Benevolent Sexism, Men's Advantages and the Prescription of Warmth to Women

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Abstract Gender prescriptions consist of beliefs about the characteristics that men and women should possess. This paper focuses on stereotypic prescriptions targeting women and on some of the variables that influence the adherence to these prescriptions. In Study 1, male undergraduates (N=36) from Belgium completed the Ambivalent Sexism Inventory (ASI—Glick and Fiske 1996), questions assessing the prescription of warmth- and competence-related traits to a female target and a measure of the target's perceived status. In Study 2, male undergraduates (N=80) from Belgium completed a questionnaire assessing the perceived benefit associated with warmth traits possessed by women, in either a family or a professional context, a prescription measure regarding these traits and finally the ASI. Study 1 indicated that the prescription of warmth to women depends upon their perceived status. Study 2 showed that men are more prone to seeing the benefit to be gained for themselves from women's warmth and to prescribe it more so in a family context than in a professional one. Both studies also showed that men's endorsement of benevolent sexism is related to women's perceived status / the perception of a benefit for men to be gained from women's warmth and, consequently, to the prescription of warmth traits to women.

Keywords Gender prescriptions · Stereotypes · Sexism · Benevolent sexism · Status · Men's advantage

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Introduction

All stereotypes are in essence descriptive. They "describe what group members are typically like" (Gill 2004, p.1). Some stereotypes also include beliefs about what category members ideally *ought* to be like. This prescriptive component of stereotypes indicates "the behavioral standards group members must uphold to avoid derision by the perceiver" (Gill 2004, p.1; see also Heilman 2001; Rudman and Glick 2001; Prentice and Carranza 2002) and it justifies or rationalizes a social system in which people traditionally occupy different roles and status positions because of social category membership (Burgess and Borgida 1999).

These researchers generally agree that this prescriptive component plays an important role in gender bias and discrimination. It is consequently important to investigate the process that leads to gender prescriptions and the variables that could influence or lead to adherence to these prescriptions. The studies described in this paper directly evaluated gender prescriptions within a sample of Belgian students, and investigated whether these prescriptions were linked to sexism, to context and to the benefit some of these gender prescriptions are likely to bring to men. This paper will consequently shed some light on some of the conditions, namely sexism and context, favoring the adhesion to gender prescriptions and consequently pave the way for gender discrimination.

The first objective of this paper is to investigate one of the functions of the prescriptive component of stereotypes. According to Glick and Fiske (2001a, p.280), "stereotypes of subordinates' warmth become prescriptive due to dominants' group interests". We extended this reasoning and assumed that one of the functions of prescriptions is to maintain subordinates, in this case women, in a position likely to be advantageous to dominants, i.e., men. In other words, we believe that traits prescribed to women are those that are likely to bring some benefit to men.

The second aim of this paper is to extend to the Belgian samples previous research carried out in other countries and

to examine the impact of one of the most pervasive system-justifying ideologies in our society, that of benevolent sexism. We assumed that higher benevolent sexist men would pay more attention than lower or non benevolent sexists to the advantages that women's warmth can bring them. Consequently, these men would be more ready to prescribe warmth traits to women.

Gender Beliefs and Gender Discrimination in Belgium

There is not much data about gender beliefs in Belgium. However, there are statistics indicating that women might still face gender discrimination. For example, women work part-time more often than men: When considering all employed women, 44.3 % of them work part-time, but only 9.3 % of men work part-time. For women, the main reasons for part-time work are the responsibilities of child rearing and a better balance between work and home life (19 %), whereas these reasons are selected by only 4.6 % of men (DGSIE 2011).

More specifically, there are two types of complementary gender segregations in the Belgian labor market (DGSIE 2011). The first one is a horizontal segregation, which is a concentration of men and women in different occupations and sectors. For example, women are over-represented in education (69.3 %), health care (73.5 %), social services (83.5 %) and housekeeping (91.6 %) sectors. The second one is a vertical segregation which refers to the under-representation of women in leadership positions: The more a position has an elevated hierarchical level, the less it tends to be occupied by women, despite the fact that the total female share is larger than the male share. This is the *glass ceiling effect*: an invisible but strong barrier, difficult to surmount, hindering the advancement of women in a work context (see for instance Carli and Eagly 2002; Eagly and Karau 2002). For example, in the health care and social services sectors, the total share of women is 78.5 %, but they represent only 58 % of the leadership positions. With respect to academia in Belgium, women dominate, comprising 54.8 % of the total student body. In sciences, mathematics and computing, their proportion falls to 30.1 % and only 23 % choose to study engineering. Moreover, 31 % of the postdoctoral researchers and only 11 % of the faculty members are women. In 2009, the share of women in the federal parliament was 38.5 %. In 2010, at the highest judiciary court in Belgium, women made up on 6.7 % of the judiciary.

These gender segregations lead to gender differences in terms of wages (DGSIE 2011). For example, in 2007, taking into account the monthly net salaries of workers (full-time and part-time), women earn 23 % less than men, and when considering the monthly net salaries of full-time workers, women still earn 11.7 % less than men. For retired pay, in 2009, statistics show the same pattern: The average monthly pay for men is 934 euros and that of women is only 607 euros. Horizontal and vertical segregations thus seem to have a very concrete impact on women's education, social and economical status, and certainly well-being.

Gender Prescriptions and Men's Advantages

The content of stereotypes is generally described and measured according to two dimensions: competence and warmth (see, for instance, Fiske 2010; Fiske et al. 2002; Fiske et al. 1999; 2002; Judd et al. 2005). This distinction has been shown to be valid and useful in many cultures, both in individualist and collectivist nations (Cuddy et al. 2009). These dimensions are also helpful in gaining a better understanding of gender prescriptions. Indeed, men and women are not prescribed traits from these two dimensions to the same extent. For instance, Prentice and Carranza (2002) asked U.S. students to read a list of 100 traits and to indicate "how desirable it is in American society to possess each of these characteristics" (p.271), for a man, for a woman, or for an undefined person. The authors then compared these desirability scores and identified which traits were prescribed or proscribed to each gender, i.e., they identified which traits were more desirable for a woman/man than for an undefined person (prescription) and which traits were less desirable for a woman/man than for an undefined person (proscription). It appeared that women were mainly prescribed warmth traits, such as being warm, kind, sensitive, friendly, cooperative and polite, whereas they were proscribed traits that are associated with some kind of dominance such as being arrogant and controlling. On the other hand, men were prescribed traits related to competence, such as having business sense or leadership abilities, being ambitious or assertive, whereas they were proscribed traits related to weakness and submission such as being emotional, seeking approval and naïve. In other words, men are prescribed to be agentic, that is, as achieving their own ends, whereas women are prescribed to be communal, that is, connected with others (see also Lee et al. 2010).

The prescription of emotions follows the same rules. Men are generally prescribed emotions related to dominance, such as anger or contempt, whereas women are prescribed emotions linked to submission, such as fear, happiness or surprise (Hess et al. 2005). Furthermore, Hess et al. (2005) have shown within both U.S. and Canadian samples that the link between a target's gender and prescribed emotions is mediated through perceived dominance/affiliation. In other words, men are generally seen as dominant and are consequently prescribed emotions such as anger, whereas women are usually seen as submissive and are consequently prescribed emotions such as fear and happiness.

Finally, rejection of and discrimination towards women who display behaviors that are generally considered as
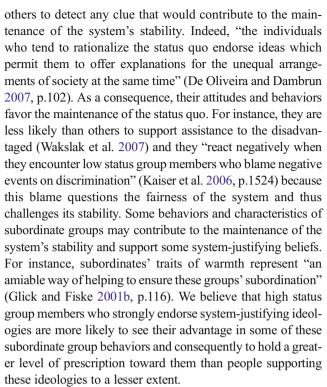
stereotypical of men is an additional indication of which traits are prescribed to them. It has been shown that competent and ambitious women are often discriminated against or rejected, presumably because they are seen as lacking warmth traits that are generally prescribed to women (see, for instance, Heilman 2001; Heilman et al. 2004). For example, in a resume evaluation situation, highly competitive women are evaluated negatively, making them less likely to be interviewed (Tyler and McCullough 2009). Also, women who deliver discipline in their workplace are rated negatively (Atwater et al. 2001). Most of these studies regarding discrimination were carried out in the United States.

It thus appears, at least in North American societies, that women are generally prescribed warmth and submissive behaviors and men are generally prescribed competence and dominance-related behaviors. As gender stereotypes in Belgium are relatively similar to U.S. stereotypes (see for instance Costa et al. 2001; Nosek et al. 2009), we can expect the same pattern to emerge in Belgium. But why is this so? According to Glick and Fiske (2001a), warmth traits correspond to submissive behaviors and allow cooperative relations. As the ideal subordinate respects and defers to the dominant group, it is likely that warmth traits are prescribed to subordinates the most. Also, warmth traits have been recurrently labeled as "other-profitable traits" (Peeters 2002; Peeters and Czapinski 1990). In other words, these traits have direct consequences for others rather than for the possessor of the trait. Positive warmth traits are consequently highly likely to be advantageous for people who interact with the possessor of the trait. Following these theories, warmth traits would be highly prescribed to subordinates because they are somehow useful to the dominants who interact with them. Traditional relations between men and women correspond to this dominant-subordinate schema. As indicated by Glick and Fiske (2001b, p.110), "on the basis of cross-cultural indicators of status and power, women are clearly a disadvantaged group. Although some cultures are more egalitarian than others, patriarchy is widespread." According to these indicators, men occupy high status roles significantly more often than women. Furthermore, a form of dependency of men on women (as romantic partners, for reproduction and children care) would encourage men to maintain women in a subordinate role and to favor a cooperative relationship (Rudman and Glick 2001). For these reasons, we argue that dominants (i.e., men) would prescribe warmth traits to subordinates (i.e., women) because doing so is beneficial to their group.

Benevolent Sexism and Gender Prescriptions

Some people more readily see the benefits for their group than others. For instance, people who strongly endorse system-justifying beliefs are, by definition, more likely than others to detect any clue that would contribute to the maintenance of the system's stability. Indeed, "the individuals who tend to rationalize the status quo endorse ideas which permit them to offer explanations for the unequal arrangements of society at the same time" (De Oliveira and Dambrun 2007, p.102). As a consequence, their attitudes and behaviors favor the maintenance of the status quo. For instance, they are less likely than others to support assistance to the disadvantaged (Wakslak et al. 2007) and they "react negatively when they encounter low status group members who blame negative events on discrimination" (Kaiser et al. 2006, p.1524) because this blame questions the fairness of the system and thus challenges its stability. Some behaviors and characteristics of subordinate groups may contribute to the maintenance of the system's stability and support some system-justifying beliefs. For instance, subordinates' traits of warmth represent "an amiable way of helping to ensure these groups' subordination" (Glick and Fiske 2001b, p.116). We believe that high status group members who strongly endorse system-justifying ideologies are more likely to see their advantage in some of these subordinate group behaviors and consequently to hold a greater level of prescription toward them than people supporting these ideologies to a lesser extent.

This paper focuses on one of these system-justifying ideologies, namely, benevolent sexism (Glick and Fiske 1996, 2001a). Glick and Fiske have developed the Ambivalent Sexism Theory to account for two different forms of sexism that co-exist in many societies. Indeed, ambivalent sexism refers to two subcomponents: hostility and benevolence. Hostile sexism is explicitly antagonistic toward women who are considered to be challenging men's power and seeking to gain control over them. Conversely, benevolent sexism is a subjectively positive attitude toward women who are seen as warmer but less competent than men. Hostility and benevolence target different subtypes of women. For instance, it has been shown that hostility targets non-traditional women (e.g., competent and career women, feminists) whereas benevolence is directed at those women who are expected to conform to traditional roles related to warmth (Glick et al. 1997). Although most research on benevolent and hostile sexism has been carried out in the United States, it has been shown that they are cross-culturally prevalent ideologies and that the structure of ambivalent sexism is shared across many countries including Belgium. Data regarding Belgium have been gathered within samples composed of undergraduate students (Dardenne et al. 2006; Glick et al. 2000), high school students and public administration employees (Dardenne et al. 2006).

Adhering to sexist ideologies, mainly to benevolent sexism, seems to be linked to prescriptive tendencies and to negative reactions toward violations of prescriptions. For instance, Sakalli-Ugurlu and Glick (2003) showed within a Turkish sample that benevolent sexism, but not hostile

sexism, predicted a negative attitude toward women who engaged in premarital sex. Similarly, Abrams and colleagues (Abrams et al. 2003; see also Viki and Abrams 2002; Yamawaki 2007) showed within an British sample that highly benevolent sexists were more prone than non sexists or hostile sexists to blame a woman who was the victim of an acquaintance rape, seemingly because they perceived her as having behaved in a manner that is inappropriate for a woman. Also, benevolent sexism involves restrictions on the behaviors that are accepted from a woman in a romantic date context (Viki et al. 2003). Finally, Viki et al. (2005) showed with a survey carried out in England that highly benevolent sexism can lead to the negative evaluation of a female target perceived as possessing traits violating traditional gender roles. In Belgium, although benevolent sexism has been shown to be associated with a positive attitude toward women, it has also been shown to be positively and significantly correlated to the dominance subscale of the Social Dominance Orientation Scale (Dardenne et al. 2006), suggesting that benevolent sexism might be an ideology justifying the dominance of men over women. Although less numerous, some studies have indicated that hostile sexism leads to a negative attitude toward women who occupy masculine roles (see, for instance, Masser and Abrams 2004; Sakalli-Ugurlu and Beydogan 2002), presumably because these women threaten men's higher status.

Study 1

In Study 1, we investigated whether Belgian male students' adherence to benevolent or hostile sexism could predict their tendencies to prescribe warmth to a specific female target. Furthermore, this study examined the mediation of this effect through one of the possible benefits women's warmth can bring to men, that is, the maintenance of women in a subordinate status. As already highlighted in the introduction, much research indicates that benevolent sexism leads to the rejection of women who violate gender prescriptions (Abrams et al. 2003; Sakalli-Ugurlu and Glick 2003; Viki and Abrams 2002; Viki et al. 2003, 2005; Yamawaki 2007). These results have been obtained in various countries and cultures, mainly with undergraduate students from the United Kingdom, the United States and Turkey, but also with adult non-students from Turkey and the United Kingdom. The benevolent component of sexism and the protective attitudes associated with this ideology also seem to be used as a kind of reward granted to women who successfully conform to traditional gender prescriptions (see, for instance, Glick et al. 1997, samples composed of U.S. undergraduate students; Sibley and Wilson 2004, sample composed of new-Zealander undergraduate students). Several studies have highlighted that benevolent sexism is associated with an idealization and a positive attitude

toward women who display attributes associated with traditional roles or appearance such as, for instance, thinness and using cosmetics (Polish undergraduate women, Forbes et al. 2004) or breastfeeding (U.S. undergraduate students, Forbes et al. 2003).

All in all, and across various cultures, benevolent sexism seems to be associated with the motivation of maintaining women in traditional roles. Given that (a) benevolent and hostile sexism operate in Belgium in a way that is similar to many other countries (Glick et al. 2000) and (b) it has been shown within a Belgian sample that benevolent sexism is associated with some dominance-justifying ideologies (Dardenne et al. 2006), we hypothesized that the more Belgian men express benevolent sexism, the more they are likely to prescribe warmth-related traits to women (Hypothesis 1).

Benevolent sexism is associated with a motivation to maintain a form of traditional social order (Sibley et al. 2007). It generally presumes women's inferiority and is also a subtle way to maintain gender inequalities (Glick and Fiske 2001a). Additionally, according to Rudman and Glick (2008), gender stereotypes become prescriptive presumably because they help maintain a gender hierarchy in an interdependent context. We consequently assumed that higher benevolent sexists prescribe warmth to a woman because they see her as likely to have a lower status (Hypothesis 2). In other words, we proposed that the perception of the target's low status would mediate the link between benevolent sexism and the prescription of warmth. Both hypotheses will be tested in regression analyses in order to include hostile sexism in these analyses and consequently control for its possible correlation with benevolent sexism. Furthermore, this will allow us to test for the mediation hypothesis while including hostile sexism as a covariate in the regression model.

Method

Participants

Thirty-six male participants were recruited on the campus of the University of Liege, Belgium. Most of them were students of psychology, economics or law. Participants ranged in age from 18 to 25 with a mean of 19.89 years ($SD=1.62$). Experimental sessions were run either individually or in small groups of up to four participants.

Material and Procedure

Participants were recruited in various parts of the campus by a female experimenter ostensibly to participate in a study on impression formation. Participants were told that the purpose of the study was to investigate how people could form

an impression on the basis of a small amount of information. It was explained that they would receive a form that had been completed by another person and that, after reading it, they would be asked to answer a few questions evaluating how they saw this person.

When participants arrived at the lab, they were first asked to complete a "personality and attitudes" questionnaire. This questionnaire included the French validation of the Ambivalent Sexism Inventory (ASI, Dardenne et al. 2006; see Glick and Fiske 1996, for the original version of the ASI) in order to record participants' benevolent as well as hostile sexist tendencies (α=.88 for benevolent sexism and α=.80 for hostile sexism subscales). Participants expressed their agreement with 22 items (half of the items assessed benevolent sexism, while the other half assessed hostile sexism) on a 6-point Likert scale ranging from 0 (totally disagree) to 5 (totally agree). The other questions were fillers. Participants then received the self-description form allegedly completed by a female target. On this form, the target person had indicated her first name (Virginie or Stephanie), her date of birth and the place where she lived. As there was no impact of the first name on the dependent measures, this variable will not be further discussed. The target then described on the form what she had been doing on the previous Saturday. The answer to this question was handwritten and depicted a rather traditional woman. The target mentioned the hobbies she had engaged in on the previous Saturday. One of the hobbies was neutral (going to a flea market), that is, neither feminine nor masculine, and the three others were stereotypically feminine (cooking, sewing and shopping). These hobbies had been selected as a result of a pre-test aimed at identifying typically feminine and masculine hobbies. For this purpose, we had asked 15 participants to indicate the extent to which each of 50 hobbies were masculine or feminine by circling a number on a Likert scale ranging from 1 (highly masculine) to 7 (highly feminine).

After reading the self-description form, participants completed 12 sentences. Each of these began with "*This person*", followed by a blank space and then "*be*" and one trait (for example, *This person_____ be sociable*.). Participants were asked to fill in the blank space with one of the following verbs: must (doit), must absolutely not (ne doit surtout pas), might (peut) or might not (peut ne pas). Following Peeters (2002) and drawing our inspiration from the measures used by Gill (2004), we considered that the use of verbs such as "should" or "must" corresponds to a high level of necessity and thus to a high level of prescription.

In order to select the traits included in the 12 sentences, we ran three pre-tests. A first sample of 10 participants read the self-description form and freely generated traits that could characterize the target person. Following this, we drew up a list of 64 traits. We then asked a second sample of participants (*n*=20) to indicate the extent to which each

trait was linked to competence or to warmth. They indicated their answer on a 7-point Likert scale. Finally, we asked a third sample (*n*=20) to evaluate the extent to which each of the traits was positively or negatively valenced on a 7-point Likert scale. On the basis of the results of these pre-tests, we selected six warmth traits (kind, warm, extrovert, open, sociable, and friendly; in French: *aimable*, *chaleureuse*, *extravertie*, *ouverte*, *sociable*, and *sympathique*) and six competence traits (creative, cultured, motivated, organized, responsible, and hard-working; in French: *créative*, *cultivée*, *motivée*, *organisée*, *responsable*, and *travailleuse*). We selected only positive traits and we made sure there was a similar valence in both subgroups of traits.

When participants had completed the 12 sentences with one of the verbs, they completed a few additional items about their perception of the target. Among the fillers, they answered the following four questions: "Do you think this person has a lot of power?", "Do you think this person has a high level of prestige?", "Do you think this person has a lot of responsibilities?", and "Do you think this person could be a competitor against you?" They indicated their answers on a 7-point Likert scale ranging from not at all (1) to completely (7). These four questions aimed at evaluating the extent to which the target was attributed a perceived high status. Since the alpha coefficient was relatively low (.64), we deleted the last item from the scale. This index of perceived status has an alpha coefficient of .71. When this questionnaire was completed, participants were debriefed and thanked for their contribution.

Results and Discussion

Descriptive Analyses

We calculated a prescription score by summing the number of times the word "*must*" had been used for each type of trait (warmth- or competence-related). We thus obtained two prescription scores. Table 1 displays the descriptive data for these scores as well as for both sexism scores and the

Table 1 Descriptive data for the variables of interest (Study 1)

	Mean	SD	Range	H	W	C	S
Benevolent	2.48	.92	.27–4.55	.52**	.52**	.16	−.29°
Hostile	2.33	.70	.45–3.45		.41*	.25	.10
Warmth	1.83	1.48	.00–5.00			.08	−.38*
Competence	1.72	1.11	.00–4.00				.29°
Perceived status	3.84	.94	1.00–5.33				

Scale endpoints for benevolent and hostile sexism scale were 0 and 5. Prescription scores could range from 0 to a maximum of 6. Perceived status scale endpoints were 1 and 7. *H* Hostile sexism, *W* prescription of Warmth, *C* prescription of Competence, *S* perceived Status. **<.001, *<.05, °=.08

perceived status score. Compared to the data obtained by Glick et al. (2000) with a Belgian sample, the hostile sexism score was relatively similar, but the benevolent sexism score was higher in our sample than in their sample. Nevertheless, the benevolent and hostile sexism scores from our sample were very similar to those obtained by Dardenne et al. (2006) also within Belgian samples. This might seem surprising, given that the sample of Glick et al. was exclusively composed of undergraduate students and so therefore was similar to our own sample, whereas the sample of Dardenne et al. was composed of several subgroups, including undergraduate students, but also high school students and professionally active adults. However, that data of Dardenne et al. were collected more recently than that of Glick et al., which might explain a greater similarity between our data and the former rather than with the latter. More surprisingly, the correlation we found between benevolent and hostile sexism, $r(35)=.52$, $p=.001$, was higher than the one obtained by Dardenne et al., $r(42)=.39$, $p<.05$, whereas the correlation obtained by Glick et al. (2000) was only marginal, $r(109)=.18$, $p<.10$.

Regarding prescription, there was no significant difference between the warmth-prescription score and the competence-prescription score, $t(35)=.37$, $p=.71$, and they were uncorrelated, $r(35)=.08$, $p=.66$. Finally, the average perceived status of the target was equal to the mid-point of the scale (i.e., 4), $t(35)=-1.00$, $p=.32$.

Impact of Sexism on Prescription

According to *Hypothesis 1*, a higher benevolent sexism score would be linked to the prescription of warmth-related traits to women. To investigate the link between sexism and prescription, we regressed each of the prescription scores on both the benevolent and hostile sexism scores. As expected, benevolent sexism significantly predicted the prescription of warmth traits to the target, $b=.66$, $SE=.27$, $t(35)=2.42$, $p=.02$, whereas hostile sexism did not have any impact, $b=.42$, $SE=.36$, $t(35)=1.16$, $p=.26$. Neither benevolent sexism nor hostile sexism had an impact on the prescription of competence traits to the target, $b=.05$, $SE=.24$, $t(35)=.20$, $p=.84$ and $b=.37$, $SE=.31$, $t(35)=1.19$, $p=.24$, respectively. Collinearity was not a problem for both analyses as tolerance values were greater than .73 and VIF values were lower than 1.36.

Prescription of Warmth and target's Perceived Status

We then turned our attention to the perceived status score. According to *Hypothesis 2*, the impact of benevolent sexism on the prescription of warmth takes place through one of the benefits that women's warmth is likely to bring to men, that is, the maintenance of these women in a lower status. Where

applicable, tolerance and VIF values were reviewed. Collinearity was not a problem as tolerance values were greater than .61 and VIF values were lower than 1.63.

As expected, benevolent sexism negatively predicted perceived status, $b=-.48$, $SE=.19$, $t(35)=-2.55$, $p=.02$. In other words, the more participants adhered to benevolent sexist ideologies, the more they thought that the target was likely to have a low status. Hostile sexism had a marginal impact on perceived status, $b=.47$, $SE=.25$, $t(35)=1.87$, $p=.07$. The more participants adhered to hostile sexist ideologies, the more they thought that the target was likely to have a high status. Although it was not part of our hypotheses, such a result is perfectly congruent with the literature. Hostile sexism is indeed particularly targeted at those women who challenge men's status and power (Glick and Fiske 2001b).

Results revealed a significant and negative impact of perceived status on the prescription of warmth, $b=-.53$, $SE=.24$, $t(35)=-2.22$, $p=.03$, when benevolent sexism was controlled for. In order to test the mediation hypothesis, we followed the guidelines of Preacher and Hayes (2004) and implemented a bootstrapping method. Bootstrapping is a non parametric approach to effect-size estimation and hypothesis testing that is not based on large-sample theory and, therefore, circumvents the power problem due to asymmetries (see, for instance, Shrout and Bolger 2002). Bootstrap estimates (5000 resamples) for the indirect effect of benevolent sexism on the prescription of warmth through perceived status showed a mean effect of .262 with an estimated standard error of .171. Importantly, 95 % of the bootstrap bias-corrected estimates were between the values of .001 and .728. As zero was not included in this interval, we can conclude that the indirect effect is significantly different from zero at $p<.05$. Furthermore, analyses revealed that the direct effect of benevolent sexism on the prescription of warmth became non significant when perceived status was controlled for, $b=.41$, $SE=.28$, $t(35)=1.44$, $p=.16$. Besides, hostile sexism had a marginal direct effect on the prescription of warmth, $b=.67$, $SE=.36$, $t(35)=1.84$, $p=.07$. We can therefore conclude that perceived status mediates the impact of benevolent sexism on the prescription of warmth. In other words, our results show that higher benevolent sexism leads to the perception of a potentially lower status than lower benevolent sexism. The perception of the potentially low status of a female target leads in turn to the prescription of warmth to this target. However, we also tested an alternative model in which the perceived status was the dependent variable and the prescription of warmth was the mediator. When we controlled for prescription, benevolent sexism still had a marginal impact on perceived status, $b=-.31$, $SE=.16$, $t(35)=-1.93$, $p=.06$.

In this first study, we wanted to highlight the impact of benevolent sexism on prescriptive gender stereotypes. We found that the higher men scored on the benevolent sexism

scale, the more they prescribed warmth to a traditional woman. However, this result might have been driven by the way the target was portrayed. Indeed, as the target was described as a rather traditional woman, participants may have been led to see her as possessing warmth-related traits. Furthermore, higher benevolent sexists may have been encouraged to prescribe these types of traits to the target as she corresponds to the type of women they idealize. This constitutes a limitation of Study 1.

Importantly, in this first study, the impact of benevolent sexism on the prescription of warmth was mediated through the perceived low status of the target. Given that maintaining women in a subordinate status may constitute an advantage for men as a dominant group (see, for instance, Jost and Kay 2005), this result is in line with the idea that the perception of a woman's potentially low status may be a significant motive for prescribing warmth traits to her. However, these results do not allow us yet to firmly conclude that the perception of a benefit for men in women's warmth leads to the prescription of that type of traits. Indeed, we cannot affirm that the perception of a potentially low status target is equivalent to the perception of a possible benefit for one's group.

Study 2

Whereas, in Study 1, we conceptualized men's benefit as being linked to women's subordinate status, Study 2 examined more directly the perception of a benefit related to warmth traits and tested whether this is related to the prescription of warmth to women. Study 1 investigated prescription toward a single target which was described as being rather traditional. The way this target was described could have influenced participants' answers. In order to avoid such a phenomenon in Study 2, we asked participants to think about women in general rather than about a specific type of woman. Additionally, Study 1's target was depicted in an unspecified context. However, in real life people meet different types of women in very varied contexts. It has already been shown that context directly influences the stereotyping process (see, for instance, van Rijswijk and Ellemers 2002 with a sample composed of Dutch undergraduate students). Additionally, according to a review by Eagly and Karau (2002), gender stereotypes originate from the observation of individuals in gender-typical social roles, that is, men in agentic and high status roles and women in more communal and low status roles. According to these authors, women occupying incongruent roles are evaluated negatively. Similarly, it has been shown within a Spanish sample including students, workers and retired people, that women who work in an industry perceived as being incongruent with their gender role are likely to be the targets of

prejudices (Garcia-Retamero and Lopez-Zafra 2006). Finally, it has been shown within a U.S. sample that women are more strongly associated than men with the parenthood concept (Park et al. 2010), suggesting the existence of a particular link between women and private and family contexts. It is therefore reasonable to assume that context also influences the prescriptive component of stereotypes. The context in which one meets a woman might play a crucial role in the expectations one has about that woman. Some contexts may serve as cues activating traditional gender stereotypes, whereas others might be less related to or even in opposition to stereotypic beliefs about men and women. Furthermore, women's warmth might appear as highly beneficial in some situations, while it might be less of a priority in other situations. In Study 2, we asked participants to think about women in either a family context or a professional one. Finally, since on the one hand competence is generally not prescribed to women (Prentice and Carranza 2002) and, on the other hand, we did not find any impact of sexism on the prescription of competence to women in Study 1, we decided to focus Study 2 on warmth only.

As in Study 1, we assumed that the benevolent sexism score is positively related to the prescription of warmth-related traits to women (*Hypothesis 1*). We also hypothesized that higher benevolent sexists prescribe warmth to women because they see their own interests in women possessing these traits. In other words, the impact of benevolent sexism on prescription would take place through the perception of a benefit for men in women showing warmth-related traits (*Hypothesis 2*). Although this hypothesis finds less support in the literature, it is also possible that hostile sexism is related to the prescription of warmth (*Hypothesis 3*), but not because of the benefit women's warmth could bring to men. Rather, higher hostile sexist men would prescribe warmth to women because women showing warmth-related traits are less likely to threaten men's dominant status (for the link between hostile sexism and attitude toward women threatening men's status, see for instance Masser and Abrams 2004).

Regarding the influence of the context, we reasoned that although warmth-related traits held by women might be highly beneficial to men in a family context, they might be somewhat less beneficial to men who collaborate with women holding these traits in a professional context (Park et al. 2010). As a consequence, women would be prescribed more warmth in a family than in a professional context (*Hypothesis 4*). Furthermore, we assumed that the impact of context on warmth prescription to women would also be mediated through the perception of a benefit for men in women showing warmth-related traits (*Hypothesis 5*).

We thus hypothesized an impact of both context and benevolent sexism on the prescription of warmth to women mediated through the perception of the benefit women's

warmth can bring to men. It is also possible that benevolent sexism and context interact. For instance, higher benevolent sexist men could be more sensitive than others to the context in which they interact with women, resulting in an effect of context on perceived benefit (*Hypothesis 6a*) and prescription (*Hypothesis 6b*) only amongst those men. Study 2 was designed to allow us to test for both the main effects of context and benevolent sexism as well as their interaction on perceived benefit and the prescription of warmth to women in a moderated mediation analysis (Preacher et al. 2007).

Method

Participants

Participants were 80 undergraduate male students recruited on the campus of the University of Liege, Belgium. Two participants were outliers (at 2.5 *SD* or above) on one or several measures and were therefore dropped from further analyses. Seventy-eight participants consequently remained. These were mainly students of psychology, economics or law. Ages ranged from 18 to 26 with a mean of 20.9 years (*SD*=1.80). Experimental sessions were run in small groups of up to six participants.

Material and Procedure

A male experimenter approached students in various parts of the campus and asked them to participate in a study on intergroup relationships. Once they agreed to take part, participants were led into the lab and received written instructions. A brief introduction explained that, when possessed by the members of a group, personality traits could be beneficial either to their own group or to outgroup members interacting with them. To make things clearer, the following example was given with respect to the relationship between university teachers and students: "If most teachers are indulgent, it doesn't bring them any (direct) benefit, but it is (directly) beneficial to their students".

Half of the participants were asked to think about women in a family context whereas the other half were asked to think about them in a professional context. They were required to imagine that most women, in either a family or a professional context, possessed certain personality traits. These traits had been used by Prentice and Carranza (2002) and Gill (2004) in order to measure the prescription of warmth-related traits to women. The traits were gentle, interested in children, helpful, sensitive, cooperative, warm, patient, and polite (in French: *douce, enthousiaste envers les enfants, serviable, sensible, cooperative, chaleureuse, patiente* and *polie*). Participants were asked to rate on a 7-point scale "how much each trait would be advantageous for men who interact with women possessing them" (rated from 1, very disadvantageous, to 7,

very advantageous). These items were averaged to form a perceived benefit score (α=.80).

After completing the measure of perceived benefit, participants rated each trait on a prescription measure beginning with the sentence: "In my view, in a family (vs. work) context, an ideal woman, should be…". This sentence was followed by a 5-point scale (-2 to $+2$) with endpoints labeled "Less (*trait*) than men" and "More (*trait*) than men", where "*trait*" was one of the 8 traits listed above. This procedure closely fits the one used by Gill (2004) as well as by Prentice and Carranza (2002). The items constituting this prescription scale were averaged in order to obtain a prescription score, with higher scores indicating that women were strongly expected to show warmth relative to men, but the reliability statistics were questionable (Cronbach α=.60 and the less conservative reliability estimate Guttman Lambda 2=.63). An item-by-item analysis was performed but the reliability could not be improved by removing items. However, the mean inter-item correlation was .15, which is inside the range of values proposed by Clark and Watson (1995) for outcome measures that evaluate broad characteristics such as our general prescription score. Where applicable, we will give the pattern of the data at the level of the individual items in this measure of prescription. Participants' level of benevolent and hostile sexism (α=.76 and α=.80 respectively) was then assessed through the French validation of the ASI (Dardenne et al. 2006). Finally, participants were thoroughly debriefed and thanked for their participation.

Results and Discussion

Descriptive Analyses

Table 2 displays the descriptive data for each of the variables of Study 2, separately by context. As can be seen, both the benevolent and hostile sexism scores are slightly higher than the scores obtained in Study 1 and in previous studies targeting Belgian samples (Dardenne et al. 2006; Glick et al. 2000). The correlation we obtained between the two types of sexism, $r(78)$=.24, p=.04, was lower than the one observed in Study 1, but quite similar to the correlations found in previous studies (Dardenne et al. 2006; Glick et al. 2000). Overall, benevolent sexism was correlated to perceived benefit, $r(78)$=.34, p=.002, but it held true only in a family context (see Table 2). Overall, benevolent sexism was not correlated to the prescription of warmth, $r(78)$=.09, p=.45. Perceived benefit was correlated to the prescription of warmth, $r(78)$=.32, p=.004, but this held true only in a family context (see Table 2).

The overall prescription of warmth score (*M*=.67, *SD*=.43) was significantly higher than the midscale point, i.e., 0, $t(77)$= 13.57, p<.001, indicating that participants considered that

Table 2 Descriptive data for the variables of interest (Study 2)

	Mean	SD	Range	H	W-F	W-P	B-F	B-P
Benevolent	2.69	.75	.82–3.91	.24*	.03	.07	.48**	.16
Hostile	2.81	.74	.64–4.36		.19	.24	.30°	−.09
Warmth—Family	.77	.43	.00–1.75				.34*	
Warmth—Professional	.57	.42	−.87–1.50					.20
Benefit—Family	5.86	.72	3.87–7.00					
Benefit—Professional	5.42	.75	4.12–7.00					

Scale endpoints for benevolent and hostile sexism scale were 0 and 5. Warmth prescription scale endpoints were −2 and +2. Perceived benefit scale endpoints were 1 and 7. H=Hostile sexism, W-F=prescription of Warmth in a Family context, W-P=prescription of Warmth in a Professional context, B-F=perceived Benefit in a Family context, B-P=perceived Benefit in a Professional context. The correlation between both sexisms is for the whole sample. **$p<.01$, *$p<.05$, °$p<.07$

women ought to have warmth-related traits more so than men. Furthermore, this held true whatever the context, $t(38)=11.14$, $p<.001$ and $t(38)=8.43$, $p<.001$, for the family and professional context, respectively. The very same pattern was found when these analyses were performed on the individual items of warmth prescription (all $ps<.05$). The overall perceived benefit of women's warmth for men ($M=5.64$, $SD=.76$) was significantly higher than the midscale point, i.e., 4, $t(77)=19.06$, $p<.001$, indicating that women's warmth was generally seen as beneficial to men. Again, this held true whatever the context, $t(38)=16.26$, $p<.001$ and $t(38)=11.86$, $p<.001$, for the family and professional context, respectively.

Impact of Context, Benevolent and Hostile Sexism and Perceived Benefit on the Prescription of Warmth

The simple main effect of context on the prescription of warmth indicated that thinking about women in a family context (contrast coded +1) elicited a greater prescription of warmth than thinking about them in a professional context (contrast coded −1), $b=.10$, $SE=.05$, $t(76)=2.07$, $p=.04$, bringing some support to *Hypothesis 4*. At the level of the individual items, all the differences were in the expected directions. Regarding the simple main effect of benevolent sexism on the prescription score (*Hypothesis 1*), our results failed to reach significance, $b=.05$, $SE=.07$, $t(77)=.75$, $p=.46$. Although, at first sight, these results might appear to invalidate *Hypothesis 2*, related to the mediating role of the perceived benefit of women's warmth, it is possible for a variable (X) to be causally between an independent and a dependent variable, even if these two variables are not directly associated (Hayes 2009). In this precise case, we are talking about the indirect effect of an independent variable on a dependent variable through X instead of, strictly speaking, "mediation" (we will however keep such a term for ease of use). So in this second study, it might be possible that benevolent sexism and context exert indirect effects on the prescription of warmth through perceived benefit, even

if the direct effect of benevolent sexism on the prescription of warmth is not significant. We tested this hypothesis in the subsequent moderated mediation analyses with context and benevolent sexism score mean centered. Where applicable, on the mediator as well as on the dependent variable, tolerance and VIF values were reviewed in separate regression analyses. Collinearity was not a problem as tolerance values were greater than .80 and VIF values were lower than 1.25.

We tested a path model in which benevolent sexism and context (as a moderator) were independent variables, the perceived benefit of women's warmth for men was a mediator, and the prescription of warmth to women was the dependent variable. Additionally, we also included the interaction Benevolent sexism X Context in this model, as well as hostile sexism as a covariate, in order to control for the correlation between the two types of sexism. Results indicated that context had a significant impact on perceived benefit, $b=.18$, $SE=.08$, $t(77)=2.23$, $p=.03$. In other words, thinking about women in a family context elicited the perception of a greater benefit for men than thinking about them in a professional context. Results also revealed a significant impact of benevolent sexism on perceived benefit, $b=.32$, $SE=.11$, $t(77)=2.86$, $p=.006$. In other words, higher benevolent sexist men were more prone to see the benefit they would gain from women's warmth than lower benevolent sexists. The interaction Benevolent sexism X Context failed to reach significance, $b=.37$, $SE=.11$, $t(77)=1.54$, $p=.13$, indicating that these two variables had an impact on perceived benefit independently of each other and, therefore, invalidating *Hypothesis 6a*. Finally, hostile sexism did not influence perceived benefit, $b=.03$, $SE=.11$, $t(77)=.26$, $p=.80$.

Regarding the prescription of warmth to women, results revealed a significant impact of perceived benefit, $b=.17$, $SE=.07$, $t(77)=2.43$, $p=.02$, lending one of the conditions to fully test *Hypothesis 2* (see below). The more men perceived women's warmth as an advantage for their own group, the more they prescribed warmth to women. We also observed a

marginal impact of hostile sexism on the prescription of warmth to women, $b=.12$, $SE=.07$, $t(77)=1.85$, $p=.07$, in line with *Hypothesis 3*. The impact of context and benevolent sexism on the prescription of warmth were non significant, $b=.05$, $SE=.05$, $t(77)=1.04$, $p=.30$ and $b=-.05$, $SE=.07$, $t(77)=-.76$, $p=.45$, respectively, when all the other variables were included in the model. The Context X Benevolent sexism interaction was not significant, $b=-.04$, $SE=.06$, $t(77)=-.65$, $p=.52$, invalidating *Hypothesis 6b*.

Because of the lack of significant interaction between context and benevolent sexism, we performed two separate simple mediation analyses on the prescription of warmth through perceived benefit. We tested first for the indirect effect of context and second for the indirect effect of benevolent sexism on the prescription of warmth through perceived benefit using a bootstrapping method, as in Study 1. Regarding the indirect effect of context on the prescription of warmth (*Hypothesis 5*), bootstrap estimates (5000 resamples) for the indirect effect of context on the prescription of warmth through perceived benefit showed a mean effect of .035 with an estimated standard error of .023. These analyses indicated that 95 % of the bootstrap bias corrected estimates were between the values of .004 and .098, i.e. the indirect effect was significantly different from zero at $p<.05$. We repeated this mediation analysis individually for the items of prescription. All the indirect effects were in the same direction, with an average mean effect of .035 and an average estimated standard error of .035. All but 3 of these analyses indicated that 90 % of the bootstrap bias corrected estimates did not included 0.

We then tested whether benevolent sexism had a significant indirect effect on the prescription of warmth to women, through the perceived benefit for men (*Hypothesis 2*). In order to control for the correlation between the two types of sexism, we included hostile sexism as a covariate in our model. Bootstrap estimates (5000 resamples) indicated a mean effect of .058, with an estimated standard error of .031. Importantly, 95 % of the bootstrap bias corrected estimates were between the values of .011 and .132, which means that the indirect effect of benevolent sexism on the prescription of warmth through perceived benefit was significant at $p<.05$. Again, we repeated this analysis individually for the items of prescription. All the indirect effects were in the same direction, with an average mean effect of .056 and an average estimated standard error of .048. All but three of these analyses indicated that 95 % of the bootstrap bias corrected estimates did not include 0.

Finally, in order to ascertain the direction of the effects, we also tested the reverse mediation hypothesis with prescription as the mediator and perceived benefit as the dependent variable in the complete moderated mediation model. Bootstrap estimates revealed a mean effect of .007 ($SE=.035$), with 95 % of the bootstrap bias corrected

estimates being between the values of −.058 and .088. As zero was included in this interval, we must consider the indirect effect as non significant and discard this alternative model.

In short, Study 2 confirmed the link between the perceived benefit of women's warmth for men and the prescription of warmth to women, as observed in Study 1. Although we did not observe, as in Study 1, a direct effect of benevolent sexism on the prescription of warmth, our results highlighted an indirect effect of this variable and of the context on the prescription of warmth through perceived benefit. Finally, it appeared that hostile sexism had a marginal influence on the prescription of warmth without any relation to perceived benefit.

It should be noted that the prescription scale has a modest reliability, as assessed through the Cronbach alpha coefficient. This alpha is however a lower bound to the true reliability and then a rather conservative estimate (Sijtsma 2009). We had less power for testing differences between means and this increases the underestimation of the strength of relationships. Although Cronbach alpha is uninformative about the factorial structure of a questionnaire, it might be that our measure of prescription comprises different subscales. Very similar scales have been used by others and have revealed to have a good reliability (for instance Gill 2004). In future studies, we would however recommend increasing the number of items, since longer scales usually have better reliability. The item-by-item analyses however revealed exactly the same pattern as for the global index of prescription.

In line with the results of Study 1, which showed that the perception of the potentially low status of a woman was an important determinant of the prescription of warmth to that woman, Study 2 went one step further and highlighted the impact of men's perceived benefit on the prescription of warmth to women. Since we ruled out the reversed mediation pathways, we can affirm that the perceived benefit mediated the effect of benevolent sexism on prescription of warmth rather than the other way round. These results together support the idea that prescription is motivated by a desire to maintain the advantages of dominant groups, notably through the maintenance of subordinates in a lower status and through the maintenance of a cooperative relationship. Prescribing positive warmth-related characteristics to women would be a soft and subtle strategy aimed at supporting men's dominance, without using force but through using a "velvet glove" (Jackman 1994). Furthermore, the positive tone of the content of the stereotype would favor its endorsement by women.

Concerning the impact of context, men more readily perceived their own benefit when thinking of interacting with warm women in a family rather than in a professional context. In turn, as indicated by the significant indirect

effect, this led the men to manifest a stronger inclination to prescribe warmth traits to women in such a context. There might be two explanations, which are not mutually exclusive, for this contextual effect. The first explanation is that women's warmth is simply more beneficial to men in a family than in a professional context. The second explanation is that thinking about a family context activates a more traditional stereotype of women and consequently makes traditional gender beliefs salient. Further studies are needed to better understand the processes linking family/professional context to the perceived benefit for men of women's warmth.

This second study also indicated that, as expected, adherence to benevolent sexist ideologies influences men's tendencies to prescribe warmth to women, but only indirectly. As in Study 1, benevolent sexism played an important role in the prescription of warmth to women through the perception of an advantage for men. Higher benevolent sexist participants were more prone than lower benevolent sexists to perceive men's benefit in women's warmth. Although benevolent sexism did not have a direct impact on the prescription of warmth, it nevertheless influenced prescription through the perception of the benefit men can obtain from the prescription of such traits. Men who manifest a higher level of benevolent sexism thus seem to be the most motivated to use benevolence and the prescription of warmth, a very subtle and non-aggressive strategy, in order to maintain women in a position in which they would take care of men.

Study 2 also revealed a marginally significant direct impact of hostile sexism on the prescription of warmth to women. This result parallels the recent findings of Lee et al. (2010) concerning ideals in close relationships. The authors found that U.S. men's ideals were related to both benevolent and hostile sexism. This link between hostile sexism and men's ideals appear to come from men's dominant status and hostility appears to be used to exert a form of control over women. Consistent with this interpretation, several studies have shown that hostile sexism is often related to coercion and violence toward women (see, for instance, Abrams et al. 2003; Viki et al. 2006). In our study, hostile sexism was unrelated to the perceived benefit women's warmth can bring to men, which means that benevolent sexism and hostile sexism correspond to different types of motivation for prescription.

Finally, the interaction between benevolent sexism and context was not significant. This means that the context influences perceived benefit and the prescription of warmth to women independently of the adherence to benevolent sexism. Also, benevolent sexism has an impact on the perceived benefit, and consequently an indirect effect on the prescription of warmth, whatever the context.

General Discussion and Conclusion

Taken together, Studies 1 and 2 pointed to one of the reasons for prescriptive gender stereotypes, that is, the desire to maintain men's advantages. The studies indicated that the prescription of warmth to women was closely linked to the perceived status of the target and the benefit women's warmth is likely to bring to men. In addition, they highlighted the decisive role of benevolent sexism in gender prescription. Higher benevolent sexist men were more prone to see their benefit in women's warmth and consequently to prescribe it. Gender prescriptions might consequently be seen as a tool used by benevolent sexist men in order to maintain men's advantages over women. Of course, the studies described in this paper do not test whether the prescription of warmth to women is effective in keeping them in a lower status and in maintaining a cooperative relationship. Nevertheless, many studies have demonstrated that benevolent sexism, despite its positive tone, is effective in maintaining women in a subordinate status. Indeed, it has been shown within an Australian undergraduates sample, that, for both men and women, the adherence to benevolent sexism is related to traditional values (Feather 2004). Similarly, it has been shown to be related to preferences for a traditional mate, that is (for men) a woman who has good homemaker skills and (for women) a man with good financial prospects (Eastwick et al. 2006). Importantly, these last results were obtained in various nations (Germany, Italy, Mexico, Singapore, Spain, Syria, Taiwan, Turkey and the United States) and with both undergraduate students and adult non-students, indicating that the impact of benevolent sexism on gender relationships is relatively stable across cultures. As a consequence, benevolent sexism contributes to the maintenance of the status quo regarding gender roles in society. This affirmation is in line with previous studies showing that sexism contributes to the maintenance of gender inequalities in various nations and cultures (for an analysis of longitudinal data from 57 societies, see Brandt 2011). In this sense, sexism is a hierarchy-enhancing ideology. Our results reinforce the idea that benevolent sexism, even if positive in appearance, is also part of this hierarchy-enhancing ideology. Moreover, Dardenne et al. (2007) showed within a Belgian sample that benevolent sexism, either expressed by a recruiter or conveyed by a situation, significantly decreased women's performance in a job selection task in comparison with a non-sexist and even with a hostile sexist recruiter or setting (see also Vescio et al. 2005). Dumont et al. (2010) also showed that Belgian undergraduate women who were confronted by benevolent sexism generated more memories related to self-incompetence than women confronted with hostile sexism or with no sexism at all. In other words, benevolent sexism can objectively decrease women's competence and, in this way, contribute to their maintenance in a low status.

One could of course argue that most women would not adhere to benevolent sexist ideologies and conform to gender prescriptions. It has nevertheless been shown across nations that women often adhere to benevolent sexism as much as men, sometimes even more so (Glick et al. 2000). In this way, women cannot help reinforcing a system that maintains gender inequalities. Surprisingly, it has been shown in many nations that benevolent sexism is associated with well-being and life satisfaction, even amongst women (for a multinational study involving 32 countries, see Napier et al. 2010; see also Hammond and Sibley 2011). Furthermore, women who adhere to benevolent sexism easily accept restrictions targeting them even if the justification is a sexist one. For instance, Moya and colleagues (Moya et al. 2007) showed within a Spanish sample that benevolent sexist women had a positive reaction toward restrictions imposed by their romantic partners, when these restrictions had a protective justification. It seems that these women were ready to trade some of their independence for men's protection, even if this protection was explicitly sexist. However, their reaction was significantly less positive when the same restrictions came from a co-worker. This result can be paralleled with our findings about context. Similarly, Sarlet et al. (2012) have shown that Belgian women expect more paternalism from a man in a romantic than in a professional setting. Private contexts such as family or romantic spheres are the ones in which gender prescriptions are at the same time the most pervasive and the most endorsed by women.

Regarding our results, it is however important to point out that we investigated only two types of context, a communal setting (i.e., family) and an agentic one (i.e., professional). These two contexts certainly capture a lot of everyday social life, but definitely not all of it. Moreover, situational variables are undoubtedly much more complex than these two settings. It would therefore be interesting to investigate varied types of context in order to have a better understanding of the interplay between contextual and personality variables in intergroup relationships. For instance, Alexander et al. (1999) have shown within a U.S. undergraduate sample, regarding intergroup relationships, that goal compatibility, relative power and relative status determine which behavioral orientation is likely to be preferred. It could be the case that warmth is prescribed to women only when they are involved in a cooperative relationship with the perceiver, or only when they are perceived as having relatively low power. It is also possible that the economical or the political context of a society influences the content of prescriptive stereotypes. In line with such an assumption, Oldmeadow and Fiske (2012) have recently shown that, for university students, stereotypes of warmth and competence are influenced by the legitimacy of the status system. It has also been shown that the income inequality of a nation is linked to the content of stereotypes, with more unequal societies reporting more ambivalent stereotypes (Durante et al. 2012, within 37 cross-national samples from Europe, the Americas, Oceania, Asia, and Africa). All these variables could be investigated in future studies.

The studies described in this paper did not take into account cultural variables, since all the participants were Belgian male students. However, Lee et al. (2010) have shown that the impact of benevolent and hostile sexism on gender prescriptions may vary according to the participants' culture (Chinese vs. U.S.). We might thus have obtained different results with another population and, for this reason, our results would need to be replicated with different samples, in different societies.

It is also important to keep in mind that the content of stereotypes is never fixed. Regarding gender stereotypes, Morton et al. (2012) have shown that, for U.K. undergraduates, women's ingroup stereotypes mainly emphasized warmth traits when women were primed with past. But when they were primed with future, women's ingroup stereotypes involved both competence and warmth traits. It is thus likely that gender prescriptions are also influenced by time perspective.

Regarding the types of measurements used in this paper, we used only explicit measurements. That is, we directly asked our participants which characteristics they think women should possess. However, it has been shown that explicit and implicit measurements can lead to very different results. For example, Latu et al. (2011) have examined and compared implicit and explicit gender stereotypes on the workplace. They found that their U.S. participants expressed explicit positive views of women as managers, but male participants implicitly associated women with unsuccessful managers. Implicit measurements thus revealed a more traditional and negative stereotype of professional women. Regarding the results obtained in our studies, it is possible that professional settings imply an equality norm as supported by Sarlet et al.'s (2012) work carried out within a Belgian sample and demonstrating that there is a higher expectation of gender egalitarianism from a man in a work context than in a romantic context. Consequently this norm would impair the explicit expression of traditional gender stereotypes. To rule out this possibility, future research should use implicit measurements together with explicit measurements.

Also, we focused this paper on gender prescriptions and shed some light on one of the reasons for gender prescriptions—maintaining men's advantage—and on some of the variables that influence these prescriptions—context, benevolent and hostile sexism. However, gender proscriptions (i.e., characteristics and behaviors that men and women *should not* display) also play an important role in gender relationships and deserve consideration. Further research is

needed to investigate the mechanisms, functions and links with other variables of gender proscription. Since our studies showed that higher benevolent sexist men are more sensitive to the advantages their group can gain from women's conformity to prescriptions, and are consequently more prone to prescribe warmth to women than lower benevolent sexist men, it is likely that they would also be more sensitive to violations of these prescriptions. One can thus assume that higher benevolent sexists would express more proscriptions toward women than lower benevolent sexists. Furthermore, since gender prescriptions play an important role in gender bias and discrimination (see, for instance, Gill 2004), it is very likely that higher benevolent sexist men would be more prone than lower benevolent sexists to reject or discriminate against women who fail to conform to gender prescriptions. There are already many studies showing that women who do not conform to gender stereotypes are disliked or even discriminated against (Heilman 2001; Heilman and Okimoto 2007; Heilman et al. 2004; Rudman and Fairchild 2004; Rudman and Glick 2001). We propose however that this negative attitude appears to target only women who violate the prescriptive component of gender stereotypes, but not those who violate its descriptive component, and appears mainly to be expressed by higher benevolent sexist men. This could be tested in future studies.

Finally, in this paper we were interested only in the stereotypes held about women and in variables influencing their content, therefore we did not examine the stereotypes about men. It would be beneficial to investigate the impact of variables such as sexism and context on the content of these stereotypes. Does adhesion to benevolent sexism lead to more prescriptions about men? Are they prescribed competence traits more so in some contexts than in others? Is there a link between gender prescriptions (or proscriptions) and discrimination toward men? These questions open up the field of research about gender stereotypes.

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