Evaluations of a bullying case involving a victim with autism spectrum disorder

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Abstract
We investigated how people determine whether a specific occurrence of aggression between students constitutes bullying and how they think perpetrators should be treated. In two experiments, we examined perceptions of relational bullying at a university involving a victim who admits to engaging in socially inappropriate behavior. Participants were assigned to one of three victim disability conditions: autism spectrum disorder (ASD), dyslexia, or no disability. They listened to a recording of a disciplinary hearing and made several evaluations (e.g., verdict). Participants’ judgments were more likely to favor the victim if they learned that he had ASD rather than dyslexia or no disability. Observers may view an ASD diagnosis as a reasonable explanation for behaving inappropriately and therefore excuse the victim’s conduct.

School bullying has emerged as an alarming problem that school administrators, legislators, and parents are struggling to address. Empirical estimates of prevalence rates vary as a function of the measures and samples used, but the data reveal a widespread problem, indicating that 24%–45% of students in U.S. primary and secondary schools are bullied during the course of a year, with up to 20% being targeted multiple times per week (Swearer & Cary, 2003; Wang, Iannotti, & Nansel, 2009). A substantial proportion of children in middle and high school indicate that they are moderately or frequently involved in bullying as victims, perpetrators, or both (Nansel et al., 2001). Although few studies have looked at college students’ experiences, it is clear that bullying is also pervasive at that level, with 20%–25% of undergraduates reporting being victimized (Chapell et al., 2004).

The consequences of bullying are considerable. Compared to other students, victims are more likely to suffer from physical health problems and psychological issues, including anxiety and depression (Baldry, 2004; Gini & Pozzoli, 2009; Klomek, Marrocco, Kleinman, Schonfeld, & Gould, 2007; Rigby, 2003). Some of these difficulties may last into adulthood (Wolke, Copeland, Angold, & Costello, 2013). Victims also experience academic troubles, such as poor grades, and they may try to avoid victimization by skipping school or dropping out (Juvonen, Wang, & Espinoza, 2011; Rigby, 2003). Media reports of suicides and school shootings often associate those tragedies with bullying incidents (Chapell et al., 2006; Hazler, Miller, Carney, & Green, 2001; Jordan & Austin, 2012).

Recognizing the harmful effects of bullying, many school districts have developed anti-bullying policies, and in fact most U.S. states have passed laws compelling districts to establish procedures for reporting and documenting occurrences of bullying, disciplining perpetrators, and implementing programs to reduce rates of bullying (American Educational Research Association, 2013; Brank, Hoetger, & Hazen, 2012; Limber & Small, 2003). In higher education, it is less common to find policies that target bullying specifically, but many colleges and universities have student codes of conduct or prohibitions against harassment that would cover bullying. It is possible that more institutions will have to adopt anti-bullying guidelines in the future to comply with state or federal legislation. New Jersey has enacted a law mandating that all public schools, including colleges and universities, must have a policy addressing bullying, and a bill that would require all states to do the same was recently introduced in the U.S. House of Representatives (Grasgreen, 2011).

Although some statutes define bullying, others ask districts to do so themselves. Consequently, a variety of descriptions exist across different schools, with most diverging at least somewhat from the academic definition (Brank et al., 2012). According to researchers, bullying is an aggressive behavior that includes three components. First, it is intended to cause harm. Second, it arises within relationships in which there is an imbalance of power and/or physical strength between perpetrators and victims. Finally, it recurs over time (Brank et al., 2012; Limber & Small, 2003; Olweus, 1995).
Researchers have identified multiple types of bullying (Bauman & Del Rio, 2006; Brank et al., 2012; Cook, Williams, Guerra, Kim, & Sadek, 2010; Jordan & Austin, 2012; Rigby, 2003; Wang et al., 2009). Any kind of bodily attack (e.g., hitting or pushing) is categorized as physical bullying. Verbal bullying occurs when a perpetrator makes hurtful statements directly to the victim. Examples include name-calling and abusive or mocking language. Bullying can also be indirect rather than direct. With relational bullying, the perpetrator contrives to damage the victim’s relationships with others by manipulating the way others treat the victim or feel about him or her. A perpetrator could, for example, persuade classmates to isolate the victim socially or spread rumors about him or her.

It would be valuable to understand how people determine whether a specific occurrence of aggression between students constitutes bullying and how they think perpetrators should be treated. In order for laws and programs to work, observers must recognize bullying when they see it and report incidents to authorities. In fact, some policies specifically require all observers, not just students and school employees, to report all cases of suspected bullying (Kinsey, 2013). Moreover, public sentiment influences legislators and school officials as they create anti-bullying policies, implement them, and assess them.

Despite the importance of this line of research, not many studies have examined how adults evaluate cases of alleged bullying. In most of the existing research, the participants were either teachers (or preservice teachers), school staff, or counselors, and they were studied because they are responsible for supervising students at school (Bauman & Del Rio, 2006; Ellis & Shute, 2007; Hazler et al., 2001; Jacobsen & Bauman, 2007; Maunder, Harrop, & Tattersall, 2010; Nesdale & Pickering, 2006; Yoon, 2004). Few published investigations (e.g., Gentry & Pickel, in press; Hoetger, Hazen, & Brank, in press) have sampled community members or university students over the age of 18. The latter participants are of interest not only because they might observe school bullying directly as a student or a visitor to a school but also because they can give input and feedback to legislators and administrators in charge of developing laws and policies. Collectively, the existing studies indicate that judgments of bullying episodes are affected by several case variables, including the type of bullying, the academic level at which the bullying occurred, the perpetrator’s popularity, the amount of harm done to the victim, and the sex of the victim.

One objective of the present research was to add to the relatively limited set of prior studies that have explored adults’ evaluations of bullying incidents. We wanted to examine cases occurring at a university because that setting is understudied, as noted previously. Our participants listened to a disciplinary hearing involving a case of alleged bullying at a university and subsequently made several judgments, including a verdict, a recommendation of punishment for the perpetrator, a rating of the seriousness of the case, and ratings of the victim and perpetrator.

A second objective was to investigate perceptions of bullying cases when the victim has been diagnosed with autism spectrum disorder (ASD), a neurodevelopmental disability. Although students with any kind of disability are more likely to be victimized than those without one (Rose, Espelage, Aragon, & Elliott, 2011), students with ASD are especially at risk due to their difficulties in developing normal social interactions and in understanding others’ behaviors (Cappadocia, Weiss, & Pepler, 2012; Carter, 2009; Little, 2002; Sofronoff, Dark, & Stone, 2011; Sterzing, Shattuck, Narendorf, Wagner, & Cooper, 2012; van Roekel, Scholle, & Didden, 2010).

Particularly if they are diagnosed at the lowest level of severity, individuals with ASD often have average or above average intellectual functioning and academic achievement (Carter, 2009; Grisswold, Barnhill, Myles, Hagiwara, & Simpson, 2002; Sciutto, Richwine, Mentrikoski, & Niedzwiecki, 2012). Moreover, they can be successful at the college level; in fact, the number of individuals with ASD attending college is thought to be increasing (Adreon & Durocher, 2007). However, they show serious deficits in communication and social skills (Adreon & Durocher, 2007; Cappadocia et al., 2012; Carter, 2009; Sciutto et al., 2012; van Roekel et al., 2010). Although most individuals with ASD desire social contact, they have trouble taking others’ perspectives and understanding others’ feelings, intentions, and mental states (Adreon & Durocher, 2007; Sofronoff et al., 2011; van Roekel et al., 2010). Nonverbal communication cues are difficult for them to process, and often they do not follow social conventions or engage in reciprocal interactions (Adreon & Durocher, 2007; Little, 2002; van Roekel et al., 2010). These individuals may possess advanced vocabularies and speak in a formal manner that seems ostentatious to listeners, and they tend to interpret language literally, failing to understand idioms, humor, and sarcasm (Adreon & Durocher, 2007). They may have intense special interests that they continue to talk about despite others’ attempts to change the subject (Adreon & Durocher, 2007; Carter, 2009; Little, 2002).

Individuals with ASD also prefer predictability and consistency, so they may inflexibly cling to established routines, show distress at even small changes, and become anxious when faced with transitions or rule violations (Adreon & Durocher, 2007). In sum, although these individuals usually want to fit in and to develop friendships and romantic relationships, it is extremely difficult for them to do so because their social and communication deficits and their unconventional behaviors lead others to perceive them as strange, rude, or disinterested (Adreon & Durocher, 2007).1 Thus, their

1Our intent is to describe how individuals with ASD are often perceived, not to justify others’ negative behaviors toward them.
impairments serve to increase the likelihood that they will be targeted for bullying, and at the same time they have few friends who can serve as allies (Brank et al., 2012; Cappadocia et al., 2012; van Roekel et al., 2010; Wang et al., 2009). Numerous studies reveal that individuals with ASD often become victims of bullying in school settings, causing them emotional pain, fear, and stress (Carter, 2009; Sciutto et al., 2012).

Because students with ASD are especially likely to be bullied and because ASD diagnoses are common and on the rise (Adreon & Durocher, 2007; Centers for Disease Control and Prevention, 2012; Sterzing et al., 2012), it is important to investigate individuals’ evaluations of bullying incidents directed at victims from this population. In the present study, participants listened to a university disciplinary hearing in which a typically developing student is accused of bullying a socially awkward classmate. We manipulated the victim’s disability so that he has a diagnosis of ASD in one condition and no disability in another. We were interested in how this variable would affect participants’ judgments regarding the seriousness of the case, whether the perpetrator’s behavior meets the definition of bullying, and how the perpetrator should be punished (if at all). Moreover, we asked participants to make some additional evaluations of the victim and perpetrator (e.g., the degree of empathy they felt toward each).

It is unknown whether bullying will be judged more harshly if the victim has been diagnosed with a disorder that impairs social skills. On one hand, victims of bullying are sometimes perceived as making themselves a target by engaging in certain behaviors others find obnoxious, rude, or socially inappropriate (Gentry & Whitley, in press; Olweus, 1978). Because of these perceptions, they may be less well liked by peers than other students (Brank et al., 2012; Cappadocia et al., 2012; van Roekel et al., 2010; Wang et al., 2009). Consequently, participants might blame the victim in both conditions if they conclude that he is unlikeable and that he brought the bullying on himself through his own actions. On the other hand, participants in the ASD condition may see the victim’s diagnosis as a reasonable explanation for his annoying behavior, and they may excuse him for it. Therefore, compared to those in the control condition, they may make harsher judgments against the perpetrator and higher ratings of seriousness.

We wanted to rule out the possibility that participants would treat the victim differently if he had a diagnosis of any sort, including one that would not directly influence his social interactions or lead others to perceive him as socially inappropriate. Therefore, in addition to the two conditions described above, we included another in which the victim’s diagnosis was dyslexia. Dyslexia is a neurological learning disability that causes reading problems (Mathes & Fletcher, 2008). Specifically, dyslexic individuals have trouble decoding phonemes, recognizing words, and spelling words accurately.

This disability does not affect social competence, and as a result a diagnosis of dyslexia would not explain or excuse an individual’s inappropriate social interactions.

Some previous results suggest that, compared to men, women are more likely to define aggressive behaviors as bullying, to rate them as more serious, and to recommend more severe punishment for perpetrators (Ellis & Shute, 2007; Gentry & Pickel, in press; Maunder et al., 2010). Thus, we predicted that female participants would evaluate the stimulus cases more harshly than male participants.

To summarize, we asked participants to evaluate a case of relational bullying in a university setting presented in the form of a disciplinary hearing, and we manipulated the victim’s disability (ASD, dyslexia, or none). We conducted two experiments that followed the same design and procedure. However, the details of the cases varied somewhat. First, the amount of harm caused to the victim, as evidenced by his testimony, was greater in the second experiment than in the first. Given that participants’ judgments are influenced by degree of harm (Gentry & Pickel, in press), it is important to demonstrate that manipulating the victim’s diagnosis has the same effect at different levels of this variable. In addition, in one experiment the bullying occurred in a context in which individuals have well-defined goals and tasks (i.e., a classroom during a class meeting), whereas in the other it took place in a less structured social environment (i.e., in the dining room of a residence hall while the victim, the defendant, and others were eating and socializing). The point was to verify that manipulating the victim’s disability would similarly affect participants’ evaluations across different situations in which people interact in different ways. We hoped to find the same pattern of results in both experiments, thus increasing our confidence in their reliability.

**Experiment 1**

**Method**

**Participants**

The participants (N = 124) were undergraduate psychology students at a medium-sized, Midwestern U.S. university. These students received either course credit or extra credit for their participation. They ranged in age from 18 to 27 years (M = 19.16, SD = 1.44); 61% were female and 83% were White.

**Materials and procedure**

The participants acted as university disciplinary committee members and listened to an audio recording (experimental
versions: 9 minutes, 30 seconds in length; control version: 7 minutes, 30 seconds) of a hearing in which one student accuses another of bullying. The Dean of Students presides over the hearing and allows each student to present his account of what happened.

Because students with ASD frequently experience relational bullying (Cappadocia et al., 2012; Carter, 2009; Little, 2002; Sciutto et al., 2012), the case was written to fit the definition of that type. Both the victim and the defendant are 19-year-old male college students. During the hearing, the victim accuses the defendant of bullying him repeatedly over several weeks during the chemistry class they shared. As proof, the victim provides an audio recording that he made with his voice recorder of one of these incidents. The Dean of Students plays the recording for the participants as part of the hearing. On the recording, the defendant advises the other students in the class not to partner with the victim for lab assignments, saying “he’ll wreck your grade if you work with him.” He points out that the victim often makes mistakes on the homework and “stupid comments” during class, and he calls him “a complete idiot.” According to the victim, the defendant’s popularity within the class has allowed him to turn the other students against the victim. The victim further testifies that, as a result of the bullying, he felt depressed and miserable, dreaded going to class, and subsequently skipped three class periods to try to avoid being harassed.

The defendant admits making the statements heard on the recording, but he justifies them by arguing that he was simply reacting to the victim’s inappropriate behavior. He describes several occasions when the victim dominated class discussions, kept the class from being dismissed early by repeatedly asking questions, refused to let the professor make changes to the routine, or arrogantly claimed to be an expert on chemistry. The defendant shares that, on the first day of the semester, the victim told the professor, “I know more about this subject than anybody in this room, including you.” In the defendant’s view, the victim was incredibly rude and annoying, and he made himself a target through his own actions.

Following the defendant’s testimony, the Dean of Students offers the victim the opportunity to provide a rebuttal before the hearing concludes. The victim acknowledges his exasperating behavior but says “it’s not my fault” and places the blame on the defendant. In the control condition, he presents no additional information. However, in the two experimental conditions, the victim discloses that he has a disability documented by the university’s Office of Disabled Student Services, and he asks the Dean of Students to read aloud a report prepared by that office explaining his symptoms and the effects of his disability. The victim tells the committee he hopes the information in the report will help them better understand him.

In the first of the two experimental conditions, the victim’s diagnosis is Asperger syndrome. Reading from the report from the Office of Disabled Student Services, the Dean of Students explains that the victim has Asperger syndrome, which is a neurobiological disorder on the higher functioning end of the autism spectrum that impairs social functioning and communication. The Dean further reads to the committee that individuals with this disorder usually have normal intelligence, but they find it difficult to interpret social cues, they have trouble with the “give and take” of conversations, they tend to interpret language literally, they become upset with changes to their routine, and they struggle with understanding other people’s feelings. In addition, individuals with this disorder may have an intense interest in a particular subject, like chemistry.

In the second experimental condition, the victim’s diagnosis is dyslexia. The report read by the Dean explains that dyslexia is a learning disability with a neurological cause that impairs skills related to reading. Specifically, although individuals with dyslexia typically have normal intelligence, they have difficulty associating letters of the alphabet with speech sounds, they struggle with understanding what they read, they read slowly and with considerable effort, and they have trouble summarizing stories and following step-by-step directions. When writing, individuals with dyslexia find it hard to organize their thoughts, and they are poor spellers.

The participants were randomly assigned to listen to one of the three versions of the recording. Afterward, they were given a written definition of bullying that was adapted from the statutory definition in Indiana, where the data were collected:

“Bullying” means overt, repeated acts or gestures by a student or group of students against another student with the intent to harass, ridicule, humiliate, intimidate, or harm the other student. “Acts or gestures” includes verbal or written communications, physical acts, or other behaviors that take place on university property or at any university-sponsored function on or off campus. Bullying involves an imbalance of power or strength between the bully/bullies and the victim.

Next, participants filled out a questionnaire asking them to provide several judgments. First, they chose a verdict (guilty or not guilty of bullying), estimated the probability of the defendant’s guilt, and rated their confidence in the verdict (from 0 = no confidence at all to 10 = complete confidence).

3After we completed data collection, the American Psychiatric Association published the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (American Psychiatric Association, 2013), in which Asperger syndrome was reclassified as autism spectrum disorder, high functioning. No symptomatology or criteria were altered. Although the participants in this condition were told the victim’s diagnosis was “Asperger syndrome,” we will use the term autism spectrum disorder (ASD) in this article, except when quoting from the materials presented to participants.
Subsequently, they recommended a punishment for the perpetrator if the disciplinary committee were to find him guilty by selecting one option from a list that was intended to vary in severity from low to high (no punishment, attending a formal meeting with an administrator, transferring to a different chemistry section to finish out the semester, withdrawing from the chemistry class and retaking it next semester, being suspended from all classes for the rest of the current semester, being suspended from all classes for the rest of the current semester plus the next semester, being expelled). To verify that participants would perceive the severity of the possible punishments as we expected, we asked 14 pilot participants to rate each one using an 11-point scale (from 0 = most lenient to 10 = most severe). After putting the options in order according to the obtained ratings, we found that all 14 pilot participants agreed with the way we ranked them.

After choosing a punishment, the participants in the main study then rated the seriousness of the bullying (from 0 = not at all to 10 = extremely). They also made some judgments about the victim and the defendant. Specifically, they rated the level of responsibility they would assign to each for the incident (from 0 = not at all to 10 = completely responsible) and the amount of empathy they felt for each (from 0 = not at all to 10 = very much). Next, they completed a social distance scale (Winer, Bonner, Blaney, & Murray, 1981) that measured their attitudes toward the victim and the defendant. Scores on this 6-item scale can range from 6 to 42; higher numbers reflecting more negative attitudes.

The participants then answered three multiple-choice manipulation checks, asking them to remember what the defendant did to bully the victim, what effect the bullying had on the victim, and what disability, if any, the victim had. Demographic questions followed, after which participants were thanked and debriefed.

### Results

Seven participants failed one or more of the three manipulation checks, so their data were excluded from the analyses. After these cases were removed, 117 participants remained in the sample. Except for verdicts, the dependent variables were examined using factorial analyses of variance, with victim’s disability and participants’ sex as factors and alpha set at .05. When a main effect of disability emerged, a follow-up Student–Newman–Keuls procedure was used to clarify which conditions differed.

#### Verdict, confidence, and probability of guilt

We used a hierarchical log-linear analysis to investigate the effects of victim’s disability and participants’ sex on verdict. We discovered a main effect of disability (see Table 1), \( \chi^2(2, N = 117) = 8.62, p = .01 \), Cramer’s \( V = .27 \). We next ran contrasts to determine which pairs of conditions differed significantly. The results indicated that the proportion of guilty verdicts in the ASD condition was greater than in the dyslexia condition, Wald \( \chi^2(1, N = 79) = 5.70, p = .02 \), and the control condition, Wald \( \chi^2(1, N = 79) = 4.83, p = .03 \). There was no difference between the latter two conditions, Wald \( \chi^2(1, N = 76) = 0.07, p = .79 \). Furthermore, we obtained no significant main effect of participants’ sex and no interaction (ps ≥ .38).

Participants were asked to rate their confidence in their verdict. There were no significant effects for this variable (ps ≥ .35).

For probability of guilt judgments, we found a main effect of disability, \( F(2, 111) = 31.37, p < .001, \eta^2 = .36 \). Specifically, participants in the ASD condition assigned a greater probability of guilt than those in the other conditions, which did not differ. No other effects were significant (ps ≥ .12).

### Table 1  Experiment 1: Dependent Measures as a Function of Victim’s Disability

<table>
<thead>
<tr>
<th>Measure</th>
<th>Disability condition</th>
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<tbody>
<tr>
<td></td>
<td>Control</td>
<td>Dyslexia</td>
<td>ASD</td>
<td></td>
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<tr>
<td>Verdict</td>
<td>7.6</td>
<td>7.4</td>
<td>9.5</td>
<td></td>
</tr>
<tr>
<td>Probability of guilt</td>
<td>7.16 (1.15)</td>
<td>7.76 (1.76)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Probability of guilt</td>
<td>.00 (0.12)</td>
<td>.79 (0.11)</td>
<td></td>
<td></td>
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<tr>
<td>Seriousness</td>
<td>4.34 (1.65)</td>
<td>4.34 (1.74)</td>
<td></td>
<td></td>
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<tr>
<td>Victim responsibility</td>
<td>5.37 (2.12)</td>
<td>6.13 (1.61)</td>
<td></td>
<td></td>
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<tr>
<td>Defendant responsibility</td>
<td>6.24 (2.09)</td>
<td>5.95 (1.99)</td>
<td></td>
<td></td>
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<tr>
<td>Victim empathy</td>
<td>4.89 (1.87)</td>
<td>4.08 (2.07)</td>
<td></td>
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<tr>
<td>Defendant empathy</td>
<td>4.58 (2.33)</td>
<td>4.21 (1.95)</td>
<td></td>
<td></td>
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<tr>
<td>Victim social distance</td>
<td>29.63 (7.61)</td>
<td>29.50 (6.64)</td>
<td></td>
<td></td>
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<tr>
<td>Defendant social distance</td>
<td>30.16 (7.54)</td>
<td>26.08 (6.93)</td>
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</tr>
</tbody>
</table>

Note. For all variables except verdict, means are reported with standard deviations in parentheses. Ratings of confidence, seriousness, responsibility, and empathy were made on an 11-point scale with higher numbers reflecting greater quantities. Social distance scores can range from 6 to 42; higher numbers indicate more negative attitudes toward the target individual. Values in the same row that do not share the same subscript differ significantly, \( p < .05 \). ASD = autism spectrum disorder.
Bullying victim with autism spectrum disorder

Participants’ ratings of the seriousness of the bullying were influenced by the victim’s disability (see Table 1), $F(2, 111) = 10.58, p < .001, \eta^2 = .16$. In particular, their ratings were higher if the victim had been diagnosed with ASD rather than dyslexia or if he had no disability. There was no difference between the dyslexia and control conditions. We found no main effect of participants’ sex ($p = .15$). However, the interaction approached significance, $F(2, 111) = 2.48, p = .09, \eta^2 = .04$; there was a tendency for men to assign higher seriousness ratings than women in the dyslexia condition (men: $M = 4.50, SD = 1.62$; women: $M = 4.27, SD = 1.89$), but not in the ASD (men: $M = 5.18, SD = 2.01$; women: $M = 6.63, SD = 1.25$) or the control (men: $M = 4.24, SD = 1.48$; women: $M = 4.43, SD = 1.81$) conditions.

Judgments of victim and defendant

Participants were asked to make several judgments about the victim and the defendant. First, they rated how responsible each individual was for the incident. Regarding the victim’s responsibility, we found a significant main effect of disability (see Table 1), $F(2, 111) = 6.61, p = .002, \eta^2 = .11$, such that he was considered less responsible if he had been diagnosed with ASD rather than dyslexia or if he had no disability, with no difference between the latter two conditions. No other effects were significant ($p \geq .21$). Concerning ratings for the defendant, participants regarded him as more responsible if the victim was diagnosed with ASD than if he was diagnosed with dyslexia or had no diagnosis, $F(2, 111) = 3.11, p = .05, \eta^2 = .05$; ratings in the dyslexia and control conditions did not differ. Moreover, women’s ratings ($M = 6.75, SD = 2.09$) were higher than men’s ratings ($M = 6.02, SD = 1.93$), $F(1, 111) = 3.93, p = .05, \eta^2 = .03$. The interaction was not significant ($p = .15$).

The participants were also asked to report the amount of empathy they felt for each individual. For the victim, there was a main effect of disability, $F(2, 111) = 10.13, p < .001, \eta^2 = .15$; ratings were higher in the ASD condition than in the other two, which did not differ. We found no other significant effects ($p \geq .13$). Regarding empathy for the defendant, there were no significant effects ($p \geq .61$).

Finally, the participants completed Winer et al.’s (1981) social distance scale using the victim and the defendant as targets. Participants’ attitudes toward the victim were more positive if they were in the ASD condition as opposed to one of the other conditions, which did not differ significantly, $F(2, 111) = 3.68, p = .03, \eta^2 = .06$. We obtained no other significant effects ($p \geq .12$). Regarding the defendant, men’s attitudes ($M = 26.15, SD = 8.23$) were more positive than women’s attitudes ($M = 29.59, SD = 7.94$), $F(1, 111) = 5.85, p = .02, \eta^2 = .05$. No other significant effects emerged ($p \geq .10$).
**Mediation analysis**

We hypothesized that, if the victim’s diagnosis of ASD caused participants to make different judgments about the defendant’s guilt than in the other conditions, this effect could be mediated by perceptions of the victim and/or defendant. For example, learning that the victim had ASD might lead participants to have a more positive attitude toward him, to feel more empathy for him, or to assign less responsibility to him and perhaps more to the defendant. Then, in turn, these judgments could affect participants’ estimates of the probability that the defendant is guilty.

We therefore conducted a mediation analysis using regression, as specified by Baron and Kenny (1986). We first identified four variables as possible mediators because they were correlated with the disability manipulation as revealed by regression analyses; these variables were empathy, responsibility, and social distance ratings for the victim, and responsibility ratings for the defendant. We next entered these variables into a regression analysis along with disability condition, with probability of guilt as the outcome variable. Two of the possible mediators, ratings of empathy and responsibility for the victim, were not significant and thus were dropped from the analysis.

We then repeated the regression analysis using the two remaining mediators: ratings of social distance for the victim and responsibility for the defendant. We obtained significant beta coefficients for the paths from disability condition to each of these two mediators and for the paths from the mediators to probability of guilt judgments (see Figure 2). The direct path from disability condition to probability of guilt judgments (after controlling for the effect of the mediators) remained significant ($p < .001$), indicating partial mediation.

PRODCLIN (MacKinnon, Fritz, Williams, & Lockwood, 2007) was used to test the significance of each indirect path. The indirect effect of disability condition on probability of guilt estimates through defendant responsibility was not significant, as shown by the 95% confidence limits of $-0.31$ and 0.46. Likewise, the indirect effect through the other mediator, ratings of social distance for the victim, was not significant; the 95% confidence limits were $-0.36$ and 0.53.

**Discussion**

To summarize the findings, participants who learned that the victim had a diagnosis of ASD rather than dyslexia or no diagnosis were more likely to find the defendant guilty, assign a greater probability of guilt, and recommend a harsher punishment for the defendant. In addition, those in the ASD condition rated the bullying as more serious, assigned greater responsibility to the defendant and less responsibility to the victim, and reported feeling more empathy for the victim and having a more positive attitude toward him. We also found that men felt more empathy for the defendant than did women and recommended more lenient sentences. Further interpretation of the results will be deferred until the General Discussion.

**Experiment 2**

The purpose of this experiment was to replicate the results from Experiment 1 using a different bullying case. In Experiment 2, the bullying took place in the dining room of a university residence hall rather than in a classroom, and the victim reported experiencing a higher level of harm, saying that he not only skipped some classes to avoid being harassed but also felt that he had to withdraw from the university.

**Method**

**Participants**

Undergraduate psychology students ($N = 122$) attending the same university as those in Experiment 1 participated in exchange for either course credit or extra credit. They ranged in age from 18 to 24 years ($M = 19.04, SD = 1.24$); 74% were female and 86% were White.

**Materials and procedure**

As in Experiment 1, the participants were asked to listen to an audio recording (experimental versions: 11 minutes in length; control version: 9 minutes) of a university disciplinary hearing in which one student accuses another of bullying. In this case, the bullying occurred in the dining hall of the
dormitory where the victim and the defendant lived. As before, the victim provides an audio recording that he made with his voice recorder of one of the occasions when the defendant bullied him, and the Dean of Students plays the recording for the participants as part of the hearing. On the recording, the defendant is heard telling everyone sitting and eating nearby not to eat with the victim or spend time with him because the victim is “rude and annoying” and talks only about himself and how much he knows. He also calls the victim “a complete mutant.” The victim states that, because of the defendant’s popularity, the other students followed his lead and refused to eat or socialize with him.

The bullying in this case resulted in a higher level of harm for the victim than in Experiment 1. The victim testifies that it was “a really horrible experience” that made him feel so depressed that, as in the previous case, he started skipping classes because he was afraid of what the defendant would say next. However, in the present case, there were also additional consequences. The victim explains that he cried alone in his room every day and finally chose to withdraw from school because he “couldn’t take it anymore.”

The defendant admits making the statements heard on the recording, but he defends them, maintaining that he was “just trying to let [the victim] know that he needed to be more appropriate.” The defendant states that the victim was rude and frequently made everyone feel uncomfortable. He says that on more than one occasion, the victim sat down at a table where several other students were already eating and chatting and interrupted the ongoing discussion to talk about his favorite subject, chemistry. Even if others would try to steer the conversation to another topic, the victim would always bring it back, and he acted like he was lecturing everyone instead of just talking. Moreover, when one student amiably mentioned that he liked chemistry too, the victim replied, “I know more about this subject than anybody in this room, including you.” The defendant further claims that the victim complained about changes to the usual routine and “everything had to be his way.” He makes it clear that, in his opinion, the victim’s infuriating behavior made him a target.

The Dean of Students then allows the victim time to respond to the defendant’s claims. The victim agrees that his behavior can be annoying but insists that it is not his fault. As in Experiment 1, he either provides no additional information (in the control condition) or discloses that he has a disability (ASD in the first experimental condition, dyslexia in the second) documented by the university’s Office of Disabled Student Services. In both experimental conditions, the Dean reads a report explaining the disorder to the disciplinary committee.

As in the first experiment, the participants were randomly assigned to listen to one of the three versions of the recording. Next, they were given the same definition of bullying as before, and they filled out a questionnaire that was identical to the one used previously, except that some sentence options were altered to be consistent with the details of the case. The options, in order of increasing severity, were no punishment, attending a formal meeting with an administrator, transferring to a different dorm on campus, being suspended from all classes for the rest of the current semester, being suspended from all classes for the rest of the current semester plus the next semester, and being expelled. After finishing the questionnaire, the participants were thanked and debriefed.

Results

Nine participants’ data were discarded because they answered one or more of the three manipulation checks incorrectly, leaving 113 participants in the sample. As in Experiment 1, we examined all dependent variables except verdicts using factorial analyses of variance with victim’s disability and participants’ sex as factors and with alpha set at .05. When a main effect of disability emerged, we used a Student–Newman–Keuls procedure to clarify which conditions differed.

Verdict, confidence, and probability of guilt

Using a hierarchical log-linear analysis, we investigated the effects of victim’s disability and participants’ sex on verdict. A main effect of disability emerged (see Table 2), \( \chi^2(2, N = 113) = 14.10, p = .001 \), Cramer’s \( V = .35 \). After running contrasts to determine which pairs of conditions differed significantly, we found that the participants were more likely to choose a guilty verdict if they learned that the victim was diagnosed with ASD rather than dyslexia, \( \chi^2(1, N = 77) = 7.49, p = .01 \), or had no disability, \( \chi^2(1, N = 76) = 6.40, p = .01 \). There was no difference between the latter two conditions, \( \chi^2(1, N = 73) = 0.05, p = .82 \). In addition, there was no significant main effect of participants’ sex and no interaction (\( p s \geq .70 \)).

Participants were asked to rate their confidence in their verdict. We obtained a main effect of disability, \( F(2, 107) = 3.60, p = .03 \), \( \eta^2 = .06 \), such that participants in the ASD conditions were more confident than those in the other conditions, which did not differ. No other effects were significant (\( p s \geq .14 \)).

Participants in the ASD conditions assigned a greater probability of guilt than those in the other conditions, \( F(2, 111) = 39.87, p < .001, \eta^2 = .43 \). The judgments in the dyslexia and control conditions did not differ significantly. There were no other significant effects (\( p s \geq .20 \)).

Recommended sentence

As in Experiment 1, we ranked the sentence options from 1 (least severe) to 7 (most severe). Afterward, following the same procedure as before, we determined that the distribution was approximately normal. The mean (2.18), median (2.0), and
Table 2  Experiment 2: Dependent Measures as a Function of Victim’s Disability

<table>
<thead>
<tr>
<th>Measure</th>
<th>Disability condition</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Control</td>
<td>Dyslexia</td>
<td>ASD</td>
</tr>
<tr>
<td>Verdict</td>
<td>.81</td>
<td>.78</td>
<td>1.00</td>
</tr>
<tr>
<td>Confidence</td>
<td>7.33 (1.53)a</td>
<td>6.92 (1.22)a</td>
<td>8.05 (1.55)a</td>
</tr>
<tr>
<td>Probability of guilt</td>
<td>.62 (0.09)a</td>
<td>.63 (0.12)a</td>
<td>.83 (0.10)a</td>
</tr>
<tr>
<td>Seriousness</td>
<td>5.08 (1.84)a</td>
<td>4.89 (1.66)a</td>
<td>6.23 (2.19)a</td>
</tr>
<tr>
<td>Victim responsibility</td>
<td>6.06 (1.91)a</td>
<td>6.11 (1.84)a</td>
<td>3.75 (2.18)a</td>
</tr>
<tr>
<td>Defendant responsibility</td>
<td>5.61 (1.61)a</td>
<td>5.70 (1.76)a</td>
<td>6.88 (1.70)a</td>
</tr>
<tr>
<td>Victim empathy</td>
<td>4.86 (2.52)a</td>
<td>5.14 (1.65)a</td>
<td>6.15 (2.48)a</td>
</tr>
<tr>
<td>Defendant empathy</td>
<td>4.44 (2.27)a</td>
<td>4.38 (1.98)a</td>
<td>3.93 (2.66)a</td>
</tr>
<tr>
<td>Victim social distance</td>
<td>29.25 (7.97)a</td>
<td>28.14 (5.89)a</td>
<td>23.68 (7.30)a</td>
</tr>
<tr>
<td>Defendant social distance</td>
<td>27.00 (7.62)a</td>
<td>28.73 (5.40)a</td>
<td>29.65 (8.09)a</td>
</tr>
</tbody>
</table>

Note. For all variables except verdict, means are reported with standard deviations in parentheses. Ratings of confidence, seriousness, responsibility, and empathy were made on an 11-point scale with higher numbers reflecting greater quantities. Social distance scores can range from 6 to 42; higher numbers indicate more negative attitudes toward the target individual. Values in the same row that do not share the same subscript differ significantly, p < .05.

ASD = autism spectrum disorder.

Participants rated the bullying as more serious if the victim had been diagnosed with ASD rather than dyslexia or if he had no disability. There was no difference between the dyslexia and control conditions. Moreover, no other significant effects emerged (ps ≥ .07).

Judgments of victim and defendant

Participants made the same judgments about the victim and the defendant as in Experiment 1. For the victim’s responsibility, there was a significant main effect of disability (see Table 2), F(2, 107) = 13.04, p < .001, η² = .20. Participants in the ASD condition rated the victim as less responsible than those in the dyslexia and control conditions, which did not differ. No other effects were significant (ps ≥ .62). As for the defendant, participants considered him more responsible if the victim was diagnosed with ASD than if he was diagnosed with dyslexia or had no disability, F(2, 107) = 6.87, p = .002, η² = .11. There was no difference between the latter two conditions. Furthermore, there were no other significant effects (ps ≥ .24).

Regarding the amount of empathy participants felt for the victim, three significant effects emerged. First, there was a significant main effect of disability, F(2, 107) = 6.43, p = .002, η² = .11. Participants in the ASD condition reported feeling more empathy than those in the other two conditions, which did not differ. Second, women’s ratings (M = 5.67, SD = 2.08) were higher than men’s ratings (M = 4.66, SD = 2.77), F(1, 107) = 6.85, p = .01, η² = .06. Third, the interaction was significant, such that men were more empathetic than women in the dyslexia condition (men: M = 5.86, SD = 2.34; women: M = 4.97, SD = 1.45), but the reverse was true in the ASD condition (men: M = 5.13, SD = 2.67; women: M = 6.76, SD = 2.19) and the control condition (men: M = 2.43, SD = 2.37; women: M = 5.45, SD = 2.19).

Seriousness

We found a main effect of the victim’s disability on seriousness ratings (see Table 2), F(2, 107) = 3.99, p = .02, η² = .07.
Bullying victim with autism spectrum disorder

SD = 2.21) conditions, \( F(1, 107) = 5.02, p = .01, \eta^2 = .09 \). For ratings of empathy for the defendant, we obtained no significant effects (ps ≥ .35).

In terms of social distance, participants’ attitudes toward the victim were more positive in the ASD condition than in the other two, which did not differ, \( F(2, 107) = 3.22, p = .04, \eta^2 = .06 \). We found no other significant effects (ps ≥ .17). For the defendant, there was a main effect of participants’ sex. Men’s attitudes (\( M = 26.21, SD = 7.79 \)) were more positive than women’s attitudes (\( M = 29.30, SD = 6.82 \)), \( F(1, 107) = 3.94, p = .05, \eta^2 = .04 \). No other effects were significant (ps ≥ .13).

**Mediation analysis**

As in Experiment 1, we hypothesized that the effect of disability condition on probability of guilt judgments could be mediated by perceptions of the victim and/or defendant. As before, we conducted a mediation analysis by first identifying four variables as possible mediators because they were correlated with the disability manipulation as revealed by regression analyses. These variables were empathy, responsibility, and social distance ratings for the victim, and responsibility ratings for the defendant. We entered these variables into a regression analysis along with disability condition, with probability of guilt as the outcome variable. Two of the possible mediators, ratings of empathy and social distance for the victim, were not significant and were dropped from the analysis.

We next repeated the regression analysis using the two remaining mediators: ratings of responsibility for the victim and defendant. We found significant beta coefficients for the paths from disability condition to each of these two mediators and for the paths from the mediators to probability of guilt judgments (see Figure 4). The direct path from disability condition to probability of guilt judgments (after controlling for the effect of the mediators) remained significant (\( p < .001 \)), which indicated partial mediation.

As before, we used PRODCLIN to examine the significance of each indirect path. The indirect effect of disability condition on probability of guilt estimates through victim responsibility was not significant, as shown by the 95% confidence limits of −0.30 and 0.70. Similarly, the indirect effect through the second mediator, defendant responsibility, was not significant; the 95% confidence limits were −0.35 and 0.54.

**Discussion**

The results closely mirror those of Experiment 1, with participants making more favorable judgments toward the victim with ASD than toward victims in either of the other conditions. Some sex differences were also found. Further implications will be considered in the General Discussion.

![Figure 4](image-url) Experiment 2: A mediation analysis examined the effect of disability condition on probability of guilt judgments via ratings of the responsibility of the victim and defendant. Numbers on the paths are standardized regression coefficients. One asterisk indicates a significant coefficient at \( p < .05 \), and two asterisks indicate significance at \( p < .001 \). PRODCLIN revealed that neither indirect effect was significant.

**General discussion**

We obtained similar findings using two cases with different contexts and different levels of harm reported by the victim. In both, participants who learned that the victim had been diagnosed with ASD made significantly different judgments compared to those in the other two conditions. Specifically, they were more likely to decide that the defendant was guilty of bullying, they estimated the probability of guilt as higher, and they considered the bullying more serious. In addition, they rated the victim as less responsible for what happened and the defendant as more responsible, they felt greater empathy for the victim, and they reported a more positive attitude toward him, as measured by the social distance scale (Winer et al., 1981).

Victims of bullying are sometimes seen as unlikeable, and their behaviors toward others may seem inappropriate, ill mannered, or disrespectful (Gentry & Whitley, in press; Olweus, 1978). Consequently, observers may conclude that these victims brought the bullying upon themselves through their own actions and that they perhaps deserve the mistreatment they experienced. In our study, the victim’s peers perceived him as annoying, and for that reason the participants could have decided to rule against him, even though the cases used in both experiments were written to fit the definition of bullying. Nevertheless, our findings imply that people are more willing to excuse exasperating behavior if there is a documented reason for it. It appears that they will not indiscriminately accept all disabilities as equally legitimate excuses, though, as evidenced by the similar judgments made by controls and those in the dyslexia condition. When the victim had been diagnosed with ASD, however, the
participants felt more empathy for him, and they seem to have liked him better (as measured by the social distance scale), suggesting that they may have concluded that his disability caused socially inappropriate behavior that he could not help. In turn, their judgments about the case (e.g., verdicts) favored the victim.

It is important to point out, however, that none of the participants’ evaluations of the victim (or the defendant, for that matter) significantly mediated the effect of disability condition on probability of guilt judgments, as revealed by the regression analyses. It is possible that the effect is mediated by one or more variables that we did not measure, for example, the degree to which participants believe the victim can control his behavior or whether they think the defendant knew about the victim’s disability prior to the disciplinary hearing. Future research is needed to specify exactly how learning about the victim’s disability influences participants’ judgments.

Although the disability manipulation affected ratings of empathy and the social distance scores for the victim, those same measures for the defendant did not vary across conditions. This pattern could have emerged because the victim may have been more salient to participants than the defendant. The manipulation dealt with the victim’s disability rather than having anything to do with the defendant, and the testimony during the disciplinary hearing focused more on the victim’s behavior than the defendant’s behavior. If the participants had been directed to think more about the defendant’s behavior, it is possible that their perceptions of him would have varied by condition.

Adreon and Durocher (2007) commented that the most difficult challenge facing university students with ASD might be figuring out how to negotiate social situations. Due to their disability, these students are sometimes isolated, exploited, or harassed by classmates. Previous authors have recommended that schools implement anti-bullying programs that encourage typically developing students to learn to be empathetic toward their classmates with ASD, include them in social activities, treat them respectfully, and integrate them into a protective peer group (Cappadocia et al., 2012; Sterzing et al., 2012). Our data suggest that such efforts could be successful, particularly if combined with an educational component that helps participants understand what ASD entails and how it affects social interactions and other behaviors. Moreover, these programs could be aimed not only at typically developing classmates but also at faculty, administrators, and the general public.

Some previous research has suggested that individuals tend to downgrade relational bullying compared to physical or verbal bullying, even though the former type can be just as damaging to victims (Bauman & Del Rio, 2006; Jacobsen & Bauman, 2007; Maunder et al., 2010). In these studies, participants rated relational bullying as less serious, reported being less likely to intervene upon witnessing incidents of this type, expressed less empathy for victims, and were less likely to decide such cases met the definition of bullying. More recently, however, Gentry and Pickel (in press) concluded that those findings may have emerged simply because participants were unaware of the negative consequences for the victim; they were not told of any specific harm that resulted, and it is relatively difficult to detect injury done to victims of relational bullying. The present data add support to this position, demonstrating that people are capable of recognizing that relational bullying is genuinely bullying, at least if the harm suffered by the victim is made explicit. Given that this type is common among students with and without disabilities (Cappadocia et al., 2012; Carter, 2009; Little, 2002; Sciutto et al., 2012; Wang et al., 2009), additional research is needed to pinpoint the conditions under which individuals will take relational bullying seriously. Findings from this research could be incorporated into anti-bullying programs in order to increase the likelihood that school administrators will respond effectively in cases of relational bullying, bystanders will recognize this type of incident as bullying and choose to intervene, and victims will feel comfortable coming forward to file a report.

We found several main effects as a function of participants’ sex. In Experiment 1, women assigned more punitive sentences than men and rated the defendant as more responsible for the offense. In Experiment 2, women’s ratings of empathy toward the victim were higher, and in both experiments, men’s attitudes toward the defendant were more positive. Thus, when we obtained differences, women’s judgments favored the victim and men’s judgments favored the defendant, in keeping with the patterns reported by other researchers (Ellis & Shute, 2007; Gentry & Pickel, in press; Maunder et al., 2010). In contrast to previous results, however, we did not obtain sex differences for most dependent variables, including verdicts, probability of guilt estimates, and seriousness ratings. It may be that men and women are more likely to disagree about their feelings toward the victim and the defendant than about their overall assessments of the case. Future research is needed to determine the extent and reliability of these sex differences.

We found one significant interaction pertaining to sex. Compared to women, men reported more empathy toward the victim in the dyslexia condition, but the opposite occurred in the other two conditions. It is possible that, because there is a higher prevalence of dyslexia among men than women (Rutter et al., 2004), men may identify more closely with victims diagnosed with dyslexia than women do. Only one significant interaction emerged across two experiments, however, so additional research is required to clarify how one’s sex may influence his or her reactions to victims with ASD and dyslexia.

Limitations and future directions

The present study focused on a victim who lacks social competence, and the perpetrator defends himself by explicitly arguing that he felt provoked by the victim’s off-putting behavior. As noted above, participants were more willing to side with the victim and excuse his social missteps if he had been diagnosed with ASD but not dyslexia. It is possible that, under different circumstances, however, participants would treat a victim with dyslexia particularly leniently. For example, a student could become a target because his reading difficulties cause problems for classmates who have to partner with him for a project. In such a case, participants might judge the bullying more harshly if the victim has been diagnosed with dyslexia rather than another disability or no disability. Future research could investigate this issue.

Additional studies are also needed to identify other variables that may influence individuals’ evaluations of bullying. For example, there may be limits to the behaviors that participants are willing to excuse, even if the victim has a disability that is relevant to those behaviors. In the present experiments, the victim was not violent or threatening toward anyone, but he might not have been treated leniently in any condition if he had been. Other variables to consider include the participants’ prior experiences with persons who have the same disability as the victim, the type of bullying used by the perpetrator, and the age of the victim and/or perpetrator.

Conclusion

It is important to understand how people interpret specific cases of alleged bullying. State legislators and school officials are influenced by the views of the general public as they develop laws and policies that define bullying and determine how offenders are treated. The present data suggest that, although some victims may appear to make themselves a target of bullying through their socially inappropriate behaviors, observers can appreciate that a disability (like ASD) can cause this behavior, and consequently they may be more willing to side with the victim if they learn of his or her diagnosis.

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References


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