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CHILD SEXUAL ABUSE MYTH SCALE

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Abstract

Child sexual abuse myths legitimize abusive behaviors, involving high levels of victim blame and low levels of offender blame. The present study aims to: (i) adapt a measure of endorsement of child sexual abuse myths to the Portuguese context (i.e., Child Sexual Abuse Myth Scale - CSAMS); and (ii) provide validity and reliability evidence for this measure. A total of 423 adults (66.2% female) filled out a sociodemographic questionnaire, the Ambivalent Sexism Inventory, and the CSAMS. The CSAMS validity and reliability results supported the original structure, which comprises three dimensions: Blame Diffusion (e.g., ‘Adolescent girls who wear very revealing clothing are asking to be sexually abused’), Restrictive Stereotypes (e.g., ‘Most children are sexually abused by strangers or by men who are not well known to the child’), and Denial of Abusiveness (e.g., ‘Older children, who have a better understanding of sexual matters, have a responsibility to actively resist sexual advances by adults’). Configural and metric invariance by sex were held, and criterion validity was observed through significant associations between myths, sexism and sex. This study provided evidence in support of the validity and reliability of the Portuguese version of the Child Sexual Abuse Myth Scale.

Keywords: child sexual abuse, myths, measurement, psychometrics

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Introduction

Previous research has consistently shown that sexual abuse myth acceptance legitimizes sexual violence (Yapp & Quayle, 2018), which may negatively affect both the judicial decision-making process (Dinos, Burrowes, Hammond, & Cunliffe, 2014; Grubb & Turner, 2012) and the victim's well-being (Greeson, Campbell & Fehler-Cabral, 2016). For instance, rape survivors have reported that when disclosing the sexual abuse to formal support agencies and professionals (e.g., police officers, medical staff or counselors), they often receive inappropriate responses, such as being blamed for the assault (Ahrens, 2006). In addition, rape myth acceptance tends to be associated with lower perceived defendant liability and higher victim blame, especially when the relationship between the victim and the defendant is closer (i.e., stranger vs. acquaintance without a sexual relationship vs. ex-sexual partners) (Krahé et al., 2008). With regard to Child Sexual Abuse (CSA), negative effects have been reported on social, psychological, and sexual individual functioning (Sanjeevi, Houlihan, Bergstrom, Langley & Judkins, 2018), and there is a need to prevent secondary victimization that might occur through the endorsement and dissemination of myths. Korkman and colleagues (2014) found that even experienced judges often assessed information incorrectly and held false beliefs about CSA, which could arguably compromise how they handled the processes in court. Similarly, professionals who are important for children's development (e.g., teachers) seem to lack specific knowledge about CSA (Márquez-Flores, Márquez-Hernández & Granados-Gámez, 2016). Teachers often consider that CSA necessary involves violent behaviors and hold stereotypes about offenders (e.g., people who have mental disorders; Márquez-Flores et al., 2016). Erroneous beliefs about CSA can also include the assumption that CSA necessarily leaves medical and/or physical evidence (McGuire & London, 2017).

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52 Evidence collected systematically in the Portuguese context is scarce, but
53 relevant professionals (e.g., psychologists, health workers) do appear to endorse myths
54 and erroneous beliefs about CSA to a certain extent (Fazenda, 2010; Monteiro, 2018).
55 Teachers in particular seem to present high levels of myths and beliefs about CSA
56 (Sanchez, 2001), particularly with regard to minimizing the consequences of these
57 abusive experiences (Jorge, 2010). These results are troubling given the critical role of
58 teachers as primary educators and agents of child protection (i.e., teachers are key actors
59 for enabling CSA disclosure and prevention; Márquez-Flores et al., 2016). Furthermore,
60 young people who were victims of CSA seem to acknowledge that depreciative social
61 and cultural discourses (e.g., blaming the victim, denying and minimizing abuse,
62 excusing the offender) tend to worsen the negative effects of these abusive experiences
63 for their own psychological functioning (Antunes & Magalhães, 2019).

64 Overall, this backdrop illustrates the need for systematically assessing
65 determinants and consequences of social beliefs and representations of CSA, which
66 firstly requires developing measures that are reliable, valid, and adapted to specific
67 cultural contexts. Assessing CSA myths is important given that dissemination of these
68 myths undermines proper efforts of identification and prevention of CSA. In fact,
69 whereas CSA prevention programs tend to focus mostly on children (i.e., promoting
70 their ability to protect themselves from abusive experiences), other relevant actors (e.g.,
71 parents, teachers, psychologists, general public) should also be included in efforts to
72 prevent CSA (Márquez-Flores et al., 2016; Sanchez, 2001). Presently, even
73 professionals often reveal misconceptions about scientific evidence on CSA, which
74 undermines adequate judgments about the credibility of CSA allegations (Pelisoli,
75 Herman & Dell’Aglío, 2015). As such, to address the need for reliable and valid
76 measures in this focal topic, the present study aims to provide psychometric evidence of

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77 the Child Sexual Abuse Myth Scale (Collings, 1997), specifically on construct and
78 criterion-related validity and reliability in the Portuguese context. This will be useful for
79 cross-cultural studies assessing social beliefs and representations of CSA, as well as to
80 identify how to prevent the endorsement and dissemination of myths about this type of
81 abuse in different contexts.

82 **Child Sexual Abuse Myths (CSAM): Theory and Measurement Framework**

83 Sexual victimization myths can be conceptualized as prejudicial and stereotyped
84 beliefs about abusive experiences, victims and perpetrators (Burt, 1980), which are
85 widely accepted in society (Jenkins, 2017; McGee, O’Higgins, Garavan, & Conroy,
86 2011), and deny or dismiss CSA (Cromer & Goldsmith, 2010). Collings (1997), based
87 on the literature in this field, has developed a measurement scale to allow the reliable
88 and valid assessment of myths about CSA (*Child Sexual Abuse Myth Scale - CSAMS*).

89 The CSAMS originally includes three dimensions, referring to: (1) Blame
90 Diffusion, which involves beliefs related to the idea that other people besides the
91 offender (e.g., the child; a non-abusive parent) are guilty or partly guilty for the abusive
92 experience (e.g., “Children who do not report ongoing sexual abuse must want the
93 sexual contact to continue”); (2) Denial of Abusiveness, which includes beliefs that seek
94 to minimize the abusive dimension of CSA, highlighting the consent from the child
95 (e.g., “Sexual contact between an adult and a child, which is wanted by the child and
96 which is physically pleasurable for the child cannot really be described as being
97 ‘abusive’”); and (3) Restrictive Stereotypes, which includes beliefs that deny the reality
98 of most abusive cases and minimize the negative consequences (e.g., “Child sexual
99 abuse takes place mainly in poor, disorganized, unstable families”) (Collings, 1997).
100 Regarding the scale reliability, the full scale scored a .764 *Cronbach* Alpha, which
101 shows an acceptable internal consistency (Collings, 1997). Convergent and discriminant

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102 validity were also established, as results showed positive and significant correlations
103 between CSAM scales and rape myth acceptance, as well as with the scores from the
104 Jackson Incest Blame Scale (Collings, 1997).

105 To assess the cross-cultural validity of the CSAMS, Collings and colleagues
106 (2009) focused on examining social attitudes towards sexual abuse using a sample of
107 adolescents and young adults in three countries: South Africa, South Korea and
108 Sweden. The results showed that the CSAMS kept its acceptable values of internal
109 consistency in all cultural groups, and the multidimensional nature of the construct was
110 reinforced, although different factors emerged in the different cultural contexts
111 (Collings et al., 2009). Gender differences were also consistently observed across
112 samples (i.e., male participants scored higher levels in all subscales and in the overall
113 scale compared to female participants) (Collings et al., 2009). South Koreans had the
114 highest scores of CSA myth acceptance, and the authors highlighted important cultural
115 specificities, (Collings et al., 2009) which reinforces the need for valid, reliable and
116 culturally sensitive measures for developing cross-cultural studies on this topic.

117 **Child Sexual Abuse Myths: The Role of Sex and Sexism**

118 Research shows that acceptance and dissemination of sexual abuse myths seem
119 to vary according to respondents' sex. That is, men tend to outscore women on myth
120 acceptance and, consequently, show higher levels of victim blame and tolerance
121 towards sexual harassment (Aosved & Long, 2006; Canan et al., 2016; Davies et al.,
122 2012; Russell & Hand, 2017), further devaluing the experience of sexual victimization
123 (Suarez & Gadalla, 2010; van der Bruggen & Grubb, 2014). Lonsway and Fitzgerald
124 (1995) propose that differences in rape myth acceptance may be explained theoretically
125 by hostility toward women, especially by men. Internalized cultural beliefs about
126 masculinity (e.g., being heterosexual and strong, being a part of the majority group)

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127 may also have a role in these sex differences (Aosved & Long, 2006). Arguably, this
128 means that individuals who internalize these beliefs may also show a higher
129 endorsement of sexual violence myths.

130 Gender roles may also be considered in this context. Some studies suggest that
131 men tend to self-identify more with the offender than with the victim, given that the
132 offender occupies the dominant and power-holding position in the dyad, regardless the
133 offender' sex (Gerber, Cronin & Steigman, 2004). Thus, men have been shown to be
134 more likely to assign higher levels of blame to the victim, whereas women can self-
135 identify more with the victim and assign lower levels blame to the victim, arguably to
136 protect their own role as potential victims (Gerber et al., 2004). Despite these findings
137 and propositions, there is contradictory evidence in this regard. Abeid and colleagues
138 (2015) found that, in a rural community in Tanzania, men showed lower endorsement of
139 myths about sexual violence, compared to women. These results are consistent with
140 other studies on domestic violence conducted in Uganda and in Sub-Saharan Africa,
141 where women showed higher levels of validation and acceptance of wife beating than
142 men (Koenig et al., 2003; Rani, Bonu, & Diop-Sidibe, 2004). These differences may be
143 related with contextual factors such women's occupation status, lower levels of
144 education, increased poverty, and rural residency (Abeid et al., 2015).

145 Similarly, with regard to CSA, female perpetrators tend to be held less
146 accountable (Almeida, 2003), especially when the victim is male (Broussard, Wagner,
147 & Kazelskis, 1991). Furthermore, females tend to describe adult-child sexual
148 interactions as more abusive and as having a more negative impact on the child
149 (Broussard et al., 1991). They also attribute more guilt to the perpetrator and therefore
150 tend to give more credibility to children's abuse disclosures (Alcantara, Shortway &
151 Prempeh, 2019; Cromer & Freyd, 2007; Davies & Rogers, 2009). On the other hand,

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152 male participants tend to score higher on CSA myths (Collings, 2003; Collings et al.,
153 2009) and assign greater responsibility/blame to the victim (Back & Lips, 1998). In
154 sum, the literature has mainly shown sex differences regarding myth acceptance for
155 both rape (e.g., Aosved & Long, 2006; Canan et al., 2016; Davies et al., 2012) and
156 sexual abuse (Collings, 2003; Collings et al., 2009), with men outscoring women.
157 However, individual variables, such as respondents' sex, are not the only variables who
158 have an impact in myth acceptance. The dissemination of myths and victim blame
159 attribution processes are described in the literature as potentially explained by sexist
160 attitudes and behaviors (Glick & Fiske, 1996). Attitudes and behaviors that discriminate
161 individuals based on their biological sex are theoretically referred to as sexism (Matlin,
162 2012). Glick and Fiske (1996) distinguish two types of sexism: Hostile and Benevolent.
163 Hostile Sexism is described as involving "beliefs and practices of people who consider
164 women inferior to men, reflecting antipathy and intolerance in relation to their role as a
165 figure of power and decision" (Formiga et al., 2002, p. 106). On the other hand,
166 Benevolent Sexism is more complex and subtle (Magalhães et al., 2007), being an
167 apparently non-prejudiced attitude, but showing the paternalistic perspective (Formiga
168 et al., 2002). Previous research has identified Hostile and/or Benevolent Sexism as
169 predictors of rape and sexual abuse myth acceptance, tolerance towards sexual
170 harassment (Chapleau et al., 2007; Glick & Fiske, 1996).

171 Against this backdrop, the present study aims to provide evidence on the
172 psychometric properties of the Child Sexual Abuse Myth Scale (CSAMS) in the
173 Portuguese context and will assess convergent validity by testing associations between
174 endorsement of myths about CSA and endorsement of sexist beliefs (i.e., Hostile and
175 Benevolent Sexism).

176 **Method**177 **Participants**

178 The sample includes 423 participants, mostly female (66.2%) aged from 18 to 77
179 years old ($M_{age} = 29.30$; $SD = 12.258$). Most participants were single (80.9%), 13.2%
180 were married and 5.9% were divorced. In terms of education levels, 53.7% completed
181 higher education courses, 42.1% completed the high school and 3% concluded the
182 middle school. Finally, 49.9% of the participants were employed, 43.7% were students
183 and 5% were unemployed.

184 **Instruments**

185 *Sociodemographic questionnaire.* Participants' demographic attributes were
186 assessed with a sociodemographic questionnaire, namely, assessing sex, age,
187 nationality, marital status, together with academic and professional experience (e.g. the
188 last academic degree completed and current professional status).

189 *The Ambivalent Sexism Inventory (Glick & Fiske, 1996).* The Portuguese version
190 of this scale was used in this study (Magalhães et al., 2007). This scale consists of 22
191 items organized in two factors: Hostile Sexism and Benevolent Sexism. Participants
192 were asked to score their level of agreement with different statements using a 5-point
193 Likert scale (1= Strongly Disagree to 5= Strongly Agree). Adequate internal
194 consistency has been provided in both subscales in the Portuguese context: Hostile
195 Sexism (*Cronbach* alpha = .82) (e.g., "Women are too easily offended") and Benevolent
196 Sexism (*Cronbach* alpha = .80) (e.g., "Many women have a quality of purity that few
197 men possess") (Glick & Fiske, 1996; Magalhães et al., 2007). Acceptable internal
198 consistency was also found in this study: Hostile Sexism (*Cronbach* alpha = .79) and
199 Benevolent Sexism (*Cronbach* alpha = .77).

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200 *Child Sexual Abuse Myth Scale (CSAMS; Collings, 1997)*. This scale allows to
201 assess attitudes towards CSA. It is a 15-item self-report scale, organized in three
202 different factors: (1) Blame Diffusion (e.g., “Adolescent girls who wear very revealing
203 clothing are asking to be sexually abused”); (2) Denial of Abusiveness (e.g., “Older
204 children, who have a better understanding of sexual matters, have a responsibility to
205 actively resist sexual advances by adults”); and (3) Restrictive Stereotypes (e.g., “Most
206 children are sexually abused by strangers or by men who are not well known to the
207 child”). It is answered using a 5-point scale (1= Strongly Disagree to 5= Strongly
208 Agree) (Collings, 1997; Collings et al., 2009). In terms of internal consistency, the full
209 scale in the original study scored a .764 *Cronbach Alpha*, which means it has an
210 acceptable internal consistency (Collings, 1997).

211 **Procedures**

212 *Translation and adaptation of CSAMS*. Firstly, permission to translate and adapt
213 the scale was requested to the author of the original version. Afterward, the process of
214 validation and adaptation of the scale included translation, back-translation and expert
215 review of the items (following the guidelines proposed by Beaton, Bombardier,
216 Guillemin & Ferraz, 2000). A first translation was made by a researcher and
217 subsequently reviewed by three other independent researchers. Three researchers were
218 included in order to make the process of solving translation differences more effective.
219 The translated version was then back translated by a bilingual speaker, the back
220 translated version was compared to the original version, and a Portuguese version was
221 achieved, which was carefully reviewed by the research team.

222 *Data collection and analysis*. This study is part of a broader project, which was
223 approved by the Ethical Committee of the [blinded to ensure anonymity in the review
224 process]. The data was collected *online*, through the *Qualtrics.com* platform ensuring

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225 data protection policy consistent with regulation (EU, 2016/679) and disseminated on
226 social media. In order to guarantee participants' anonymity, we ensured it would not be
227 possible under any circumstances to associate individual responses to the respondent
228 identity. Privacy was protected by not collecting identifiable information and removing
229 IP addresses from the database (Roberts & Allen, 2015). Furthermore, to ensure privacy
230 and data confidentiality, the database was stored on password-protected hardware, and
231 access was limited to the research team. The study included a convenience sample (not
232 probabilistic) with two inclusion criteria: (1) all participants were required to understand
233 the Portuguese language; and (2) all participants had to be at least 18 years old.
234 Participation was voluntary and without financial or any other type of reward. An
235 informed consent was provided to participants, which included: a) contact details of the
236 research team, in case participants had any questions or required clarifications; b) a
237 brief description of the study; c) detailed instructions that the participants could stop
238 answering at any point and choose not to answer without having to provide any kind of
239 justification; d) a statement that all data collected was anonymous.

240 After data collection, *IBM SPSS® for Windows* (Version 22.0) was used to
241 analyze participants' descriptive statistics, mean differences, correlational analyses and
242 reliability. Only four missing values were found, and missing imputation by mean was
243 performed. Confirmatory factorial analysis and invariance analysis were performed with
244 *IBM AMOS® for Windows* (Version 25.0). Confirmatory factor analysis was performed,
245 given that the authors of the original version provided evidence for a three-dimensional
246 structure (Collings, 1997; Collings et al., 2009). Also, we adopted the rule thumb for a
247 CFA sample of at least 300 participants, to ensure adequate statistical power (see
248 Kyriazos, 2018). First, multidimensional models, consistent with the results provided by
249 Collings (1997), were tested. Moreover, given that Collings (1997) describes a global

250 value of reliability, suggesting that a global dimension might be considered, one-
251 dimensional models were also tested. The goodness of fit of the models was assessed
252 through the following criteria: a χ^2/df below 3, the CFI approaching 1 (Bentler, 1990),
253 and the RMSEA below .10 (Maroco, 2010). Lower values of AIC and ECVI and higher
254 values of PGFI and PNFI suggest the better model (Hu & Bentler, 1999; Schermelleh-
255 Engel, Moosbrugger, & Muller, 2003). As proposed in the literature (Hong, Malik &
256 Lee, 2003; Van de Schoot, Lugtig, & Hox 2012), the measurement invariance was
257 tested considering three sequential steps: configural (i.e., the model fit for women and
258 men separately), metric (i.e., the items are perceived by women and men equally as
259 representing the same latent factor) and scalar invariance (i.e., the same value might be
260 obtained on the latent variables regardless the individual's sex). Based on the literature,
261 we expect to hold configural and metric invariance, but not scalar, as women and men
262 might show different values on the latent variables (Canan et al., 2016; Collings, 2003;
263 Collings et al., 2009; Davies et al., 2012).

264 Results

265 Descriptive Statistics

266 Preceding the analysis of construct validity, a descriptive analysis of the 15
267 items was performed in order to analyze the symmetry of the items' distribution. The
268 analysis of the absolute values of Skewness allowed the identification of one item (Item
269 6. "A woman who does not satisfy her partner sexually must bear some of the
270 responsibility if her partner feels frustrated and turns to her children for sexual
271 satisfaction") showing a value greater than 3, which was removed from further analyses
272 (Table 1).

273 TABLE 1

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275

276 Confirmatory Factor Analysis (CFA)

277 The factorial structure of the Portuguese version of the CSAMS was tested using
278 a CFA (maximum likelihood estimation). The first three-factor model was tested
279 (Model 1), and all latent factors were allowed to correlate. The overall fit of model 1
280 revealed adequate but not good fit indices. As such, based on modifications indices, the
281 errors of the items 10-11 and 7-13 were allowed to correlate. The overall fit of this
282 second model was generally within the range of a good fit. One-dimensional models
283 were also performed, Model 3 without allowing errors correlations, and Model 4 with
284 errors correlated (Table 2). Based on the fit indices, the second model
285 (multidimensional) should be selected as showing the best fit (unstandardized estimates
286 are presented in the Figure 1).

287 FIGURE 1**288 Invariance analyses**

289 In order to explore if the factor structure would be invariant across women and
290 men, multiple group analyses were performed. Both women and men samples fulfil the
291 sample/variable ratio of 10:1. First, configural invariance was supported by acceptable
292 model fit indexes that were obtained for each group separately – male ($\chi^2= 147.375$,
293 $p<.001$; CFI = .90; RMSEA = 0.086; CI90% [.066; .106]) and female ($\chi^2= 163.806$,
294 $p<.001$; CFI = .91; RMSEA = .068; CI90% [.054; .081]). Next, metric invariance was
295 tested by constraining factor loadings to be equal across two groups ($\chi^2= 347.454$,
296 $p<.001$; CFI = .89; RMSEA =.054; CI90% [.047; .062]). This model also had good fit
297 indexes and the AIC value decreased, but the fit for this model was not as good as for
298 the baseline model ($\Delta\chi^2 = 36.127$, $p < .001$), indicating that metric invariance did not
299 hold. As such, a Z test to the equality of the factor loadings was performed, and we
300 found that the items 9, 11 and 14 (Blame diffusion factor) were significantly different

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301 between women and men (respectively, $Z = -2.91, p = .004$; $Z = -2.45, p = .014$; $Z = 2.41,$
302 $p = .016$). These items were released, and partial metric invariance obtained ($\Delta\chi^2 =$
303 $6.032, p = .644$). Finally, scalar invariance was tested and the χ^2 difference test was
304 significant ($\Delta\chi^2 = 75.409, p < .001$), indicating that scalar invariance was not supported.

305 **CSA Myths, Sex and Sexism**

306 Correlations among myths of sexual abuse and sexism reveals that all subscales
307 were positively and significantly correlated: greater sexist attitudes are associated with
308 greater sexual abuse myths (Table 3). Furthermore, the analyses of sex differences among
309 the myth subscales revealed that men significantly outscored women in all subscales
310 (Table 4).

311 TABLE 3 AND 4

312 **Reliability**

313 Reliability was checked calculating *Cronbach's* Alpha. Results of this analysis
314 indicated adequate reliability evidence for all factors: Blame Diffusion ($\alpha = .81$), Denial
315 of Abusiveness ($\alpha = .64$) and Restrictive Stereotypes ($\alpha = .73$), including the general factor
316 of CSA myths ($\alpha = .86$). Floor and ceiling effects were also described for each subscale
317 and the general factor. Results suggested non-significant ceiling effects (0% for all
318 factors), but floor effects were found for Blame Diffusion and Denial of Abusiveness
319 factors given that more than 15% of our participants reached the lowest possible score
320 (see Terwee et al., 2007) (Table 5).

321 TABLE 5

322 **Discussion**

323 This study aimed to provided evidence on psychometric properties of the Child
324 Sexual Abuse Myth Scale (CSAMS) in the Portuguese context. Sexual violence myths
325 legitimize sexual aggression and violence (Yapp & Quayle, 2018), and there is a need

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326 for adapting and validating relevant measures in diverse contexts, to develop cross-
327 cultural studies on the predictors and consequences of endorsing these myths.

328 Confirmatory factor analysis revealed good fit statistics for the three-factor
329 structure, consistent with the original proposal (Collings, 1997). Moreover, considering
330 that the authors of the original version provided a global Cronbach's alpha, suggesting
331 the possibility of considering CSA myths as a one-dimensional construct, we tested a
332 one-dimensional model. However, in the present sample the multidimensional model
333 revealed a better fit, which reinforces the theoretical model including three dimensions:
334 Blame Diffusion, Denial of Abusiveness and Restrictive Stereotypes. In line with the
335 original conceptualization (Collings, 1997), Blame Diffusion refers to the idea that other
336 people besides the offender are guilty or partly guilty for the abuse (e.g., "Children who
337 act in a seductive manner must be seen as being at least partly to blame if an adult
338 responds to them in a sexual way"). Denial of Abusiveness includes beliefs that seek to
339 minimize the abusive dimension of CSA, highlighting some degree of consent from the
340 child (e.g., "Sexual contact between an adult and a child that does not involve force or
341 coercion and that does not involve actual or attempted sexual intercourse is unlike to
342 have serious psychological consequences for the child"). Finally, Restrictive Stereotypes
343 involves beliefs that deny the reality of most abusive cases, seeking to minimize its
344 negative consequences (e.g., "Most children are sexually abused by strangers or by men
345 who are not well known to the child"). Overall, the current findings supported a three-
346 factor solution that reinforces the original conceptualization proposed by Collings
347 (1997). Furthermore, our results supported configural invariance by sex as well as
348 partial metric invariance, which means that this model fits adequately for women and
349 men separately, and these items are perceived by women and men equally as
350 representing the same latent factor. Scalar invariance was not achieved, which is

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351 consistent with previous evidence that show men outscoring women in all myths scales
352 (Collings, 2003; Collings et al., 2009) and also with our results.

353 Convergent validity and reliability of the Portuguese version of this scale were
354 also assessed. Convergent validity highlights the trustworthiness of this scale to be
355 applied in the Portuguese context given that all dimensions of the scale (i.e., Blame
356 Diffusion, Denial of Abusiveness and Restrictive Stereotypes) correlated positively with
357 both Ambivalent Sexism Inventory subscales (i.e., Benevolent Sexism and Hostile
358 Sexism). Furthermore, the results showed that male participants outscored female in all
359 subscales, showing higher levels of CSA myth acceptance. Sex differences have been
360 reported in previous studies, with men endorsing more myths (Canan et al., 2016) and
361 more negativity towards those myths when compared to women (Davies et al., 2012).
362 Additionally, regarding sexual abuse, men not only tend to score higher on myth
363 acceptance (Collings, 2003), but those differences are also consistent across cultures
364 (i.e., Sweden, South Africa, South Korea) (Collings et al., 2009). This pattern was
365 consistent in the present study as well. Lastly, reliability evidence was observed with
366 adequate *Cronbach Alpha* coefficients (ranging from .64 to .81). Denial of Abusiveness
367 revealed a coefficient lower than .70, but this dimension is comprised by fewer items.
368 Consistent with the original full scale, which scored .764 (Collings, 1997) and with the
369 Swedish ($\alpha=.86$) and South Korean ($\alpha=.71$) versions (Collings et al., 2009), the
370 Portuguese version also showed good reliability ($\alpha=.86$).

371 A set of limitations of this study should also be noted, such as the use of an
372 online convenience sample. Although online data collection has benefits in terms of
373 costs, time and accessibility (Lages, Magalhães, Antunes, & Ferreira, 2018), future
374 studies should also include participants who do not have access to online platforms, in
375 order to have a more diverse sample. In addition, the present findings should be

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376 interpreted with caution given the different numbers of male (N= 143) and female (N=
377 280) participants, with female participants representing more than half of the sample
378 (66.2%). In the future, additional validity and reliability evidence should be provided,
379 namely using longitudinal designs to assess predictive validity as well as reliability
380 based on test-retest approaches.

381 Notwithstanding these limitations, the process of validation and adaptation of
382 this scale followed the international guidelines (i.e., translation, back-translation and
383 expert review; Beaton, Bombardier, Guillemin & Ferraz, 2000) and the current findings
384 highlighted the construct validity and reliability evidence of CSAMS in the Portuguese
385 context. The present study offers a contribution for forthcoming cross-cultural research
386 on the predictors and consequences of CSA myths, which is a necessary first step to
387 identify how to prevent the endorsement and dissemination of these myths across
388 diverse cultural contexts.

389 **Declaration of interest statement**

390 The authors declare no competing interests.

391

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570 Table 1
~~571~~ Descriptive statistics: Means, Standard deviation, Skewness and Kurtosis

Item	M	SD	Percent of agreement for each item					Skewness		Kurtosis	
			1	2	3	4	5	Statistic	SE	Statistic	SE
1. Sexual contact between an adult and a child, which is wanted by the child and which is physically pleasurable for the child cannot really be described as being "abusive" [O contacto sexual entre um adulto e uma criança, que a criança deseja e no qual sente prazer, não pode ser verdadeiramente descrito como sendo 'abusivo']	1.44	0.83	71.6	18.2	6.1	2.8	1.2	2.18	0.12	4.70	0.24
2. Sexual contact with an adult can contribute favorably to a child's subsequent psycho-sexual development [O contacto sexual com um adulto pode contribuir favoravelmente para o subsequente desenvolvimento psicosexual da criança]	1.77	1.25	65.6	11.1	9.0	8.5	5.7	1.41	0.12	0.64	0.24
3. Most children are sexually abused by strangers or by men who are not well known to the child [A maior parte das crianças é abusada sexualmente por estranhos ou por homens que a criança não conhece bem]	2.17	0.93	25.5	41.6	24.8	6.6	1.4	0.58	0.12	0.01	0.24
4. Children who act in a seductive manner must be seen as being at least partly to blame if an adult responds to them in a sexual way [Crianças que se comportam de forma sedutora devem ser vistas como parcialmente culpadas se um adulto lhes responde de forma sexualizada]	1.36	0.71	74.9	16.1	6.9	2.1	0	2.01	0.12	3.42	0.24
5. Sexual contact between an adult and child that does not involve force or coercion and that does not involve actual or attempted sexual intercourse is unlikely to have serious psychological consequences for the child [O contacto sexual entre um adulto e uma criança que não envolve força ou coerção, e que não inclui relação sexual tentada ou consumada, tem pouca probabilidade de ter consequências psicológicas sérias para a criança]	1.48	0.80	68.3	20.1	7.3	3.3	0.9	1.92	0.12	3.45	0.24
6. A woman who does not satisfy her partner sexually must bear some of the responsibility if her partner feels frustrated and turns to her children for sexual satisfaction [Uma mulher que não satisfaz sexualmente o seu companheiro deve assumir alguma responsabilidade se o seu parceiro se sentir frustrado e recorrer aos filhos dela para obter satisfação sexual]	1.14	0.50	91.0	5.4	2.8	0.2	0.5	4.48	0.12	23.47	0.24
7. Child sexual abuse takes place mainly in poor, disorganized, unstable families [O abuso sexual de crianças ocorre principalmente em famílias pobres, desorganizadas e instáveis]	1.86	0.99	48.0	25.8	18.9	6.6	0.7	0.87	0.12	-0.22	0.24

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8. It is not sexual contact with adults that is harmful for children. What is really damaging for the child is the social stigma that results once the "secret" gets out [Não é o contacto sexual com adultos que é prejudicial para a criança. O que realmente prejudica a criança é o estigma social que surge quando o "segredo" é revelado]	1.41	0.75	71.6	18.7	7.1	2.4	0.2	1.93	0.12	3.42	0.24
9. Many children have an unconscious wish to be sexually involved with an opposite sexed parent, which leads them to unconsciously behave in ways that make sexual abuse by that parent more likely [Muitas crianças têm um desejo inconsciente de se envolverem sexualmente com o/a progenitor/a do sexo oposto, o que as leva a inconscientemente comportarem-se de uma forma que torna o abuso sexual mais provável]	1.51	0.81	66.6	18.2	12.6	2.6	0	1.41	0.12	0.89	0.24
10. Adolescent girls who wear very revealing clothing are asking to be sexually abused [Raparigas adolescentes que usam roupas reveladoras estão a "pedir" para serem abusadas sexualmente]	1.31	0.66	78.0	15.1	5.2	1.4	0.2	2.40	0.12	6.02	0.24
11. Children raised by gay or lesbian couples face a greater risk of being sexually abused than children raised by heterosexual couples [Crianças que são educadas por casais homossexuais apresentam maior risco de serem abusadas sexualmente do que crianças educadas por casais heterossexuais]	1.35	0.74	77.3	13.0	7.8	1.2	0.7	2.33	0.12	5.51	0.24
12. Boys are more likely than girls to enjoy sexual contact with an adult and are therefore less likely to be emotionally traumatized by the experience [Os rapazes têm maior probabilidade do que as raparigas de desfrutar do contacto sexual com um adulto e por isso é menos provável que fiquem emocionalmente traumatizados pela experiência]	1.49	0.84	69.7	15.8	10.6	3.5	0.2	1.66	0.12	1.85	0.24
13. Child sexual abused is caused by social problems such as unemployment, poverty, and alcohol abuse [O abuso sexual na infância é causado por problemas sociais como o desemprego, a pobreza e o abuso de álcool]	2.08	1.05	40.2	22.9	26.2	10.2	0.5	0.47	0.12	-0.99	0.24
14. Children who do not report ongoing sexual abuse must want the sexual contact to continue [As crianças que não revelam o abuso sexual querem que o contacto sexual continue]	1.26	0.61	82.0	11.6	5.0	1.4	0	2.57	0.12	6.290	0.24
15. Older children, who have better understanding of sexual matters, have a responsibility to actively resist sexual advances made by adults [Crianças mais velhas, que têm uma maior compreensão sobre questões sexuais, têm a responsabilidade de resistir ativamente a avanços sexuais por parte dos adultos]	2.01	1.17	47.4	20.9	17.5	11.4	2.8	0.84	0.12	-0.45	0.24

573 Note. 1= Strongly Disagree; 2- Disagree; 3- Neither agree nor disagree; 4- Agree; 5= Strongly Agree; SE= Standard Error; N=423; Portuguese version in square brackets

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Table 2
Fit statistics from the Confirmatory Factor Analysis

	$\chi^2(df)$	χ^2/df	GFI	CFI	RMSEA [90% CI]	AIC	ECVI
Model 1 – 3 factors	270.993 (74)	3.66***	.91	.90	.079[.069;.090]	332.993	.789
Model 2 – 3 factors, correlating errors	171.417 (72)	2.38***	.94	.95	.057[.046;.068]	237.417	.563
Model 3 – 1 factor	345.208 (77)	4.48***	.89	.86	.091[.081;.101]	345.208	.951
Model 4 – 1 factor, correlating errors	216.149 (75)	2.88***	.93	.93	.067[.056;.077]	276.149	.654

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Note. *** $p < .001$; GFI= Goodness of Fit Index; CFI= Comparative Fit Index; RMSEA= Root Mean Square Error of Approximation; AIC= Akaike information criterion; ECVI= The Expected Cross Validation Index

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Table 3
Simple intercorrelations of study variables, mean and standard deviations

Dimension	2	3	4	5	<i>M</i>	<i>SD</i>
1. Blame Diffusion	.59***	.61***	.36***	.32***	1.36	0.53
2. Denial of Abusiveness	1	.59***	.27***	.31***	1.68	0.72
3. Restrictive Stereotypes		1	.30***	.31***	1.80	0.63
4. Benevolent Sexism			1	.65***	3.31	0.96
5. Hostile Sexism				1	3.50	0.95

604 *Note.* *** $p < .001$; *M*=Mean; *SD*= Standard Deviation

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606 Table 4
 607 Mean differences based on participants' sex
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	Sex	<i>M</i>	<i>SD</i>	<i>t</i>	<i>p</i>	<i>Cohen's d</i>
Blame Diffusion	Female	1.24	.40	-5.971	<.001	.66
	Male	1.60	.66			
Denial of Abusiveness	Female	1.53	.63	-5.578	<.001	.60
	Male	1.96	.80			
Restrictive Stereotypes	Female	1.68	.55	-5.085	<.001	.55
	Male	2.03	.72			

609 Note. *M*=Mean; *SD*=Standard Deviation

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632 Table 5
 633 *Item-total statistics for each factor and the global factor*
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Factors/Items	<i>Corrected Item-Total Correlation</i>	<i>Cronbach's Alpha if Item Deleted</i>	<i>Floor Effect (%)</i>	<i>Ceiling Effect (%)</i>
Blame Diffusion			50.4	0
Item 4	0.626	0.759		
Item 9	0.533	0.793		
Item 10	0.700	0.739		
Item 11	0.566	0.778		
Item 14	0.567	0.778		
Denial of Abusiveness			33.8	0
Item 1	0.494	0.530		
Item 2	0.403	0.587		
Item 5	0.489	0.530		
Item 15	0.345	0.625		
Restrictive Stereotypes			13.2	0
Item 3	0.398	0.713		
Item 7	0.495	0.676		
Item 8	0.480	0.686		
Item 12	0.542	0.660		
Item 13	0.540	0.657		
Global Factor			8.5	0
Item 1	0.500	0.854		
Item 2	0.407	0.864		
Item 3	0.470	0.856		
Item 4	0.624	0.849		
Item 5	0.619	0.848		
Item 7	0.430	0.859		
Item 8	0.617	0.849		
Item 9	0.598	0.849		
Item 10	0.585	0.851		
Item 11	0.532	0.853		
Item 12	0.663	0.845		
Item 13	0.459	0.857		
Item 14	0.533	0.854		
Item 15	0.480	0.857		

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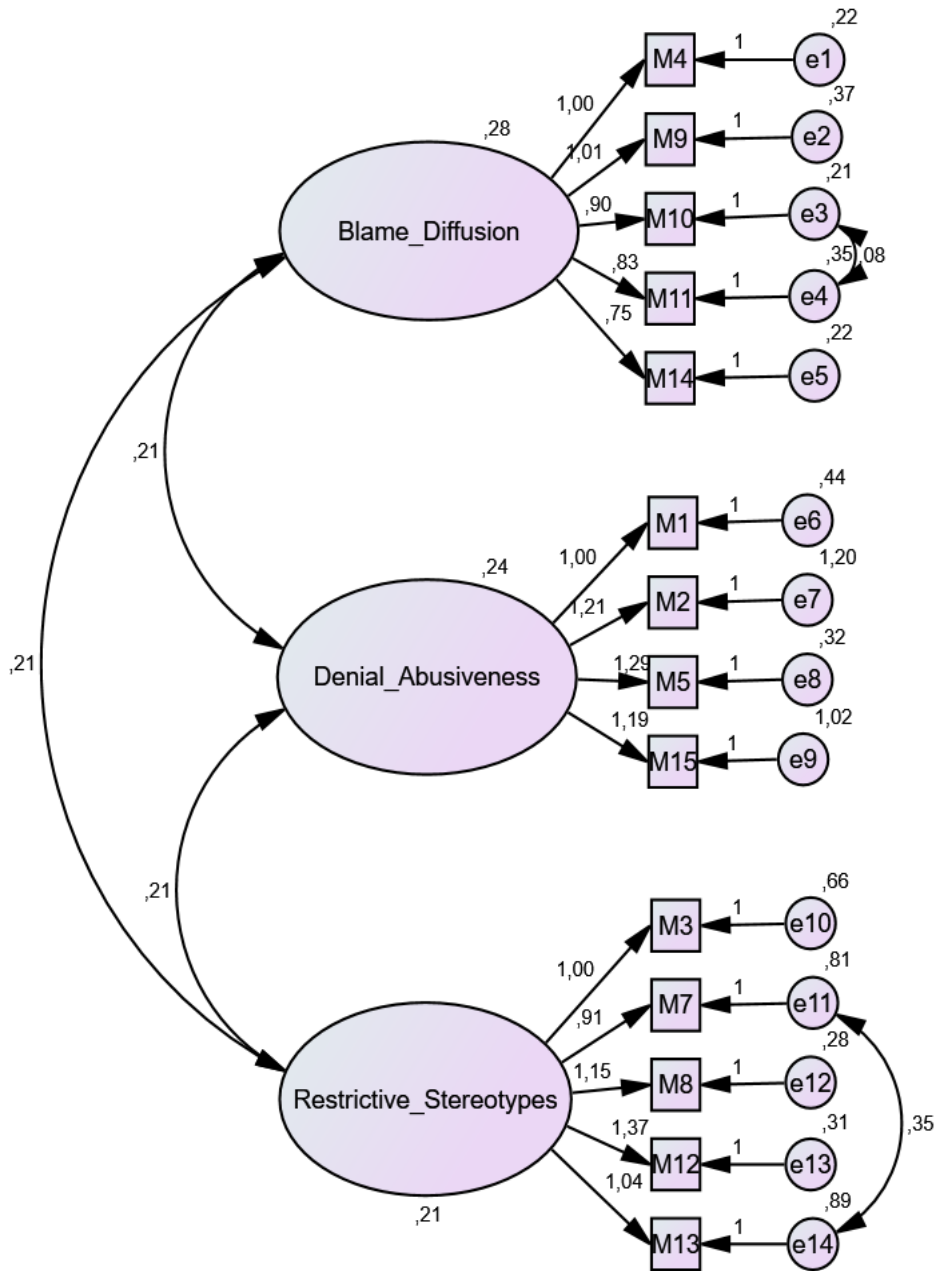
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Figure 1. Confirmatory factor analysis of Child Sexual Abuse Myth Scale – Final Model