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Perceptions of Intimate Partner Violence: The Role of Gender, Sexual Orientation, and Social Norms

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I stand on the sacrifices of a million women before me,
thinking what I can do to make this mountain taller
so the women after me can see farther.

- Rupi Kaur

Table of Contents

Introduction 5

Chapter 1: Theoretical Framework 8

1.1 Intimate Partner Violence (IPV) 8

1.2 Theoretical Foundations 9

1.3 Perceptions of IPV and Gender 11

1.4 IPV in LGBTQ+ Relationships 13

1.5 Stigma and Help-Seeking 15

1.6 Masculinity, Patriarchy, and Social Expectations 18

Chapter 2: Methodology 21

2.1 Research Design 21

2.2 Sampling Strategy 22

2.3 Interview and Vignette Design 25

2.4 Data Collection and Analysis Procedure 27

2.5 Ethical Considerations and Reflexivity 29

Chapter 3: Results 31

3.1 Gendered Perceptions of IPV 32

3.2 Recognition of IPV and Anticipated Social Responses 37

3.3 Help-Seeking Barriers and Sources of Support 41

Chapter 4: Discussion 48

4.1 Gender Norms and Perceptions of IPV 48

4.2 Social Recognition, Credibility, and Victimhood 54

4.3 Stigma, Help-Seeking, and Structural Barriers 60

Conclusion 64

References 72

Appendix 75

Introduction

Intimate partner violence (IPV) is a serious social and human rights issue that affects people across different genders, sexual orientations, cultures, and socioeconomic backgrounds. According to the World Health Organization (2021), IPV is one of the most widespread forms of violence worldwide, yet the experiences of many victims remain overlooked. Early research mainly focused on the traditional view of IPV, where women are seen as victims and men as perpetrators. However, more recent research has shown that this view is too limited and does not fully represent the experiences of male victims or individuals within the LGBTQ+ community, who often face unique forms of stigma and different barriers when seeking help (Messinger, 2011).

This study explores *how perceptions of intimate partner violence (IPV) vary depending on the victim's gender and sexual orientation*. In this thesis, *intimate partner violence (IPV)* is defined as physical, psychological, or sexual harm caused by a current or former intimate partner. *Perceptions* refer to judgments of seriousness, blame, credibility, empathy toward victims, and attitudes toward seeking help. A vignette-based qualitative design is used to examine how participants interpret different IPV scenarios involving heterosexual female, heterosexual male, lesbian female, and gay male victims.

Societal views of IPV are strongly shaped by traditional gender roles and heteronormative beliefs. Because of these assumptions, male victims or victims in same-sex relationships are often misunderstood or not seen as "real" victims. Men may fear being judged, not believed, or seen as weak if they speak up. LGBTQ+ individuals can face additional barriers such as homophobia, fear of being outed, or worrying that services will not understand their situation. As a result, male and LGBTQ+ victims often remain less visible and may have more difficulty accessing appropriate support.

Although there has been more recent work aimed at creating a more inclusive

understanding of IPV, important gaps remain. Researchers have started to look at how gender roles and cultural expectations influence how IPV is perceived, reported, and handled, but there is still limited knowledge about how people view IPV involving victims of different genders and sexual orientations.

The aim of this study is to explore how perceptions of IPV differ depending on who the victim is, by comparing participants' responses across four vignettes. The study focuses on perceptions of severity, attribution of blame, victim credibility, empathy toward victims, and recommendations for help-seeking and support. By comparing these perceptions across cases, this thesis explores how social norms, biases, and stigma shape understandings of IPV.

Understanding social attitudes toward IPV is important because these attitudes strongly influence whether victims feel able to seek help and the type of support they receive (Overstreet & Quinn, 2016). If male or LGBTQ+ victims are perceived as less credible or blamed for the abuse, they may be less likely to disclose their experiences, reinforcing a culture of silence and unequal access to support (Seelau & Seelau, 2005). Therefore, understanding these perceptions is necessary to address broader issues, such as structural and cultural barriers that create inequalities. Insights from this research can inform professionals and help to develop more inclusive support systems and policies.

The structure of this thesis is as follows. Chapter 1 provides the theoretical framework and reviews the existing literature relating to perceptions of IPV and gender, IPV in LGBTQ+ relationships, stigma and help-seeking, and the role of masculinity and patriarchy. Chapter 2 outlines the methodology and explains the use of vignettes and semi-structured interviews. Chapter 3 presents the findings of the thematic analysis. Chapter 4 discusses these findings in relation to existing literature and theoretical perspectives. Finally, Chapter 5 summarizes the main conclusions, discusses implications for support services and professional practice, considers the strengths and limitations of the study, reflects on the research process, and

suggests directions for future research.

By examining how gender and sexual orientation influence perceptions of IPV, this thesis aims to contribute to a more inclusive and fair understanding of IPV, both in research and in support services.

Chapter 1: Theoretical Framework

This chapter provides the theoretical and empirical background for the present study. It begins by defining intimate partner violence and introducing key theoretical perspectives relevant to understanding IPV. The chapter then reviews literature on perceptions of IPV and gender, IPV in LGBTQ+ relationships, stigma and help-seeking, and the role of masculinity and patriarchy in shaping experiences of violence and victimization. Together, these perspectives provide a foundation for examining how perceptions of IPV may vary according to the gender and sexual orientation of the victim.

1.1 Intimate Partner Violence (IPV)

Intimate partner violence (IPV) refers to any form of physical, emotional, psychological, sexual, or economic abuse that occurs between people who are or have been in an intimate or romantic relationship (World Health Organization, 2021). IPV includes behaviors such as hitting, pushing, threats, intimidation, insults, humiliation, forced or pressured sexual acts, controlling access to money, monitoring and controlling behavior, and isolating a partner from family or friends (Johnson, 2012). These forms of violence often occur together, and they can escalate over time.

Perceptions of IPV are often shaped by gendered assumptions. Social stereotypes often assume that women are victims and men are perpetrators. Research suggests that men are statistically more likely to cause severe physical harm because of physical strength differences (Archer, 2000), while women may be more likely to engage in forms of psychological or emotional aggression that do not leave visible injuries (Straus, 2004). Because psychological abuse is harder to identify, society often underestimates its seriousness or overlooks it completely. At the same time, men who experience violence often struggle to be recognized as victims due to stigma and traditional gender expectations (Seelau & Seelau, 2005). These

gendered assumptions reinforce the belief that IPV is an issue that only affects heterosexual women, even though individuals of any gender or sexual orientation can experience it.

Another important aspect of IPV is that abuse can be unidirectional or bidirectional. Some relationships involve violence perpetrated by one partner, whereas others involve aggression from both partners. Bidirectional IPV is often minimized or ignored in policy and practice, despite research showing that it is relatively common (Bates, 2016). Recognizing bidirectional violence is important because it challenges the idea that IPV always follows a simple "victim–perpetrator" pattern and helps show how different couples may experience violence in different ways.

Overall, IPV is a complex phenomenon shaped by social norms, gender expectations, and broader power relations. Understanding these influences is important for examining how abuse is recognized, interpreted, and responded to across different victim groups. The following section introduces the theoretical perspectives that provide a foundation for understanding perceptions of IPV.

1.2 Theoretical Foundations

Several theoretical perspectives help explain how intimate partner violence is understood, experienced, and perceived.

Feminist Theory. Feminist theory focuses on how patriarchy and gender inequality shape violence within intimate relationships. It explains how cultural norms grant men greater power and how this imbalance can contribute to violence against women (Dobash & Dobash, 1979). Feminist perspectives also highlight how certain victims receive more recognition than others, as society often expects women to be victims and men to be perpetrators. As a result, male and LGBTQ+ victims are frequently overlooked because traditional frameworks focus primarily on women's victimization.

Hegemonic Masculinity. Connell's (2005) concept of hegemonic masculinity describes dominant expectations of manhood, such as strength, emotional restraint, and control. These expectations can make it difficult for men to ask for help or admit vulnerability. They also influence how people judge victims and perpetrators, particularly when situations do not align with traditional gender norms. These norms may also contribute to attitudes that normalize control, dominance, or aggression within intimate relationships.

Inclusive Masculinity. Anderson (2010) argues that as societies become more open and less homophobic, men may feel more comfortable expressing emotions and rejecting rigid gender roles. This perspective indicates that masculinity is not always linked to dominance or violence and helps explain why attitudes toward male victims and same-sex IPV may be gradually changing.

Minority Stress Theory. Minority Stress Theory explains how LGBTQ+ individuals experience additional stress due to stigma, discrimination, or fear of being outed (Meyer, 2003). These pressures can make abusive relationships harder to leave and more difficult to disclose. This theory is particularly useful for understanding why LGBTQ+ victims may face additional barriers when seeking help.

Stigma and the IPV Stigmatization Model. Overstreet and Quinn (2016) describe how stigma affects victims of IPV by distinguishing between anticipated stigma (fear of judgment), enacted stigma (experiences of discrimination), and internalized stigma (acceptance of negative stereotypes). These forms of stigma can discourage victims from seeking help and help explain why individuals who do not fit the "ideal victim" stereotype, including men and LGBTQ+ individuals, may be less likely to disclose abuse.

Intersectionality. Crenshaw's (1991) concept of intersectionality highlights how intersecting identities such as gender, sexuality, class, or immigration status shape experiences of violence. Applying an intersectional lens to IPV allows for a better understanding of how overlapping

identities influence experiences of victimization, access to services, institutional responses, and societal recognition.

Together, these theories illustrate why experiences of IPV differ across individuals and why some victims are more readily recognized than others. They also emphasize the importance of moving beyond traditional gender roles to understand how social norms and structural inequalities shape perceptions of IPV.

1.3 Perceptions of IPV and Gender

Intimate partner violence (IPV) has traditionally been viewed through a heteronormative lens, in which men are seen as perpetrators and women as victims. However, research increasingly shows that this perspective is too limited and that experiences of IPV are far more complex, particularly when gender and sexual orientation are taken into account.

Seelau and Seelau (2005) examined how gender and sexual orientation influence perceptions of IPV. They found that female victims are generally perceived as more credible and more deserving of support than male victims. In their study, participants evaluated written vignettes describing domestic violence in heterosexual, gay, and lesbian relationships. Participants were asked to assess the seriousness of the violence, attribute blame, and suggest appropriate interventions. The findings showed that gender-role stereotypes strongly shaped these evaluations, with victim gender emerging as the strongest predictor of judgment. As a result, abuse against men was often minimized, and same-sex violence was interpreted through a heteronormative framework.

Taylor, Bates, Colosi, and Creer (2022) reported similar findings, showing that male victims face multiple barriers when seeking help. Through interviews with men who had experienced domestic abuse and professionals working in support services, the study found that stigma, fear of disbelief, and concerns about appearing weak or emasculated discouraged

disclosure. Many participants described feelings of shame and concern that their experiences would not be taken seriously. These findings illustrate how traditional masculinity norms continue to limit men's willingness and ability to seek support following abuse.

Bates (2016) highlights that one of the key challenges in IPV research and practice is the frequent neglect of bidirectional violence. Although violence can occur in both directions within a relationship, policies and services often continue to assume a male perpetrator and a female victim. Consequently, male victims may be overlooked, and risk assessments may fail to capture the complexity of violent dynamics. This omission reflects how deeply social assumptions continue to shape judgments of seriousness, blame, and credibility.

Archer's (2000) meta-analysis compared studies of aggression between men and women in heterosexual relationships. The findings showed that while both men and women may engage in physical aggression, men are more likely to cause serious injury due to greater physical strength. However, the analysis also suggested that violence perpetrated by men is often judged as more serious, even when the level of harm is comparable. This helps explain why male-to-female violence is typically perceived as more severe and why female victims are more readily seen as deserving support.

Lysova et al. (2022) explored barriers to help-seeking among men who experienced abuse in intimate relationships across four countries. Their interviews identified both internal barriers, such as shame, fear of judgment, and uncertainty about whether experiences constituted abuse, and external barriers, including negative responses from police and support services. The study demonstrates how masculinity stereotypes can silence male victims and discourage help-seeking.

Overall, these studies show that gender stereotypes continue to play a significant role in shaping how IPV is perceived and responded to. Male victims are frequently overlooked, and violence against them is often minimized or dismissed. This body of research highlights

the need to broaden definitions of victimhood and to recognize how social expectations about gender influence credibility, empathy, and access to support. These findings directly inform the vignette design of the present study, in which victim gender is systematically varied to examine how such stereotypes shape participants' judgments of seriousness, blame, and credibility.

1.4 IPV in LGBTQ+ Relationships

Although research on LGBTQ+ IPV has increased in recent years, it remains less visible than IPV in heterosexual relationships. As a result, important gaps remain in understanding the forms of abuse and barriers to support experienced by LGBTQ+ victims.

Messinger (2011) examined how same-sex IPV is represented in national data and found that it is frequently neglected by both researchers and policymakers. Using data from the National Violence Against Women Survey, he showed that IPV occurs at comparable rates in same-sex and heterosexual relationships, while LGBTQ+ victims often face unique challenges. Many may be afraid to report abuse due to stigma, fear of being outed, or concerns about not being taken seriously by authorities. Messinger argues that heteronormative assumptions within institutions can make it harder for LGBTQ+ victims to be recognized and supported.

Donovan and Hester (2014) examined how domestic violence is experienced in LGBTQ+ relationships and how services respond to it. They found that victims may face forms of abuse such as threats of being outed, pressure to hide or change how they express their identity, and the use of sexual orientation or gender identity as a means of control. Their study also showed that many services remain shaped by heteronormative assumptions that position men as perpetrators and women as victims. As a result, LGBTQ+ victims often feel their experiences are minimized or do not “fit” the system. Donovan and Hester argue that services should address these biases and ensure that support is appropriate and accessible regardless of gender or sexuality.

Russell and Sturgeon (2019) explored how police officers evaluate IPV in both heterosexual and same-sex relationships and whether experience and training influence case assessments. They found that officers were generally more likely to view violence in heterosexual relationships as serious and to perceive female victims as more credible. In contrast, cases involving same-sex couples were more often interpreted as mutual or less severe, and officers reported lower confidence in how to respond. Russell and Sturgeon highlight the need for improved training to support more inclusive and appropriate police responses across diverse relationship contexts.

Bermea, Slakoff, and Goldberg (2021) examined LGBTQ+ victims' experiences of IPV and how these experiences are understood in primary care settings. They found that victims often encounter stigma and limited awareness among healthcare professionals, partly due to inaccurate stereotypes and assumptions. This can make disclosure difficult and reduce access to appropriate support. Participants described feeling unsafe or misunderstood, particularly when providers made assumptions based on gender or sexual orientation. The authors emphasize that healthcare professionals play an important role in identifying and supporting victims yet often lack training to address LGBTQ+ victims' specific needs.

Kelley and Robertson (2008) examined how internalized homophobia may relate to aggression and victimization in gay male relationships. They found that higher levels of internalized homophobia and shame were associated with greater reports of relational aggression, such as emotional control, manipulation, or social exclusion, as well as victimization. These findings suggest that negative beliefs about one's identity may shape relationship dynamics and conflict management in same-sex relationships. This perspective also suggests that minority stress processes may influence not only experiences of victimization but also how abuse develops and is understood within same-sex relationships.

Renzetti (1992) was among the earliest researchers to study IPV in lesbian

relationships. Through interviews with lesbian victims, she found experiences of emotional, physical, and controlling abuse by partners. Participants also described fears of being outed or judged, as well as concerns about reinforcing homophobic stereotypes, which made disclosure and reporting more difficult. Renzetti further noted that many services were designed primarily for heterosexual women, and lesbian victims often received inadequate responses from services and the police, creating unique barriers to seeking help and protection.

Taken together, these studies suggest that LGBTQ+ victims often encounter barriers that are not adequately addressed by traditional approaches to IPV prevention and support. Existing frameworks for understanding and responding to IPV are often shaped by heteronormative assumptions and may overlook same-sex relationship dynamics, contributing to LGBTQ+ victims' invisibility in research and support services. The literature suggests that there remains a substantial gap in how IPV is understood and addressed in LGBTQ+ relationships. Unless policies, services, and professional training become more inclusive, LGBTQ+ victims of IPV are likely to continue facing barriers to recognition and support.

1.5 Stigma and Help-Seeking

An important aspect of understanding IPV involves examining stigma and help-seeking. Stigma is a major barrier that can prevent victims from seeking support. Many victims may hesitate to ask for help due to shame, fear of judgment, or concerns about not being believed. These barriers are often shaped by social assumptions about victimhood and by how services respond to individuals who do not fit stereotypical expectations of a "typical" victim. As a result, stigma plays a central role in whether victims feel able to reach out for support. Understanding stigma-related barriers is therefore necessary for explaining why many victims remain silent and why some groups receive less support than others.

Overstreet and Quinn (2016) developed the IPV Stigmatization Model to explain how

stigma influences help-seeking among IPV victims. They describe three forms of stigma: anticipated stigma (fear of being judged or blamed), enacted stigma (direct experiences of discrimination), and internalized stigma (acceptance of negative stereotypes). Their model shows how these processes can generate shame, self-doubt, and silence, discouraging victims from disclosing abuse or accessing services. This framework helps explain why some victims minimize their experiences or avoid seeking help even when they are at risk. It also highlights how victims who fall outside dominant "ideal victim" stereotypes may face additional obstacles to disclosure.

Calton, Cattaneo, and Gebhard (2016) examined barriers faced by LGBTQ+ victims when seeking help for IPV. They found that barriers operate at multiple levels, including societal stigma, institutional limitations, and personal concerns. Some victims avoid reaching out due to fear of judgment or being outed, while others encounter services that are not adequately designed for LGBTQ+ individuals or legal frameworks that do not offer sufficient protection. The authors emphasize that these barriers are interconnected and can compound one another, making help-seeking particularly difficult.

Fanslow and Robinson (2010) studied help-seeking among women who experienced IPV in New Zealand using a large, representative survey. They examined how often women sought help, whom they approached, and what factors shaped these decisions. They found that many women reached out only after violence became severe or repeated, and that social support played a key role in help-seeking. The most frequently reported reasons for not disclosing were fear, shame, and failure to recognize the abuse as serious. These findings show how social and emotional factors have a direct impact on help-seeking and highlight the importance of supportive networks and accessible services. They also suggest that many victims delay help-seeking until the abuse becomes severe or life-threatening.

Huntley et al. (2019) conducted a systematic review examining how men seek help after

experiencing domestic violence and abuse. Reviewing qualitative studies from multiple countries, they identified recurring barriers to disclosure and support-seeking. Many men remained silent due to fear of disbelief, blame, or being perceived as weak. Others worried about losing access to their children or being judged by professionals. Huntley and colleagues argue that services should better recognize these gendered barriers and create environments in which men feel comfortable disclosing abuse and seeking support. This highlights how stigma related to masculinity can strongly influence help-seeking among male victims.

Goodman and Epstein (2008) looked at the structural and legal barriers that stop victims of IPV from getting the help and protection they need. They explained that many legal systems are built on narrow ideas of what abuse looks like and who counts as a "real" victim. Because of this, victims who do not fit these expectations, such as men or LGBTQ+ people, are often not believed or are blamed for their situation. The authors showed that many legal systems and support services can unintentionally keep power imbalances in place by focusing more on rules and procedures than on empathy. They also emphasized the harm in assuming that all victims experience violence in the same way, and how this assumption makes it harder to see and respond to different needs. Goodman and Epstein also explained that victims can feel retraumatized when they face disbelief, judgment, or complicated systems while trying to get help. Their research highlights the need for more inclusive approaches that take individual experiences into account instead of relying on stereotypes.

Altogether, these studies show that stigma and social expectations play a major role in how victims of IPV experience abuse and decide whether to seek help. Many victims experience disbelief, shame, or fear of judgment, which can discourage them from disclosing or reporting the abuse and stop them from getting the support they need. Institutional responses may also create additional barriers when they rely on narrow assumptions about who is recognized as a legitimate victim. Taken together, this literature suggests that stigma operates

at individual, social, and institutional levels, shaping both help-seeking behavior and access to support among diverse groups of IPV victims.

1.6 Masculinity, Patriarchy, and Social Expectations

Research on masculinity and patriarchy provides important insight into how gender norms shape experiences of IPV, help-seeking behavior, and societal responses to victims. These perspectives help explain why some forms of victimization are more readily recognized than others and why certain victims face greater barriers to support.

Connell (2005) introduced the concept of hegemonic masculinity to explain how dominant gender norms influence behavior within intimate relationships. Hegemonic masculinity refers to socially dominant ideals of manhood that emphasize strength, control, and emotional restraint. Connell argued that masculinity is not a fixed trait but a set of socially constructed expectations that privilege certain men over women and over other men who do not conform to traditional gender roles. These expectations often frame vulnerability as weakness, discouraging men from identifying as victims or seeking help. They may also contribute to the use of violence as a means of asserting control or validating masculinity.

Messerschmidt (2013) expanded on this framework by examining how masculinity is performed in everyday life and shaped by intersections of gender, class, race, and sexuality. He argued that some men may resort to violence or criminal behavior as a way of compensating for perceived threats to their social status. This perspective highlights how IPV cannot be understood solely as an individual issue but must also be situated within broader social systems that reward dominance and power.

In contrast, Anderson's (2010) theory of inclusive masculinity emphasizes social change and the possibility of alternative masculine identities. As homophobia and rigid gender norms decline, men may experience greater freedom to express emotions, form close relationships, and reject expectations of dominance. This perspective challenges the

assumption that masculinity is inherently linked to control or violence and suggests that shifting social norms can support healthier expressions of masculinity.

Supporting this view, Wong et al. (2017) conducted a meta-analysis examining the relationship between traditional masculine norms, mental health, and help-seeking. Their findings showed that adherence to norms such as emotional control, self-reliance, and dominance was associated with poorer mental health outcomes and reduced willingness to seek help. Men who strongly endorsed these norms were less likely to disclose vulnerability or reach out for support, highlighting how masculine expectations can act as barriers to help-seeking among male victims of IPV.

Katz (2019) approaches violence against women as a broader cultural issue shaped by social norms surrounding masculinity. He argues that ideals of dominance, entitlement, and toughness can normalize or excuse abusive behavior, while silence and passive bystander behavior allow violence to persist. Katz emphasizes the importance of engaging men as active participants in challenging sexist norms and supporting victims and highlights the role of institutions such as schools and media in either reinforcing or transforming harmful gender expectations.

Similarly, Pease (2008) examined the challenges of involving men in efforts to prevent men's violence. While men's participation is essential, Pease noted that prevention work can be complicated by defensiveness, fear of saying the wrong thing, or approaches that unintentionally reinforce stereotypes by positioning men solely as potential perpetrators. He argues that effective prevention requires men to critically reflect on their own beliefs, support gender equality, and engage in efforts that align with broader social change.

Taken together, this body of literature suggests that addressing intimate partner violence requires more than the availability of support services. It also demands cultural change through interventions that challenge traditional gender norms and promote healthier models of

masculinity. These changes are particularly important for improving access to support for victims of all genders and sexual orientations.

Overall, the literature reviewed in this chapter highlights IPV as a complex phenomenon shaped by gender norms, sexual orientation, stigma, and broader social structures. Power and inequality influence how violence is interpreted and who is recognized as a legitimate victim. While female victims are generally more likely to be recognized and supported, male and LGBTQ+ victims often remain marginalized. Addressing these disparities requires inclusive, intersectional approaches that move beyond stereotypes and reflect the diverse realities of victims' experiences. This theoretical framework provides the foundation for the present study, which examines how perceptions of IPV vary according to the gender and sexual orientation of the victim.

Chapter 2: Methodology

This chapter outlines the methodological approach used to address the research question. It describes the study design, participant recruitment and sampling strategy, the development of the vignette scenarios and interview guide, procedures for data collection, and the approach used for data analysis. The chapter also discusses ethical considerations and steps taken to ensure the quality and trustworthiness of the research process.

2.1 Research Design

Qualitative research aims to understand social phenomena by exploring how individuals experience and make sense of them in their everyday lives. Rather than relying on numerical data or statistical analysis, it focuses on people's accounts, explanations, and meanings through flexible methods such as interviews or focus groups. Data collection is guided by open-ended questions that allow participants to respond in their own words, helping the researcher capture more complex perspectives, differences in interpretation, and themes that emerge naturally throughout the discussion.

Qualitative research is based on the assumption that social reality is shaped through individual and shared interpretations rather than existing as something fully objective or fixed. From this perspective, meanings are influenced by social interaction, cultural norms, social roles, and personal experiences. As a result, concepts such as violence, responsibility, credibility, and victimhood may be understood differently depending on the social and cultural context in which they are interpreted. For IPV, judgments about seriousness, blame, and credibility are not neutral but are deeply shaped by social expectations about gender and sexuality.

A qualitative approach is particularly appropriate for examining perceptions of intimate partner violence because understandings of violence are often influenced by gender norms,

beliefs about masculinity and femininity, and attitudes toward sexual orientation. These influences may take place implicitly and are not always fully captured through standardized questionnaires or closed-ended survey items. Qualitative methods make it possible to explore how participants explain their judgments, express uncertainty or ambivalence, and rely on underlying assumptions when discussing different IPV scenarios.

A qualitative research design was chosen because the aim of this study is not to measure the prevalence of attitudes, but to explore how participants interpret IPV situations and explain their reactions to them. This approach provides insight into the reasoning, assumptions, and social beliefs that shape perceptions of victims across different gender and sexual orientation contexts.

2.2 Sampling Strategy

This study used a purposive sampling strategy, which is commonly employed in qualitative research when the aim is to explore meanings, interpretations, and subjective perspectives rather than achieve statistical representativeness. Instead of selecting participants randomly, purposive sampling involves recruiting individuals who are considered well suited to the research question and who can provide detailed accounts related to the phenomenon under study.

Participants were recruited to reflect different social positions that are especially relevant to perceptions of intimate partner violence (IPV), with particular attention paid to gender and sexual orientation. The study focused on cisgender victim representations to examine how dominant gender norms may shape understandings of IPV. Experiences of transgender and non-binary individuals represent an important area for future research but were beyond the scope of the present study. Four analytically defined identity positions were included: heterosexual women, heterosexual men, lesbian women, and gay men. These

categories were not treated as fixed groups to be statistically compared, but as socially meaningful contexts where different patterns of interpretation could be explored. In line with Flick's (2009) discussion of contrast-oriented sampling and maximum variation, the aim was to examine how understandings of IPV may shift across different identity contexts.

The final sample consisted of 16 participants. In qualitative research, sample size is generally guided by the depth and richness of the data rather than numerical representativeness. A sample of this size made it possible to explore participants' perspectives in depth while also allowing for comparison across different gender and sexual orientation contexts. Participants were recruited to ensure diversity across the four identity positions rather than to meet predetermined quotas. Although the final sample resulted in a balanced distribution across these positions, this balance emerged as a pragmatic outcome during recruitment rather than being treated as a fixed requirement of the research design.

Sampling was guided by the concept of thematic saturation, which is understood as the point at which additional interviews are unlikely to generate substantially new insights relevant to the research question. Given the focused interview guide, the use of standardized vignettes, and the emphasis on both within-case and cross-case comparison, a relatively small number of interviews was considered appropriate, in line with qualitative methodological recommendations (Flick, 2009). The aim of sampling was not statistical generalization, but an in-depth exploration of meanings and interpretive patterns across cases. The selected sample size allowed for both detailed individual accounts and broader comparison across participants while remaining manageable for in-depth thematic analysis.

Participant	Age	Gender	Sexual Orientation	Education	Cultural Background
P01	25	Female	Heterosexual	Bachelor's	Iranian (living in Dubai)
P02	21	Male	Gay	Bachelor's	Lebanese (raised in the UK)
P03	26	Female	Lesbian	Master's	Iranian (living in Germany)
P04	25	Female	Lesbian	Bachelor's	Syrian (raised in Turkey)
P05	24	Female	Heterosexual	Master's	Serbian (living in Italy)
P06	23	Female	Lesbian	Bachelor's	Lebanese (living in Greece)
P07	26	Female	Lesbian	Master's	Albanian
P08	25	Female	Heterosexual	Master's	Lebanese (living in Italy)
P09	32	Male	Gay	Master's	Iranian (living in Italy)
P10	25	Female	Heterosexual	Master's	Iranian (raised in Canada)
P11	28	Male	Heterosexual	Master's	Lebanese (living in Italy)
P12	25	Male	Heterosexual	Master's	British (living in Italy)
P13	27	Male	Heterosexual	Bachelor's	Burmese (living in Dubai)
P14	33	Male	Gay	Master's	Lebanese (living in Saudi Arabia)
P15	24	Male	Gay	Bachelor's	Dominican (living in the USA)
P16	30	Male	Heterosexual	Master's	South African

Table 1. Participant Demographic Characteristics

Table 1 provides an overview of the demographic characteristics of the participants, including age, gender, sexual orientation, education, and cultural background. The final sample consisted of 16 participants aged between 21 and 33 years. The sample was evenly distributed across the four identity positions included in the study: heterosexual women (n = 4), heterosexual men (n = 4), lesbian women (n = 4), and gay men (n = 4). Participants represented diverse cultural backgrounds, and all had completed or were pursuing university-level education.

2.3 Interview and Vignette Design

Data were collected through individual semi-structured interviews. This interview format was chosen because it allows for a balance between consistency across participants and flexibility in how participants express their views and experiences. Semi-structured interviews make it possible to ensure that key topics relevant to the research question are discussed in all interviews, while still allowing participants the freedom to elaborate on their thoughts, explain their reasoning, and introduce perspectives that may not have been anticipated by the researcher.

The interview design was informed by an interpretive qualitative approach with an inductive orientation. The aim of the study was not to generate a formal theory, and therefore the interview design did not follow grounded theory methodology in its traditional sense. Although the study draws on existing research related to gender norms and sexual orientation, the focus was not on analyzing discourse or language itself. Instead, the interviews were designed to explore how participants understood and interpreted IPV scenarios and how they made sense of these situations in relation to gender and sexual orientation.

Interview questions were theory-informed but exploratory in nature. Existing literature on intimate partner violence, gender norms, and sexual orientation helped guide the identification of key areas of interest, including perceptions of seriousness, responsibility and blame, empathy toward victims, credibility, and perceived need for help or intervention. At the same time, questions were intentionally formulated in an open-ended and non-leading way to allow participants to express their own interpretations, uncertainties, and reflections. This helped ensure that the interviews remained aligned with the aims of the study while still allowing new themes and perspectives to emerge from the data. The full vignette scenarios are provided in the Appendix.

Vignette Design

The interviews used a vignette-based design involving short fictional scenarios describing incidents of intimate partner violence. Vignettes were used to present participants with comparable situations while still allowing them to freely interpret and evaluate what was happening. This approach is well suited for studying sensitive topics such as IPV because it allows participants to discuss difficult situations without requiring personal disclosure.

Two parallel sets of vignettes were developed. The vignettes in each set were similar in structure and severity but differed slightly in wording and contextual details. This was done to reduce the likelihood of demand characteristics while maintaining comparability across participants. Within each vignette, the type and severity of the abusive behavior remained constant, while the gender and sexual orientation of the victim were systematically varied. The strong similarity across vignettes was intentional, because it allowed differences in responses to be attributed to the victim's gender and sexual orientation rather than to differences in the scenarios themselves.

Each participant was presented with two vignettes, one from each set. This design made it possible to explore within-participant variation by comparing how the same participant responded to different scenarios, as well as between-participant variation across individuals from different gender and sexual orientation backgrounds. Using two parallel vignette sets also helped support comparison across cases while reducing repetition within interviews.

After each vignette, participants were asked to describe their understanding of the situation and reflect on issues such as seriousness, responsibility and blame, empathy toward the victim, credibility, and the perceived need for help or intervention. Questions were asked in an open and flexible manner, allowing participants to explain their reasoning and discuss the aspects of the situation they considered most important.

Illustrative Interview Questions

To illustrate the interview approach, the interview guide included open-ended questions such as:

- "Can you tell me in your own words what you think is happening in this situation?"
- "How serious do you think this situation is, and why?"
- "Do you think anyone is responsible or to blame here?"
- "How do you feel toward the person who is experiencing this situation?"
- "If this person told others about what happened, do you think they would be believed?"
- "When you compare the two stories, do you notice any differences in how you react to them? What makes them different for you?"

These questions were designed to encourage reflection and explanation while remaining closely connected to the aims of the study. Throughout the interviews, neutral terms such as "situation" or "story" were initially used so that participants could apply their own interpretations and labels, rather than being guided toward predefined categorizations such as "violence" or "abuse."

2.4 Data Collection and Analysis Procedure

Data were collected through individual semi-structured interviews conducted online via Zoom or Google Meet. Before the interview, participants received an information sheet explaining the purpose of the study, the voluntary nature of participation, confidentiality, and data protection. Informed consent was obtained before the interview, and participants were told that they could withdraw or decline to answer any question at any time.

Each interview lasted approximately 45 to 60 minutes. Interviews began with the presentation of two vignettes, one from each vignette set. After each vignette, participants were asked open-ended questions about their understanding of the situation, including perceptions

of seriousness, responsibility and blame, empathy toward the victim, credibility, and perceived need for help or intervention. Participants were then invited to reflect on similarities and differences between the two scenarios.

Following the vignette discussion, the interview included episodic questions that allowed participants to reflect on relevant situations they had experienced or observed, without assuming personal experience of intimate partner violence. The interview ended with a short set of background questions. All interviews were audio-recorded with participants' permission and transcribed verbatim. Identifying information was removed during transcription to protect anonymity, and all data were stored securely.

The data were analyzed using reflexive thematic analysis, following Braun and Clarke's (2006) approach. This method was chosen because it allows for the identification and interpretation of recurring patterns of meaning across qualitative data, while remaining flexible enough to explore socially shaped perceptions and experiences. The analysis focused on how participants interpreted and evaluated intimate partner violence in relation to gender and sexual orientation.

The analytic process began with repeated reading of the transcripts to become familiar with the data and identify initial patterns and recurring ideas. Initial coding was then carried out using ATLAS.ti. Coding was mainly inductive and data-driven, allowing themes to develop from participants' responses, while also remaining informed by the existing literature and theoretical framework of the study.

Codes were developed to capture recurring perceptions, explanations, emotional reactions, and social assumptions expressed during the interviews. Particular attention was given to themes related to seriousness, blame, and credibility, as well as broader patterns around gender norms, stigma, and barriers to help-seeking. As the analysis progressed, codes were reviewed, refined, merged, or reorganized to better reflect relationships across the dataset.

After the initial coding stage, broader themes were developed by identifying meaningful connections between codes and examining recurring interpretive patterns across participants. This involved comparing responses across different vignette conditions to explore how perceptions changed depending on the victim's gender and sexual orientation. The analysis considered both participants' explicit statements and the wider social assumptions reflected in their responses.

To support the analytic process, co-occurrence tables, code-document comparisons, and network visualizations were used in ATLAS.ti to examine relationships between codes and identify recurring thematic patterns. These tools were used to support interpretation and thematic organization, rather than as quantitative measures of frequency or significance.

Throughout the analysis, coding and theme development remained iterative and reflexive. Themes were repeatedly reviewed in relation to the original transcripts to ensure that interpretations remained grounded in participants' accounts while also capturing broader social and cultural patterns in the data.

2.5 Ethical Considerations and Reflexivity

Because the study involved discussions of intimate partner violence, careful attention was paid to ethical considerations throughout the research process. The interviews involved discussions of violence, stigma, and interpersonal relationships, and some topics had the potential to cause emotional discomfort or distress. For this reason, interviews were conducted in a flexible and respectful manner, allowing participants to pause, skip questions, or stop the interview if needed. The study did not require participants to disclose personal experiences of IPV, as discussions were primarily based on fictional vignette scenarios.

To protect anonymity and confidentiality, identifying information was removed during transcription, and pseudonyms or identifying details were not included in the analysis or

presentation of findings. Audio recordings and transcripts were stored securely and were accessible only to the researcher.

The researcher also reflected on how personal perspectives might influence the research process and interpretation of the data. In qualitative research, the researcher plays an active role in the interpretation of data, and their background, experiences, and assumptions can influence how responses are understood and analyzed. As a psychology student with a strong interest in gender, stigma, and social perceptions of violence, the researcher remained aware that prior knowledge and perspectives could shape aspects of coding, interpretation, and theme development.

Throughout the analysis, interpretations were regularly revisited to consider how personal assumptions might be shaping the reading of the data. Interpretations and themes were repeatedly reviewed in relation to the original transcripts to ensure that findings remained grounded in participants' accounts rather than shaped by preconceived expectations. Attention was also given to contradictory responses, uncertainty, and variation across participants instead of focusing only on patterns that aligned with existing literature or theoretical expectations.

Chapter 3: Results

This chapter presents the findings of the thematic analysis. The analysis explored how participants interpreted and evaluated intimate partner violence (IPV) across different vignette scenarios that varied according to the victim's gender and sexual orientation. Three main themes were identified from the analysis: (1) gendered perceptions of IPV, (2) recognition of IPV and anticipated social responses, and (3) help-seeking barriers and sources of support.

As an initial exploratory step, word frequency analysis was conducted using ATLAS.ti. The resulting word clouds showed considerable similarity across participant groups, with terms such as *think*, *situation*, *feel*, *people*, *serious*, *violence*, and *relationship* appearing prominently across all groups. Word clouds were also compared across participant groups; however, no clear differences emerged in the most frequently used words or overall patterns of language. Consequently, word clouds were used as an exploratory tool rather than a primary source of interpretation.

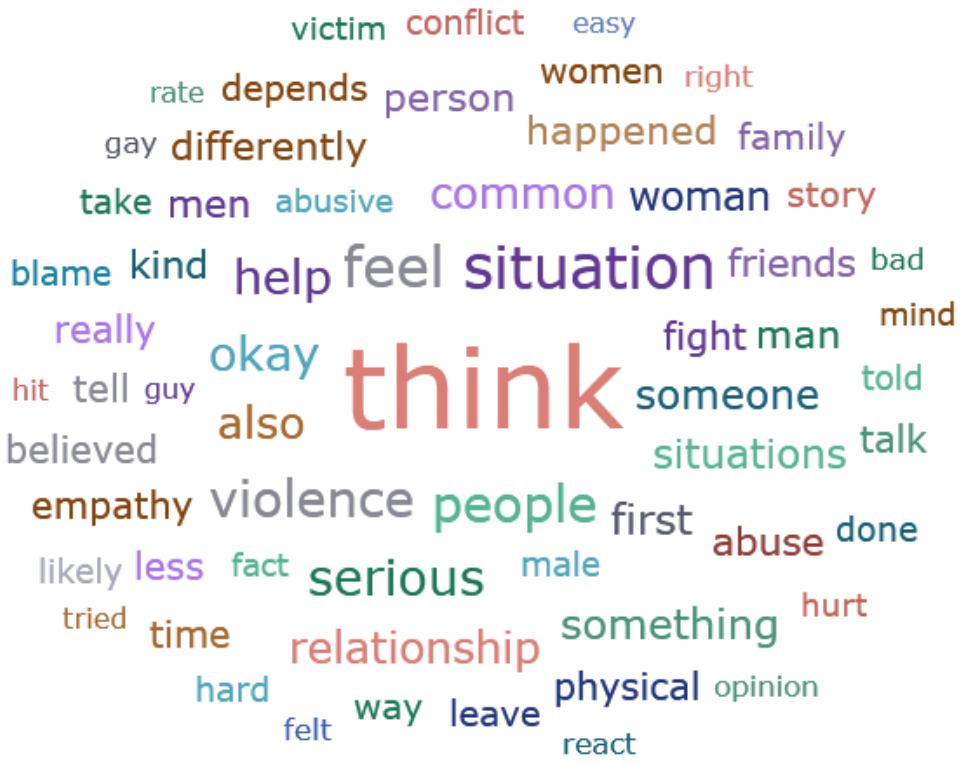

Figure 1. Word cloud generated from participant responses.

The themes presented below reflect recurring patterns across participants' accounts while also highlighting variations in how IPV was interpreted depending on the victim's gender and sexual orientation.

3.1 Gendered Perceptions of IPV

The first and most prominent theme identified in the analysis concerned the influence of gender on participants' perceptions of intimate partner violence. Across interviews, participants frequently interpreted IPV through assumptions about masculinity, femininity, physical vulnerability, and social expectations surrounding victimhood. These assumptions came up across almost all interviews and shaped how participants judged seriousness, expressed empathy, and thought about whether victims would be believed or supported by others.

Masculinity Norms, Vulnerability, and Seriousness

A recurring pattern across interviews was the tendency to view male and female victims differently, even when participants were presented with comparable forms of abuse. Female victims were often perceived as more vulnerable and at greater risk of harm, whereas male victims were more frequently viewed as capable of protecting themselves or resisting the abuse. As a result, violence against women was commonly interpreted as more serious, while violence against men was more likely to be minimized or viewed as less threatening.

Many participants explained these perceptions by referring to physical differences between men and women. Female victims were frequently described as physically weaker, which increased participants' concerns about the potential consequences of the abuse and the possibility of escalation. Several participants explicitly linked the seriousness of the situation to perceived differences in physical strength. As one participant explained, *"Because she is*

physically weaker than the man, and she could get really hurt or injured badly" (P2). Similar views appeared across the dataset. One participant stated, *"Maybe because we are raised to think the woman is weaker and the man can take care of himself more. Both need help, but still"* (P14). Another participant elaborated further, arguing that women were perceived as more vulnerable both physically and emotionally: *"Both. Physically she cannot beat him. And mentally she might have a bigger breakdown after the fight"* (P11).

In contrast, male victims were often viewed as being able to protect themselves if the situation escalated. Participants frequently assumed that male victims possessed greater physical strength and therefore faced less risk of serious injury. One participant stated, *"I wouldn't really be too concerned about this because I would assume that he's probably strong enough to fight back if it escalates"* (P5). Another participant summarized this distinction more directly by arguing that *"He can defend himself, but she can't"* (P1).

These assumptions also appeared to influence emotional reactions toward victims. Participants frequently expressed greater concern and empathy toward female victims, who were viewed as more vulnerable and less able to protect themselves. As one participant explained, *"Maybe because I feel like David could protect himself more than Emily could, and maybe Emily is more vulnerable and more in danger of physical and psychological injury"* (P4).

These accounts suggest that evaluations of IPV were shaped not only by the abusive behavior itself but also by assumptions about vulnerability and gender. Even when the behaviors described across scenarios were similar, female victims were generally perceived as facing greater danger and requiring more urgent support, whereas male victims were more likely to be viewed as capable of managing or resisting the situation themselves.

Awareness of Gender Bias and Victim Recognition

Beyond perceptions of vulnerability and seriousness, participants often discussed how victim gender could affect whether abuse would be recognized and taken seriously by others. Many participants believed that society reacts differently to male and female victims of IPV, often viewing women as more believable victims while minimizing or overlooking abuse experienced by men.

A common view was that female victims would be more likely to receive support and be believed if they disclosed what had happened. Participants often suggested that violence against women is more easily recognized because people are more used to seeing women as victims of abuse. As one participant explained, *"Society will listen more to her and help her more. It is easier to hear that a woman was hurt than a man"* (P14). Similar views appeared throughout the interviews, with several participants describing female victimization as more visible and more readily recognized.

In contrast, male victims were often seen as facing greater difficulties when disclosing abuse. Participants suggested that violence against men is discussed less often and may therefore be taken less seriously. One participant explained that *"a lot of the time the female victim would be taken much more seriously than the male"* (P1). The same participant went on to describe how abuse experienced by men is often not talked about or recognized, making it harder for male victims to come forward. These responses were frequently linked to traditional ideas about masculinity, which portray men as strong, independent, and capable of protecting themselves.

Several participants were aware that these perceptions reflected broader gender stereotypes. Some openly acknowledged that they judged female victims as more vulnerable or more deserving of support, even when they believed that men and women should be treated equally. This suggests that participants were sometimes aware of their own biases, while still

allowing those biases to influence their judgments.

However, not all participants viewed victim gender as important when judging IPV. A smaller number argued that violence should be evaluated based on the behavior itself rather than the gender of the people involved. As one participant stated, *"Violence between individuals is always wrong. You could argue strength differences affect perceived danger, but morally it's equivalent"* (P12). These responses suggest that some participants actively rejected gender-based distinctions and emphasized equal treatment of all victims.

Overall, participants differed in how aware they were of the role that gender played in their judgments. While many recognized that men and women should be treated equally, their responses often reflected wider social assumptions about vulnerability, victimhood, and credibility. As a result, female victims were generally viewed as more recognizable victims, whereas male victims were more likely to be seen as facing barriers to recognition and support.

Table 2. Code Co-Occurrences Between Gender Norms and IPV Perceptions.

Table 2 further illustrates the relationships between gender-related themes and participants' perceptions of IPV. The strongest co-occurrences were observed between gender stereotypes and gender-based minimization, as well as between gender-based minimization and masculinity norms. Strong relationships also emerged between anticipated societal bias, anticipated minimization, and lower perceived seriousness. These patterns suggest that participants frequently linked traditional gender expectations with the tendency to take male victimization less seriously and to expect that others would respond similarly.

The table also highlights the close connection between masculinity norms and anticipated societal reactions. Participants often described male victims as facing skepticism, minimization, or reduced support because men are generally expected to be strong, independent, and capable of handling problems on their own. Taken together, these patterns reinforce the thematic findings by showing how discussions of masculinity, gender stereotypes, and victim recognition frequently appeared alongside one another.

	Vignette_GayMaleVictim 8	Vignette_HeteroFemaleVictim 8	Vignette_HeteroMaleVictim 8	Vignette_LesbianFemaleVictim 8
Anticipated_Disbelief_of_Victim 21	7		8	4
Anticipated_Minimization_Normalization 46	11	4	15	7
Anticipated_Societal_Bias_Toward_Victim 61	12		19	12
Gender_Based_Minimization 40	7		15	1
Gender_Stereotypes 47	4	4	13	7
Lower_Empathy_Toward_Victim 7	3		3	
lower_perceived_seriousness 17	7		9	
Male_Help_Seeking_Barriers 23	8		11	
Masculinity_Norms 35	8	1	12	2
Minimization_Normalization 21	11	2	5	2
Mutual_Conflict_Frame 21	10	3	6	2
Perceived_Risk_or_Escalation 21	2	9	5	5
SameSex_Minimization 11	3			3
Sexual_Orientation_Based_Complexity 30	7			12

Table 3. Code Co-Occurrences by Victim Gender and Sexual Orientation.

Table 3 provides further insight into how different themes appeared across the four vignette conditions. The heterosexual male victim vignette showed the strongest associations with anticipated societal bias, anticipated minimization, gender stereotypes, masculinity norms, and help-seeking barriers. This suggests that participants were particularly likely to discuss issues of credibility, recognition, and social expectations when evaluating abuse experienced by heterosexual men.

In contrast, responses to the heterosexual female victim vignette were more strongly associated with perceived risk and escalation, reflecting participants' tendency to view female victims as more vulnerable to serious harm. The gay male victim vignette was frequently

associated with minimization, normalization, and mutual conflict framing, while the lesbian female victim vignette showed stronger associations with anticipated societal bias and sexual orientation-based complexity. Together, these patterns suggest that participants focused on different concerns depending on the victim's gender and sexual orientation.

Overall, findings within this theme suggest that perceptions of IPV were strongly influenced by gendered assumptions about vulnerability, victimhood, and social expectations. Although some participants emphasized equal treatment across victims, many responses reflected broader beliefs about masculinity, femininity, and the likelihood that different victims would be believed, supported, or taken seriously. These findings provide evidence that gender continues to shape how IPV is understood and evaluated, even when participants express support for equal treatment in principle.

3.2 Recognition of IPV and Anticipated Social Responses

A second major theme concerned how participants recognized intimate partner violence and how they believed others would respond to victims who disclosed abuse. Across interviews, most participants identified the behaviors described in the vignettes as abusive, even when the violence was not severe or resulted in relatively minor physical injuries. Participants frequently referred to the situations as violence, abuse, aggression, or controlling behavior, and many emphasized that the repeated nature of the incidents made them particularly concerning. However, despite generally recognizing the abusive nature of the situations themselves, participants often anticipated that victims would face minimization, disbelief, or reduced support from others. These expectations were especially common when discussing male victims and victims in same-sex relationships.

Recognition of Abusive Behaviors

Across the interviews, participants generally recognized the behaviors described in the vignettes as problematic and potentially abusive. Although some initially described the situations as arguments or relationship conflicts, most participants identified the behavior as crossing a boundary once physical force, intimidation, or repeated incidents became apparent. Blocking a partner from leaving, physically pushing them, and causing injury were commonly cited as behaviors that transformed a disagreement into abuse or violence.

Several participants emphasized that the repeated nature of the incidents increased their concern. Rather than viewing the situations as isolated arguments, participants often interpreted the statement that the behavior had happened before as evidence of a developing pattern. As one participant explained, *"It's definitely some form of abuse"* (P1). Another participant similarly stated that *"if it happened before and is repetitive, it's not just an argument anymore. It means serious action should be taken"* (P9). For some participants, the repeated nature of the behavior also raised concerns about future escalation. One participant described how abusive behaviors may initially appear minor but become more severe over time, explaining that *"as it happens repeatedly, we normalize it and minimize the seriousness"* (P2). A fourth participant warned that repeated incidents suggested that the situation could worsen, stating that *"She has a partner who knows that he's injured her in the past and apologized for it, yet he's doing it again. She should get out before things get worse, because these incidents have an escalating nature"* (P6).

Participants also frequently distinguished between ordinary relationship disagreements and abusive behavior. While arguments themselves were generally viewed as a normal part of relationships, many participants argued that preventing a partner from leaving or using physical force represented a clear escalation beyond normal conflict. As one participant explained, *"This is pretty serious. Even if it happens once, blocking someone from leaving and pushing is not*

okay. It's abusive" (P7).

Although participants differed in how serious they considered the situations to be, most still regarded the behaviors as unacceptable. Several participants rated the scenarios as moderately rather than extremely serious, particularly because severe injury had not occurred. However, even among those who assigned lower seriousness ratings, the majority still described the behavior as aggression, violence, or abuse rather than acceptable relationship conflict. Despite differences in how serious they considered the situations, most participants still identified the behaviors as forms of IPV.

Anticipated Societal Bias Toward Victims

Although participants generally recognized the abusive nature of the situations themselves, many believed that victims would not always receive the same recognition, support, or credibility from others. Participants frequently anticipated that social attitudes, gender stereotypes, and cultural expectations would influence how victims were treated after disclosing abuse. These concerns were particularly common when discussing male victims and victims in same-sex relationships.

A recurring pattern across interviews was the expectation that male victims would face greater skepticism and receive less support than female victims. Participants often suggested that society is more accustomed to viewing women as victims of intimate partner violence, making it easier for female victims to be recognized and believed. In contrast, male victimization was frequently described as less visible and less socially accepted. As one participant explained, *"Generally, I think solely because he is a man, he's less likely to be accepted as a victim and therefore less likely to be believed"* (P4).

Many participants linked these anticipated reactions to broader social expectations surrounding masculinity. Traditional beliefs about men being strong, independent, and capable of protecting themselves were often viewed as barriers to recognizing male victimization. One

participant explained that *"men in general, they are not very well received as victims of domestic violence. Like, it is something that can happen for sure but not spoken about. Some people don't believe that there can be violence on the side of a woman in a relationship, but men are often told to man up, stuff like that"* (P5). The participant further argued that these expectations reinforce the belief that men cannot be threatened or harmed by others, making it more difficult for male victims to be taken seriously.

Participants also highlighted the role of stigma in shaping responses to male victims. Several suggested that men who disclose abuse may be perceived as weak or may fear being judged negatively by others. As one participant stated, *"There's stigma around men being 'weak.' And honestly it all comes down to misogyny, because being 'like a woman' is seen as weak in society. So, people are less likely to believe a man when he comes forward"* (P7). Similar concerns appeared throughout the interviews, with participants frequently anticipating that male victims would face ridicule, minimization, or disbelief because they did not fit traditional expectations of who can be a victim of IPV.

Concerns about societal bias were also raised in relation to victims in same-sex relationships. Some participants believed that abuse occurring within LGBTQ+ relationships may be overlooked or taken less seriously because it does not fit conventional understandings of intimate partner violence. As one participant explained, *"because it's two women, I think there's even more chance she wouldn't be taken seriously"* (P6). Others suggested that negative attitudes toward LGBTQ+ individuals could further reduce the likelihood that victims would receive appropriate support or recognition.

While anticipated societal bias was most commonly discussed in relation to male and LGBTQ+ victims, some participants also noted that female victims may encounter disbelief or insufficient support, particularly from authorities or in environments where violence has become normalized. More broadly, participants described how social attitudes, cultural beliefs,

and institutional responses could shape whether victims were believed, supported, or taken seriously after disclosure. A notable pattern across interviews was the distinction participants made between their own evaluations of the situations and how they expected others to respond. Although most participants recognized the behaviors described in the vignettes as abusive, many anticipated that victims would face barriers to recognition, belief, and support, particularly when they did not fit traditional expectations of who is typically viewed as a victim of intimate partner violence.

These findings suggest that recognition of abuse does not necessarily guarantee recognition of the victim. While participants were generally able to identify abusive behaviors, many anticipated that social stereotypes and cultural expectations would influence whether victims received support, credibility, and validation from others.

3.3 Help-Seeking Barriers and Sources of Support

A third major theme concerned the challenges victims may face when seeking help, as well as the forms of support participants believed could assist individuals experiencing IPV. Across interviews, participants identified a range of emotional, social, financial, and practical barriers that could make it difficult for victims to disclose abuse or leave abusive relationships. At the same time, participants emphasized the importance of support from friends, family, professionals, and community services in helping victims access safety and recover from abuse.

Barriers to Help-Seeking

Participants identified a range of factors that could make it difficult for victims to seek help or leave abusive relationships. These included fear of judgment, concerns about being believed, financial dependence, limited access to support services, and broader sociocultural pressures. Although some barriers were discussed in relation to specific victim groups, participants frequently noted that multiple obstacles tend to operate simultaneously and

mutually reinforce one another.

A common barrier discussed across interviews was fear of negative reactions from others. Participants frequently suggested that victims may worry about being judged, blamed, or not believed if they disclosed abuse. As one participant explained, *"Feeling like she deserves it, fear of being judged, and fear of not being believed. Those are the biggest reasons"* (P6). Similar concerns appeared throughout the interviews, with participants describing how anticipated reactions from family members, friends, or wider society could discourage victims from seeking support.

Participants also highlighted practical and financial barriers. Several noted that leaving an abusive relationship is often more complicated than simply deciding to leave, particularly when victims rely on their partner financially or lack access to alternative housing. One participant explained that *"If she isn't believed and she has no other place to go, she might stay in the situation"* (P10). The same participant emphasized that access to professional support could also be restricted by financial constraints, noting that *"Professional help might be the fastest route, but access and money can be barriers"* (P10). Similar concerns were raised by another participant, who described leaving a shared home as both emotionally and financially challenging, arguing that *"When you already built a home with someone, leaving because of violence is very hard"* (P15).

Social and cultural factors were also frequently discussed. Some participants suggested that victims may fear stigma, social exclusion, or criticism from their communities. This was particularly evident when participants reflected on LGBTQ+ victims. One participant argued that a victim in a same-sex relationship might avoid seeking help because disclosure could reinforce negative stereotypes about LGBTQ+ relationships, explaining that *“If Emily doesn’t want to reinforce stereotypes about lesbian relationships being abusive, I think that could affect her seeking help”* (P13). Another participant noted that close-knit LGBTQ+ social networks

could create additional pressures, as seeking help might affect friendships and future relationships within the community (P12).

Finally, participants emphasized that help-seeking could be influenced by broader social and cultural contexts. One participant suggested that victims may face different barriers depending on cultural attitudes toward gender and sexuality, while others highlighted concerns about losing important relationships, social status, or housing if they disclosed abuse. Across interviews, help-seeking was rarely described as a simple individual decision and was instead linked to a combination of emotional, practical, social, and cultural factors.

		Vignette_GayMaleVictim 8	Vignette_HeteroFemaleVictim 8	Vignette_HeteroMaleVictim 8	Vignette_LesbianFemaleVictim 8
Culture_of_Silence_as_Barrier	8	1	3	1	2
Emotional_Attachment_as_Barrier	11	2	4	4	1
Fear_of_Not_Being_Believed	9	1	4	1	3
Fear_of_Perpetrator	5	1	2		2
Fear_of_Social_Judgment	18	2	5	6	5
Financial_Dependency_as_Barrier	7	2	3		2
Institutional_Barriers_to_Help_Seeking	11	1	1	2	6
Lack_of_Social_Support_as_Barrier	4	1	2		1
Loss_of_Perspective_in_Abusive_Context	15	4	2	5	4
Male_Help_Seeking_Barriers	23	8		11	
Relational_Entanglement_as_Barrier	7	3	3		1
Victimization_Stigma_as_Barrier	8	3	1	3	

Table 4. Co-occurrence of Help-Seeking Barrier Codes Across IPV Vignette Conditions

Table 4 illustrates the distribution of help-seeking barriers across the four vignette conditions. Fear of social judgment emerged as one of the most consistently discussed barriers across all victim groups, suggesting that concerns about how others may react can discourage victims from disclosing abuse or seeking support. Male help-seeking barriers appeared most frequently in the male victim vignettes. This code captured participants' perceptions that men may be less likely to seek help, access professional support, or disclose abuse due to difficulties expressing vulnerability, limited emotional support networks, concerns about judgment, and a

lack of safe spaces in which to discuss their experiences.

Emotional attachment to the perpetrator and loss of perspective within abusive relationships were also discussed across multiple vignette conditions, indicating that participants viewed help-seeking as influenced not only by external reactions but also by psychological and relational factors. In addition, institutional barriers were particularly evident in discussions of the lesbian victim vignette, where participants raised concerns about access to support and recognition. The co-occurrence patterns indicate that participants viewed help-seeking as influenced by a combination of social, emotional, practical, and institutional factors.

Sources of Support and Recommended Help

Participants identified a range of formal and informal sources of support that could help individuals experiencing IPV. Across the interviews, support from friends, family members, mental health professionals, and specialized services was frequently recommended. Participants often emphasized that victims should not face abuse alone and highlighted the importance of having access to trusted individuals who could provide emotional, practical, and financial assistance.

Informal support networks were mentioned particularly frequently. Many participants believed that friends and family members could play an important role in helping victims recognize abusive patterns, providing emotional reassurance, and offering practical assistance when needed. One participant explained that victims often need *"someone she is close to and can trust"* when deciding how to respond to an abusive situation. Others suggested that supportive friends and family members could help victims feel less isolated and encourage them to seek additional help.

Professional support was also widely recommended. Participants frequently referred to therapists, psychologists, counselors, and domestic violence services as important sources of assistance. These forms of support were often viewed as particularly valuable because they

could provide guidance, emotional support, and practical strategies for leaving abusive situations safely. Several participants emphasized that professional support may be especially important when victims experience fear, self-doubt, or difficulty recognizing the seriousness of their situation.

In addition to emotional support, participants highlighted the importance of practical assistance. Financial support, temporary housing, and access to community resources were frequently mentioned as factors that could help victims leave abusive relationships. Participants often emphasized that emotional support alone was not enough and that access to practical resources could also be important for achieving safety and leaving abusive relationships.

An interesting pattern across interviews was that participants were far more likely to recommend seeking support from friends, family members, and mental health professionals than from police, legal systems, or other formal institutions. While some participants mentioned formal intervention, these recommendations appeared less frequently than suggestions involving informal social support or psychological services. This pattern may be related to concerns expressed elsewhere in the interviews regarding institutional barriers, anticipated disbelief, and skepticism toward formal responses to IPV. Several participants questioned whether victims would be taken seriously by authorities or receive adequate support from existing systems. As a result, trusted personal relationships and professional psychological support were often viewed as the most accessible and reliable sources of help.

Overall, participants described help-seeking as a process that often requires multiple forms of support. Rather than relying on a single source of assistance, victims were frequently viewed as benefiting from a combination of personal, professional, and practical support that could address their needs regarding emotional, financial, and safety-related issues.

		Vignette_GayMaleVictim 8	Vignette_HeteroFemaleVictim 8	Vignette_HeteroMaleVictim 8	Vignette_LesbianFemaleVictim 8
Financial/Material_Support	10	1	1	3	5
Formal_Intervention	13	3	4	4	2
Leave_the_Relationship	31	5	8	11	7
No_Help_Needed / Minimized_Help	3	3			
Psychological_Help	31	8	9	7	7
Social_Support_Seeking	51	13	11	14	13
Victim_Self_Protection_Strategies	18	5	6	2	5

Table 5. Distribution of Recommended Sources of Support and Help-Seeking Strategies Across IPV Vignette Conditions

Table 5 illustrates the distribution of recommended sources of support and help-seeking strategies across the four vignette conditions. Social support seeking emerged as the most frequently recommended form of assistance across all victim groups, indicating that participants often viewed friends, family members, and other trusted individuals as important sources of support. Psychological help was also commonly recommended, suggesting that participants considered therapists and other mental health professionals to play an important role in helping victims understand and respond to abusive situations. Leaving the relationship was another frequent recommendation, particularly when participants perceived the abuse as part of a broader pattern or believed the situation could escalate. Financial and material support, formal intervention, and self-protection strategies were discussed less frequently but were still identified as valuable forms of assistance in specific circumstances. Overall, the table suggests that participants viewed effective help-seeking as involving multiple forms of support, including emotional, professional, and practical resources.

Overall, the findings suggest that perceptions of intimate partner violence were shaped by broader social beliefs about gender, sexuality, victimhood, and help-seeking. Although participants generally recognized the behaviors described in the vignettes as abusive, their evaluations often varied depending on the victim's gender and sexual orientation. Female victims were typically viewed as more vulnerable and more likely to receive support, whereas male and LGBTQ+ victims were more frequently associated with minimization, disbelief, and

barriers to recognition. Participants also identified a range of obstacles that may discourage victims from seeking help, including fear of judgment, financial dependence, stigma, and limited access to support. At the same time, support from friends, family members, and mental health professionals was consistently viewed as important for helping victims achieve safety and well-being.

Chapter 4: Discussion

This chapter discusses the findings of the present study in relation to existing research and theoretical perspectives on intimate partner violence (IPV), gender norms, stigma, and help-seeking. The aim of the study was to explore how perceptions of IPV vary depending on the victim's gender and sexual orientation. The findings suggest that, although participants generally recognized abusive behaviors across all vignette conditions, perceptions of seriousness, vulnerability, credibility, and support were often shaped by broader social beliefs about gender and sexuality. The discussion is organized around the three main themes identified in the analysis: gendered perceptions of IPV, recognition and social responses to victimization, and help-seeking barriers and sources of support. The chapter concludes by considering the strengths and limitations of the study, as well as directions for future research.

4.1 Gender Norms and Perceptions of IPV

One of the most consistent findings of the present study was that participants evaluated IPV differently depending on the victim's gender. Although abusive behaviors were generally recognized across all vignette conditions, female victims were more often perceived as vulnerable, at risk of serious harm, and in greater need of support. In contrast, male victims were frequently viewed as more capable of protecting themselves and less likely to experience severe consequences. These findings are consistent with existing research suggesting that perceptions of IPV continue to be shaped by traditional gender norms, even when participants are presented with comparable forms of abuse. In particular, participants often associated women with vulnerability and victimhood, whereas men were more frequently associated with strength, resilience, and self-sufficiency.

Seelau and Seelau (2005) found that incidents of partner violence were generally perceived as more serious when the victim was female rather than male, even when the violent behavior was identical. Similarly, participants in the present study frequently justified their evaluations by referring to perceived differences in physical strength between men and women. Female victims were often described as less able to defend themselves and therefore at greater risk of harm, while male victims were viewed as more capable of resisting or escaping violence. This suggests that assessments of seriousness were shaped not only by the abusive behavior itself but also by underlying assumptions about the victim's capacity for self-protection.

The tendency to view male victims as less vulnerable may also reflect broader cultural expectations surrounding masculinity. Traditional masculine norms often emphasize strength, independence, emotional control, and the ability to manage personal difficulties without assistance (Connell, 2005). Within this framework, men are often expected to be protectors rather than victims, making victimization appear inconsistent with dominant cultural expectations of masculinity. This may help explain why several participants assumed that male victims would be capable of defending themselves or coping with the situation without external support. Such assumptions can contribute to the minimization of male victimization and may reduce the level of empathy extended toward male victims compared to female victims.

Female victims, by contrast, were often perceived as more vulnerable and in greater need of protection and support. Participants frequently expressed stronger emotional concern for female victims and were more likely to anticipate serious physical or psychological consequences when women were involved. This pattern aligns with previous research suggesting that women are more readily recognized as victims of IPV and are often viewed as more deserving of empathy and assistance (Seelau & Seelau, 2005). One possible explanation is that dominant social narratives surrounding IPV have historically focused on violence against women, contributing to a stronger association between victimhood and femininity

(Bates, 2016). As a result, participants may have been more likely to interpret female victimization through established cultural understandings of vulnerability and risk, while male victimization was viewed as less typical or less expected.

Beyond perceptions of vulnerability, participants also appeared to rely on broader assumptions regarding who is typically recognized as a victim of IPV. Female victims were often viewed as fitting established social expectations of victimhood, whereas male victims were more likely to be perceived as falling outside these expectations. This finding is consistent with research suggesting that public understandings of IPV are often shaped by gendered stereotypes that position women as victims and men as perpetrators (Bates, 2016; Seelau & Seelau, 2005). When individuals do not fit these expectations, their experiences may be interpreted differently or receive less recognition. In the present study, this was reflected in participants' tendency to view male victims as less vulnerable, more capable of defending themselves, and less likely to require immediate intervention. Across the interviews, judgments about IPV appeared to be shaped by both the abusive behavior itself and broader beliefs about who is typically seen as a victim.

The findings can also be understood through the lens of hegemonic masculinity, which emphasizes cultural expectations that men should be strong, self-reliant, emotionally controlled, and capable of managing difficulties independently (Connell, 2005). Within this framework, vulnerability is often viewed as incompatible with traditional ideals of masculinity, making it more difficult for men to be recognized as victims. Several participants appeared to draw upon these assumptions when discussing male victims, often describing them as more capable of defending themselves, less vulnerable to harm, or less in need of support. These responses suggest that perceptions of IPV are shaped not only by beliefs about violence itself but also by broader expectations regarding how men are expected to behave and respond to adversity.

These findings are also consistent with research demonstrating that traditional masculine norms can discourage emotional expression and help-seeking among men. Wong et al. (2017) found that stronger endorsement of masculine ideals such as self-reliance and emotional control was associated with reduced willingness to seek support and disclose vulnerability. Similarly, Huntley et al. (2019) reported that many male victims of domestic abuse feared being judged, ridiculed, or not taken seriously if they disclosed their experiences. The findings of the present study suggest that these expectations are reflected not only in the experiences of male victims but also in how other people perceive and evaluate male victimization.

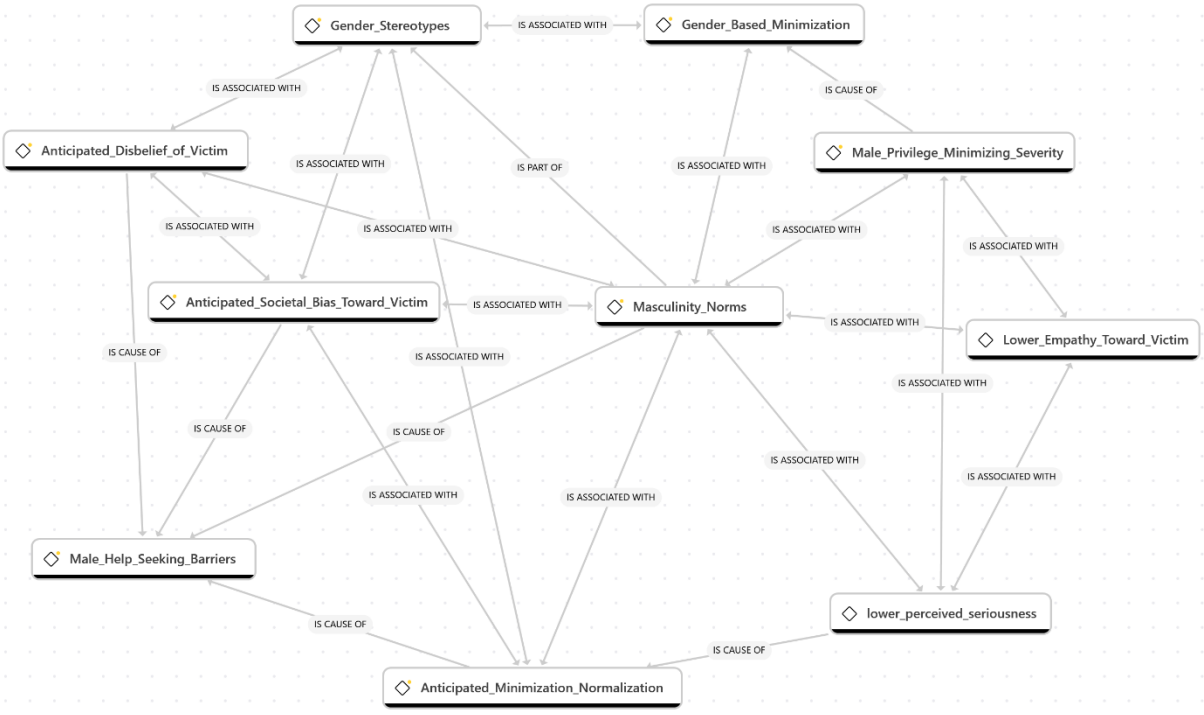

Figure 2. Network of Masculinity, Gender Stereotypes, and Male Victimization

Figure 2 provides a visual representation of the relationships identified between masculinity norms, gender stereotypes, and perceptions of male victimization. Several concepts occupied central positions within the network, including masculinity norms, gender stereotypes, anticipated societal bias, anticipated minimization, and male help-seeking barriers. The network illustrates how participants frequently connected expectations of male strength and self-reliance with reduced perceptions of vulnerability, lower perceived seriousness, and concerns about whether male victims would be believed or supported.

One notable pattern within the network is the close relationship between masculinity norms, gender stereotypes, and perceptions of vulnerability. Participants often viewed male victims as physically stronger, more resilient, and better able to defend themselves than female victims. As a result, male victimization was frequently perceived as less serious and less likely to result in severe consequences. This finding supports the argument that perceptions of IPV are influenced not only by the abusive behavior itself but also by broader cultural expectations regarding masculinity. Consistent with hegemonic masculinity theory, men were often evaluated against ideals of strength, independence, and emotional control, which appeared to reduce perceptions of vulnerability and need for support (Connell, 2005).

A second pattern evident in the network is the connection between masculinity norms and anticipated societal responses. Participants frequently expected that male victims would be less likely to be believed, taken seriously, or recognized as legitimate victims of IPV. Anticipated societal bias and anticipated minimization appeared closely linked to broader beliefs about masculinity, suggesting that participants viewed social reactions to male victimization as shaped by traditional expectations that men should be strong, self-reliant, and capable of managing problems independently. These findings are consistent with previous research showing that male victims often encounter skepticism, disbelief, and minimization when disclosing abuse (Huntley et al., 2019).

The network also highlights the relationship between anticipated societal reactions and barriers to help-seeking. Participants often suggested that men may be reluctant to seek support because they fear judgment, embarrassment, or being perceived as weak. This pattern suggests that concerns regarding how others might respond to disclosure may contribute to difficulties in accessing support. Similar findings have been reported by Wong et al. (2017), who found that conformity to traditional masculine norms was associated with lower willingness to seek help and disclose vulnerability. The present findings suggest that these barriers are not only internal but are also reinforced by expectations regarding how society views male victims.

Rather than reflecting a single stereotype, perceptions of male victimization appeared to be shaped by several interconnected beliefs about masculinity, vulnerability, credibility, and help-seeking. Expectations regarding masculinity influenced perceptions of vulnerability, seriousness, credibility, and help-seeking simultaneously, suggesting that gender norms operated across multiple stages of participants' evaluations. This reinforces the idea that male victims may face barriers not only when seeking support but also in being recognized as victims in the first place.

Overall, the discussion points to the continuing influence of traditional gender norms on how IPV is perceived and evaluated. Although many participants expressed support for treating all victims equally, their responses often reflected broader cultural beliefs about vulnerability, strength, and victimhood. Female victims were generally viewed as more vulnerable and more deserving of empathy and support, whereas male victims were more frequently associated with resilience, self-reliance, and a reduced need for assistance. The findings therefore highlight the continuing influence of gendered expectations on how IPV is understood and suggest that improving recognition of male victimization may require challenging wider social assumptions about masculinity, vulnerability, and help-seeking.

4.2 Social Recognition, Credibility, and Victimhood

A second major finding of the present study concerned the recognition and credibility of victims of IPV. Although participants generally identified the behaviors described in the vignettes as abusive, many anticipated that victims would not be treated equally once the abuse was disclosed. Male and LGBTQ+ victims were frequently perceived as facing greater skepticism, minimization, and barriers to recognition than heterosexual female victims. Across the interviews, participants often distinguished between recognizing abusive behavior and viewing someone as a legitimate victim. Perceptions of victimhood appeared to be shaped by broader expectations about gender and sexuality rather than by the abusive behavior alone.

These findings are consistent with previous research suggesting that public perceptions of IPV are heavily influenced by socially constructed ideas about who is most likely to be a victim and who is most likely to be a perpetrator. Historically, public awareness campaigns, media representations, and policy responses have primarily focused on violence against women in heterosexual relationships (Bates, 2016). While this focus reflects the serious and widespread nature of violence against women, it may also contribute to narrower understandings of victimhood. As a result, individuals who fall outside these expectations, including male and LGBTQ+ victims, may face greater challenges in being recognized as legitimate victims of abuse.

A particularly important finding was that participants often distinguished between their own evaluations of the abuse and how they expected society to respond. Although most participants personally identified the behaviors described in the vignettes as abusive, many anticipated that others would be less likely to believe, support, or take certain victims seriously. These expectations were especially common when discussing male victims and, to a lesser extent, LGBTQ+ victims. This suggests that participants were aware of broader social biases

surrounding victimhood and recognized that public reactions to abuse do not always reflect the seriousness of the situation itself.

These findings can be understood through the Intimate Partner Violence Stigmatization Model proposed by Overstreet and Quinn (2016), which argues that stigma creates barriers to recognition, disclosure, and help-seeking among victims of IPV. According to this perspective, individuals whose experiences do not align with dominant social expectations may face additional challenges when seeking validation and support. The present findings suggest that participants anticipated precisely these kinds of difficulties for male and LGBTQ+ victims, often expecting them to encounter skepticism, minimization, or disbelief from others even when the abusive behavior itself was clearly recognized.

The findings also highlighted the role of sexual orientation in shaping expectations about victim recognition and credibility. While participants generally identified the behaviors described in the same-sex vignettes as abusive, some anticipated that victims in same-sex relationships would face additional challenges in being taken seriously. In several cases, participants expected that abuse within same-sex relationships would be more likely to be minimized, dismissed, or interpreted as mutual conflict rather than recognized as IPV. These findings suggest that victim recognition may be influenced not only by gender but also by assumptions about what intimate partner violence is expected to look like.

One possible explanation for these findings is the continued influence of heteronormative understandings of IPV. Donovan and Hester (2014) argue that public understandings of domestic violence have traditionally been based on heterosexual relationship models, in which men are assumed to be perpetrators and women are assumed to be victims. As a result, violence occurring within same-sex relationships may be perceived as more ambiguous or harder to interpret. Similarly, Russell and Sturgeon (2019) found that perceptions

of IPV can vary depending on the gender composition of the relationship, suggesting that same-sex victims may not always fit dominant expectations of victimhood. The findings of the present study were consistent with this perspective, as participants frequently expected LGBTQ+ victims to face greater difficulties in being recognized, believed, and supported by others.

The findings can also be interpreted through the concept of the "ideal victim," which refers to socially constructed expectations about who is most readily recognized as a legitimate victim of harm. Victims who are perceived as vulnerable, powerless, and consistent with dominant social narratives are generally more likely to receive sympathy, credibility, and support. In contrast, individuals who fall outside these expectations may encounter greater skepticism or face additional barriers to recognition. The present findings suggest that heterosexual female victims most closely aligned with participants' expectations of victimhood, whereas male and LGBTQ+ victims were more likely to be perceived as falling outside these traditional victim categories. This may help explain why participants frequently anticipated disbelief, minimization, or reduced support for these groups despite recognizing the abusive nature of the behaviors described in the vignettes.

Overall, the findings indicate that credibility and victim recognition were shaped by more than the abusive behavior itself. Participants often appeared to evaluate victims through broader social expectations about gender, sexuality, and victimhood. As a result, some victims were perceived as fitting dominant understandings of IPV more readily than others, influencing expectations about whether they would be believed, supported, or taken seriously following disclosure. These relationships are further illustrated through the network analysis presented in Figure 3, which highlights the connections between sexual orientation, victim credibility, anticipated societal responses, and institutional barriers to support.

Figure 3. Network of Social Recognition, Credibility, and Institutional Responses in Same-Sex IPV

Figure 3 illustrates how participants linked sexual orientation, victim credibility, social recognition, and institutional responses when discussing IPV in same-sex relationships. Several concepts occupied central positions within the network, including anticipated societal bias, same-sex minimization, audience-dependent credibility, sexual orientation-based complexity, and institutional barriers to help-seeking. Together, these relationships illustrate how participants often viewed victim recognition as shaped by wider social beliefs, rather than by the abusive behavior alone. Rather than focusing solely on whether abuse had occurred, participants frequently considered how wider social attitudes toward gender and sexuality might influence whether victims would be believed, supported, or taken seriously.

One notable pattern within the network is the relationship between same-sex minimization, lower perceived seriousness, and anticipated minimization. Participants generally recognized the abusive behaviors described in the same-sex vignettes; however, they

often anticipated that others would be more likely to dismiss, downplay, or reinterpret the abuse. In some cases, participants expected that violence occurring within same-sex relationships would be viewed as mutual conflict rather than as a clear case of victimization. This suggests that perceptions of seriousness may be partly shaped by dominant assumptions about what IPV is expected to look like. Because public understandings of IPV have historically been shaped by heterosexual relationship models, abuse occurring outside these frameworks may be seen as less recognizable or more ambiguous (Donovan & Hester, 2014; Messinger, 2011).

A second important pattern is the connection between sexual orientation-based complexity, audience-dependent credibility, anticipated societal bias toward victims, and cultural influences on perception. Participants frequently suggested that reactions to LGBTQ+ victims would depend on who was receiving the disclosure. Family members, friends, professionals, and members of different cultural communities were often expected to respond differently to victims in same-sex relationships. As a result, credibility was not viewed as something fixed but as something shaped by social context. This suggests that whether a victim is recognized and believed may depend on the attitudes, beliefs, and cultural values of the people they turn to for support. Participants often anticipated that cultural norms surrounding gender and sexuality could influence whether victims were believed, supported, or taken seriously. This highlights the socially and culturally situated nature of credibility and suggests that victims may face very different levels of validation or skepticism depending on where and to whom they disclose.

Another notable feature of the network is the relationship between anticipated societal bias, institutional skepticism, and institutional barriers to help-seeking. Participants often expressed concerns regarding how institutions, including law enforcement, legal systems, and support services, might respond to victims who fall outside traditional expectations of IPV.

Several participants anticipated that LGBTQ+ victims could encounter prejudice, misunderstanding, or a lack of appropriate support when interacting with formal systems. These concerns are consistent with previous research indicating that LGBTQ+ survivors often report barriers to accessing support services and may fear discrimination or inadequate responses from professionals (Calton et al., 2016; Russell & Sturgeon, 2019). The network therefore suggests that anticipated societal bias may extend beyond interpersonal interactions and shape expectations regarding institutional responses as well.

The network also highlights the role of broader cultural norms in shaping perceptions of victimhood and credibility. Cultural norms were linked to audience-dependent credibility, suggesting that participants often viewed social attitudes as an important factor in determining whether victims would be believed. This aligns with minority stress theory (Meyer, 2003), which argues that stigma and prejudice create additional social challenges for sexual minority individuals. Within the context of IPV, these broader cultural attitudes may influence not only victims' willingness to disclose abuse but also how they expect others to respond when disclosure occurs.

Overall, Figure 3 highlights how perceptions of LGBTQ+ victimization were shaped by an interconnected set of beliefs about sexual orientation, credibility, social recognition, and institutional responses. Rather than focusing exclusively on the abusive behavior itself, participants frequently considered how broader social attitudes might influence whether victims would be recognized, believed, and provided with appropriate support. This reinforces one of the central findings of the present study: recognizing abuse and recognizing the victim are not necessarily the same process. For LGBTQ+ victims in particular, social recognition appeared to be influenced by wider cultural assumptions about sexuality, victimhood, and credibility. Taken together, these findings suggest that barriers to recognition may persist even

when abusive behavior is clearly identified, highlighting the important role that social norms and cultural expectations play in shaping responses to intimate partner violence.

4.3 Stigma, Help-Seeking, and Structural Barriers

A third major finding of the present study concerned the barriers victims may face when seeking help and support. Participants identified a range of factors that could discourage victims from disclosing abuse or accessing assistance, including fear of judgment, fear of not being believed, emotional attachment to the perpetrator, financial dependence, and concerns about institutional responses. While some barriers were discussed across all vignette conditions, participants often anticipated additional challenges for male and LGBTQ+ victims. Across the interviews, help-seeking was rarely described as a response to abuse alone and was instead linked to social stigma, cultural expectations, and perceptions of available support.

Participants identified a range of emotional, social, and practical barriers that may prevent victims from seeking help or leaving abusive relationships. Fear of judgment, shame, emotional attachment to the partner, and financial dependence were frequently discussed as factors that could make disclosure and help-seeking more difficult. Participants also recognized that repeated exposure to abuse may contribute to normalization, self-doubt, or feelings of helplessness, which could further discourage victims from seeking support. These findings are consistent with previous research showing that victims of IPV often face complex psychological and structural barriers when attempting to leave abusive situations or seek help.

Participants frequently anticipated that male victims would face additional barriers when seeking help due to traditional expectations surrounding masculinity. Men were often described as less likely to disclose abuse, express emotional vulnerability, or seek professional support because of fears of appearing weak, losing social status, or not being taken seriously.

Several participants suggested that men may feel pressure to handle problems independently rather than ask for help. These findings align with previous research indicating that traditional masculine norms emphasizing self-reliance and emotional control can discourage help-seeking among men (Wong et al., 2017). The findings also support participants' broader expectations that male victims may face skepticism or minimization when disclosing abuse, which could further reduce their willingness to seek support.

Participants also anticipated that LGBTQ+ victims may face additional barriers when seeking help and support. Concerns about stigma, discrimination, fear of being judged, and worries about not being understood by services were frequently discussed in relation to victims in same-sex relationships. Some participants suggested that LGBTQ+ victims may hesitate to disclose abuse because they fear invalidation or negative reactions from others, particularly in environments where same-sex relationships are less accepted. Participants also raised concerns about institutional responses, with some anticipating that formal support systems may lack sufficient understanding of abuse within LGBTQ+ relationships. These findings are consistent with previous research indicating that LGBTQ+ survivors often face unique barriers to help-seeking, including fears of discrimination, lack of inclusive services, and concerns about being misunderstood or not taken seriously (Calton et al., 2016). The findings also align with minority stress theory (Meyer, 2003), which suggests that stigma and prejudice can create additional social and psychological burdens for sexual minority individuals.

Beyond interpersonal stigma, participants also discussed broader institutional barriers that may affect victims' willingness or ability to seek support. Many participants expressed skepticism about how effectively institutions such as law enforcement, legal systems, and formal support services respond to IPV cases. In particular, participants often anticipated that male and LGBTQ+ victims may face greater difficulties when interacting with institutions due to disbelief, minimization, or a lack of understanding of non-traditional forms of victimization.

Several participants suggested that victims may avoid seeking formal help if they believe they will not be taken seriously or adequately supported. Participants often described barriers to help-seeking as extending beyond individual circumstances to include institutional practices, social attitudes, and gaps in available services. Consistent with previous research, the findings indicate that perceptions of institutional support play an important role in shaping whether victims feel safe and validated when seeking help (Calton et al., 2016; Huntley et al., 2019).

Despite discussing numerous barriers to help-seeking, participants also emphasized the importance of social and emotional support for victims of IPV. Across vignette conditions, participants frequently recommended reaching out to trusted friends, family members, mental health professionals, or support services rather than dealing with the situation alone. Emotional validation, access to safe spaces, and supportive interpersonal relationships were often viewed as important factors that could help victims recognize abusive behavior and seek help. Interestingly, participants more commonly recommended informal and emotional forms of support than legal or institutional interventions. While some participants mentioned police or legal services, many appeared to place greater trust in personal support networks and professional psychological support.

Participants' recommendations also reflected broader concerns about institutional responses to IPV. In several cases, participants appeared hesitant to recommend formal institutions such as law enforcement or courts, often expressing doubts about whether victims would be believed, protected, or adequately supported. This pattern aligns with the findings discussed earlier regarding institutional skepticism and anticipated societal bias. Across interviews, IPV was often discussed not only as a problem between two individuals but also as something shaped by wider systems of support, credibility, and access to resources.

Overall, the findings suggest that help-seeking in the context of IPV is shaped by a complex interaction of emotional, social, cultural, and structural factors. Although participants generally encouraged victims to seek support, they also recognized numerous barriers that could discourage disclosure and help-seeking, particularly for male and LGBTQ+ victims. Fear of stigma, concerns about credibility, and skepticism toward institutional responses were frequently identified as factors that may limit victims' willingness to seek help. These findings highlight how access to support may be shaped by social expectations regarding gender, sexuality, and victimhood.

Overall, the findings of the present study suggest that perceptions of intimate partner violence are shaped by broader social expectations about gender, sexuality, victimhood, and credibility. Although participants generally recognized abusive behaviors across all vignette conditions, important differences emerged in how victims were perceived, validated, and expected to be treated by others. Male and LGBTQ+ victims were more frequently associated with minimization, skepticism, and barriers to recognition and support, highlighting the continuing influence of traditional gender norms and heteronormative assumptions in shaping responses to IPV. Taken together, the findings contribute to a more nuanced understanding of IPV perception and emphasize the need for more inclusive approaches to recognition, support, and intervention for diverse victims of intimate partner violence.

Chapter 5: Conclusion

The present study explored how people perceive intimate partner violence across different victim identities, with particular attention to the role of gender and sexual orientation in shaping perceptions of seriousness, blame, empathy, credibility, and help-seeking. Using a qualitative vignette-based design and semi-structured interviews, the study examined participants' responses to scenarios involving heterosexual female, heterosexual male, lesbian female, and gay male victims of IPV. Through thematic analysis, the research sought to explore not only how abuse was recognized and interpreted, but also how broader social norms and expectations influenced perceptions of victims and anticipated responses to their experiences.

The findings revealed that participants were generally able to identify abusive behaviors across all vignette conditions and largely agreed that the behaviors described were harmful and unacceptable. However, the findings also showed that recognizing abuse did not necessarily result in equal recognition of victims. While participants often expressed empathy toward victims regardless of gender or sexual orientation, important differences emerged in how victims were perceived, validated, and expected to be treated by others. Participants frequently anticipated that male and LGBTQ+ victims would encounter greater skepticism, minimization, and barriers to support than heterosexual female victims. These perceptions were often linked to broader social expectations about masculinity, victimhood, credibility, and the social recognition of abuse.

One of the most significant findings of the study was the distinction participants made between their own perceptions and the reactions they expected from society. Across multiple themes, participants often recognized abuse as serious while simultaneously anticipating that others would be less likely to believe, support, or validate certain victims. This pattern was particularly evident in discussions surrounding male and LGBTQ+ victimization, where

concerns about stigma, social judgment, and institutional responses frequently emerged. Across the interviews, participants often distinguished between the abusive behavior itself and the social recognition granted to different victims, suggesting that broader assumptions about victimhood continued to shape perceptions of IPV.

The present study contributes to the growing body of research examining how social perceptions of intimate partner violence are influenced by gender and sexual orientation. While previous research has shown that victim gender can shape perceptions of seriousness, blame, credibility, and help-seeking, much of the existing literature has focused primarily on heterosexual relationships and female victimization. By including heterosexual female, heterosexual male, lesbian female, and gay male victims, the present study provides a more comprehensive exploration of how victim identity may influence perceptions of IPV across different social contexts.

A further contribution of the study is its focus on anticipated societal responses rather than solely participants' personal attitudes. Although participants generally expressed supportive attitudes toward victims across all vignette conditions, they frequently anticipated that society would respond differently depending on the victim's gender or sexual orientation. This distinction suggests that perceptions of IPV are shaped not only by individual beliefs but also by broader social expectations about victimhood, masculinity, femininity, and sexuality. In this sense, the findings highlight the importance of examining how perceived social norms and anticipated reactions may influence the recognition and validation of victims.

The findings also contribute to existing discussions surrounding the social construction of victimhood. Participants often described heterosexual female victims as more likely to be recognized, believed, and supported, while male and LGBTQ+ victims were more frequently associated with disbelief, minimization, or reduced social recognition. These patterns suggest

that traditional assumptions about who can be a victim of IPV continue to influence perceptions, even when participants personally recognized the abusive nature of the situations presented. The findings highlight the importance of considering a wider range of victim experiences when examining IPV and support the need for a more inclusive understanding of victimization.

The findings may also have practical implications for education, awareness campaigns, and professional training. Because participants frequently anticipated that male and LGBTQ+ victims would face greater barriers to recognition and support, efforts aimed at increasing awareness of diverse experiences of IPV may help challenge restrictive assumptions about victimhood. Encouraging more inclusive understandings of abuse may contribute to improved recognition, validation, and access to support for individuals whose experiences do not align with traditional stereotypes of IPV.

Strengths

Several strengths of the present study should also be acknowledged. First, the qualitative design allowed for a detailed exploration of participants' perceptions, interpretations, and reasoning about intimate partner violence. Rather than relying solely on quantitative measures or predefined response categories, the use of semi-structured interviews gave participants the opportunity to explain and reflect on their views in greater depth. This made it possible to capture the complexity and nuance of participants' responses, particularly when discussing sensitive issues such as gender stereotypes, victim credibility, stigma, and help-seeking.

Another strength of the study was the inclusion of diverse victim identities across the vignette conditions. Although research on IPV has increasingly recognized the experiences of male and LGBTQ+ victims, these groups remain comparatively underrepresented in studies

examining public perceptions of abuse. By including heterosexual female, heterosexual male, lesbian female, and gay male victims, the present study was able to explore similarities and differences in how participants interpreted victimization across multiple social contexts. This provided a broader perspective on IPV perceptions and helped highlight patterns that may not have emerged if the study had focused exclusively on heterosexual female victimization.

A further strength was the combination of thematic analysis and network analysis, which allowed the findings to be examined at different levels of complexity. While thematic analysis facilitated a detailed exploration of participants' perceptions, the network analyses helped illustrate how different themes and concepts were interconnected. Together, these approaches contributed to a richer understanding of the relationships between gender norms, victim recognition, credibility, stigma, and help-seeking, and provided a more comprehensive interpretation of the findings.

Limitations

At the same time, the findings of the present study should be interpreted in light of several limitations. First, the sample size was relatively small and consisted largely of university students from similar educational backgrounds. Although qualitative research does not aim for statistical generalizability, the perspectives represented in the study may not fully capture the diversity of attitudes toward intimate partner violence that exist across broader populations. Future research involving participants from different age groups, educational levels, and cultural backgrounds may help provide a more comprehensive understanding of how perceptions of IPV vary across social contexts.

Another limitation relates to the use of hypothetical vignette scenarios. While vignettes provide a useful method for examining sensitive topics in a controlled and consistent manner, participants' responses to fictional situations may not fully reflect how they would react in real-

life circumstances. Individuals may respond differently when confronted with actual cases of abuse involving people they know or situations where personal emotions and experiences are more directly involved. Consequently, the findings should be interpreted as reflections of participants' perceptions and interpretations rather than direct indicators of real-world behavior.

In addition, the sensitive nature of topics such as intimate partner violence, gender stereotypes, and LGBTQ+ issues may have increased the likelihood of social desirability bias. Participants may have felt pressure to present themselves as accepting, supportive, or non-prejudiced, particularly when discussing socially sensitive issues. Interestingly, many participants distinguished between their own views and the responses they expected from society, suggesting an awareness of broader social biases even when they did not explicitly endorse such views themselves. While this distinction provided valuable insight into anticipated societal reactions, it also raises the possibility that some participants may have been reluctant to express potentially stigmatizing attitudes directly.

Future Directions

Building on the findings of the present study, several directions for future research can be identified. First, future studies could examine perceptions of intimate partner violence using larger and more diverse samples. Including participants from different cultural, religious, socioeconomic, and age backgrounds may provide a broader understanding of how social norms, cultural values, and lived experiences shape perceptions of victimhood, credibility, and help-seeking. Given that attitudes toward gender, sexuality, and relationships vary considerably across social and cultural contexts, further research may help clarify how these factors influence responses to different victims of IPV.

Future research may also benefit from examining perceptions of IPV among professional groups who are often involved in supporting victims, such as healthcare workers,

mental health professionals, law enforcement officers, and legal professionals. Because these groups frequently play a central role in identifying abuse, providing support, and responding to disclosures, understanding their attitudes and assumptions may help identify potential barriers within institutional systems. Such research could contribute to the development of training programs and interventions aimed at improving recognition and support for diverse victims of IPV.

In addition, future studies could further explore the experiences of individuals whose identities fall outside traditional expectations of victimhood, including male and LGBTQ+ victims. While the present study examined perceptions of hypothetical scenarios, future research involving survivors of IPV may provide deeper insight into how stigma, anticipated social reactions, and institutional responses influence disclosure, help-seeking, and access to support in real-life contexts. Mixed-method approaches combining qualitative and quantitative methods may also help strengthen understanding of the relationship between social attitudes and victims' lived experiences.

Finally, future research may benefit from adopting a more intersectional perspective when examining perceptions of intimate partner violence. Factors such as ethnicity, race, disability, age, socioeconomic status, and migration background may interact with gender and sexual orientation in shaping perceptions of victimization and access to support. Exploring these intersections may contribute to a more comprehensive understanding of how different forms of social inequality influence the recognition and treatment of IPV victims.

Reflexive Reflections on the Research Process

Looking back on the research process, one of the most unexpected findings was the distinction between recognizing abuse and recognizing victims. At the beginning of the project, I expected that participants would show more differences in how they judged the abusive

situations themselves depending on the victim's gender or sexual orientation. Based on the existing literature, I thought that some scenarios might be less likely to be recognized as abuse. However, during the analysis, I found that most participants were able to identify the abusive nature of the situations across all vignette conditions. The more noticeable differences appeared when participants discussed how victims would be viewed and treated by other people. Many participants believed that male and LGBTQ+ victims would face greater difficulties in being believed, supported, or taken seriously. This led me to think differently about the findings and made me realize that recognizing abuse and recognizing victims are not necessarily the same thing.

The research process also encouraged me to reflect on some of my own assumptions. Because much of the literature highlights the barriers faced by male and LGBTQ+ victims, I expected participants to express more direct differences in their personal evaluations of the vignette scenarios. Instead, many participants expressed supportive attitudes toward all victims while also describing a society that they believed would respond differently depending on who the victim was. I found myself returning to this distinction throughout the analysis because it appeared across multiple themes and was not something I had expected to emerge so strongly.

Another aspect of the research process that influenced my thinking was observing how participants responded to forms of abuse that did not involve severe physical violence. When developing the vignettes, I was aware that the scenarios focused on behaviors such as insults, controlling actions, and relatively minor physical aggression. However, participants generally recognized these behaviors as abusive and serious. This made me think more about how IPV is recognized and reminded me that abuse is not only defined by severe physical violence, but can also involve patterns of control, intimidation, and emotional harm. As a result, I became more interested in questions of social recognition, victimhood, and credibility than I had initially been when designing the study. While I originally approached the project as a study of

perceptions of IPV, I gradually became more interested in how victims are believed, recognized, and supported by others. Throughout the analysis, this encouraged me to remain open to findings that did not fully match my expectations and to pay attention to contradictions, complexities, and more nuanced responses within the data.

References

Anderson, E. (2010). *Inclusive masculinity: The changing nature of masculinities*. Routledge.

Archer, J. (2000). Sex differences in aggression between heterosexual partners: A meta-analytic review. *Psychological Bulletin*, *126*(5), 651–680.

Bates, E. A. (2016). Current controversies within intimate partner violence: Overlooking bidirectional violence. *Journal of Family Violence*, *31*(8), 937-940.

Bermea, A. M., Slakoff, D. C., & Goldberg, A. E. (2021). Intimate partner violence in the LGBTQ+ community: Experiences, outcomes, and implications for primary care. *Primary Care: Clinics in Office Practice*, *48*(2), 329–337.

Calton, J. M., Cattaneo, L. B., & Gebhard, K. T. (2016). Barriers to help seeking for lesbian, gay, bisexual, transgender, and queer survivors of intimate partner violence. *Trauma, Violence, & Abuse*, *17*(5), 585-600.

Connell, R. W. (2005). *Masculinities* (2nd ed.). Polity Press.

Crenshaw, K. (1991). Mapping the margins: Intersectionality, identity politics, and violence against women of color. *Stanford Law Review*, *43*(6), 1241-1299.

Dobash, R. E., & Dobash, R. (1979). *Violence against wives: A case against the patriarchy*. Free Press.

Donovan, C., & Hester, M. (2014). What's love got to do with it? In C. Donovan & M. Hester (Eds.), *Domestic violence and sexuality* (pp. 121–156). Policy Press.

Fanslow, J. L., & Robinson, E. M. (2010). Help-seeking behaviors and reasons for help seeking reported by a representative sample of women victims of intimate partner violence in New Zealand. *Journal of Interpersonal Violence, 25*(5), 929–951.

Flick, U. (2009). *An introduction to qualitative research* (4th ed.). Sage.

Goodman, L. A., & Epstein, D. (2008). *Listening to battered women: A survivor-centered approach to advocacy, mental health, and justice*. American Psychological

Association.

Huntley, A. L., Potter, L., Williamson, E., Malpass, A., Szilassy, E., & Feder, G. (2019). Help-seeking by male victims of domestic violence and abuse (DVA): a systematic review and qualitative evidence synthesis. *BMJ Open*, *9*(6), e021960.

Johnson, M. P. (2012). *A typology of domestic violence: Intimate terrorism, violent resistance, and situational couple violence.* University Press of New England.

Katz, J. (2019). *The macho paradox: Why some men hurt women and how all men can help*. Sourcebooks.

Kelley, T. M., & Robertson, R. A. (2008). Relational aggression and victimization in gay male relationships: The role of internalized homophobia. *Aggressive Behavior, 34*(5), 475–485.

Lysova, A., Hanson, K., Dixon, L., Douglas, E. M., Hines, D. A., & Celi, E. M. (2022). Internal and external barriers to help seeking: Voices of men who experienced abuse in intimate relationships. *International Journal of Offender Therapy and Comparative Criminology, 66*(5), 538–559.

Messerschmidt, J. W. (2013). *Crime as structured action: Doing masculinities, race, class, sexuality, and crime*. Rowman & Littlefield.

Messinger, A. M. (2011). Invisible victims: Same-sex IPV in the national violence against women survey. *Journal of Interpersonal Violence, 26*(11), 2228–2243.

Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychological Bulletin, 129*(5), 674–697.

Overstreet, N. M., & Quinn, D. M. (2016). The intimate partner violence stigmatization model and barriers to help seeking. In T. F. Heatherton, R. E. Kleck, M. R. Hebl, & J. G. Hull (Eds.), *Social psychological perspectives on stigma* (pp. 109–122). Guilford

Press.

Pease, B. (2008). *Engaging men in men's violence prevention: Exploring the tensions, dilemmas and possibilities*. Policy Press.

Renzetti, C. M. (1992). *Violent betrayal: Partner abuse in lesbian relationships*. Sage Publications.

Russell, B., & Sturgeon, J. A. (2019). Police evaluations of intimate partner violence in heterosexual and same-sex relationships: Do experience and training play a role? *Journal of Police and Criminal Psychology, 34*(1), 34–44.

Seelau, S. M., & Seelau, E. P. (2005). Gender-role stereotypes and perceptions of heterosexual, gay, and lesbian domestic violence. *Journal of Family Violence, 20*(6), 363–371.

Straus, M. A. (2004). Prevalence of violence against dating partners by male and female university students worldwide. *Violence Against Women, 10*(7), 790–811.

Taylor, J. C., Bates, E. A., Colosi, A., & Creer, A. J. (2022). Barriers to men's help seeking for intimate partner violence. *Journal of Interpersonal Violence, 37*(19–20), NP18417–NP18444.

World Health Organization. (2021). *Violence against women prevalence estimates, 2018: Global, regional and national prevalence estimates for intimate partner violence against women and global and regional prevalence estimates for non-partner sexual violence against women*. World Health Organization.

Wong, Y. J., Ho, M. H. R., Wang, S. Y., & Miller, I. S. (2017). Meta-analysis of the relationship between conformity to masculine norms and mental health-related outcomes. *Journal of Counseling Psychology, 64*(1), 80–93.

Appendix

Vignette Scenarios Used in the Study

This appendix presents the vignette scenarios used during the interviews. Two parallel vignette sets were developed. The scenarios were matched in structure and severity, while the victim's gender and sexual orientation were systematically varied. Each participant was presented with two vignettes, one from Set A and one from Set B. This design allowed comparisons across different victim identities while reducing repetition within the interview.

Set A

Vignette 1A – Heterosexual Female Victim

Anna and Michael have been in a relationship for about two years and live together. Over the past months, arguments between them have become more frequent. During one argument, Michael raises his voice, insults Anna, and blocks the door to stop her from leaving the room. The argument escalates, and Michael pushes Anna against the wall, causing her to hit her shoulder and feel slight pain. Afterwards, he apologizes and says that it will not happen again. Anna is aware that similar situations have happened before.

Vignette 2A – Heterosexual Male Victim

David and Sarah have been in a relationship for about two years and live together. Over the past months, arguments between them have become more frequent. During one argument, Sarah raises her voice, insults David, and blocks the door to stop him from leaving the room. The argument escalates, and Sarah pushes David against the wall, causing him to hit his shoulder and feel slight pain. Afterwards, she apologizes and says that it will not happen again. David is aware that similar situations have happened before.

Vignette 3A – Lesbian Female Victim

Emily and Laura have been in a relationship for about two years and live together. Over the past months, arguments between them have become more frequent. During one argument, Laura raises her voice, insults Emily, and blocks the door to stop her from leaving the room. The argument escalates, and Laura pushes Emily against the wall, causing her to hit her shoulder and feel slight pain. Afterwards, she apologizes and says that it will not happen again. Emily is aware that similar situations have happened before.

Vignette 4A – Gay Male Victim

James and Daniel have been in a relationship for about two years and live together. Over the past months, arguments between them have become more frequent. During one argument, Daniel raises his voice, insults James, and blocks the door to stop him from leaving the room. The argument escalates, and Daniel pushes James against the wall, causing him to hit his shoulder and feel slight pain. Afterwards, he apologizes and says that it will not happen again. James is aware that similar situations have happened before.

Set B – Parallel Vignettes

Vignette 1B – Heterosexual Female Victim

Anna and Michael have been in a relationship for about three years and share an apartment. Recently, they have been arguing more often and tension between them has increased. During one disagreement, Michael raises his voice, insults Anna, and stands in the doorway to stop her from leaving. The situation escalates, and Michael shoves Anna, causing her to hit her elbow against the door frame and feel some pain. Afterwards, he apologizes and says that it will not happen again. Anna is aware that similar situations have happened before.

Vignette 2B – Heterosexual Male Victim

David and Sarah have been in a relationship for about three years and share an apartment. Recently, they have been arguing more often and tension between them has increased. During one disagreement, Sarah raises her voice, insults David, and stands in the doorway to stop him from leaving. The situation escalates, and Sarah shoves David, causing him to hit his elbow against the door frame and feel some pain. Afterwards, she apologizes and says that it will not happen again. David is aware that similar situations have happened before.

Vignette 3B – Lesbian Female Victim

Emily and Laura have been in a relationship for about three years and share an apartment. Recently, they have been arguing more often and tension between them has increased. During one disagreement, Laura raises her voice, insults Emily, and stands in the doorway to stop her from leaving. The situation escalates, and Laura shoves Emily, causing her to hit her elbow against the door frame and feel some pain. Afterwards, she apologizes and says that it will not happen again. Emily is aware that similar situations have happened before.

Vignette 4B – Gay Male Victim

James and Daniel have been in a relationship for about three years and share an apartment. Recently, they have been arguing more often and tension between them has increased. During one disagreement, Daniel raises his voice, insults James, and stands in the doorway to stop him from leaving. The situation escalates, and Daniel shoves James, causing him to hit his elbow against the door frame and feel some pain. Afterwards, he apologizes and says that it will not happen again. James is aware that similar situations have happened before.