JUROR PERCEPTIONS OF VICTIM CREDIBILITY IN CASES OF INTIMATE PARTNER
RAPE: AN EVALUATION OF VICTIM DEPRESSION AND VICTIM BODY WEIGHT

A Thesis
By
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Abstract

Juror Perceptions of Victim Credibility in Cases of Intimate Partner Rape:
An Evaluation of Victim Depression and Victim Body Weight

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Research indicated that depression and weight gain are associated with intimate partner violence (IPV). The current study evaluated the influence of depression and weight gain resulting from intimate partner rape (IPR), a type of IPV, on jurors' decisions regarding a defendant's guilt (verdict) and a complainant's credibility. Past research indicates that women find more guilty verdicts than men in IPR cases. We used a 2 (Sex: male & female participants), by 2 (Source: college [n = 310] vs. Amazon Mechanical Turk [mTurk; n = 234 samples], by 3 (Complainant outcomes: Control vs. Depression vs. Depression + weight gain) between subjects design with perpetrator verdict, sentencing length, and complainant's credibility as dependent variables. A significant two-way interaction revealed that victim credibility ratings were significantly higher in the college group compared to the mTurk group within the depression + weight gain condition. Participants in the college group rendered more guilty verdicts (77.5%) than those in the mTurk group (59.1%) and higher complainant credibility than mTurkers. Additional ancillary variables (e.g., rape myth acceptance, mental illness stigma, and obesity myths) were found to be significant predictors of victim credibility ratings, with mTurkers holding higher levels of these biases. Given the disproportionate gender breakdown in each of the samples, however, we determined that the results could not have effectively tested the

hypotheses. Further data collection is warranted in order to explore the differences among our two samples that could account for the results.

Keywords: intimate partner rape (IPR), victim credibility, rape myth acceptance, mental illness stigma, obesity myths

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Intimate partner violence (IPV), and particularly intimate partner rape (IPR), are major public health concerns in the U.S.. The National Intimate Partner and Sexual Violence Survey revealed that nearly half (45.5%) of female rape victims were raped by a current or former intimate partner (CDCP, 2011). Similarly, data from the National Domestic Violence Hotline indicated that 51.1% of female rape victims reported being raped by an intimate partner ("Statistics," n.d.). Whereas intimate partner violence occurs in both heterosexual and homosexual couples, the majority of cases appear to involve a male perpetrator and a female victim (CDCP, 2011; "Statistics," n.d.). Thus, the present study will focus on heterosexual couples.

Rape in the context of intimate relationships (e.g., dating, marriage) is a controversial issue, as some people see relationships as providing a blanket of persistent sexual consent. Many people do not believe that IPR is a legitimate crime, as reflected by the United State's slow pace in recognizing marital rape (Hartley, 2001). Even with laws regarding marital rape in place, many citizens maintain the belief that this is not a crime or at least it is not as appalling as rape occurring in other contexts (Lynch et al., 2018). Thus, people hold many biases regarding IPR. Examples include believing that simply being in a relationship equals consent or believing that a woman initially says "no" to be playful. In cases of IPR, these biases often vary across males and females, with men much more likely to endorse rape myth acceptance. As such, this gender imbalance can make convictions in cases of IPR especially difficult as men may be less likely to view IPR as rape at all. This difficulty is further compounded by the fact that in the context of sexual assault women are viewed as less credible than men (Hartley, 2001; Schafran, 1995),

especially when they do not present as emotional and distressed during their testimony (Calhoun et al., 1981; Nitschke et al., 2019; Peace & Valois, 2014).

Additionally, intimate partner violence leads to many harmful physical and psychological consequences for its victims, which can impact juror judgments regarding the victim's credibility. The present study will focus on depression and weight gain. There is evidence to suggest that people hold stigmatizing attitudes toward individuals with mental illness (e.g., viewing them as weak or dangerous; Monteith & Pettit, 2011; Yang et al., 2020) and overweight individuals (e.g., viewing them as lazy and out of control; Yamawaki et al., 2018). These prejudicial attitudes toward these populations might also negatively affect juror perceptions and decision-making during trial. Thus, the consequences of IPR for victims may have important implications for how jurors perceive alleged victims in cases of IPR. The current study aims to examine the impact of depression and weight gain, as direct sequelae from the sexual assault, on juror decision making.

Consequences of Intimate Partner Violence

The experience of physical or sexual violence, within a close relationship that should ideally foster trust and safety, has many deleterious effects for victims, including harmful mental, physical, occupational, and financial consequences.

Depression

IPV victims are at increased risk for negative mental health sequelae, including the development of psychological disorders, compared to individuals who have not experienced abuse. Much of previous literature has focused on the incidence of depressive symptoms in women who have experienced IPV. Ouellet-Morin et al. (2015) examined how the experience of IPV influenced new-onset depression. This longitudinal study included women without a history

of depression at baseline. Results showed that 33% of the sample reported at least one incident of IPV at follow-up points, and these women represented 51% of the new-onset cases of depression after seven years (Ouellet-Morin et al., 2015). This increased risk for depression was present even after controlling for the presence of childhood maltreatment, socioeconomic deprivation, antisocial personality, and early pregnancies (Ouellet-Morin et al., 2015). These findings suggest that the experience of IPV may lead to depression.

In a similar study, Fogarty, Fredman, Heeren and Liebschutz (2008) examined the incidence of depressive symptoms in individuals who had experienced abuse as a child and intimate partner violence as an adult. This study revealed that women who experienced both types of abuse (childhood & IPV) were twice as likely to develop depressive symptoms. In a community sample of female IPV victims, Watkins et al. (2014) found that physical and psychological intimate partner aggression resulted in higher levels of physical health problems and depressive symptoms across four follow-up interviews within a year. These findings suggest that the experience of intimate partner violence leads to negative mental health outcomes for victims, specifically depressive symptoms. It is important to note that these studies examined the outcomes of IPV generally, rather than looking at the specific outcomes of IPR. However, IPR is a subset of the broader IPV construct.

Weight Change

In addition to depression, previous work shows that victims of IPV are at increased risk for negative physical health outcomes, such as disordered eating patterns and weight change. Through individual interviews with IPV victims, Wong and Chang (2016) found several themes regarding this population's eating patterns. Victims reported gastrointestinal symptoms as a result of their IPV experiences that hindered their ability to eat normally. Several victims used

food to manage the psychological effects of abuse, such as eating sweets to make themselves feel better. Women reported that they used food as a method of coping and maintaining control over one aspect of their life that their abuser could not control, by starving themselves or overeating.

Previous research has also indicated that IPV is associated with increased body mass index (BMI) among females (Clark et al., 2014; Mason et al., 2017). Mason et al. (2017) explored the association between IPV and weight gain in young women across five years. They measured participants BMI, height, and weight as well as IPV and depressive symptoms at the outset of the study and at a five-year follow up. There was a significant interaction between IPV and depression, such that when a woman reported IPV experiences and depressive symptoms at the outset of the study, she was more likely to have gained weight across the five years (i.e., average BMI increase of 1.8 kg/m), suggesting that there is an association between depression and weight gain among IPV victims (Mason et al., 2017). Again, it is important to note that these studies examined the effects of IPV as a broader construct, rather than looking at the specific subset of IPR.

It is possible that weight gain among victims of IPV is a result of the association between victimization and depression. Alhalal (2018) examined victims of IPV recruited from primary healthcare centers and found that 52.5% of this sample classified as obese based on BMI. Obese women in the sample had significantly higher self-reported instances of IPV and physical child abuse; higher levels of depressive symptoms, and depression mediated the relationship between IPV and obesity (Alhalal, 2018). This suggests that depression may account for part of the relationship between IPV and weight gain. Thus, it seems clear that depression and weight gain are common reactions to IPV, but less is known about how jurors might perceive women who experience these reactions when their cases move forward in the legal system.

Intimate Partner Violence in the Justice System

Not only do women face many of the negative consequences mentioned above as a result of intimate partner violence, but there is often a dearth of local resources should they wish to reach out for help, especially in terms of assistance within the justice system. Cases of intimate partner violence often fail to reach trial as many women are reluctant to report their abuse due to fear of retaliation at the hands of their abuser; officers are often hesitant to make an arrest in these cases, and prosecutors are hesitant to move forward in pressing charges (Hartley, 2001). Officers often fail to arrest perpetrators because they underestimate the seriousness of the assault in partnered relationships, compared to crimes perpetrated by strangers. Additionally, prosecutors often do not pursue charges in these cases due to lack of evidence (Hartley, 2001; Schafran, 1995).

Even once a case goes to trial, women often face victim-blaming (i.e., placing responsibility for the incident on the victim rather than perpetrator), which can lead to secondary victimization (e.g., re-traumatization as a result of behaviors that blame the victim). Women often experience secondary victimization at the hands of the justice system during trials, because many strategies used by defense attorneys ironically mirror the strategies utilized by IPV perpetrators (Hartley, 2001; McGaughey & Stiles, 1983, Schafran, 1995). For example, defense attorneys may often suggest that the victim played a role in welcoming the perpetrator's sexual advances, by inviting him over, using substances, or wearing provocative clothing (Hartley, 2001). Other strategies utilized by defense attorneys include claiming that the evidence is faulty or inconclusive, such as stating that there were no witnesses, or simply denying the incident occurred (Hartley, 2001). Additionally, the verbal strategies that defense attorneys use, such as closed-ended questions requiring a "yes" or "no" answer and frequently repeating the

complainant's answers (indicating that her answers are unsatisfactory), undermine the complainant's autonomy and her credibility, much like the actions of the perpetrator (McGaughey & Stiles, 1983). Each of these strategies serves to minimize the victim's experience and often keep victims from receiving justice, as well as reinforce rape myths among jurors.

Given that many characteristics of the justice system hinder victims from seeking and receiving justice, it is important to understand what influences individuals in the justice system, particularly jurors, and their decisions in these cases. Previous literature identified several characteristics that inform juror decisions regarding IPV. These include characteristics that affect perceptions of the alleged victim, such as credibility (Peace & Valois, 2014; Stewart & Jacquin, 2010), weight (Clarke & Stermac, 2011; Yamawaki et al., 2018; Zidenberg et al., 2019), and characteristics of the case, such as sex of the alleged victim and defendant (Russell et al., 2012), and sex of the juror (Clarke & Stermac, 2011; Lynch et al., 2018; Yamawaki et al., 2018; Zidenberg et al., 2019).

Victim Credibility

Victim credibility is a major influence on juror decision making in cases of IPR because these cases often lack substantial objective evidence and can turn into "he said, she said" scenarios. In such situations, jurors' perceptions of a victim's credibility—how much they believe what the complainant is saying—are critical for verdict decisions (Peace & Valois, 2014; Stewart & Jacquin, 2010), and defendant credibility - how much they believe the defendant's claims. Peace and Valois (2014) presented undergraduate participants with one of four trial transcripts depicting a case of sexual assault with ambiguous detail (e.g., "he said, she said" scenario). They also varied the level of emotion portrayed by the victim and the defendant (low vs. high). There were significant main effects of victim and defendant emotionality on

credibility, such that both victims and defendants were perceived as more credible in the high

emotion condition; however, a significant interaction effect was not found. Additionally, Peace

and Valois (2014) tested whether the emotionality of the victim and defendant influences

whether jurors viewed the victim as making a false allegation. Again, there were significant main

effects of victim and defendant emotionality, but no interaction effect. Participants were more

likely to perceive the victim as making a false accusation when the victim was *less* emotional or

when the defendant was *more* emotional. Additionally, more guilty verdicts were rendered in the

victim high-emotionality condition compared to the victim low-emotionality condition. With

regards to the defendant, the number of guilty verdicts rendered was approximately equal across

both the high and low emotionality conditions. These results suggest that perceived emotionality

is related to judgments in cases of sexual assault, with individuals rendering more guilty verdicts

when the victim is deemed to be more credible. Similarly, Stewart and Jacquin (2010) found that

mock jurors rendered less guilty verdicts in a sexual assault case when the victim was viewed as

less credible. Given the impact of credibility on conviction rates, it is essential to examine what

characteristics influence victim credibility. Previous research has examined many of the factors

that jurors take into account when determining the credibility of the victim.

Schafran (1995) and Hartley (2001) describe the "Three C's of Credibility" to explain

why women are often viewed as less credible than men in rape cases. They argue that women

lack collective, contextual, and consequential credibility. Collective credibility comes from

belonging to a group that is deemed credible (Hartley, 2001; Schafran, 1995;). Men as a group

are considered to be more credible than women, as evidenced by the fact that students place

higher value on the opinions of their male teachers and work accomplished by men (Schafran,

1995). Contextual credibility depends on others' ability to understand another person's situation

(Hartley, 2001; Schafran, 1995). Most jurors do not understand the experiences of rape victims and find it hard to imagine. They often have incorrect preconceived ideas about how a victim should react, which inform their decisions regarding her credibility. Finally, consequential credibility depends on whether the victim is viewed as a valuable individual or someone who can be taken seriously (Hartley, 2001; Schafran, 1995). This is often not the case for victims of rape, as their experiences and injuries are minimized by the justice system and considered to be less serious than reported or altogether untrue.

One purpose of this study is to examine whether a sexual assault complainant's credibility is impacted by her testimony that she has experienced depression and weight gain since she was allegedly assaulted. The impact of the assault on the complainant's mental and physical health may enhance her contextual credibility. Many people have preconceived ideas of how a rape victim should react to the event, typically with distress (Calhoun et al., 1981; Nitschke et al., 2019), and there is substantial evidence to suggest that depression and weight gain are common outcomes of IPV (Clark et al., 2014; Mason et al., 2017; Ouellet-Morin et al., 2015; Fogarty et al., 2008). Given that the complainant in this study will experience negative outcomes that are typically in line with how the public expects a rape victim to react, she may be granted more contextual credibility than a complainant who does not react with distress and does not experience negative outcomes typically associated with sexual assault. The development of serious mental and physical health consequences, such as depression and weight gain, may also enhance the complainant's consequential credibility. Mock jurors may be more likely to take the complainant seriously and to believe her account of the experience if there are clear negative outcomes of the event, as opposed to a complainant who did not suffer tangible negative outcomes. However, it is possible that the experience of depression and weight gain might

reduce the complainant's credibility due to the stigmatization of overweight victims and mental illness. Thus, the complainant outcomes of depression and weight gain may affect the ratings of her credibility in this study.

Overweight Stigma

Previous literature examined the effect of victim weight on mock juror decision making in IPV cases; however, findings have been mixed. Yamawaki et al. (2018) evaluated the effects of victim weight and obesity myths on blame attribution toward the defendant and victim, and credibility for victims and perpetrators of IPV, specifically sexual assault. The weight of victims and perpetrators were manipulated in a between-subjects design utilizing digital images. Mock juror participants were presented with one of three sexual assault scenarios, including photographs of the victim and defendant, in which either the victim, the defendant, or both were obese.

There was no significant effect of the victim's weight on her credibility, nor was there a significant interaction between the victim's weight and the gender of the mock juror. However, victim credibility was impacted by a weight by obesity myths interaction. Obesity myths were a significant predictor of victim credibility in the obese victim condition, with individuals who held higher levels of obesity myths rendering lower ratings of victim credibility (Yamawaki et al., 2018). Obesity myths are false beliefs or misconceptions that people often hold regarding obese individuals, such as believing that obese individuals are lazy and responsible for their weight gain. In regard to IPV, a relevant obesity myth would involve the belief that obese individuals are desperate and welcoming of any kind of affection and sexual contact, even without consent (Yamawaki et al., 2018). Additionally, victim credibility for the obese victim was impacted by a gender by obesity myths interaction. Male mock jurors in the obese victim

condition were more likely to hold obesity myths than male and female mock jurors in the other conditions and attributed lower ratings of victim credibility to the obese victims. (Yamawaki et al., 2018). Thus, male jurors who held higher obesity myths yielded lower ratings of victim credibility when the victim was obese.

With regard to perpetrator credibility, independent of victim credibility, the authors found a significant main effect for victim weight, such that participants rated the perpetrator as more credible when the victim was obese. Additionally, perpetrator credibility was impacted by a weight by obesity myths interaction. Similar to the interaction with victim credibility, obesity myths were related only in the obese victim condition, with people with higher obesity myths rating the perpetrator as having more credibility (Yamawaki et al., 2018). Thus, it appears that perpetrators are viewed as more credible when their victim is obese, as opposed to thin, but endorsement of obesity myths strengthens this effect.

Findings from Yamawaki et al. (2018) indicate that when mock jurors, especially males, hold more obesity myths, and obesity myths directly interact with manipulations of the complainant's weight, a female complainant is perceived as less credible, whereas the male perpetrator is viewed as more credible, when the victim is described as obese compared to average size. Yamawaki and colleagues did not measure legal judgments, but this finding suggests that mock jurors would be more likely to believe the defendant's claims that the event either did not happen or that it was consensual when the complainant is described as overweight, especially when the jurors have pre-existing negative attitudes about weight.

Similar to Yamawaki et al., Zidenberg, Sparks, Harkins, and Lidstone (2019) presented participants with a mock police report depicting a scenario of verbal sexual coercion within a dating relationship in order to examine the effect of victim weight on mock jurors' perceptions of

her and the defendant. Rather than using images, they manipulated victim weight in the scenario

by describing the victim as either "thin" or "overweight." They measured judgments of the

victim and offender, rape myth acceptance – the extent that individuals endorse common

misconceptions about rape – and anti-fat attitudes. There were no significant effects of weight on

victim responsibility, victim sympathy, or negative affect toward the victim. However, weight

did impact judgments of the perpetrator. Participants expressed more negative affect toward the

perpetrator in the thin victim condition compared to the overweight condition (Zidenberg et al.,

2019). Additionally, participants in the overweight victim condition expressed greater sympathy

for the perpetrator than in the overweight victim condition (Zidenberg et al., 2019). Similarly,

individuals in the overweight victim condition gave more credence to possible extenuating

circumstances for the defendant's actions when the victim was overweight (Zidenberg et al.,

2019).

Zidenberg et al. (2019) suggested that these findings of victim weight impacting

perpetrator judgments may be due to thinking patterns that illustrate the disbelief that an alleged

perpetrator would need to coerce or force a fat individual to have sex with him. This type of

thinking led to more sympathy for the accused defendant and prompted participants to consider

extenuating explanations for the defendant's behavior. Conversely, participants did not believe

that anyone would want to rape a fat girl, thus, she must be lying, leading to more negative affect

toward the alleged victim in the scenario.

Results from Zidenberg et al. (2019) and Yamawaki et al. (2018) suggest that jurors are

more sympathetic toward perpetrators and hold a less negative view of them when victims are

overweight. However, Clarke and colleagues also studied victim weight, anti-fat attitudes, and

rape myth acceptance in the context of juror decision making. They published two studies that

suggest a different pattern of results regarding the impact of victim weight on juror perceptions

of complainants as a function of anti-fat attitudes and rape myth acceptance compared to the

previously mentioned research.

Clarke and Lawson (2009) presented female participants with a trial vignette depicting a

case of sexual assault that manipulated victim weight ("fat" versus "thin"). They found that

weight was a significant predictor of victim blaming, such that participants in the thin victim

condition endorsed higher levels of victim blaming than those in the fat victim condition. It is

important to note that results from Clarke and Lawson (2009) could be due to the all-female

sample, which might account for the different direction of effects. However, Clarke and Stermac

(2011) found similar effects using a coed sample. There was a significant main effect of weight

on victim responsibility, such that jurors rated fat victims as less responsible for the abuse than

thin victims (Clarke & Stermac, 2011). Thus, when considering whether the victim was to blame

for their abuse, female mock jurors were more likely to blame thin victims compared to fat

victims. These studies yielded different results compared to Yamawaki et al. (2018) and

Zidenberg et al. (2019), who did not find a main effect of victim weight on victim blaming.

Moreover, the interactions found in the latter studies suggested a bias against overweight

victims, not in favor of them. Notably, Clarke and Stermac (2011) found no evidence of a weight

status by anti-fat attitudes interaction on victim blaming, whereas Yamawaki et al. (2018) and

Zidenberg et al. (2019) did. Clarke and Lawson (2009) did not test for one, but they did find an

interaction between weight status and rape myth acceptance (RMA), with participants who

endorsed higher levels of RMA tending to place more blame on the thin victim. In their study,

Clarke and Stermac (2011) also examined the impact of weight status on perpetrator judgments.

There was a significant main effect of weight on ratings of perpetrator responsibility, such that

perpetrators were viewed as more responsible for the abuse when the victim was fat rather than thin. It was also found that participants in this study held more negative affect toward the perpetrator when the victim was fat compared to thin (Clarke & Stermac, 2011). These findings contrast with Zidenberg et al. (2019), which suggested that participants were more sympathetic and held lower negative views of the perpetrator when the victim was overweight.

Taken together, these four studies suggest that victim weight does affect juror decisions, particularly regarding perpetrator credibility; however, the exact nature of the effect remains unclear. Some studies have failed to find an effect of victim weight on judgments regarding victim credibility, victim responsibility, and sympathy toward the victim (Yamawaki et al., 2018; Zidenberg et al., 2019), while other studies have found that mock jurors were more sympathetic toward and rendered higher ratings of credibility to overweight victims, as opposed to thin victims (Clarke & Lawson, 2009; Clarke & Stermac, 2011). Findings related to judgments about the perpetrator are even more distinct, with some studies finding that mock jurors are more sympathetic toward a perpetrator with a fat victim (Zidenberg et al., 2019) and other studies finding the opposite effect (Clarke & Lawson, 2009; Clarke & Stermac, 2011). However, there does appear to be a consistent effect of participant sex, with females holding less RMA, obesity myths, and rendering higher ratings of victim credibility (Clarke & Stermac, 2011; Yamawaki et al., 2018; Zidenberg et al., 2019), and these attitudes seem to interact with weight status to impact victim and perpetrator judgments.

Importantly, of the four studies, only one measured verdict and sentencing recommendations. Although verdict decisions did not differ based on the victim's weight, anti-fat attitudes significantly interacted with the victim's weight. Mock jurors who held higher levels

of anti-fat attitudes gave longer sentences to defendants who assaulted an overweight victim and had more positive judgments about the overweight victim (Clarke & Lawson, 2009).

An important distinction between the studies reviewed here and the current study includes that these studies manipulated weight during the event in question, whereas the current study will manipulate weight after the event has occurred. The current study aims to explore the effect of depression and weight gain as a result of intimate partner rape on case judgments and ratings of victim credibility. The previously mentioned studies evaluated the effect of a victim's weight during the event. Given that this study will provide a reason for weight gain (e.g., IPR), unlike the studies outlined in this section, this might affect the way that mock jurors interpret and use this information to make judgments about the case and the victim, such that mock jurors may be more sympathetic toward the victim's weight gain if it was caused by rape.

Mental Health Stigma

There is overwhelming consensus in the literature that people often hold stigmatizing views of mental illness. Many people believe that mental illness is a sign of weakness and something that should be overcome independently (Komiti et al., 2006; Robinson et al., 2012) and many others believe that individuals with mental illness are dangerous (Heflinger et al., 2015). Komiti et al. (2006) found mental health stigma to be a significant barrier to receiving treatment for mental illness in a community sample of 300 people, 88% of participants indicated that they would feel uncomfortable seeking mental health treatment due to what others might think of them. Robinson et al. (2012) conducted semi-structured interviews with patients receiving mental health treatment in communities in order to learn about their experiences. These interviews yielded a theme of shame associated with the stigma of mental illness, such that patients felt they were viewed as "weak" by others in the community.

Particularly high levels of stigma towards depression have been found among community and college age samples (Monteith & Pettit, 2011; Yang et al., 2020). Monteith and Pettit (2011) examined stigma toward depression in an undergraduate sample using implicit and explicit measures of attitudes and stereotypes regarding depression. In order to measure implicit attitudes toward depression and physical illness, participants completed implicit association tasks (IATs). Semantic differential scales were used to measure explicit attitudes toward depression and physical illness. Results found that there were more implicit negative attitudes toward depression than physical illness, such that depression was viewed more negatively on implicit tasks. This difference did not emerge on explicit tasks. This finding suggests that individuals hold more negative implicit or automatic attitudes towards individuals with depression than individuals with a physical illness. Additionally, when completing explicit measures of stigma toward depression, these attitudes are hidden.

The current study aims to explore the effect of mental illness (depression) as a result of intimate partner rape on case judgments and ratings of victim credibility. Given that juries consist of members of the community, the stigmatization of depression might impact a juror's decision in a case in which the complainant has developed depression. If a juror holds high levels of mental illness stigma, they might view the complainant as less credible, which might lead them to believe the defendant is innocent. However, since the current study will provide a reason for the development of depression (e.g., IPR), it is possible that mock jurors will hold weaker stigmatizing attitudes toward the complainant's mental illness. Given that victims are viewed as more credible when they have an emotional reaction to the rape (Calhoun et al., 1981; Nitschke et al., 2019; Peace & Valois, 2014), the development of depression (e.g., an emotional reaction)

may act as a "confirming factor" for the jurors and make the complainant's testimony seem more credible, leading to higher ratings of victim credibility and more guilty verdicts.

Juror Sex

Given that much of previous research indicates that males and females differ in their adherence to obesity and rape myth acceptance (Clarke & Stermac, 2011; Yamawaki et al., 2018; Zidenberg et al., 2019), it is important to consider how the sex of the juror might impact cases of IPR. Many studies have shown that the sex (e.g., male vs. female) of the mock juror is related to verdicts in cases of IPV. Lynch et al. (2018) utilized a trial summary to examine juror perceptions of intimate partner rape in the context of heterosexual marriage as a function of mock jurors' sex and found that male and female jurors differed in the verdicts they rendered. Results showed that women rendered more guilty verdicts and endorsed more pro-victim and anti-defendant judgments than men. This is similar to the pattern found in the weight studies mentioned previously. There appeared to be a consistent relationship between participant sex and ratings of victim credibility, with females rendering higher victim credibility ratings than men (Clarke & Stermac, 2011; Yamawaki et al., 2018; Zidenberg et al., 2019). Additionally, female jurors held less RMA and obesity myths than men. These attitudes seem to interact with weight status to impact victim and perpetrator judgments. Results from these studies, including Lynch et al. (2018), suggest that females react more favorably to the victim, rendering higher ratings of victim credibility and endorsing more pro-victim judgments. The pattern found in the first Lynch et al. (2018) study remained in a second experiment, where they manipulated whether the couple was married or cohabiting.

Incidentally, very few men and women were willing to determine the defendant was guilty of rape in the first degree, the most serious verdict, compared to the other lesser guilty

charges (Lynch et al., 2018). A person is guilty of second-degree rape if they engage in vaginal intercourse with another person by force, against the will of another person, or with a person who is mentally disabled, mentally incapacitated or physically handicapped (About Sexual Assault, n.d.). This suggests that the relationship between the defendant and victim, regardless of whether they were married or cohabitating, is a mitigating factor that leads both males and females to view intimate partner rape as a less serious crime compared to felony rape.

Another study evaluated the influence of defendant sex as a function of participant sex on mock jury decisions in a scenario based on U.S. v. Dixon (2006), a case of murder under duress involving an individual who killed their partner in response to being victimized (Russell et al., 2012). Participants were presented with a vignette that varied, between subjects, sex of the defendant. This study revealed that participants were more likely to render a guilty verdict of murder if the defendant, who killed their abusive partner, was male compared to female, regardless of the sex of the participant. The findings from Russell et al. (2012) suggest that male and female mock jurors are more likely to hold men responsible for IPV than women when rendering verdicts, even when men are subsequently victimized by female partners.

The previously mentioned studies suggest that sex of the participant (mock juror) appear to affect decision making in cases of IPR. Overall, studies indicate that female mock jurors are more likely to render higher ratings of victim credibility and more guilty verdicts in cases of IPR than male mock jurors. This information can have powerful implications for how jury selection can impact the trial outcome for women who have been raped by an intimate partner.

Current Study

The current study aimed to evaluate the influence of depression and weight gain resulting from IPR on jurors' decisions regarding the defendant's guilt and the complainant's credibility.

Depression is widely cited as a common consequence of IPV, including IPR (Fogarty et al., 2008; Ouellet-Morin et al., 2015; Watkins et al., 2014). Much of previous research has indicated that IPV, including IPR, is associated with significant weight gain (Clarke et al., 2014; Mason et al., 2017). There is also evidence to suggest that depression and significant weight gain are associated with each other among victims of IPV, including IPR victims (Alhalal, 2018).

There is some evidence to suggest that overweight victims are discriminated against (Yamawaki et al., 2018; Zidenberg et al., 2019); although this is not universal (Clarke & Lawson, 2009; Clarke & Stermac, 2011), and those studies using overweight victims as a manipulation presented the rape victim as overweight during the IPR, not as a consequence of it. Additionally, there is some evidence to suggest that individuals with mental illness are stigmatized (Monteith & Pettit, 2011; Yang et al., 2020); however, those studies examined stigmatization among college and community samples and not in the context of a criminal trial. Thus, attitudes toward developing depression and gaining weight as a result of experiencing IPR may affect jurors' perceptions of complainant credibility in a different pattern compared to what has previously been studied (e.g., presenting the victim as overweight during the IPR and evaluating mental illness stigma in the context of a criminal trial).

Male and female adult participants from both SONA and mTurk read a vignette depicting a case of intimate partner rape. The first independent variable, complainant outcomes (no outcomes/control vs. depression vs. depression + weight gain) was manipulated within the complainant's testimony. The second quasi-independent variable was the sex of the participant (female vs. male). The dependent variables included: 1) verdict (guilty vs. not guilty) and 2) victim credibility (complete scale). Given the link between complainant credibility and conviction rates, it is important to explore how common outcomes of IPR, such as depression

and weight gain, affect a complainant's credibility and subsequent verdicts during trial. This study aims to explore this relationship.

Hypotheses: Main Effects for Participant Mock Jurors' Sex

Given previous research, I predicted that the sex of the mock juror participant would be related to mock juror verdicts and ratings of the complainant's credibility (Lynch et al., 2018; Russell et al., 2012; Stanziani et al., 2017).

H1: Female participants would render more verdict decisions of perpetrator guilt compared to male participants.

H2: Female participants would yield higher ratings of complainant credibility compared to male participants.

Hypotheses: Main Effects for Complainant Outcomes

Since research is mixed on weight stigma and since our manipulation of weight gain and depression is as an outcome of the sexual assault rather than a precursor, I did not have specific directional hypotheses. If weight and mental illness stigma were involved, then participants may render more "not guilty" verdict decisions and lower ratings of complainant credibility. However, if participants were sympathetic that these are true outcomes of a sexual assault, then there may be more guilty verdicts and higher ratings of victim credibility. The mixed findings on these variables in the literature led us to include ancillary measures, such as rape myth acceptance, mental illness stigma, and obesity myths in the current study. These are secondary variables and were explored as potential moderating factors. Their use in subsequent analyses was determined post hoc considering the outcomes of the hypothesis tests. Participants completed the additional variable scales in counterbalanced order after reading the vignette

containing the complainant health manipulation and completing the main dependent variables

and manipulation checks.

Hypotheses: Interaction Effects for Participant Mock Jurors' Sex

Finally, I predicted an interaction effect between sex of participants and complainant

outcomes, based on previous interaction effects found in literature (Yamawaki et al., 2018;

Zidenberg et al., 2019).

H5: Female participants would render more guilty verdicts in the depressed + weight gain

condition than male participants in the experimental conditions, and more guilty verdicts

than both female and male participants in the control condition.

H6: Female participants would yield higher ratings of complainant credibility in the

depressed + weight gain condition than male participants in the experimental conditions,

and higher ratings of complainant credibility than both female and male participants in

the control condition.

In a previous study, Lynch et al. (2018) found that very few men and women were

willing to convict a perpetrator of first-degree rape, a more serious offense, compared to other

lesser charges. Based on the findings from Lynch et al. (2018), the defendant in our study was

charged with the lesser crime of second-degree rape. Sentencing length was included as another

ancillary dependent variable, as participants were asked to choose a sentencing length to give the

defendant if he were to be found guilty, in order to account for individuals not being willing to

find the defendant guilty of a serious charge.

Method

Participants

Zidenberg et al. (2019) conducted an ANOVA to examine the interaction effect of participant sex and weight of the victim (thin vs. overweight) on anti-fat attitudes. Results from this study yielded a significant medium effect size, F (1, 144) = 10.19, p = .002, η_p^2 = .066) for participant sex and weight status on anti-fat attitudes. A statistical power analysis (Faul, et al., 2007) indicated that a sample of at least 211 (f = .25, α = .05, β = .20) would be required to detect a similar effect size. In order to account for participants failing manipulation checks, the minimum sample size was increased by 25%. A sample size of 544 was collected.

Participants were 544 individuals (223 males, 321 females) recruited from a mid-size comprehensive public university in the southeast (n = 310; 79 men & 231 women) and Amazon Mechanical Turk (mTurk; n = 234; 144 men & 90 women). Individuals were recruited from both sources due to practical constraints. Students participated voluntarily for extra credit in their psychology courses, whereas individuals from mTurk were compensated $1.75 for their participation. From the original participant pool, 16 were removed because the participants identified as non-binary, 146 were removed because the participants failed at least one of two attention checks, and 17 were removed because they did not complete the dependent variables. Age ranged from 18 to 74 years (SONA: M = 19.1, SD = 1.9; mTurk: M = 40.5, SD = 10.4). Of the SONA sample, 89% identified as White, 5% as Hispanic, 2% as Black, 2% as Bi/Multi-racial, and 1% as Asian/Pacific Islander, while 66% of the mTurk sample identified as White, 24% as Asian/Pacific Islander, 4% as Black, 3% as Hispanic, 1% as Bi/Multi-racial, and 0.4% as Native American. IRB approval was received on 9/11/2020 (See Appendix A). This study adhered to all APA ethical guidelines. All participants gave online consent.

Design

The current study is a 3 (complainant outcome: no outcomes, depression, depression + weight gain) x 2 (participant sex: female, male) x 2 (data source: SONA, mTurk) between-subjects design, in which complainant's outcome served as the first independent variable and was manipulated within the vignette. Participants were randomly assigned to one of three conditions within Qualtrics. Mock juror sex served as the second independent variable. The dependent variables included verdict and victim credibility. The following ancillary variables were also measured: sentencing length, rape myth acceptance, mental illness stigma, and obesity myths.

Materials

Vignette. Participants were provided with a vignette of a case of intimate partner rape, in which a male defendant was accused of raping his female girlfriend. The details of the case were adapted from an actual case of intimate partner rape in the justice system (Appendix B). The vignette included information from the testimonies and cross-examinations of both the complainant and the defendant. The first independent variable, complainant outcome, was embedded in the vignette. The remaining quasi-independent variable of participants' sex was collected within a demographic questionnaire. Each of the dependent variables and ancillary measures were collected after participants read the vignette.

Participants were randomly assigned to one of three complainant outcome conditions. In the depressed condition, the complainant stated that she developed depression as a direct result of the rape and is being treated by her doctor. She stated that her medical doctor is concerned that the depression will be harmful to her health. The complainant in the depression + weight gain condition stated that she developed depression as a result of the rape, which is being treated

by her doctor. In addition, she testified that she had gained a significant amount of weight as a result of her rape. She stated that her doctor has indicated concern that the depression and weight gain are harmful for her health. There was no mention of depression or weight gain in the no outcome condition. In the control condition, the complainant reported that the event was "extremely distressing."

Verdict. A dichotomous variable was used to measure verdict as a dependent variable. Participants were required to render a "guilty" or "not guilty" verdict for the charge of rape in the second degree (Appendix C). Guilty verdicts were scored as "1," while not guilty verdicts will be scored as "0."

Victim Credibility Scale (VCS). Another dependent variable, participants' perceptions of the complainant's credibility, was measured using the Victim Credibility Scale (VCS, Appendix E), adapted from the Credibility Scale (CS; Yamawaki et al., 2018). This scale was designed to assess participants' perception of the credibility of the alleged victim and alleged perpetrator of a rape. Items were created using synonyms and antonyms of "credibility" from an English dictionary (e.g., doubtful, dependable, reliable, trustful, credible, deceptive, honest, & lying; Yamawaki et al., 2018). Participants rated their agreement with statements regarding the complainant's credibility on a Likert scale ranging from 1 (strongly disagree) to 7 (strongly agree). Participants were instructed to rate statements such as, "the complainant is reliable" (Yamawaki et al., 2018). Three items, (a), (f), and (h) were reversed scored. All items were summed, with higher scores indicating higher ratings of victim credibility. Yamawaki et al. (2018) reported Cronbach's alpha as .81 for the victim credibility scale suggesting that this scale has high internal reliability.

Sentencing Length. A sliding scale was used to measure the length of the sentence that participants would render if the defendant were found guilty (Appendix D). Participants were required to render a sentence ranging from 44 months to182 months (the minimum and maximum sentence lengths for second-degree rape in North Carolina; About Sexual Assault, n.d.).

Illinois Rape Myth Acceptance Scale (IRMA). The Illinois Rape Myth Acceptance scale is a 22 item self-report scale designed to measure individuals' acceptance of rape myths. The IRMA was used to assess participant's prejudicial beliefs about sexual assault. Participants were asked to rate their agreement with statements on a 5-point Likert scale ranging from 1 (strongly agree) to 5 (strongly disagree). Items included statements such as "if a girl doesn't physically resist sex – even if protesting verbally – it can't be considered rape" (Lonsway, 1999). Scores were then summed, with lower scores reflecting higher levels of RMA; thus, higher scores on the scale actually reflect less rape myth acceptance. The IRMA has demonstrated excellent reliability and validity. Cronbach's alpha for the IRMA is .93 (Lonsway, 1999; Appendix G). This scale was used as an ancillary measure to assist in post hoc interpretation of results.

Mental Illness Stigma Scale (MISS). The MISS is a seven-item scale adapted from the Stigmatizing Attitudes Toward Severe Mental Illness Scale (Reavley & Jorm, 2011) to assess participants' attitudes toward individuals with mental illness. Participants were asked to rate their agreement with statements on a 7-point Likert scale ranging from 1 (strongly disagree) to 7 (strongly agree). Items included statements such as "people with mental illness are unpredictable." The item scores were summed, with higher scores reflecting higher levels of stigma toward individuals with mental illness. No reliability or validity scores could be located

for this scale; however, the scale does have face validity and has been used in other studies

regarding mental illness stigma with no comparably superior measure available (Appendix H).

This scale was used as an ancillary measure to assist in post hoc interpretation of results.

Obesity Myths Scale (OMS). The OMS (Yamawaki et al., 2018) is a six-item scale used

to measure participants' attitudes toward obese individuals. Participants were asked to rate their

agreement with statements on a 7-point Likert scale ranging from 1 (strongly disagree) to 7

(strongly agree). Items included statements such as "obese people appreciate any kind of

affection" (Yamawaki et al., 2018). The item scores were summed, with higher scores reflecting

higher levels of OMS. The OMS has an internal consistency value of .81 (Yamawaki et al.,

2018). This scale was used as an ancillary measure to assist in post hoc interpretation of results

(Appendix I).

Attention Checks. Attention checks were included to ensure that participants were

paying attention and answering the scales thoughtfully (e.g., "answer "3" here," "where did the

alleged rape occur"). Participants who missed one or more attention check item were excluded

from the study. (Appendix F).

Demographic Questionnaire. Participants were asked to report their age, sex (e.g., male,

female, intersex, "I prefer not to answer"), race/ethnicity (e.g., White, Black/African American,

Hispanic/Latino, "I prefer not to answer"), zip code, and whether they have ever served on a jury

(See Appendix J). The second independent variable was determined based off the demographic

questionnaire. Additionally, participants were asked to report on their history of experience with

previous intimate partner violence and other forms of victimization across their lifetime. Items

on this question included statements such as "physical abuse in the family in which you were

raised" and "sexual assault or rape." Participants were asked to mark all items that apply. Finally,

participants were asked to report on their history with depression and weight concerns (yes vs. no).

Procedure

Participants signed up for the study through SONA or mTurk. Given that sex is a key variable in the study, participants who did not identify as male or female were excluded. Participants were provided with an electronic version of informed consent on Qualtrics, which is a secure online survey system, explaining what would be asked of them during the study. It also provided the contact information for the primary investigator in case any questions developed during the survey. If consent was provided, participants received access to the study, including the vignette and previously mentioned questionnaires. Participants read the vignette, in which the first independent variable, complainant outcome, was manipulated. After reading the vignette, participants completed the main dependent variables. First, they rendered a verdict in the case. After rendering a verdict, participants chose the sentence length they would give the defendant if he were to be found guilty. Then they completed the second dependent variable by rating the complainant's credibility. All participants completed those variables in the same order. Once those were completed, participants responded to attention checks before completing the ancillary dependent variables: rape myth acceptance, mental illness stigma, and obesity myths. These scales were counterbalanced within Qualtrics for each participant. Finally, participants completed a demographics questionnaire. The second independent variable, participant's sex, was determined by the demographic questionnaire.

Once the survey was completed, participants were directed to a list of resources for anyone struggling with intimate partner violence or sexual assault (See Appendix K). Finally, participants were thanked and reimbursed $1.75 for their participation.

Planned Analyses

Since participants were recruited from both SONA (college students) and mTurk (adults), a variable called data source was created post-hoc to examine possible differences between the college students and adults employed by mTurk. Preliminary analyses were conducted, which revealed differences between the two samples; thus, data source was added as an additional independent variable. A binary logistic regression was conducted in order to examine the main effects of participant sex, data source, and complainant outcome, as well as the combined interaction effects on participant verdicts. An ANOVA was conducted to examine the main effects of participant sex, data source, and complainant outcome, as well as the interaction effect on ratings of victim credibility. After evaluating the results from the ANOVAs, exploratory post-hoc tests were conducted to examine the effects of the ancillary variables, rape myth acceptance, mental illness stigma, and obesity myths, on the dependent variables.

Results

Victim Credibility

A 2x2x3 Analysis of Variance (ANOVA) was conducted to examine the main effects of participant sex, data source, and complainant outcome, as well as the interaction effect on ratings of victim credibility. The three-way ANOVA did not yield any significant main effects. There was a statistically significant interaction between data source and condition on victim credibility ratings, $F(2, 532) = 3.05$, $p < .047$, such that the mean victim credibility rating was significantly different among both groups in the depression + weight gain condition (SONA: $M = 40.26$, $SD = 9.1$; mTurk: $M = 34.75$, $SD = 13.45$), compared to their counterparts in the depression only (SONA: $M = 39.89$, $SD = 9.77$; mTurk: $M = 39.82$, $SD = 12.86$) and no outcomes conditions SONA: $M = 39.14$, $SD = 9.25$; mTurk: $M = 36.93$, $SD = 12.74$). Thus, credibility ratings were

higher for the students compared to the mTurkers in the depression + weight gain condition but not in the other two conditions.

These results did not support the hypothesis of a significant effect of sex on victim credibility ratings found in previous literature. Additionally, results from this ANOVA did not support the hypothesized significant interaction effect of complainant outcome and participant sex on victim credibility. Given the previously established trend in extant literature, it was surprising that this study did not yield a significant main effect of participant sex on victim credibility (i.e., whereby women normally find a female rape victim's testimony to have more credibility than men's perception). The lack of support for the hypothesized main effect and interaction effects could be due to differences among the sample sources, especially since the college sample was comprised of mainly women and the mTurk sample was comprised of mostly men. Further exploratory analyses found this speculation to be true. In order to provide more information regarding why the existing participant sex effect was not replicated in the current study, a Chi-square test of independence was conducted to evaluate the relationship between sex and data source. Results from the Chi-square test indicated that there was a significant relationship between participant sex in terms of how many women and men were in the sample and data source, X^2 (1, $N = 310$) = 74.53, $p < .001$. Thus, the two samples were significantly disproportionate in the number of males and females in them. This explains why the hypothesized main effect of participant sex on the dependent variables, based on the existing trends in literature, may not have been replicated. Further these two samples differed in average age in that the mean age for the SONA college-student participants was $M = 19.1$ ($SD = 1.9$ and the mTurk participants was $M = 40.5$ ($SD = 10.4$). Previous research suggests that younger

individuals tend to reject rape myths more often than older individuals (Johnson et al., 1997;

Burt, 1980).

Because of the disproportionate number of women and men in the SONA vs. mTurk

samples, additional exploratory analyses were run in order to explain the current study's failure

to replicate the typical gender effect for perception of victim's credibility. Thus, an additional

3x2 ANOVA was conducted to examine the effects of complainant outcome and participant sex

without splitting the sample into the different sources (SONA vs. mTurk). This exploratory

analysis detected a main effect of participant sex on victim credibility $F(1, 538) = 25.41$,

$p < .005$, such that women ($M = 40.59$, $SD = 10.75$) rendered higher ratings of victim credibility

than men ($M = 35.81$, $SD = 11.27$). Therefore, these additional post-hoc analyses suggest that the

uneven recruitment of men and women in the two sample sources skewed these findings.

Verdict

As the omnibus test on mock juror's delivery of verdict as outcome for this IPR, a binary

logistic regression was conducted in order to examine the main effects of participant sex (male

vs. female), data source (SONA vs. mTurk), and complainant outcome (no outcome/control vs.

depression vs. depression + weight gain), as well as the combined two-way and three-way

interaction effects. There was a significant main effect of data source on participant verdicts,

$\beta = -1.22$, p < .05, such that those in the SONA group rendered more guilty verdicts (77.5%)

than those in the mTurk group (59.1%). There was not a significant main effect of participant sex

or complainant outcome, or a significant two-way or three-way interaction effect on participant

verdicts. Among the total sample, 69.7% of individuals rendered a guilty verdict. These results

did not support the hypothesis of females rendering more guilty verdicts than males, as seen in

previous literature. Failure to replicate the significant gender effect in this study could be due to

differences among the sample sources. Although we did not have directional hypotheses concerning the main effect of complainant outcome on verdict, the current study results did not yield a significant main effect in either direction. Of note, the college student sample rendered higher ratings of victim credibility and more guilty verdicts than the mTurk sample.

Sentence Length

As the omnibus test for mock juror's sentencing length for the alleged perpetrator, a 2x2x3 ANOVA was conducted to examine the main effects of participant sex, data source, and complainant outcome, as well as the two-way and three-way interaction effects on sentence length. The three-way ANOVA did not yield a significant main effect of condition, $F(2, 369) = .148$, $p = .863$, source, $F(2, 369) = 1.84$, $p = .176$, nor sex, $F(2, 369) = .684$, $p = .409$, on sentence length. The three-way ANOVA did not yield a significant two-way interaction between sex and condition, $F(2, 369) = .271$, $p = .763$, nor sex and source, $F(2, 369) = 3.19$, $p = .075$, nor condition and source, $F(2, 369) = .451$, $p = .638$, on sentence length. Finally, the three-way ANOVA did not yield a significant three-way interaction between condition, sex, nor source on sentence length, $F(2, 369) = 1.34$, $p = .263$. Thus, each of the independent variables that were measured in this study had no effect on mock juror's sentencing length for the alleged perpetrator.

Exploratory Analyses

Verdict. Additional ancillary variables: rape myth acceptance (RMA; i.e., higher scores mean more rape myths "rejection"), mental illness stigma (MIS), and obesity myths (OMS) - were measured in this study in order to potentially inform the results from the main analyses. A point biserial correlation was conducted to evaluate the relationship between these variables and

verdict. The ancillary variables, RMA ($r = .27$, $p < .001$), MIS ($r = -.32$, $p < .001$), and OMS ($r = -.37$, $p < .001$) were significantly correlated with guilty verdicts.

Victim Credibility. The ancillary variables were significantly correlated with ratings of victim credibility, RMA ($r = .40$, $p < .001$), MIS ($r = -.41$, $p < .001$), and OMS ($r = -.41$, $p < .001$). RMA, MIS, and OMS were entered as predictors in a linear regression model with victim credibility as the outcome variable. These variables accounted for 23% of the variance in victim credibility ratings, $F(3, 538) = 54.67$, $p < .05$. Rape myth acceptance, $\beta = .11$, t $= .221$, $p < .05$, mental illness stigma, $\beta = -.25$, t $= -3.41$, $p < .05$, and obesity myths, $\beta = -.22$, t $= -3.32$, $p < .05$, were all found to be significant predictors of victim credibility ratings.

RMA by Sex and Data Source. In order to better understand the failure to replicate the participant gender effect whereby women tend to render more victim credibility to female rape victims than men, we used these ancillary scales in additional exploratory analyses. A two-way ANOVA was conducted to examine whether there were sex and source differences in endorsement of RMA. There was a significant main effect of data source on RMA, $F(1, 540) = 9.73$, $p = .002$, such that individuals in the SONA group yielded higher scores on the RMA scale ($M = 87.36$, $SD = 18.79$) compared to the mTurk group ($M = 80.26$, $SD = 24.49$). Given how this scale is constructed, with lower scores reflecting higher levels of rape myth acceptance, this indicates that the college students held lower levels of rape myth acceptance than those in the mTurk group. There was not a significant main effect of participant sex or a significant interaction effect between participant sex and data source on RMA. Thus, the SONA college sample, mainly composed of women – who also held more rape myths "rejection" – were also perceiving this woman, who had experienced intimate partner rape, to be more credible in her legal accusations against the alleged perpetrator.

MIS by Sex and Data Source. To further investigate the results of the current study, a two-way ANOVA was conducted in order to evaluate the effect of participant sex and data source on mental illness stigma. There was a significant main effect of participant sex on MIS, $F(1, 540) = 16.88$, $p < .001$, such that men held higher levels of MIS ($M = 21.00$, $SD = 8.84$) compared to women ($M = 16.12$, $SD = 7.25$). There was also a significant main effect of data source on MIS, $F(1, 540) = 64.21$, $p < .001$, such that individuals in the mTurk group held higher levels of MIS ($M = 21.86$, $SD = 10.07$) compared to the SONA group ($M = 15.3$, $SD = 5.07$). There was not a significant interaction effect between participant sex and data source on MIS. Of note, the college student sample was collected from the psychology study participant pool, which consists of individuals in psychology courses. Therefore, these individuals may care more compassionately about mental illness or have more information regarding the stigmatization of mental illness than individuals in the community sample – which could explain why there were higher levels of mental illness stigma in the mTurk group.

OMS by Sex and Data Source. Another two-way ANOVA was conducted to examine the effect of participant sex and data source on obesity myth acceptance in order to provide further context for the current study's results. There were significant differences in OMS based on participant sex, $F(1, 538) = 17.35$, $p < .001$, such that men held higher levels of OMS ($M = 19.27$, $SD = 9.09$) compared to women ($M = 14.5$, $SD = 8.28$). There were significant differences in OMS based on data source, $F(1, 538) = 25.28$, $p < .001$, such that individuals in the mTurk group held higher levels of OMS ($M = 19.42$, $SD = 10.36$) compared to the SONA group ($M = 14.20$, $SD = 6.87$). There was not a significant interaction effect between participant sex and data source on OMS. Thus, individuals in the community sample adhered to more obesity myths than those in the college student sample.

Overall, it appears that individuals in the college student sample held lower levels of each potential bias (e.g., rape myth acceptance, mental illness stigma, & obesity myths) compared to those in the community sample. This could help explain why the effect of data source on the main dependent variables (e.g., victim credibility, verdict) overpowered the existing effect of participant sex on these variables in the literature. Additionally, it appears that women tend to hold lower levels of mental illness and obesity myths compared to men.

Discussion

Intimate partner rape (IPR) is a major public health concern that is often overlooked by the general public and the legal system as a legitimate crime. IPR has many deleterious consequences for victims, including depression and weight gain that were assessed in this study (Fogarty et al., 2008; Ouellet-Morin et al., 2015; Watkins et al., 2014; Clark et al., 2014; Mason et al., 2017). Previous research has indicated that mental illness and weight status may impact juror perceptions of victim credibility in cases of IPR and subsequently verdicts in those cases (Monteith & Pettit, 201; Yamawaki et al., 2018; Yang et al., 2020; Zidenberg et al., 2019). Given that these are common outcomes of IPR and that there is evidence to suggest that stigma regarding mental illness and weight status may affect judgments of individuals posing as mock jurors, the current study aimed to evaluate the influence of the victim's depression and weight gain on mock jurors' decision of defendant's guilt and how they perceived the woman's credibility. Based on the established trend in the literature of women rendering higher ratings of victim credibility and more guilty verdicts in cases of IPR than men, the current study also evaluated the impact of juror sex on credibility ratings and verdict decisions. In order to determine the impact of IPR causing the sequelae of depression onset – as well as physical weight gain - on juror perceptions of victim credibility and subsequent verdicts, participants were

presented with a vignette depicting a case of IPR in which the alleged victim either testified that she experienced no outcomes, depression only, or depression and weight gain as a result of the event.

Effect of Having Two Population Sample Sources

Given that data was collected from different sources, college students and adult mTurk workers, data source was added as an additional independent variable in the analyses to determine if this was impacting these results. It did. Based on the previously mentioned post-hoc analyses, the different numbers of men and women in the two samples may have had a skewing effect on this study's outcomes. In addition to the imbalances in male and female participants' sample sizes from each sample source, other factors (e.g., current context, education level, political affiliation) may have been driving these results.

College students may be more informed regarding the nuances of sexual assault and the #MeToo movement, which is a contemporary movement aimed to expose the destructive climate that allows sexual harassment and sexual assault on women. This knowledge may act as a protective factor for college students against biases such as rape myth acceptance. Additionally, college students may be more aware of socially appropriate responses to the bias scales that were included (i.e., they may have succumbed to demand characteristics knowing how to be more "politically correct"). Thus, a college student may read an item from the RMA scale (e.g., "A lot of times, girls who say they were raped agreed to have sex and then regret it") and would recognize that the socially acceptable or "right" answer is to disagree. Exploratory analyses revealed that levels of bias (e.g., RMA, MIS, OMS) were dependent on data source (college sample vs. mTurk), such that individuals in the mTurk group held higher levels of each possible bias compared to those in the college sample. This could account for the differences in verdict

and credibility ratings between the college student sample and the mTurk sample and explain the other findings from the current study.

Participant Sex

Previous research revealed a trend in which women tended to render more guilty verdicts and higher ratings of victim credibility than men (Lynch et al., 2018; Russell et al., 2012; Stanziani et al., 2017). Given this established trend, the current study hypothesized that females would yield more guilty verdicts and higher credibility ratings than males. Results from the analyses did not support our hypothesis or the findings from previous literature. When considering participant sex, data source, and complainant outcome, the only variable that had impacted verdict decisions and victim credibility ratings was data source. Based on the previously mentioned exploratory analyses, failure to replicate the gender effect was likely due to the disproportionate breakdown of women and men in each sample, with the mTurk group being predominantly male and the SONA group being predominantly female.

Also, per exploratory analyses, when examining both samples combined as a whole – rather than split by college students versus mTurk workers – participant sex influenced ratings of victim credibility, such that women rendered higher ratings of victim credibility than their male counterparts, consistent with the trends in previous literature. Therefore, the effect of data source seemed to have overpowered the established effect of mock juror sex on victim credibility ratings. Specifically, the effect of data source (e.g., college students rendering higher ratings of victim credibility & more guilty verdicts) may have been stronger than the established trend in literature of female jurors being more lenient toward victims and more stringent toward defendants compared to male jurors. Thus, the sex of mock jurors matters - but that may also interact with other demographic differences such as age and SES between the samples - and their

level of adherence to biases such as rape myth acceptance, mental illness stigma, and obesity

myths. Of note, it was established that participants from mTurk were also substantially older and

in mid-life, whereas the college students were emerging adults. Unfortunately, factors that may

have contributed to these mock jurors' decision, such as income and education levels, were not

measured.

Complainant Outcome Effect

Given the mixed findings in the literature regarding weight stigma and since our

manipulation of weight gain and depression was an outcome of the sexual assault, rather than a

preexisting state of having a larger body size or being depressed, the current study did not have

specific directional hypotheses for the effect of complainant outcome on verdict and victim

credibility. Results suggested that complainant outcome (e.g., no outcome, depression,

depression + weight gain) did not influence juror perceptions of victim credibility in either

direction (increasing or decreasing). This could be due to the previously mentioned reasoning

that this study included weight and mental illness as sequelae of the intimate partner rape, rather

than as being established at the time of the intimate partner rape. If participants were sympathetic

that these are true outcomes of a sexual assault, then there may be more guilty verdicts and

higher ratings of victim credibility. In this case, the outcomes of the intimate partner rape may

work as "confirming factors" for the complainant's story; thus, enhancing her credibility, which

could lead the mock jurors to render more guilty verdicts.

The mixed findings on how weight affects verdicts and ratings of victim credibility in the

literature led us to include ancillary measures - such as rape myth acceptance, mental illness

stigma, and obesity myths - in the current study. If weight and mental illness stigma were

involved, then participants may render more "not guilty" verdict decisions and lower ratings of

complainant credibility due to the biases they hold against individuals who are overweight and who have mental illnesses. These are secondary variables and were explored as potential moderating factors. These variables were found to be significant predictors of victim credibility ratings, which indicates that the depression and weight gain may have acted as "confirming factors" for the victim's testimony. It is possible that the tangible consequences of developing depression and/or gaining weight as a result of the rape provided credibility to the complainant's testimony, which could explain why the study failed to find that complainant outcomes influenced verdicts decisions, credibility ratings, or sentence length.

Results from this study failed to replicate the sex trend found in previous literature (Lynch et al., 2018; Russell et al., 2012; Stanziani et al., 2017), suggesting that female jurors – compared to male jurors - tend to believe women's stories more when they have been raped by their partner and female jurors – compared to males - are more likely to view the perpetrator as guilty when these cases reach trial. The current study showed that college students vs. adults who are employed on mTurk tend to view complainant outcomes in these cases of intimate partner rape differently. Additionally, results from this study did not find that complainant outcomes influenced the main dependent variables, despite previous literature indicating that mental illness and weight status may impact judgments of credibility and verdicts in cases of IPR. This may suggest that when a victim develops mental illness or gains weight as a result of experiencing IPR, these conditions may act as "confirming factors" for her story and lead to jurors perceiving her as more credible, which could lead to more guilty verdicts in her case. Further, the secondary variables in this study (e.g., RMA, OMS, and MIS) were correlated with the main dependent variables, which could further indicate that the victim's depression and weight gain were confirmatory and added credibility to her testimony of the event. Future research should consider

directly testing whether developing common consequences associated with IPV versus pre-existing conditions at the time of the event have an impact on credibility ratings and verdict decisions. Future studies may also benefit from directly testing what juror characteristics impact ratings of victim credibility and subsequent verdicts, such as biases, education level, political affiliation, age, sex, etc.

Limitations

The current study includes a number of limitations. First, the study is limited by the artificiality of a trial vignette as opposed to real juror decisions. This study required mock jurors to read a vignette and make a decision independently, which may not generalize to actual jurors attending a trial, complete with opening statements, direct and cross-examinations, closing statements, and juror instructions, as well as deliberating with other jurors to reach a verdict. There are many complexities present when considering the dynamics of an actual court case, such as how jurors make decisions, given their personal backgrounds and the backgrounds of the other jury members, the context of the crime, and how the evidence and testimonies are presented during the case. A vignette study could not replicate these factors.

Additionally, the study did not include a manipulation check in order to evaluate whether participants clearly noted the complainant's outcome in her testimony; thus, it cannot be determined whether the manipulation of complainant outcome was successful and whether participants perceived that she developed no outcomes, depression only, or depression and weight gain as a direct result of the event. If the manipulation was not successful, this could account for the lack of any significant main effects of complainant outcome on the dependent variables; however, without a manipulation check, we cannot be sure.

The results from this study are confounded based on the two different samples (e.g., college students vs. mTurk workers). Data was intended to be collected solely on mTurk in order to obtain a community sample that would be most representative of a jury; however, due to time constraints related to completing a student's thesis, funding issues, and the university withholding access to online survey platforms (e.g., Prolific), we began collecting data using the university's participant pool. However, we did not include items to assess for possible differences among the two samples (e.g., income, education level, political orientation) in order to account for any differences among the two groups on the main dependent variables. Thus, we are unable to make direct claims regarding the differences between the two groups.

Implications

The limitations discussed above led us to collect additional data from men on SONA in an attempt to improve the sex breakdown within the college sample to test these variables and hypotheses with a balanced sample. Gathering a more gender balanced sample will allow us to see if this research has implications for understanding how jurors make decisions in cases of intimate partner rape. It will also reveal whether the information we find will have the potential to reduce the amount of secondary victimization and victim blaming that accompanies these cases in the justice system. Previous literature has established a trend of juror sex impacting victim credibility ratings and verdicts, with females being more lenient toward the victim and more stringent toward the defendant. However, this study revealed that although sex is important to consider, other variables may be at play, such as education level, and these variables should be addressed when attempting to understand how jurors make decisions in cases of IPR. This information can then be used to design and implement better protocols for handling these cases in the justice system, such as better juror instructions, to ensure that the facts of the case are

determining the verdict, rather than external factors and biases (e.g., RMA, OMS, & MIS), given that our bias variables predicted victim credibility ratings. In turn, this could increase victim willingness to pursue charges against their abuser. Additionally, information regarding factors that influence juror decision making in IPR cases can help prosecutors prepare the complainant for trial by aiding the complainant with strategies that enhance credibility (e.g., demeanor during testimony). Finally, results from the study can inform juror selection processes. Given that this study found an effect of data source (college students vs. mTurk workers) on verdicts and victim credibility, higher levels of RMA, OMS, and MIS among the community sample compared to the college sample, as well as finding the three aforementioned ancillary variables to be significant predictors of victim credibility ratings, prosecutors can use this information when selecting jurors to ensure that jurors will not be biased against the complainant.

Future Directions

Given the differences among the college students and the mTurk workers, future studies could benefit from further analysis of this distinction by including variables to assess education level, political affiliation, their current context (college student vs. other adulthood), and other constructs that these two groups may differ on that could contribute to their decisions regarding verdicts and victim credibility in cases of intimate partner rape. Additionally, it would be helpful to include manipulation checks in future studies, in order to explain the presence or lack of any main effects of complainant outcomes on verdicts or ratings of victim credibility. Given the failure to find a main effect of complainant outcomes on the dependent variables in this study, it could be beneficial to construct a study that directly examines how including a weight manipulation at the time of the rape (as in the studies previously mentioned) versus manipulating

weight as a result of the rape (as in the current study) affects juror decision making regarding

verdicts and ratings of credibility.

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Appendix A

IRB Approval

STUDY #: 21-0026

STUDY TITLE: Juror Perceptions of Victim Credibility in Cases of Intimate Partner Rape

Submission Type: Initial

Expedited Category: (7) Research on Group Characteristics or Behavior, or Surveys, Interviews, etc.

Approval Date: 9/11/2020

NOTE: This project, like all exempt and non-exempt research with human subjects at Appalachian State University, is subject to other requirements, laws, regulations, policies , and guidelines of the University and the state of North Carolina. As of August 24, 2020 and until further notice, this includes the requirement by the Office of Research to pause in-person research projects until it receives an additional review to ensure the existence of an adequate COVID-19 mitigation protocol. Please see the full requirement on the [Research Protections website](#), as well as answers to questions you may have. The Institutional Review Board (IRB) approved this study. The IRB found that the research procedures carry no more than minimal risk and meet the expedited category or categories cited above. This approval applies to the life of the study, and you do not need to submit an annual request for renewal. You are required to request approval for any changes you may make to the study in the future, as described below in the section on Modifications and Addendums.

IRB approval is limited to the activities described in the IRB approved materials, and extends to the performance of the described activities in the sites identified in the IRB application. In accordance with this approval, additional IRB findings and approval conditions for the conduct of this research may be listed below.

Appendix B

Vignette

You are about to read a summary of a trial involving an allegation of rape.

The complainant, Ava Scott, and the defendant, Nathan Williams, were in a relationship for two years. They often spent the night at each other's apartments during the week over the course of those two years. On the particular morning in question, the defendant and complainant had sex, but they disagree about whether it was consensual. Following the incident, the complainant reported to the police that she had been raped. The defendant willingly went to the police station without a lawyer to answer questions regarding the investigation.

At trial, the complainant testified that the defendant joined her in the shower of her apartment one morning and began touching and kissing her. She said that she told him no and attempted to leave the shower to continue getting ready for work. The complainant explained that the defendant blocked her exit and continued kissing her, despite her saying "no" over and over. She pushed him away and managed to leave the shower but stated that the defendant followed her to the bedroom and pushed her down onto the bed. She said that he held her hands down and began having sex with her. She stated that she told him to stop repeatedly but he did not listen and became more aggressive.

No Outcome: The complainant reported that this event was extremely distressing.

Depression: The complainant reported that this event was extremely distressing. She reported that her medical doctor diagnosed her with depression that was a direct result of the incident. The complainant's medical doctor is concerned that Ava's depression will harm her health.

Depression + Weight Gain: The complainant reported that this event was extremely distressing. She reported that her medical doctor diagnosed her with depression that was a direct result of the incident. She also reported that her eating has changed and she has gained weight. The complainant's medical doctor is concerned that Ava's depression and significant weight gain will harm her health.

During the cross examination of the complainant, the defense attorney inquired whether the complainant had ever said "no" to the defendant's sexual advances, only to eventually have consensual sex with him. The complainant answered "yes." The defense attorney stated that in long-term relationships, sex drives often differ and when one partner is not initially "in the mood" for sex, they tend to warm up to sex anyway because of complicit consent with their partner. The defense attorney suggested that this was the case on the night in question.

The defendant testified that the sex between him and the complainant was consensual. He stated that they often stayed with each other on weeknights and then showered together in the morning before work. The defendant explained that the complainant initially said she couldn't do "it" when he started kissing her because she was running late; however, he said her words were playful and indicated that she didn't mean "no." He reported that they both moved from the shower to the bed and had consensual sex, like they have done multiple times in the two years

that they have been dating. During his testimony and the cross-examination, the defendant denied using any force.

   In summation, the defense attorney repeated that the incident in question was not a case of rape, but rather, a case of differing sex drives leading to consensual sex in the context of a long-term relationship. The prosecution maintained that the defendant forcibly raped the complainant.

Appendix C

Verdict (V)

The defendant has been charged with second-degree forcible rape. This is defined by engaging in vaginal intercourse with another person; either by force and against the will of the other person; or who is mentally disabled, mentally incapacitated, or physically helpless or when the individual should reasonably know the other person is mentally disabled, mentally incapacitated, or physically helpless.

Please render your verdict for the case. Choose one:

The defendant is guilty of second-degree forcible rape.

The defendant is not guilty of second-degree forcible rape.

Appendix D

Sentencing

If this person were found guilty, what sentence would you recommend?

44 months -- 182 months

Appendix E

Victim Credibility Scale (VCS)

Please rate the following statements using the scale below.

1 = Strongly Disagree 2 = Disagree 3 = Slightly Disagree 4 = Neutral 5 = Slightly Agree 6 =

Agree 7 = Strongly Agree

A. The complainant is doubtful.

B. The complainant is dependable.

C. The complainant is reliable.

D. The complainant is trustful.

E. The complainant is credible.

F. The complainant is deceptive.

G. The complainant is honest.

H. The complainant is lying.

Appendix F

Attention Checks

1. Were Ava and Nathan in a long-term relationship?

    a. Yes

    b. No

2. Answer "3" here.

    a. 1

    b. 2

    c. 3

    d. 4

3. Where did the alleged rape occur?

    a. A party

    b. Nathan's home

    c. College Dorm

    d. Ava's apartment

Appendix G

Illinois Rape Myth Acceptance Scale (IRMA)

Please rate the following statements using the scale below.

1 = Strongly Agree 2 = Agree 3 = Neutral 4 = Disagree 5 = Strongly Disagree

Subscale 1: She asked for it

1. If a girl is raped while she is drunk, she is at least somewhat responsible for letting things get out of hand.

2. When girls go to parties wearing slutty clothes, they are asking for trouble.

3. If a girl goes to a room alone with a guy at a party, it is her own fault if she is raped.

4. If a girl acts like a slut, eventually she is going to get into trouble.

5. When girls get raped, it's often because the way they said "no" was unclear.

6. If a girl initiates kissing or hooking up, she should not be surprised if a guy assumes she wants to have sex.

Subscale 2: He didn't mean to

7. When guys rape, it is usually because of their strong desire for sex.

8. Guys don't usually intend to force sex on a girl, but sometimes they get too sexually carried away.

9. Rape happens when a guy's sex drive goes out of control.

10. If a guy is drunk, he might rape someone unintentionally.

11. It shouldn't be considered rape if a guy is drunk and didn't realize what

he was doing.

12. If both people are drunk, it can't be rape.

Subscale 3: It wasn't really rape

13. If a girl doesn't physically resist sex—even if protesting verbally—it can't be considered rape.

14. If a girl doesn't physically fight back, you can't really say it was rape.

15. A rape probably doesn't happen if a girl doesn't have any bruises or marks.

16. If the accused "rapist" doesn't have a weapon, you really can't call it rape.

17. If a girl doesn't say "no" she can't claim rape.

Subscale 4: She lied

18. A lot of times, girls who say they were raped agreed to have sex and then regret it.

19. Rape accusations are often used as a way of getting back at guys.

20. A lot of times, girls who say they were raped often led the guy on and then had regrets.

21. A lot of times, girls who claim they were raped have emotional problems.

22. Girls who are caught cheating on their boyfriends sometimes claim it was rape.

Appendix H

Mental Illness Stigma Scale (MISS)

Please rate the following statements using the scale below.

1 = Strongly Disagree 2 = Disagree 3 = Slightly Disagree 4 = Neutral 5 = Slightly Agree 6 =

Agree 7 = Strongly Agree

1. If I had a mental illness, I wouldn't tell anyone.

2. People with mental illness are unpredictable.

3. I would avoid people with mental illness.

4. People with mental illness are dangerous.

5. Mental illness is not a real medical illness.

6. Mental illness is a sign of personal weakness.

7. People with mental illness can snap out of it.

Appendix I

Obesity Myths Scale (OMS)

Please rate the following statements using the scale below.

1 = Strongly Disagree 2 = Disagree 3 = Slightly Disagree 4 = Neutral 5 = Slightly Agree 6 =

Agree 7 = Strongly Agree

1. Obese people are desperate for attention

2. Obese people appreciate any kind of affection.

3. Obese people are insecure and don't pursue romantic affection.

4. Obese people don't mind being taken advantage of.

5. Obese people aggressively seek attention.

6. In general, people never feel attracted to obese individuals.

7. Obese people make up stories to prove they are desirable.

Appendix J

Demographic Questionnaire

Age: _____

Sex: Female
    Male
    Intersex/Non-Conforming Person
    I prefer not to answer

Race/Ethnicity: Asian or Pacific Islander
              Black or African American
              Hispanic or Latino
              White/Caucasian
              Native American
              Bi or Multi-Racial
              I prefer not to answer

Zip Code: _____

Have you ever previously served on a jury?
Yes
No

During your lifetime, have you ever experienced…(mark all that apply)

Physical abuse in the family in which you were raised
Verbal abuse in the family in which you were raised
Sexual abuse in the family in which you were raised
Sexual assault or rape
Physical abuse by a partner/spouse
Verbal abuse by a partner/spouse
Sexual abuse by a partner/spouse
I have never experienced any of the above situations

Do you have a history of depression?
Yes
No

Do you have a history of weight concerns?
Yes
No

Appendix K

Intimate Partner Violence Resources

National Domestic Violence Hotline
- https://www.thehotline.org/
- 1-800-799-7233
- 1-800-787-3224 (TYY)

National Sexual Assault Hotline (RAINN)
- www.rainn.org
- 1-800-656-4673 – hotline
- Secure online chat at https://ohl.rainn.org.online

National Center on Domestic Violence, Trauma, & Mental Health
- http://www.nationalcenterdvtraumamh.org/resources/national-domestic-violence-organizations/

Family and Youth Services Bureau – Getting Help with Domestic Violence
- https://www.acf.hhs.gov/fysb/resource/help-fv

Appalachian State University Counseling Center (For ASU Students)
- https://counseling.appstate.edu/
- 1st Floor, Miles Annas Building, P.O. Box 32044, 614 Howard Street, Boone, NC 28608
- Phone: 828-262-3180
- Fax: (828)-262-3182

Vita

Kimberlin Laine Walton was born in Wilkesboro, North Carolina to Chris and Danielle Nichols. She attended Wake Forest University and was awarded the Bachelor of Arts in Psychology, as well as Sociology in May 2017. She later earned a Master of Arts in Forensic Psychology from The George Washington University in August 2018. Ms. Walton then accepted a position in Appalachian State University's clinical psychology Psy.D. program and began study toward a Master of Arts in clinical psychology. The M.A. was awarded in August 2021.