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INTEGRATING THEORIES OF SEXUAL VIOLENCE: INCORPORATING THE CLINICAL
SYMPTOMS OF THE PATHWAY MODEL INTO THE CONFLUENCE MODEL.

DOCTOR OF PHILOSOPHY DISSERTATION

FROSO SOUROULLA KAY

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The present doctoral dissertation was submitted in partial fulfillment of the requirements for the degree of Doctor of Philosophy of the University of Cyprus. It is a product of original work of my own, unless otherwise mentioned through references, notes, or any other statements.

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ΠΕΡΙΛΗΨΗ

Η παρούσα έρευνα είχε ως στόχο την ενοποίηση του Confluence Model (CM) για τη διάπραξη σεξουαλικής βίας (ΣΒ) εναντίον των γυναικών, με τα κλινικά συμπτώματα του Pathway Model. Το CM αποτελεί το μοναδικό εμπειρικά εξαγόμενο αιτιολογικό μοντέλο για τη διάπραξη ΣΒ εναντίον των γυναικών και υποστηρίζει δύο μονοπάτια: την Εχθρική Αρρενωπότητα (ΕΑ) και το Απρόσωπο Σεξ (ΑΕ). Σύμφωνα με το Pathway Model, την πιο ολοκληρωμένη πολυπαραγοντική θεωρία, υπάρχουν τέσσερις ομάδες κλινικών συμπτωμάτων: οι Πεποιθήσεις που υποστηρίζουν τη βία, η Συναισθηματική Απορρύθμιση, οι Ελλείψεις οικειότητας/κοινωνικές, και η Αποκλίνουσα σεξουαλική διέγερση. Ο πρώτος στόχος ήταν η αναπαραγωγή του καλά τεκμηριωμένου CM μέσω διαδικτυακής μεθοδολογίας. Ο δεύτερος στόχος αφορούσε την επέκταση του CM με τη συμπερίληψη των κλινικών συμπτωμάτων του Pathway Model, εξετάζοντας μεσολαβητικές και ρυθμιστικές επιδράσεις. Οι κύριες υποθέσεις ήταν: (i) οι Πεποιθήσεις που υποστηρίζουν τη βία θα προέβλεπαν τη ΣΒ και πως αυτή η επίδραση θα μεσοβαλείτο από την ΕΑ, (ii) η Συναισθηματική Απορρύθμιση θα προέβλεπε τη ΣΒ και πως αυτή η επίδραση θα μεσολαβείτο από την ΕΑ και το ΑΣ, (iii) οι Ελλείψεις οικειότητας/κοινωνικές θα προέβλεπαν τη ΣΒ και πως αυτή η επίδραση θα μεσολαβείτο από την ΕΑ και το ΑΣ, (iv) η Αποκλίνουσα σεξουαλική διέγερση θα προέβλεπε τη ΣΒ και πως θα κατείχε ρυθμιστικό ρόλο στις επιδράσεις των ΕΑ και ΑΣ προς τη ΣΒ. Ακόμη, λαμβάνοντας υπόψη την έλλειψη μελετών σχετικά με τον προστατευτικό ρόλο της Θετικής Αρρενωπότητας (ΘΑ) στη διάπραξη ΣΒ, εξετάστηκε αυτή η έννοια, με την υπόθεση ότι (v) η ΘΑ θα σχετιζότο αρνητικά με τα προαναφερθέντα κλινικά συμπτώματα, θα προέβλεπε μειωμένη ΣΒ, καθώς ο πιθανός ρυθμιστικός της ρόλος στη σχέση μεταξύ των κλινικών συμπτωμάτων και της ΣΒ θα εξετάζετο.

Στη διαδικτυακή έρευνα έλαβαν μέρος 421 ελληνο-κύπριοι ετεροφυλόφιλοι άντρες (ηλικίας 18-49 ετών), οι οποίοι είχαν ρομαντική σχέση σε κάποια φάση στο παρελθόν. Χορηγήθηκε μια μπαταρία 18 εργαλείων, καθώς η ΣΒ εξετάστηκε μέσω άμεσης (Sexual Experiences Survey), έμμεσης (Rape Proclivity Scale), και συμπεριφορικής μεθοδολογίας (Sexual Violence Laboratory Paradigm). Μοντέλα Δομικών Εξισώσεων πραγματοποιήθηκαν για την εξέταση των υποθέσεων. Στην παρούσα έρευνα, το CM αναπαράχθηκε μερικώς, καθώς μόνο ο προβλεπτικός ρόλος

της ΕΑ υποστηρίχθηκε. Οι Πεποιθήσεις που υποστηρίζουν τη βία και η Συναισθηματική Απορρύθμιση προέβλεπαν τη ΣΒ, καθώς η ΕΑ μεσολαβούσε πλήρως αυτές τις επιδράσεις. Η Αποκλίνουσα σεξουαλική διέγερση προέβλεπε τη ΣΒ, ενώ ο ρυθμιστικός της ρόλος δεν υποστηρίχθηκε. Ο προβλεπτικός ρόλος των Ελείψεων οικειότητας/κοινωνικών και του ΑΣ δεν υποστηρίχθηκε στην παρούσα έρευνα. Η ΘΑ συσχετιζέτο αρνητικά με σχεδόν όλα τα κλινικά συμπτώματα (εκτός από την Αποκλίνουσα σεξουαλική διέγερση), ενώ δεν συσχετιζέτο σημαντικά με τη ΣΒ, καθώς ούτε ο ρυθμιστικός της ρόλος διαφάνηκε. Συνολικά, υπογραμμίζεται ο κρίσιμος ρόλος της ΕΑ και η σημαντικότητα των κινήτρων δύναμης στη διάπραξη ΣΒ. Η παρούσα έρευνα αποτελεί μια προσπάθεια αξιολόγησης με ένα ενιαίο τρόπο τόσο της ΕΑ όσο και της ΘΑ. Μελλοντικές έρευνες ενθαρρύνονται να μελετήσουν τον ρόλο της ΘΑ, καθώς και τις μεσολαβητικές και ρυθμιστικές επιδράσεις των παραγόντων κινδύνου. Αναφέρονται οι θεωρητικές και πρακτικές εφαρμογές των παρόντων αποτελεσμάτων, καθώς μπορούν να συνεισφέρουν σε προγράμματα αξιολόγησης, πρόληψης, και παρέμβασης.

ABSTRACT

The present study aimed at integrating the Confluence Model (CM) of male-toward-female sexual violence (SV) and the clinical symptoms presented within the Pathway Model. The CM constitutes the only empirically derived etiological model of male-toward-female SV and supports two pathways: hostile masculinity (HM) and impersonal sex (IS). According to the Pathway Model, the most comprehensive multifactorial theory, four clusters of clinical symptoms are supported; Attitudes supporting violence, Emotional dysregulation, Social/Intimacy deficits, and Deviant sexual arousal. The first objective was to replicate the well-documented CM using an online methodology. The second objective was to expand the sphere of the CM by including the clinical symptoms of the Pathway model, by assessing mediating and moderating effects. The main hypotheses of the study were: (i) Attitudes supporting violence would be a predictor of SV and this effect would be mediated by HM, (ii) Emotional dysregulation would be a predictor of SV and this effect would be mediated by HM and IS, (iii) Social/Intimacy deficits would be a predictor of SV and this effect would be mediated by HM and IS, (iv) Deviant sexual arousal would be a predictor of SV and it would moderate the effects of HM and IS towards SV. Also, taking into consideration the scarcity of the studies regarding the protective function of Positive Masculinity (PM) on SV, the present study aimed to assess this notion. It was hypothesized that (v) PM would be correlated negatively with the above-mentioned clinical symptoms, and would predict reduced SV, while its potential moderating role would be assessed on the association among clinical symptoms and SV.

An online community sample of 421 Greek Cypriot heterosexual males (age range: 18-49 years old) who have had dating experiences at some point in the past, was recruited. A battery of 18 questionnaires was used, while SV was evaluated via direct (Sexual Experiences Survey), indirect (Rape Proclivity Scale), and behavioral index measures (SV Laboratory Paradigm). Structural Equation Modeling has been conducted for hypotheses testing. In the present study, the CM was partly replicated, since only the predictive role of HM was supported. Attitudes supporting violence and Emotional dysregulation predicted SV, while HM fully mediated these direct effects. Deviant sexual arousal predicted SV, whereas its moderating role was not

supported. The predictive role of Social/intimacy deficits and IS also was not supported in the present study. PM correlated negatively with almost all clinical symptoms (except for deviant sexual arousal), while it did not significantly correlate with SV, nor its moderating role was found. Overall, the crucial role of HM and the importance of power motives in SV perpetration are highlighted. The present study constitutes an effort to assess both the hostile and positive aspects of masculinity in a unified way, while more studies are needed to assess the role of PM. Future studies are, also, encouraged to continue the investigation of mediating and moderating effects among SV risk factors. Theoretical and practical implications are discussed, as results may inform assessment, prevention, and intervention programs.

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DEDICATION

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CHAPTER 1

LITERATURE REVIEW

Sexual Violence (SV) concerns the sexual activity without consent or consent freely obtained, while coercive methods are used in somatic, verbal, or psychological form (Basile & Saltzman, 2002). There are substantial harmful short- and long-term health effects on victims of SV (Kilpatrick, Resnick, Ruggiero, Conoscenti, & McCauley, 2007). In literature, it has been underlined that the comprehension of factors linked to male-to-female SV is crucial (Rudman & Mescher, 2012). It is apparent that no one single factor leads to SV (Dodge, 2009), and therefore, efficacious preventive interventions need to focus on various risk and protective factors (Tharp et al., 2012). Tharp and colleagues' review (2012) underlined that inclusive preventive interventions need to consider risk and protective factors that affect offending, with or without interacting with other factors in various levels. Also, the significance of investigating the interactions among risk factors of SV and mediating and moderating effects was supported (Tharp et al., 2012).

Sexual violence has been significantly associated to an individual's propensity to SV (Abbey, McAuslan & Ross, 1998). Malamuth (1981) demonstrated that 35% of the non-offending men that had participated in his study stated some proclivity to SV. The Theory of Planned Behavior (TPB) effectively acknowledged the likelihood of future violent acts in the prediction of behavioral intentions and actual behavior (Tolman, Edleson, & Fendrich, 1996). Intentions to commit in an act have been demonstrated as the most direct antecedent to truly engaging in an act (i.e., Fishbein & Azjen, 1975). Similarly, Dang and Gorzalka's study (2015) underlined that the likelihood of raping constitutes the most powerful direct predictor of SV, most

possibly in conjunction with contextual factors such as disinhibition or emotional dysregulation.

Another useful measure of SV is the behavioral index of SV that occurs from laboratory SV paradigms. Since investigating SV in the laboratory is restricted by ethical and practical issues, behavioral analogues of sexual enforcement exceed the limitation of the self-report measures and constitute a suitable choice for research (Rudman & Mescher, 2012). In an online behavioral analogue paradigm, males interact with a counterfeit woman partner regarding a collaborative film activity (sexual Vs non-sexual content of film), on the web. This paradigm has been used in recent studies, like in Bosson, Parrott, Swan, Kuchynka, and Schramm's online study (2015), in which participants had not interacted physically nor had any eye contact with the female partner. In previous recurrences of this paradigm, males either encountered a female partner (Hall & Hirschman, 1994) or saw her via closed-circuit television (Parrott et al., 2012). Interestingly, males with a history of SV were more likely to show sexually violent video clips to females, in contrast to a control group (Hall & Hirschman, 1994; Mitchell, Angelone, Hirschman, Lilly, & Hall, 2002).

According to the National Intimate Partner and Sexual Violence Survey, more than 1 in 4 women has engaged in undesirable sexual contact, and undesirable sexual act (i.e., offensive and improper exposure), while compelled exposure to sexual photos or videos are even more frequent. Notably, 1 in 5 women and only 1 in 71 men were victims of rape throughout their lives (Black et al., 2011), with males committing 99 % of all rapes (Greenfeld, 1997). Abbey, Jacques-Tiurea, and LeBreton (2011) found that 43 % of young single community males since age 14 have forced a female to some kind of unwanted sexual act. These rates support the significance of gender socialization and masculine-related procedure for

comprehending and preventing SV toward females, a comparable procedure that is noticed in intimate partner violence (IPV) (Berke, Reidy, Gentile, & Zeichner, 2016).

The male sex-role constitutes the outcome of a socializing procedure in that males assimilate to be males via obtaining and personalizing the beliefs, attitudes, and actions related to masculinity (Hartley, 1959). It seems that aggression is considered as an outstanding way to illustrate manhood (Vandello & Bosson, 2013) and males are sexually violent toward females as a mean to connect to other males (Groth & Birnbaum, 1979). Similarly, it was suggested that sexual IPV could constitute an efficient method for endorsing masculine norms of control, superiority, and manhood (Berke et al., 2016). In fact, SV - similarly to IPV - is a condition in which males endeavor to communicate socialized masculine attitudes and norms according to the social learning approach (Anderson, 2005; Connell, 2005). Sexual violence constitutes a selected act that males will not perform unless their beliefs and attitudes are compatible with it (Ryan, 2004). Moreover, Cowburn (2010) supports that masculinity constitutes a community welfare subject that has been overlooked in SV.

According to Ryan's (2004) literature review, SV towards females relates more to hypermasculinity and hostile masculinity (HM), with both embracing an approval of violence and sexually calloused beliefs as compared to masculinity. Also, hypermasculinity (Ryan, 2004; Swartout, 2013) and HM (Malamuth, 2003) constitute personality predictors of self-reported SV in non-offender samples. A meta-analytic review (39 studies in undetected offenders; Murnen, Wright, & Kaluzny, 2002) found that the largest effect sizes were associated to HM, which would likely be the leading attitudinal predictor of SV. Hostile masculinity constitutes a socio-cultural factor and has gained a large extent of research attention (McDermott, Kilmartin, McKelvey, &

Kridel, 2015), since it has been presented in the most broadly investigated model, the Confluence model (CM; Malamuth, Sockloskie, Koss, & Tanaka, 1991).

Confluence Model of Sexual Violence

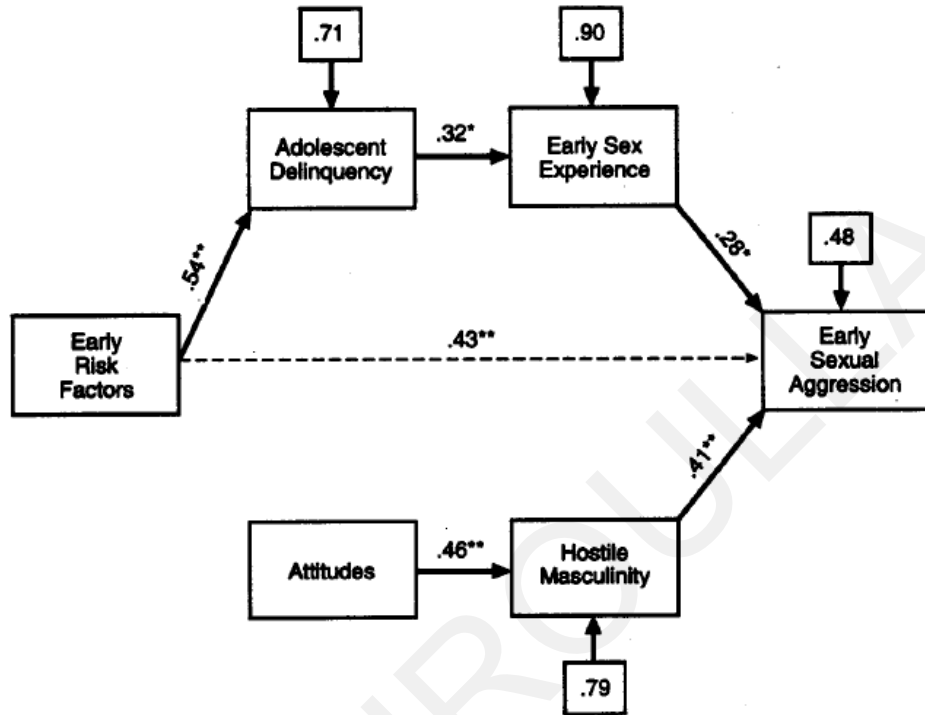
The CM constitutes the first and the only empirically derived, established, and at present most feasible etiological model of SV, in non-incarcerated males towards females. It foresees whether males are at risk of enacting SV acts, in contrast to actually performing SV (Troche & Herzberg, 2016). Malamuth and colleagues (Malamuth, Heavey, & Linz, 1996; Malamuth, Linz, Heavey, Barnes, & Acker, 1995; Malamuth et al., 1991) using university samples underlined the significance of concurrently assessing multiple motives for SV. Recent studies (i.e., Hardit, 2012) replicated the CM and underlined that each factor of the pathways (i.e., early risk factor, attitudes supporting violence, HM, impersonal sex) added predictive strength to the model. The leading CM has predicted community males' SV at 10-year follow-up assessment (Malamuth et al., 1995) and has been replicated among ethnically various community samples (i.e., African-American, and Caucasian men; Abbey, Parkhill, BeShears, Clinton-Sherrod, & Zawacki, 2006).

It is supported that the two main proximal and commonly strengthening intercorrelated pathways to SV are HM and an impersonal approach to sexual interactions (Malamuth et al., 1991). These paths were assumed to lead to both sexual and general violence (Malamuth et al., 1995; Malamuth et al., 1991). The paths function both independently and synergistically (Malamuth et al., 1995; Malamuth et al., 1991; Vega & Malamuth, 2007; Wheeler, George, & Dahl, 2002), while the model suggests that their combination, confluence, or interaction poses males at elevated risk and would be most contingent to bring SV (Malamuth et al., 1996;

Malamuth et al., 1991). This synergetic effect was replicated in recent studies (i.e., Hardit, 2012) and demonstrated the most predictive strength of SV.

According to the model, more distal factors such as childhood and adolescent experiences lead to men's propensity to SV over their influence on impersonal sex (IS) and HM (Malamuth et al., 1995; Malamuth et al., 1991). The first pathway proposes that childhood victimization experiences, including parental violence and SV, raise delinquency. Young males with delinquent behavior are more likely to demonstrate IS, be sexually promiscuous and have a lot of sexual partners. The increase in IS/sexual promiscuity is related with an increase in SV. Likewise, in the second pathway, attitudes that support a wider propensity towards violence predict more attitudes that further support hostility, especially towards females. These attitudes that support hostility toward females are related to an increase of SV. The first path highlights sexual motives while the second underlines power motives for SV (Malamuth et al., 1991). Figure 1 demonstrates the depiction of these pathways in the CM (Malamuth et al., 1995), as theorized, and revised by Malamuth and colleagues in a sequence of studies conducted during the end of the 1980's and the 1990's.

Figure 1. Malamuth and colleagues' (1995) Confluence Model of Sexual Aggression



Note. Dashed lines indicate path added on the basis of modification indices.

* $p < .01$ ** $p < .001$.

Impersonal Sex Path (ISP)

Malamuth and colleagues (1995) suggested that SV seems to be partly the outcome of an impersonal stance to sex. The ISP entails the number of sexual partners and the age at first intercourse (Malamuth et al., 1995). In fact, it can be conceptualized as holding several casual sexual partners, lacking emotional closeness or commitment, and holding early sexual experiences (Malamuth et al., 1991). Impersonal sex permits satisfaction from forced sex, mainly since males disregard their partner's preferences and feelings. Sex is considered as a game to be won and as an activity of bodily gratification rather than as a component of a romantic and emotional relationship (Malamuth et al., 1995). Males reporting greater levels in IS may obtain sexual satisfaction at any cost (Malamuth, 1991). It is supported that IS enhances the likelihood of SV since it offers males with more opportunities to act in SV-related behaviors (Abbey et al., 1998).

The ISP occurs by a cluster of distal factors featured by early risk factors of early negative childhood experiences, like physical and sexual abuse by a guardian, and exposure to domestic parental violence (Malamuth et al., 1991). According to the model, these early risk factors lead to delinquency and the pathway from delinquency to SV is mediated by IS (Malamuth et al., 1991; replication in Hardit, 2012).

Hostile Masculinity Path

Hostile masculinity classically concerns an attitudinal component considering the support of traditional, inflexible concepts of masculinity, joined with hostility into, suspiciousness of, and/or a desire for superiority over females (Malamuth et al., 1991; Murnen et al., 2002). In fact, HM is consisted by two elements: (i) a hostile and doubtful attitude and, (ii) a wish to control or dominate women (Dean & Malamuth,

1997; Malamuth, 1986; Malamuth et al., 1991). Hostile masculinity can be also perceived as hostile attitudes, and acts toward females (Malamuth et al., 1991). Males with elevated HM are incommensurate with the possible control that females have over them, are distrustful towards females, are doubtful regarding their incentives, and are readily irritated by them and dominating toward them (Malamuth et al., 1995; Malamuth et al., 1991). Hostile masculinity seems to be the outcome of the concurrence among delinquency and attitudes supporting violence (Malamuth et al., 1991). Also, early childhood experiences of abusive family conditions may raise the growth of hostile perceptions regarding heterosexual relationships (Malamuth et al., 1995).

It is suggested that HM composes a powerful risk pathway. Resentment against females and the desire to dominate them constitute the main motivators for sexual perpetration against females (Lizak & Roth, 1990). Notably, hostile beliefs toward females constitute a potent predictor of SV, after controlling for more explicit risk factors of attitudes (i.e., rape myth acceptance; Forbes, Adams-Curtis & White, 2004). Furthermore, HM - but not IS - represents an adequate state for SV risk according to a web-based study using a community male sample (Greene & Davis, 2011). Similarly, Casey and colleagues (2016) found that HM is a more powerful predictor of SV than IS in an online community sample of young males. Anderson and Anderson (2008) found that HM constitutes a substantial predictor of SV against women and less crucially IS. Importantly, hostile beliefs toward females predict self-reported SV (i.e., Abbey & McAuslan, 2004; Calhoun, Bernat, Clum, & Frame, 1997) and greater scores in laboratory analogues of SV (Parrott et al., 2012; Thomas & Gorzalka, 2013). Also, it was suggested that males internalize cultural attitudes regarding manhood and gender roles (Good, Borst, & Wallace, 1994) and that these

attitudes have a substantial impact on males' likelihood to SV (Harway & Steel, 2015).

Positive Masculinity

It is crucial to highlight that not all men express the above mentioned maladaptive features of masculinity. Some men express healthy, adaptive, and prosocial aspects of masculinity (Englar-Carlson & Kiselica, 2013). Although, rarely recognized in literature, some males hold the belief that they have a responsibility to care for and provide for others, to have bravery and self-reliance, work hard and conduce to their families and communities (Kiselica, Benton-Wright, & Englar-Carlson, 2016). In addition, resolvedness, problem solving, and risk-taking have been regarded as valuable masculine features (Kilmartin, 2010).

Considering that the literature on masculinity has been direct to its negative effects, positive masculinity (PM) has been a mainly unexploited resource (Kiselica & Englar-Carlson, 2010). Any argument of male strengths, and adaptive and positive facets of masculinity was ignored (Kiselica, 2011; O'Neil, 2012). Currently, there is a developing body of empirical literature on PM (Kiselica et al., 2016). Positive masculinity concerns the aspects of traditional masculine roles which are more positive, strength-based, and more likely to benefit men and society. It underlines the adaptive features such as strengths, emotions, and qualities of men that enhance welfare and resiliency (Isacco et al., 2012). A positive socialization process of male strengths is transferred across generations of males and it teaches them how to grow decently (Kiselica & Englar-Carlson, 2010). Through this procedure boys endorse pro-social masculine approaches of thinking and acting, which encourage healthy growing (Kiselica et al., 2016).

Aiming to gain a more comprehensive understanding of males, the examination of PM is essential (Kiselica et al., 2016; Kiselica & Englar-Carlson, 2010). Specifications of PM could transfer our attention away from what is erroneous with males, to acknowledging the features that permit males to benefit human life and the community (Isacco, 2015; Lujan & O'Neil, 2008; Wade, 2015). Positive classifications of masculinity could modify the community, by contributing to the reduction of violence and abuse in the community (Lujan & O'Neil, 2008). In fact, Isacco (2015) underlined the need for the investigation regarding the adhesion or not to PM as a path to practicing positive health actions, a suggestion that could be applied to consensual sex.

It seems that the lack of negative attitudes regarding females constitutes a protective factor against SV (Blake & Gannon, 2014). Positive features that are socially framed as masculine (i.e., protect and respect others; Kiselica & Englar-Carlson, 2010) could decrease the likelihood of SV (McDermott et al., 2015). In this sense, some men support specific features of the male sex role, which restrain SV. Specifically, masculinity that contains autonomy, the protection of females (and children), the capacity to demonstrate self-control, and/or the consideration for other's rights and independence also acts as a protective factor towards SV (Ryan, 2004).

Integrating theories

According to the literature over the last three decades, a growing need for multifactorial tactics is underlined, while researchers suggest both additive and interactive effects (Hardit, 2012). The CM constitutes one of the more constant and empirically replicated models, yet it does not encompass the full spectrum of risk factors that have been related to SV (Abbey et al., 2011). Various factors and theories

could be investigated simply by altering variables among one or both pathways (Hardit, 2012; Malamuth & Thornhill, 1994; Vega & Malamuth, 2007).

In numerous studies, the CM was applied as the theoretical framework to investigate the - direct or indirect - impact of several variables (i.e., alcohol use, Parkhill & Abbey, 2008; alcohol consumption, misperception of sexual intent, & psychopathy, Abbey et al., 2011; alcohol consumption, empathy, & peer pressure, Abbey et al., 2006; dominance & nurturance, Troche & Herzberg, 2016; empathy, Wheeler et al., 2002; misperception of sexual intent, Jacques-Tiura, Abbey, Parkhill, & Zawacki, 2007; peer influence, Swartout, 2013; pornography, Vega & Malamuth, 2007; sexualized media & peer groups, Hardit, 2012). Other studies have investigated the integration of the CM to other models (i.e., General Aggression Model, Anderson & Anderson, 2008; Narcissistic Reactance Theory, Saenz, 2009). These replications propose the solid predictive capacity of the CM.

It was also suggested that SV toward females is frequently affected by the intention of gaining control (Purdie, Abbey, & Jacques-Tiura, 2010), and this could have been associated with clinical symptoms anticipating SV. Future studies need to investigate these potential associations (i.e., emotional dysregulation, Shorey, Brasfield, Febres, & Stuart, 2011). Importantly, Troche and Herzberg (2016) underlined the need of including additional risk factors on the CM, which have been acknowledged as predictors of SV. Hence, the present study will focus on the addition of clinical symptoms in the CM. After the presentation of clinical symptoms, their potential association with HM and IS, will be described below.

Clinical symptoms

There is an extensive body of literature suggesting that there are four clusters of difficulties or clinical symptoms typically characterizing sex offenders against children and adults: attitudes supporting violence, emotional dysregulation; social and intimacy deficits; and deviant sexual arousal (i.e., Hanson & Harris, 2000, 2001; Marshall, 1989; Thornton, 2002; Ward & Beech, 2004; Ward & Beech, 2006; Ward & Siegert, 2002). These difficulties can be conceptualized as acute risk factors (Hanson & Harris, 2000, 2001) or acute conditions on psychological dysfunction (Beech & Ward, 2004). Also, they constitute an outstanding part in etiological theories and are feasibly possible to be encompassed in any inclusive theory of SV (i.e., Hall & Hirschman, 1992; Marshall & Barbaree, 1990; Ward & Siegert, 2002). Particularly, these four clusters of problems compose the most comprehensive multifactorial theory, the Ward and Siegert's (2002) Pathway Model. In this model, each process represents an offense pathway with divergent psychological and behavioral profiles, distinct causalities, and latent shortfalls. Even though, each pathway is considered to link with a specific set of major mechanisms and group of symptoms or difficulties, the mechanisms consistently interact to lead to sexual perpetration. In this sense, every sexual crime comprises cognitive, affective, intimacy, and arousal facets. Yet, it is proposed that sex offenders do not display all problems in an identical way, either regarding the presence of a problem itself, or the severity in which it is exhibited (Ward & Siegert, 2002).

Below the clinical symptoms of Pathway Model are presented in more detail.

i. Attitudes supporting violence

It has been demonstrated that rapists maintain attitudes such as, females aim to deceive males regarding what they truly want, and that they are always sexually

receptive to males' desires (Polaschek & Ward, 2002). Such attitudes, known as rape supportive attitudes entail beliefs that the victims are responsible for encouraging male attention, being drunk or acting seductively, that rape is not possible without their cooperation, that they are stimulated by being compelled to sexual acts, and they frequently "cry rape" following their regrets about having sex voluntarily (Burt, 1980). Rape myths are stereotypical and incorrect attitudes regarding the liability of the victims, the guiltlessness of perpetrators, and the illegitimacy of rape as a tremendous offend (Bohner et al., 1998). Rape myth acceptance (RMA) holds a counterbalanced function that allows sexually violent males to affirm that the act they are foreseeing will not impair the female or that it will constitute rape (Bohner et al., 1998; Lonsway & Fitzgerald, 1994). Rape myths permit males to minimize social constraints toward the application of force over their partner in sexual acts (Bohner et al., 1998).

It is supported that rape-encouraging beliefs (Tharp et al., 2012) and RMA (i.e., Quackenbush, 1989) significantly related to SV. Sex offenders hold strong callous attitudes towards women; are strongly accepting of violence against them; and are embracing rape myths (Abbey & McAuslan, 2004; Loh, Gidycz, Lobo, & Luthra, 2005). Rape myth acceptance and attitudes favorable to offence palliate the liability for one's behavior and antecede SV (Bohner et al., 1998; Ward & Siegert, 2002). Moreover, research findings have constantly demonstrated a link among RMA and both self-reported SV and SV tendency (Bohner, Pina, Viki, & Siebler, 2010; Muehlenhard & Falcon, 1990). Also, RMA have been related to SV in community men (Murphy, Coleman, & Haynes, 1986). Importantly, Polaschek and Ward (2002) underlined that more attention needs to be focused to the comprehension of males' precise cognitive distortions, if interventions will be effective.

ii. Emotional dysregulation

It is supported that deficits in emotional regulation and reactivity (i.e., manage anger) could constitute another component of behavior that results to SV (Hardit, 2012). Emotional dysregulation illustrates a difficulty to express emotions in a "healthy" way and manage mood conditions, encompassing impulsivity, low affective control, or other forms of affective impulses (Ward & Beech, 2006). Emotional dysregulation implies that sex can be employed as a strategy to manage negative emotions or the absence of emotional control and disinhibition (Ward & Marshall, 2004). In this way, aggression toward women seems to operate like a coping method to handle emotional dysregulation and achieve control over situations related with emotions of susceptibility and negative emotional arousal (Jakupcak, Tull, & Roemer, 2005; O'Neil & Harway, 1997). In addition, the mood-managing function of aggression is supported by laboratory findings (Bushman, Baumeister & Phillips, 2001).

iii. Social and Intimacy deficits

Social and intimacy deficits and particularly those facets applicable to close relationships are evidently regarded as vital to SV (Hudson & Ward, 2000; Marshall, 1993). Finkelhor (1984) supported that sex offenders/child molesters did not learn suitable skills in concern to socio-sexual performance. Seto, Barbaree, Serin and Malcolm (1997) encompassed social competence among moderating variables in their two-tier model unifying variables associated to SV. It was supported that relationship problems constitute a prominent aspect to be included in the evaluation of sexual perpetrators (Marshall, 1993). McDonel and McFall (1991) related social skills deficits (particularly, recognizing females' degree of interest and negative

emotional signs) with self-reported SV or propensity to rape. Previous studies (i.e., Abel, Becker, Blanchard, & Djenderedjian, 1978; Marshall, 1989) recommended that sexual perpetrators have the incapacity to begin and preserve proper relationships and then, negotiate interpersonal interactions, ending up employing coercive tactics to attain sexual partners and fulfill intimacy needs. In this sense, social incompetence hinders the suitable satisfaction of the essential need for intimacy (Marshall, 1989).

Ward (2003) suggested that in the intimacy deficits pathway, sexual perpetrators affectionately reserve themselves from relationships to avoid rejection. Marshall, Anderson and Fernandez (1999)'s review supported that SV perpetrators face difficulties with intimacy and loneliness. In fact, many of the sexual perpetrators define themselves as being "loners" all their lives and that their sexual relationships are unsettled (Marshall, 1989). In addition, loneliness significantly predicted the self-reported propensity of SV (Check, Perlman, & Malamuth, 1985). Even though, difficulties in intimate relationships constitute a characteristic of sexual perpetrators, the mechanisms are not clear (Hudson & Ward, 2000) and there is a scarcity of studies in this field (Abracen et al., 2004).

iv. Deviant sexual arousal

Lastly, sex offenders find violence arousing (Finkelhor & Yllo, 1985) and demonstrate considerable prevalence of deviant sexual fantasies (i.e., Gee, Devilly, & Ward, 2004; Langevin, Lang, & Curnoe, 1998) and sexual stimulation to humiliating sexual activities (Proulx, Aubut, McKibben, & Cote, 1994). Deviant sexual arousal implies deviant sexual interest in coercive sexual acts (Ward & Siegert, 2002) and leads directly to such behaviors (Marshall, Barbaree, & Eccles, 1991). Affinity to SV was related to stimulation to rape scenes (in contrast to consensual sex) via

phallometric and self-report measurements (Malamuth, 1989). In fact, SV men do not reliably favor sexual violent cues than consensual cues; they reliably favor SV cues more, as compared to non-SV men (i.e., Clegg & Fremouw, 2009; Mosher & Anderson, 1986).

Models of sexual perpetration support the role of sexual deviance -atypical preferences and/or sexual preoccupation- for the comprehension of sexual offending (Lalumiere, Harris, Quinsey, & Rice, 2005; Seto, 2008; Ward, Polaschek, & Beech, 2006). It has been shown that sexual deviance is a significant predictor in sexual offending (Rice, Harris, & Quinsey, 1990), reoffending (i.e., meta-analysis of Hanson & Morton-Bourgon, 2005), number of SV victims, and type of sex offend in a sample of incarcerated sex offenders (Abracen et al., 2004).

Associations between Confluence Model and Clinical Symptoms

i. The addition of Attitudes favorable to offence into the CM

Males, who maintain traditional gender roles, seem to approve more supporting attitudes of rape (Davis & Liddell, 2002) and sexual harassment toward females (Wade & Brittan-Powell, 2001). Rape-supportive beliefs and hostility towards women are intercorrelated (Lonsway & Fitzgerald, 1995). Sexually aggressive attitudes and beliefs are related to HM (Malamuth & Thornhill, 1994). The significance for future studies to investigate specific dimensions of masculinity, RMA and SV has been suggested (Zurbriggen, 2010). It is noteworthy that there is a scarcity in the studies investigating the way that stereotypical thinking regarding rape and females is formed (Debowska, Boduszek, Dhingra, & DeLisi, 2016).

According to Malamuth's studies (Malamuth, 1986; Malamuth et al., 1995) attitudes supporting violence constitute a predictor of SV. Attitudes supporting violence embrace adversarial sexual beliefs, acceptance of rape myths, and interpersonal violence (Malamuth et al., 1991). The CM supports that attitudes supporting violence influence greatly HM (Malamuth et al., 1991). Importantly, attitudes constitute a significant component of the "hostility path", although their impact on violence was indirect (Malamuth et al., 1991). Acceptance of attitudes promoting violence results to hostility towards females, which has been related to elevated rates of SV (Malamuth et al., 1991; for recent replication, Hardit, 2012). In this sense, the predictive role of attitudes favorable to offence to SV and the mediating role of HM are suggested and, they will be assessed in the present study.

ii. *The addition of Emotional Dysregulation into the CM*

Masculine socialization may concur to emotional dysregulation via encouraging the avoidance of susceptible emotions, in favor of those that are more approved by masculine norms (i.e., anger; Gratz & Roemer, 2004). Intimate partner violence toward females may constitute a dysfunctional emotional regulation method targeted at eliminating the painful affects, which are understood to hazard masculine status (i.e., stress, embarrassment; Jakupcak et al., 2005; O'Neil & Harway, 1997). Similarly, Malamuth and colleagues (1996) assessed the role of emotional dyscontrol in violent behavior. Specifically, they assessed negative emotion and the extent that it impacts motor tendencies, as indicated in impulsivity. They found that emotional dyscontrol had an indirect effect on SV mediated by HM. In this sense, it is hypothesized that HM mediates the association among emotional dysregulation and SV.

Concerning the early risk factors, it was underlined that children who are victims of SV, are featured by elevated emotional dysregulation during their lives (Cloitre, Cohen, & Koenen, 2006). Also, it is easy to conclude how emotional dysregulation would enhance delinquency in childhood (Hardit, 2012), while the association among delinquency and SV is mediated by IS (Malamuth et al., 1991). Having in mind the above and that there is a consideration regarding the role of IS in the association among emotional dysregulation and SV, it is hypothesized that IS could mediate this association.

iii. The addition of Social and intimacy deficits into the CM

Masculinity ideology was related to fewer social competencies (i.e., conflict-management tactics; Lease et al., 2010), relationship fulfillment (Levant & Richmond, 2007; McGraw, 2001), intimacy-caregiving and responsiveness to communication (Mcgraw, 2001), while it is positively linked to ratings of fear of intimacy (Maxton, 1994). Edwards (2014) found that traditional masculinity was negatively related to emotional intimacy and that it holds a significant role in this procedure. It was supported that the more males discard feminine attributes via masculinity, the more it will be possible to discard both intimacy and affective connection with others, thus in this sense increasing their possibility of SV (Lizak & Ivan, 1995). Moreover, the degree of engagement in situations which might result to intimacy is negatively related to hostility towards females (Cortoni & Marshall, 2001). Also, hostile beliefs toward females are notably associated to social skills deficits (Mann, Hanson, & Thornton, 2010). Loneliness, an expected consequence of deficits in the interpersonal domain, was significantly linked to hostility attitudes against females in a sample of college males (Check et al., 1985). In fact, it was

found that loneliness leads to hostile beliefs toward females and acceptance of violence (Check et al., 1985).

Males high in HM exhibit a fear of rejection, emotions of insecurity and anxiety regarding the heterosexual relationships, and to diminish these emotions, they employ force and violence (Hardit, 2012). It has been presumed that violent home environments and relations with delinquent peers end to HM, particularly, when these experiences lead to a premature procedure of growing up lacking adequate social skills and abilities (Malamuth et al., 1991). Importantly, Malamuth (2003) in the "hierarchical-mediational confluence model" supported that the influence of more "general" maladaptive features (e.g., psychosocial deficits) on SV, is mediated by more "specific" features (e.g., HM). In addition, Hunter and colleagues (in samples of adolescent sexual perpetrators-Hunter, Figueredo, & Malamuth, 2010; Hunter, Figueredo, Malamuth, & Becker, 2004) supported that HM was positively affected and increased by psychosocial deficits. Psychosocial deficits encompass difficulties in cognitive functioning, emotional distress (i.e., depression, anxiety), and perceived deficits in social relationships. Psychosocial deficits were assessed via Youth Self Report (anxious, depressed, withdrawn, social problems), which evaluates self-esteem, loneliness, social isolation, and peer rejection (Achenbach and Dumenci, 2001). It is noteworthy that the original model of Malamuth and colleagues (1991) encompassed social isolation, but it was not empirically supported and has not been preserved. Yet, in the present study it is hypothesized that HM mediates the association among social/intimacy deficits and SV.

Sexual preoccupation is not related to romantic love or strong interest in a specific person (Langstrom & Hanson, 2006), while it comprises of the use of sex and not automatically intimacy (Cortoni & Marshall, 2001). The long-held belief

supports that SV males are antisocial, without social skills or beneficial partner qualities, and can only gain sex by surprising females and coercing them (Baumeister, Catanese, & Wallace, 2002). Considering the early risk factors suggested by Malamuth and colleagues (Malamuth et al., 1995; Malamuth et al., 1991), early family and peer influences could impact the growth of social negotiation skills, while children who have experienced SV, are featured by deficits in interpersonal functioning during their lives (Cloitre, Cohen, & Koenen, 2006). Hardit (2012) underlines the ease in which one concludes to how deficits in interpersonal functioning would enhance delinquency in childhood; yet males with impaired development in this area could demonstrate social deficits in creating and sustaining intimate relationships, primarily in sexual relationships (Malamuth et al., 1995; Malamuth et al., 1991). Marshall (1989) suggested that the need of combined intimacy with sexual life can result to sexual promiscuity/IS and preoccupation. Also, it has been underlined that sexual promiscuity could stem from the combination of feelings of loneliness and anger, while sex perpetrators might misinterpret intimacy and sex (Marshall, 1989). In addition, deficits in the interpersonal domain could contribute to the explanation of the absence of closeness to sexual partners demonstrated in males who are more likely to exhibit SV (Hardit, 2012). Hence, it is hypothesized that IS mediates the association among social/intimacy deficits and SV.

iv. The addition of Deviant sexual arousal into the CM

A potent association among sexual attitudes and self-reported rates of sexual stimulation was demonstrated (Rupp & Wallen, 2008). A multifaceted interaction among masculinity and males' narratives regarding sexual arousal was also demonstrated, while females depicted as objects of sexual acquisition (Seal & Ehrhardt, 2003). Hostility towards females significantly related with sexual arousal to

rape cues in community men via phallometric and self-report measurements

(Malamuth, 1986; Murphy et al., 1986). The association among desire for control and dominance with sexuality was noted as well (Steward & Rubin, 1974). Importantly, the cognitive element of sexual arousal constitutes an important feature of the sexual stimulation, and requires more research. Also, it is supported that socialization could potentially moderate males' responses to sexual cues and sexual stimulation (Rupp & Wallen, 2008).

Malamuth and Check (1983) supported that males with elevated levels of obedience to sex-roles stereotypes indicated elevated stimulation to representations of rape. Males with elevated hostility towards females have perceived representations of rape and other SV material as more arousing in comparison to non-hostile males (Malamuth, 1983). In some of the early attempts of multifactorial models, Malamuth (1986) investigated six predictors of SV, including arousal to SV (hostility toward women, attitudes supporting violence, dominance as a motive for sex, psychotism, sexual experience) which provided significant unique contribution to prediction. Also, all variables demonstrated a synergetic effect on the prediction of SV in the above mentioned study. Furthermore, Malamuth and colleagues (1996) suggested that arousal to violence among other variables (hostility toward women, attitudes supporting violence, dominance as a motive for sex) constituted a primary component of HM path. Notably, other studies (i.e., Abbey et al., 2006) have omitted the investigation of the role of deviant sexual arousal in a replication of the CM in community samples. However, Hardit (2012) suggested that some male's arousal may constitute as a motivational precursor for SV.

Concerning IS, qualitative data have shown that child molesters with elevated deviant sexual arousal, displayed an urge for IS (Connolly, 2004). Also, Langstrom

and Hanson (2006) found a potent relation among IS and deviant sexual arousal/paraphilias (voyeurism, exhibitionism, sadism/masochism) in a community sample of males and females aged 18-60 years old. Lastly, it is noted that sexual arousal is considered a physiological factor influencing SV (Malamuth, 1986); yet many SV incidences do not appear to occur as an outcome of deviant sexual arousal, thus it seems to constitute only a potential risk factor (Hall & Barongan, 1997). In the present study, the moderating role of deviant sexual arousal will be assessed in the association among HM and SV, and among IS and SV.

Contribution of the present study

The importance of cognitive factors, like beliefs and attitudes regarding females and sex, is recognized in most multifactorial theories of SV and in intervention programs (i.e., Ward & Siegert, 2002; Yates, 2013). McDermott and colleagues (2015) underline that there is an outstanding shortage of research in SV regarding gender role constructs. In fact, they (McDermott et al., 2015) propose that future studies apply masculinity ideologies to SV likelihood. Moreover, previous studies (i.e., Abbey et al., 2011; Hardit, 2012; Parkhill, 2008) that investigated the CM, underlined its usefulness, the necessity to continue to assess its components, and the significance of extending it via the inclusion of other components. In fact, despite previous findings supporting that HM and IS are predictive of SV, more studies are required to investigate why and how these predictors lead to SV. Also, Connolly (2004) underlined that the role of masculinity variables in the SV field is mainly underdeveloped and could be enhanced from more attention to the Pathways' Model (Ward & Siegert, 2002). The present study seeks to integrate the CM and Pathway Model of SV and to understand the mechanisms linking HM, IS, the aforementioned clinical symptoms, and SV. This constitutes the innovation since to my knowledge no

other study has examined these variables together. No previous studies have examined the effects of attitudes supporting violence, emotional dysregulation, intimacy/social deficits, and deviant sexual arousal on the two pathways of CM, HM and IS.

In addition, most studies have used either incarcerated sex offenders or college samples and not much is identified regarding predictors of male-to-female SV in non-student, community samples (Abbey et al., 2011; Abbey et al., 2006; Widman, Olson, & Bolen, 2013). The present study will use an online community sample of males. Moreover, young males will be recruited, since most of SV incidents have been committed by this age group (US data; Bureau of Justice Statistics, 2008).

Previous findings (O'Neil, 2008; Whorley, & Addis, 2006) have underlined the need for future studies to examine healthy facets of males' gender roles, the mediators, and moderators of the associations between various factors, and apply experimental design. Furthermore, as Abbey and colleagues (2011) have suggested protective factors like attitudes supporting equality among genders and nonviolent acts during conflict in relationships, could counteract risk factors. A scarcity of studies regarding the protective function of PM on SV has also been noted; thus, the present study will assess this notion.

Aim of the present study

The present study is in accordance with previous literature, supporting that it is more useful to prevent SV by understanding the perpetrators rather than protecting the victims (Harway & Steel, 2015). The present cross-sectional study will investigate male-toward-female SV, since reports propose that rapes most often target females (Black et al., 2011) and are most often committed by males (Sedgwick,

2006). The purpose of this study is to build on existing findings concerning individual-level changeable risk and protective factors related to masculinity norms for SV and the contribution of psychological symptoms. Specifically, the first objective is to replicate the well-documented CM of SV toward females (Malamuth et al., 1995; Malamuth et al., 1991). The second objective is to expand the sphere of the CM by including the clinical symptoms of the Pathway model (Ward & Siegert, 2002). In fact, the present study aims to investigate various risk factors of SV by assessing aspects of the CM and Pathway Model, including mediation and moderation effects. The study emphasizes on recent factors that fall in the clinical domain, in contrast to early risk factors from childhood experiences.

One argument regarding the recruitment of a non-incarcerated community sample is males' limited eagerness to disclose likely prosecutable offences to a researcher (Abbey et al., 2006). Also, it is acknowledgeable that SV constitutes a sensitive issue and there is a risk that participants would answer in accordance to what is socially acceptable and desirable (Gannon et al., 2012). Hence, in the present study a social desirability scale will be administered. Moreover, previous studies (i.e., Hardit, 2012; Tull, Jakupcak, Paulson, & Gratz, 2007) regarding SV and emotions, have underlined the need for non-self-report measures of aggressive acts. In this sense, beyond the self-report measures regarding previous SV behavior and the likelihood to SV, a SV behavioral analogue was held in the present study.

Hypotheses

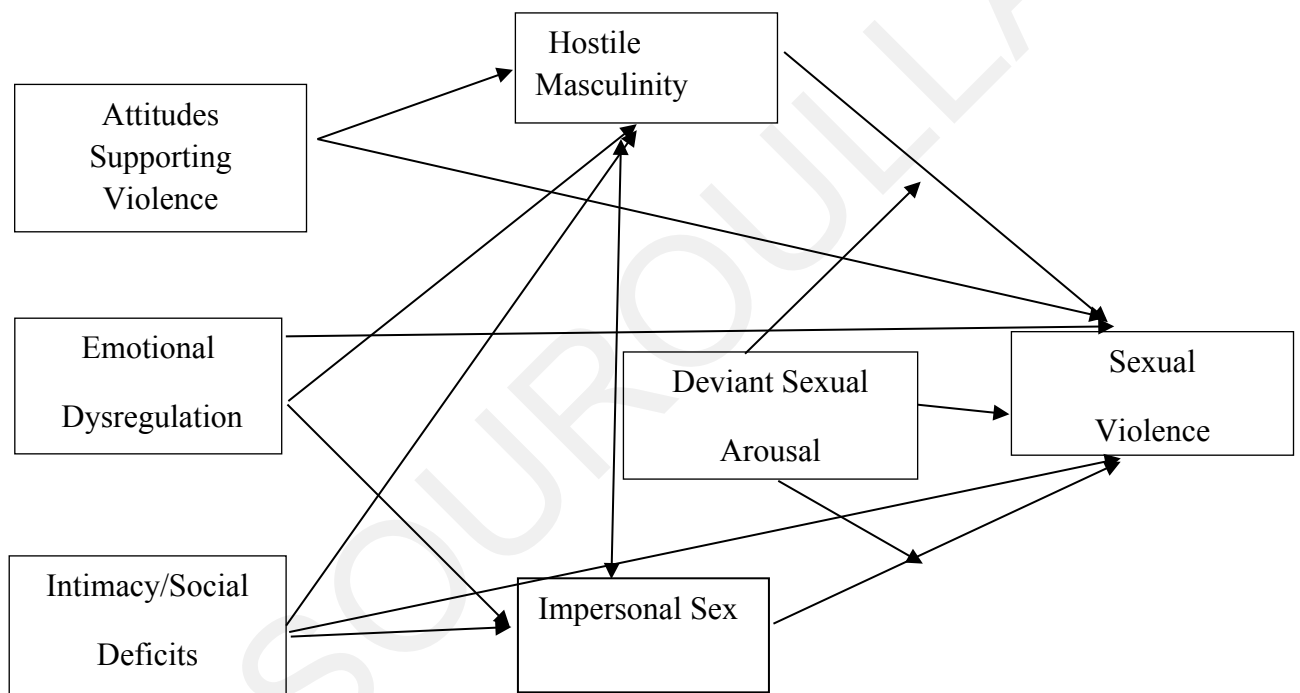
This study examined the risk factors for SV and indicate how clinical symptoms associate and interact with HM and IS, and thus lead to SV. See Figure 2 for graphic

depiction of the hypothesized unified conceptualized model. Specifically, the following hypotheses are evaluated in this dissertation:

- 1) The CM will be replicated via the application of an online methodology, in that, HM and IS will predict SV. Also, the confluence of IS and HM will predict higher rates of SV.
- 2) Attitudes supporting violence will be a predictor of SV. Also, attitudes supporting will be positively related to HM, but will be not correlated to IS. Last, HM will mediate the association between attitudes supporting violence and SV.
- 3) Emotional dysregulation will be a predictor of SV. Also, emotional dysregulation will be related positively to HM and IS. Lastly, HM and IS will mediate the association between emotional dysregulation and SV.
- 4) Social/Intimacy deficits will be a predictor of SV. Also, social and intimacy deficits will be related positively to HM and IS. Finally, HM and IS will mediate the association between Social/Intimacy deficits and SV.
- 5) Deviant sexual arousal will be a predictor of SV. Also, deviant sexual arousal will be positively correlated to HM and IS. Also, deviant sexual arousal will moderate the association between HM and SV, and between IS and SV.
- 6) A positive correlation will be noted among SV measures: likelihood to SV, SV history, and behavioral index of SV responding in SV paradigm.
- 7) Positive masculinity will be related negatively to HM and SV. Positive masculinity will predict reduced SV. The relationship with IS will be assessed.
- 8) Positive masculinity will be related negatively to attitudes supporting violence, emotional dysregulation, social/intimacy deficits, and deviant sexual

arousal. Also, the function of PM on attitudes supporting violence, emotional dysregulation, social/intimacy deficits, and deviant sexual arousal towards SV will be assessed.

Figure 2. Hypothesized Unified Conceptualized Model



CHAPTER 2

METHODS

Sample and Participants

In the present study, an online non-forensic, non-clinical sample of heterosexual Greek native speaker males was recruited. The present study recruited community males, who took part in the study online, following the steps of previous web-based studies (i.e., Wurtele, Simons, & Moreno, 2013). The inclusion criteria of the sample were: (i) participants needed to be heterosexual, (ii) between the ages of 18 and 49, and (iii) have had dating experiences in some point in the past (similar criteria applied in Abbey et al., 2011 and Abbey et al., 2006). Therefore, the exclusion criteria were that the participants (i) be homosexual, (ii) be less than 18 years old or older than 49, and (iii) never have had dating experiences in the past.

Data collection was conducted via the Survey Monkey online software. In total, 905 responses were recorded, out of which 426 completed the study, in full. Due to the fact that participants withdrew gradually from the study, the demographic information regarding the non-completed responses was not obtained, since demographic information was requested at the final step of the study. From the remaining 426 participants, five more participants were excluded: three participants did not fit the sexuality criterion (two were women and one was a homosexual man); and another two respondents did not meet the age criterion of maximum age of 49 years old (63 and 69 years old). Therefore, 421 participants were used in the analyses.

Participants' age ranged between 18-49 years old, with a mean age of 30.23 years old (Median = 29, SD = 7.99). Two responses in the age variable were not correctly entered (187 and 458 years old for participants 102 and 399, respectively)

and were thus, treated as missing data. The majority of the participants (63.4%) was either in a relationship or married. Most of the participants were living in a city (79.1%), and 24.9% of the total sample lived alone. The participants who were working (either part-time, full-time, or self-employed) reached the percentage of 64.3%, while 29.7% of the participants are currently students. Also, the current sample has a high educational level, since 60.6% have studied in a University (either undergraduate or postgraduate degree). The number of relationships ranged between 0-100, with a mean of 6.88 relationships (Median = 4, SD = 11.94). Only 3.8% admitted to committing a criminal offense, with the most common offense concerning road safety. Specifically, speed limit (n = 4), car accident (n = 3), and alcohol test (n = 1). Other offenses are beating (n = 2), hunting violation (n = 1), rape (n = 1), theft (n = 1), and riot (n = 1).

Procedure

The study was advertised as anonymous and that it concerned emotions, personal relationships, sexual behavior, and tendency to SV. Participant recruitment was accomplished via a multifaceted approach (Temple & Brown, 2011), using offline and online methodologies. Offline methodologies included flyers/posters, and personal referrals. Online methodologies included social media, direct emails to personal contacts, organization members, universities and colleges, online communities, email snowballing, and postings on online forums. Seventeen participants completed the study to receive credit for a psychology class. The order of questionnaires completed by the participants is presented in Table A1, in APPENDIX A, with the non-sexual scales presented and thus completed first, and then, the more sensitive scales followed regarding their sexual behaviors.

Measures

Demographic measures. Participants stated their age, family condition, history of romantic relationships, place of residence, living condition, occupation, education, and criminal record. See Table 1 for a detailed depiction of the participants' demographic information.

Sexual Violence

The dependent variable of SV was measured by using a multi-methodology, through combining various assessment tools. This is in accordance with Malamuth's (1988) suggestion regarding the multidimensionality of SV and the application of several measures. Also, it was supported that multiple measures can provide a more comprehensive picture in designating a proposed construct (Kline, 2005). Sexual violence was measured via rape proclivity, previous SV behavior and a SV paradigm, which provides a behavioral index of sexually aggressive response. Strain, Hockett, and Saucier (2015) proposed a behavioral assessment that will provide information about the frequency of various behaviors and give the opportunity to investigate the motives behind actions of aggressiveness and rape proclivity. In addition to the SV paradigm, two other relevant assessments took place, the female's partner reaction and the suspicion probes (Bosson et al., 2015).

Table 1. *Descriptive Information about the Sample (N = 421).*

Description	Frequency	Percentage	Missing (%)
Age	NA	NA	17 (4%)
<i>Family Condition</i>			15 (3.6%)
Single	130	30.9 %	
In a relationship	150	35.6 %	
Married	117	27.8 %	
Divorced	8	1.9 %	
Widower	1	0.2 %	
<i>Place of Residence</i>			17 (4%)
City	333	79.1 %	
Village	71	16.9 %	
<i>Living Condition</i>			16 (3.8%)
Alone	105	24.9 %	
With my parents	99	23.5 %	
With my partner	99	23.5 %	
With my family	90	21.4 %	
With friends	12	2.9 %	
<i>Employment Status</i>			16 (3.8%)
Student	125	29.7 %	
Soldier	5	1.2 %	
Unemployed	4	1 %	
Self-employed	35	8.3 %	
Part-time employee	14	3.3 %	
Full-time employee	222	52.7 %	
<i>Higher Educational Level</i>			19 (4.5%)
Primary school	1	0.2 %	
Gymnasium/Lyceum	124	29.5 %	

Running Head: Integrating Theories of Sexual Violence

College	22	5.2 %	
University- graduate degree	115	27.3 %	
University- master degree	119	28.3 %	
University- PhD holder	21	5 %	
Number of relationships	NA	NA	15 (3.6%)
Criminal Record			15 (3.6%)
Yes	16	3.8 %	
No	390	92.6 %	

Note. NA; not applicable.

Rape proclivity Scale (Bohner et al., 1998; Bohner, Siebler, & Schmelcher, 2006). The tool is consisted by four scenarios depicting realistic circumstances of acquaintance rape and inquires participants to assume that they are in the position of the male figure in each scenario. Participants responded to the following questions: "In this situation, how aroused would you be?", "In this situation, would you have done the same?", and "In this situation, how much would you enjoy getting your way?", using a 7-point scale (ranging from "certainly no" to "certainly yes" and "not at all" to "very much"). The sexual arousal questions are employed as distractors among all scenarios, while the mean of the other two items among all scenarios constitutes the rape proclivity score, with Cronbach's alpha 0.83 (Bohner et al., 2010). This scale has been broadly validated, and supported in literature (e.g., Abrams, Bohner, Masser, & Viki, 2003; Bohner et al., 2006; Eyssel, Bohner, & Siebler, 2006). It was, also, positively related to self-report assessment of previous SV ($r(112) = 0.38, p < .001$). Strain and colleagues (2015) found that it was linked to personal acceptance of pressuring behaviors, which reflects the power dynamics of rape. The Rape proclivity scale was translated in Greek via front and back translation procedure, for the purposes of this study. The present study sample generated an internal consistency Cronbach's alpha of 0.90 (see Table 2 for further information).

Sexual Experiences Survey Short Form-Perpetration (SES-SFP; Koss et al., 2006; Koss & Gidycz, 1985). The SES-SFP assesses self-reported SV strategies or perpetration. It uses behaviorally explicit vocabulary to assess acts that outline various types of SV, without employing the words "rape" or "assault". It consists of 9 items and evaluates the frequency of the application of five approaches (i.e., threats, force) in the perpetration of seven forms of non-consensual sexual acts (i.e., fondling, oral sex). Participants specified the frequency (from "0" to "3 or more" times) that

they have applied each unwanted method to gain each type of sexual act since the age of 14. The stated Cronbach's alpha for the scale was 0.89 (Koss & Gidycz, 1985). In the present study, the SES-SFP was translated in Greek via front and back translation procedure, producing a Cronbach's alpha 0.92.

Laboratory SV Paradigm (Bosson et al., 2015). During this behavioral analogue paradigm, participants were informed that they were going to interact online with a counterfeit feminine associate regarding a film activity. After choosing a nickname, participants were informed about their partner (eleana5). Then, they completed a scale assessing their preferences in several kinds of media content (e.g., "I like movies and/or TV shows with sexual activity between a man and a woman", "I like movies and/or TV shows that make me laugh") and were informed that they and eleana5 would get summaries of each other's answers. Bosson and colleagues (2015) included 15 items assessing the movie preferences. In the present study, in an effort to reduce the number of questions in the final study, 9 items were used. Then, participants read the synopsis of eleana5's answers that demonstrated a high distaste for sexual movies. Afterwards, participants watched two set of still film pictures attended with a short summary of the story. It is noteworthy that participants did not watch any video. One set of pictures and summary demonstrated a male and a female having intercourse, whereas the other pictures and summary demonstrated a male and a female cooking together. The order of pictures' demonstration was counterbalanced. Next, participants were informed that they were chosen incidentally to send to eleana5 a video with a maximum duration 120 seconds from one of the two films (the sexual and non-sexual video). In this revised adaptation of the paradigm, participants did not see or cooperate with a physically present woman partner.

Also, this revised adaptation comprises a continuous variable regarding the duration of the sexual video that participants chosen to send to their associate. After choosing a video for eleana5 to watch (classified nonsexual = 0, sexual = 1), participants shifted a slider in a scale fluctuating from 0 to 120 seconds to demonstrate the number of seconds eleana5 would watch the selected video. Participants were informed that eleana5 would watch 120 seconds of the films, and they have the choice to split this period between the selected and the non-selected video as they wanted. In this sense, all participants, either they had selected the sexual video or not, they had the chance to be sexually violent against eleana5. For instance, if a participant selected the non-sexual video and then specified that he desired eleana5 to watch it for 100 seconds; he did so having in mind that she would watch the non-sexual video for 100 seconds and the sexual video for the rest 20 seconds. The continuous variable continuously indicated the length of the sexual video, as an evaluation of SV intensity. In this sense, for participants who selected the sexual video, duration was identical to the number of seconds selected by them. For participants who selected the cooking video, duration was estimated by 120 seconds minus the number of seconds they selected. See Appendix B for a detailed depiction about what the participants had watched and were instructed during the SV paradigm in this study. The paradigm constitutes a valid measure for web-based studies, with good construct validity (Bosson et al., 2015). Males' one year previous history of SV anticipated both their selection of sexually overt video and its duration.

Table 2

Means and Scale Reliabilities of the Sample (N = 421).

Description	Range*	Mean (SD)	α	Missing Values (%)
<i>Sexual Violence</i>				
Rape Proclivity Scale	1-7	20.24 (11.67)	0.90	-
Sexual Experience Survey	0-3+	14.43 (50.52)	0.96	3 (0.7%)
<i>Sexual Violence Paradigm</i>				
Movie Selection	NA	NA	NA	10 (2.4%)
Duration Selection	0-120	38.33 (43.81)	NA	15 (3.6%)
Female Partner Reaction	1-5	30.39 (6.11)	0.83	18 (4.3%)
Deception question	1-7	2.87 (1.69)	NA	15 (3.6%)
<i>Impersonal Sex</i>				
Age of first sex	5-36	17.80 (3.01)	NA	1 (0.2%)
Number of sex. partners	0-100	9.87 (13.85)	NA	-
<i>Hostile Masculinity</i>				
Adversarial Sexual Beliefs	1-7	30.53 (9.48)	0.80	1 (0.2%)
Hostility Toward Women	1-7	33.95 (9.75)	0.83	-
Sexual Dominance Scale	1-7	27.38 (11.87)	0.90	1 (0.2%)
<i>Positive Masculinity</i>				
Positive Masculinity Checklist	1-5	47.70 (5.24)	0.76	4 (1%)
<i>Attitudes Supporting Violence</i>				
Acceptance of Int. Violence	1-7	12.46 (4.97)	0.65	-
Rape Myth Acceptance	1-7	33.88 (12.40)	0.82	1 (0.2%)
<i>Emotional Dysregulation</i>				
Coping Using Sex Inventory	1-5	29.50 (7.56)	0.80	2 (0.5%)
Barratt Impulsiveness Scale	1-4	29.68 (6.01)	0.78	2 (0.5%)
Aggression Questionnaire	1-5	29.70 (8.38)	0.81	1 (0.2%)
<i>Social and Intimacy Deficits</i>				
Miller Social Intimacy Scale	1-10	135.81 (20.93)	0.89	-
UCLA Loneliness Scale	1-3	5.35 (1.59)	0.73	-
<i>Deviant Sexual Arousal</i>				

Sexual Interest Cardsort (total)	1-7	35.00 (8.87)	0.86	10 (2.4%)
Adult heterosexuality	1-7	19.43 (2.18)	0.70	15 (3.6%)
Rape of adult females	1-7	4.24 (3.06)	0.79	5 (1.2%)
Exhibitionism	1-7	4.57 (3.21)	0.85	9 (2.1%)
Frotteurism	1-7	3.50 (2.63)	0.81	15 (3.1%)
Sadism	1-7	3.26 (1.47)	0.86	4 (1%)

Social Desirability

Marlowe-Crowne Social

Desirability Scale	1-5	52.56 (5.18)	0.60	-
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Note. NA, not applicable; "-", no missing data. *Ranges indicate range for each item for each respective scale.

Female's Partner Reaction (Bosson et al., 2015). Participants replied to eight items which examine their beliefs, regarding how their female partner would respond to the video clip that they sent her. The items are: "I chose the clip that my partner would prefer", "I chose the clip that I would prefer", "I chose the clip because I believed my partner would enjoy watching it", "I chose the clip that was most in line with my partner's media preferences", "I chose a clip that I did not think my partner would really like", "My female partner likes the video I showed", "My female partner is uncomfortable with the video I showed", and "My female partner is upset with the video I showed". All statements were scored on a 5-point scale ranging from 1 (*strongly disagree*) to 5 (*strongly agree*). A factor analysis was conducted with the extraction of one factor (loading accounted for 48.38% of the total variance), to specify which items needed reversed scoring (see Table 1 in APPENDIX D). Items 2, 5, 7, and 8 were reversed scored. While a mean score is calculated, elevated scores demonstrate a more positive estimated reaction of female partner. In Bosson and colleagues (2015), males who have chosen the sexually overt video, designated that their feminine associate would dislike the video and that it would make her distressed. In the present study, the eight questions were translated in Greek via front and back translation procedure, and indicated a Cronbach's alpha 0.83.

Suspicion Probes (Bosson et al., 2015). Participants responded about their suspicions concerning the study. They answered on which extent they felt doubtful, or being deceived about the female partner, using a scale from 1 presenting "*definitely no*" to 7 presenting "*definitely yes*". Participants, who replied "*definitely yes*", were excluded from the analyses. The suspicion question was translated in Greek via front and back translation procedure.

Impersonal Sex

Impersonal sex was assessed via the compound of two questions regarding the participant's personal or impersonal approach to sex (Malamuth et al., 1995).

Participants replied the following questions: "How old were you when you first had consensual sexual intercourse?" and "How many different consensual sexual partners have you had?". The two items demonstrated significant factor loadings on the IS factor in one of the first CM studies (Malamuth et al., 1995). This process was applied in recent studies as well (ie., Hardit, 2012; Saenz, 2009) in order to follow the CM as closely as possible. These questions were translated in Greek via front and back translation procedure. In the present study, eight participants (1.9 % of the sample), indicated that they had not had sex and their current age was substituted ($M = 22.43$ years old, Median = 22.00, SD = 3.21, while one of them had a missing value on age). This tactic was employed to include as many participants as possible in this variable (like in Malamuth et al., 1995; Saenz, 2009). These participants in the second question regarding the number of sexual partners had a value of zero.

Hostile Masculinity

Hostile masculinity was measured via the Adversarial Sexual Beliefs Scale (ASB; Burt, 1980), the revised version of Hostility Toward Women Scale (HTW; Check, 1985), and the Sexual Dominance Scale (SDO; Nelson, 1979). Even though, more valid scales exist than Burt's tool, this was chosen to preserve consistency with the original repetition of the CM (Malamuth et al., 1995) and other recent additions (i.e., Parkhill & Abbey, 2008; Swartout, 2013). In accordance to Malamuth and colleagues (1995) study, some measures were transformed from a 2-choice answer pattern to a 7-point Likert scale, considering the advantage of this pattern (Comrey & Montag, 1982) and to preserve more consistency among various tools in the study.

Adversarial Sexual Beliefs (ASB, Burt, 1980). It evaluates the extent to which participants consider sexual relationships as manipulative or adversarial. Participants responded to 9 items (e.g., "Women are usually sweet until they've caught a man, but then they let their true self show"), using a 7-point scale ranging from "strongly disagree" to "strongly agree". Higher scores demonstrate a stronger acceptance that relationships are adversarial. The stated Cronbach's alpha and the alpha noted in the present study is 0.80. In the present study, the ASB was translated in Greek via front and back translation procedure.

A revised version of Hostility Toward Women Scale (HTWS; Check, 1985, Lonsway & Fitzgerald, 1995). The revised HTW assesses anger towards women via 10 items. Participants responded to items (e.g., "Women are responsible for most of my troubles") using a 7-point scale varying from "strongly disagree" to "strongly agree". Items 2 and 3 were reversed scored. Higher rates demonstrate elevated levels of hostility toward women. The reliability coefficient for this version is Cronbach's $\alpha = 0.87$ (Lonsway & Fitzgerald, 1995). The HTWS was translated in Greek via front and back translation procedure and demonstrated a Cronbach's alpha of 0.83.

Sexual Dominance Scale (SDO; Nelson, 1979). The SDO constitutes a subscale of the Sexual Functions Inventory (Nelson, 1979) and is consisted by 8 items. It assesses the level to which sexual acts are driven by wish for dominance or control toward sexual partner. Participants answered items like "I enjoy the conquest", using a 7-point scale varying from "strongly agree" to "strongly disagree". Reliability coefficient is $\alpha = .77$ (Malamuth et al., 1995). The stated Cronbach's alpha for the original version of a 4-point answering was 0.83. In the present study, the SDO was translated in Greek via front and back translation procedure, producing a Cronbach's alpha of 0.90.

Positive Masculinity

It is noteworthy that there is no PM scale (Isacco, 2015) and that there is a need in literature for such measures (Thompson & Bennett, 2015). Therefore, the present study employed the Positive Masculinity Checklist (PMC; Lujan & O'Neil, 2008) applying some modifications.

Positive Masculinity Checklist (PMC; Lujan & O'Neil, 2008). The PMC constitutes the first step toward the creation of PM scale. It is consisted by 60 likely features of PM. The PMC was only conducted in a class of university students with the instructions to classify the top 10 features they considered as the most significant in their definition of PM. Thirty-one features were included within the top ten classifications. Eleven features were most common within the top three classifications. These features presented from the most to least common were the following: loving, honest, respectful, loyal, non-violent, confident, responsible, believes in equality, open-minded, affectionate, and supportive. It is noteworthy that PMC was applied mainly in female participants, there was no explicit agreement on what features constitute PM, and that no empirical research has been conducted yet regarding PMC. However, for the purposes of the present study, the 11 most common features were used and participants were asked to rate how much each feature represents them using a 5-likert scale, ranging from "definitely no" to "definitely yes". The total score ranges from 11 to 55, with elevated scores indicating elevated levels of perceived PM traits. The 11 features were translated in Greek via front and back translation procedure and the internal consistency alpha was 0.76.

Attitudes supporting violence

Attitudes supporting violence were measured via three of Burt's scales (1980), in accordance to previous studies (i.e., Swartout, 2013; Vega & Malamuth

2007): the Adversarial Sexual Beliefs (ASB), the Acceptance of Interpersonal Violence (AIV), and the Rape Myth Acceptance (RMA). According to empirical and theoretical grounds, ASB was applied as an apparent index of both HM and attitudes supporting violence latent constructs, basically dividing its variance among these two constructs (Malamuth et al., 1991). Also, the consideration regarding ASB's validation, as above mentioned, applies to AIV Burt's scale (1980) as well.

Acceptance of Interpersonal Violence scale (AIV; Burt, 1980). The AIV evaluates the level to which participants accept the use of force to acquire compliance, including the intimate and sexual relationships domain. Participants responded to 5 items (e.g., "Sometimes the only way a man can get a cold woman turned on is to use force"), using a 7-point scale ranging from "strongly disagree" to "strongly agree". Items 3 and 5 were reversed scored. Higher scores demonstrate stronger acceptance of interpersonal violence. The stated Cronbach's alpha of the tool is 0.57 (Burt, 1980) and in more recent studies is 0.60 (Hardit, 2012). The AIV was translated in Greek via front and back translation procedure. In the present study, Cronbach's alpha reached 0.65.

Rape Myth Acceptance scale (RMA; Burt, 1980). The RMA evaluates the level that one holds false beliefs regarding rape and rape victims and is composed by 14 items. Participants responded to 11 items (e.g., "One reason that women falsely report a rape is that they frequently have a need to call attention to themselves"), using a 7-point scale ranging from "strongly disagree" to "strongly agree". Similarly to Uji, Shono, Shikai and Kitamura's study (2007), three questions are omitted because they are measured on a 5-point scale in contrast to a 7-point scale used for the other items and are not used in the estimation of the mean score. Elevated scores demonstrate higher levels of acceptance of rape myths. The stated Cronbach's alpha

of the tool is 0.88 (Burt, 1980) and in more recent studies is 0.74 (Hardit, 2012).

RMA was translated in Greek via front and back translation procedure and the internal consistency alpha was 0.82.

Emotional Dysregulation

Emotional dysregulation was assessed via the Coping Using Sex Inventory (CUSI; Cortoni & Marshall, 2001), the short form of Barratt Impulsiveness Scale (BIS-11; Spinella, 2007), and the short form Aggression Questionnaire (AQ; Bryant & Smith, 2001), similar to the way these were assessed in Gannon, Terriere, and Leader (2012), who had consulted Ward for the selection of tools for each pathway of the Ward and Siegert Model (2002). In fact, in this study the Emotional dysregulation construct was assessed via a multi-faceted approach, encompassing various aspects of emotional dyscontrol (i.e., impulsivity, anger), and coping strategies.

Coping Using Sex Inventory (CUSI; Cortoni & Marshall, 2001). The CUSI assesses the level to which a person employs sexual acts (through fantasy, literal sexual act, or pornography) to cope with a difficult, stressful, and upsetting condition. It is consisted by 16 items concerning consensual sex and SV towards women and children. Participants answered regarding the frequency of engagement in each item (e.g., "Force my regular partner to have sex"), using a 5-point Likert scale ranging from "not at all" to "very much". Higher scores demonstrate higher frequency of engagement of these acts. The internal consistency is Cronbach's $\alpha = 0.88$. In the present study, the CUSI was translated in Greek via front and back translation procedure and the internal consistency Cronbach's alpha was 0.80.

Short form of Barratt Impulsiveness Scale (BIS-11; Spinella, 2007). The BIS-11 evaluates personality/behavioral construct of impulsiveness. It consists of 15 items and participants responded on a 4-point scale ranging from "rarely/never" to "almost

always/always". The scale contains three aspects: attentional (e.g., "I don't "pay attention""), motor (e.g., "I do things without thinking"), and non-planning impulsiveness (e.g., "I plan for the future"). Items 1, 4, 5, 7, 8, and 15 were reversed scored. Elevated scores demonstrated higher levels of impulsiveness. The stated Cronbach's alpha was 0.79 in a community sample. In the present study, the Greek translation was used (Mantzios, Wilson, & Giannou, 2013; $\alpha = 0.72$ for full scale in students) and the Cronbach's alpha was 0.78.

Short form Aggression Questionnaire (AQ; Bryant & Smith, 2001). The short form of AQ evaluates aggressiveness and consists of 12 items concerning four subtypes of aggression: anger (e.g., "Sometimes I fly off the handle for no good reason"), hostility (e.g., "Other people always seem to get the breaks"), physical (e.g., "There are people who pushed me so far that we came to blows"), and verbal aggression (e.g., "My friends say that I'm somewhat argumentative"). The reported Cronbach's alpha is 0.80 for physical aggression, 0.77 for hostility, and 0.73 for verbal aggression and anger in a British university sample. Participants replied using a 5-point Likert scale ranging from "strongly disagree" to "strongly agree". High scores specify elevated self-reported aggression. In the present study, the 12 items were used from the Greek version (Vitoratou, Ntzoufras, Smyrnis, & Stefanis, 2009; 29 items with $\alpha = 0.82$ for physical, 0.55 for verbal, 0.75 for anger and hostility subscales) and the Cronbach's alpha was 0.81 for the full scale (for physical aggression, $\alpha = 0.78$; for verbal aggression, $\alpha = 0.43$; for anger, $\alpha = 0.73$; and for hostility subscale, $\alpha = 0.61$).

Social and Intimacy deficits

Social and intimacy deficits were measured via the two following scales, in a similar way to the Gannon and colleagues' study (2012).

Miller Social Intimacy Scale (MSIS; Miller & Lefcourt, 1982). The MSIS assesses intimacy in relationships during adulthood. It consists of 17 items concerning the incidence of intimate actions with their closest friend or romantic companion (e.g., "How often do you feel close to him/her?") or the potency of their intimacy with them (e.g., "How affectionate do you feel towards him/her?"). Participants used a 10-point Likert scale for the six items assessing frequency (ranging from "very rarely" to "almost always") and for the 11 items assessing intensity (ranging from "not much" to "a great deal"). Items 2 and 14 were reversed scored. Total scores vary from 17-170 and elevated scores represent a greater degree of established intimacy. The reported Cronbach's alpha is 0.91 and the test-retest reliability is 0.96 over two months in a US university sample of men and women. A significant association with the UCLA Loneliness Scale ($r = -.65, p < .001$) demonstrated convergent validity. The MSIS was translated in Greek via front and back translation procedure with a satisfying internal consistency alpha of 0.89.

Short form of Revised UCLA Loneliness Scale (Hughes, Waite, Hawkey, & Cacioppo, 2004). Feelings of loneliness were measured by summing answers on 3 items (e.g., "How often do you feel isolated from others?"). Participants replied using a 3-point scale, ranging from "hardly ever" to "often". Scores ranged from 3 to 9, with elevated scores demonstrate elevated levels of loneliness. The stated internal consistency was 0.72 in older adults, while in young adults was 0.83 (Ceglarek, & Ward, 2016). In the present study, the three items were used from the Greek version (Kafetsios & Sideridis, 2006, $\alpha = 0.87$ for 20-items) and the Cronbach's alpha was 0.73.

Deviant Sexual Arousal

In the Gannon and colleagues (2012) study, two measures were used to assess deviant sexual arousal. However, in this study only one of the two measures was used, i.e., the Sexual Interest Cardsort Questionnaire, in an attempt to minimize participation time.

Sexual Interest Cardsort Questionnaire (SIS; Holland, Zolondek, Abel, Jordan, & Becker, 2000). The SIS assesses distorted sexual arousal and is consisted by 45 items concerning 15 categories of sexual attraction (i.e., heterosexuality, rape, voyeurism, exhibitionism, frotteurism, sadism, masochism). Participants specified their interest in each item, using a 7-point Likert scale, ranging from "extreme sexual repulsion" to "extreme interest". Elevated rates are indicative of greater extreme sexual arousal. In the present study, only five scales (15 items) were administered concerning adult heterosexuality ($\alpha = 0.83$), rape of adult females (i.e., "I've pulled an attractive woman to the ground. I've pulled her panties off. I'm forcing my penis in her. She is screaming", $\alpha = 0.93$), exhibitionism ($\alpha = 0.89$), frotteurism ($\alpha = 0.86$), and sadism ($\alpha = 0.91$). The SIS was translated in Greek via front and back translation procedure. In the present study and according to the pilot study (see APPENDIX C for more information regarding the pilot study) that has been conducted ($N = 15$), the item 8 has been deleted from the frotteurism subscale since Cronbach's alpha was improved after its deletion. In the final study, Cronbach's alpha for the items used was .86; for adult heterosexuality subscale, $\alpha = 0.70$; for exhibitionism subscale, $\alpha = 0.85$; for sadism subscale, $\alpha = 0.86$; for frotteurism, $\alpha = 0.81$; and for rape of adult females subscale, $\alpha = 0.79$.

Social Desirability

Gannon and colleagues (2012) suggested the use of a social desirability scale.

An adapted version of the *Marlowe-Crowne Social Desirability Scale* (MCSDS; Crowne & Marlowe, 1960; He et al., 2015) was used; measuring the misrepresentation rates in self-reports aiming at a positive self-representation. It consists of 15 items regarding behaviors in different contexts (e.g., "I gossip", "I help others in trouble") and participants assessed them using a 5-point Likert scale ranging from "strongly disagree" to "strongly agree". The Cronbach's alpha of the final enhancement (9 items) and denial scale (6 items) applied in 20 countries were 0.62 and 0.54, respectively. Construct and con-current validities of the original version were demonstrated via comparison with the Edwards Social Desirability Scale (Edwards, 1957). In the present study, the Greek version of the scale was used, which showed a Cronbach's alpha of 0.55 for the full scale, 0.44 for enhancement, and 0.57 for denial subscale in a university sample (He et al., 2015). According to the pilot study, item 13 has been deleted since Cronbach's alpha was improved following its exclusion, and thus, 14 items were used in the final study. After Dr He's consultation, factor analysis was conducted with the extraction of one factor, to specify which items needed reversed scoring (see Table 2, APPENDIX D). Items 4, 5, 7, 11, 12, 13, and 14 were reversed scored in a way that elevated scores illustrate elevated social desirability responses. The Cronbach's alpha was 0.57 and after deleting item 4, it improved to 0.60. Thus, further analyses included the remaining 13 items of the scale.

Ethics

All the participants read an information sheet that appeared on the screen and then, only those who gave their consent, took part in the study. Additionally, it was highlighted to them that participation was voluntary and anonymous, further explaining that all the data they would provide would be confidential and protected by the researcher. At the same time, they were informed that they had the right to

withdraw at any time without the need to provide any reason. Also, participants had the choice not to answer the questions from the SES-SFP (Koss et al., 2006), SDO (Nelson, 1979), and SIS scales (Holland et al., 2000), with the option "I do not feel comfortable to answer this question". Generally, it is considered a study without any risk. However, if a participant became distressed or upset during his participation, he was provided with information regarding local counseling services, where emotional support is provided at any time. Information of these counseling services was presented on the debriefing form, a form that was appeared on the screen after the completion of the survey or when a participant withdrew. The anonymity of the participants was ensured while their IP addresses were hidden. Last, approval to conduct this survey was obtained from the Cyprus National Bioethics Committee (Folder no.: EEBK EII 2017.01.73).

CHAPTER 3

RESULTS

Data Preparation

Scoring of Sexual Experience Survey-Short Form Perpetration

Participants indicated how many times they had conducted each act since the age of 14 by checking boxes to specify 0, 1, 2, 3+ times, or the option “I do not feel comfortable to answer this question”. The subsections of each question were calculated as variables to demonstrate the frequency of each kind of strategy applied to execute the unwanted sexual act. The strategies applied are important in assessing risk factors to advise prevention programs (Koss et al., 2007). Also, the strategies employed were scored differently according to the severity of every act. The 35 items (7 questions, 5 subsets) were scored.

The present study followed the steps of Davis and colleagues’ (2014) scoring procedure, which was employed from other researchers as well (i.e., Bosson et al., 2015). First, the two methods of verbal coercion (“*Telling lies, threatening to end the relationship, threatening to spread rumours about them, making promises about the future I knew were untrue, or continually verbally pressuring them after they said they didn’t want to*” and “*Showing displeasure, criticizing their sexuality or attractiveness, getting angry but not using physical force after they said they didn’t want to*”) were merged into one general verbal coercion group. Threats of physical force (“*Threatening to physically harm them or someone close to them*”) and use of physical force (“*Using force, for example holding them down with my body weight, pinning their arms, or having a weapon*”) were merged into one general physical force group. The fifth strategy was concerned with the incapacitation of the victim

(“Taking advantage when they were too drunk or out of it to stop what was happening”). Forms of oral, vaginal and anal attempted or completed SV acts were merged into general groups of attempted rape (*“Even though it did not happen, I TRIED to have oral sex with someone or make them have oral sex with me without their consent”, “Even though it did not happen, I TRIED to put in my penis or I tried to put my fingers or objects into a woman’s vagina without their consent”, and “Even though it did not happen, I TRIED to put in my penis or I tried to put my fingers or objects into someone’s butt without their consent”*) or completed rape (*“I had oral sex with someone or had someone perform oral sex on me without their consent”, “I put my penis or I put my fingers or objects into a woman’s vagina without her consent”, and “I put in my penis or I put my fingers or objects into someone’s butt without their consent”*). The sexual contact outcome regarded the item *“I fondled, kissed, or rubbed up against the private areas of someone’s body (lips, breast/chest, crotch or butt) or removed some of their clothes without their consent (but did not attempt sexual penetration)”*. Then, a severity ranking scheme with nine ranking choices was employed according to Separated Outcomes and Strategies (see Chart 1). Participants who indicated no history of sexual perpetration were counted as “0”.

The “sum of frequency of ranks” score was estimated, whilst the severity rank of every outcome was multiplied by the frequency (0-3) that the participant stated perpetrating that kind of outcome and then, a total score was calculated (Davis et al., 2014). For instance, if a male had perpetrated attempted rape by verbal coercion once (i.e., 1 time) and sexual contact by incapacitation twice (i.e., 2 times), he would have a total score of 8 ((4*1) + (2*2)). The “sum of frequency of ranks” approach was chosen in comparison to other two schemes: the conventional severity ranking of Koss et al. (2007) and the combined outcomes separated strategies of Davis et al.

(2014). Even though, all scoring schemes equally indicated convergent validity with SV-related constructs, the current was chosen since it could provide the greatest variability in the data via its greatest range (Davis et al., 2014). Moreover, this tactic leads to a continuous score that permits greater analytical flexibility and the investigation of more nuanced relations among the constructs (Davis et al., 2014), in comparison to more traditional rating tactics that create ordinal scores (Koss et al., 2007).

Chart 1. *The severity ranking scheme of Separated Outcomes and Strategies employed in the SES-SFP scale.*

Outcome and strategies	Ranking Scheme	Missing Values (%)
Completed rape by physical force	9	17 (4%)
Completed rape by incapacitation	8	18 (4.3%)
Completed rape by verbal coercion	7	9 (2.1%)
Attempted rape by physical force	6	12 (2.9%)
Attempted rape by incapacitation	5	14 (3.3%)
Attempted rape by verbal coercion	4	7 (1.7%)
Sexual contact by physical force	3	25 (5.9 %)
Sexual contact by incapacitation	2	27 (6.4%)
Sexual contact by verbal coercion	1	17 (4%)

Note. Missing values were calculated for N = 420.

Total and Mean Scores

The mean and total scores were calculated via SUM and MEAN functions when a certain number of items have been answered (Howitt & Cramer, 2011). The minimum number of required non-missing values was decided after an Exploratory Factor Analysis (EFA) had taken place with the extraction of one factor, to investigate if items loading were similar. For instance, the mean score of SDO (8 items) was calculated if at least 5 items had been answered (MEAN.5), since similar loadings had been noted ranging between 0.70 and 0.81. For the BIS total score, 13 out of 15 items must be valid (loadings between 0.27 to 0.72); for the MSIS total score, 15 out of 17 items (loadings between 0.16 to 0.78); for the MCSDS total score, 11 out of 13 items (loadings 0.12 to 0.59); for the CUSI total score, 15 out of 16 items (loadings between 0.06 to 0.81); for the ASB mean score, 7 out of 9 items (loadings between 0.17 to 0.81); for RMA mean score, 10 out of 11 items (loadings between 0.01 to 0.81); for the PM total score, 9 out of 11 items (loadings between 0.42 to 0.70); for the FPR mean score, 6 out of 8 items (loadings between 0.38 to 0.82); for the AQ total score, 10 out of 12 items (loadings between 0.30 to 0.77); and for the estimation of AQ subscales and the mean of the SIS subscales score, 2 out of 3 items must be non-missing. In the UCLA total, the AIV, the HTW, and the RP means all the items were used, since there were no missing values in these scales (see below).

Composite Variables

Composite variables were created by firstly, converting every scale score into a z-score. Z-scores permit direct comparison of scores irrespectively of the original scale metrics (Brown, 2006). This statistical method of z-scores has been applied in

other studies investigating the CM (Parkhill et al., 2008; Vega & Malamuth, 2007; Wheeler et al., 2002). Thus, the HM construct was created by the mean of the z-scores of the ASB, the HTW, and the SDO questionnaires (like Parkhill et al., 2008; Swartout, 2013). The attitudes supporting violence construct was created by the mean of the z-scores of the AIV, the ASB, and the RMA questionnaires (like Saenz, 2009). The IS construct was created by the mean of the z-scores in the two IS items (like in Saenz, 2009). It is noteworthy that before this procedure, the age of the first sexual contact was multiplied by -1, that reversed the variable in the case that an elevated score (younger age at first sex) specifies riskier behavior (Saenz, 2009).

Similarly, the composite scores of clinical symptoms were created using the mean of the z-scores. The social intimacy deficits compound variable was formed by the mean of the z-scores of the UCLA and the MSIS questionnaires. Yet prior to this estimation, the MSIS was multiplied by -1, that reversed the variable in the case that an elevated score demonstrated less intimacy. The emotional dysregulation composite was formed by the mean of the z-scores of the AQ, the BIS, and the CUSI scales. The sexual deviant arousal composite variable was created by the mean of the z-scores of the used SIS categories. However, the adult heterosexual subscale was firstly multiplied by -1, that reversed the variable in the case that an elevated score demonstrated less attraction to adult heterosexuality. All composite scores required at least two minimum non-missing values, except for the Sexual Deviance composite, which needed at least four non-missing values.

The SV composite was created by the mean of the z-scores of the RP mean, the duration of the sexual video, and the SES-SFP final score (at least two minimum non-missing values). Like the above-mentioned procedure, the z-scores of the PM and the MCSDS total score were used.

Preliminary Analyses

Before conducting the data analyses, all variables were screened for missing values, outliers, normality, and linearity. All analyses were conducted using the IBM Statistical Package for the Social Sciences (SPSS) version 22.

Missing values

Some missing values were expected since a sensitive topic was investigated (Field, 2009), and up to 5% missing data were considered acceptable (Roth, 1994). For the investigation of missing values, a new dichotomous variable was created for each participant that indicated the number of missing values. Three hundred and eighteen participants indicated no missing values; whereas, 103 participants indicated missing values ranging from 1 to 71 with 1.77 averaged missing values (Median = 0, SD = 6.42; 1 participant had 36% missing values).

After the calculation of mean and total scores, an estimation of missing values was conducted again, and the missing values are presented in Table 2 (see Methods section). Regarding the SES-SFP categories, Chart 1 shows the missing values upon each outcome and strategy (N = 420). It is noteworthy that, in this procedure the option “I do not feel comfortable to answer this question” in the scales SES-SFP, SIS, and SDO was handled as a missing value (see Table D3, in the APPENDIX D for frequencies of this option). It is noted that, the first two items in each scale demonstrated the highest frequency of this option in comparison to the following items.

Missing values were calculated again, regarding the new composite variables created, the compound scores. SV, HM, Social/intimacy deficits composite scores

indicated zero missing values. IS and Attitudes supporting violence demonstrated one missing value. The Emotional dysregulation construct indicated two missing values, the PM score four and the Sexual deviance construct 13 (3.09%).

Outliers

Inspecting outliers using the z-scores, the criterion of a value greater than 3.29 was employed (Field, 2009; Tabachnick & Fidell, 2013). The UCLA, HTW, SDO, ASB, RMA, RP, AQ scales and the sexual video duration from the SV did not indicate any outliers. The SES-SFP total (max z-score = 11.88), the BIS (max z-score = 3.88), the MSIS (max z-score = 4.75), the CUSI (max z-score = 6.18), the MCSDS (max z-score = 6.89), the AIV (max z-score = 4.53), the PM (min z-score = -5.31), the SIS (all subscales max z-scores ranging between 4 to 12.09), the IS1 (z-scores ranging between -6.05 to 4.26), and the IS2 (max z-score = 6.51) demonstrated outliers. According to Tabachnick and Fidell (2013), a small number of standardized scores in excess of 3.29 is not surprising in big samples, since the extremeness is contingent to the sample size.

Regarding the multivariate outliers, the Mahalanobis distance was estimated via the regression of the 16 variables that were assumed to be used in the hypothesized model (MSIS, UCLA, BIS, AQ, CUSI, HTW, SDO, ASB, AIV, RMA, SIS, RP, SES-SFP, sexual video duration, IS1, IS2) and the number of participants as the dummy dependent variable (DV). Each case was assessed employing the chi-square distribution with a stringent alpha level of 0.001 with degrees of freedom equal to the number of independent variables (IV; Tabachnick & Fidell, 2013). Any cases with a Mahalanobis distance bigger than 39.25 were considered as a multivariate outlier, with 11 cases indicated as such (participants: 36, 98, 105, 155,

177, 200, 250, 287, 292, 297, 368). Next, a regression analysis was conducted with the dummy outlier variable as the DV to identify the variables that differentiated as outliers from the other cases and the variables of the SES-SFP, the SIS, the IS1, and the IS2 were noted ($p < .01$).

The participant 200 indicated the highest value of Mahalanobis distance (200.99), whereas the threshold was 39.25. He was considered as an outlier or noted among the highest scores in: the SES-SFP (SUM score = 615), the SDO ($M = 7$), the CUSI (SUM = 76), the AIV ($M = 7$), the RMA ($M = 6.45$), and in the deviant subscales of the SIS (Sadism, exhibitionism, frotteurism, and rape of adult woman; value $M = 7$). Regarding the question about age of first intercourse, he replied: 5 years old, while in the question regarding the number of sexual partners, he noted 0. Additionally, he reported that he has committed a criminal offence, and specifically, rape. If something like this is true, it is considered that he does not fit to the present community sample but rather to a sample of adjudicated perpetrators. Having the above-mentioned in mind, one could say that participant 200 answered either mistakenly or dishonestly (Wiggins, 2000). Hence, this participant was eliminated from further analyses ($N = 420$; Evans, 1999).

Next, regression analyses (DV: SV variables, IVs: all variables that will be included in the model) were conducted with and without the 10 remaining outliers and the results revealed that their influence is minor. Even though, the remaining 10 cases are not a remarkably big number of cases to delete, it is worth including them in the analyses and thus, use a more robust method of analyses, keeping in mind the sensitive issue of sexual nature investigated.

Normality

Normality was tested via the investigation of skewness and kurtosis values. Satisfactory skewness ranges between -2 to +2, and satisfactory kurtosis between -7 to +7 (Kline, 2005). The SES-SFP total score and the number of sexual partners exceeded both kurtosis and skewness thresholds. In concern to the SIS, almost all subscales, except from the adult heterosexuality subscale, exceeded the satisfactory levels. Specifically, the Exhibitionism and the Frotteurism subscales slightly exceeded the skewness limit (2.51 and 2.12, respectively), while the Rape of adult females and Sadism subscales exceeded both skewness (2.92 and 6.89, respectively) and kurtosis limits (9.03 and 49.74, respectively). The remaining scales ranged between the satisfactory skewness and kurtosis values. Table 3 presents the values of skewness and kurtosis observed.

Remarkably, in the present study using a community sample, it was expected that not all variables will indicate normal distribution. In fact, it would be alarming to have normal distribution in the deviant variables investigated such as, the deviant sexual preferences and the history of SV perpetration. Keeping in mind the above-mentioned violations observed in some variables in univariate normality, violations in multivariate normality were also expected (DeCarlo, 1997).

Linearity

The assumption of linearity was assessed via scatter plot matrices. Even though the graphic depiction of the compound scores did not depict perfect ovals in all variables (specifically, non-linearity in IS and Sexual deviance constructs), enough linearity among the variables was illustrated to continue with the analyses; however, this limitation was taken into consideration for further analyses. This was expected, since some violations of normality were observed, and linearity could not

be achieved perfectly (Tabachnick & Fidell, 2001). In addition, the correlation matrices among the composite variables did not indicate multicollinearity issues ($r < .9$).

Table 3. *Skewness and Kurtosis values with their standard errors for all scales*

Scale	Skewness (SE Skew)	Kurtosis (SE Kurt)
Rape Proclivity Scale	.96 (.12)	.25 (.25)
Sexual Experience Survey	6.69 (.12)	57.94 (.25)
Sexual video duration	.70 (.12)	-.95 (.25)
Female Partner Reaction	-.45 (.12)	-.45 (.25)
Deception question	.42 (.12)	-.68 (.25)
Age of first sex	-1.93 (.12)	6.74 (.25)
Number of sex. partners	3.63 (.12)	17.80 (.25)
Adversarial Sexual Beliefs	.17 (.12)	-.03 (.25)
Hostility Toward Women Scale	.40 (.12)	-.59 (.25)
Sexual Dominance Scale	.49 (.12)	-.12 (.25)
Positive Masculinity Checklist	-1.12 (.12)	2.59 (.25)
Acceptance of Int. Violence	.14 (.12)	-.69 (.25)
Rape Myth Acceptance	.08 (.12)	-.54 (.25)
Coping Using Sex Inventory	.45 (.12)	.36 (.25)
Barratt Impulsiveness Scale	.23 (.12)	-.71 (.25)
Aggression Questionnaire	-.02 (.12)	-.53 (.25)
Miller Social Intimacy Scale	1.13 (.12)	2.39 (.25)
UCLA Loneliness Scale	.45 (.12)	-.21 (.25)
SIS	2.33 (.12)	6.57 (.25)
MCSDS	-.26 (.12)	-.26 (.25)

Note. N = 420; for the sexual video duration and deception question, N = 315. SIS, Sexual Interest CardSort; MCSDS, Marlowe-Crowne Social Desirability Scale.

Statistics for Indicators and Outcomes

Rape Proclivity

In the present sample, the mean score of the RP scale ranged between 1 - 7, and the average score was 2.52 (Median = 2.13, SD = 1.45, n = 420). Most of the participants (n = 338, 80.5%) noted some degree of rape tendency (M > 1; 1 represents the "not at all" option), while few of them (n = 82, 19.5%) indicated complete absence of rape tendency (M = 1).

Sexual Violence History

In the present sample of 420 community participants, the continuous total score of the SES-SFP scale ranged between 0-391, while the average score was 12.99 (Median = 0, SD = 41.10). Two hundred and fifty two participants (60%) indicated zero in items 1 to 7 in all a – e methods, composing the "Non-perpetrator" group, 3 participants had missing values (0.7%), while the remaining 165 participants (39.3 %) stated perpetration of SV act since the age of 14 (see Chart 1 from the Results section). For the participants admitting to have conducted SV perpetration, their average total score was 32.83 (Median = 11, SD = 60.24). Table 4 depicts the frequencies of the SES-SFP outcomes and strategies among these 165 participants who admitted some kind of SV perpetration. According to Table 4, it is apparent that the most frequent outcomes and strategies in the present sample were Sexual contact by verbal coercion (n = 80, 48.5%), Completed rape by verbal coercion (n = 60, 36.4%), and Attempted rape by verbal coercion (n = 59, 35.8%). In addition, in the three types of outcome the most frequent tactic used was firstly verbal coercion, then incapacitation, and lastly, physical force.

Table 4. *Frequencies of SES-SFP outcomes and strategies among participants reported sexual violence perpetration (N = 165).*

Outcome and strategies	Responded Positively (%)	Responded Negatively (%)	Missing Values (%)
Completed rape by physical force	17 (10.3%)	142 (86.1%)	6 (3.6%)
Completed rape by incapacitation	54 (32.8%)	104 (63%)	7 (4.2%)
Completed rape by verbal coercion	60 (36.4%)	103 (62.4%)	2 (1.2%)
Attempted rape by physical force	16 (9.7%)	143 (86.7%)	6 (3.6%)
Attempted rape by incapacitation	39 (23.7%)	118 (71.5%)	8 (4.8%)
Attempted rape by verbal coercion	59 (35.8%)	102 (61.8%)	4 (2.4%)
Sexual contact by physical force	10 (6%)	144 (87.3%)	11 (6.7%)
Sexual contact by incapacitation	55 (33.3%)	98 (59.4%)	12 (7.3%)
Sexual contact by verbal coercion	80 (48.5%)	80 (48.5%)	5 (3%)

Note. Responded positively means that they indicated any value above 0; responded negatively means that they indicate a value of 0.

Next, the number of assaults committed in each category was estimated.

Concerning sexual contact, the mean number of assaults by verbal coercion was 1.95 times (Median = 2, SD = 1.26, Range: 1- 6, n = 80), by incapacitation the mean was 1.65 times (Median = 1, SD = .80, Range:1- 3, n = 55), and by physical force 3.20 times (Median = 3, SD = 1.93, Range: 1- 6, n = 10). Regarding the perpetration of attempted rape, the mean number of assaults by verbal coercion was 3.34 times (Median = 2, SD = 3.27, Range:1-15, n = 59), by incapacitation 2.67 times (Median = 2, SD = 1.80, Range: 1-9, n = 39), and by physical force 4 times (Median = 3, SD = 3.43, Range:1-12, n = 16). Finally, in concern with the completed rape offense, the mean number of assaults by verbal coercion was 3.87 times (Median = 2, SD = 3.57, Range: 1-14, n = 60), by incapacitation 2.46 times (Median = 2, SD = 1.80, Range: 1- 9, n = 54), and by physical force 3.94 times (Median = 2, SD = 4.24, Range: 1-14, n = 17).

Regarding the question whether participants committed any of the acts described in the SES-SFP scale, 107 participants (25.5%) responded positively, 295 (70.2%) responded negatively, and 18 of them (4.3%) did not respond to this question. Most of the participants admitted to committing such acts (102 participants, 95.3%) towards females only; three participants (2.8%) towards both males and females; and, one participant (0.9%) towards males only, while one participant (0.9%) did not feel comfortable to answer this question. When asked if the victim was their partner, 68 participants (63.6%) responded positively, 38 participants (35.5%) responded negatively, while one of them (0.9%) did not feel comfortable to answer this question. Regarding the question whether they believe that they have raped someone, only nine of them (8.4%) responded positively, 97 participants

(90.7%) responded negatively, and one of them (0.9%) did not feel comfortable to answer this question.

Two groups were created according to the presence or absence of SV history via their total score: the non-SV history/non-perpetrator (total score = 0, $n = 252$, 60%) and the SV history groups (total score > 0, $n = 165$, 39.3%). Independent-samples t-tests were conducted, and results revealed no statistically significant differences among the two groups in age ($t(401) = 0.81$, $p = 0.42$), number of relationships ($t(403) = -0.54$, $p = 0.59$), and number of consensual sexual partner ($t(417) = -1.57$, $p = 0.12$). The only statistically significant difference among these groups was noted in the age of first sexual intercourse, $t(417) = 2.67$, $p < 0.01$ with the average age of the SV history group being 17.37 (SD = 2.99) and the average age of the non-SV history group being 18.15 years (SD = 2.87).

Descriptively, the majority (61.9%) of the SV history group ($n = 165$) was either in a relationship or married, while one third (32.7%) of them was single, and few of them were divorced (1.2%). Most of the SV perpetrators (77.4%) were living in a city and some of them (17.9%) in a village. There was nearly an equal distribution regarding their living condition: 22.6% living alone, 25% with their parents, 22% with their partner, and 22% with their own family. Most of them (63.01%) were working as either self-employed, part-time, or full-time employees, while one third of them (30.4%) were students, and only 1.8% of them were either soldiers or unemployed. Regarding their educational level, there was nearly an equal distribution since, 31.5% graduated high school, 36.4% have completed undergraduate studies, and 26.8% have completed post-graduate studies. Interestingly, only 4.2% ($n = 7$) of them have a criminal record (2 of them were

convicted for physical violence), while most them (91.7%) have not been accused of any offense.

Sexual Violence paradigm

In the SV paradigm, 61 participants (14.5%) from the whole sample chose to have their responses deleted, while 31 missing values (7.4%) were noted. The data of the video choice and duration of the 31 participants who were noted as missing value in the deletion question were not included in further analyses, since their consent was not obtained. Therefore, 328 (78.1%) responses have been used and from those, 13 participants (4%) were excluded from further analyses since they replied “definitely yes” in the deception question. From the remaining 315 responses, almost half of them (N = 149, 47.3%) were sexually violent against their fictional female partner. Specifically, 17 participants (5.4%) had chosen 20 seconds of the sexual video, 13 participants (4.1%) 40 seconds, 60 participants (19%) 60 seconds, 12 participants (3.8%) 80 seconds, 13 participants (4.1%) 100 seconds, and 34 participants (10.8%) 120 seconds. It is noteworthy that in the present study, 251 participants selected the cooking video (79.7%), while only 64 participants (20.3%) selected the sexual movie clip to send to their female partner. It is apparent that some participants selected the cooking video, but they have also sent the sexual video with some duration. In this sense, only the sexual video duration variable was used for further analyses that is considered as more representative of the SV act during the paradigm.

Next, the presence or absence of SV history via SES-SFP was investigated in these 315 responses of the SV paradigm. In fact, 132 participants reported SV history, with only one missing value, and the remaining 182 stated no SV history. As it was expected, participants who stated no sexual history via the SES-SFP subjected

their female partner for a shorter length of the sexual video ($M = 27.69$, $SD = 39.64$) than those who had a SV history ($M = 42.73$, $SD = 44.66$), $t(262,84) = -3.20$, $p < 0.01$, with a 95% confidence interval between -25.23 to -6.01 .

Regarding the continuous RP score and the sexual video duration, a positive modest correlation was noted amongst them ($r = .22$, $p < .01$, $n = 315$). Two RP groups were created via the median-split approach (Altman & Royston, 2006; Median = 2, high RP group = 170, low RP group = 145) to further examine the differences among sexual video duration. An independent-samples t-test revealed statistically significant differences amongst the two groups, $t(313) = 2.25$, $p < .05$, with a 95% confidence interval between 1.33 to 19.92; with the high RP group indicating higher duration of sexual video ($M = 39.18$, $SD = 45.29$), than the low RP group ($M = 28.55$, $SD = 38.57$).

Female partner's reaction

Analyses have been conducted to assess whether participants who chose the sexual video, support that their female partner will show less pleasure for the video ($n = 315$). Correlational analyses indicate that FPR has strong negative relationships with the sexual movie selection ($r = -0.64$, $p < 0.01$) and the sexual video duration ($r = -0.52$, $p < 0.01$). Also, FRP has moderate negative correlations with the RMA ($r = -.33$, $p < .01$) and the HTW ($r = -.31$, $p < .01$; see Table 5). This finding interestingly designates that as the level of rape myth acceptance and hostile beliefs towards women increases, the positive assumed reaction of the female partner towards the video decreases.

An independent-samples t-test was also conducted to investigate any statistically significant differences in female partner's assumed reaction among the

participants who selected the sexual video ($n = 64$) and those who selected the non-sexual video ($n = 250$). Results revealed statistically significant differences among the two groups, $t(312) = 4.60, p < 0.01$, with participants who selected the sexual video expected their female partner to like the video clip less ($M = 2.92, SD = 0.69$), than participants who selected the non-sexual video ($M = 4.11, SD = 0.56$).

Another independent-samples t-test was conducted with two groups consisting of similar number of participants, regarding the duration of the sexual video; those who did not send the sexual video at all ($n = 166$) and those who sent some seconds (range: 20-120) of the sexual video ($n = 148$). Similarly, the analysis revealed statistically significant differences amongst the groups, $t(260,63) = 9.55, p < 0.01$, with those sending part of the sexual video indicating less positive reaction of their female partner ($M = 3.48, SD = 0.78$), than those who did not send the sexual video at all ($M = 4.22, SD = 0.55$).

Sexual Movie Preferences

The mean score of items “I like movies and/or TV shows with sexual activity between a man and a woman (e.g., a love scene)” and “If a movie has a lot of nudity/sex, I won’t watch it” (reversed scored) was calculated to assess the preference of the present sample for nudity/sex movies, yielding a mean score of 3.95, Median = 4, $SD = 0.86$, range: 1-5, $n = 315$). Correlational analyses were conducted and indicated significant, but, low relationships among sex/nudity movie preferences with sexual video duration ($r = 0.12, p < 0.05$), social desirability ($r = -0.14, p < .05$), attitudes supporting violence construct ($r = 0.14, p < 0.05$), HM construct ($r = 0.15, p < 0.01$), sexual movie selection ($r = 0.20, p < .01$), while the highest relationship was noted with Emotional dysregulation construct ($r = .28, p < .01$). Specifically,

amongst the variables of Emotional dysregulation construct, the highest correlation was observed with the CUSI, $r = 0.33$, $p < 0.01$. On the other hand, non-significant correlations were noted between nudity/sex movie preferences and SV history ($p = 0.95$), the IS construct ($p = 0.30$), the social/intimacy deficits construct ($p = 0.56$), the sexual deviance construct ($p = 0.18$), age ($p = 0.12$), and the number of relationships ($p = 0.24$).

Lack of comfort to answer the questions

In the SDO, SIS, and SES-SFP scales, since a sensitive topic of sexual behaviors was investigated directly, participants had the option of “I do not feel comfortable to answer this question”. New dummy variables were created according to the lack of comfort to answer each question and mean scores were created for each scale. Then, the average score of the z-scores of these mean scores was estimated, creating the “lack of comfort to answer” variable. Analyses were conducted to investigate if the refusal to answer to questions regarding sexual acts due to lack of comfort is related to perhaps SV, clinical symptoms, or other deviant behaviors. Correlational analyses ($n = 420$) were conducted and significant relationships were noted with the SV construct ($r = 0.21$, $p < 0.01$), the Sexual Deviance construct ($r = 0.18$, $p < 0.01$), the sexual video duration ($r = 0.13$, $p < 0.05$, $n = 315$), the SES-SFP score ($r = 0.15$, $p < 0.01$), the HTW ($r = 0.11$, $p < 0.05$), the RMA scale ($r = 0.15$, $p < 0.01$), and the Attitudes supporting violence ($r = 0.01$, $p < 0.05$); however, all correlations reported here are extremely low. Non-significant relationships were noted with the SDO score ($p = 0.16$), social desirability ($p = 0.83$), the HM construct ($p = 0.14$), the IS construct ($p = 0.98$), Social/Intimacy deficits ($p = 0.38$), Emotional dysregulation ($p = 0.51$), PM ($p = 0.57$), movie selection ($p = 0.77$, $n = 315$), age ($p = 0.50$), the number of relationships ($p = 0.26$), and the RP score ($p = 0.06$).

Older versus younger males

Two groups were created regarding age of the participants to investigate any potential differences in the SV measures and composite variables. The median was used as a cut-off point to create the two groups, since it is considered as the most widespread strategy for dichotomizing continuous variables in psychiatric literature, taking into consideration that there are no cut-off points in many variables (Altman & Royston, 2006). According to this procedure (Median = 29), 190 participants were in the younger age group (range: 18-28 years old) and 213 were in the older age group (range: 29-49 years old), while 17 had missing values. In concern to SV history via the SES-SFP, an independent-samples t-test was conducted and indicated no statistically significant differences among the two age groups, $t(398) = 0.72$, $p = 0.47$, with a 95% confidence interval between -4.90 to 10.57. Similarly, no statistically significant differences were noted for the RP score, $t(401) = -0.96$, $p = 0.34$, with a 95% confidence interval between -0.42 to 0.14. In the same way, potential differences were investigated for the sexual video duration measure (N = 315, Median = 29, younger age group = 170, older age group = 143, missing values = 2) and again, results revealed no statistically significant differences among the two age groups $t(311) = 1.05$, $p = 0.29$, with a 95% confidence between -4.43 to 15.52.

In regards to the composite variables there were no statistically significant differences in Attitudes supporting violence ($t(400) = -1.42$, $p = 0.16$, 95% confidence between -0.30 to 0.05), the HM construct ($t(401) = -0.31$, $p = 0.76$, 95% confidence between -0.22 to .016), Social Intimacy deficits ($t(401) = -0.33$, $p = 0.74$, 95% confidence between -2.41 to 1.71), and Emotional dysregulation ($t(400) = -0.04$, $p = 0.97$, 95% confidence between -1.05 to 1.01). However, statistically significant differences were noted for Deviant sexual arousal, $t(332.65) = -3.51$, $p <$

0.01, 95% confidence between -0.36 to -0.10 (younger group = 184, $M = -0.02$, $SD = 0.74$; and older group = 208, $M = -0.25$, $SD = 0.55$) and the IS construct, $t(338.97) = 4.61$, $p < .01$, 95% confidence between 1.84 to 4.58 (younger group = 190, $M = -5.75$, $SD = 4.88$; older group = 213, $M = -2.55$, $SD = 8.76$). Inspecting IS items separately, it is apparent that the statistically significant difference lies to the number of sexual partners, $t(325.45) = 5.38$, $p < 0.01$, 95% confidence between 4.33 and 9.33, whereas, the older group ($n = 213$), as expected has, more sexual partners ($M = 12.95$, $SD = 16.28$) than younger group ($n = 190$, $M = 6.12$, $SD = 8.41$).

Social desirability and responding

In concern to social desirability responding, three groups were created according to SD criterion of cut-off score: low social desirability group noted less than 1 SD below the mean (between -1.09 and -3.24 z-scores, $n = 75$), moderate social desirability group noted within 1 SD of the mean (between -.87 and .85 z-scores, $n = 279$), and high social desirability group noted more than 1 SD above the mean (between 1.06 and 2.35 z-scores, $n = 66$).

One-way Analyses of Variance (ANOVAs) were conducted to compare these three groups on the SV measures. For the SV history via the SES-SFP total scores, the analysis revealed a significant effect of social responding $F(2, 165.22) = 9.24$, $p < 0.01$. Specifically, the low social desirability group ($M = 25.93$, $SD = 66.56$, $n = 75$) was statistically different from the moderate ($p < 0.05$, $M = 11.70$, $SD = 35.61$, $n = 277$), and high social desirability group ($p < 0.01$, $M = 3.55$, $SD = 8.90$, $n = 65$). The moderate and high groups did not differ significantly in SV history, $p = 0.31$.

Inspecting the RP mean scores, statistically significant differences were noted, $F(2, 417) = 9.23$, $p < 0.01$. Specifically, the low social desirability group ($M = 3.14$,

SD = 1.49, n = 75) differed significantly ($p < .01$) both from the moderate (M = 2.42, SD = 1.39, n = 279) and the high social desirability groups (M = 2.24, SD = 1.46, n = 66). Yet, no significant differences were noted between the moderate and high groups, $p = 0.62$.

Last, one-way ANOVA was conducted for the investigation of differences amongst groups in the sexual video duration variable (n = 315) yielding no significant differences, $F(2, 312) = 0.41$, $p = 0.66$. Also, a non-parametric Kruskal-Wallis Test was conducted, that overrides the assumption of normality. Similarly, results revealed that the distribution of sexual video duration scores was the same across the three groups of social desirability ($p = 0.88$; low group, n = 57, M = 38.60, SD = 48.53; moderate group, n = 205, M = 32.88, SD = 41.14; high group, n = 53, M = 35.09, SD = 41.86).

Correlational Analyses

Correlations of the Indicators

The correlations were conducted using the z-scores. Table 5 presents the correlations and significance levels among the variables. Correlations were interpreted according to Cohen's (1988) categorization: 0.1 to 0.3 designates a low or modest relationship, 0.3 to 0.5 a moderate relationship, and over 0.5 a high relationship. It is worth noting that in the estimation of correlations regarding the SV paradigm, the sexual video duration and the FPR index, only the 315 participants were used (applying the criteria as above-mentioned).

Correlations between Indicators of the Same Construct

The general picture shows a range of low to relatively high correlations among the indicators that compose the same construct (see Table 5). Concerning the SV construct, low to moderate relationships were observed. Specifically, the sexual video duration ($n = 315$) indicated low relations to SES-SFP ($r = 0.16, p < 0.01$) and to RP ($r = 0.22, p < 0.01$), while the relationship among RP and SES-SFP was moderate ($r = 0.30, p < 0.05$).

Regarding the Social/Intimacy deficits construct, a modest relationship was noted among its indicators; MSIS and UCLA ($r = 0.23, p < 0.01$). The items composing the IS composite (age of first intercourse and number of sexual partners) indicated a moderate relationship ($r = 0.30, p < 0.01$). Concerning the Emotional dysregulation construct, modest and moderate relationships were noted. Specifically, the CUSI was modestly related to the AQ ($r = 0.26, p < 0.01$) and to BIS ($r = 0.24, p < 0.01$), while the correlation among the BIS and the AQ was moderate ($r = 0.38, p < 0.01$).

The Attitudes supporting violence construct demonstrated high relationships between its indicators; the correlations among the AIV and the ASB ($r = 0.56, p < 0.01$), among the AIV and the RMA ($r = 0.64, p < 0.01$), and between the ASB and the RMA ($r = 0.55, p < 0.01$). Regarding the HM construct, the SDO was moderately correlated to the HTW ($r = 0.39, p < 0.01$) and to the ASB ($r = 0.41, p < 0.01$), while a high correlation was noted between the HTW and the ASB ($r = 0.66, p < 0.01$).

Table 5. *Correlations of Indicators Contributing to Component Scores (N = 420).*

1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.	17.	18.
1.	-																
2.	.23**	-															
3.	.22**	.20**	-														
4.	.13*	.10*	.56**	-													
5.	.11*	ns	.55**	.64**	-												
6.	.27**	.22**	.66**	.54**	.60**	-											
7.	-.42**	ns	-.18**	-.22**	-.17**	-.21**	-										
8.	.16**	.27**	.29**	.28**	.32**	.46**	-.17**	-									
9.	.19**	.12*	.22**	.26**	.19**	.20**	-.16**	.26**	-								
10.	.21**	.21**	.18**	.18**	.18**	.25**	-.29**	.38**	.24**	-							
11.	ns	ns	ns	.16**	.14**	.12*	ns	.18**	ns	ns	-						
12.	ns	ns	ns	ns	ns	.10*	ns	.16**	ns	ns	.30**	-					
13.	.15**	.14**	.41**	.46**	.41**	.39**	-.16**	.32**	.38**	.25**	.17**	ns	-				
14.	.10*	.13**	.38**	.51**	.56**	.41**	-.13**	.25**	.30**	.18**	.13*	ns	.48**	-			
15.	.11*	ns	.23**	.30**	.38**	.27**	ns	.13*	.20**	ns	ns	ns	.24**	.41**	-		
16.	.15**	ns	.15**	.32**	.27**	.25**	-.19**	.18**	.27**	.18**	.10*	ns	.24*	.30*	.32*	-	
17.	ns	ns	.16**	.23**	.27**	.29**	ns	.15**	ns	ns	.12*	ns	.15**	.22**	.22**	.16**	-
18.	-.12*	-.19**	-.25**	-.26**	-.33**	-.30**	.16**	-.16**	ns	-.21**	ns	ns	-.16**	-.23**	-.19**	-.18**	-.52**
19.	-.32**	-.14**	-.28**	-.22**	-.16**	-.30**	.37**	-.37**	-.24**	-.33**	ns	ns	-.27**	-.20**	-.16**	-.17**	ns

Notes: *p < .05; **p < .01; ns, not significant; for the sexual video duration and FPR correlations, N = 315; 1, Miller Social Intimacy Scale; 2, Short form of Revised UCLA Loneliness Scale; 3, Adversarial Sexual Beliefs; 4, Acceptance of Interpersonal Violence; 5, Rape Myth Acceptance; 6, revised version of Hostility Toward Women Scale; 7, Modified Positive Masculinity Checklist; 8, Short form Aggression Questionnaire; 9, Coping Using Sex Inventory; 10, Short form of Barratt Impulsiveness Scale; 11, age of first intercourse; 12, number of sexual partners; 13, Sexual Dominance Scale; 14, Rape Proclivity Scale; 15, Sexual Interest Cardsort Questionnaire; 16, Sexual experiences survey short form-Perpetration; 17, Sexual Video duration in Laboratory SV Paradigm; 18, Female's Partner Reaction; 19, Marlowe-Crowne Social Desirability Scale.

Correlations between Compound Variables

Table 6 depicts the relationships between the compound variables. Notably, the highest relationship was indicated among HM and the Attitudes supporting violence compounds ($r = 0.84, p < 0.01$). On the other hand, the IS compound demonstrated mostly non-significant relationships. At this point, it is important to keep in mind that for variables that face issues with normality (either exceeding the threshold of skewness and/or kurtosis; SES-SFP, IS items, and SIS of deviant categories), correlations do not constitute the best option for analyzing these variables.

Correlations with Sexual Violence

According to Table 6, the SV compound ($n = 315$) is correlated highly with Attitudes supporting violence ($r = 0.70, p < 0.01$) and with HM ($r = 0.58, p < 0.01$). It is correlated modestly with Deviant sexual arousal ($r = 0.30, p < 0.01$) and with Emotional dysregulation ($r = 0.20, p < 0.01$). The SV construct indicated a low correlation with IS ($r = 0.15, p < 0.01$) and a non-significant correlation with Social/intimacy deficits ($p = 0.15$). Interestingly, the correlation of Social/intimacy deficits when only the two SV measures of the SES-SFP and RP were taken into account, was significant (even though low), $r = 0.11, p < 0.05$. Thus, it seems that the Social/intimacy deficits construct is not correlated with the sexual video duration variable.

Table 6. *Correlations of Component Variables* (N = 420).

	1	2	3	4	5	6	7	8	9
1. Hostile Masculinity	-								
2. Impersonal Sex	.14**	-							
3. Attitudes Supporting Violence	.84**	ns	-						
4. Social/Intimacy Deficits	.31**	ns	.21**	-					
5. Emotional Dysregulation	.48**	.18**	.38**	.34**	-				
6. Deviant Sexual Arousal	.31**	ns	.37**	.13**	.19**	-			
7. Sexual Violence	.58**	.15**	.70**	ns	.29**	.30**	-		
8. Positive Masculinity	-.23**	ns	-.23**	-.32**	-.29**	-.10*	-.13*	-	
9. Social Desirability	-.35**	ns	-.26**	-.29**	-.43**	-.17**	-.19**	.37**	-

Note. * $p < .05$; ** $p < .01$; ns, not significant. For the SV construct correlations N = 315.

Table 7 shows the correlations among component variables and the z-scores of the three SV measures used in this study (RP, SES-SFP, sexual video duration during SV paradigm). By inspecting the table, it is apparent that the SV measure with the highest correlations among the component variables was the RP score, then, the SES-SFP score, and lastly, the sexual video duration. It is also important to underline that the IS compound score demonstrated a significant relationship (even though low, $r = 0.13$, $p < 0.05$) with the sexual video duration variable, only.

Also, correlations were estimated using the z-scores regarding the subscales of the AQ, and the SV measures. The AQ physical subscale noted the strongest correlations with the RP ($r = 0.24$, $p < 0.01$) and the SES-SFP ($r = 0.20$, $p < 0.01$), while the correlation with the sexual video duration measure was not significant ($p = 0.20$). The sexual video duration did not indicate significant correlations with the verbal subscale ($p = 0.38$), the anger subscale ($p = 0.07$); whereas, the strongest correlation detected was with AQ hostility (although still low, $r = 0.23$, $p < 0.01$). The RP score demonstrated significant correlations with all AQ subscales. The SES-SFP total score significantly correlated with the AQ subscales, except for the AQ hostility subscale ($p = 0.19$).

Investigating the associations among the SIS subscales and the SV measures, it is apparent that no statistically significant correlations were noted between the Adult heterosexuality subscale with either the RP ($p = 0.51$) nor the SES-SFP ($p = 0.18$) indexes. SES-SFP was significantly and positively correlated (even though low) to the rest of the SIS subscales used, whereas the strongest correlation was indicated for the Rape of adult woman subscale ($r = 0.30$, $p < 0.01$). Similarly, RP was significantly and moderately correlated with the rest of the SIS subscales, with the highest correlation being the one with Frotteurism ($r = 0.43$, $p < 0.01$). In regard to

the sexual video duration (N = 313), there were no statistically significant correlations with Adult heterosexuality ($p = 0.13$) and with Sadism ($p = 0.16$) subscales. Statistically significant correlations were noted with the remaining subscales, with the Exhibitionism demonstrating the highest association ($r = 0.24$, $p < 0.01$).

Table 7. *Correlations among Component Variables and the z-scores of Sexual Violence measures: RP, SES-SFP, and sexual video duration (N = 420).*

	RP	SES-SFP	Sexual video duration
Hostile Masculinity	.52**	.27**	.25**
Impersonal Sex	ns	ns	.13*
Attitudes Supporting Violence	.57**	.29**	.26**
Social/Intimacy Deficits	.15**	.13*	ns
Emotional Dysregulation	.33**	.29**	.12*
Deviant Sexual Arousal	.41**	.30**	.17**

Note. * $p < .05$; ** $p < .01$; ns, not significant. For the Sexual video duration correlations, N = 315.

Correlations with Social Desirability Scale

The MCSDS score indicated significant relationships (mainly, at $p < 0.01$) amongst almost all indicators, except from the sexual video duration measure and the items of the IS (age of first intercourse and number of sexual partners). The MCSDS score demonstrated low and moderate correlations with the remaining indicators. All correlations noted were negative, except for the correlations with the modified PMC and FPR scores. The strongest relationships, even though still low, were noted with the modified PMC score ($r = 0.37$), the AQ total ($r = -0.37$), and the BIS score ($r = -0.33$).

Focusing only on the significant correlations ($p < 0.01$) of MCSDS with the sexual nature measures, the highest correlation noted was with the SDO ($r = -0.27$), then with the RP ($r = -0.20$), the SES-SFP ($r = -0.17$), and lastly, with the SIS total score ($r = -0.16$). Concerning the AQ subscales, all of them indicated significant low to moderate negative correlations with the MCSDS score, with the verbal subscale demonstrating the highest correlation ($r = -0.36, p < 0.01$). In concern to the correlations of the MCSDS score with the SIS subscales, a non-significant correlation was noted with the adult heterosexuality subscale ($p = 0.46$), the rest of the subscales demonstrated negative (yet extremely low) significant associations, while the highest correlation was noted with the sadism subscale ($r = -0.19, p < 0.01$).

Concerning the correlations among the composite scores, the MCSDS was correlated significantly ($p < .01$) with all composite variables, except for the IS construct. Social desirability correlated strongly to Emotional dysregulation ($r = -0.43, p < 0.01$), and to the HM constructs ($r = -0.35, p < 0.01$).

Exploratory Factor Analyses

Prior to conducting the primary analyses of Structural Equation Modeling (SEM), Exploratory Factor Analyses (EFA) was conducted for each scale used in the hypothesized model. Exploratory Factor Analysis aimed to examine the structure and the properties of each scale.

A Principal Component Analysis (PCA) was conducted on 8 items of the RP scale (Bohner et al., 1998). The Kaiser-Meyer-Olkin measure verified the sampling adequacy of the analysis, $KMO = 0.77$ (Field, 2009). Bartlett's test of sphericity, $\chi^2(28) = 2366.05, p < 0.01$, indicated that the correlations between the items were sufficiently large for PCA. One factor was extracted, explaining 59.35 % of the variance. Table E1 in Appendix E presents the factor loadings.

A PCA of 35 items of SES-SFP (Koss et al., 2007), indicated $KMO = 0.88$ and $\chi^2(595) = 16693.59, p < 0.01$. Six factors were extracted, explaining 77.05 % of the variance (factor 1 with 14 items: 51 %; factor 2 with 7 items: 8.18 %; factor 3 with 4 items: 5.81 %; factor 4 with 5 items: 4.54 %; factor 5 with 2 items: 4.15 %; factor 6 with 3 items: 3.37%). It is important to note that according to the scoring method applied, 9 factors were expected to be extracted from the data. Yet, the items loaded in the following six factors; factor 1 seems to reflect the threats of physical violence and the act of physical force; factor 2 reflects the use of verbal coercion via threats; factor 3 reflects the completed rape via the employment of verbal coercion and specifically, criticism; factor 4 reflects the use of incapacitation; and factor 5 reflects the attempted (anal and vaginal) rape via criticism. Factor 6 seems that it cannot be conceptualized theoretically, since it includes two items: employing criticism for sexual contact and attempted oral rape, and one item regarding the

completed anal rape via incapacitation. An orthogonal (Varimax) rotation was conducted, since the factor structures were not strongly correlated (correlation r ranges between 0.07 to 0.48). Table E2 in the Appendix E section shows the rotated loadings. Reliability analyses were conducted for the five factors (for factor 5 it could not be estimated, since it is composed by only two items), for factor 1 Cronbach's $\alpha = 0.97$, for factor 2 Cronbach's $\alpha = 0.92$, for factor 3 Cronbach's $\alpha = 0.83$, for factor 4 Cronbach's $\alpha = 0.87$, and for factor 6 Cronbach's $\alpha = 0.62$ (which could not be improved even if items were deleted).

A PCA for 2 items of the IS construct, indicated $KMO = 0.50$ and $\chi^2(1) = 40.18, p < 0.01$. One factor was extracted, explaining 65.16 % of the variance. Both items indicated a factor loading at 0.81. The reliability of the factor could not be estimated, since it is composed from only two items.

A PCA of 9 items of the ASB (Burt, 1980), demonstrated $KMO = 0.86$ and $\chi^2(36) = 979.55, p < 0.01$. Two factors were extracted, explaining 52.05 % of the variance (factor 1 with 7 items: 38.06 %; factor 2 with 2 items: 13.99 %). It is noteworthy that one factor was expected to be extracted, yet, it seems that factor 1 regards the adversarial beliefs toward a relationship between a man and a woman, while factor 2 concerns adversarial beliefs of sexual nature. An orthogonal (Varimax) rotation was employed, since the factor structures were not strongly correlated ($r = 0.20$). Table E3 in Appendix E shows the rotated factor loadings. Reliability analyses were conducted, with factor 1 indicating high reliability (Cronbach's $\alpha = 0.82$); whereas reliability for factor 2 could not be estimated.

A PCA of the 10 items of the revised version of the HTW scale (Check, 1985; Lonsway & Fitzgerald, 1995), indicated $KMO = 0.85$ and $\chi^2(45) = 1343.51, p <$

0.001. Two factors were extracted, explaining 54.67 % of the variance (factor 1 with 6 items: 29.87 %; factor 2 with 4 items: 24.80 %). Even though, one factor was anticipated, two factors were extracted, while factor 1 seems to reflect a more general and abstract of anger towards women, and factor 2 a more personal anger towards the women in the participant's life. An orthogonal (Varimax) rotation was performed, since the factor structures were not strongly correlated ($r = 0.35$). Table E4 in Appendix E shows the rotated factor loadings. Reliability analyses were conducted for the two factors, indicating satisfying indices (Cronbach's $\alpha = 0.81$, and Cronbach's $\alpha = 0.73$, for factor 1 and 2, respectively).

A PCA was conducted on the 8 items of the SDO scale (Nelson, 1979) and indicated $KMO = .88$ and $\chi^2 (28) = 1752.47, p < 0.001$. One factor was extracted, explaining 58.41 % of the variance. Table E5 in Appendix E demonstrates the factor loadings. The Cronbach's alpha was 0.90.

A PCA for 5 items of the AIV (Burt, 1980), indicated $KMO = 0.68$ and $\chi^2 (10) = 294.22, p < 0.01$. Even though, one factor was expected to be extracted, two factors were extracted, explaining 61.98 % of the variance (factor 1 with 3 items: 40.68 %; factor 2 with 2 items: 21.30 %). Factor 1 seems to reflect the acceptance of use of force in the sexual domain, while factor 2 regards the acceptance of physical violence in general. An orthogonal (Varimax) rotation was performed, since the factor structures were not strongly correlated ($r = 0.16$). Table E6 in Appendix E shows the rotated factor loadings. Reliability analyses indicated satisfying reliability for factor 1 (Cronbach's $\alpha = 0.74$), while reliability for factor 2 could not be estimated.

A PCA for 11 items of RMA (Burt, 1980), indicated $KMO = 0.90$ and $\chi^2 (55) = 1447.84, p < 0.01$. Two factors were extracted, explaining 50.60 % of the variance (factor 1 with 9 items: 40.84 %; factor 2 with 2 items: 9.76 %). Although, one factor was anticipated to be extracted, items loaded on two factors, with factor 1 reflecting how possible rape is, and factor 2 reflecting victims' provocative behavior. An orthogonal (Varimax) rotation was conducted, since the factor structures were not strongly correlated ($r = 0.20$). See table E7 in Appendix E for the rotated factor loadings. Reliability analyses indicated satisfying reliability at Cronbach's $\alpha = 0.86$ for factor 1, whilst reliability for factor 2 could not be estimated.

A PCA of the 16 items from the CUSI (Cortoni & Marshall, 2001), indicated $KMO = 0.67$ and $\chi^2 (120) = 3693.89, p < 0.01$. Four factors were extracted, explaining 64.49 % of the variance (factor 1 with 6 items: 23.34 %; factor 2 with 3 items: 17.76 %; factor 3 with 6 items: 14.91 %; factor 4 with 1 item: 8.48 %). Factor 1 seems to reflect sexual acts towards a child, factor 2 sexual acts towards consenting adults, and factor 3 violent and forcing sexual acts. Yet, one could have expected the extraction of three factors for fantasy, literal sexual act, and pornography use. An orthogonal (Varimax) rotation was employed, since the factor structures were not strongly correlated ($r < -0.32$). Table E8 in Appendix E shows the rotated factor loadings. It is noteworthy that in factor 4, only item 2 loaded, while other items demonstrated stronger loadings on other factors. Thus, a new extraction of only three factors was conducted (see Table E9 in Appendix E for the rotated factor loadings). Reliability analyses were conducted for the three factors with satisfying Cronbach's alpha for factor 1 $\alpha = 0.85$, for factor 2 $\alpha = 0.78$ (if item 2 is deleted $\alpha = 0.84$), and for factor 3 $\alpha = 0.71$.

A PCA for 15 items of the short form of the BIS-11 (Spinella, 20007), indicated $KMO = 0.83$ and $\chi^2 (105) = 1409.46, p < 0.01$. Four factors were extracted, explaining 54.38 % of the variance (factor 1 with 6 items: 19.45 %; factor 2 with 4 items: 14.15 %; factor 3 with 2 items: 10.74 %; factor 4 with 3 items: 10.04 %). It is noteworthy that three factors were expected: attentional, motor, and non-planning impulsiveness. Yet, factor 2 and factor 3 seem to reflect the non-planning aspect of impulsivity, factor 1 the motor impulsivity and factor 4 the attentional one. An orthogonal (Varimax) rotation was employed, since the factor structures were not strongly correlated ($r < 0.23$). Table E10 in Appendix E shows the rotated factor loadings. Reliability analyses were conducted for the three factors, with Cronbach's $\alpha = 0.78$ for factor 1, Cronbach's $\alpha = 0.68$ for factor 2, Cronbach's $\alpha = 0.39$ for factor 4 (if item 11 was deleted Cronbach's $\alpha = 0.47$), while factor's 3 reliability could not be estimated.

A PCA for 12 items of the short form of the AQ (Bryant & Smith, 2001), indicated $KMO = 0.83$ and $\chi^2 (66) = 1348.66, p < 0.01$. Three factors were extracted, explaining 55.02 % of the variance (factor 1 with 4 items: 21.87 %, factor 2 with 5 items: 19.27 %; factor 3 with 3 items: 13.88 %). It is notable that four factors were expected to be extracted according to the subscales of anger, hostility, physical, and verbal aggression. Yet, the present data seems to reveal the physical subscale via factor 1, the hostility subscale via factor 3, while factor 2 seems to encompass both the anger and verbal subscales. An orthogonal (Varimax) rotation was conducted, since the factor structures were not strongly correlated ($r < 0.33$). Table E11 in Appendix E shows the rotated factor loadings. Reliability analyses, indicating Cronbach's $\alpha = 0.79$ for factor 1, Cronbach's $\alpha = 0.70$ for factor 2, and Cronbach's α

= 0.61 for factor 3, which could not be improved via the deletion of any item of this factor.

A PCA for 17 items of the MSIS (Miller & Lefcourt, 1982), indicated KMO = 0.90 and $\chi^2(136) = 3208.44, p < 0.01$. Three factors were extracted, explaining 56.71 % of variance (factor 1 with 9 items: 23.67 %; factor 2 with 5 items: 19.27 %; factor 3 with 3 items: 13.77 %). Even though the scale assesses the incidence of intimate actions and the potency of their intimacy with their closest friend/romantic partner, three factors were extracted from the present database. It seems that factor 1 mainly regards the quality of the relationship, factor 2 the importance of the affective relationship, and factor 3 the frequency of personal contact and disclosure of personal information. An orthogonal (Varimax) rotation was employed, since the factor structures were not strongly correlated ($r < 0.35$). Table E12 in Appendix E shows the rotated factor loadings. Reliability analyses were conducted for the three factors, indicating Cronbach's $\alpha = 0.84$ for factors 1 and 2, while Cronbach's α was 0.63 for factor 3 and it could not be improved when items were deleted.

A PCA for 3 items of the short form of the Revised UCLA (Hughes et al., 2004), indicated KMO = 0.62 and $\chi^2(3) = 329.56, p < 0.01$. One factor was extracted, explained 65.47 % of the variance. Table E13 in Appendix E demonstrates the factor loadings. The Cronbach's α was 0.73.

A PCA of 14 items from the SIS (Holland et al., 2000), indicated KMO = 0.89 and $\chi^2(91) = 2454.91, p < 0.01$. Three factors were extracted, explaining 63.39 % of the variance (factor 1 with 8 items: 39.73 %; factor 2 with 3 items: 12.78 %; factor 3 with 3 items: 10.88 %). According to the scale, 5 subscales were expected; adult heterosexuality, exhibitionism, frotteurism, rape of adult females, and sadism. It

seems that the adult heterosexuality and sadism subscales noted in the study as factor 3 and factor 2 respectively, while factor 1 seems to regard generally deviant sexual preferences (encompassing the rest three subscales). An orthogonal (Varimax) rotation was conducted, since the factor structures were not strongly correlated ($r < 0.37$). See table E14 in Appendix E for the rotated factor loadings. Reliability analyses were conducted for the three factors, for factor 1 Cronbach's $\alpha = 0.90$, for factor 2 Cronbach's $\alpha = 0.78$, and for factor 3 Cronbach's $\alpha = 0.70$, which could not be improved via the deletion of any item.

A PCA of the 11 items of the revised PMC (Lujan & O'Neil, 2008), indicated $KMO = .77$ and $\chi^2 (55) = 962.42$, $p < .01$. Four factors were extracted, explaining 62.76 % of the variance (factor 1 with 3 items: 31.58 %; factor 2 with 3 items: 11.40 %; factor 3 with 3 items: 10.46 %; factor 4 with 2 items: 9.32 %). Factor 1 seems to reflect affectionate characteristics, factor 2 loyalty characteristics, factor 3 equality characteristics, and factor 4 confidence and responsibility aspects. An orthogonal (Varimax) rotation was employed, since the factor structures were not strongly correlated ($r < -0.31$). See table E15 in Appendix E for the rotated factor loadings. Reliability analyses were conducted for the three factors (since for the 4th factor it could not be estimated), indicating Cronbach's $\alpha = 0.71$ for factor 1, Cronbach's $\alpha = 0.62$ for factor 2 (could not be improved via the deletion of any item), and Cronbach's $\alpha = 0.57$ for factor 3 (could be improved via the deletion of item 5 to .63).

Overall, few of the scales employed in the present study retained their initial psychometric features as these were detected in their original versions; with most scales exhibiting different psychometric properties, as these were adjusted in the Greek-Cypriot population, for the first time (i.e., SIS, SES-SFP, CUSI, MSIS, HTW).

Primary Analysis

Structural Equation Modeling (SEM) was chosen to be applied, since multiple indicators are noted for almost all the latent constructs (Schreiber, Stage, King, Nora, & Barlow, 2006). SEM was conducted using the Analysis of Moment Structures (AMOS) software, version 24. Even though few missing data were noted, a listwise deletion was used, i.e., a strategy that is considered as the most common approach in Confirmatory Factor Analysis (CFA; McKnight, McKnight, Sidani, & Figueredo, 2007). One could question whether the “categorical” variables in the present study could be handled as continuous in the model testing procedure. Yet, continuous SEM estimation procedures were conducted, since most of the scales used in the models had 5 or more categories (Rhemtulla, Brosseau-Liard, & Savalei, 2012).

Given that only the participants who retained their responses in the SV paradigm were of use, another data file was created containing only these participants. Therefore, each model was estimated using two different data files: a) one composed by 408 participants, where the SV construct was measured only through the RP and the SES-SFP scores, and b) a second data file composed by 313 participants, where the SV construct was measured using the RP, the SES-SFP, and the sex video duration measure. Results derived from the bigger data file (N = 408) are presented first. The figure with the better model fit is presented within the text; whereas the other one is presented in Appendix F.

Model Fit Indices

Overall model fit was tested by inspecting various fit indices, which are based on the χ^2 goodness of fit (Kline, 2005). The following guidelines of Hu and Bentler (1999) were employed: the standardized root mean square residual (SRMR) < 0.08,

the root mean square error of approximation (RMSEA) and the RMSEA's 90% confidence interval < 0.06 (less than 0.10 is considered as hardly acceptable fit, less than 0.08 is considered as fair fit; MacCallum, Browne, & Sugawara, 1996), the absolute fit index of goodness of fit index (GFI) > 0.95 (0.90 is considered as acceptable), the comparative fit index (CFI) > 0.95 (0.90 is considered as acceptable). The SRMR, badness-of-fit index, is considered as a valuable index of whether the hypothesized model captures the data, since it is comparatively less susceptible to other issues like violations of normality (Iacobucci, 2010). For model comparisons, the Browne-Cudeck Criterion (BCC; Browne & Cudeck, 1989) index with the lowest value to be optimal. However, if most indices designate a good fit, then it seems that there is indeed a good model fit (Schreiber et al., 2006).

Normality Issues

Some variables (i.e., drug use) are not anticipated to be normally distributed in the population (Tabachnick & Fidell, 2013), like in the present study the deviant variables of sexual nature. Inspecting the univariate kurtosis via AMOS, values equal or greater to 7 designate early departure from normality (West, Finch, & Curran, 1995). Regarding the assessment of multivariate normality, Bentler (2005) suggested that the critical ratio (C.R.) > 5.00 designates non-normality. In the case of multivariate non-normality, inferences from the usual and most common Maximum-Likelihood (ML) estimation can be troublesome (Byrne, 2010). Also, in this case, an overestimation of the chi-square can be noted and consequently result to an exaggerated Type 1 error, i.e., a "false positive" finding (Powell & Schafer, 2001).

Hence, in the case of multivariate kurtosis' violation, other approaches can be employed, like Asymptotic distribution-free (ADF; Browne, 1984) estimation.

Even though, older literature (West et al., 1995) has underlined its requirement of extremely large sample sizes (minimum 1000 cases), more recent literature indicates other ways to estimate the minimum sample size for the ADF. In fact, Raykov and Marcoulides (2000) support that at minimum the sample size must be larger than 10 times the number of estimated parameters in order to obtain a reliable estimation of the ADF. For example, if the model has 21 freely estimated parameters, a minimum sample size is 210.

Grouping Scores of Impersonal Sex construct

It is apparent that in contrast to the IS construct that is estimated via only two items (age of first sex & number of sexual partners), the rest of the latent variables investigated in the hypothesized models are composed by the total or mean scores of two or three scales. In this case, one would assume bias in the parameter estimates when only two variables load on one factor (Gerbing & Anderson, 1985). Also, individual items are questionably less representative of a construct and statistically less reliable, in contrast to a cumulative/ grouped score (Rushton, Brainerd, & Pressley, 1983). Hence, before proceeding to SEM analysis, an effort to group these items was performed.

One option was parceling, since it is anticipated that models based on parceled data in contrast to item-level data, will be more parsimonious and will demonstrate more adequate fit indexes (MacCallum, Widaman, Zhang, & Hong, 1999). However, the use of parcels as indicators of constructs in SEM concerns a controversial tactic in literature (Little, Cunningham, Shahar, & Widaman, 2002). Thus, parceling is not considered as a suitable strategy in the present study, since a

parcel is composed by the sum (or average) of the items and could contribute to the lowest level of data to be modeled.

Factor scores of the IS construct (via regression scores in EFA of 1 factor) were considered the most suitable option in the current model estimations. Factor scores constitute a grouping of the investigated variable, a set of composite constructs (Odum, 2011). Factor scores constitute the composite (latent) scores for each participant on a factor (DiStefano, Zhu, & Mindrila 2009; Odum, 2011; Thompson, 2004; Wells, 1999) and are frequently employed for subsequent statistical analyses than measured variables (Thompson, 2004). These scores are considered as a “more” latent way of grouping items and it was chosen for the SEM analyses conducted in this study. In this case, each participant has a factor score of the IS.

Hypotheses Testing

Hypothesis 1: The CM will be replicated via the application of an online methodology, in that, HM and IS will predict SV. Also, the confluence of IS and HM will predict higher rates of SV.

Replication of the Confluence Model

The hypothesized model is designated graphically in Figure 3 (N = 408). Oval shapes indicate latent variables and rectangles indicate measure variables (Byrne, 2010). The ML structural model was employed as the basis for the analysis in the AMOS statistical package. When the original CM of Malamuth and colleagues' (1995) was investigated (N = 408), violations of normality were noted. In fact, the univariate kurtosis of SES-SFP was 45.12 (C.R. = 186.05), while the multivariate kurtosis was 49.48, with C.R. = 51. In concern to squared Mahalanobis distance (D^2),

6 multivariate outliers were noted ($p < 0.001$). Having these in mind and since the minimum number of participants was accomplished (14 parameters to be estimated, 140 minimum sample size; $N = 408$), the ADF method of estimation was conducted and revealed that the model did fit the data quite well, $\chi^2(7) = 11.51$, $p = 0.12$, GFI = .99, CFI = .98, RMSEA = .04, LO90 = .00, HI90 = .08, pclose = .61, and SRMR = .02. Figure F1 in Appendix F presents the results of the predictive ability of HM and IS.

The CM was also estimated encompassing the third indicator of SV as well, the sexual video duration ($N = 313$). Similarly, results revealed normality violations (SES-SFP kurtosis: 31.47, C.R. = 113.56; multivariate kurtosis: 36.44, C.R. = 28.72; 6 multivariate outliers at $p < 0.001$) and the ADF estimation was employed (160 minimum sample size). According to results, the model fits the data well, $\chi^2(12) = 12.82$, $p = 0.38$, GFI = .99, CFI = .99, RMSEA = .02, LO90 = .00, HI90 = .06, pclose = .87, and SRMR = .03. Figure 4 presents the results of this model ($N = 313$).

Inspecting the two models, it is noteworthy that only the HM towards SV path was statistically significant ($p < 0.001$). On the other hand, the IS towards SV path ($p = 0.71$, $N = 408$; $p = 0.22$, $N = 313$) and the correlation among HM and IS constructs ($p = 0.051$, $N = 408$; $p = 0.11$, $N = 313$) were not statistically significant. Even though the present results for the two data files are in accordance, a slightly better model fit was noted when the third indicator of SV was encompassed, while, in this occasion there was also a 19% increase in the variance of SV explained.

Interaction effect of Hostile Masculinity & Impersonal Sex

Concerning the confluence among the HM and the IS, a multi-group moderation analysis was conducted. The analysis was focused on the extent that

parameters in the structural components of the model are equivalent across the two groups investigated (Byrne, 2010). The mean score of the two items of the IS construct was estimated; the reversed age of first sexual and number of sexual partners; range: -16 to 42, N = 408). Then two groups were created via the median-split approach (Altman & Royston, 2006; Median = -6.00), with 202 participants being in the low IS group and 206 in the high IS group.

Next, Multi-group moderation analysis was conducted to assess the effect among the high and low IS groups on the HM path to SV. The ADF estimation was employed (180 minimum sample size in each group), taking into consideration the violation of normality. Results revealed that the models were not significantly different among the two IS groups, $\chi^2(4) = 4.51, p = 0.34$. Even though, the difference between the groups was not statistically supported, for descriptive reasons it is noted that the standardized beta of HM in the high IS group was higher (0.93) than in the low IS group (0.68).

For the second data file encompassing the sexual video duration measure (N = 313), the two groups were similarly composed (Median = -6, range: -16 to 41.50; low IS group n = 156, high IS group n = 157). Even though, the consideration of the not satisfying sample size of groups (210 minimum participants per group), the ADF estimation was again employed. Results revealed non-invariance among the two IS groups, $\chi^2(5) = 9.74, p = 0.08$. Importantly, in this occasion results are in accordance with the ML estimation, $\chi^2(11) = 16.13, p = 0.14$.

Hence, the first hypothesis is partly supported, since only the predictive ability of the HM construct was noted; whereas the predictive ability of IS and its interaction with HM were not supported.

Figure 3. The replication of the Confluence Model (Malamuth et al., 1995) to be evaluated using an online methodology (N = 408).

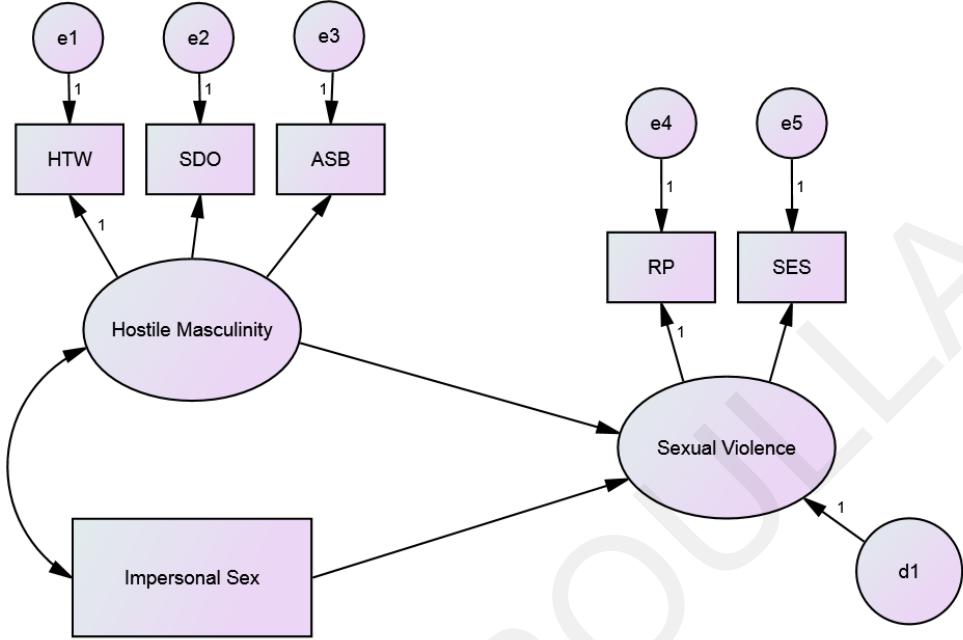
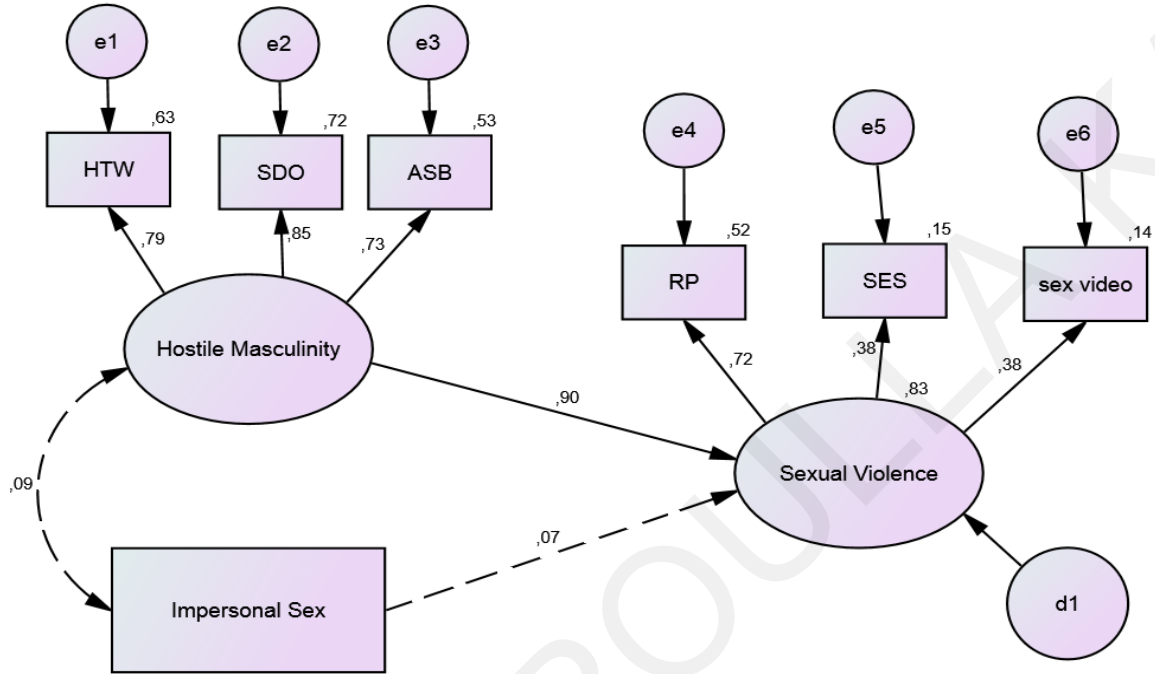


Figure 4. The replication of the Confluence Model (Malamuth et al., 1995) using an online methodology (N = 313).



$\chi^2 (12) = 12.82, p = .38, GFI = .99, CFI = .99, RMSEA = .02, LO90 = .00, HI90 = .06, pclose = .87, SRMR = .03.$

Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths.

Hypothesis 2: Attitudes supporting Violence will be a predictor of SV. Also, attitudes supporting violence will be positively related to HM, but will be not correlated to IS. Last, HM will mediate the association between attitudes supporting violence and SV.

The predictive role of Attitudes Supporting Violence

An ADF estimation was performed (110 minimum sample size), due to normality violations (SES-SFP kurtosis: 45.12, C.R. = 186.05; multivariate kurtosis: 45.18, C.R. = 54.53, 7 multivariate outliers at $p < 0.001$). According to Table 8, there was an unacceptable model fit. Next, a suggested modification was employed via the ADF estimation (120 minimum sample size, $N = 408$) regarding the covariance among AIV and RP, $\Delta\chi^2 = 27.48$, $\Delta df = 1$, $p < 0.001$. It seems that both scales shared some common methodological characteristics, thus justifying their covariance. In fact, both scales assessed some kind of scenarios; with RP being of a longer form, while the AIV was of a shorter form. Following the modification, the model presented a barely adequate fit (see Table 8). Figure F2 in Appendix F presents the standardized betas, supporting the predictive role of Attitudes Supporting Violence.

In the same way, the predictive role of Attitudes Supporting Violence was estimated employing the third indicator of SV as well, the sexual video duration ($N = 313$). The ADF method of estimation was performed (130 minimum sample size), due to normality violations (SES-SFP kurtosis: 31.45, C.R. = 113.56; multivariate kurtosis: 33.55, C.R. = 30.29, 4 Mahalanobis outliers at $p < 0.001$) and the model fit indicated an unacceptable fit (see table 8). The suggested modification regarding the covariance among the RP and AIV was again employed (140 minimum sample size; $\Delta\chi^2 = 20.69$, $\Delta df = 1$, $p < .001$) and the model indicated a barely acceptable fit (see

Table 8). Results revealed a statistically significant predictive role of Attitudes supporting Violence towards SV (see Figure 5).

Correlation among Attitudes supporting Violence, Hostile Masculinity, and Impersonal Sex

The ADF method of estimation was performed (140 minimum sample size), due to normality violations (multivariate kurtosis: 6.25, C.R. = 6.44, 3 multivariate outliers at $p < 0.001$), for the investigation of the correlations among Attitudes supporting violence, HM, and IS (without the inclusion of the SV construct; see Table 8). According to the results, there was a barely acceptable fit and a not significant correlation among Attitudes supporting Violence with IS ($p = 0.29$), while a strong significant correlation was noted with HM ($r = 0.90, p < 0.01$). Importantly, even though it was expected that the ASB measure will share its variance among both Attitudes supporting violence and HM constructs, ASB loaded significantly only on the Attitudes supporting violence construct (standardized regression weight = 0.85, $p < 0.01$; as shown in Hardit's study, 2012) in contrast to HM ($p = 0.90$) when both constructs were added to the model. However, when a CFA was conducted to the HM construct, the ASB loaded significantly to this construct (standardized regression weight = 0.72, $p < 0.001$) via the ML method of estimation. In this sense, for testing the present hypothesis, the ASB will be loaded only to Attitudes supporting violence construct.

The Mediating role of Hostile Masculinity

The ADF estimation was performed for the investigation of the mediating role of HM (180 minimum sample size, $N = 408$) and there was an acceptable model fit (see Table 8). Results support a full mediation of the Attitudes supporting violence

construct from HM, since the direct effect turned to non-significant when the mediating variable was entered in the model. Yet, it is noteworthy that an inadmissible solution occurred in HM to the SV path (value > 1 ; see Figure F3 in Appendix F). The model was again assessed while constraining the Attitudes supporting violence towards the SV path to zero. This is in accordance with Hoyle and Smith's (1994) guidelines regarding the evaluation of a mediating effect. According to these suggestions, the fit of the direct effect is initially examined. Next, the mediating effect is assessed when the direct effect is not constrained and when it is constrained to zero. Thus, the ADF estimation was performed (170 minimum sample size) with the constriction of the direct path to zero. An acceptable model fit was demonstrated (see Table 8) and the modification implied only admissible solutions (see Figure F4 in Appendix F).

Similarly, the mediating effect of HM was assessed using the second data file also encompassing the third indicator of SV ($N = 313$). The ADF estimation was performed (200 minimum sample size), due to the known normality violations (SES-SFP kurtosis: 31.45, C.R. = 113.56; multivariate kurtosis: 35.16, C.R. = 24.59, 4 multivariate outliers at $p < 0.001$). The model indicates a good fit to the data (see Table 8) and results support the mediating role of HM. Yet, an inadmissible solution was again noted in the path from HM to SV (value > 1 ; see Figure F5 in Appendix F). As above-mentioned, the direct path of Attitudes Supporting Violence towards SV was constrained to zero via the ADF estimation (190 minimum sample size). Table 8 indicates an acceptable model fit, while Figure 6 supports the mediating role of HM (via admissible solutions).

Overall, the second hypothesis is supported from the findings of the present study. In fact, the direct effect of Attitudes supporting Violence on SV, the significant

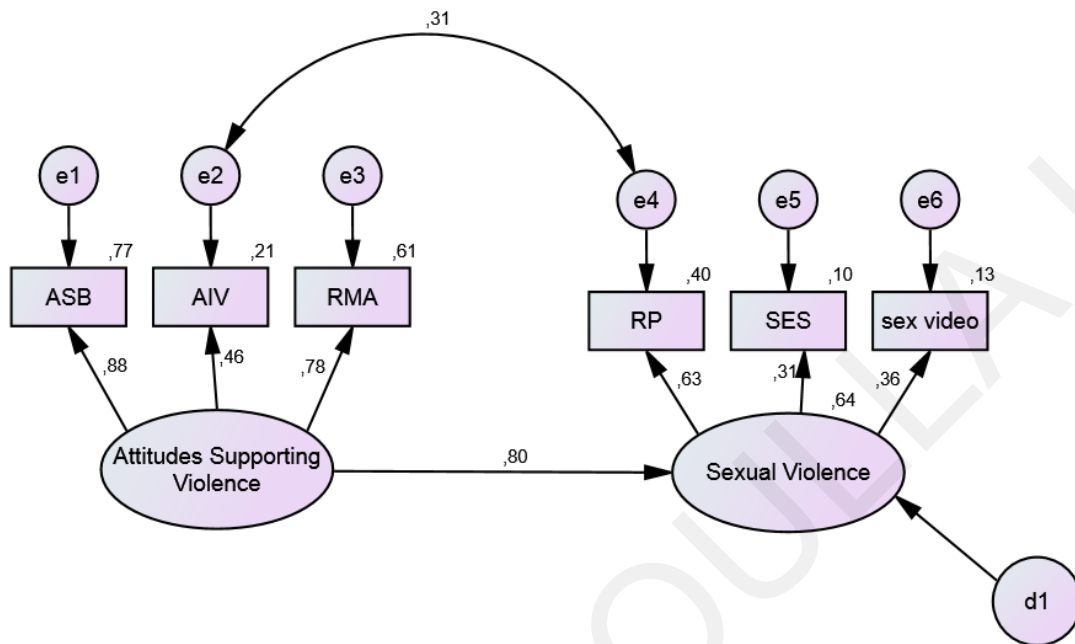
correlation with HM, the non-significant correlation with IS, and the mediating role of HM on the direct effect are supported.

Table 8. *Model fit indices regarding the models investigating Attitudes Supporting Violence. Two data files were used (N = 408 & N = 313).*

Model	M.K. (C.R.)	χ^2	DF	P	GFI	CFI	RMSEA	LO90	HI90	PCLOSE	SRMR	BCC
<i>Investigate the predictive role of Attitudes Supporting Violence</i>												
N = 408	54.53	37.05	4	.00	.95	.83	.14	.10	.19	.00	.06	59.38
N = 313	30.29	34.38	8	.00	.96	.84	.10	.07	.14	.01	.06	60.98
<i>Adding the covariance between AIV and RP</i>												
N = 408	54.53	9.57	3	.02	.99	.97	.07	.02	.13	.18	.05	33.93
N = 313	30.29	13.69	7	.06	.98	.96	.06	.00	.10	.37	.04	42.33
<i>Investigating its correlations with HM and IS</i>												
N = 408	6.4	27.46	7	.00	.98	.92	.09	.05	.12	.04	.05	55.95
<i>Investigate the mediating effect of HM</i>												
N = 408	41.23	23.05	10	.01	.98	.95	.06	.03	.09	.32	.04	59.78
N = 313	24.59	23.49	16	.10	.98	.97	.04	.00	.07	.69	.04	64.68
<i>Constraining the direct effect to zero</i>												
N = 408	41.23	26.64	11	.01	.98	.94	.06	.03	.09	.27	.04	61.33
N = 313	24.59	25.67	17	.08	.98	.96	.04	.00	.07	.66	.04	64.80

Note. M.K. (C.R.), Multivariate kurtosis; χ^2 , Chi-square; GFI, Goodness-of-fit index; CFI, Comparative fit index; RMSEA, Root mean square error of approximation; SRMR, Standardized root mean square residual; BCC, Browne-Cudeck criterion. ADF estimation was performed. In N = 313 data file, the sexual video duration measure was added as an indicator of SV.

Figure 5. The examination of predictive role of Attitudes Supporting Violence construct in Sexual Violence (N = 313).

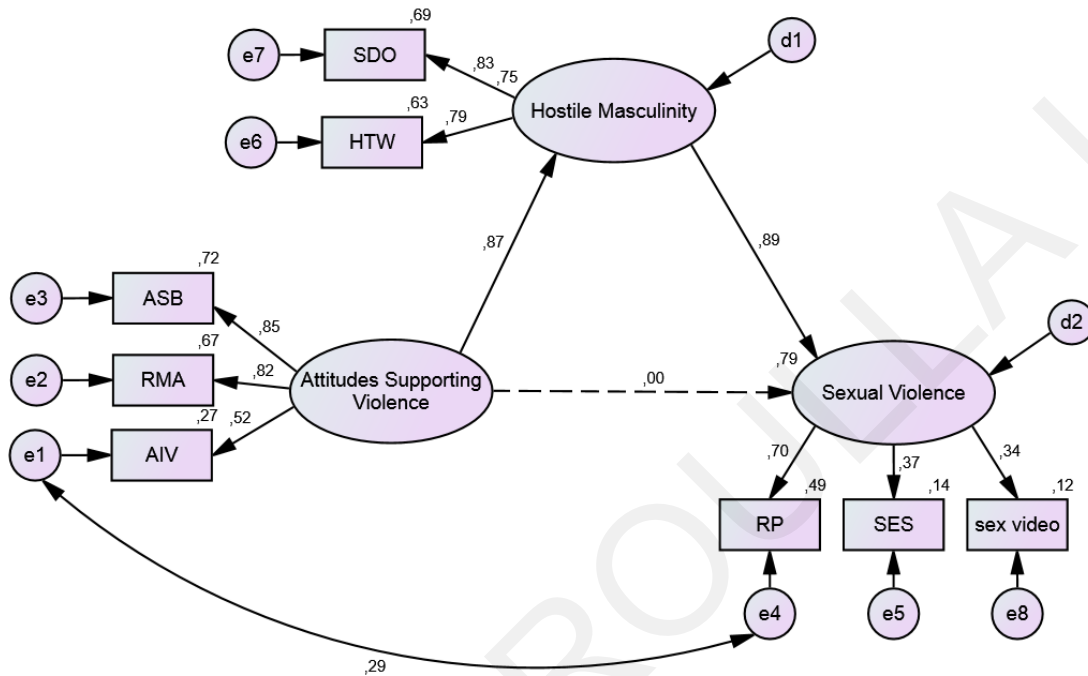


$\chi^2 (7) = 13.69, p = .06, GFI = .98, CFI = .96, RMSEA = .06, LO90 = .00, HI90 = .10, pclose = .37, SRMR = .04.$

Note. ADF estimation was performed. Standardized betas are displayed. The covariance among the AIV and RP constitutes a modification.

Figure 6. The addition of Attitudes Supporting Violence construct in Confluence

Model. The direct effect is constrained to zero (N = 313).



$\chi^2 (17) = 25.67, p = .08, GFI = .98, CFI = .96, RMSEA = .04, LO90 = .00, HI90 = .07, pclose = .66, SRMR = .04.$

Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths. The covariance among the AIV and RP constitutes a modification.

Hypothesis 3: Emotional Dysregulation will be a predictor of SV. Also, emotional dysregulation will be related positively to HM and IS. Lastly, HM and IS will mediate the association between emotional dysregulation and SV.

Predictive role of Emotional Dysregulation

Firstly, the predictive ability of Emotional dysregulation was assessed via the ADF estimation (110 minimum sample size, $N = 408$), due to the normality violation (SES-SFP kurtosis: 45.12, C.R. = 186.05; multivariate kurtosis: 46.86, C.R. = 56.56, 7 multivariate outliers at $p < 0.001$). Results indicated an unacceptable model fit (see Table 9), however no modifications were suggested. Next, the predictive role of the Emotional dysregulation construct on SV was examined encompassing the third indicator of SV as well ($N = 313$) via ADF estimation (130 minimum sample size; SES-SFP kurtosis: 31.44, C.R. = 113.56; multivariate kurtosis = 34.88, C.R. = 31.49, 4 multivariate outliers at $p < 0.001$). According to Table 9, a barely acceptable model fit is noted. Figure 7 demonstrates the predictive role of Emotional dysregulation to SV, which was statistically significant ($p < 0.001$).

Correlations among Emotional dysregulation, Hostile Masculinity, and Impersonal Sex

The hypothesized correlations among the Emotional dysregulation construct and the two paths of CM, HM and IS, were assessed in a model without the inclusion of the SV construct. The ADF method of estimation (230 minimum sample size, $N = 408$) was performed due to normality violations (SES-SFP kurtosis: 45.12, C.R. = 186.05; multivariate kurtosis: 52.25, C.R. = 37.50, 6 multivariate outliers at $p < 0.001$). According to Table 9, there was a barely acceptable model fit. Next, the second data file was employed ($N = 313$) which indicated a better model fit (250

minimum sample size; SES-SFP kurtosis: 31.45, C.R. = 113.56; multivariate kurtosis: 38.06, C.R. = 21.74, 4 multivariate outliers at $p < 0.001$). Results revealed a positive significant correlation among Emotional dysregulation and HM ($r = 0.52, p < 0.001$), while a not significant correlation was noted with IS ($p = 0.44$).

The mediating role of Hostile Masculinity and Impersonal Sex on Emotional Dysregulation path

The ADF estimation was performed (230 minimum number of participants, $N = 408$) due to normality violations (SES-SFP kurtosis: 45.12, C.R. = 186.05; multivariate kurtosis: 52.25, C.R. = 37.49, 6 multivariate outliers at $p < 0.001$). According to Table 9, the model did not fit the data well and there was an inadmissible solution in the SV variance (value > 1 , see Figure F6 in Appendix F).

Next, the potential mediating effects of HM and IS on the Emotional dysregulation path towards SV, were investigated encompassing the third indicator of SV as well ($N = 313$). Similarly, an ADF estimation was performed (250 minimum sample size), due to normality violations (SES-SFP kurtosis: 31.45, C.R. = 113.56; multivariate kurtosis: 38.06, C.R. = 21.74, 4 multivariate outliers at $p < .001$). Table 9 presents the model fit indices, which designate acceptable fit. According to Figure 8, results support the fully mediating effect of HM, while the non-significant effect (either predictive or mediating) of IS is noted.

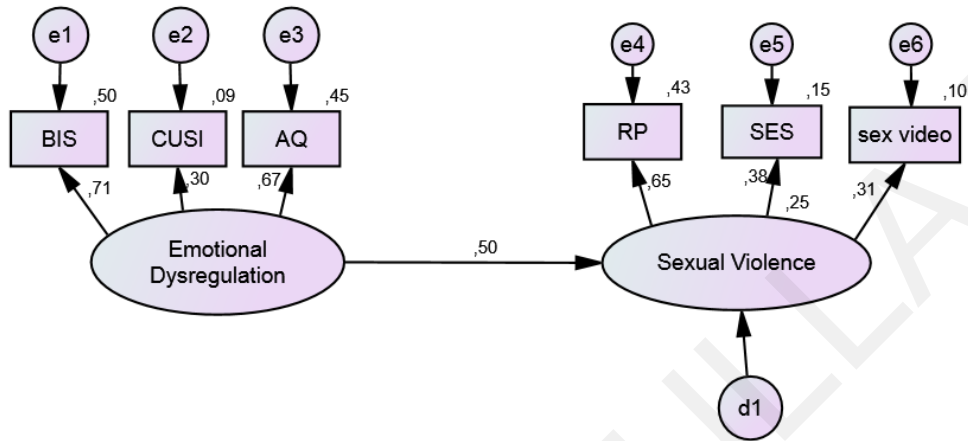
Overall, the 3rd hypothesis was partly supported. In fact, the predictive role of the Emotional dysregulation construct was supported, with its positive correlation with HM and the full mediation of direct effect via HM, being noted. Yet, the correlation among Emotional dysregulation and IS, and the mediating effect of the last one was not supported.

Table 9. *Model fit indices regarding the models investigating Emotional Dysregulation construct. Two data files were used (N = 408 & N = 313).*

Model	M.K. (C.R.)	χ^2	DF	P	GFI	CFI	RMSEA	LO90	HI90	PCLOSE	SRMR	BCC
<i>Investigating only the role of Emotional Dysregulation</i>												
N = 408	56.56	19.49	4	.00	.98	.83	.09	.05	.14	.03	.09	41.73
N = 313	31.49	20.75	8	.01	.98	.86	.07	.03	.11	.15	.05	47.35
<i>Investigating the correlations among Emotional Dysregulation, HM, and IS</i>												
N = 408	37.49	79.17	22	.00	.95	.80	.08	.06	.10	.01	.08	126.33
N = 313	21.74	70.38	30	.00	.96	.83	.07	.05	.09	.09	.06	122.21
<i>Investigating the mediating effects of IS and HM</i>												
N = 408	37.49	79.17	22	.00	.95	.80	.08	.06	.09	.01	.08	126.33
N = 313	21.73	70.38	30	.00	.96	.83	.06	.05	.08	.09	.06	122.21

Note. M.K. (C.R.), Multivariate kurtosis; χ^2 , Chi-square; GFI, Goodness-of-fit index; CFI, Comparative fit index; RMSEA, Root mean square error of approximation; SRMR, Standardized root mean square residual; BCC, Browne-Cudeck criterion. ADF estimation was performed. In N = 313 data file, the sexual video duration measure was added as an indicator of SV.

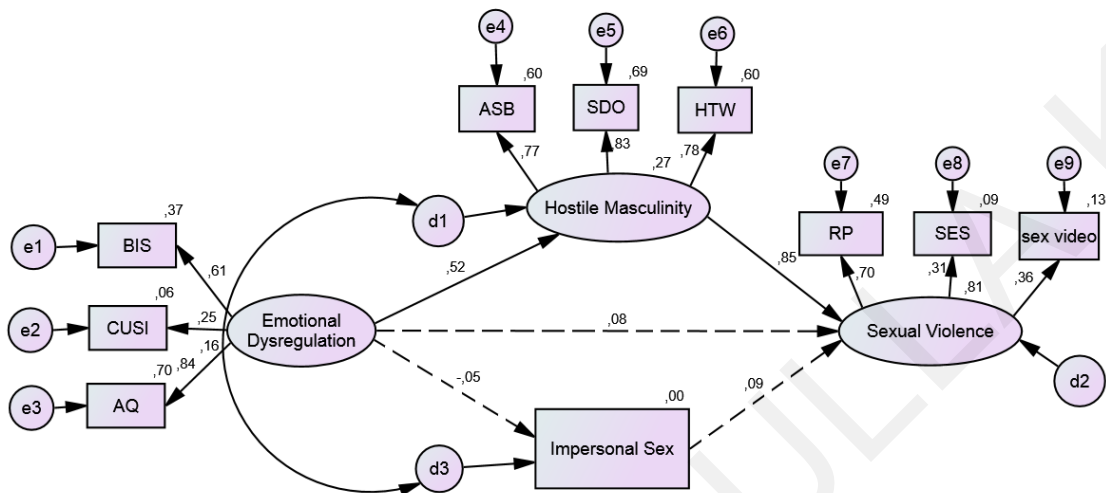
Figure 7. The predictive role of Emotional Dysregulation construct in Sexual Violence (N = 313).



$\chi^2 (8) = 20.75, p < .01, GFI = .98, CFI = .86, RMSEA = .07, LO90 = .03, HI90 = .11, pclose = .15, SRMR = .05.$

Note. ADF estimation was performed. Standardized betas are displayed.

Figure 8. The addition of Emotional Dysregulation construct in the Confluence Model (N = 313).



$\chi^2 (30) = 70.38, p < .01, GFI = .96, CFI = .83, RMSEA = .06, LO90 = .05, HI90 = .08, pclose = .09, SRMR = .06.$

Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths.

Hypothesis 4: Social/intimacy deficits will be a predictor of SV. Also, social/intimacy deficits will be related positively to HM and IS. Finally, HM and IS will mediate the association between social/intimacy deficits and SV.

The predictive role of Social/Intimacy Deficits

The ADF method of estimation was performed (90 minimum sample size, N = 408), due to normality violations (SES-SFP kurtosis: 45.12, C.R. = 186.05; multivariate kurtosis: 46.67, C.R. = 68.03, 9 multivariate outliers at $p < 0.001$). Results revealed a good model fit (see Table 10), yet the predictive role of Social/intimacy deficits is marginal ($p = .058$, see Figure F7 in Appendix F).

Similarly, this model was estimated encompassing the third indicator of SV (N = 313) as well via the ADF estimation (110 minimum sample size; SES-SFP kurtosis: 31.45, C.R. = 113.56; multivariate kurtosis: 32.78, C.R. = 34.66, 3 multivariate outliers at $p < 0.001$). According to table 10, the model again fit the data well, and the predictive role of the investigated construct was not supported ($p = 0.36$, see Figure 9).

Correlations among Social/Intimacy deficits, Hostile Masculinity, and Impersonal Sex

The ADF was performed (140 minimum sample size, N = 408) for the estimation of correlations among the HM, IS and Social/Intimacy deficits constructs (without the endogenous SV construct), due to multivariate normality violation (kurtosis: 7.60, C.R. = 7.84, 4 multivariate outliers at $p < 0.001$). Taking into consideration the constrictions of model fit (see Table 10) that designate an unacceptable fit (without modifications suggested), the correlations among the

constructs were significant. In fact, Social/Intimacy deficits related strongly to the HM construct ($r = 0.86, p < 0.001$) and modestly to IS ($r = 0.28, p < 0.003$).¹

The mediating role of Hostile Masculinity and Impersonal Sex on Social/Intimacy deficits

An ADF estimation was performed (200 minimum sample size, $N = 408$), due to normality violations (SES-SFP kurtosis: 45.12, C.R. = 186.05; multivariate kurtosis: 51.35, C.R. = 40.99, 7 outliers at $p < 0.001$). According to Table 10, a barely acceptable fit was noted. However, a better fit, which is within acceptable limits, was noted in the model encompassing the third indicator of SV as well ($N = 313$, see Table 10). Similarly, an ADF estimation was performed, (220 minimum sample size), due to normality violations (SES-SFP kurtosis: 31.45, C.R.= 113.56; multivariate kurtosis: 35.98, C.R. = 22.62, 4 multivariate outliers at $p < 0.001$). According to Figure 10, non-significant direct or indirect effects were noted, while an inadmissible solution was noted.²

Overall, the hypothesized predictive role of Social/intimacy deficits towards SV was not supported. Also, the mediating role of HM and IS was not supported. However, taking into consideration the constrictions of the model fit, significant correlations were noted among constructs.

¹ Model was assessed with the addition of SV and yet, the model indicated similarly unacceptable fit.

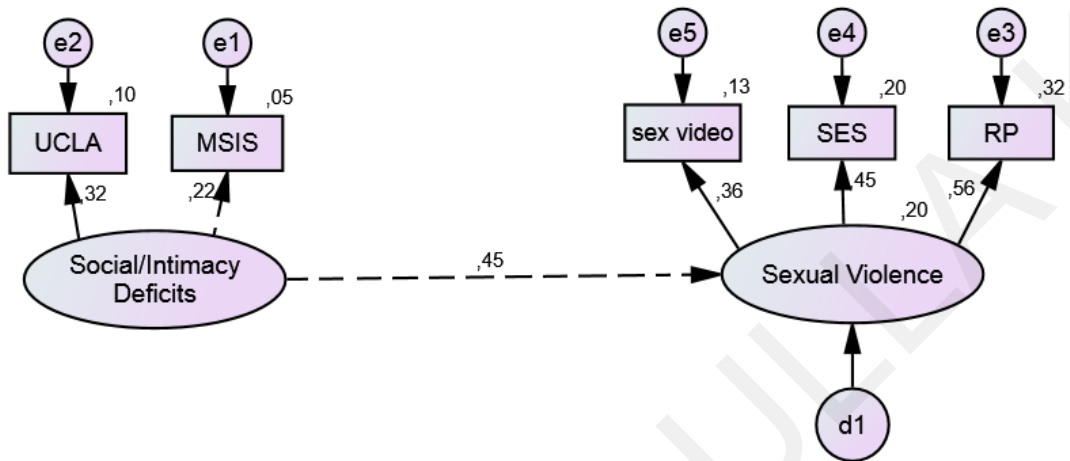
² Also, the mediating effects were assessed in more simplified models; assessing in separate models HM and IS effects. Despite the acceptable solutions, no statistically significant paths were noted.

Table 10. *Model fit indices regarding the models investigating Social/Intimacy**Deficits construct. Two data files were used (N = 408 & N = 313).*

Model	M.K. (C.R.)	χ^2	DF	P	GFI	CFI	RMSEA	LO90	HI90	PCLOSE	SRMR	BCC
<i>Investigate the predictive role of Social/Intimacy deficits</i>												
N = 408	68.03	.10	1	.75	1	1	.00	.00	.09	.85	.00	18.32
N = 313	34.66	2.57	4	.63	1	1	.00	.00	.07	.87	.02	25.01
<i>Investigating the correlations among Social/Intimacy deficits, HM, and IS</i>												
N = 408	7.84	35.71	7	.00	.97	.86	.10	.07	.13	.01	.06	64.20
<i>Investigate the mediating effects of IS and HM</i>												
N = 408	40.99	57.71	16	.00	.96	.81	.08	.06	.10	.01	.05	98.61
N = 313	22.62	47.01	23	.00	.97	.86	.06	.03	.08	.27	.04	92.47

Note. M.K. (C.R.), Multivariate kurtosis; χ^2 , Chi-square; GFI, Goodness-of-fit index; CFI, Comparative fit index; RMSEA, Root mean square error of approximation; SRMR, Standardized root mean square residual; BCC, Browne-Cudeck criterion. ADF estimation was performed. In N = 313 data file, the sexual video duration measure was added as an indicator of SV.

Figure 9. The examination of predictive role of Social/Intimacy construct in Sexual Violence (N = 313).

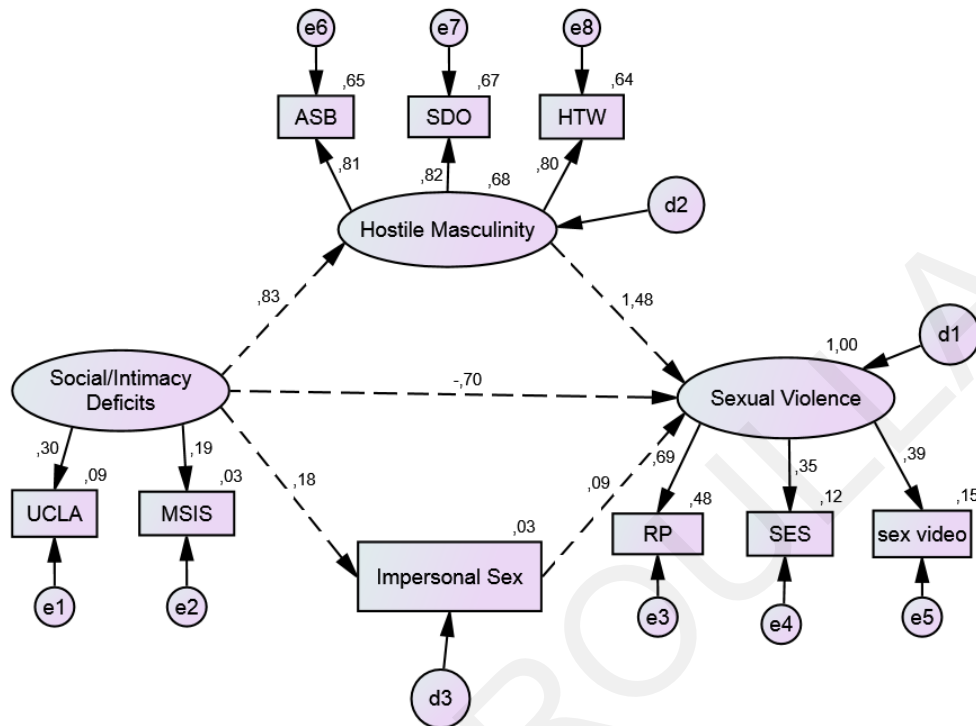


$\chi^2 (4) = 2.57, p = .63, GFI = 1, CFI = 1, RMSEA = .00, LO90 = .00, HI90 = .07,$
 $pclose = .87, SRMR = .02.$

Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths.

Figure 10. The addition of Social/Intimacy Deficits construct in the Confluence

Model (N = 313).



$\chi^2 (23) = 47.01, p = .00, GFI = .97, CFI = .86, RMSEA = .06, LO90 = .03, HI90 = .08, pclose = .27, SRMR = .04.$

Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths.

Hypothesis 5: Deviant sexual arousal will be a predictor of SV. Also, deviant sexual arousal will be positively correlated to HM and IS. Also, deviant sexual arousal will moderate the association between HM and SV, and between IS and SV.

The predictive role of Deviant Sexual Arousal

The observed variable of Deviant sexual arousal was calculated via the mean score of the SIS subscales employed. Its predictive role on SV was investigated in a model, encompassing the HM and IS constructs as well, in order to obtain an over-identified model. An ADF estimation was employed (180 minimum sample size, $N = 408$), due to normality violations (SES-SFP kurtosis: 45.12, C.R. = 186.05; multivariate kurtosis: 61.61, C.R. = 55.43, 10 multivariate outliers at $p < 0.001$). Results indicated a good model fit in the observed data (see Table 11), while the predictive role of deviant sexual arousal was supported (see Figure F8 in Appendix F).

Next, the model was estimated encompassing the third indicator of SV as well ($N = 313$). An ADF was again performed, satisfying the criterion of 200 minimum number of participants, due to normality violations (SES-SFP kurtosis: 31.45, C.R. = 113.56; multivariate kurtosis: 48.10, C.R. = 33.64, 8 multivariate outliers $p < 0.001$). Results revealed a good model fit (see Table 11), while again the direct effect of deviant sexual arousal is supported (see Figure 11). This model indicates a slightly better fit and 10% increase in the SV's variance explained.

Correlations among Deviant Sexual Arousal, Hostile Masculinity, and Impersonal Sex

The hypothesized correlation among the Deviant sexual arousal and the HM construct was tested in the above-mentioned model, and partly supported. There was a significant correlation among deviant sexual arousal and HM ($r = 0.38, p < 0.001$), while a non-significant correlation was noted with IS ($p = 0.77, N = 408$).

The moderating role of Deviant Sexual Arousal

The moderating nature of Deviant sexual arousal was investigated via Multi-group moderation analysis. The median-split procedure (Altman & Royston, 2006; Median = -.40, range: -1.56 to 3.40, N = 408) was again considered as the most suitable strategy of creating groups at this point; since, SIS does not have a specific cut-off score and at the same time, only some subscales were employed in the present study. Thus, low (N = 174) and high (N = 234) groups of Deviant sexual arousal were composed. An ADF estimation was performed (280 minimum group size per group) due to multivariate normality violation (kurtosis: 34.74, C.R. = 27.11, 5 multivariate outliers at $p < 0.001$). Results revealed that the models are significantly different among the two groups, $\chi^2(5) = 11.95, p = 0.04$. Yet, an inadmissible solution was noted in the path from HM to SV (value > 1) in the low deviant sexual arousal group. Taking into consideration that the minimum number of participants in each group was not fulfilled by far, especially in the low group (N = 174), results are interpreted with skepticism. At this point, a ML estimation was conducted as well, indicating that the models were not significantly different in the two groups, $\chi^2(5) = 10.47, p = 0.06$.

Concerning the addition of the third measure of SV (N = 313), similarly two groups (low N = 137 & high N = 176) of Deviant sexual arousal were created via the median-split procedure. An ADF estimation was employed (320 minimum sample size), due to normality violations (multivariate kurtosis: 34.64, C.R. = 20.47) and

results revealed that the models are invariant between groups, $\chi^2 (6) = 8.76, p = 0.19$.

In addition, a ML estimation was again conducted, due to unsatisfactory number of participants in each group, and revealed the same result of invariance among groups, $\chi^2 (6) = 8.60, p = 0.20$.

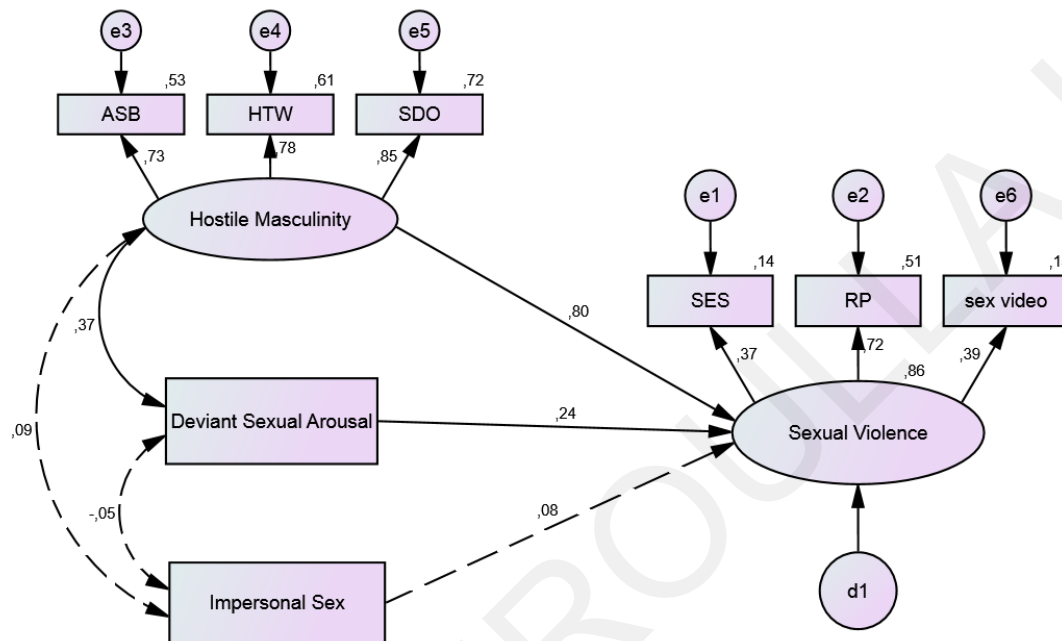
Overall, the 5th hypothesis is partially supported, since only the predictive role of deviant sexual arousal and its correlation with the HM construct were noted. The correlation among deviant sexual arousal and the IS construct was not supported. Also, the moderating effect of deviant sexual arousal is not supported, while there was invariance among groups.

Table 11. *Model fit indices regarding the models investigating Deviant Sexual Arousal. Two data files were used (N = 408 & N = 313).*

Model	M. K. (C.R.)	χ^2	DF	P	GFI	CFI	RMSEA	LO90	HI90	PCLOSE	SRMR	BCC
N = 408	55.43	15.34	10	.12	.98	.97	.04	.00	.07	.71	.03	52.06
N = 313	33.64	14.45	16	.57	.99	1	.00	.00	.05	.96	.03	55.64

Note. M.K. (C.R.), Multivariate kurtosis; χ^2 , Chi-square; GFI, Goodness-of-fit index; CFI, Comparative fit index; RMSEA, Root mean square error of approximation; SRMR, Standardized root mean square residual; BCC, Browne-Cudeck criterion. ADF estimation was performed. In N = 313 data file, the sexual video duration measure was added as an indicator of SV.

Figure 11. The addition of Deviant Sexual Arousal in the Confluence Model of Sexual Violence (N = 313).



$\chi^2 (16) = 14.45, p = .57, GFI = .99, CFI = 1, RMSEA = .00, LO90 = .00, HI90 = .05, pclose = .96, SRMR = .03.$

Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths.

Investigating the Hypothesized Unified Conceptual Model (all hypotheses together)

Prior to examining the next hypotheses, an effort was conducted to assess all the above-mentioned hypotheses in a unified conceptual model. An ADF estimation was performed (350 minimum sample size, $N = 408$), due to normality violations (SES-SFP kurtosis: 45.12, C.R. = 186.05; multivariate kurtosis: 54.23, C.R. = 27.73, 4 multivariate outliers at $p < 0.001$). However, there was a failure to converge with the iteration limit, despite its large increase (> 5000 ; Arbuckle, 2012). In contrast, the iteration limit was reached successfully when a ML estimation was performed, but the model fit was barely unacceptable ($\chi^2(53) = 228.85$, $p = 0.00$, GFI = .92, CFI = .89, RMSEA = .09, LO90 = .08, HI90 = .10, pclose = .00, SRMR = .06), and there were inadmissible solutions.

Next, an ADF estimation was again attempted with the addition of the behavioral index of SV ($N = 313$; SES-SFP kurtosis: 31.45, C.R. = 113.56; multivariate kurtosis: 38.74, C.R. = 16.19, 3 multivariate outliers at $p < 0.001$). Yet, the minimum number of 400 participants was not fulfilled and again a solution could not be reached (iteration limit > 5000 ; Arbuckle, 2012). Similarly, AMOS could not converge to a proper solution via the employment of a ML estimation.³

Investigating the Modified Unified Conceptual Model encompassing only the significant paths

Next, taking into consideration the above-mentioned results, a unified Conceptual Model was investigated encompassing only the statistically significant

³ Multi-group analyses were attempted for the investigation of moderating role of IS and deviant sexual arousal. Yet, ADF and ML estimations could not reach to solution in both data files for both variables.

paths (i.e., HM, Emotional dysregulation, Attitudes supporting violence). It is noteworthy that the IS construct and Social/Intimacy deficits were omitted from the model, since according to the previous analyses they did not contribute significantly to the model. The path from Attitudes supporting violence towards SV was again constrained to zero (see Hypothesis 2).

An ADF estimation was performed (250 minimum sample size, $N = 408$), due to normality violations (SES-SFP kurtosis: 45.12, C.R. = 186.05; multivariate kurtosis: 48.77, C.R. = 31.80, 5 multivariate outliers at $p < 0.001$). The model fit indices are considered as barely unacceptable, $\chi^2(30) = 93.68$, $p = 0.00$, GFI = .95, CFI = .83, RMSEA = .07, LO90 = .06, HI90 = .09, $pclose = .01$, and SRMR = .08. Next, in the same way, an ADF estimation was performed incorporating the sex video duration measure (270 minimum sample size, $N = 313$; SES-SFP kurtosis: 31.45, C.R. = 113.56; multivariate kurtosis: 35.79, C.R. = 18.72, 4 multivariate outliers at $p < 0.001$). In this case, the model fit the data in an acceptable way, $\chi^2(39) = 84.48$, $p = 0.00$, GFI = .96, CFI = .86, RMSEA = .06, LO90 = .04, HI90 = .08, $pclose = .13$, and SRMR = .07. Interestingly, according to Figure 12, the previously significant path from Emotional dysregulation to HM is turned to non-significant.

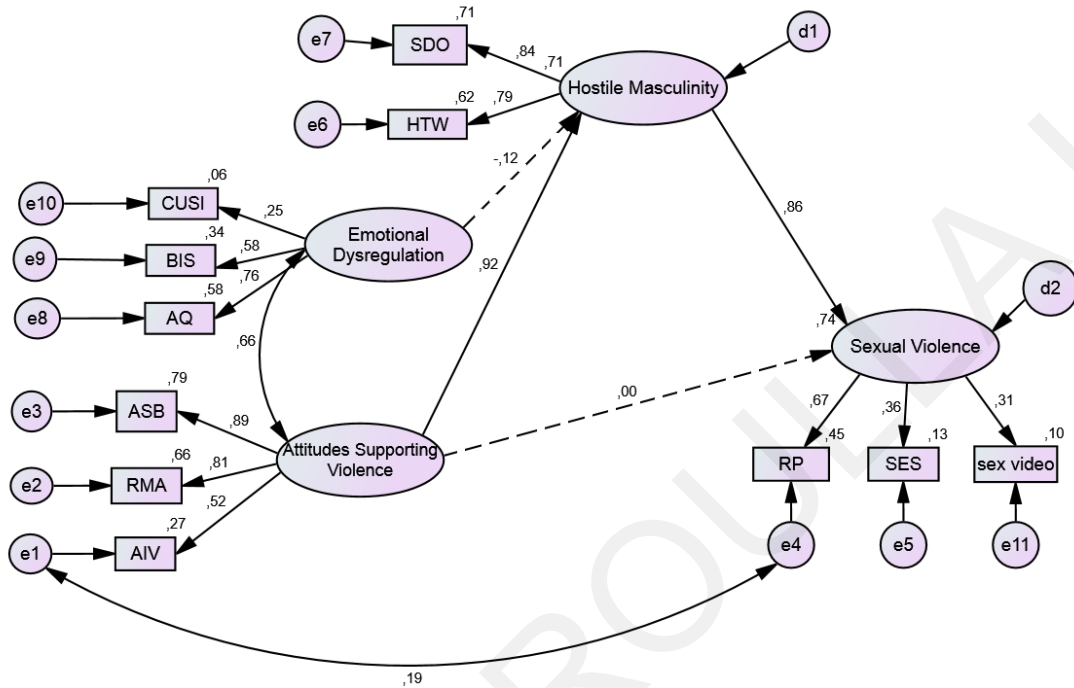
Then, a multi-group moderation analysis via an ADF estimation (310 minimum sample size per group, $N = 313$) was conducted for the investigation of the moderating role of Deviant sexual arousal in the model encompassing Attitudes supporting violence, HM, and SV. Results did reveal significant differences among groups (high group $n = 176$, low group $n = 137$), $\chi^2(7) = 17.11$, $p = 0.02$ (see Figures

13 and 14).⁴ Results must be interpreted with caution, since the minimum number of participants was not fulfilled.

Furthermore, a multi-group moderation analysis via an ADF estimation (310 minimum sample size per group; $N = 313$) was conducted to investigate the moderating role of IS in this final unified model. Results did not reveal statistically significant differences among the two groups, $\chi^2(7) = 12.80, p = 0.08$. Yet, multi-group moderation analysis via ADF (280 minimum sample size per group) using the second data file (2 indicators of SV, $N = 408$), revealed statistically significant differences among groups, $\chi^2(6) = 13.39, p = 0.04$ (see Figures F9 and F10 in Appendix F). At this point, current results must be interpreted with caution, since again the minimum sample size per groups (high IS = 206, low IS = 202) was not fulfilled.

⁴ Results from the multi-group moderation analysis via ADF in the second data file ($N = 408$), revealed statistically significant difference among the groups; yet, inadmissible solutions were noted in low deviant sexual arousal group.

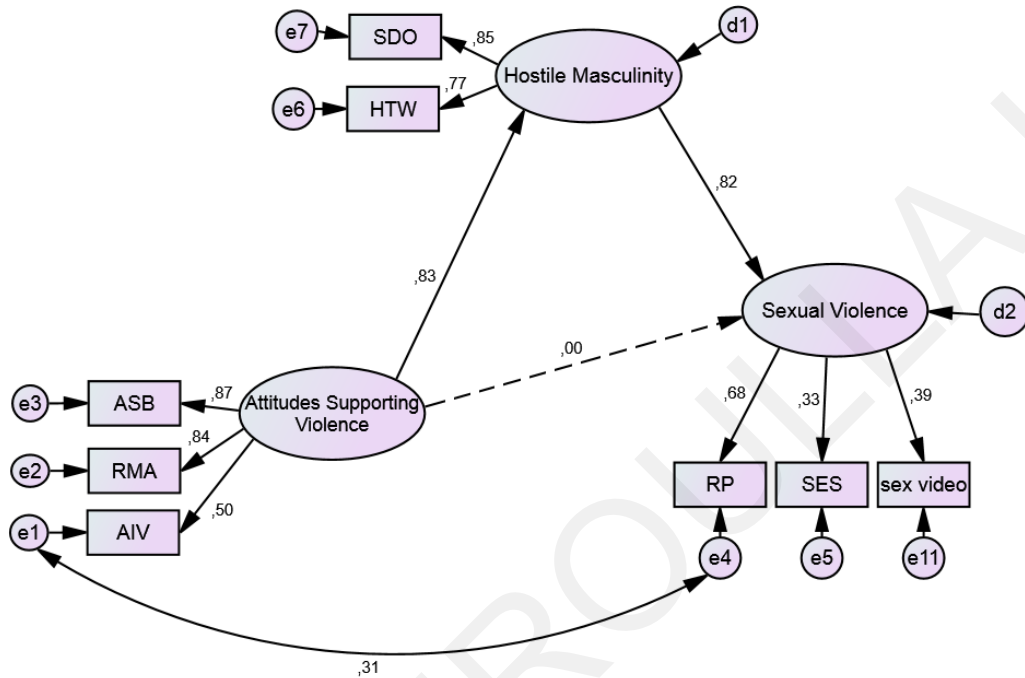
Figure 12. The Modified Unified Conceptual Model, encompassing only the statistically significant paths from previous analyses (N = 313).



$\chi^2(39) = 84.48, p = .00, GFI = .96, CFI = .86, RMSEA = .06, LO90 = .04, HI90 = .08, pclose = .13, \text{ and } SRMR = .07.$

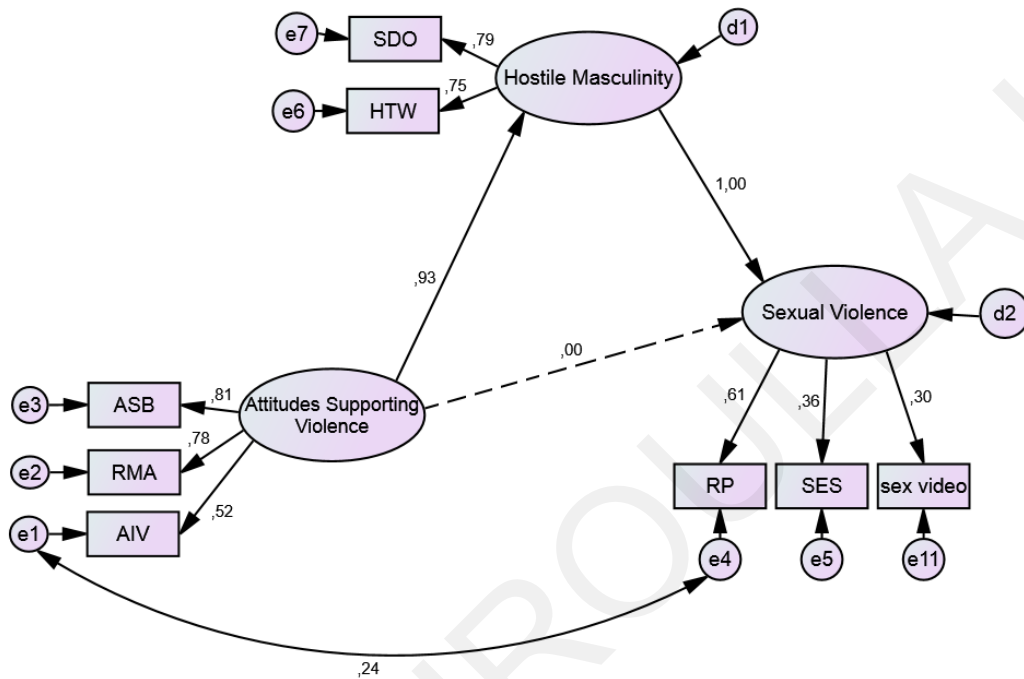
Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths. The path from Attitudes Supporting Violence to SV was constrained to zero.

Figure 13. The Modified Unified Conceptual Model in high Deviant sexual arousal group (n = 176, N = 313).



Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths. The path from Attitudes Supporting Violence to SV was constrained to zero.

Figure 14. The Modified Unified Conceptual Model in low Deviant sexual arousal group (n = 137, N = 313).



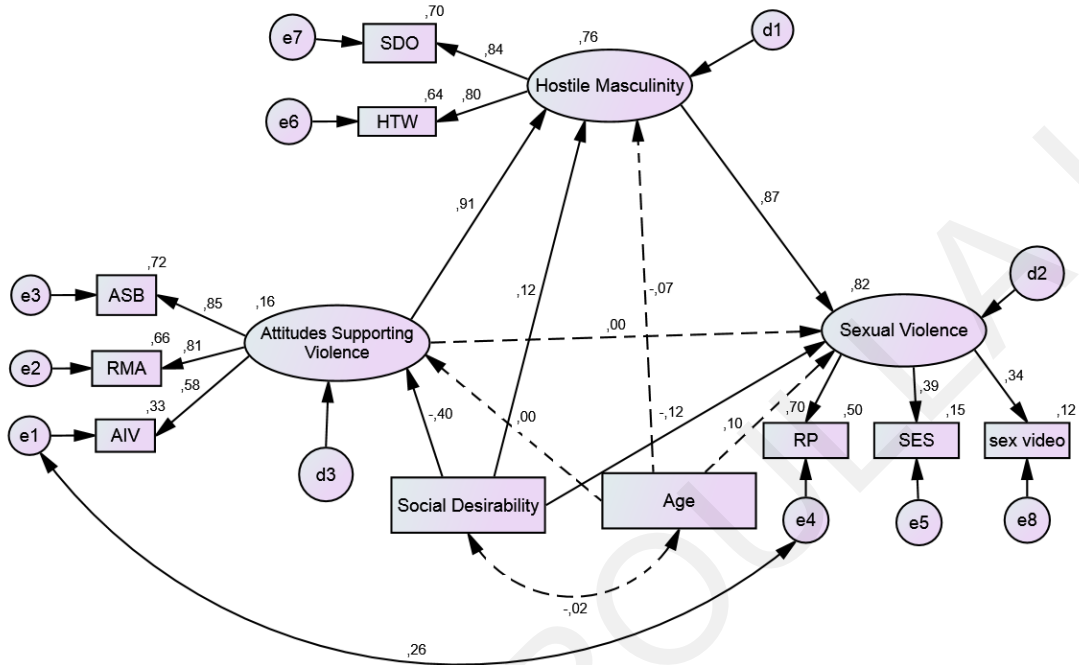
Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths. The path from Attitudes Supporting Violence to SV was constrained to zero.

Investigating Age and Social Desirability as Covariates in the Modified Unified Conceptual Model

This final modified unified conceptual model was again estimated with the addition of Age and Social desirability as covariates. An ADF estimation was performed (260 minimum sample size; N = 395 with listwise deletion from data file with two SV indicators) due to the known normality violations (SES-SFP kurtosis: 57.82, C.R. = 234.55; Age kurtosis: 244.29, C.R. = 991.04; multivariate kurtosis: 291.43, C.R. = 205.81; 6 multivariate outliers at $p < 0.001$). Results revealed acceptable model fit, $\chi^2(19) = 35, p = 0.01$, GFI = .98, CFI = .95, RMSEA = .05, LO90 = .02, HI90 = .07, pclose = .57, and SRMR = .04. Figure F11 in Appendix F presents the standardized betas of the model.

A slightly better model fit was noted in an ADF estimation employing the third indicator of SV as well (280 minimum sample size; N = 313; SES-SFP kurtosis: 31.45, C.R. = 113.56, Age Kurtosis: 199.75, C.R. = 721.34; multivariate kurtosis: 221.34, C.R. = 126.39; 5 multivariate outliers at $p < 0.001$). Specifically, $\chi^2(27) = 38.43, p = 0.07$, GFI = .98, CFI = .96, RMSEA = .04, LO90 = .00, HI90 = .06, pclose = .79, and SRMR = .05. Figure 15 presents the standardized betas. Interestingly, the Age path towards HM turned to non-significant when the model encompassed the third indicator of SV as well. It is apparent that social desirability plays a significant role, yet the main effects remain significant.

Figure 15. The Modified Unified Conceptual Model with the addition of Age and Social Desirability as covariates (N = 313).



Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths. The path from Attitudes Supporting Violence to SV was constrained to zero.

Hypothesis 6: A positive correlation will be noted among SV measures: likelihood to SV, SV history, and behavioral index of SV responding in SV paradigm.

According to correlation analyses conducted via SPSS, the hypothesis is supported, even though low to moderate correlations were noted. As mentioned in the Correlations section, the sexual video duration correlated to SV history (SES-SFP) with $r = 0.16$ ($p < 0.01$) and to the likelihood of SV (RP) with $r = 0.22$ ($p < 0.01$, $N = 313$), while the correlation among SES-SFP and RP was moderate ($r = 0.30$, $p < 0.01$, $N = 420$).

Hypothesis 7: Positive masculinity will be related negatively to HM and to SV. Positive masculinity will predict reduced SV. The relationship with IS will be assessed.

For the investigation of this hypothesis, an ADF estimation was performed (170 minimum sample size, $N = 404$ with listwise deletion; SES-SFP kurtosis: 44.74, C.R. = 183.57; multivariate kurtosis: 55.03, C.R. = 49.27, 6 multivariate outliers at $p < 0.001$). Table 12 presents the model fit indices which indicate a good fit. According to Figure F12 in Appendix F, a significant negative modest correlation was noted among PM and HM, $r = -0.24$, $p < 0.001$, while a non-significant correlation was noted with IS ($p = 0.64$). Also, results revealed a non-significant (zero) direct effect of PM on SV ($p = 0.97$). Similarly, no statistically significant correlation was noted among PM and SV ($p = 0.98$).⁵

Similarly, the model was estimated again with the addition of the sexual video duration ($N = 310$ with listwise deletion) via an ADF estimation (190 minimum

⁵ This association was tested in the above-mentioned model, while the direct effect of PM on SV, turned to covariance effect.

sample size; SES-SFP kurtosis: 31.28, C.R. = 112.42; multivariate kurtosis: 45.95, C.R. = 31.98, 5 multivariate outliers at $p < 0.001$). The investigated model was a good fit to the observed data (see Table 12), while it demonstrated a slightly better fit than the previous one with 19% increase in the SV's variance explained (see Figure 16). Similarly, PM was not statistically correlated with IS ($p = 0.76$), but it was, however, negatively correlated with HM ($r = -0.30, p < 0.001$). A non-significant (zero) direct effect of PM on SV ($p = 0.98$) was noted, an evidence that comes in accordance with the non-significant correlation between them ($p = 0.98$).

Hypothesis 8: Positive masculinity will be related negatively to Attitudes supporting violence, Emotional dysregulation, Social/intimacy deficits, and Deviant sexual arousal. Also, the function of PM on Attitudes supporting violence, Emotional dysregulation, Social/intimacy deficits, and Deviant sexual arousal towards SV will be assessed.

A model was tested encompassing PM, SV, and the clinical symptoms via an ADF estimation (370 minimum sample size, $N = 404$; SES-SFP kurtosis: 44.74, C.R. = 183.57; multivariate kurtosis: 67.78, C.R. = 37.16, 10 multivariate outliers at $p < 0.001$). Results revealed an unacceptable model fit (see Table 12) and a suggested modification regarding the covariance among AIV and RP was employed (380 minimum sample size). Then, the model fit improved significantly, $\Delta\chi^2 = 30.79, \Delta df = 1, p < 0.001$, and the solution turned to barely acceptable (see Table 12). Results revealed negative significant correlations of PM among Social/Intimacy deficits ($r = -0.45, p < 0.05$), Attitudes Supporting Violence ($r = -0.33, p < 0.001$), and Emotional Dysregulation ($r = -0.30, p < 0.05$), while a non-significant correlation was noted with Deviant Sexual Arousal ($p = 0.07$). However, an inadmissible solution was noted among the covariance of Social/Intimacy deficits and Emotional Dysregulation

(value > 1) in this model. Next, an ADF estimation was performed in the second data file (N = 310; 390 minimum sample size; SES-SFP kurtosis: 31.28, C.R. = 112.42; SIS kurtosis: 8.66, C.R. = 31.11; multivariate kurtosis: 52.49, C.R. = 23.40, 7 multivariate outliers at $p < 0.001$). There was an unacceptable fit and despite the modification employed, the fit remained in unacceptable limits (see table 12).⁶

Investigating the potential moderating role of Positive Masculinity in the Pathway

Model

First, two PM groups were created via the median-split procedure (Altman & Royston, 2006; Median = 49, high PM group = 203, low PM group = 201). Next, a multi-group moderation analysis was conducted via an ADF estimation (540 minimum sample size; SES-SFP kurtosis: 56.11, C.R. = 163.18, SIS kurtosis: 10.31, C.R. = 29.99; multivariate kurtosis: 70.88, C.R. = 29.86, 2 multivariate outliers at $p < 0.001$), and results revealed invariance among the two PM groups, $\chi^2(4) = 0.44$, $p = 0.44$. Similarly, an ADF estimation was employed incorporating the third indicator of SV (N = 310; Median = 49, high PM group = 157, low PM group = 153; SIS kurtosis: 14.77, C.R. = 37.79; SES-SFP kurtosis: 8.23, C.R. = 21.05; multivariate kurtosis: 34.61, C.R. = 11.83, 3 multivariate outliers at $p < 0.001$), and results revealed that the model is not statistically different among groups, $\chi^2(5) = 9.06$, $p = 0.11$. Thus, results do not support the moderating role of PM; however, taking into consideration that the minimum sample size was not met this finding must be interpreted with caution.

Investigating the potential moderating role of Positive Masculinity in the CM

⁶ Since there was a consideration regarding the adequacy of model fit, correlation analysis was conducted via SPSS, illustrating the same results.

Furthermore, the potential moderating role of PM was assessed in the CM. Again, a multi-group moderating analysis (high PM group = 203, low PM group = 201) was conducted via an ADF estimation (230 minimum sample size; SES-SFP kurtosis: 56.11, C.R. = 163.18; multivariate kurtosis: 63.75, C.R. = 46.35, 2 multivariate outliers at $p < 0.001$). Results revealed no significant differences between the two groups, $\chi^2(5) = 6.02$, $p = 0.31$. Similarly, a multi-group analysis was again performed with the addition of the third indicator of SV, the sexual video duration (N = 310; Median = 49, high PM group = 157, low PM group = 153) via an ADF estimation (260 minimum sample size; SES-SFP kurtosis: 8.23, C.R. = 21.05; multivariate kurtosis: 14.63, C.R. = 8.16, 1 multivariate outlier at $p < 0.001$). Results revealed invariance between groups, $\chi^2(6) = 2.89$, $p = 0.82$. Yet, the present results must be interpreted with caution, due to the lack of satisfying sample size.

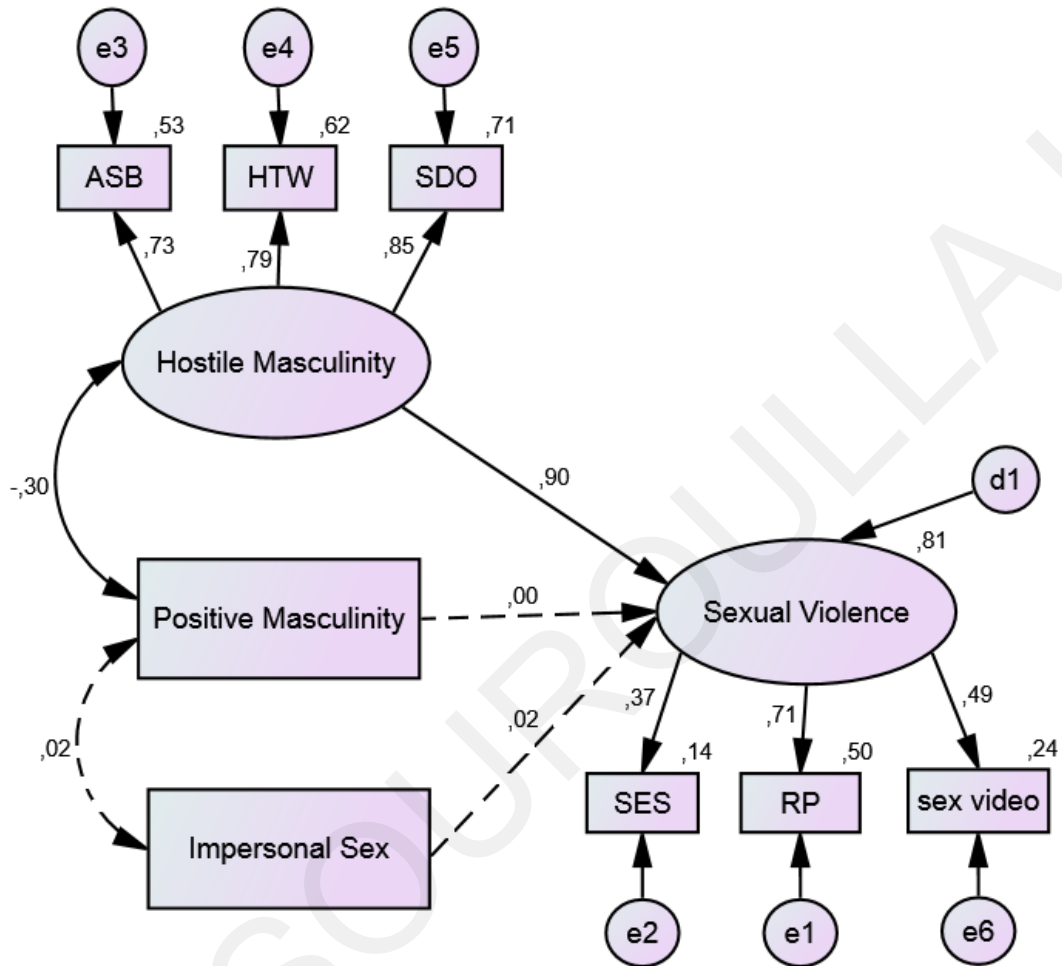
Table 12. *Model fit indices regarding the models investigating Positive Masculinity.*

Two data files were used (N = 404 & N = 310).

Model	M.K. (C.R.)	χ^2	DF	P	GFI	CFI	RMSEA	LO90	HI90	PCLOSE	SRMR	BCC
<i>Investigate the model among PM, HM, IS, and SV</i>												
N = 404	49.27	19.46	11	.05	.98	.96	.04	.00	.08	.59	.05	54.15
N = 310	31.98	19.92	17	.28	.98	.98	.02	.00	.06	.87	.05	59.06
<i>Investigating the model among PM, SV, and Clinical symptoms</i>												
N = 404	37.16	170.97	40	.00	.93	.72	.09	.07	.10	.00	.08	247.44
N = 310	23.40	180.03	52	.00	.92	.70	.09	.08	.10	.00	.08	261.73
<i>Incorporating the covariance among AIV - RP</i>												
N = 404	37.16	140.18	39	.00	.94	.79	.08	.07	.09	.00	.08	218.72
N = 310	23.40	156.07	51	.00	.93	.75	.08	.07	.10	.00	.08	239.87

Note. M.K. (C.R.), Multivariate kurtosis; χ^2 , Chi-square; GFI, Goodness-of-fit index; CFI, Comparative fit index; RMSEA, Root mean square error of approximation; SRMR, Standardized root mean square residual; BCC, Browne-Cudeck criterion. ADF estimation was performed. In N = 310 data file, the sexual video duration measure was added as an indicator of SV.

Figure 16. The model investigating Positive Masculinity, Hostile Masculinity, Impersonal Sex, and Sexual Violence (N = 310).



$\chi^2 (17) = 19.92, p = .05, GFI = .98, CFI = .98, RMSEA = .02, LO90 = .00, HI90 = .06, pclose = .87, SRMR = .05.$

Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths.

CHAPTER 4

DISCUSSION

The present study aimed to integrate the clinical symptoms of the most comprehensive multifactorial theory, the Pathway Model (Ward & Siegert, 2002) into the Confluence Model (CM; Malamuth et al., 1991), the first and the only empirically derived, established, and at present most feasible etiological model of Sexual Violence (SV). According to the results, models incorporating the behavioral index of the SV paradigm as a third indicator of SV, demonstrated a better fit, while the same pattern of results was noted among the two separate data files (N = 408, N = 313) incorporating two or three indicators of SV (i.e., RP, SES-SFP, sexual video duration).

Hypothesis 1: The replication of CM using an online methodology

The current results partly replicated the CM using an online methodology, since only the predictive role of the Hostile Masculinity (HM) path is supported, underlining the role of hostile attitudes and acts towards females. It seems that this path functions independently from Impersonal Sex (IS), since its hypothesized synergistic function with IS is not supported, contrary to the original and later findings regarding the CM (Hardit, 2012; Malamuth et al., 1995; Malamuth et al., 1991; Wheeler et al., 2002).

The predictive role of HM in SV in the present non-offender sample, appears to be in accordance with previous findings (Hardit, 2012; Malamuth, 2003). The present results support the predictive role of HM, and not of IS, on SV, and are in agreement with other recent studies conducted also using community samples (i.e., Greene & Davis, 2011). Similarly, other studies supported the more powerful role of

HM, in contrast to IS (university sample, Anderson & Anderson, 2008; online community sample, Casey et al., 2016). This lack of the predictive role of IS is in disagreement with Hardit' study (2012). Importantly, one may argue that the present study has assessed only the two main paths of the CM and could not fully replicate the model, omitting some important childhood/adolescence factors (like in Casey et al., 2016). Yet, the inclusion of such variables could have illustrated different results.

The present results regarding the role of attitudes supporting violence and HM highlight the importance of power motives for SV (Malamuth et al., 1991); however, in the present sample the sexual motive via IS path is not supported. The lack of support regarding the IS path, could be due to methodological issues of the IS construct, with the quality of its indicators being questioned. In fact, IS items may be considered as a psychometrically inadequate measure in this study and this could lead to the underestimation of causal effects (Kline, 2011).

Taking into consideration the present results, the masculine-related procedure in the comprehension of SV is strongly supported and the crucial role of HM is underlined. This appears to be in accordance with Berke and colleagues' (2016) remarks regarding the IPV and, with Lizak and Roth (1990)'s study supporting that hostility towards women and the wish to dominate them constitute the main motivators. It seems that cultural attitudes regarding gender roles that males hold (Good et al., 1994), play a crucial role in the comprehension of risk factors relating to SV. It is apparent that in the present sample the support of traditional, inflexible, and hostile attitudes towards women combined with a desire to dominate them lead to SV. The present findings seem to agree with the notion that violence is considered a way to demonstrate manhood and superiority (Berke et al., 2016; Vandello & Bosson, 2013). The present study shed light to the significance of HM, as a socio-cultural

factor (McDermott et al., 2015) and that the hostile socializing procedure of masculinity towards women in the close community of Cyprus lead to SV perpetration.

Hypothesis 2: The addition of Attitudes Supporting Violence into CM

The second hypothesis is supported from the findings of the present study. In fact, the direct effect of Attitudes supporting Violence on SV, the significant correlation with HM, the non-significant correlation with IS, and the mediating role of HM on the direct effect are supported. The present findings illustrating the predictive role of Attitudes supporting violence are in accordance with Ward and Siegert's theory (2002), while the mediating role of HM agrees with previous findings (Hardit, 2012; Malamuth et al., 1991). This finding seems to highlight the significant contribution of attitudinal aspects and beliefs in SV perpetration and how attitudes embracing rape myths and the acceptance of violence lead to hostile attitudes towards females and to an elevated power motive in sexual encounter, and this in turn leads to SV.

During the investigation of Attitudes Supporting Violence' predictive role, an unacceptable model fit was noted and the suggested modification of the covariance among AIV and RP was employed. Yet, one could consider this modification as a limitation of the model, since the effect of Attitudes supporting violence on SV is measured both directly and via this covariance as well. However, the direct effect remained significant with the inclusion of this modification and turned to non-significant only when the mediator was entered to the model.

When HM was added to the model to investigate its mediating effect, an inadmissible solution was noted to the HM path towards SV. One could support that

the extreme correlation among HM and Attitudes supporting violence could induce this inadmissible solution (Kline, 2011). Then, the direct effect was constricted to zero and admissible solutions were obtained. Results support the full mediating role of HM on Attitudes supporting the violence path towards SV. This effect was apparent both when the direct effect was not constrained and when it was constrained to zero.

Hypothesis 3: The addition of Emotional Dysregulation into CM

The third hypothesis is partly supported, since, the predictive ability of the Emotional dysregulation construct towards SV, its positive correlation with HM and the full mediation of direct effect via HM were supported. However, the correlation between Emotional dysregulation and IS, and the mediating effect of the last one was not supported. The predictive ability of Emotional Dysregulation towards SV is congruent with previous findings (Hardit, 2012; Jakupcak et al., 2005; Ward & Marshall, 2004); similarly, the mediating role of HM in this direct effect is also in accordance with previous findings (Malamuth et al., 2009). In contrary to our expectations, the mediating effect of IS was not supported; yet, the fact that the predictive role of IS was not apparent from the beginning needs to be taken into consideration.

According to these results, it seems that the emotional regulation system influences the SV acts via the hostile attitudes that males of the present sample hold towards females. At this point, the role of impulsivity is underlined and how strongly it could impact the attributions and beliefs of males in aggressive and hostile way. In addition, the level to which a person employs sexual acts to cope with an upsetting

situation leads to dominance and control motives towards sexual encounter and overall to consider sexual relationships as adversarial.

Hypothesis 4- The addition of Social/Intimacy deficits into CM

The predictive role of Social/Intimacy deficits was not supported. Taking into consideration the constriction of model fit, statistically significant correlations were detected, with Social/Intimacy deficits correlating strongly with HM and moderately with IS. Importantly, no significant direct or indirect effects were noted in the model encompassing Social/Intimacy deficits, HM, IS, and SV. This finding can be explained by the fact that the Social/intimacy deficits construct did not constitute a strong predictor to begin with and thus, the absence of mediating effects was not surprising.

The lack of the Social/Intimacy deficits' predictive role is contrary to past findings (i.e., Hudson & Ward, 2000; Ward & Siegert, 2002). Yet, the presence of a strong association between HM and Social/intimacy deficits is in accordance with the literature (i.e., Hardit, 2012; Lease et al., 2010; Levant & Richmond, 2007; Lizak & Ivan, 1995; Mann et al., 2010). Similarly, the correlation among Social/deficits and IS is also supported by previous studies (i.e., Langstrom & Hanson, 2006). On the other hand, the lack of the mediating effect of HM counteracts Malamuth's (2003) notion that "general" maladaptive features (e.g., psychosocial deficits) on SV, are mediated by more "specific" features (e.g., HM), and previous findings supporting the effect of loneliness on hostility towards women (Check et al., 1985). Furthermore, contrary to our expectations and to other relevant findings (Hardit, 2012) the mediating role of IS in this procedure was not supported.

One interpretation of the present non-supportive results could be that the current sample generally did not indicate Social/intimacy deficits that may be explained by the fact that most of them were either in a relationship or married. Perhaps a sample that would include more single males could have led to different findings. Moreover, one could consider that it is not much acceptable for males in the present sample to express their intimate feelings (i.e., affection). Still, one may argue that the expression of negative feelings (i.e., anger) is more socially acceptable, paralleling it to the above mentioned supported hypothesis regarding Emotional dysregulation. At this point, the assessment of various emotional aspects needs to be highlighted. A number of measures were used including the MSIS that assessed the presence of intimacy in relationships (i.e., “How important is it to you to listen to his/her very personal disclosures?”), and the UCLA assessing the presence of feelings of loneliness (i.e., “How often do you feel that you lack companionship?”). On the other hand, AQ assessed the presence of anger and hostility (i.e., “I have threatened people I know”), directly, and the BIS-11, the presence of impulsivity (i.e., “I don’t “pay attention””). Therefore, it may be assumed that cultural issues are involved. Furthermore, one could consider that omitting variables like early risk factors in the present study (i.e., adolescent delinquency), false inferences could be made, like the absence of the direct effect of the predictor on the outcome (Sutton & Staw, 1995). At this point, more studies are required to investigate the role of Social/Intimacy deficits in SV perpetration and perhaps whether cultural features are indeed involved in this process via the investigation of various cultural groups.

Another consideration regards the MSIS tool, since participants were instructed to answer the questions for intimacy towards their closest friend or companion. This was instructed in the original tool and at the same time, complied

with the present sample of males, while some of them did not have companions. However, the number of participants responding based on a romantic relationship or a friendship is unknown, and perhaps this could be conceptualized differently.

Hypothesis 5- The addition of Deviant Sexual Arousal into CM

This hypothesis is partially supported, while the predictive role of Deviant sexual arousal was supported, coming to accordance with previous studies (Marshall et al., 1991; Rice et al., 1990; Ward & Siegert, 2002). The positive correlation among the deviant sexual arousal and HM was also supported, coming into agreement with past literature (i.e., Malamuth, 1986; Malamuth, 1983; Murphy et al., 1986).

On the other hand, its correlation with the IS construct was not supported, contrary to previous findings (i.e., Connolly, 2004; Langstrom & Hanson, 2006). Importantly, the moderating effect of Deviant sexual arousal was not supported since the model was invariant among groups. Again, this is contrary to our expectations and previous relevant studies (i.e., Hardit, 2012). Taking into consideration that the HM path was not moderated by other factors, either Deviant sexual arousal or IS, one may assume that the HM path towards SV is so powerful that cannot be influenced from other variables.

Unified Conceptual Models

Incorporating only the significant paths, as above-mentioned, in a unified model, the previously significant path of Emotional Dysregulation path towards HM, turned to non-significant. In this sense, one could consider that this effect is eliminated when the more powerful path of Attitudes Supporting Violence is entered into the model (both higher standardized beta and higher percentage in the SV's

variance explained in Attitudes supporting violence model than in Emotional dysregulation model). In addition, the extremely high correlation among Attitudes Supporting Violence and HM might play a role in this effect. Taking into consideration the high correlation among Emotional dysregulation and Attitudes supporting violence, another interpretation could be a potential mediated mediation, in which Emotional dysregulation has an effect on Attitudes Supporting and then, this has a direct effect on HM and then, on SV.

Inspecting the multi-group analyses of Deviant sexual arousal, it seems that Deviant sexual arousal differentiated the magnitude of the effects among the groups. Yet, the low Deviant arousal group indicated stronger structural effects, than the high group. Similarly, it seems that IS differentiated the magnitude of the effects among groups, with low IS group indicating stronger structural effects than the high IS group. The lack of a satisfying number of participants in each group needs to be taken into account, and therefore no clear inferences could be made.

It is noteworthy that while controlling for Age and Social desirability in the final unified model, the structural effects between the factors remained the same, indicating that the present results are generalizable among all social desirability levels and age groups. However, it is important to highlight that social desirability is negatively related to most of the study variables (also, see below the Methodological Considerations section).

Hypothesis 6- Correlations among SV indicators

The sixth hypothesis was supported; however, low to moderate correlations were noted among the SV measures. One could assume higher correlation indices among the measures of the same construct. Yet, when interpreting the results of the

present study, the difference in prevalence observed in each SV measure needs to be taken into account.

At this point, it is useful to sum up the prevalence of SV for each measure. High prevalence of rape proclivity was noted in the present sample, since most of the participants noted some degree of RP (n = 338 participants, 80.5%). In regard to SV history, 165 participants (39.3 %) stated perpetration of SV act since the age of 14. Taking into consideration that 1 in 4 males admitted an act of SV perpetration, one could assume that the real prevalence of SV perpetration is larger. This finding comes in accordance to previous studies using community samples, like those of Abbey and colleagues' (2011) and Casey and colleagues' (2016) that indicated a SV perpetration rate of 43% and 32 % of the sample, respectively.

The most frequent outcomes and strategies employed by the participants in the present sample were: Sexual contact by verbal coercion (n = 80, 48.5%), Completed rape by verbal coercion (n = 60, 36.4%), and Attempted rape by verbal coercion (n = 59, 35.8%). It is interesting to underline that in these three outcomes, the same strategy was applied, i.e., verbal coercion. Generally, the use of verbal coercion constitutes a more "insidious" and hidden form of violence (Tomison & Tucci, 1997). In addition, for every type of outcome the most frequent tactic used was firstly verbal coercion, then incapacitation, and lastly, physical force (i.e., sexual contact by verbal coercion - 48.5%, by incapacitation – 33.3%, and by physical force – 6%). One might consider that perhaps the frequency of tactics applied is negatively correlated to how "obvious" and visible each tactic is. The rare report of physical force in the present sample appears to be in agreement with Abbey and Jacques-Tiura's (2011) study in a community sample.

One hundred and seven participants (25.5%) admitted that they have committed an act described in SES-SFP and almost all of them (95.3%) towards females. Most of them (63.6%) conducted these SV acts towards their partner. In addition, regarding the question whether they believe that they have raped someone, 9 participants (8.4%) have admitted to having committed rape. Taking into consideration the demographic characteristics of the SV history group, it is apparent that they do not differ from the general population while they come from all the socio-economic levels, relationship status, living conditions, and educational backgrounds, with the vast majority of them not having been accused of any offense.

Inspecting the SV paradigm, it is apparent that only 13 participants (4%) felt strongly that they have been deceived. From the 315 responses used, almost half of them (N = 149, 47.3%) were sexually violent against their fictional female partner. Yet, interestingly, only 20.3% (64 participants) selected the sexual movie clip to send to their female partner. In this sense, the more covert way of committing SV is more prevalent (selection of SV movie Vs indirect selection of duration of SV movie clip). This seems to be in accordance with the above-mentioned commentary concerning the forms of overt and covert violence. Considering the assumed reaction of the female partner, it is noted that participants who selected the sexual video supported that their female partner would like the video less than participants who selected the non-sexual video in a statistically significant way. In this sense, one could underline the intentional aspect of SV. Also, participants with no history of SV (n = 182) subjected their female partner to sexual video statistically significant for a shorter duration, than participants with SV history (n = 132). Similarly, the high RP group (n = 170) indicated statistically significant higher duration selection for the sexual video towards their female partner, than the low RP group (n = 145).

Hypothesis 7-Positive Masculinity & Confluence Model

This hypothesis was partly supported, since findings lend support only to the negative correlation among PM and HM. Contrary to the expectations, there was no significant predictive effect of PM on SV, nor a significant correlation among them. Also, a non-significant correlation was noted among the PM and IS. Yet, the present results must be interpreted with caution considering some methodological issues (see below).

Hypothesis 8-Positive Masculinity & Pathway Model

The eighth hypothesis was mainly supported since PM correlated negatively with almost all clinical symptoms (Social/Intimacy deficits, Attitudes supporting violence and Emotional dysregulation), except Deviant sexual arousal with which no significant correlation was noted. Also, the potential moderating role of PM either in the Pathway Model or in the CM was not supported. In this sense, according to the community sample investigated, the protective function of PM was not evident. This finding opposes the notion that the lack of negative attitudes regarding females constitutes a protective factor against SV (Blake & Gannon, 2014; McDermott et al., 2015; Ryan, 2004) and that attitudes supporting equality could counteract risk factors (Abbey et al., 2011). In this sense, one might suggest that the reversed aspect (i.e., PM) of a risk factor (i.e., HM) does not necessarily constitute a protective factor. In the interpretation of the current PM results, caution is needed due to its measurement method employed. The current tool, the revised PMC was created and employed in an effort to assess the PM construct, acknowledging the lack of PM scale in the literature. Therefore, it may be assumed that this scale might not evaluate the investigated construct, broadly.

Overall, while interpreting the results of the present study, it is important to bear in mind that not all SV perpetrators or males with high tendency to SV display all problems or clinical symptoms in an identical way (Ward & Siebert, 2002). Yet, acknowledging the powerful role of HM in the comprehension of SV perpetration in the present study, allows one to consider that the current sample is derived from a rape-culture. Rape cultures are conceptualized as sets of attitudes and values which support an atmosphere leading to rape, whilst they are grounded on offensive attitudes toward female and traditional gender role beliefs (Buchwald, Fletcher, & Roth, 1993).

Methodological Considerations

Exploratory Factor Analyses. Few of the scales employed in this study indicated the same psychometric features with those noted in their original versions. Therefore, a lack of unidimensionality was noted in most scales, especially in those that were employed for the first time in a Greek population (i.e., SIS, SES-SFP, CUSI, MSIS, HTW), indicating different psychometric properties. It is noteworthy that such variations are not surprising in the first adjustment of a tool (Arafat, Chowdhury, Qusar, & Hafez, 2016) and that various cultural issues should be taken into consideration as well. At this point, it is also important to highlight that the scales were standardized as part of the main study.

Lack of comfort to answer the question. The results indicate that the lack of comfort to answer is related only weakly with deviant behaviors both investigated directly and indirectly. Taking this into account, one could assume that the prevalence of the SV and the sexual deviance among other variables could be slightly higher in the population tested in the present study. This response option seems to be

useful, since a participant who does not feel comfortable to reply to some questions, either he might not respond truthfully, or he could withdraw from the study. Hence, this response option consists an effort to keep as many participants as possible in study and to protect the quality of data collected.

Social desirability and responding. According to the analyses assessing social desirability, participants who replied to a high extent regarding to what is socially desirable, also reported less SV perpetration history. Similarly, participants with higher social desirability reported less RP, than participants characterized by lower social desirability. It is noteworthy that RP is considered an indirect way of assessing SV. Interestingly, no statistically significant relationships were noted in the sexual video duration measure, which one could consider as a more “hidden” way of assessing the sensitive topic of SV. It seems that the SV paradigm is not differentiated by social desirability responding in any way.

Strengths, Limitations, and Future directions

Overall, according to the results, the models encompassing the behavioral index of sexual video duration, indicated better model fit. It seems that this index constitutes one of the strengths of the present study. Future studies are encouraged to apply such methodology, which overcomes the limitations of self-report measures.

Another strength of the present study is the application of a very powerful multivariate technique (Gunzler et al., 2013), i.e., SEM, for the investigation of the hypothesized models. This technique provides an estimation of the errors in contrast to the typical analyses of interactions among explanatory variables (i.e., moderated regression with observed variables), that have low power (Busemeyer & Jones, 1983). Yet, one might question that some latent variables (i.e., Social/Intimacy

deficits) in the present study did not have sufficient number of indicators (Kline, 2011). Therefore, future studies are encouraged to employ at least three or four indicators per latent factor. Also, about the multi-group analyses conducted in the present study, a consideration regarding the limited number of participants in each group is underlined. Hence, future studies are advised to use bigger sample size, that provides stronger statistical stability among estimates (Kline, 2011).

Another consideration regards the measurement of the IS construct, while for this crucial construct only two items were used, aiming to follow the primary studies of CM, as much as possible (Malamuth et al., 1995). However, it would be preferable in the latent environment of SEM to investigate the IS composite through employing a different methodology via a scale or scales. Also, it is noteworthy that as the number of items rises, non-normal distributions turn to more normally distributed, and at the same time, a more comprehensive and broader illustration of a construct is drawn (Little et al., 2002). Furthermore, one could underline that the IS indicators are both retrospective and pertain to immutable aspects of a participant's personal history and that it is difficult to understand any mediating effects on current attitudes or clinical symptoms. In addition, the non-significant or low correlations of the IS indicators with the remaining study variables are underlined. Future studies are encouraged to use a different way of assessing the IS construct and rely on more context-sensitive indicators; perhaps, an attitudinal scale employed by previous studies (Positive Attitudes about casual sex from Sexual Permissiveness scale; Hendrick, Hendrick, & Reich, 2006; used in Abbey et al., 2011).

Even though the SES-SFP is often regarded as the gold standard for assessing SV perpetration, various scoring systems are noted (i.e., Swartout, 2013; categorical factors, Wiscombe, 2012) in the absence of a common scoring method, which limits

the comparison among studies. Estimating frequencies is preferred in contrast to the conventional rating tactics of yes or no. Also, similarly to the Davis and colleagues' (2014) considerations, in the case that a participant perpetrated a specific occasion more than three times, the measure did not permit estimation of actual number of times the event had occurred. Furthermore, it is underlined that every quantitative rate of SV severity, inevitably, cannot completely capture the fluctuation and differences indicated in SV occurrences (Davis et al., 2014).

Moreover, there was a constraint regarding the lack of specific cut-off scores in some of the used tools (i.e., SIS). The cut-off scores were necessary, since a non-clinical/incarcerated sample was employed in the present study. From a methodological aspect, the norms of each tool are essential to enhance the accuracy of how a participant's score would associate to the scores of the remainder population (Field, 2009).

Taking into the consideration that composite variables noted the strongest correlations first with RP score, then with SES-SFP and lastly with the sexual video duration, this comes in accordance with the order of these scales completion in the present study (first RP, next SES-SFP, and last SV paradigm). One could consider that the order of completion of the questionnaires might play a role in this procedure and that these findings are not at random. Future studies could investigate this notion by counterbalancing the order of the completion of the questionnaires assessing SV.

Even though the protective role of PM was not apparent in the present study, more studies are needed to investigate its role, using a different methodology. Since, in the present study measurement issues could have contributed to the non-supportive

moderating effects observed. Overall, PM remains an unexploited issue, which requires further attention in literature.

Concerning the on-line nature of the study, one might support that the data collection was not conducted under strict controlled conditions, since it was only up to participants to decide whether they met the inclusion criteria or not to take part. Taking into consideration that some participants indeed took part in the study, without fulfilling the inclusion criteria (i.e., age, gender), it would be useful for future studies to employ stricter and more controlled conditions of data collection. Perhaps, a screening measure that clarifies who can take part in the survey and permitting them to participate in the study, can be applied.

In addition, participants who took part in the study, as basic requirement had internet access and basic knowledge of computer use. It may be argued that current participants had “advanced” skills of technology use, and that males who do not hold such skills and could not have taken part in the study may have different characteristics. Thus, the results of the present study could not be generalized to other male groups.

Also, another consideration can be noted regarding the present participants, who voluntarily (without any profit) took part in this study that lasted around 40 minutes. One could assume that some of these males might have high empathy skills, were able to understand the importance for a researcher to find participants and were willing to participate. In this procedure and according to research findings empathy mediates volunteering (Fakouri, Zucker, & Fakouri, 1991), and extending this, could mediate their voluntary participation in the study. Furthermore, in the interpretation of the present results and the prevalence of SV, it is important to keep in mind that

empathy constitutes a protective factor of SV perpetration (Casey & Masters, 2017) and could have affected the results, at some point. Future studies are encouraged to investigate the role of empathy as well; specifically, the rape empathy, a specific aspect of empathy towards victims of rape (Osman, 2011).

In addition, given that the participants did not receive any compensation, one could highlight that the length of the survey may have caused fatigue, which may have potentially reduced the quality of their responses. Future studies that will include a large number of questions should randomize the order of the scales' administration to ensure that fatigue effects would be spread randomly across the various scales.

The cross-sectional nature of the present study and the simultaneous assessment of antecedents, mediators, and outcome variables, underline the need of a longitudinal analysis in future investigations. It is noted that cross-sectional methodology does not allow for definitive inferences concerning the assumed causal paths (Hardit, 2012). Yet, a longitudinal type of analysis permits the evaluation of whether alterations in the mediator are more likely to be noted before the alterations in the outcome. This investigation of the chronological aspect of alteration over time, provides more precise conclusions about mediation (latent growth modeling; MacKinnon, 2008).

Even though the present study employed a community sample of men, it would be interesting for future studies to employ two samples, one community and one incarcerated sample, to investigate the differences among the two groups (both in measurement and structural aspects of the models). Furthermore, useful comparisons can be conducted among age groups, via a wider age range of sample; considering

that most studies were conducted either to student or to incarcerated samples. This comparison would help the prevention campaigns focus on specific risk factors for each age groups and hence, contribute to their effectiveness. In addition, future studies could combine quantitative and qualitative methodologies, which will allow further investigation especially in the cases with high rape tendency or history of SV perpetration.

Finally, taking into consideration that the present study investigated concepts beyond the clinical symptoms, such as masculinity/societal factors, it would be interesting for future research to investigate the dynamics that lie in SV from females toward males. In addition, the assessment of both clinical symptoms and masculinity/femininity aspects in more diverse samples with different sexual orientation, like homosexual males and females, could provide literature with a more profound understanding of this phenomenon.

Theoretical and Practical Importance

The theoretical importance of the present study lies to the contribution of a more comprehensive understanding of factors that affect the likelihood of SV among community males. The multivariate evaluation of clinical symptoms in HM and IS offers an exceptional chance to acknowledge (and then focus on) changeable mechanisms of SV. This evaluation permits prediction of SV, which is of enormous significance (Hardit, 2012). Mediation analysis conducted, provides deep comprehension regarding the mechanisms of action (Gunzler, Chen, Wu, & Zhang, 2013).

The present findings shed some light to the role of Deviant sexual arousal, Attitudes supporting violence, and Emotional dysregulation in the process of SV

perpetration in a non-clinical group of males. Overall, asking the question why males become sexual perpetrators, my theoretical suggestion is that it is a phenomenon that can be strongly explained by the hostile attitudes towards women mediating other effects. The present study underlines the crucial role of HM, as the most powerful risk factor for SV perpetration, and strongly supports the notion that males will not perform SV acts without compatible attitudes.

The present results can considerably inform assessment, prevention, and intervention. The present deeper comprehension of the mechanisms by which clinical symptoms and HM impact SV may benefit at some level the development of prevention and intervention programs for at-risk males and get closer to a decrease of SV. Prevention efforts could be enriched with the appropriate factors from the identification of at-risk males. Thus, it seems that the apparent mediating role of HM, could contribute to the identification of alternative and perhaps more efficient targets for prevention. At this point, future studies are needed. Regarding assessment, it seems that it might be most fruitful in creating tools focusing on the hostile masculine attitudes towards females, for the identification of individuals at elevated risk of SV.

Bear in mind that interventions could focus on the training of adaptive and healthy emotional regulation strategies, and generally enhance the affective control. Yet, taking into consideration the mediating effect of HM on this procedure and the lack of significance of emotional dysregulation in the unified model in the present study, it would be extremely useful and effective for campaigns and interventions to focus mainly on the hostile masculine attitudinal aspect. In fact, how dominant a male considers his role against a female, how he conceptualizes the sexual encounter and how strong is his drive to control his partner, how manipulative or adversarial he regards a sexual relationship, how angry or hostile he is towards females, etc. These

are aspects worth investigating and intervening both in clinical practice and in risk assessment of SV perpetration.

The present study comes to agreement with Polaschek and Ward (2002) notion that the comprehension of males' precise cognitive distortions is essential for intervention programs. Therefore, cognitive interventions are suggested for males with elevated risk of SV perpetration, which aim at changing attitudes, challenging cognitive distortions regarding rape, managing emotional conditions, and evolving adaptive cognitive processes (Marshall, Marshall, Serran, & Fernandez, 2006; Yates, Prescott, & Ward, 2010). A cognitive intervention focuses both on dynamic risk factors (i.e., rape myths) and on risk factors of offending (i.e., general criminal attitudes; Hanson & Yates, 2004). This type of intervention comes in accordance with the present findings highlighting the importance of both specific beliefs about rape and general attitudes supporting violence. Simultaneously, it is highlighted that each intervention program needs to be responsive to the features and deficits of each perpetrator (Yates, 2013).

Moreover, taking into consideration the demographic characteristics of males reported SV perpetration in the present study, the need for prevention strategies in all social layers and fields is underlined. Bearing in mind that the most common tactic for SV perpetration in the present study was verbal coercion, prevention efforts could focus on psychoeducation about which forms it can take. One could consider that it would be useful for psychoeducation to take place in both sides of SV, both in perpetrators and victims. Underlying the prevalence of SV among partners, it might be assumed that some victims perhaps do not recognize that they are indeed victims of SV.

Concluding Comments

The present study constitutes an effort to assess in a unified way both the hostile and positive aspects of masculinity in SV perpetration. The CM was partly replicated in the present online community sample of males. The role of clinical symptoms of the Pathway Model has been clarified, indicating either non-significant direct effect (i.e., Social/Intimacy deficits) or the fully mediating effect of HM on this procedure (Attitudes supporting violence, Emotional dysregulation). The moderating roles of IS and Deviant sexual arousal were not clear. Overall, the crucial role of HM is strongly underlined. Future studies are encouraged to apply similar multi-factorial tactics for the investigation of risk and protective factors of SV and investigate both their mediating and moderating effects.

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APPENDICES

APPENDIX A

Table A1

Order of questionnaires completed by participants

Order	Questionnaire
1.	Marlowe Crowne Social Desirability Scale
2.	Miller Social Intimacy Scale
3.	Short form of Revised UCLA Loneliness Scale
4.	Adversarial Sexual Beliefs
5.	Acceptance of Interpersonal Violence
6.	Rape Myth Acceptance
7.	A revised version of Hostility Toward Women Scale
8.	Modified Positive Masculinity Checklist
9.	Short form Aggression Questionnaire
10.	Coping Using Sex Inventory
11.	Short form of Barratt Impulsiveness Scale
12.	Impersonal Sex Items
13.	Sexual Dominance Scale
14.	Rape Proclivity Scale
15.	Sexual Interest Cardsort Questionnaire
16.	Sexual Experiences Survey - Short Form Perpetration
17.	Laboratory SV Paradigm
18.	Female's Partner Reaction
19.	Suspicion Probes
20.	Demographics

APPENDIX B

Sexual Violent Paradigm as presented in the present study

During this behavioral analogue paradigm, participants were informed that they were going to interact online with a counterfeit feminine associate regarding a film activity. They were informed that their feminine associate distastes sexual movies and then, they had the choice to send her a sexual or nonsexual (cooking) video, with a maximum duration of 120 seconds. Two variables specified SV: the choice of sexually overt video, and the length of the video, which presents a continuous evaluation of SV intensity. It is noteworthy that participants did not watch any video; however, they did review two sets of still images. Then, participants replied to eight items, which examined their beliefs regarding how their female partner would respond to the video clip that they sent her. Lastly, participants responded about their suspicions concerning the study. The Greek adaptation of the Sexual Violent Paradigm is presented below, as this was displayed in the present study.

Όπως έχεις διαβάσει στο έντυπο συγκατάθεσης, ορισμένα άτομα στην έρευνα συμμετέχουν σε ζευγάρια και επικοινωνούν με ένα διαδικτυακό συνεργάτη. Έχεις επιλεγεί για να συμμετέχεις με ένα συνεργάτη, έτσι θα αλληλεπιδράσεις με ένα άλλο ενήλικο άτομο που συμμετέχει στην έρευνα.

Ακόμη, κάποια άτομα τυχαία έχουν ανατεθεί να συνεργαστούν με άτομο του ίδιου φύλου και κάποια άλλα με άτομο του αντίθετου φύλου. Έχεις επιλεγεί να συνεργαστείς με άτομο του αντίθετου φύλου που λαμβάνει ταυτόχρονα μέρος στην έρευνα.

Εσύ και ο συνεργάτης σου θα συμμετέχετε σε μια δραστηριότητα σχετικά με τις προτιμήσεις ταινιών και μέσων ενημέρωσης. Πρώτα, θα απαντήσετε και οι δύο κάποιες ερωτήσεις σχετικά με τις προτιμήσεις σας. Τότε, σύμφωνα με τις απαντήσεις σας, ο Η/Υ θα δημιουργήσει περίληψεις των προτιμήσεων σας και θα τις στείλει στον άλλο. Δηλαδή, θα λάβεις περίληψη των προτιμήσεων του συνεργάτη σου σχετικά με τις ταινίες και αυτός θα λάβει περίληψη των δικών σου προτιμήσεων. Αφού απαντήσεις την έρευνα των μέσων ενημέρωσης, παρακαλούμε να περιμένεις μερικά λεπτά για να λάβεις την περίληψη του συνεργάτη σου.

Ανάλογα με το πόσα άτομα έχουν αποδεχθεί και λαμβάνουν ταυτόχρονα μέρος στην έρευνα, καθώς και καθυστερήσεις στο διαδίκτυο και διαφορετικούς χρόνους απόκρισης, μπορεί να χρειαστεί να περιμένεις εώς και ένα λεπτό για να ζευγαρωθείς με έναν άλλο συμμετέχοντα. Σε ευχαριστούμε για την υπομονή σου.

1. Παρακαλώ γράψε ένα ψευδώνυμο που θα ήθελες να φαίνεται όταν αλληλεπιδράσεις με τον άλλο συμμετέχοντα:

Στη συνέχεια, θα δεις εικόνες από δύο αποσπάσματα ταινιών μαζί με μια σύντομη περιγραφή της σκηνής. Σε παρακαλώ διάβασε ολόκληρη την περιγραφή και κοίταξε κάθε εικόνα.



Περιγραφή αποσπάσματος ταινίας 1:

Στα πρώτα 10 δευτερόλεπτα αυτού του αποσπάσματος, ένας άνδρας και μια γυναίκα συναντιόνται στο σπίτι ενός φίλου. Ο άνδρας αναγνωρίζει τη γυναίκα ως μια γνωστή συγγραφέα και καταφεύγουν σε ένα κοντινό ξενοδοχείο. Το υπόλοιπο του αποσπάσματος περιλαμβάνει πολύ σύντομα προκαταρκτικά ερωτικά παιχνίδια που γρήγορα οδηγούν σε μια μακρά παρατεταμένη περίοδο αμοιβαίου στοματικού σεξ και σεξουαλικής επαφής σε πολλές στάσεις.



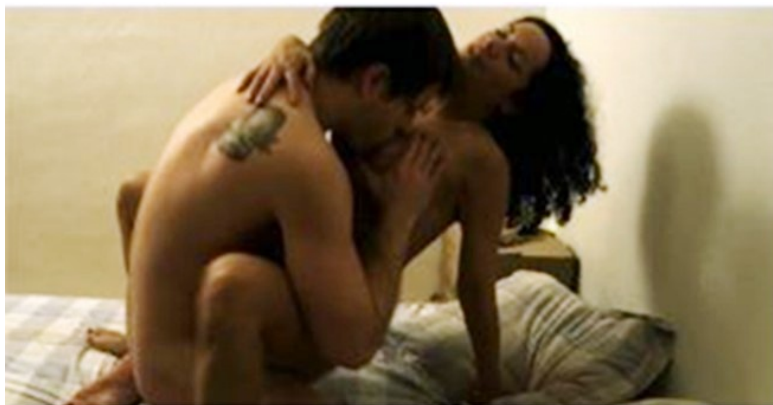
Περιγραφή αποσπάσματος ταινίας 2:

Στα πρώτα δέκα δευτερόλεπτα αυτού του αποσπάσματος, ένας άντρας και μια γυναίκα συναντιόνται σε ένα ξενοδοχείο. Ο άντρας, ένας σεφ, γρήγορα αναγνωρίζει τη γυναίκα ως μια πολύ γνωστή κριτικός εστιατορίων και την καλεί να μαγειρέψουν μαζί στην κουζίνα του ξενοδοχείου. Το υπόλοιπο του αποσπάσματος περιλαμβάνει αυτοί οι δύο να μοιράζονται μαζί τις αγαπημένες τους συνταγές, καθώς μοιράζονται ιστορίες και μαγειρεύουν.

Στην έρευνα, ο ένας συνεργάτης επιλέγει ένα απόσπασμα ταινίας για να δει ο άλλος συμμετέχοντας. Εσύ έχεις τυχαία ανατεθεί να επιλέξεις το απόσπασμα ταινίας, αυτό σημαίνει ότι εσύ δεν θα δεις ένα απόσπασμα ταινίας. Σε παρακαλώ επέλεξε ένα από τα δύο αποσπάσματα για να στείλεις στον άλλο συμμετέχοντα, την Eleana_5. Βεβαιώσου ότι το απόσπασμα που θα επιλέξεις είναι το απόσπασμα που εσύ θέλεις ο άλλος συμμετέχοντας, η Eleana_5, να δει.

Παρακαλώ επέλεξε είτε την επιλογή αποσπάσματος 1 ή 2 για να στείλεις στον άλλο συμμετέχοντα.

Απόσπασμα ταινίας 1



Απόσπασμα ταινίας 2



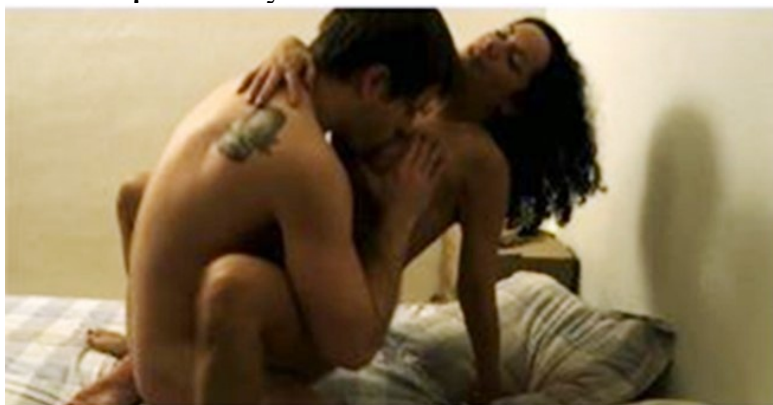
1. Παρακαλώ επέλεξε είτε την επιλογή αποσπάσματος 1 ή 2 για να στείλεις στον άλλο συμμετέχοντα.

- Απόσπασμα ταινίας 1**
- Απόσπασμα ταινίας 2**

Ο συνεργάτης σου θα δει το απόσπασμα ταινίας που έχεις επιλέξει. Ακόμη, μπορείς να επιλέξεις για πόσο διάστημα θα ήθελες ο συνεργάτης σου να παρακολουθήσει το απόσπασμα. Μπορείς να επιλέξεις να δει όλο το απόσπασμα που επέλεξες (120 δευτερόλεπτα), ή μπορείς να μοιράσεις τον χρόνο για τα δύο αποσπάσματα.

Παρακαλώ σημείωσε για πόσο θα ήθελες ο συνεργάτης σου να παρακαλουθήσει το επιλεγόμενο απόσπασμα ταινίας. Εάν επιλέξεις 120 δευτερόλεπτα, τότε ο συνεργάτης σου θα παρακαλουθήσει όλο το απόσπασμα ταινίας που έχεις επιλέξει. Εάν επιλέξεις άλλο ποσό ΛΙΓΟΤΕΡΟ ΑΠΟ 120 δευτερόλεπτα, ο συνεργάτης σου θα παρακολουθήσει το ΑΛΛΟ (μη-επιλεγμένο) απόσπασμα για το υπόλοιπο του χρόνου (για ένα συνολικό χρόνο παρακολούθησης τα 120 δευτερόλεπτα). Η συνολική διάρκεια που θα επιλέξεις δεν μπορεί να υπερβαίνει τα 120 δευτερόλεπτα, όμως μπορείς να μοιράσεις αυτό τον χρόνο όπως θέλεις.

Απόσπασμα ταινίας 1



Απόσπασμα ταινίας 2



2. Σε παρακαλώ επέλεξε για πόσο θα ήθελες ο άλλος συμμετέχοντας να δει το επιλεγόμενο απόσπασμα ταινίας (0 μέχρι 120 δευτερόλεπτα).

Για πόσο θα ήθελες ο άλλος συμμετέχοντας να δει τα αποσπάσματα ταινίας ;

0 δευτερόλεπτα του ΕΠΙΛΕΓΟΜΕΝΟΥ αποσπάσματος ταινίας/120 δευτερόλεπτα του μη- επιλεγόμενου αποσπάσματος	60 δευτερόλεπτα του ΕΠΙΛΕΓΟΜΕΝΟΥ αποσπάσματος ταινίας/60 δευτερόλεπτα του μη- επιλεγόμενου αποσπάσματος	120 δευτερόλεπτα του ΕΠΙΛΕΓΟΜΕΝΟΥ αποσπάσματος ταινίας/0 δευτερόλεπτα του μη- επιλεγόμενου αποσπάσματος
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APPENDIX C

Pilot Study

An online community sample of 15 heterosexual males (Mage = 29.53) who have had dating experiences in some point in the past, was recruited in the preliminary study. The Greek versions of the scales demonstrated satisfying Cronbach α index, ranging from .63 to .99, apart from SES-SFP (Koss et al., 2006; $\alpha = .00$) that demonstrated zero variance items. Specifically, $\alpha = .90$ for Rape Proclivity Scale (Bohner et al., 1998; Bohner et al., 2006), $\alpha = .77$ for ASB (Burt, 1980), $\alpha = .84$ for HTW (Check, 1985), $\alpha = .88$ for SDO (Nelson, 1979), $\alpha = .66$ for AIV, $\alpha = .63$ for RMA (Burt, 1980), $\alpha = .80$ for CUSI (Cortoni & Marshall, 2001) and for BIS-11 (Spinella, 2007), $\alpha = .81$ for AQ (Bryant & Smith, 2001), $\alpha = .92$ for MSIS (Miller & Lefcourt, 1982), $\alpha = .86$ for the revised UCLA Loneliness Scale (Hughes, Waite, Hawkey, & Cacioppo, 2004), and Cronbach α ranging from .56 to 1 for the subscales of SIS (Holland et al., 2000). It is noteworthy that in the pilot study the Brief Social Desirability Scale (BSDS; Haghigat, 2007; 4 items) was used demonstrating not satisfying α ($\alpha = -.24$) and it was not included in the final study. The MCSDS (Crowne & Marlowe, 1960; He et al., 2015) was preliminary tested with satisfying α ($\alpha = .64$) and was chosen to be included in the final study.

Three participants (1/5 of the participants) have reported SV acts in SES-SFP and six participants (more than 1/3) were SV during the laboratory paradigm. Correlation matrices demonstrate some moderate to high significant correlations among composite variables, ranging from .53 to .82. Specifically, HM – Attitudes supporting violence, $r = .82$, $p < .01$; Emotional dysregulation – IS, $r = .55$, $p < .05$; Emotional dysregulation – Social/intimacy deficits, $r = .53$, $p < .05$; HM – RP, $r = .55$, $p < .05$; and also, RP – SV composite, $r = .65$, $p < .01$. Last, the pilot study did not provide enough information to indicate predictive relationships.

APPENDIX D

Table D1

Factor loadings of the 8 items of Female Partner Reaction Scale (FPR) (N = 315).

Item	Factor Loading
1. I chose the clip that my partner would prefer	.82
2. I chose the clip that I would prefer	-.40
3. I chose the clip because I believed my partner would enjoy watching it	.71
4. I chose the clip that was most in line with my partner's media preferences	.76
5. I chose a clip that I did not think my partner would really like	-.57
6. My female partner likes the video I showed	.69
7. My female partner is uncomfortable with the video I showed	-.74
8. My female partner is upset with the video I showed	-.78

Note. 315 participants were used in the Factor Analysis since 61 participants from the whole sample chosen to delete their responses in the SV paradigm and additionally 13 participants were excluded from further analyses as they replied “definitely yes” in the deception question.

Table D2

Factor loadings of the 14 items of Marlowe Crowne Social Desirability Scale (MCSDS) (N = 421).

Item	Factor Loading
1. I think about my options before I make a choice	-.35
2. I help others in trouble	-.50
3. I continue with my work if I am motivated	-.25
4. I have doubts about my ability to succeed in life	.13
5. I am satisfied when I get my way	.36
6. I am careful about my way of dressing	-.20
7. I gossip	.48
8. I am a good listener	-.56
9. I forgive others for their wrongdoings	-.45
10. I admit when I do not know something	-.42
11. I do things my way	.31
12. I let someone else be punished for my wrongdoings	.52
13. I am irritated by people who ask favors	.38
14. I say things that hurt others' feelings	.60

Table D3

Frequencies of answer 'I do not feel comfortable to answer this question' in Social Dominance (SD), Sexual Interest Cardsort (SIS), and Sexual Experience Survey (SES-SFP) scales (N = 421).

Item	Frequency (%)
<i>Social Dominance Scale</i>	
Because I like the feeling that I have someone in my grasp	9 (2.1%)
Because like many people I enjoy the conquest	9 (2.1%)
Because it makes me feel masterful	3 (0.7%)
Because I like the feeling of having another person submit to me	3 (0.7%)
Because I like teaching less experienced people how to get off	3 (0.7%)
Because in the act of sex more than at any other time I get the feeling that I can really influence how someone feels and behaves	5 (1.2%)
Because I like it when my partner is really open and vulnerable to me	2 (0.5%)
Because when my partner finally surrenders to me I get this incredibly satisfying feeling.	2 (0.5%)
<i>Sexual Interest Cardsort Questionnaire</i>	
I feel my partner on top of me, with her knees holding my hips. She is moving up and down on my dick.	15 (3.5%)
I'm lying on top of my partner. She is digging her hands into my back, lifting her ass up. She is really excited.	15 (3.5%)
My partner and I are in the bathtub. She is sitting between my legs, leaning her back against me. I'm playing with her tits.	12 (2.8%)
I see two good-looking 22-year-old girls walking down the street. I drive slowly by with no clothes on, rubbing my penis. I get excited as they look at me with disbelief.	10 (2.4%)
I am following a nicely built blonde, 18-year-old girl down the stairs at school. I take my dick out, holding my books in front of it and begin to beat it. As I follow her, I feel it get hard.	10 (2.4%)
I'm standing naked beside the car. A 20-year-old girl in a bikini is coming from the swimming pool. I feel my hard penis in my hand as she sees me and looks shocked.	8 (1.9%)

It's packed in the train and I've pinned a woman up against the people in front of her. I'm rubbing her ass with my hands. She tells me to stop. She can't get away from me. I just keep rubbing her. 9 (2.1%)

I'm following a woman off the subway train. I move in right behind her as she waits for the next train. The crowd moves forward onto the next train. I start to rub her ass from behind. 4 (0.9%)

I've pulled an attractive woman to the ground. I've pulled her panties off. I'm forcing my penis in her. She is screaming. 5 (1.2%)

I've forced my way into an apartment. I've forced a brunette to take off her clothes. I'm raping her. 2 (0.5%)

An attractive woman looks surprised as I tell her I'm going to rape her. I make her undress and put my dick between her legs as I hold her down. 3 (0.7%)

I'm holding a burning cigarette butt against the big tits of a 30-year-old brunette. She's screaming for me to stop. 3 (0.7%)

I have a woman spread eagled on the floor. I'm torturing her, burning her fingertips. 3 (0.7%)

I've got a young woman tied down in the woods. I'm sticking needles into her vagina. She is screaming with terror. 3 (0.7%)

Sexual Experience Survey – Short Form Perpetration

SES1a 22 (5.2%)

SES1b 18 (4.4%)

SES1c 17 (4%)

SES1d 14 (3.3%)

SES1e 16 (3.8%)

SES2a 10 (2.4%)

SES2b 10 (2.4%)

SES2c 10 (2.4%)

SES2d 9 (2.1%)

SES2e 10 (2.4%)

SES3a 12 (2.9%)

SES3b 13 (3.1%)

SES3c 13 (3.1%)

SES3d 12 (2.9%)

SES3e	12 (2.9%)
SES4a	12 (2.9%)
SES4b	11 (2.6%)
SES4c	11 (2.6%)
SES4d	10 (2.4%)
SES4e	10 (2.4%)
SES5a	9 (2.1%)
SES5b	8 (1.9%)
SES5c	8 (1.9%)
SES5d	6 (1.4%)
SES5e	7 (1.7%)
SES6a	11 (2.6%)
SES6b	8 (1.9%)
SES6c	9 (2.1%)
SES6d	6 (1.4%)
SES6e	9 (2.1%)
SES7a	9 (2.1%)
SES7b	8 (1.9%)
SES7c	9 (2.1%)
SES7d	7 (1.7%)
SES7e	8 (1.9%)
Did you do any of the acts described in this survey 1 or more times?	18 (4.4%)
<u>Do you think you may have you ever raped someone?</u>	<u>10 (2.4%)</u>

APPENDIX E

Table E1

Factor loadings of Rape Proclivity scale (N = 420).

Item	Factor Loading
1. In this situation, would you have done the same? -St.1	.76
2. In this situation, how much would you enjoy getting your way? -St.1	.81
3. In this situation, would you have done the same? -St.2	.79
4. In this situation, how much would you enjoy getting your way? -St.2	.80
5. In this situation, would you have done the same? -St.3	.68
6. In this situation, how much would you enjoy getting your way? -St.3	.72
7. In this situation, would you have done the same? -St. 4	.78
8. In this situation, how much would you enjoy getting your way? -St. 4	.82

Note. *St, situation

Table E2

Rotated factor loadings of Sexual Experience Survey-Short Form Perpetration (N = 420).

Item	Rotated Factor Loading					
	Factor 1	Factor 2	Factor 3	Factor 4	Factor 5	Factor 6
SES1a		.50				
SES1b						.61
SES1c				.76		
SES1d	.65					
SES1e	.63					
SES2a		.81				
SES2b			.44			
SES2c				.72		
SES2d	.74					
SES2e			.64			
SES3a		.64				
SES3b			.64			
SES3c				.79		
SES3d	.85					
SES3e	.77					
SES4a		.68				
SES4b			.57			
SES4c						.61
SES4d	.83					
SES4e	.59					
SES5a		.86				

SES5b			.70
SES5c		.70	
SES5d	.81		
SES5e	.61		
SES6a		.72	
SES6b			.72
SES6c		.68	
SES6d	.89		
SES6e	.71		
SES7a		.62	
SES7b			.80
SES7c	.60		
SES7d	.85		
SES7e	.86		

Table E3

Rotated factor loadings of Adversarial Sexual Beliefs (N = 420).

Item	Rotated Factor Loadings	
	Factor 1	Factor 2
1. A woman will only respect a man who will lay down the law to her.	.61	-.10
2. Many women are so demanding sexually that a man just can't satisfy them.	.32	.53
3. A man's got to show the woman who's boss right from the start or he'll end up henpecked.	.73	
4. Women are usually sweet until they've caught a man, but then they let their true self show.	.75	.20
5. A lot of men talk big, but when it comes down to it, they can't perform well sexually.		.91
6. In a dating relationship a woman is largely out to take advantage of a man.	.74	.21
7. Men are out for only one thing.	.49	
8. Most women are sly and manipulating when they are out to attract a man.	.79	.15
9. A lot of women seem to get pleasure in putting men down.	.66	.17

Note. Factor loadings over .40 are presented in bold.

Table E4

Rotated factor loadings of the revised version of Hostility Towards Women scale (N = 420).

Item	Rotated Factor Loading	
	Factor 1	Factor 2
1. I feel that many times women flirt with men just to tease them or hurt them.	.44	.35
2. I believe that most women tell the truth.	.76	
3. I usually find myself agreeing with women.	.64	
4. I think that most women would lie just to get ahead.	.77	.21
5. Generally, it is safer not to trust women.	.70	.37
6. When it really comes down to it, a lot of women are deceitful.	.75	.32
7. I am easily angered by women.	.34	.65
8. I am sure I get a raw deal from the women in my life.	.17	.69
9. Sometimes women bother me by just being around.		.75
10. Women are responsible for most of my troubles.		.79

Note. Factor loadings over .40 are presented in bold.

Table E5

Factor loadings of Sexual Dominance scale (N = 420).

Item	Factor Loading
1. Because I like the feeling that I have someone in my grasp.	.79
2. Because like many people I enjoy the conquest.	.78
3. Because it makes me feel masterful.	.79
4. Because I like the feeling of having another person submit to me.	.81
5. Because I like teaching less experienced people how to get off.	.70
6. Because in the act of sex more than at any other time I get the feeling that I can really influence how someone feels and behaves.	.74
7. Because I like it when my partner is really open and vulnerable to me.	.75
8. Because when my partner finally surrenders to me I get this incredibly satisfying feeling.	.75

Table E6

Rotated factor loadings of Acceptance of Interpersonal Violence (N = 420).

Item	Rotated Factor Loading	
	Factor 1	Factor 2
1. Being roughed up is sexually stimulating to many women.	.82	
2. Many times a woman will pretend she doesn't want to have intercourse because she doesn't want to seem loose, but she's really hoping the man will force her.	.82	
3. A wife should move out of the house if her husband hits her.		.77
4. Sometimes the only way a man can get a cold woman turned on is to use force.	.79	.14
5. A man is never justified in hitting his wife.	.11	.72

Note. Factor loadings over .40 are presented in bold.

Table E7

Rotated factor loadings of Rape Myth Acceptance (N = 420).

Item	Rotated Factor Loading	
	Factor 1	Factor 2
1. A woman who goes to the home or apartment of a man on their first date implies that she is willing to have sex.	.27	.63
2. Any female can get raped.	-.18	.75
3. One reason that women falsely report a rape is that they frequently have a need to call attention to themselves.	.34	.33
4. Any healthy woman can successfully resist a rapist if she really wants to.	.64	
5. When women go around braless or wearing short skirts and tight tops, they are just asking for trouble.	.73	.38
6. In the majority of rapes, the victim is promiscuous or has a bad reputation.	.71	
7. If a girl engages in necking or petting and she lets things get out of hand, it is her own fault if her partner forces sex on her.	.70	.26
8. Women who get raped while hitchhiking get what they deserve.	.68	
9. A woman who is stuck-up and thinks she is too good to talk to guys on the street deserves to be taught a lesson.	.77	
10. Many women have an unconscious wish to be raped, and may then unconsciously set up a situation in which they are likely to be attacked.		.75
11. If a woman gets drunk at a party and has intercourse with a man she's just met there, she should be considered "fair game" to other males at the party who want to have sex with her too, whether she wants to or not.	.70	.11

Note. Factor loadings for each item are appeared in bold.

Table E8

Rotated factor loadings of Coping Using Sex Inventory in four factors (N = 420).

Item	Rotated Factor Loading			
	F. 1	F.2	F. 3	F.4
1. Fantasize about having sex with a consenting adult.		.60		.49
2. Have sex with my regular partner.				.71
3. Go out and “score” with a stranger.		.13	.50	.41
4. Fantasize about forcing an adult to have sex.	.10		.81	
5. Masturbate while fantasizing about a consenting adult.		.74	.13	.38
6. Fantasize about having sex with a child.	.81		.17	-.20
7. Have sex with a child.	.79		.14	-.17
8. Masturbate while fantasizing about raping an adult.	.21	.18	.75	-.18
9. Masturbate while fantasizing about a child.	.77			
10. Masturbate while fantasizing about hurting someone.	.57	.19	.32	-.27
11. Use pornography depicting consenting adults.		.89		
12. Use violent pornography.	.19	.50	.52	-.13
13. Use pornography depicting children.	.80		.11	.24
14. Masturbate while using pornography.		.88		
15. Go out and rape someone.	.88			.15
16. Force my regular partner to have sex.	.15		.66	.15

Note. Factor loadings for each item are appeared in bold.

Table E9

Rotated factor loadings of Coping Using Sex Inventory in three factors (N = 420).

Item	Rotated Factor Loading		
	Factor 1	Factor 2	Factor 3
1. Fantasize about having sex with a consenting adult.		.72	.12
2. Have sex with my regular partner.	-.11	.28	
3. Go out and “score” with a stranger.		.23	.51
4. Fantasize about forcing an adult to have sex.	.10		.82
5. Masturbate while fantasizing about a consenting adult.		.82	.15
6. Fantasize about having sex with a child.	.83		.16
7. Have sex with a child.	.80		.13
8. Masturbate while fantasizing about raping an adult.	.24		.75
9. Masturbate while fantasizing about a child.	.77		
10. Masturbate while fantasizing about hurting someone.	.60		.31
11. Use pornography depicting consenting adults.		.84	
12. Use violent pornography.	.23	.43	.52
13. Use pornography depicting children.	.77		
14. Masturbate while using pornography.		.82	
15. Go out and rape someone.	.85		
16. Force my regular partner to have sex.			.66

Note. Factor loadings for each item are appeared in bold.

Table E10

Rotated factor loadings of short form of Barratt Impulsiveness Scale (N = 420).

Item	Rotated Factor Loading			
	Factor 1	Factor 2	Factor 3	Factor 4
1. I plan tasks carefully.	.31	.61	.13	
2. I say things without thinking	.63	.34	.16	
3. I don't pay attention.	.56	.25		-.14
4. I concentrate easily	.10	.74		.14
5. I save regularly.		.19	.77	
6. I squirm at plays or lectures.	.32			.61
7. I am a careful thinker.	.11	.61	.34	.19
8. I plan for job security	.10	.60	.36	
9. I do things without thinking.	.69	.24		.27
10. I act on impulse.	.82			.14
11. Easily bored solving thought problems.			.30	.59
12. I act on the spur of the moment.	.74		.11	.20
13. I buy things on impulse	.51	-.28	.45	.25
14. I am restless at lectures or talks		.12	-.19	.69
15. I plan for the future.		.34	.63	-.15

Note. Factor loadings for each item are appeared in bold.

Table E11

Rotated factor loadings of short form Aggression Questionnaire (N = 420).

Item	Rotated Factor Loading		
	Factor 1	Factor 2	Factor 3
1. I often find myself disagreeing with people.		.42	.14
2. At times I feel I have gotten a raw deal out of life.	.14		.82
3. I have threatened people I know.	.69	.28	
4. I wonder why sometimes I feel so bitter about things.		.42	.60
5. I have trouble controlling my temper.	.40	.67	.21
6. Some of my friends think I'm a hothead.		.70	
7. I flare up quickly but get over it quickly.	.17	.58	.10
8. Given enough provocation, I may hit another person.	.87		.13
9. I can't help getting into arguments when people disagree with me.	.63	.29	
10. Other people always seem to get the breaks.	.11	.15	.72
11. There are people who pushed me so far that we came to blows.	.82		.12
12. Sometimes I fly off the handle for no good reason.	.30	.70	.12

Note. Factor loadings for each item are appeared in bold.

Table E12

Rotated factor loadings of Miller Social Intimacy Scale (N = 420).

Item	Rotated Factor Loading		
	Factor 1	Factor 2	Factor 3
1. When you have leisure time how often do you choose to spend it with him/her alone?	.40	.19	.41
2. How often do you keep very personal information to yourself and do not share it with him/her?			.80
3. How often do you show him/her affection?	.57	.30	.22
4. How often do you confide very personal information to him/her?	.25	.21	.75
5. How often are you able to understand his/her feelings?	.63		-.11
6. How often do you feel close to him/her?	.71	.21	.34
7. How much do you like to spend time alone with him/her?	.51	.45	.38
8. How much do you feel like being encouraging and supportive to him/her when he/she is unhappy?	.66	.24	
9. How close do you feel to him/her most of the time?	.68	.15	.40
10. How important is it to you to listen to his/her very personal disclosures?	.35	.57	
11. How satisfying is your relationship with him/her?	.70		.36
12. How affectionate do you feel towards him/her?	.61	.38	.28
13. How important is it to you the he/she understands your feelings?	.30	.72	.21
14. How much damage is caused by a typical disagreement in your relationship with him/her?	.40	-.33	.17
15. How important is it to you that he/she be encouraging and supportive to you when you are unhappy?		.85	
16. How important is it to you the he/she show you affection?	.12	.86	.17
17. How important is your relationship with him/her in your life?	.41	.47	.42

Note. Factor loadings for each item are appeared in bold.

Table E13

Factor loadings of Short form of revised UCLA Loneliness Scale (N = 420).

Item	Factor Loading
1. How often do you feel that you lack companionship?	.68
2. How often do you feel left out?	.88
3. How often do you feel isolated from others?	.86

Table E14

Rotated factor loadings of Sexual Interest Cardsort Questionnaire (N = 420).

Item	Rotated Factor Loading		
	Factor 1	Factor 2	Factor 3
1. I feel my partner on top of me, with her knees holding my hips. She is moving up and down on my dick.			.80
2. I'm lying on top of my partner. She is digging her hands into my back, lifting her ass up. She is really excited.			.78
3. My partner and I are in the bathtub. She is sitting between my legs, leaning her back against me. I'm playing with her tits.			.74
4. I see two good-looking 22-year-old girls walking down the street. I drive slowly by with no clothes on, rubbing my penis. I get excited as they look at me with disbelief.	.75		
5. I am following a nicely built blonde, 18-year-old girl down the stairs at school. I take my dick out, holding my books in front of it and begin to beat it. As I follow her, I feel it get hard.	.78		
6. I'm standing naked beside the car. A 20-year-old girl in a bikini is coming from the swimming pool. I feel my hard penis in my hand as she sees me and looks shocked.	.80		
7. It's packed in the train and I've pinned a woman up against the people in front of her. I'm rubbing her ass with my hands. She tells me to stop. She can't get away from me. I just keep rubbing her.	.83		
8. I'm following a woman off the subway train. I move in right behind her as she waits for the next train. The crowd moves forward onto the next train. I start to rub her ass from behind.	.79		
9. I've pulled an attractive woman to the ground. I've pulled her panties off. I'm forcing my penis in her. She is screaming.	.68		
10. I've forced my way into an apartment. I've forced a brunette to take off her clothes. I'm raping her.	.71		
11. An attractive woman looks surprised as I tell her I'm going to rape her. I make her undress and put my dick between her legs as I hold her down.	.70		
12. I'm holding a burning cigarette butt against the big tits of a 30-year-old brunette. She's screaming for me to stop.		.66	
13. I have a woman spread eagled on the floor. I'm torturing her, burning her fingertips.		.86	
14. I've got a young woman tied down in the woods. I'm sticking needles into her vagina. She is screaming with terror.		.84	

Table E15

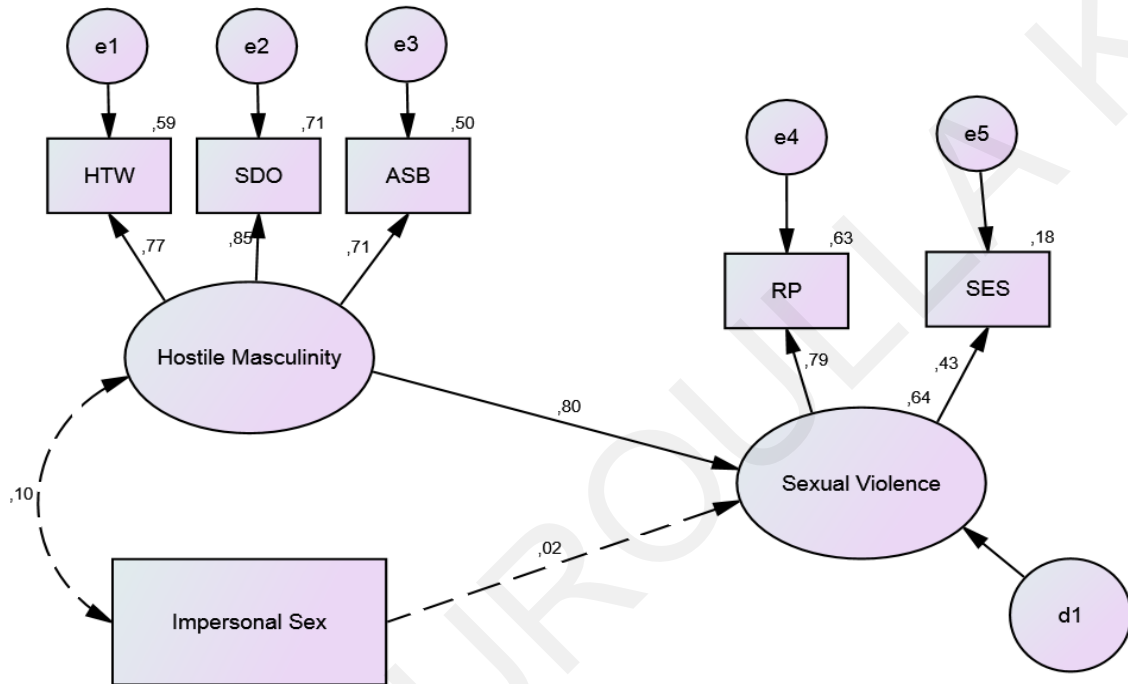
Rotated factor loadings of Positive Masculinity Checklist (N = 420).

Item	Rotated Factor Loading			
	Factor 1	Factor 2	Factor 3	Factor 4
1. Loving	.82			
2. Honest		.80		
3. Respectful		.55		
4. Loyal		.78		
5. Non-violent	.35		.43	
6. Confident				.86
7. Responsible		.30		.70
8. Believes in equality			.83	
9. Open-minded			.79	
10. Affectionate	.81			
11. Supportive	.63			.37

Note. Factor loadings for each item are appeared in bold. Only factor loadings above 0.3 are presented.

APPENDIX F

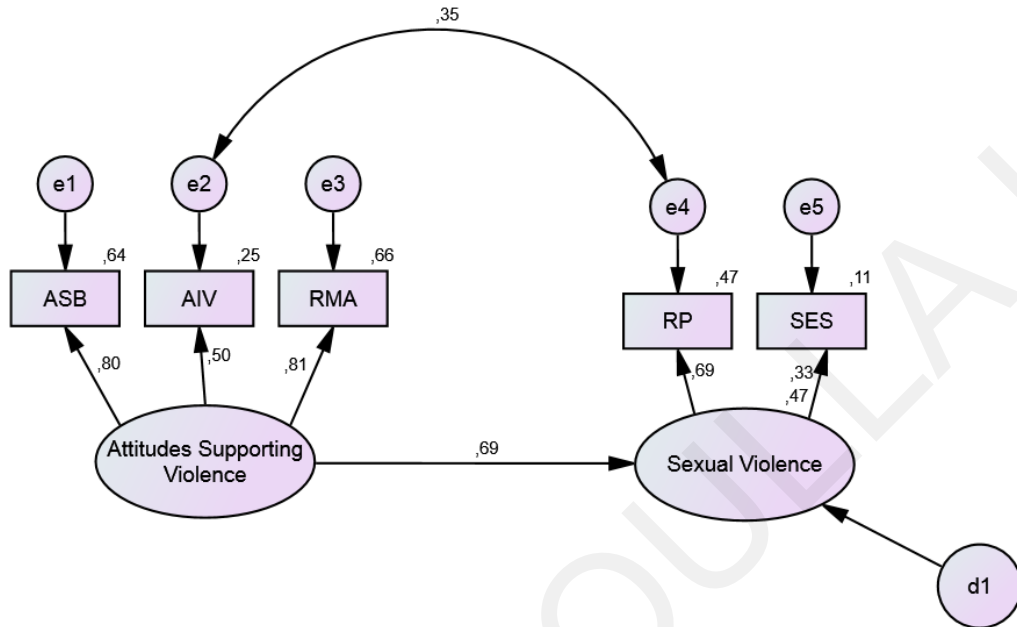
Figure F1. The replication of the Confluence Model (Malamuth et al., 1995) using an online methodology (N = 408).



$\chi^2 (7) = 11.51, p = .12, GFI = .99, CFI = .98, RMSEA = .04, LO90 = .00, HI90 = .08, pclose = .61, SRMR = .02.$

Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths.

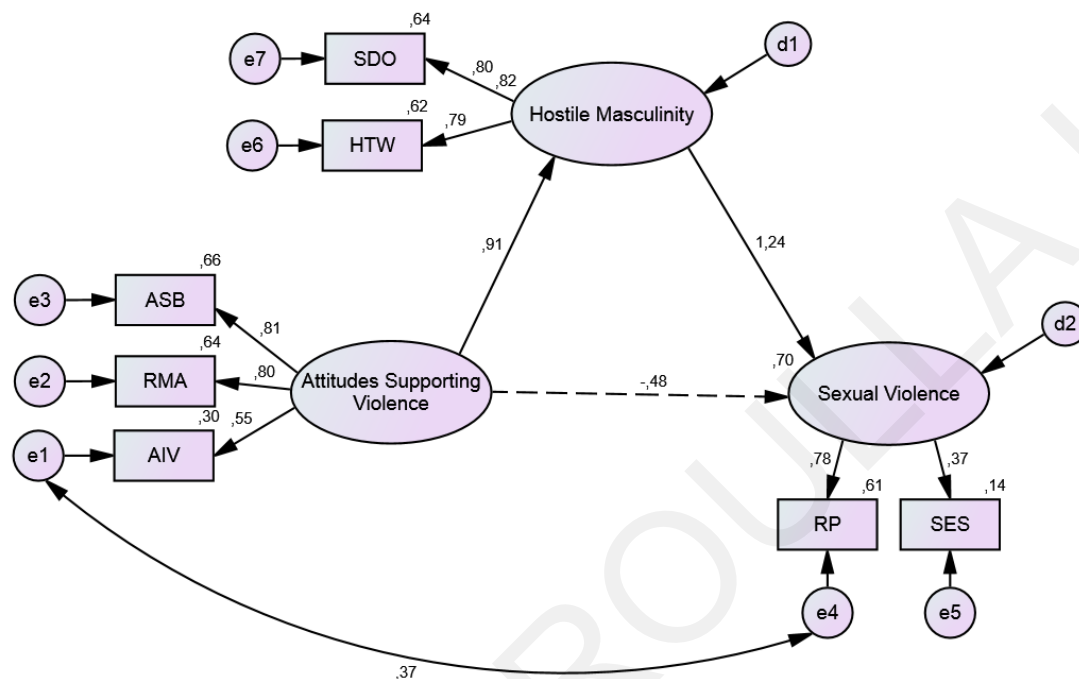
Figure F2. The examination of predictive role of Attitudes Supporting Violence construct in Sexual Violence (N = 408).



$\chi^2 (3) = 9.57, p = .02, GFI = .99, CFI = .97, RMSEA = .07, LO90 = .02, HI90 = .13, pclose = .18, SRMR = .05.$

Note. ADF estimation was performed. Standardized betas are displayed. The covariance among the AIV and RP constitutes a modification.

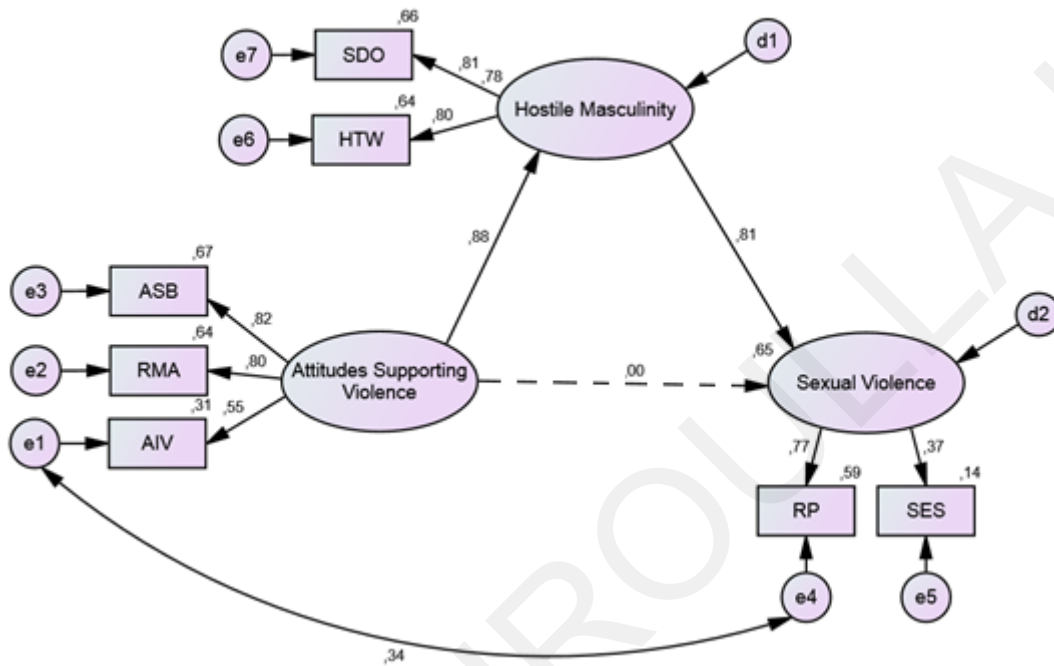
Figure F3. The addition of Attitudes Supporting Violence construct in the Confluence Model (N = 408).



$\chi^2 (10) = 23.05, p = .01, GFI = .98, CFI = .95, RMSEA = .06, LO90 = .03, HI90 = .09, pclose = .32, SRMR = .04.$

Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths. The covariance among the AIV and RP constitutes a modification. An inadmissible solution was noted in the path from HM to SV.

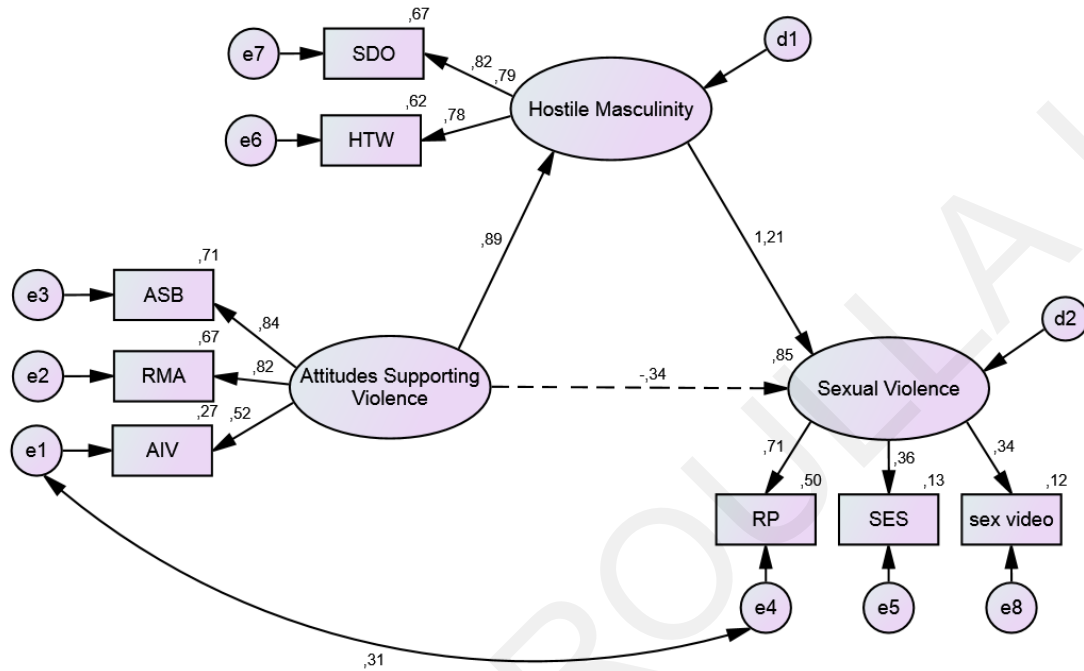
Figure F4. The addition of Attitudes Supporting Violence construct in the Confluence Model. The direct effect is constrained to zero (N = 408).



$\chi^2 (11) = 26.64, p = .01, GFI = .98, CFI = .94, RMSEA = .06, LO90 = .03, HI90 = .09, pclose = .27, SRMR = .04.$

Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths. The covariance among the AIV and RP constitutes a modification.

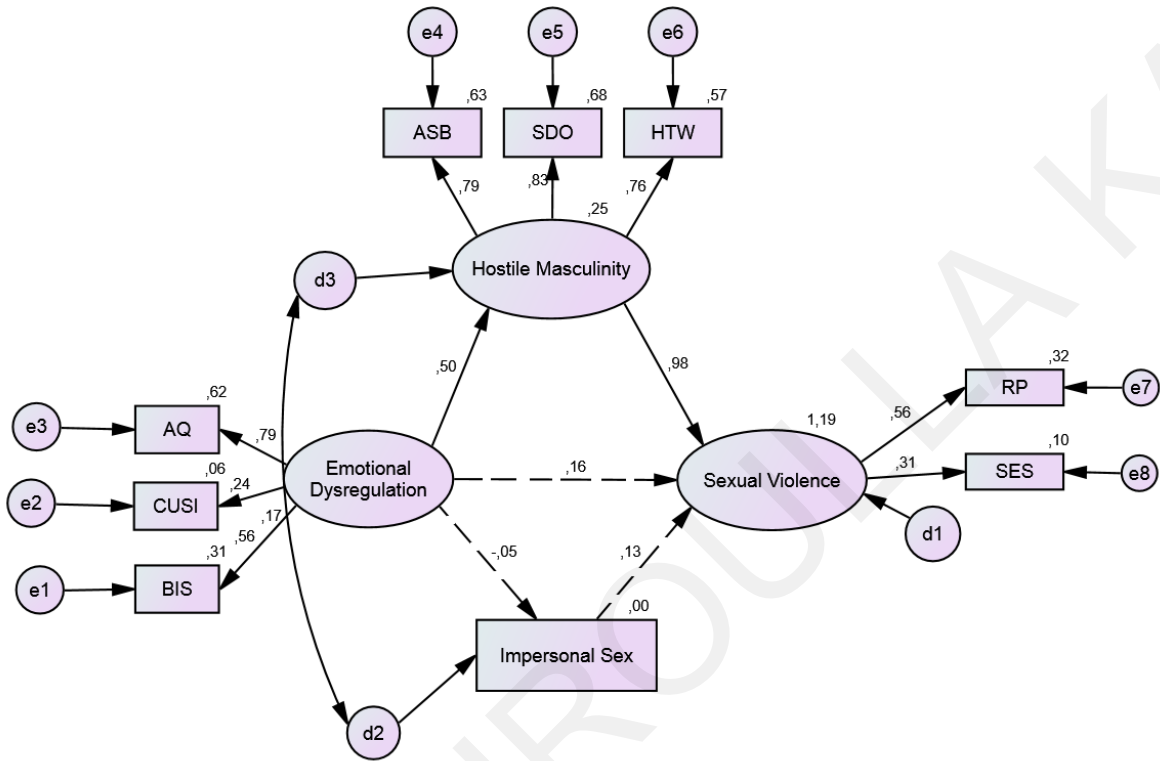
Figure F5. The addition of Attitudes Supporting Violence construct in the Confluence Model (N = 313).



$\chi^2 (16) = 23.49, p = .10, GFI = .98, CFI = .97, RMSEA = .04, LO90 = .00, HI90 = .07, pclose = .69, SRMR = .04.$

Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths. The covariance among the AIV and RP constitutes a modification.

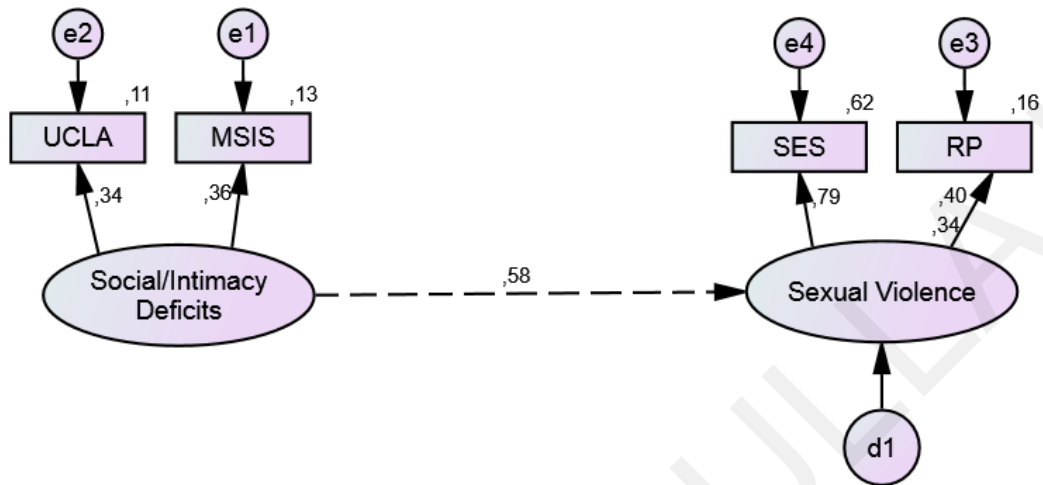
Figure F6. The addition of Emotional Dysregulation construct in the Confluence Model (N = 408).



$\chi^2 (22) = 79.17, p < .01, GFI = .95, CFI = .80, RMSEA = .08, LO90 = .06, HI90 = .09, pclose = .01, SRMR = .08.$

Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths.

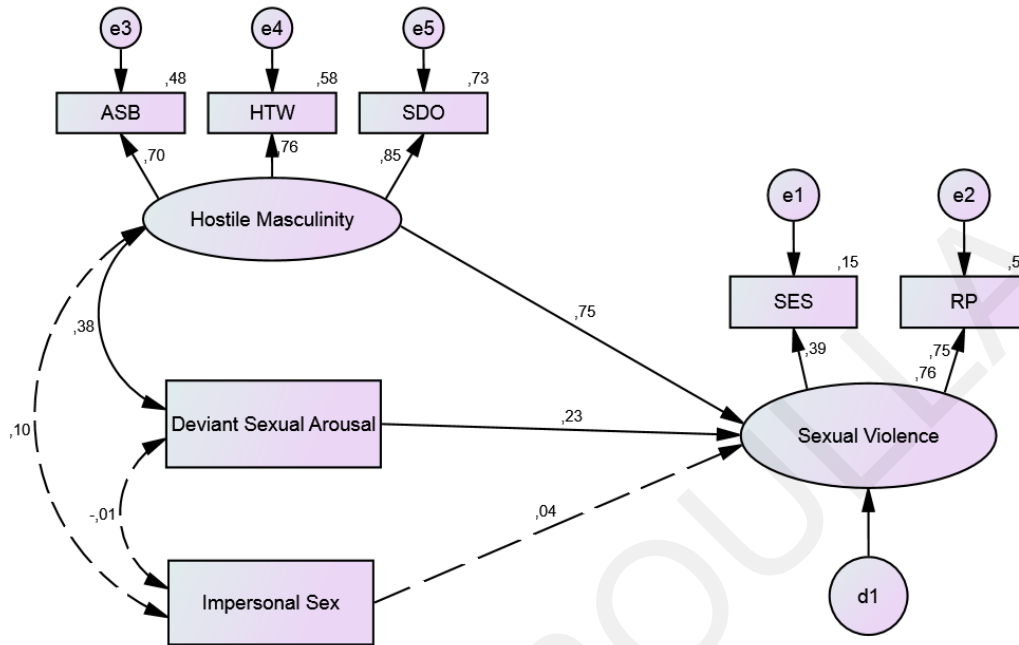
Figure F7. The examination of predictive role of Social/Intimacy deficits construct in Sexual Violence (N = 408).



$\chi^2 (1) = .10, p = .75, GFI = 1, CFI = 1, RMSEA = .00, LO90 = .00, HI90 = .09,$
 $pclose = .85, SRMR = .004.$

Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths.

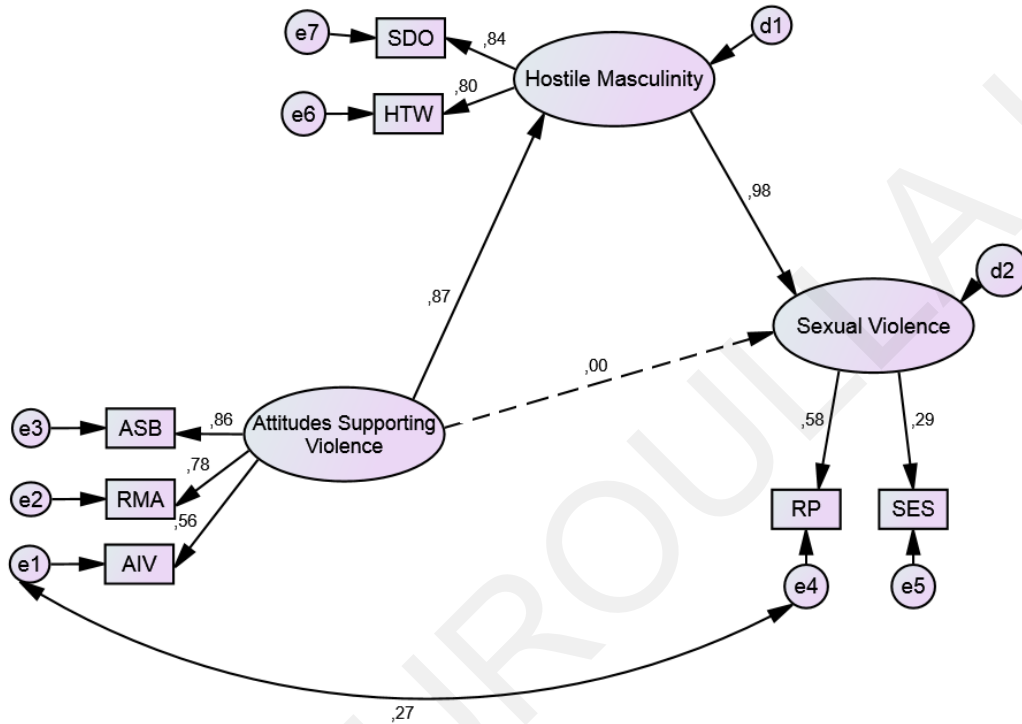
Figure F8. The addition of Deviant Sexual Arousal in the Confluence Model of Sexual Violence (N = 408).



$\chi^2 (10) = 15.34, p = .12, GFI = .98, CFI = .97, RMSEA = .04, LO90 = .00, HI90 = .07, pclose = .71, SRMR = .03.$

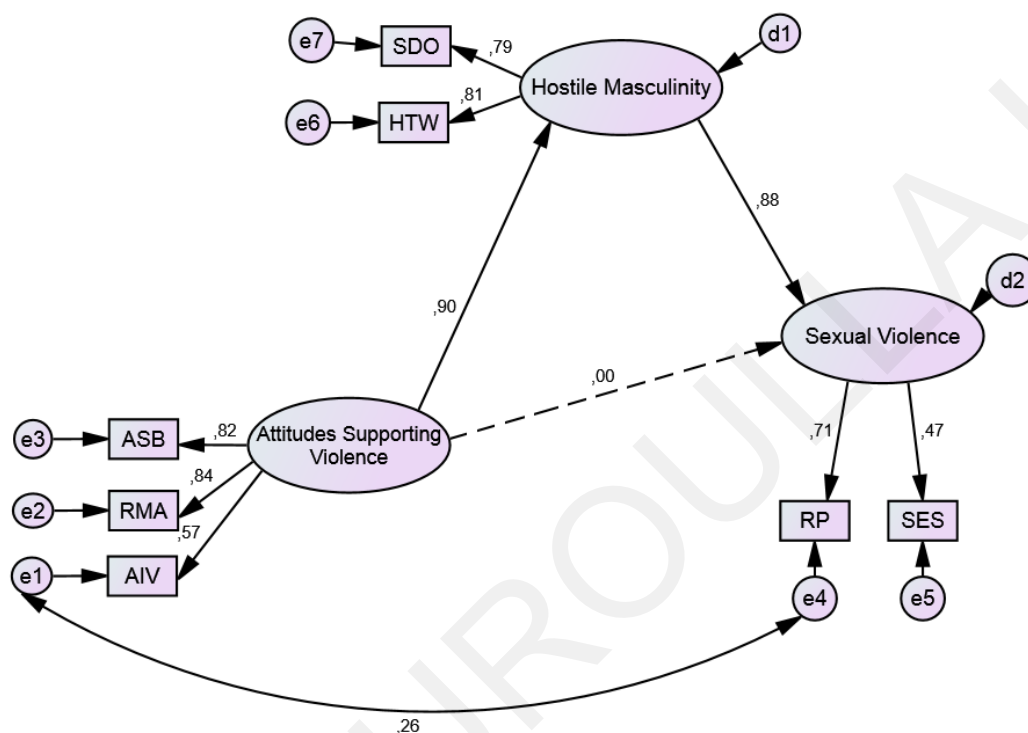
Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths.

Figure F9. The Modified Unified Conceptual Model in high Impersonal sex group (n = 206, N = 408).



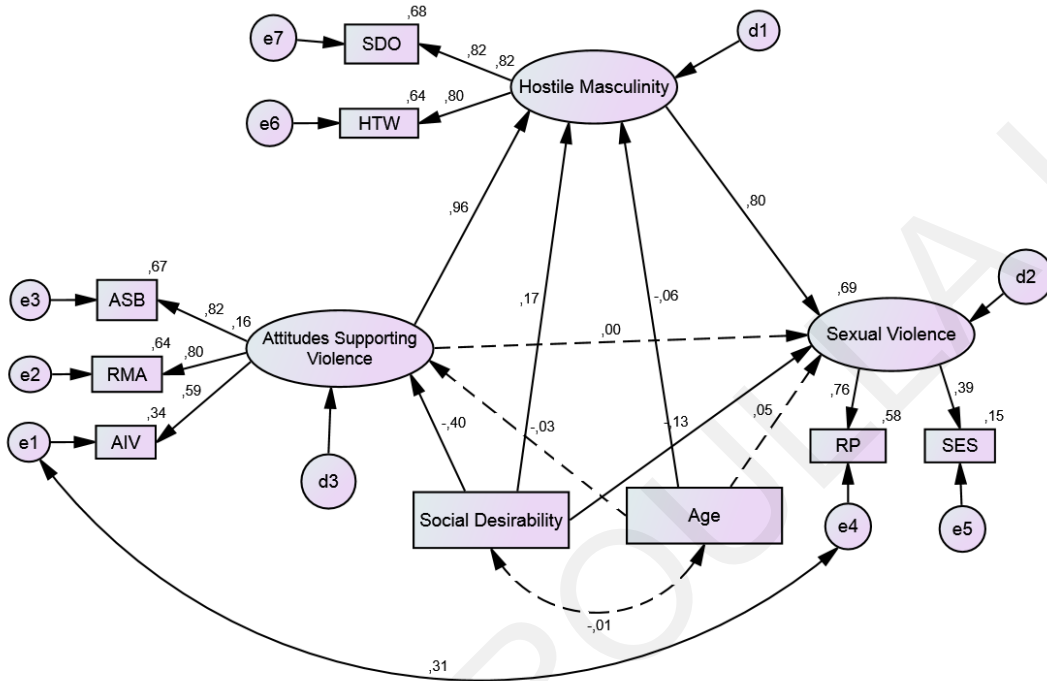
Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths. The path from Attitudes Supporting Violence to SV was constrained to zero.

Figure F10. The Modified Unified Conceptual Model in low Impersonal sex group (n = 202, N = 408).



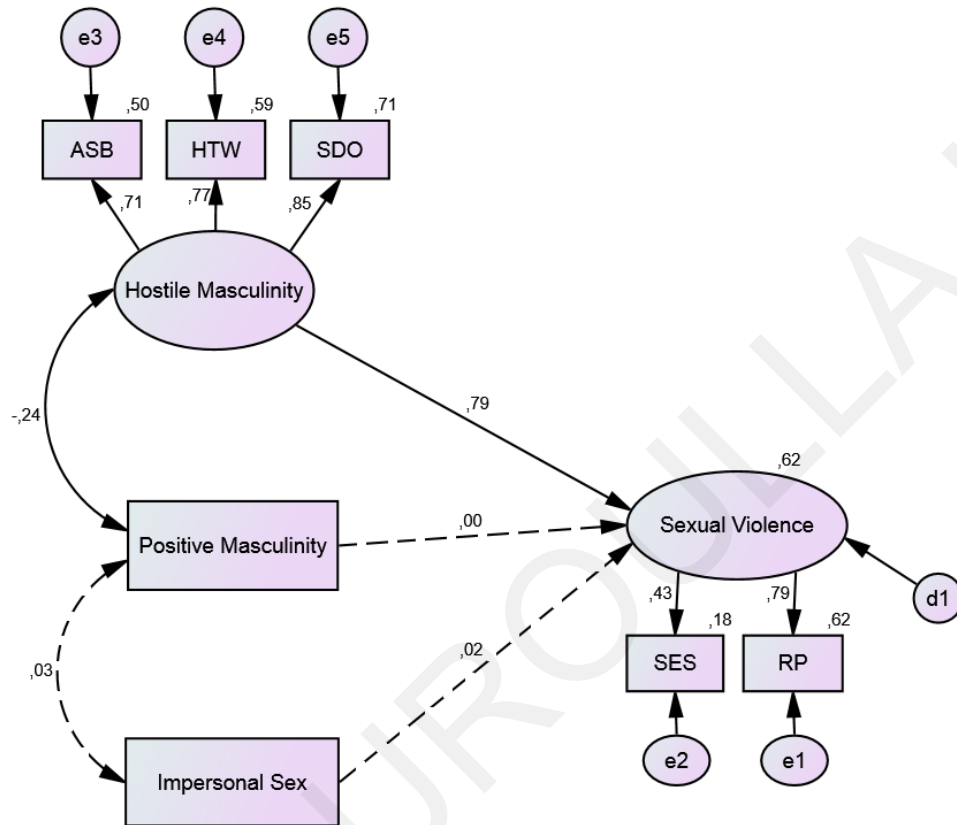
Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths. The path from Attitudes Supporting Violence to SV was constrained to zero.

Figure F11. The Modified Unified Conceptual Model with the addition of Age and Social Desirability as covariates (N = 395).



Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths. The path from Attitudes Supporting Violence to SV was constrained to zero.

Figure F12. The model investigating Positive Masculinity, Hostile Masculinity, Impersonal Sex, and Sexual Violence (N = 404).



$\chi^2 (11) = 19.46, p = .05, GFI = .98, CFI = .96, RMSEA = .04, LO90 = .00, HI90 = .08, pclose = .59, SRMR = .05.$

Note. ADF estimation was performed. Standardized betas are displayed. Dotted lines indicate nonsignificant paths.