, 1986). There are three dimensions of causality and responsibility attributions. Three dimensions of causality are locus of a cause, stability of a cause, and globality of a cause (Fincham & Bradbury, 1992). Locus of a cause is whether a cause is internal (i.e., something about a person) or external (i.e., something about a situation). In terms of perpetrators, an internal cause in an adult-adolescent sexual encounter, for example, may be a perpetrator’s lack of social skills with same-age individuals. Conversely, an external cause in an adult-adolescent sexual encounter may be a perpetrator having been seduced by a victim. In terms of victims, an internal locus of cause in an adult-adolescent sexual encounter, for example, may be a victim’s lack of quality relationships with adults. Conversely, an external cause in an adult-adolescent sexual encounter may be a victim’s pressure by peers to take part in sexual activity.

Stability of a cause is whether a cause is likely to be consistent or a cause is likely to change (Fincham & Bradbury, 1992). In terms of perpetrators, a stable cause, for example, in an adult-adolescent sexual encounter may be a perpetrator’s lack of social skills. Conversely, an unstable cause in an adult-adolescent sexual encounter may be a perpetrator having been intoxicated. In terms of victims, a stable cause in an adult-adolescent sexual encounter, for example, may be a victim’s inability to make of same-
age friends. Conversely, an unstable cause in an adult-adolescent sexual encounter may be a victim’s crush on one adult.

Globality of a cause is whether a cause is likely to affect many areas of a person’s life or specific areas of a person’s life (Fincham & Bradbury, 1992). In terms of perpetrators, a global cause in an adult-adolescent sexual encounter, for example, may be a perpetrator’s general lack of self control. Conversely, a specific cause in an adult-adolescent sexual encounter may be a perpetrator’s obsession with pre-pubescent blonde children. In terms of victims, a global cause in an adult-adolescent sexual encounter may be that a victim misleads people in general to believe he or she is 18 years old. Conversely, a specific cause in an adult-adolescent sexual encounter may be that a victim misleads a specific adult to believe that this victim is 18 years old.

Just as causality has three dimensions, there are three dimensions of responsibility. The three dimensions of responsibility are intentionality of an act, motivation of an act, and blameworthiness of an act (Fincham & Bradbury, 1992). Responsibility attributions can be made about perpetrators as well as victims. Intentionality of an act is whether an act is deliberately committed or inadvertently committed. In terms of perpetrators, an adult may, for example, pursue a sexual encounter with an adolescent by intentionally arranging a meeting in private. Conversely, an adult may have a sexual encounter with an adolescent after they inadvertently find themselves alone for other than sexual reasons (e.g., baby sitting). In terms of victims, an adolescent may, for example, pursue a sexual encounter with an adult by intentionally arranging a meeting in private. Conversely, an adolescent may have a sexual encounter with an adult after they inadvertently find themselves alone for other than sexual reasons (e.g., being looked after by an adult family friend).

Motivation of an act is whether an act is selfishly pursued or unselfishly pursued (Fincham & Bradbury, 1992). In terms of perpetrators, a selfishly motivated adult-adolescent sexual encounter, for example, may be a sexual encounter which is acted upon by an adult solely for his or her own sexual gratification. An unselfishly motivated adult-adolescent sexual encounter may be a sexual encounter which is acted upon after an adult physically comforts an emotionally distraught adolescent. In terms of victims, a selfishly motivated adult-adolescent sexual encounter, for example, may be a sexual encounter which is acted upon by an adolescent solely for his or her own emotional neediness. An unselfishly motivated adult-adolescent sexual encounter may be a sexual encounter which is acted upon after an adolescent physically comforts an emotionally distraught adult.

Blameworthiness of an act is whether an individual deserves to be blamed for an act or whether there is justification for an act (Fincham & Bradbury, 1992). In terms of the perpetrator, individuals may blame a female perpetrator of an adult-adolescent sexual encounter, for example, if she coerced a resistant victim. Conversely, individuals may justify a female perpetrator of an adult-adolescent sexual encounter if she is considered a sexual tutor to a male victim. In terms of a victim, individuals may blame a victim of an adult-adolescent sexual encounter, for example, if that victim promiscuously pursues a resistant adult. Conversely, individuals may not blame a victim of an adult-adolescent sexual encounter if that victim is pursued by an adult. How an individual uses stereotypes and attributes causality and responsibility in an adult-adolescent sexual encounter may be linked to that individual’s need for cognitive closure.

Need for Cognitive Closure
People who seek answers quickly and permanently may be high in need of cognitive closure. Individuals high in need for cognitive closure may use stereotypes as a means of cognitive economy. Need for cognitive closure is a motivation regarding information processing and judgment (Webster & Kruglanski, 1994). Both information processing and judgment are cognitive processes. Individuals use these cognitive processes when they experience a need to understand a situation or obtain an answer (i.e., any answer) to a question (Kruglanski & Webster, 1996). One situation, for example, may be when a jury is judges a defendant on a child sexual abuse charge. Need for cognitive closure is a desire to obtain clear and confident knowledge of a topic without confusion or ambiguity (e.g., Higgins & Kruglanski, 2000; Shiloh, Koren, & Zakay, 2001).

How individuals process information may affect their desire for clear and confident knowledge (Kruglanski & Webster, 1994). High need for cognitive closure individuals seize incoming information (i.e., accept information quickly) may freeze that information (i.e., preserve that information permanently). High need for cognitive closure individuals, compared to low need for cognitive closure individuals, will use less cognitive energy during decision making when they seize and freeze information presented to them. Jurors high in need for cognitive closure, for example, may decide that a defendant in a child sexual abuse case is guilty as presented by a prosecuting attorney (i.e., seize information). Additionally, those same jurors may hold on to that information permanently (i.e., freeze information) and refuse to consider that a defendant in a child sexual abuse case is not guilty as presented by a defense attorney. Jurors, for example, high in need for cognitive closure may not wait until presented with information from both a prosecuting and a defending attorney before making a decision about a defendant’s guilt.

Low need for cognitive closure individuals do not seize or freeze incoming information. Jurors low in need for cognitive closure, for example, may not decide that a defendant in a child sexual abuse case is guilty as presented by a prosecuting attorney. Jurors low in need for cognitive closure may wait until presented with information from both a prosecuting and a defending attorney before making a decision about a defendant’s guilt.

There are five elements to need for cognitive closure: discomfort with ambiguity, desire for predictability, preference for order and structure, decisiveness, and close-mindedness (Webster & Kruglanski, 1994). One element of need for cognitive closure is discomfort with ambiguity. Ambiguity is an individual’s uncertainty about an issue. For many high need for cognitive closure individuals ambiguity is not only uncomfortable but may be interpreted as a threat to cognitive closure (Webster & Kruglanski, 1994). High need for cognitive closure individuals may seek answers to questions to reduce discomfort with ambiguity (Houghton & Grewal, 2000). A high need for cognitive closure juror, for example, may seize and freeze information presented by a prosecuting attorney in order to reduce ambiguity about a defendant’s guilt. Conversely, a low need for cognitive closure juror may not seize and freeze information presented by a prosecuting attorney in order to reduce ambiguity about a defendant’s guilt. A low need for cognitive closure juror may consider additional information presented by a defense attorney in order to make a determination about a defendant’s guilt.
A second element of need for cognitive closure is desire for predictability. Predictability is an unchallenged knowledge which can be relied upon in varying circumstances without exception (Webster & Kruglanski, 1994). In other words, predictability is an ability to forecast the future. Once a prediction is made, an individual may act as that individual deems appropriate (e.g., voting a defendant guilty or not guilty in a child sexual abuse case). High need for cognitive closure individuals, more than low need for cognitive closure individuals, desire predictability. A high need for cognitive closure juror, for example, may desire to predict an outcome of a child sexual abuse trial early in trial processes. A high need for cognitive closure juror may therefore apply that prediction when voting on a defendant’s guilt. Conversely, a low need for cognitive closure juror may have no desire to predict an outcome of a child sexual abuse trial early in trial processes. A low need for cognitive closure juror cannot therefore apply that prediction when voting on a defendant’s guilt.

A third element of need for cognitive closure is preference for order and structure. Environmental order and structure are important to some individuals. High need for cognitive closure individuals, more than low need for cognitive closure individuals, prefer order and structure of their environment (Webster & Kruglanski, 1994). High need for cognitive closure individuals may therefore order and structure their environment to reduce a feeling of anxiety during decision making (Thompson, Naccarato, Parker, & Moskowitz, 2001). In other words, high need for cognitive closure individuals use order and structure to create a favorable environment for decision making (Houghton & Grewal, 2000). A high need for cognitive closure juror, for example, may insist that deliberating procedures in a child sexual abuse case be ordered and structured to reduce anxiety related to voting on a defendant’s guilt. Conversely, a low need for cognitive closure juror may not insist that deliberating procedures in a child sexual abuse case be ordered and structured to reduce anxiety related to voting on a defendant’s guilt.

A fourth element of need for cognitive closure is decisiveness. Decisiveness is an ability to make decisions (Webster & Kruglanski, 1994). High need for cognitive closure individuals may be decisive in a judgment because they have an urgent desire to reach closure on a topic. Low need for cognitive closure individuals may not be decisive in a judgment because they do not have an urgent desire to reach closure on a topic. A high need for cognitive closure juror, for example, may make a judgment about a defendant’s guilt because that juror seeks to bring a topic of guilt to a close. A low need for cognitive closure juror may not make a judgment about a defendant’s guilt because that juror does not seek to bring a topic of guilt to a close.

Finally, a fifth element of need for cognitive closure is close-mindedness. Close-mindedness is an unwillingness to have an opinion confronted by alternative opinions or with inconsistent information that has already been accepted (Webster & Kruglanski, 1994). High need for cognitive closure individuals may be closed-minded. Conversely, low need for cognitive closure individuals may be open-minded. A high need for cognitive closure juror, for example, may be close-minded when presented with a defense attorney’s version of a child sexual abuse case after that juror has been exposed to a prosecutor’s version of that same case. A low need for cognitive closure juror, however, may be open-minded when presented with a defense attorney’s version of a child sexual abuse case after that juror has been exposed to a prosecutor’s version of that same case.
There are additional aspects of need for cognitive closure. Situational factors may contribute to an individual’s motivation for cognitive closure (Doherty, 1998). In other words, there are situations when low need for cognitive closure individuals may seek cognitive closure and high need for cognitive closure individuals may avoid cognitive closure. Webster and Kruglanski (1994) reported low need for cognitive closure individuals may seek cognitive closure when they experience mental fatigue, time pressure, or task unattractiveness. A low need for cognitive closure juror, for example, may seek cognitive closure in a child sexual abuse case after many hours of deliberation about a defendant’s guilt. Conversely, high need for cognitive closure individuals may not seek cognitive closure when they experience mental fatigue, time pressure, or task unattractiveness. A high need for cognitive closure juror, for example, may not seek cognitive closure in a child sexual abuse case after many hours of deliberation about a defendant’s guilt.

Webster and Kruglanski (1994) also reported high need for cognitive closure individuals may seek to avoid cognitive closure if they experience pleasure when thinking about a specific topic. A high need for cognitive closure juror, for example, may seek to avoid cognitive closure in a child sexual abuse case because that juror enjoys thinking about details regarding guilt or innocence of a defendant.

Another situational factor known as evaluation apprehension may also contribute to an individual’s need for cognitive closure (Chirumbolo, Mannetti, Pierro, Areni, & Kruglanski, 2005). Evaluation apprehension is a fear of being negatively evaluated by others (Leary, Barnes, Griebel, Mason, & McCormack, 1987). These researchers also reported individuals are motivated to maintain and enhance their self-esteem through social evaluation. A high need for cognitive closure juror, for example, may avoid cognitive closure in a child sexual abuse case for fear of being negatively evaluated by other jurors. A low need for cognitive closure individual may not avoid cognitive closure in a child sexual abuse case for fear of being negatively evaluated by other jurors.

High need for cognitive closure individuals may better recall and rely on stereotype-consistent information than they recall and rely on stereotype-inconsistent information during information processing (Dijksterhuis, van Kippenberg, Kruglanski, & Schaper, 1996; Neuberg, Judice, & West, 1997). Those researches also reported high need for cognitive closure individuals, more than low need for cognitive closure individuals, may rely on their stereotypes when considering people’s behavior (e.g., behavior of an accused defendant). Simply stated, high need for cognitive closure individuals recall, rely on, and prefer stereotype-consistent information to stereotype-inconsistent information when making a decision. Also, high need for cognitive closure individuals prefer information previously stored in memory (e.g., stereotypes) to new information (Neuburg et al., 1997).

Based on a review of previous literature we propose eight hypotheses. Our first four hypotheses are about perpetrators of child sexual abuse. We hypothesized first that participants would attribute stronger causality (i.e., locus, stability, and globality) and responsibility (i.e., intentionality, motivation, and blameworthiness) attribution when sexual dyads involved male rather than female perpetrators. We hypothesized second that participants would attribute stronger causality and responsibility attributions to perpetrators when sexual dyads involved female rather than male adolescents. We hypothesized third that there would be a two-way interaction such that participants would
make the weakest causality and responsibility attributions when sexual dyads involved a female perpetrator and a male victim compared to any of the other three dyads (i.e., female perpetrator/female victim, male perpetrator/female victim, and male perpetrator/male victim). We hypothesized fourth that there would be a three-way interaction such that high need for cognitive closure participants would be more likely than low need for cognitive closure participants to make the weakest causality and responsibility attributions when sexual dyads involved a female perpetrator and male victim compared to any of the other three dyads (i.e., female perpetrator/female victim, male perpetrator/female victim, and male perpetrator/male victim).

Our next four hypotheses are about victims of child sexual abuse. We hypothesized first that participants would attribute stronger causality (i.e., locus, stability, globality) and responsibility (i.e., intentionality, motivation, blameworthiness) attribution to victims when sexual dyads involved a female adult compared to a male adult. We hypothesized second that participants would make stronger causality and responsibility attributions when sexual dyads involved male rather than female adolescents. We hypothesized third that there would be a two-way interaction such that participants would make the weakest causality and responsibility attributions when sexual dyads involved a female adult and a male adolescent compared to any of the other three sexual dyads (i.e., female perpetrator/female victim, male perpetrator/female victim, and male perpetrator/male victim). We hypothesized fourth that there would be a three-way interaction such that high need for cognitive closure participants would be more likely than low need for cognitive closure participants to make the strongest causality and responsibility attributions when sexual dyads involved a female adult and a male adolescent compared to any of the other three sexual dyads (i.e., female perpetrator/female victim, male perpetrator/female victim, and male perpetrator/male victim).

**Method**

**Participants**

A total of 130 undergraduate students volunteered to participate in a study titled “Perceptions of Adult-Adolescent Sexual Encounters.” In exchange for their participation, students received extra credit toward their psychology course grades. Professors offered alternative options for extra credit (e.g., written reports on textbook chapters or peer-reviewed journal articles) for students who chose not to participate in research. Participants were required to be at least 18 years of age and participants could not have previously participated in similar studies conducted at the University of North Florida.

There were 41 male and 88 female participants in this sample. A majority (64%) of participants in this sample were White. Of the rest of this sample, 14% were Black, 9% were Hispanic, 7% were Asian or Pacific Islander, and 5% were other races. A majority (70%) of participants in this sample were between 18 and 24 years of age.

We received approval for this study from the University of North Florida’s Institutional Review Board before collecting data. We obtained a written informed consent from all participants. Participants were treated in accordance with the Ethical Principles of Psychologists and Code of Conduct (American Psychological Association, 2002). Of the 130 participants who volunteered for this study, 129 participants completed the entire survey. Of those participants who did not complete the entire survey, none were
male and one was female. We randomly assigned participants to one of four experimental groups.

Procedure

No more than 10 students participated in sessions of this study at one time. A female researcher greeted participants. She asked participants to turn off all pagers and cell phones to minimize interruption of other participants during this study.

This researcher handed a written informed consent form to participants and she reviewed this informed consent with them. She stated the only item containing personal identifying information was this informed consent form. She also stated that data gathered would be anonymous and confidential. She reminded participants that taking part in research is voluntary and that professors offered other extra credit options should participants choose not to participate in this study. She further explained to participants that if at any time they felt uncomfortable, they had the right to withdraw without penalty. She also explained participants would receive full credit for participation if they chose to withdraw from this study. She answered all questions and then asked participants to sign their informed consent form. She then collected participants’ signed informed consent forms.

Each participant then received an envelope which contained a scenario, a survey, and an answer sheet. Participants were told the purpose of and procedures for this study. Participants were told that they would be asked to read a scenario in which an adult and adolescent have a sexual encounter and would then be asked to respond to statements about what they read. Participants were randomly assigned to read one of four scenarios. Scenarios differed by sex of victim and sex of perpetrator. That is, a victim was either an eighth grade female or male neighbor and a perpetrator was either an adult female or adult male neighbor who agreed to keep an eye on that eighth grader while that eighth grader’s parents were out. A sample scenario involving a male adolescent and female adult is as follows:

Mark, is an eighth grader living next door to Ms. Jones. Mark’s parents asked Ms. Jones to keep an eye on Mark while they go out for the evening. Mark and Ms. Jones ordered pizza and ate while watching television. While together, Mark and Ms. Jones began to talk. Ms. Jones told Mark that she thought Mark was very mature for his age. Ms. Jones said that she thought Mark was very attractive. The neighbor placed her hand on Mark’s leg and began rubbing Mark’s body. Mark watched silently. Ms. Jones asked Mark to lie down on the couch, telling him he would enjoy this, that it would feel good. Mark did nothing. The neighbor continued rubbing Mark’s body and then slowly undressed him. When Mark was naked, the neighbor began kissing Mark’s body, starting with Mark’s face and working her way down to Mark’s thighs. Ms. Jones performed oral sex on Mark. Then the neighbor sat up and put Mark’s hand inside Ms. Jones’ slacks and asked Mark to rub the neighbor’s body as the neighbor had done to him. Then the neighbor undressed and laid on top of Mark while she fondled Mark’s buttocks. Ms. Jones brought Mark’s face down to her crotch and asked Mark to perform oral sex on the neighbor. Mark did as he was asked. Ms. Jones fondled Mark’s genitals as she continued to caress Mark’s body. Then Ms. Jones got up and brought Mark his clothes and asked him not to
tell his parents what had happened. The neighbor asked Mark that their relationship remain their secret.

After reading a scenario, participants responded to 12 statements adapted from the Relationship Attribution Measure (Fincham & Bradbury, 1992). Fincham and Bradbury developed this measure to assess two different types of attributions (i.e., causality and responsibility) for romantic partner behavior. We used these dimensions to measure participants’ causality attributions about perpetrator and victim dyads of an adult-adolescent sexual encounter. In making perpetrator and victim attributions, participants used a 5-point Likert scale with response options labeled strongly disagree, disagree, undecided, agree, and strongly agree. Participants first responded to three items about causality concerning the adult in these scenarios: locus (e.g., “The sexual encounter was due to something about the neighbor, such as the kind of person the neighbor is.”), stability (e.g., “The sexual encounter was due to something about the adult that is not likely to change.”), and globality (e.g., “The sexual encounter was due to something about the adult that would affect the other areas of the adult’s life.”). Participants then responded to three items about responsibility concerning the adult in these scenarios: intentionality (e.g., “The sexual encounter was something that the neighbor intended to happen, rather than something that was unintentional.”), motivation (e.g., “The sexual encounter was something that was motivated by the adult’s selfish concerns rather than unselfish concerns.”), and blameworthiness (e.g., “The sexual encounter was something that the adult deserves to be blamed for.”).

Participants also responded to three items about causality concerning the adolescent in these scenarios: locus (e.g., “The sexual encounter was due to something about the adolescent, such as the kind of person the adolescent is.”), stability (e.g., “The sexual encounter was due to something about the adolescent that is not likely to change.”), and globality (e.g., “The sexual encounter was due to something about the adolescent that would affect the other areas of the adolescent’s life.”). Participants last responded to three items about responsibility of the adolescent in these scenarios: intentionality (e.g., “The sexual encounter was something that the adolescent intended to happen, rather than something that was unintentional.”), motivation (e.g., “The sexual encounter was something that was motivated by the adolescent’s selfish concerns rather than unselfish concerns.”), and blameworthiness (e.g., “The sexual encounter was something that the adolescent deserves to be blamed for.”).

After participants made attributions about the adult and adolescent depicted in the sexual encounter scenario they read, participants then completed the Need for Cognitive Closure Scale (Kruglanski, Webster, & Klem, 1993). There were 42 items in this scale to which participants responded using a 5-point Likert scale with response options labeled strongly disagree, disagree, undecided, agree, and strongly agree. There are five subscales in the Need for Cognitive Closure Scale: discomfort with ambiguity, desire for predictability, preference for order and structure, decisiveness, and close-mindedness. Examples of subscale items are “I like to know what people are thinking all the time” (discomfort with ambiguity), “I enjoy the uncertainty of going into a new situation without knowing what might happen” (desire for predictability), “I find that establishing a consistent routine enables me to enjoy life more” (preference for order and structure), “I tend to struggle with most decisions” (decisiveness), and “I prefer interacting with people whose opinions are very different from my own” (close-mindedness).
In order to control for acquiescence (i.e., a tendency to agree with statements), the 42-item Need for Cognitive Closure Scale is made up of 26 items worded such that agreement with these statements indicates a high need for cognitive closure (e.g., “I dislike questions which could be answered in many different ways”) and 16 items worded such that agreement with these statements indicates a low need for cognitive closure (e.g., “I like to have friends who are unpredictable.”) Responses to statements for which agreement indicates a low need for cognitive closure were reverse scored. That is, scores for answers to individual items were summed such that higher total scores were indicative of a higher need for cognitive closure and lower total scores were indicative of a lower need for cognitive closure. We dichotomized scores on the Need for Cognitive Closure Scale using a median split.

Scores on the 42-item Need for Cognitive Closure Scale were reliable as reported by Webster and Kruglanski (1994) who found a test-retest correlation of .86 over a 12 to 13 week period. These researchers also reported a Cronbach’s alpha of .84 for total scores on the Need for Cognitive Closure Scale and Cronbach’s alphas ranging from .62 to .82 for scores on five subscales. Other researchers reported a Cronbach’s alpha of .89 for scores on the Need for Cognitive Closure Scale (e.g., Leone, Wallace, & Modglin, 1999). Additionally, Moneta and Yip (2004) reported a Cronbach’s alpha score of .77 in their Chinese version of the Need for Cognitive Closure Scale. In our study Cronbach’s alpha was .80.

Webster and Kruglanski (1994) found evidence of convergent validity when comparing two groups of participants on the Need for Cognitive Closure Scale. One group of participants was made up of accounting majors. The other group of participants was made up of studio-art majors. Accounting majors had substantially higher scores on separate Need for Cognitive Closure Scale items than did studio-art majors. Additionally, the same group of accounting majors showed higher scores on a composite Need for Cognitive Closure Scale than did studio-art majors.

Webster and Kruglanski (1994) sought to determine whether scores on the Need for Cognitive Closure Scale were uncorrelated with scores on measures of other theoretically different constructs. They found low correlations for scores on measures of (a) authoritarianism, (b) intolerance of ambiguity, (c) dogmatism, (d) impulsivity, and (e) need for structure with scores on the Need for Cognitive Closure Scale. These researchers also predicted and found low correlations for scores on measures of (a) cognitive complexity, (b) fear of invalidity, and (c) need for cognition with scores on the Need for Cognitive Closure Scale. Additionally, Webster and Kruglanski (1994) found no correlation for scores on measures of intelligence and need for cognitive closure. They also found no correlation for scores on measures of social desirability and need for cognitive closure. Thus, there is evidence of discriminant validity for the Need for Cognitive Closure Scale.

Webster and Kruglanski (1994) also reported evidence of construct validity for scores on the Need for Cognitive Closure Scale. They found a relationship between need for cognitive closure and primacy effect (i.e., basing one’s impressions of a target on early information rather than on late information). Webster (1993) also reported a relationship between need for cognitive closure and correspondence bias (i.e., a tendency to attribute behavior to personality without considering situational influences).
After responding to the Need for Cognitive Closure scale, participants were then asked to report their overall knowledge of prevalence of child sexual abuse. (e.g., “What percentage of women sexually abuse girls?”, and “What percentage of children in general are sexually abused?”) Response options were (a) 10% or less, (b) 11 to 20%, (c) 21% to 30%, (d) 31% to 40%, and (e) more than 40%. Participants were also asked to report personal experiences of adolescent (i.e. prior to 16 years of age) sexual abuse by indicating (a) yes or (b) no to: “Another person, five or more years older than you, fondled you in a sexual way or touched or stroked your sex organs; or you touched or stroked another person’s sex organs at his/her request,” and “Another person, five or more years older than you, had sex (oral, anal, or vaginal) with you (any amount of penetration of any orifice--ejaculation not necessary”). Participants then responded to demographic items (e.g., sex, age, race, etc.) using objective answer options. Response options were as follows: sex (a) male (b) female, age (a) 18-24, (b) 25-31, (c) 32-38, (d) 39-45, and (e) over 45, and race (a) White/Caucasian, (b) Black/African American, (c) Hispanic/Latino, or (d) Asian/Pacific Islander, (e) Other.

Upon completion of this experiment, participants were asked to place their survey back into their envelope. Participants received contact information for the principle investigator in case they had questions about this study. Participants also received a debriefing sheet which included information about the university Counseling Center as well as contact information for a 24-hour mental health crisis hotline. Counseling Center contact information was available in case participants needed to speak with someone about their reaction to this experiment. Participants were also offered a copy of the informed consent form, instructed to deposit their envelope in a box located away from the experimenter to insure anonymity, and thanked for their time.

Results
Preliminary Analyses

Descriptive Statistics. We performed a preliminary analysis of our data to obtain a mean, standard deviation, and range of scores for each of the following measures: perpetrator causality and responsibility attributions, victim causality and responsibility attributions, and need for cognitive closure (see Table 1). For these measures of causality and responsibility, a minimum possible score was 1 and a maximum possible score was 5. Actual scores for this scale were a minimum of 1 and a maximum of 5. For this measure of need for cognitive closure, a minimum possible score was 42 and a maximum possible score was 210. Actual scores for this scale were a minimum of 91 and a maximum of 179.

We evaluated scores on each measure for skewness and kurtosis (e.g., Tabachnick & Fidell, 2001). Scores on the Need for Cognitive Closure Scale did not violate assumptions of normality. Scores on measures of attributions about child sexual abuse violated assumptions of normality on all measures except two (i.e., perpetrator stability and victim stability). That is, all but two attribution measures had greater than an absolute value of 1 for skewness, kurtosis, or both. Because coefficient of skewness and kurtosis indicate deviation from normal distribution, our results from our ANOVAs may not be statistically valid.

Table 1
### Descriptive statistics for independent and dependent measures

<table>
<thead>
<tr>
<th>Measure</th>
<th>M</th>
<th>SD</th>
<th>Potential Range</th>
<th>Actual Range</th>
<th>Skewness</th>
<th>Kurtosis</th>
</tr>
</thead>
</table>

#### Perpetrator Causality
- Locus: 4.44, SD = .80, Potential Range 1-5, Actual Range 2-5, Skewness -1.58, Kurtosis 2.70
- Stability: 4.05, SD = .89, Potential Range 1-5, Actual Range 2-5, Skewness -0.97, Kurtosis 0.81
- Globality: 4.37, SD = .77, Potential Range 1-5, Actual Range 1-5, Skewness -1.57, Kurtosis 4.08

#### Perpetrator Responsibility
- Motivation: 4.29, SD = .92, Potential Range 1-5, Actual Range 1-5, Skewness -1.34, Kurtosis 1.62
- Intentionality: 4.24, SD = .99, Potential Range 1-5, Actual Range 1-5, Skewness -1.59, Kurtosis 2.59
- Blameworthiness: 4.53, SD = .91, Potential Range 1-5, Actual Range 1-5, Skewness -2.38, Kurtosis 5.84

#### Victim Causality
- Locus: 1.91, SD = 1.10, Potential Range 1-5, Actual Range 1-5, Skewness 1.07, Kurtosis .18
- Stability: 1.92, SD = .94, Potential Range 1-5, Actual Range 1-5, Skewness .78, Kurtosis -.08
- Globality: 2.66, SD = 1.41, Potential Range 1-5, Actual Range 1-5, Skewness .23, Kurtosis -1.29

#### Victim Responsibility
- Motivation: 1.42, SD = .78, Potential Range 1-5, Actual Range 1-5, Skewness 2.12, Kurtosis 4.58
- Intentionality: 1.33, SD = .63, Potential Range 1-5, Actual Range 1-4, Skewness 1.92, Kurtosis 3.21
- Blameworthiness: 1.34, SD = .73, Potential Range 1-5, Actual Range 1-5, Skewness 2.48, Kurtosis 6.6

#### Need for Cognitive Closure
- 135, SD = 15.06, Potential Range 42-210, Actual Range 91-179, Skewness -0.33, Kurtosis 0.71

### Manipulation Check
We asked participants to recall the sex of adult and sex of adolescent in the scenario they read. If our manipulations of the sex of adult and sex of adolescent were effective, then we expected participants to correctly recall the sex of adult and the sex of adolescent in our scenarios. If, for example, participants read a sexual encounter involving a female perpetrator and a female victim, then participants should recall having read about a female perpetrator and female victim. Answer options for our manipulation check questions were (a) male, (b) female, (c) do not recall. We performed two chi square analyses to test effectiveness of these manipulation checks. Participants did in fact recall sex of perpetrator correctly 94.65 % of the time and sex of victim correctly 97.71% of the time. That is, participants correctly recalled sex of perpetrator in these encounters $\chi^2 (1, N = 131) = 119.93$, $p < .01$. Participants also correctly recalled sex of victim in these encounters $\chi^2 (1, N = 131) = 119.53$, $p < .05$. Thus, our manipulations were effective.

### Main Analyses
Our independent variables were sex of perpetrator and sex of victim. Our measured predictor variable was need for cognitive closure. Our criterion (i.e., dependent) variables were attributions (i.e., causality and responsibility) about perpetrators and about victims. This study was a 2 sex of perpetrator (male vs. female) x
sex of victim (male vs. female) x 2 need for cognitive closure (high vs. low) factorial design. To test our hypotheses, we performed several three-way ANOVAs. An alpha level of .05 was used for all statistical analyses.

**Attributions About a Perpetrator.** In terms of perpetrators, we hypothesized first that participants would attribute stronger causality (i.e., locus, stability, and globality) and responsibility (i.e., intentionality, motivation, and blameworthiness) when sexual dyads involved male rather than female perpetrators. That is, we expected to find a main effect for sex of adult for causality and responsibility attributions about perpetrators. We found no main effect for sex of adult on attributions about perpetrators. That is, whether an adult was a male or a female did not influence participants’ causal attributions or responsibility attributions about a perpetrator, all $F$s < 1.10.

In terms of perpetrators, we hypothesized second that participants would attribute stronger causality and responsibility to perpetrators when sexual dyads involved female rather than male adolescents. That is, we expected to find a main effect for sex of adolescent for causality and responsibility attributions about perpetrators. As expected, we found a marginal main effect for sex of adolescent in our scenarios on causal stability attributions about a perpetrator, $F(1, 123) = 3.60, p = .06$. Participants made stronger causal stability attributions about a perpetrator when an adolescent was a female ($M = 4.17, SD = .87$) than when an adolescent was a male ($M = 3.94, SD = .90$). We found no other main effects for sex of adolescent on other attributions about a perpetrator. That is, whether an adolescent was a male or a female did not influence participants’ other causal (i.e., locus, globality) or responsibility (i.e., intentionality, motivation, blameworthiness) attributions about a perpetrator, all $F$s < 2.43, all $p$s > .12.

In terms of perpetrators, we hypothesized third that there would be a two-way interaction such that participants would make the weakest causality and responsibility attributions when sexual dyads involved a female perpetrator and a male victim compared to any of the other three sexual dyads (i.e., female perpetrator/female victim, male perpetrator/female victim, and male perpetrator/male victim). We found a two-way interaction between sex of adult and sex of adolescent on causal stability attributions about a perpetrator $F(1, 123) = 5.18, p = .02$. As expected, participants made weaker causal stability attributions about a perpetrator when a sexual dyad involved a female adult and a male adolescent ($M = 3.74, SD = .86$) than any of the other three sexual dyads [i.e., female adult/female adolescent ($M = 4.32, SD = .83$); male adult/female adolescent ($M = 4.03, SD = .88$); and male adult/male adolescent ($M = 4.14, SD = .89$)] (see Figure 1). We found no other two-way interactions between sex of adult and sex of adolescent on causal (i.e., locus, globality) or responsibility (i.e., intentionality, motivation, blameworthiness) attributions about a perpetrator, all $F$s < 1.00.
In terms of perpetrators, we hypothesized fourth that there would be a three-way interaction such that high need for cognitive closure participants would be more likely than low need for cognitive closure participants to make the weakest causality and responsibility attributions when sexual dyads involved a female perpetrator and male victim compared to any of the other three sexual dyads (i.e., female perpetrator/female victim, male perpetrator/female victim, and male perpetrator/male victim). As expected, we found a marginally reliable three-way interaction between sex of adult, sex of adolescent, and need for cognitive closure on stability attributions about a perpetrator, $F(1, 123) = 3.45, p = .07$. High need for cognitive closure participants made stronger causal stability attributions about all perpetrators, regardless of sex of adult, when sexual dyads involved a female adolescent ($M = 4.43, SD = .83$) rather than a male adolescent ($M = 3.94, SD = .93$) (see Figure 2). Low need for cognitive closure participants made stronger causal stability attributions about a perpetrator when an adult was female and an adolescent was female ($M = 4.13, SD = .92$) or when an adult was male and an adolescent was male ($M = 4.32, SD = .67$) than when an adult was female and an adolescent was male ($M = 3.43, SD = .94$) or when an adult was male and an adolescent was female ($M = 3.78, SD = .81$) (see Figure 3). That is, low need for cognitive closure participants made stronger causal stability attributions about perpetrators in same-sex dyads than in opposite-sex dyads.
We found no other three-way interactions between sex of adult, and sex of adolescent, and need for cognitive closure on causal (i.e., locus, globality) attributions as well as responsibility (i.e., intentionality, motivation, blameworthiness) attributions about a perpetrator, all $F$s $\leq 3.04$, all $p$s $> .08$.

**Attributions About a Victim.** In terms of victims, we hypothesized first that participants would attribute stronger causality (i.e., locus, stability, globality) and responsibility (i.e., intentionality, motivation, blameworthiness) attribution to victims when sexual dyads involved a female adult compared to a male adult. That is, we expected to find a main effect of sex of adult on causality and responsibility attributions about a victim. As expected, we found a marginal main effect for sex of adult on motivation attribution about a victim, $F(1, 123) = 3.41, p = .07$. Participants attributed more selfish motivation to victims when adults in our scenarios were female ($M = 1.54$, $SD = .90$) rather than male ($M = 1.30$, $SD = .63$). However, whether an adult was a male or a female did not influenced participants’ causal (i.e., locus, stability, globality) attributions or other responsibility (i.e., intentionality, blameworthiness) attributions about a victim, all $F$s(1, 123) = 2.90, all $p$s = ns.

In terms of victims, we hypothesized second that participants would make stronger causality and responsibility attributions when sexual dyads involved male rather than female adolescents. That is, we expected to find a main effect for sex of adolescent on causality and responsibility attribution about victims. There was a marginal main effect of sex of adolescent on blameworthiness attributions about a victim $F(1, 123) = 3.48, p = .06$. Participants made stronger blameworthiness attributions about a victim when an adolescent was a male ($M = 1.46$, $SD = .85$) than when an adolescent was a female ($M = 1.22$, $SD = .55$). We found no other main effects for sex of adolescent on attributions about a victim. That is, whether an adolescent was a male or a female did not influence participants’ causal (i.e., locus, stability, globality) attributions as well as other responsibility (i.e., intentionality, blameworthiness) attributions about a victim, all $F$s $\leq 1.46$, all $p$s $> .23$. 
In terms of victims, we hypothesized third that there would be a two-way interaction such that participants would make the weakest causality and responsibility attributions when dyads involved a female adult and a male adolescent compared to any of the other three dyads (i.e., female perpetrator/female victim, male perpetrator/female victim, and male perpetrator/male victim). We found no interactions between sex of adult and sex of adolescent on attributions about a victim. That is, the adult/adolescent dyad (male/female, male/male, female/male, female/female) in our scenario did not influence participants’ causal (i.e., locus, stability, globality) attributions or responsibility (i.e., intentionality, motivation, blameworthiness) attributions about a victim, all $F$s < 2.75, all $p$s > .10.

Finally, in terms of victims, we hypothesized fourth that there would be a three-way interaction such that high need for cognitive closure participants would be more likely than low need for cognitive closure participants to make the strongest causality and responsibility attributions when sexual dyads involved a female adult and a male adolescent compared to any of the other three sexual dyads (i.e., female perpetrator/female victim, male perpetrator/female victim, and male perpetrator/male victim). There was in fact a marginally reliable three-way interaction between sex of adult, sex of adolescent, and need for cognitive closure on motivation attributions about a victim, $F(1, 123) = 3.26, p = .07$. When an adult was male, high need for cognitive closure participants, made stronger responsibility attributions about a victim when an adolescent was male ($M = 1.33, SD = .62$) than when an adolescent was female ($M = 1.07, SD = .27$). When an adult was female, high need for cognitive closure participants, made similar responsibility attributions about a victim when an adolescent was female ($M = 1.50, SD = 1.15$) and when an adolescent was male ($M = 1.50, SD = .83$) (see Figure 4). Low need for cognitive closure participants made weaker responsibility attributions about a victim when an adult was male and an adolescent was male ($M = 1.21, SD = .42$) than when (a) an adult was female and an adolescent was male ($M = 1.79, SD = .97$), (b) an adult was male and an adolescent was female ($M = 1.56, SD = .92$), or (c) an adult was female and an adolescent was female ($M = 1.40, SD = .63$) (see Figure 5). We found no other three-way interactions between sex of adult, sex of adolescent, and need for cognitive closure on causal (i.e., locus, stability, globality) attributions as well as responsibility (i.e., intentionality, blameworthiness) attributions about a victim, all other $F$s ≤ 1.31, all $p$s ≥ .18.
Recall, in terms of perpetrators, we hypothesized first that participants would make stronger causality (i.e., locus, stability, globality) and responsibility (i.e., intentionality, motivation, blameworthiness) when sexual dyads involved male rather than female adults. Our prediction of this main effect was not supported. That is, participants did not attribute greater causality and responsibility to a perpetrator when sexual dyads involved male rather than female adults.

In terms of perpetrators, we hypothesized second that participants would make stronger causality and responsibility to perpetrators when sexual dyads involved female rather than male adolescents. Our prediction of this main effect was only supported for stability attributions. That is, we found participants attributed greater stability to perpetrators when scenarios involved female adolescents rather than male adolescents. Participants may have attributed greater causal stability to perpetrators of female adolescents rather than male adolescents because participants relied upon sex stereotypes of female and male adolescents (see Dixon, 2005). That is, participants may have applied sex stereotypes to female adolescents of child sexual abuse thereby perceiving female adolescents as sexually passive and more vulnerable than male adolescents. Participants may have also applied sex stereotypes to male adolescents of child sexual abuse thereby perceiving male adolescents as sexually aggressive and less vulnerable than female adolescents. In other words, effect of sex of an adolescent may have been so strong that it voided any effects of sex of a perpetrator.

In terms of perpetrators, we hypothesized third that there would be a two-way interaction such that participants would make the weakest causality and responsibility attributions when sexual dyads involved a female adult and a male adolescent compared to any of the other three sexual dyads (i.e., female adult/female adolescent, male adult/female adolescent, and male adult /male adolescent). Our prediction of this two-way interaction was only supported for stability attribution. That is, we found participants attributed the least causal stability when scenarios involved a female adult and male adolescent sexual dyad. Participants may have attributed the least causal stability when a sexual dyad involved a female adult and male adolescent because these participants applied sex stereotypes to female adults and to male adolescents. Females are not only
seen as sexually passive but also as naturally nurturing (Fiske, 1998). Males are not only seen as sexually aggressive but also as physically strong (Fiske, 1998). Therefore, participants in our study may have interpreted interactions between a female adult and a male adolescent as being a nurturing relationship and not an incidence of sexual abuse.

In terms of perpetrators, we hypothesized fourth that there would be a three-way interaction such that high need for cognitive closure participants would be more likely than low need for cognitive closure participants to make the weakest causality and responsibility attributions when sexual dyads involved a female adult and male adolescent compared to any of the other three sexual dyads (i.e., female adult/female adolescent, male adult/female adolescent, and male adult/male adolescent). Our prediction of this three-way interaction was again only supported for stability attributions. When scenarios included female rather than male adolescents, high need for cognitive closure participants in our study made stronger causal stability attributions about perpetrators. Perhaps these participants relied upon sex stereotypes of adolescent. That is, perhaps these participants relied on sex stereotypes of female and male (i.e., males are sexually aggressive, females are sexually passive; Dixon, 2005) when considering sex of adolescent. High need for cognitive closure participants in our study may have only been influenced by sex of adolescent when applying causal stability attribution to perpetrators. Sex of adult did not seem to influence these participants’ application of stability attribution applied to perpetrators.

Furthermore, low need for cognitive closure participants may have only been influenced by sex of adolescent as well as sex of adult when applying causal stability attributions to perpetrators. That is, low need for cognitive closure participants applied stereotypes to same-sex dyads. Perhaps low need for cognitive closure participants in our study attributed causal stability to perpetrators of same-sex dyads rather than to opposite-sex dyads because these participants disapproved of homosexuality. Subsequently, these participants may have held a perpetrator of a same-sex dyad sexual abuse more culpable than a perpetrator of an opposite-sex dyad sexual abuse.

In terms of victims, we hypothesized first that participants would make stronger causality (i.e., locus, stability, globality) attributions and responsibility (i.e., intentionality, motivation, blameworthiness) attributions to victims when sexual dyads involved a female adult compared to a male adult. Our prediction of this main effect was only supported for responsibility attribution. That is, participants attributed stronger selfish motivation to victims when sexual dyads involved female rather than male adults. Perhaps participants applied sex stereotypes to female adults. In other words, because females are seen as sexually passive (see Dixon, 2005), our participants may have felt that victims in our scenarios were selfishly motivated and possibly instigators of sexual encounters when an adult was female.

In terms of victims, we hypothesized second that participants would make stronger causality and responsibility attributions when sexual dyads involved male rather than female adolescents. Our prediction of this main effect was only supported for blameworthiness attributions. As expected, we found participants attributed more blame to male adolescents of child sexual abuse than to female adolescents of child sexual abuse. Perhaps participants applied sex stereotypes to adolescents. As mentioned above, males are stereotyped as sexually aggressive and females are stereotyped as sexually passive (Dixon, 2005). Perhaps sexual stereotypes are applied to male and female
adolescents as well as to male and female adults. Therefore, participants in our study may have applied sex stereotypes to male and female victims of child sexual abuse. Other researchers have also found that participants attributed greater blameworthiness to male rather than female victims (Back & Lips, 1998).

In terms of victims, we hypothesized third that there would be a two-way interaction such that participants would make the strongest causality and responsibility attributions when sexual dyads involved a female adult and a male adolescent compared to any of the other three sexual dyads (i.e., female adult/female adolescent, male adult/female adolescent, and male adult/male adolescent). Our prediction of this two-way interaction was not supported. In other words, participants did not attribute stronger causal or responsibility attributions about a victim when an adolescent was male and an adult was female than they made for victims in other sexual dyads. Sex of adult and sex of adolescent in each dyad had no effect on participants’ attributions about a victim. Perhaps participants in our study made equal causality and responsibility attributions about male and female adolescents regardless of sex of adult because they did not view a male adolescent as more sexually aggressive than a female adolescent.

Finally, in terms of victims, we hypothesized fourth that there would be a three-way interaction such that high need for cognitive closure participants would be more likely than low need for cognitive closure participants to make the strongest causality and responsibility attributions when sexual dyads included a female adult and a male adolescent compared to any of the other three sexual dyads (i.e., female adult/female adolescent, male adult/female adolescent, and male adult/male adolescent). Our prediction of this three-way interaction was only supported for motivation attributions. When an adult was female, high need for cognitive closure participants in our study made similar responsibility motivation attributions about male and female victims. Because females are seen as sexually passive, perhaps high need for cognitive closure participants felt that male and female adolescents were pursuing sexual encounters with these female adults.

Alternatively when an adult was male, low need for cognitive closure participants in our study made significantly weaker responsibility motivation attributions when an adolescent was male rather than female. These results were not consistent with our prediction and are counter intuitive. Perhaps these participants attributed weaker responsibility motivation attribution when an adolescent was male and an adult was male because these participants applied sex stereotypes (i.e., males are sexually aggressive; Dixon, 2005) to male adults of child sexual abuse. In other words, these participants may have felt that male adults are sexually aggressive and therefore attributed the least responsibility motivation to male victims.

**Plausible Alternative Explanations for Findings**

There are several plausible alternative explanations for the findings of this study. One plausible alternative explanation for our findings involves the age of participants in our study. Ninety-two participants (70%) in our study were between 18 and 24 years of age. When asked at what age males and females are ready to make decisions about becoming sexually active, 60 (46%) of our participants responded by choosing the 15-17 year age range (other answer options: 9-11, 12-14, 18-20, 21 or older). There is a possibility that participants between 15 and 17 years of age (a majority of our sample) perceived eighth graders (i.e., approximately 13 years of age) as near their own age and
therefore did not perceive eighth graders as being too young for sexual activity (e.g., Mellott, Wagner, & Broussard, 1997). Although these participants responded by choosing the 15-17 year age range as ready to make a decision about becoming sexually active, there is a possibility that these participants recalled their own sexual activity during adolescence and therefore did not see age 13 as being too young for sexual activity. Thus, participants in our study may have felt that an eighth grader in our scenario was being sexual active rather than sexually abused.

A second plausible alternative explanation for our findings may be that participants did not perceive the sexual encounter in our scenario as sexual abuse. These participants may not perceive oral sex as intercourse (e.g., Hunt & Curtis, 2006; Sanders & Reinisch, 1999). Additionally, these participants may not have perceived the sexual encounter in our scenario as sexual abuse because they may have perceived an adolescent’s lack of resistance (i.e., compliance) of a sexual advancement as sexual interest (e.g., Krahe, Scheinberger-Olwing, & Kolpin, 2000). Furthermore, participants may not have perceived the sexual encounter in our scenario as sexual abuse because these participants perceived sex between an adult and an adolescent as a learning experience for that adolescent rather than child sexual abuse (e.g., Maynard & Wiederman, 1997).

A third plausible alternative explanation for our findings involves our measurement of attributions. The Relationship Attribution Measure (Fincham & Bradbury, 1992) was originally designed to measure causality and responsibility of romantic partner behavior. We adapted this measure to record participants’ causality and responsibility attributions about perpetrators and victims of an adult-adolescent sexual encounter. The adapted Relationship Attribution Measure may not have been a valid measure. In other words, the original Relationship Attribution Measure was designed to measure close romantic relationships, and our adapted version was designed to measure deviant relationships. Perhaps we should not have applied this measure to deviant relationships. However, that suggestion is unlikely because scores in our adapted Relationship Attribution Measure had internal consistency. Because we obtained internal consistency we show our adapted Relationship Attribution Measure is representative of participants’ responses about attributions of perpetrators and victims of child sexual abuse.

A final plausible alternative explanation for our findings could be participants’ recent media exposure to several reports about child sexual abuse (e.g., Debra Lafave, John Couey, and Mary Kay Laterneau). Participants may have perceived female perpetrators in recent media reports as nurturing because these female perpetrators were educated, attractive professionals in care-giving careers. Participants may have perceived male perpetrators in recent media reports as brusque because these male perpetrators were uneducated, unattractive workers in blue-collar jobs. If participants were thinking of recent media reports of child sexual abuse during this study, for example, then participants’ responses to our survey questions about attributions may have been based on those recent media reports and not necessarily on our scenario.

**Possible Limitations**

There are several possible limitations for our study. One possible limitation in our study was that our dependant variable (i.e., need for cognitive closure) was measured rather than manipulated. Because we did not manipulate need for cognitive closure, we
cannot assume that a participant’s need for cognitive closure affected that participant’s response to questions about causality and responsibility in the child sexual abuse scenario read and responded to in our study.

A second possible limitation in our study was the methodology we used to gather data. We relied upon self-report measures of causality and responsibility attributions about perpetrators and victims in a sexual abuse scenario as well as a self-report measure of individual difference. Participants may have given what they believed to be socially appropriate responses to questions rather than how they actually saw themselves or other people. To promote participants to respond to our survey with honest responses, we explained to participants that their responses were anonymous and confidential. We also collected informed consent forms separately from survey packets. Additionally, we instructed participants to place their survey packet in a location away from our researcher to insure anonymity. Even with these procedures, however, participants may have been concerned that we would match participants’ identity with their responses. If participants were concerned that researchers would match their responses to their identity, participants may have responded with socially desirable answers.

Social desirability is a person’s tendency to respond to a situation in a way that is seen as socially appropriate thus enhancing an impression of how other people see a person (see Meston, Heiman, Trapnell, & Paulhus, 1998). Participants may have responded in ways they felt socially appropriate in our culture where sex between an adult and an adolescent is taboo. Furthermore, participants may not have admitted (even to themselves) how they actually felt about a sexual encounter between an adult and an adolescent. Therefore, participants may have responded to our survey in what they believe were socially desirable ways.

A third possible limitation in our study is college students’ views of male and female roles. One researcher conducted a longitudinal study of four-year college students and found that these students’ traditional views of male and female roles declined during college (Bryant, 2003). However, this researcher also reported that women in her study held more egalitarian views than did men in her study at college entry and four years later. Thus, students’ attitudes may change due to academic engagement and exposure to diversity. In our study there were more female participants than male participants. In future research, if we obtain equal numbers of male and female participants, we may find different results.

A final possible limitation in our study is that we utilized a convenience sample of college students as participants. That is, participants in this study were students enrolled in psychology classes at the University of North Florida. Responses of this group of participants may not be a representation of responses of the general public. Therefore, there may be a lack of generalizability. Another researcher reported that using a convenience sample of college students is, by and large, generalizable (Sears, 1986). However, this researcher also reported that the best way to insure generalizability is to sample individuals from many settings and age ranges. This researcher then reported that doing so would be difficult.

Future directions

Our awareness of limitations and plausible alternative explanations in this study will help to formulate ideas for future directions of this research. We chose the two individuals in our scenario to be an adult neighbor and an adolescent. Perhaps one
modification could be the relationship between adult and adolescent (e.g., coach and player of a sport). Another modification could be age of victim. We chose the victim in our scenario to be an eighth adolescent, perhaps in future research the adolescent could be a fifth grader. A final modification could be changing the individual difference measured. Intolerance of ambiguity is a tendency for individuals to perceive an ambiguous situation as threatening based on a lack of sufficient clues (Budner, 1962). Perhaps high intolerance of ambiguity people use sex stereotypes to minimize threatening affects of ambiguous feelings about an adult-adolescent sexual encounter. If we measure people’s tolerance of ambiguity we may find yet another application sex stereotypes as applied to adult-adolescent sexual encounter scenarios.

Researchers need to better understand stereotype use as applied to perpetrators and victims of child sexual abuse. Furthermore, better understanding stereotype use as applied to perpetrators and victims of child sexual abuse could result in a comprehensive awareness of female and male perpetrators and victims. Because people may not view females as perpetrators or males as victims of child sexual abuse, there is a “gap” in legal and health care systems. Female perpetrators may not be prosecuted and sentenced to a same degree as male perpetrators. Additionally, male victims may not have a same access to healthcare as do female victims. In order to reduce gaps in our legal and healthcare systems as applied to female perpetrators and male victims of child sexual abuse, policy makers must first become aware of such gaps. Thus, outcomes of this inquiry may be valuable to policy makers.

References


FLA. ST. ANN. Tit. 46, § 800.04 (2005).


sex, survivor age, survivor response, respondent sex, and country of origin.

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