



Major Depressive Disorder as a Predictor of Date Rape Victim Blame

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Abstract

We investigated the effects of rape victim depression status in the context of an alleged date rape perpetrated by a male college student against his female date. We expected that participants would blame a depressed victim less than a mentally healthy victim and that this effect would be mediated by the belief that the depressed rape victim was more vulnerable than the non-depressed victim, and that the non-depressed victim could have avoided the rape more easily than the depressed victim. In support, participants were more likely to blame the mentally healthy rape victim – an effect significantly mediated by the belief that the rape could have been avoided. Participants also perceived the depressed victim as significantly more vulnerable than the mentally healthy victim, but vulnerability did not mediate the effect of condition on victim blame.

Introduction

Approximately 6.7% of Americans are currently suffering from clinical depression (Kessler, Chiu, Demler, & Walters, 2005), and women are 70% more likely than men to suffer from clinical depression (Kessler, et al., 2003). However, no research to date has explored the possibly biasing effect of victim mental illness, specifically depression, on perceptions of rape victims. This is surprising, because research shows that the mentally ill are at heightened risk of victimization (Hart, Moran, Hatch, & Dean, 2012), and of rape victimization specifically (Choe, Teplin, & Abram, 2008).

Research regarding depression stereotype content suggests that the depressed sometimes receive negative evaluations (e.g., Martin et al., 2000; Teachman, Wilson, & Komarovskaya, 2006), while in other contexts they may be evaluated more positively (Teachman et al., 2006). For example, the mentally ill, in general, are viewed as helpless or vulnerable (Teachman et al., 2006). Due to the dichotomous nature of this stereotype, we have developed competing hypotheses regarding the role of victim depression status on attributions of blameworthiness and perpetrator guilt.

On one hand, people hold extremely negative views of depressed people, including that they are not actually ill (Martin et al., 2000), that they lack sufficient willpower, that they are unpredictable or impulsive, and that they are dangerous (Cook & Wang, 2010; Teachman et al., 2006). Others believe that depression has no biological basis and, therefore, is not a legitimate illness (Monteith & Pettit, 2011). So, we expect that the depression status of a female rape victim might predict attributions of blame, such that depressed rape victims might be blamed more than non-depressed rape victims.

Alternatively, perceptions of a depressed female might shift when she is portrayed as a date rape victim, because research indicates that victims of rape are often attributed different degrees of responsibility, depending on the victim's personality characteristics (Yarmey, 1985), level of resistance (Deitz et al., 1984), and victim stereotypicality (Catellani, Alberici, & Milesi, 2004). Yarmey (1985), for example, found that female rape victims who are perceived to be more demure, reserved, or defenseless are perceived as less responsible for their assault than comparably outgoing female rape victims.

Further, one study found that participants consider a victim's ability to resist when attributing blame (Catellani et al., 2004). Specifically, when asked to determine how responsible a victim was for her own rape, participants placed great importance on whether they believed the victim could have done more to prevent her own rape (Catellani et al., 2004). As agreement with counterfactual statements increased (i.e., statements regarding actions that the rape victim could have taken, but did not), perceptions of the rape's avoidability increased, translating into increased attributions of rape victim responsibility (Catellani et al., 2004).

These findings suggest a set of competing hypotheses. First, we expect that depressed rape victims will be blamed less for their assault than non-depressed rape victims – an effect mediated by beliefs that the rape is less avoidable when the victim is depressed than when she is not depressed. That is, participants might perceive a depressed rape victim as more vulnerable and less capable of resisting the assault than a non-depressed rape victim. Further, participants might be more likely to vote guilty when the perpetrator rapes a depressed woman, as opposed to a non-depressed woman, because the assault between the perpetrator and the non-depressed victim will be perceived as more ambiguous and potentially consensual.

Method

•Participants were 150 community members, 52% women (18 years old or older).

•Participants read a vignette describing an alleged date rape, in which a male college student faced charges of sexual assault against a female college student, adapted from *State v. Sosa* (2009). Victim depression status was manipulated between subjects (*victim was not suffering from depression at the time of the alleged assault or victim was experiencing symptoms of depression at the time of the alleged assault*). After reading the case and jury instructions, participants rendered their verdict: "Do you find the defendant, Mark Brizius, guilty or not guilty of sexual assault?" Jurors could answer either (1) guilty or (2) not guilty.

•Next, on a scale ranging from 1 (*strongly disagree*) to 5 (*strongly agree*) we assessed the belief that the victim should be blamed (i.e., "Jennifer, the alleged victim, was to blame for the incident."). Participants then completed a 5-item scale designed to measure perceptions of victim vulnerability, (e.g., "Jennifer, the alleged victim, probably feels helpless in everyday life, even before the alleged assault"; Cronbach's $\alpha = 0.86$), and an 11-item scale designed to measure negative perceptions of the victim (e.g., "Jennifer, the alleged victim, probably doesn't have much will-power or self-control"; Cronbach's $\alpha = 0.94$). Next, participants completed a 9-item scale designed to measure sympathy for the victim (e.g., "I feel sympathy for Jennifer, the alleged victim"; Cronbach's $\alpha = 0.92$). Finally, participants indicated their beliefs concerning the avoidability of the rape: "Jennifer, the alleged victim, probably could have prevented what happened had she been more responsible" (Cronbach's $\alpha = 0.94$).

Results

Although there was no statistically significant influence of depression status on guilt judgment, $F(1, 149) = .004, ns$, participants were significantly more likely to believe that the non-depressed rape victim should be blamed for her assault ($M = 1.79, SD = .846$) than the depressed rape victim ($M = 1.48, SD = .873$), $F(1, 148) = 4.58, p < .03$.

Further, consistent with our hypotheses, participants were significantly more likely to perceive the depressed victim as vulnerable ($M = 2.25, SD = .836$) than the non-depressed victim ($M = 1.95, SD = .676$), $F(1, 145) = 5.79, p < .02$.

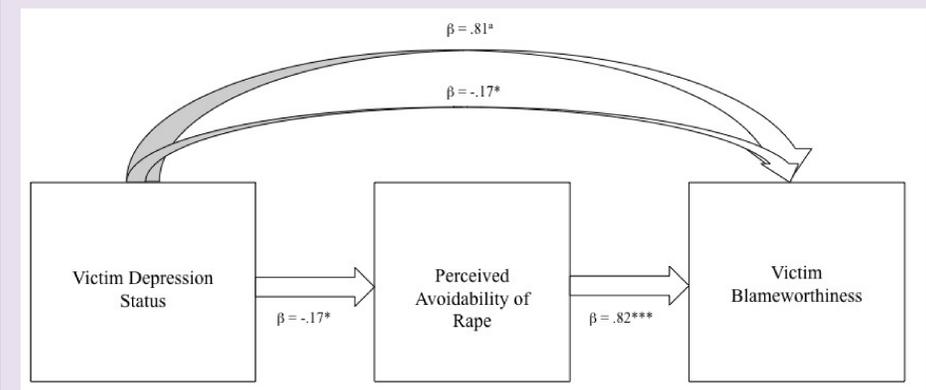
Moreover, as predicted, participants were significantly more likely to think the non-depressed victim could have avoided the rape ($M = 2.11, SD = .813$) than the depressed victim ($M = 1.83, SD = .848$), $F(1, 149) = 4.18, p < .04$.

Mediation Analyses

Mediation analyses, conducted in line with the recommendations of Baron and Kenny (1986), revealed that the perceived avoidability of the rape mediated the effect of condition (victim depression status) on attributions of victim blameworthiness (see Figure 1). Consistent with mediation, after entering the perceived avoidability of the

rape into the regression equation with depression status, the relationship between depression status and victim blameworthiness was no longer significant, $b = -.05, t(148) = -.95, p = .34$. A Sobel test confirmed that the change in beta weights provides evidence of statistically significant mediation (Sobel $z = -2.02, p < .04$).

Mediation analyses did not reveal that the perceived vulnerability of the victim mediated the effect of victim depression status on attributions of victim blameworthiness. However, we did find evidence of suppression, such that entering depression status simultaneously with victim vulnerability caused the relationship between depression status and victim blameworthiness to become even more significant ($p < .03$ before; $p < .000$ after). Further, after employing nonparametric bootstrapping analyses to test for multiple mediation (see Preacher & Hayes, 2004), the suppression effect of perceived vulnerability prevented perceived rape avoidability from emerging as a significant mediator, despite rape avoidability emerging as a significant mediator when analyzed independently.



^a Sobel $z = -2.02, p < .04$.
^{*} $p < .05$, ^{***} $p < .001$.

Figure 1. Perceived avoidability of rape as a mediator of the effect of victim depression status on attributions of victim blameworthiness.

Conclusions

These results suggest that people's evaluations of rape victims can be influenced by contextual factors, such as depressed status. Specifically, people perceived the rape of a depressed victim as less preventable or avoidable. Moreover, people perceive a depressed victim to be significantly more vulnerable and less blameworthy than a non-depressed victim. Yet, victim vulnerability appears to be cognitively unrelated to the processes that diminish a depressed victim's blame in this context. Instead, the belief that the non-depressed victim could better avoid being raped drove increased blame attributions. Future research should explore the role of depression on perceptions of victims in other contexts, including theft, murder, and other forms of exploitation.

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