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Hostile and Benevolent Sexism: Prioritizing Prevention Strategies Through a Cross-Sectional Study in a Northern Italian City

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Abstract: Sexist ideologies and attitudes perpetuate gender inequalities in both private and public contexts. Traditional views of sexism emphasize hostility, but the phenomenon is more complex, involving interdependent power relations between men and women. The Ambivalent Sexism Theory identifies two forms: hostile sexism (HS) and benevolent sexism (BS). This study aimed to measure the levels of HS and BS among men in a northern Italian town, examining sociodemographic factors associated with elevated sexism scores. A paper questionnaire was administered by a volunteer organization and the Local Health Authority to male individuals over 18 in Cesena from February to April 2023. The convenience sample was recruited from diverse settings, including universities, companies, cafes, and hospitals. The Ambivalent Sexism Inventory (Glick & Fiske) was translated into Italian and used for data collection. A total of 275 participants were included. The mean age was 44.4 years, with a diverse educational background. Regression analyses revealed that higher education levels were associated with lower HS scores with a high school education and a bachelor's degree or higher showing statistically significant coefficients of -5.33 ($SE = 2.26$, $p = 0.019$, and $95\% \text{ CI} = -9.78$ – -0.88) and -8.64 ($SE = 2.51$, $p = 0.001$, and $95\% \text{ CI} = -13.58$ – -3.69), respectively, if compared to individuals with middle school education or less. Age was a significant predictor of BS, with older individuals showing higher BS scores (Coeff. = 0.20 , $SE = 0.05$, $p < 0.001$, and $95\% \text{ CI} = 0.10$ – 0.31). Healthcare professionals had higher HS scores, while unionists had both lower HS and BS scores. This study highlighted the levels of both HS and BS in various professional and social contexts. Education appears to be a critical factor in reducing HS, while age influences BS.

Keywords: sexism; ambivalent sexism theory; hostile sexism; benevolent sexism; sociodemographic factors; educational interventions; prevention strategies



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1. Introduction

Sexist ideologies and attitudes contribute to the perpetuation and pervasiveness of gender inequalities, both in private and public contexts. At its core, sexism refers to a prejudice or discrimination based on sex, typically directed against women and deeply rooted in systemic and structural power imbalances. Historically, sexism has been conceptualized as a unidimensional phenomenon characterized by hostility and antagonism. However, contemporary research has highlighted its multifaceted and insidious nature, underscoring the need for nuanced exploration of its various dimensions and manifestations [1–4].

Sexism operates within a broader framework of gender, a socially constructed set of roles, behaviors, and attributes that societies consider appropriate for men and women. Unlike biological sex, which refers to physiological differences, gender reflects cultural norms and expectations that shape individual identities and social hierarchies [5,6]. In patriarchal systems, these expectations often prescribe subordinate roles for women, relegating them to the private sphere while granting men dominance in public and economic domains. This disparity reflects the systemic embedding of sexism, which functions not merely as individual bias but as a cultural and structural phenomenon [6,7].

The interplay between power and dependency in gender relations adds complexity to sexism. Despite patriarchal dominance, male reliance on women for fulfilling domestic roles, emotional labor, and procreation creates a paradoxical interdependence [8,9]. It is within this context that Glick and Fiske's Ambivalent Sexism Theory (1996) emerged, offering a comprehensive framework to analyze sexism as a multidimensional construct [8].

The Ambivalent Sexism Theory posits that sexism comprises two distinct but complementary ideologies: hostile sexism (HS) and benevolent sexism (BS). Hostile sexism reflects overtly misogynistic attitudes rooted in male superiority, often portraying women as manipulative threats who seek to challenge male dominance through their sexuality, feminist ideologies, or professional ambitions [10,11]. This form of sexism frequently manifests through explicit discrimination and aggression, legitimizing gender-based violence, including verbal abuse, sexual harassment, and intimate partner violence [12,13].

BS, by contrast, operates under the guise of subjectively positive attitudes toward women, provided they adhere to traditional roles and stereotypes. It idealizes women as nurturing, pure, and morally superior but simultaneously depicts them as weak and dependent on male protection [10,11]. This duality enforces a hierarchy wherein women who conform to prescribed roles (e.g., housewives and caregivers) are rewarded with adoration, while those who deviate (e.g., feminists and career-oriented individuals) face marginalization and hostility [14,15].

BS's apparent benevolence makes it particularly insidious. Perceived as acts of chivalry or expressions of care, it often goes unrecognized as a form of control, thereby perpetuating patriarchal norms [10,16]. Its impact extends to everyday relationships, where women continue to shoulder disproportionate responsibilities in domestic labor, caregiving, and emotional support, often at the expense of their professional and personal aspirations [17].

Not surprisingly, the literature suggests that high levels of HS are closely related to a propensity toward gender-based violence, from verbal aggression to sexual harassment [18–20], and they also seem to play a crucial role in their legitimation [18,21]. On the other hand, BS may predict men's tendency to blame the victim and absolve the perpetrator of responsibility in cases of acquaintance rape [22,23]. Even the professional world is not exempt. Sexism appears to obstruct women's professional growth not only by undervaluing them as employees but also serving as a key justification for the gender pay gap. Nonetheless, it impacts significantly on women's mental health and decreases their overall workplace satisfaction [10,24,25].

Despite the global relevance of sexism, its manifestations are deeply influenced by historical, cultural, and societal contexts. In Italy, gender relations are shaped by longstanding patriarchal traditions, Catholic cultural influences, and evolving socio-economic dynamics. However, empirical investigations into sexism within the Italian context remain relatively limited, particularly in specific regional settings. Understanding how these cultural underpinnings intersect with individual attitudes and behaviors is essential to addressing the problem effectively [26,27].

This study aims to explore the prevalence and sociodemographic factors associated with HS and BS among male individuals in a northern Italian town. By quantifying levels

of sexism and examining their correlations with key sociodemographic characteristics, this study seeks to provide practical insights that can inform strategies to address gender inequalities within the local context.

2. Materials and Methods

A paper questionnaire was administered by the volunteer organization “PerLeDonne” (For Women) and the Local Health Authority of Romagna among male individuals aged > 18 years residing or working in the City of Cesena, Emilia-Romagna, Italy. The administration occurred between February 2023 and April 2023 and targeted individuals in various settings within the city, including the University, a Metalworking company, Agri-food companies, a Cafe, an Art Center, Unions, the Music Conservatory, and the Hospital. The interviews were conducted by volunteers from the organization.

The survey adhered to all the requirements outlined in Italian regulations. Participation in this study was voluntary, and data collection was carried out anonymously. Informed consent was obtained from all the participants before their inclusion in the study database. Data management procedures followed the guidelines set forth in the General Data Protection Regulation of the European Union.

2.1. Questionnaire

This study employed the Ambivalent Sexism Inventory (ASI), a well-established tool developed by Glick and Fiske [8]. The ASI consists of 22 items designed to assess both HS and BS, conceptualized as complementary dimensions of sexist attitudes. These items are structured to measure three key domains of sexist ideology: paternalism, gender differentiation, and heteronormativity. This multidimensional framework enables a comprehensive evaluation of both overtly discriminatory and ostensibly positive yet patronizing attitudes toward women.

Given the Italian setting of this study, the ASI was translated from its original English version. A rigorous back-translation process was employed to ensure that the conceptual integrity of the instrument was preserved. This involved an initial translation into Italian, followed by an independent back-translation into English by a bilingual expert. Discrepancies between the original and back-translated versions were analyzed and resolved collaboratively to ensure cultural and linguistic relevance. The resulting Italian version of the ASI was subjected to cognitive testing with a small sample representative of the study population. This pilot testing allowed the participants to provide feedback on the clarity and comprehensibility of the items. Based on their feedback, the researchers refined the questionnaire to address potential cultural misalignments and ensure that the instrument accurately measured the intended constructs within the Italian cultural context.

Despite these efforts, the methodology is not without limitations. The reliance on self-reported data introduces a potential for social desirability bias, particularly given the sensitive nature of the topic. Participants may underreport attitudes that they perceive as socially unacceptable, even when anonymity and confidentiality are assured. Furthermore, while the ASI is validated across diverse cultural contexts, certain items may be interpreted differently due to cultural nuances specific to Italy, potentially affecting responses. The cognitive testing phase mitigated some of these concerns by identifying and addressing ambiguities in the translated items, yet residual biases cannot be entirely excluded.

The use of the ASI, however, offers significant strengths. Its ability to capture both explicit hostility and more subtle, patronizing forms of sexism provides a nuanced understanding of the ways in which sexist ideologies manifest in interpersonal and societal dynamics. Moreover, the inventory’s division into subdomains, including paternalism and gender differentiation, offers insights into specific mechanisms through which sexism per-

petuates gender inequalities. The structured and theory-driven design of the ASI ensures consistency and comparability with studies conducted in other cultural settings.

2.2. Statistical Analysis

The statistical analysis of the data encompassed the description of variables in absolute frequencies and percentages. Multiple regression analyses were utilized to investigate the relationship between the dependent variables, specifically the scores for HS and BS, and multiple independent variables. The results of the multiple regression analyses were presented in terms of coefficients (Coeff.) along with their standard error (SE), p -values, and a 95% confidence interval (95% CI). The significance level for the statistical tests was set at $p < 0.05$. Multicollinearity diagnostics were performed to assess the potential correlation among the independent variables. Variance Inflation Factor (VIF) values were computed, with a threshold of 5 used to indicate potentially problematic multicollinearity. Additionally, tolerance statistics ($1/VIF$) were calculated, where values below 0.2 were considered indicative of serious multicollinearity concerns. Microsoft Excel was employed for data management, and the statistical analyses were conducted using Stata Statistical Software version 17, developed by StataCorp in College Station, TX, USA.

3. Results

Overall, 275 individuals participated in this study. Table 1 provides a comprehensive overview of the participant demographics across various settings where the investigation was conducted. Regarding age, the overall mean age of the sample was 44.4 with a standard deviation of 15.1 years, showcasing variations among the interviewed groups in different settings. For example, the participants from the University setting had a mean age of 24.3 ± 7.2 years, whereas those in the Art Center had a mean age of 61.8 ± 12.4 years.

The educational levels within the general sample included Primary education ($n = 2$, 0.7%), middle school ($n = 28$, 10.3%), high school ($n = 124$, 45.6%), and bachelor's degree or higher ($n = 118$, 43.4%). Differences among the subgroups are evident in the table. Notably, in some settings, individuals with lower education levels participated, such as in the Cafe and Metalworking company, where respondents with only middle school education made up 56.3% ($n = 9$) and 29.4% ($n = 5$), respectively, within their subgroup. Conversely, settings with higher education levels were more frequent in the Hospital, Music Conservatory, and Art Center, with the respondents holding a degree or higher constituting 78.8% ($n = 26$), 72.7% ($n = 8$), and 67.9% ($n = 19$) of their respective subgroups.

Similarly, for the profession of the participants, classified into various categories, significant differences were observed among the subgroups. Overall, the most represented category in our sample was office employees ($n = 86$, 31.9% of the total), followed by students ($n = 40$, 14.8%) and factory workers ($n = 38$, 14.1%).

Regarding nationality, most of the sample was Italian ($n = 266$, 97.1%). Most non-Italian respondents participated in this study in the Agri-food company setting ($n = 5$, 10.4% of the subgroup).

Table 1. Demographic characteristics of the sample and distribution across the various settings.

	University	Metal Working Company	Agri-Food Company (1)	Cafè	Art Center	Union (1)	Union (2)	Music Conservatory	Agri-Food Company (2)	Hospital	Not Specified	Total	
n (%)	38 (13.8)	17 (6.2)	24 (8.7)	16 (5.8)	29 (10.6)	19 (6.9)	9 (3.3)	11 (4.0)	48 (17.5)	33 (12.0)	31 (11.3)	275 (100.0)	
Age	24.3 ± 7.2	50.0 ± 10.0	46.5 ± 11.1	50.6 ± 15.7	61.8 ± 12.4	49.8 ± 11.2	52.1 ± 8.1	39.8 ± 13.8	39.4 ± 11.8	43.1 ± 11.1	50.4 ± 15.2	44.4 ± 15.5	
Educational level	Primary education	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	2 (6.9)	2 (0.7)	
	Middle school	0 (0.0)	5 (29.4)	0 (0.0)	9 (56.3)	0 (0.0)	3 (15.8)	0 (0.0)	1 (9.1)	1 (2.1)	1 (3.0)	8 (27.6)	28 (10.3)
	High school	21 (55.3)	11 (64.7)	12 (50.0)	6 (37.5)	9 (32.1)	14 (73.7)	5 (55.6)	2 (18.2)	24 (50.0)	6 (18.2)	14 (48.3)	124 (45.6)
	Bachelor's degree or higher	17 (44.7)	1 (5.9)	12 (50.0)	1 (6.3)	19 (67.9)	2 (10.6)	4 (44.4)	8 (72.7)	23 (47.9)	26 (78.8)	5 (17.2)	118 (43.4)
Profession	Student	37 (97.4)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	1 (11.1)	0 (0.0)	0 (0.0)	2 (7.0)	40 (14.8)
	Factory worker	0 (0.0)	8 (47.1)	0 (0.0)	11 (73.3)	1 (3.5)	0 (0.0)	0 (0.0)	1 (11.1)	11 (22.9)	0 (0.0)	6 (20.7)	38 (14.1)
	Office employee	0 (0.0)	8 (47.1)	21 (87.5)	1 (6.7)	0 (0.0)	7 (36.8)	8 (88.9)	2 (22.2)	30 (62.5)	2 (6.1)	7 (24.1)	86 (31.9)
	Healthcare professional	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	3 (10.3)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	29 (87.8)	1 (3.5)	33 (12.2)
	Non-healthcare professional	0 (0.0)	1 (5.9)	2 (8.3)	1 (6.7)	4 (13.8)	0 (0.0)	1 (11.1)	1 (11.1)	7 (17.6)	0 (0.0)	2 (6.9)	19 (7.1)
	Teacher or professor	1 (2.6)	0 (0.0)	1 (4.2)	0 (0.0)	4 (13.8)	0 (0.0)	0 (0.0)	3 (33.3)	0 (0.0)	2 (6.1)	1 (3.5)	12 (4.4)
	Retiree	0 (0.0)	0 (0.0)	0 (0.0)	2 (13.3)	1 (3.5)	3 (15.8)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	7 (24.1)	13 (4.8)
Nationality	Italian	37 (97.4)	17 (100.0)	24 (100.0)	16 (100.0)	29 (100.0)	19 (100.0)	9 (100.0)	11 (100.0)	43 (89.6)	33 (100.0)	28 (93.3)	266 (97.1)
	Other	1 (2.6)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	5 (10.4)	0 (0.0)	2 (6.7)	8 (2.9)
	Artist	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	16 (55.2)	0 (0.0)	0 (0.0)	1 (11.1)	0 (0.0)	0 (0.0)	0 (0.0)	17 (6.3)

3.1. Scores of Hostile and Benevolent Sexism

In Table 2, the mean scores and standard deviations for the HS and BS scores across the different settings are displayed. The overall total mean HS was 27.5 ± 11.4 , while the total mean BS was 29.4 ± 10.0 . In the University setting, the participants reported a mean HS score of 25.4 ± 8.9 and BS score of 24.2 ± 7.4 . The Metalworking company showed a mean HS score of 24.4 ± 5.5 and a higher mean BS score of 34.4 ± 10.9 . Notably, the Cafe exhibited a substantially elevated mean HS score of 47.0 ± 3.7 , while the Art Center displayed a lower HS score of 20.3 ± 7.9 and a higher BS score of 37.4 ± 8.7 . Varied scores were observed across the Union settings, with Union (1) reporting a mean HS score of 21.3 ± 5.0 and Union (2) showing a higher mean HS score of 25.9 ± 6.9 . The Hospital setting indicated a mean HS score of 34.3 ± 12.8 .

Table 2. Scores of hostile and benevolent sexism.

Setting	Hostile Sexism	Benevolent Sexism
University	25.4 ± 8.9	24.2 ± 7.4
Metalworking company	24.4 ± 5.5	34.4 ± 10.9
Agri-food company (1)	24.2 ± 9.4	31.2 ± 9.4
Cafe	47.0 ± 3.7	25.2 ± 4.3
Art Center	20.3 ± 7.9	37.4 ± 8.7
Union (1)	21.3 ± 5.0	22.1 ± 6.8
Union (2)	25.9 ± 6.9	34.6 ± 8.3
Music Conservatory	19.4 ± 9.5	25.7 ± 11.3
Agri-food company (2)	25.0 ± 8.8	30.4 ± 8.4
Hospital	34.3 ± 12.8	25.1 ± 10.8
Not specified	35.0 ± 12.5	33.6 ± 9.9
Total	27.5 ± 11.4	29.4 ± 10.0

3.2. Multiple Regression Analyses

In the multiple regression analysis examining the relationship between the HS scores and various independent variables, age demonstrated a non-significant coefficient (Coeff. = 0.05, SE = 0.06, $p = 0.386$, and 95% CI: -0.06 – 0.16). Regarding educational level, individuals with a high school education and a bachelor's degree or higher showed statistically significant coefficients of -5.33 (SE = 2.26, $p = 0.019$, and 95% CI: -9.78 – -0.88) and -8.64 (SE = 2.51, $p = 0.001$, and 95% CI: -13.58 – -3.69), respectively, if compared to individuals with middle school education or less (Table 3).

In terms of profession, healthcare professionals exhibited a significant positive coefficient of higher HS scores (Coeff. = 6.99, SE = 2.81, $p = 0.014$, and 95% CI: 1.45–12.51), while unionists showed a significant negative association (Coeff. = -10.32 , SE = 3.60, $p = 0.005$, and 95% CI: -17.42 – -3.23). Notably, teachers or professors demonstrated a negative relationship (Coeff. = -8.05 , SE = 3.81, $p = 0.035$, and 95% CI: -15.55 – -0.55), suggesting lower HS scores. The results for other professions, including factory workers, office employees, non-healthcare professionals, retirees, and artists, did not reach statistical significance.

In the multiple regression analysis examining the association between the BS scores and various independent variables, age was found to be a significant predictor (Coeff. = 0.20, SE = 0.05, $p < 0.001$, and 95% CI: 0.10–0.31), indicating that as age increased, BS scores also increased. Regarding educational level, compared to individuals with Primary and middle school education as the baseline, those with high school education exhibited no statistically significant association with BS scores as did those with a bachelor's degree (Table 4).

Table 3. Multiple regression analysis examining the relationship between hostile sexism scores and shown independent variables.

Hostile Sexism		Coeff.	SE	p-Value	95% C.I.
	Age	0.05	0.06	0.386	−0.06–0.16
Educational Level	Primary education and middle school *	0 (base)			
	High school	−5.33	2.26	0.019	−9.79–−0.88
	Bachelor’s degree or higher	−8.64	2.51	0.001	−13.58–−3.69
Profession	Student	0 (base)			
	Factory worker	4.14	2.67	0.123	−1.13–9.41
	Office employee	−1.88	2.31	0.415	−6.42–2.66
	Healthcare professional	6.99	2.81	0.014	1.45–12.51
	Non-healthcare professional	0.87	3.14	0.783	−5.32–7.06
	Teacher or professor	−8.05	3.81	0.035	−15.54–−0.55
	Retiree	5.62	4.21	0.183	−2.66–13.91
	Unionist	−10.32	3.60	0.005	−17.42–−3.23
Artist	−7.02	3.62	0.053	−14.15–0.10	

* Primary education and middle school education were aggregated and considered as only one variable; statistically significant results ($p < 0.05$) are indicated in bold.

Table 4. Multiple regression analysis examining the relationship between benevolent sexism scores and shown independent variables.

Benevolent Sexism		Coeff.	SE	p-Value	95% C.I.
	Age	0.20	0.05	<0.001	0.10–0.31
Educational Level	Primary education and middle school *	0 (base)			
	High school	−0.06	2.04	0.975	−4.09–3.96
	Bachelor’s degree or higher	−1.29	2.26	0.570	−5.76–3.17
Profession	Student	0 (base)			
	Factory worker	1.52	2.41	0.529	−3.23–6.28
	Office employee	1.88	2.06	0.364	−2.25–5.95
	Healthcare professional	−1.79	2.54	0.481	−6.78–3.20
	Non-healthcare professional	1.81	2.84	0.524	−3.79–7.40
	Teacher or professor	4.54	3.44	0.187	−2.23–11.31
	Retiree	−1.63	3.80	0.668	−9.11–5.84
	Unionist	−7.71	3.25	0.019	−14.11–−1.30
Artist	5.65	3.27	0.085	−0.78–12.09	

* Primary education and middle school education were aggregated and considered as only one variable; statistically significant results ($p < 0.05$) are indicated in bold.

Concerning the profession, compared to students, unionists demonstrated a statistically significant decrease in BS scores (Coeff. = -7.59 , SE = 3.22 , $p = 0.019$, and 95% CI: -13.94 – -1.24). Additionally, factory workers, office employees, healthcare professionals, non-healthcare professionals, teachers or professors, and retirees did not show statistically significant differences in BS scores. Artists exhibited a trend toward higher scores, although it did not reach statistical significance (Coeff. = 5.58 , SE = 3.23 , $p = 0.086$, and 95% CI: -0.79 – 11.95).

The multicollinearity diagnostics indicated no severe multicollinearity issues among the independent variables (Table 5). The highest VIF value was 4.07 for “Bachelor’s degree or higher”, and the mean VIF across all the predictors was 2.34. The tolerance statistics ($1/\text{VIF}$) were all above 0.2, further confirming the absence of serious multicollinearity concerns.

Table 5. Multicollinearity diagnostics.

Variable	VIF	1/VIF (Tolerance)
Age	1.99	0.503
High school	3.31	0.302
Bachelor's degree or higher	4.07	0.246
Factory worker	2.23	0.448
Office employee	3.03	0.330
Healthcare professional	2.23	0.448
Non-healthcare professional	1.62	0.616
Teacher or professor	1.75	0.570
Retiree	1.99	0.504
Unionist	1.46	0.686
Artist	2.04	0.490
Mean VIF	2.34	—

4. Discussion

This study investigated HS and BS scores among a representative sample of the Italian male population. The data, collected through collaboration with the volunteer organization “PerLeDonne” and Local Health Authorities, included individuals of diverse ages, educational backgrounds, professional sectors, and settings. Such diversity enabled the identification of statistically significant variations in sexism levels of our sample across these sociodemographic dimensions.

Our findings align with the existing literature [28,29], particularly regarding the inverse relationship between educational attainment and HS levels. Individuals with higher levels of education—such as a high school diploma, bachelor's degree, or advanced qualifications—consistently demonstrated lower HS levels. This observation supports theoretical frameworks positing that education acts as a catalyst for reducing prejudice by challenging entrenched stereotypes and fostering empathetic understanding [30]. Early interventions during adolescence, a critical period for the development of social and emotional identities, are especially important for embedding principles of gender equality. Adolescents, particularly those at risk of school dropout, are more susceptible to adopting stereotypical gender roles; thus, targeted initiatives at this stage could substantially mitigate these risks. Educational programs addressing gender biases should not function in isolation but rather be integrated into comprehensive affective and sexual education curricula. National and European guidelines, such as Italy's National Plan Against Violence and Discrimination (2017) and the EU's Strategy for Gender Equality 2020–2025 [31,32], provide robust frameworks for developing such initiatives.

A central aim of gender education is to enable individuals to construct authentic identities, free from cultural prejudices and biases, by viewing gender as a dynamic and open space for self-expression rather than a rigid framework. Central to this approach is the promotion of critical thinking, defined as a mode of reasoning that is both analytical and action-oriented. This concept, introduced to modern pedagogy by John Dewey through his theory of reflective thought during the Progressive Education Movement (1920s–1950s) [33], emphasizes reasoning that combines analysis, creativity, and action. It equips individuals to evaluate claims, assess the reliability of sources, and judge the completeness of inferred conclusions [30]. Incorporating critical thinking into gender education programs empowers students to recognize, evaluate, and deconstruct cultural gender stereotypes, fostering the development of authentic and autonomous identities. Such programs aim to facilitate constructive dialogue among students about gender stereotypes, ultimately dismantling rigid historical and cultural norms that define gender in overly simplistic terms. Further-

more, gender education seeks to instill mutual respect and appreciation of diversity within interpersonal relationships. These efforts address gender asymmetries rooted in power dynamics and control, which perpetuate male dominance, and aim to promote equitable and respectful interactions.

Building on these premises and the findings of our study, the results underline the potential to develop primary prevention interventions within broader affective and sexual education curricula in schools. These interventions should be informed by the theoretical framework of ambivalent sexism and address specific gender stereotypes associated with both HS and BS.

However, our findings also revealed that age significantly influenced BS scores: as age increased, BS scores also increased while no significant correlations were found between HS and age. In our sample, in fact, the highest levels of BS were observed in the Art Center, which is the setting characterized also by the highest average age. This could be attributable to a “generational effect”, which implies that individuals of a certain age tend to be more conservative and attached to traditional gender roles. Additionally, they might fail to recognize such paternalistic and subjectively positive attitudes toward women as discriminatory [10,16]. This generational disparity highlights the need for targeted awareness campaigns that specifically address the subtleties of BS and its broader societal consequences. These campaigns should aim to dismantle the perception of BS as benign, emphasizing its role in perpetuating structural inequalities.

The measured scores tend to vary across different settings, but what is particularly interesting is that in some contexts, the HS and BS scores do not consistently align.

In the Art Center, for instance, despite encountering high levels of BS, we found some of the lowest levels of HS among our sample. This evidence may further confirm that, while the damaging effects of HS are not open to question, there is less social recognition of the negative consequences of BS.

Conversely, in the Cafe, the situation was reversed: respondents reported low scores of BS and the most alarming scores of HS. In this group, 56.3% of the respondents had a middle school education, which could help explain the HS score in line with the previously mentioned observations. However, the not negligible percentage of subjects with high school education or higher (43.8%) suggests that other factors could be involved and may need to be investigated.

These findings align with research indicating that while HS and BS are interrelated constructs, they retain structural independence. This distinction is crucial for designing tailored intervention strategies that address the unique stereotypes underpinning each form of sexism. Such a dual-focused approach remains underrepresented in the current literature on gender education programs. By targeting both HS and BS, critical thinking workshops can expand their scope beyond addressing overtly discriminatory stereotypes against women. They can also confront those that appear to valorize women but ultimately place them in subordinate or dependent roles relative to men.

This nuanced approach reflects broader sociocultural transformations in gender relations. Over time, openly discriminatory stereotypes of women’s inferiority within patriarchal systems have evolved into subtler, more socially accepted narratives. BS, for instance, casts women as “angels” or individuals requiring protection, thereby perpetuating a paternalistic dynamic. While these attitudes may seem benign, they reinforce structural inequalities and betray deeply ingrained cultural biases that continue to shape gender perceptions and roles.

One particularly concerning finding in our study was the significant correlation between healthcare professionals and high levels of HS. Sexist and gender stereotyped attitudes held by health professionals, in fact, could result in discriminatory practices as

well as create barriers and inequalities in the quality of care provided to female patients. Additionally, healthcare workers are often among the first professionals to encounter situations involving gender-based violence and may not be trained to provide an adequate response [34,35]. Therefore, the necessity of sensitizing professionals to recognize and address the impacts of unintentional gender bias in their practice may need to be acknowledged. Moreover, professionals should receive comprehensive training to properly assess situations of gender-based violence and offer appropriate physical, psychological, and legal support.

Our approach to prevention programs is grounded in the understanding that sexism is a complex and dynamic historical-cultural phenomenon. It requires widespread, sustained primary prevention actions that consider specific behavioral manifestations of gender stereotypes in the current cultural context. These observations allow for the analysis and prevention of behaviors linked to various forms of gender-based violence rooted in HS and BS.

Finally, trade unions, traditionally associated with advocacy for social causes and workers' rights, demonstrated some of the lowest levels of both BS and HS in our study. While this finding is encouraging, it should be interpreted with caution, as the data do not conclusively attribute these differences to the specific contextual factors of trade unions. Further investigation is needed to explore these dynamics in greater depth.

Limitations

While this study offers valuable insights, it is critical to underscore its limitations to contextualize the findings and guide future research. First and foremost, the generalizability of the results is highly restricted, not only because this study was conducted in a small-sized city in Northern Italy but more importantly due to the sampling method employed. The use of a convenience sample means that the results cannot be confidently extended to the city's broader population or any other population. This methodological choice inherently limits the representativeness of the sample and the validity of broader inferences.

Convenience sampling, while practical in exploratory research, carries significant implications for statistical inference. In the present study, significance tests were utilized to identify differences and associations within the sample. However, these tests assume that the sample is a probabilistic representation of the population, an assumption not met in this case. Consequently, while the significance tests provide insights into patterns within the sample, they should not be interpreted as evidence of population-level trends. The lack of probability sampling precludes the use of these results to make definitive statements about the likelihood that observed differences or associations would hold true in a broader context. This limitation is particularly pronounced when examining associations with sociodemographic variables, given the small and heterogeneous nature of the sample. Therefore, any conclusions drawn should be regarded as indicative rather than definitive and should be interpreted with extreme caution.

Another limitation concerns the diversity of the sample, which, while encompassing a range of educational levels and professional backgrounds, does not offset the constraints imposed by non-random sampling. The fragmented and relatively small sample size further compounds the difficulty of drawing robust sociological or demographic conclusions. The observed associations are likely influenced by sample-specific factors and should not be assumed to reflect broader societal patterns without further verification through studies employing larger, probabilistically drawn samples.

Additionally, the potential for social desirability bias must be considered, particularly given this study's sensitive focus and the context in which data collection occurred. The interviews were conducted by female volunteers, which may have influenced respondents'

willingness to provide candid answers. Respondents might have offered responses perceived as socially acceptable, potentially leading to an underestimation of these scores. This effect could be amplified by the gender of the interviewers, as previous research suggests that interviewer characteristics can shape the nature of responses in sensitive or gender-related topics.

In light of these limitations, the findings of this study should be viewed as exploratory and hypothesis-generating rather than conclusive. Future research should aim to address these issues by employing probability sampling methods, increasing the sample size, and diversifying the demographic and geographic contexts of study populations. Additionally, employing mixed-gender interviewers or anonymous data collection methods could help mitigate desirability bias and provide a more accurate reflection of participants' attitudes and behaviors.

5. Conclusions

This study offered preliminary insights into gender discrimination and its ambivalent nature, focusing on a sample of the Italian male population. The results underscore the need for further investigation into the complexity of this phenomenon, taking into account additional factors such as life experiences, religion, socio-economic status, and the influence of social and historical changes [36]. Although some associations were observed—such as age correlating with BS and educational level with HS—these findings are exploratory and require validation through studies with larger and more representative samples. Nonetheless, this study highlights the potential value of educational interventions aimed at reducing sexism, with particular attention to younger individuals and healthcare workers, as a promising area for future prevention efforts.

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Institutional Review Board Statement: As the information presented did not enable the identification of individual participants, this study did not pose a plausible risk of harm or stigma to the involved individuals. This study adhered to an anonymous and observational design, distinct from that of a clinical trial. Consequently, in accordance with Italian law (Gazzetta Ufficiale n. 76, dated 31 March 2008), a preliminary evaluation by an Ethical Committee or Institutional Review Board was not deemed necessary for this study.

Informed Consent Statement: Prior to the collection of their vaccination history record charts, all the participants provided informed consent. This study was executed in alignment with the principles outlined in the Declaration of Helsinki, and the subsequent data analysis was undertaken by the Local Health Authority (LHA) itself. It is important to note that all the results were presented in an aggregated format, ensuring the confidentiality and anonymity of the individual subjects.

Data Availability Statement: The data presented in this study are available on request from the corresponding author.

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