

Original Article

SOCIO-DEMOGRAPHIC, IDEOLOGICAL, AND PSYCHOLOGICAL PREDICTORS OF INTERNALIZED MISOGYNY AMONG WOMEN IN SERBIA

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Key Messages:

1. Right-wing political orientation and authoritarianism, and perceived gender-based microaggressions are positive predictors of internalized misogyny.
2. Higher self-esteem, and greater mastery are negative predictors of internalized misogyny.
3. Nursing professionals should consider these results in promoting mental health of their patients.

Abstract

Background: Individual psychological traits may interact with social influences to shape the development and expression of internalized misogyny among women.

Aim: To examine the predictive value of sociodemographic, ideological, and psychological variables for internalized misogyny among women.

Materials and Methods: An online survey was conducted with a sample of 260 women from the Republic of Serbia, aged 18 to 65 years. The psychometric battery comprised the Internalized Misogyny Scale, Rosenberg Self-Esteem Scale, Pearlin Mastery Scale, Gender Microaggressions Scale, Personal Experience of Gender Disempowerment Scale, Social and Economic Conservatism Scale, Right-Wing Authoritarianism Scale, and Political Orientation and Religiosity Scale. The hypotheses were evaluated using a four-step hierarchical linear regression analysis.

Results: The instruments demonstrated satisfactory to excellent internal consistency reliability (Cronbach's $\alpha = 0.74 - 0.92$). The final hierarchical regression model explained 22% of the variance in internalized misogyny ($R^2 = .22, p < .05$). In the final step, right-wing political orientation ($\beta = .15, p < .05$), right-wing authoritarianism ($\beta = .18, p < .05$), and perceived gender-based microaggressions ($\beta = .12, p < .05$) emerged as statistically significant positive predictors. Conversely, higher self-esteem ($\beta = -.14, p < .05$) and greater mastery ($\beta = -.21, p < .05$) were significant negative predictors of internalized misogyny. Sociodemographic factors and social conservatism did not retain significant predictive value in the final model.

Conclusion: The results of our study provide actionable guidance for nursing professionals in designing targeted mental health interventions aimed at mitigating the psychological burden of internalized gender oppression.

Keywords: gender, women, contempt, prejudice

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Introduction

A growing body of empirical literature focuses on the intricate relationships between individual psychological characteristics and social factors in predicting internalized misogyny among women¹. Internalized misogyny is conceptually operationalized as the multidimensional internalization of sexist ideologies and systemic hostility toward women, which members of the targeted gender inadvertently adopt from the surrounding patriarchal culture and subsequently direct toward themselves and other women^{2,3}. This psychological phenomenon manifests through excessive distrust of women, the reinforcement of traditional gender roles, and the passive acceptance of male dominance^{4,5}. While sexism broadly encompasses two distinct valences—hostile sexism, characterized by overtly negative attitudes and an explicit desire to maintain dominant power structures, and benevolent sexism, marked by patronizing and superficially protective views that relegate women to a subordinate status⁵—internalized misogyny represents the deep-seated psychological integration of these divisive frameworks. Rather than being sustained exclusively by institutional mechanisms or out-group enforcement, gender inequality is frequently sustained because women absorb pervasive cultural scripts, resulting in the systemic devaluation of their own gender group⁶.

Contemporary frameworks identify several core behavioral dimensions through which internalized gender bias operates, including intense intragender competition, self-objectification, invalidation, and mutual derogation⁷. Intragender competition typically arises as women navigate limited access to structural resources, such as socioeconomic status or positions of systemic power. Self-objectification occurs when individuals adopt an external observer's perspective toward

their own existence, prioritizing sociocultural or physical conformity over intrinsic personal agency and intellectual capabilities⁷. Invalidation involves the systematic minimization of female emotional and cognitive experiences, while derogation manifests as the use of exclusionary or derogatory language that undermines the collective worth of women. Within this matrix, internalized misogyny acts as a fundamental cognitive barrier, causing individuals to sustain traditional power distributions and obstructing the collective capacity to identify and dismantle structural oppression.

Sociopolitical and ideological frameworks play a critical role in predicting variation in internalized misogyny. Political orientation, conceptualized on a continuum from progressive (left-wing) to conservative (right-wing), captures an individual's orientation toward social hierarchy, tradition, and systemic change⁸. Progressive orientations generally favor social transformation and egalitarian structures, whereas conservative alignments heavily emphasize the preservation of established traditions and conventional moral frameworks⁸. Because institutionalized sexism is fundamentally designed to protect traditional distributions of the division of labor, individuals holding conservative ideological alignments are statistically expected to demonstrate higher levels of internalized misogyny. This ideological alignment is reinforced by right-wing authoritarianism (RWA), a construct composed of conventionalism, authoritarian submission, and authoritarian aggression⁹. Right-wing authoritarianism consistently predicts out-group prejudice and rigid in-group policing⁹. Women who exhibit high levels of authoritarian tendencies may demand strict adherence to traditional gender roles from other women, displaying marked intoler-

ance and prejudice toward those who challenge traditional authority structures.

Similarly, individual religiosity represents a critical ideological predictor of internalized misogyny. Historically, conventional religious institutions have tended to codify rigid gender polarization, often depicting women as inherently different from or subordinate to men¹⁰. Consequently, individuals with higher levels of subjective religiosity frequently exhibit traditional orientations toward family structures and gender-specific obligations, with empirical data confirming robust associations between religious institutional adherence and the internalization of sexist attitudes^{10,11}. These ideological frameworks are reinforced during early developmental socialization within the primary family. The family environment serves as a primary arena in which parental expectations shape gender-congruent behaviors. Pervasive exposure to familial gender differentiation during childhood establishes cognitive schemas that predict the persistent expression of internalized misogyny throughout adulthood.

In day-to-day social environments, these cognitive schemas are continually reinforced by gender-based microaggressions. Conceptualized as brief, commonplace behavioral, verbal, or environmental indignities, microaggressions convey hostile, derogatory, or negative slights toward women¹². A defining characteristic of these events is that perpetrators are often unaware of the bias underlying their actions¹². Despite their subtle and often unintentional nature, the chronic accumulation of these everyday insults leaves a lasting mark on women's self-perceptions, generating a cognitive environment in which misogynistic social standards are continuously validated.

To mitigate the impact of these social stressors, this study examines two critical psychological resilience factors: self-esteem and personal mastery over life difficulties. Self-esteem refers to the degree to which an individual evaluates and perceives their intrinsic self-worth¹³, whereas coping with life difficulties (personal mastery) captures the extent to which a person perceives life outcomes as manageable through personal agen-

cy, as opposed to being determined by external forces¹⁴. Psychological literature suggests a robust inverse relationship between self-worth and internalized gender bias¹⁵. When marginalized individuals internalize systemic devaluation, dissatisfaction with perceived personal inadequacies can generalize into dissatisfaction with the social group to which they belong^{15,16}. Consequently, women possessing lower self-esteem and diminished personal mastery are statistically expected to exhibit significantly higher levels of internalized misogyny. Conversely, robust self-esteem and strong personal mastery function as protective internal resources, allowing individuals to recognize, evaluate, and successfully reject microaggressive social messages and discriminatory environmental demands.

The primary objective of this study was to examine the predictive capacity of a comprehensive set of individual, ideological, psychological, and social determinants in relation to internalized misogyny among women. Specifically, the research sought to evaluate: (a) the relative and incremental contribution of sociodemographic and sociopolitical ideological frameworks, and (b) the specific predictive value of psychological resilience factors (self-esteem and coping mechanisms), alongside social environmental stressors (perceived gender-based microaggressions), in explaining variance in the criterion variable.

Based on the foundational theoretical frameworks and empirical findings in the contemporary literature, the following alternative hypotheses were formulated and tested:

H₁: It is hypothesized that the block of sociodemographic characteristics (age and educational attainment) and sociopolitical ideological orientations (political orientation, right-wing authoritarianism, and social conservatism) will statistically significantly predict variability in internalized misogyny.

H₂: It is hypothesized that psychological variables will demonstrate a significant inverse predictive relationship, whereby lower levels of self-esteem and diminished capacities for coping with life

difficulties will significantly predict higher levels of internalized misogyny.

H₃: It is hypothesized that the social environmental predictor—perceived gender-based microaggressions—will exhibit a statistically significant positive partial contribution to the prediction of internalized misogyny.

Materials and Methods

Participants and Procedure

The cross-sectional online survey sample comprised 260 women from the Republic of Serbia, aged between 18 and 65 years. The mean age of the participants was 37.28 years ($SD = 8.86$). Regarding educational attainment, 32.74% of the participants had completed primary education, 40.83% had completed secondary education, and 26.43% held a college or university degree. In terms of residential status, the majority of participants resided in urban areas (62.46%), while 23.50% lived in suburban environments (small towns) and 14.04% resided in rural areas (the countryside). Regarding political self-identification, participants who did not report an explicit alignment with either right-wing or left-wing ideologies (15.38%, $n = 40$) were categorized as political centrists. This operationalization was adopted to avoid artificial polarization and to reflect a neutral, non-aligned ideological position within the sociopolitical spectrum²³.

Data collection was conducted in November 2025 using the Google Forms platform, with the survey link distributed through targeted social media groups (WhatsApp, Viber, and Facebook). Prior to participation, the research objectives, the voluntary nature of participation, and the strict anonymity of responses were explicitly communicated. Informed consent was obtained electronically, as participants were required to confirm that they were 18 years of age or older and agree to the participation terms before accessing the survey. To ensure data completeness, the digital interface employed a forced-response format that prevented missing responses while allowing participants to review and modify their answers

on previous pages before final submission. The estimated completion time for the randomized scales was approximately 30 minutes. The study protocol was formally approved by the Scientific Council of the Serbian Academy of Innovation Sciences, Belgrade (Opinion No. 21/2025), and the study was conducted in accordance with the ethical principles of the Declaration of Helsinki.

Measures

Internalized Misogyny. The Internalized Misogyny Scale (IMS) was used to assess the criterion variable (16). The scale consists of 17 items reflecting aspects of attitudes toward women across three distinct dimensions: negative connotations of women (e.g., “Women are easily offended”), distrust of women (e.g., “It is generally safer not to trust women too much”), and belief in male superiority (e.g., “I prefer to work for a male boss”). Responses were collected using a 7-point Likert-type scale ranging from 1 (*strongly disagree*) to 7 (*strongly agree*). Composite scores were calculated by summing all items, with higher total scores indicating higher levels of internalized misogyny. In the present study, the scale demonstrated high internal consistency (Cronbach’s $\alpha = 0.90$).

Self-Esteem. General self-esteem was assessed using the Rosenberg Self-Esteem Scale (RSES)¹⁷. This 10-item instrument includes five positively worded items (e.g., “In general, I am satisfied with myself”) and five negatively worded items (e.g., “I feel that there is not much I can be proud of”). Participants responded on a 5-point Likert-type scale ranging from 1 (*completely disagree*) to 5 (*completely agree*). Negatively worded items were reverse-scored, yielding a theoretical score range from 10 to 50, with higher scores indicating higher levels of self-esteem. The scale demonstrated excellent internal consistency in the present sample (Cronbach’s $\alpha = 0.92$).

Coping with Difficulties. The Pearlin Mastery Scale (PMS) was employed to assess individuals’ perceived capacity to manage life stressors¹⁸. The scale comprises seven items (e.g., “I can do almost anything I set my mind to”), rated on a 5-point Likert-type scale ranging from 1 (*does*

not apply to me at all) to 5 (*applies to me completely*). Higher total scores indicate a stronger sense of personal mastery over life difficulties. The internal consistency of the scale in the present study was satisfactory (Cronbach's $\alpha = 0.74$).

Gender-Based Microaggressions. Perceived structural and interpersonal microaggressions were measured using a modified 23-item version of the Gender Microaggressions Scale (GMS-R), adapted from the original 33-item instrument (19). To optimize content validity for the target population and reduce potential confounding, 10 items capturing internal affective states (e.g., "I feel pressure to be a good cook") were excluded. The modified instrument therefore focused specifically on perceived external behavioral and societal microaggressions. In addition, items describing identical microaggressive behaviors perpetrated by men or women were consolidated into gender-neutral formulations to reduce source-related bias and capture the general occurrence of the phenomenon. The modified instrument assesses seven behavioral themes: conventional distribution of domestic labor, objectification, labeled assertive communication, physical appearance pressures, marital and child-bearing expectations, denial of systemic sexism, and traditional workplace role constraints. Frequency was rated on a 5-point Likert-type scale ranging from 1 (*never*) to 5 (*always*). Higher scores indicate a higher frequency of perceived microaggressions. The scale demonstrated good internal consistency (Cronbach's $\alpha = 0.83$).

Personal Experience of Gender Disempowerment. Perceived historical discrimination within the primary family during childhood was assessed using a 5-item scale adapted from Kamenov et al.²⁰. Participants retrospectively evaluated the frequency of gender-based discrimination on a 4-point Likert-type scale, identifying experiences of structural marginalization attributed specifically to their gender. Higher cumulative scores indicate more pervasive experiences of gender-based discrimination within the childhood family environment. The scale demonstrated acceptable internal consistency (Cronbach's $\alpha = 0.76$).

Social Conservatism. Ideological leanings were assessed using the social subscale of the Social and Economic Conservatism Scale (SECS)²¹. Although the original instrument comprises 12 items covering economic and social dimensions, this study used only the 7-item social conservatism subscale, which assesses orientations toward abortion, national security, religion, conventional marriage, traditional family structures, and patriotism. Participants rated their attitudes toward each issue on an 11-point scale ranging from 0 (*negative*) to 10 (*positive*), with 5 representing the neutral midpoint. Higher scores indicate stronger social conservatism. The subscale demonstrated good internal consistency (Cronbach's $\alpha = 0.80$).

Right-Wing Authoritarianism. Ideological attitudes and respect for social hierarchies were assessed using a 9-item Right-Wing Authoritarianism (RWA) scale adapted from established frameworks²². Responses were recorded on a 5-point Likert-type scale ranging from 1 (*completely disagree*) to 5 (*completely agree*), with higher total scores indicating stronger authoritarian tendencies. The scale demonstrated good internal consistency (Cronbach's $\alpha = 0.82$).

Political Orientation and Religiosity. Individual religiosity was assessed using a single-item indicator: "How important is religion in your life?", scored from 1 (*not important at all*) to 5 (*extremely important*). Political orientation was assessed using a single-item measure: "What is your political orientation?", rated on a 5-point scale ranging from 1 (*extremely left/liberal*) to 5 (*extremely right/conservative*), with an additional neutral option, 6 (*I am not politically aligned*). Participants selecting option 6 were recoded to the theoretical midpoint of the scale (3 = *centre*). This procedure was intended to represent political non-alignment as a neutral position within the linear analysis model²³.

Data Analysis

Statistical analyses were conducted using IBM SPSS Statistics (Version 21.0). First, descriptive statistics, including arithmetic means (*M*), standard deviations (*SD*), skewness (*Sk*), and

kurtosis (Ku), were calculated to examine the distributional characteristics of the variables and assess their suitability for parametric analyses (24). Bivariate linear associations were examined using Pearson correlation coefficients (r). The hypothesized predictive relationships were evaluated using a four-step hierarchical linear regression model. The statistical significance threshold for all inferential analyses was set at a two-tailed α level of $p < 0.05$.

Results

Table 1 presents the descriptive statistics, including measures of central tendency, variability, and distributional shape for all examined variables. To assess the normality of the data distributions, the coefficients of skewness (Sk) and kurtosis (Ku) were examined. According to established methodological criteria, data are considered to approximate a normal distribution when skewness and kurtosis values fall within the acceptable range of ± 2.0 .

Table 1 - Descriptive Statistical Indicators and Normality Test for the Measured Variables (N = 260)

Variables	M	SD	Min	Max	Sk	Ku
Internalized misogyny	2.90	1.03	1.00	6.58	0.20	-0.48
Political orientation	2.96	0.60	1.00	5.00	-0.12	2.05
Right-wing authoritarianism	2.92	0.60	1.00	5.00	-0.25	0.10
Social conservatism	7.03	1.82	1.60	9.00	-0.05	-0.67
Religiosity	3.54	1.33	1.00	5.00	-0.67	-0.18
Self-esteem	3.65	0.65	1.00	5.00	-0.70	-0.16
Coping with difficulties	3.67	0.64	1.38	5.00	-0.05	-0.15
Discrimination in the family	1.98	1.39	0.00	5.00	0.08	-0.80
Gender-based micro-aggressions	1.97	1.01	1.00	5.00	0.28	-0.93

Note. M = arithmetic mean; SD = standard deviation; Min = minimum score; Max = maximum score; Sk = skewness; Ku = kurtosis. Standard error of skewness ($SkSE$) = 0.10; Standard error of kurtosis ($KuSE$) = 0.17.

As reported in Table 1, the skewness values for all variables range from -0.70 to 0.28 , while the kurtosis values range from -0.93 to 2.05 . Political orientation showed a slightly positive kurtosis value, indicating a minor degree of leptokurtosis; however, this value remained within the generally accepted range and did not indicate a substantial departure from normality. Overall, the observed skewness and kurtosis values were within the recommended parameters, indicating no substantial deviations from a normal distribution.

These findings support the assumption of approximate normality and the appropriateness of using parametric statistical procedures.

As presented in the correlation matrix (Table 2), the Pearson correlation coefficients among the examined variables generally ranged from low to moderate in magnitude ($r = 0.14$ – 0.62). Particular attention was given to the bivariate relationships between the examined predictors and the primary criterion variable, internalized misogyny.

Table 2. Pearson Correlation Coefficients Between the Examined Variables

Variables	1	2	3	4	5	6	7	8	9	10	11
1. Internalized misogyny	—										
2. Age	0.20*	—									
3. Level of education	-0.21*	0.14*	—								
4. Size of the settlement	-0.05	-0.03	0.19*	—							
5. Political orientation	0.20*	0.05	0.10	0.11	—						
6. Right-wing authoritarianism	0.28**	0.29**	-0.25**	-0.10	0.19*	—					
7. Social conservatism	0.03	0.34**	-0.18*	-0.20*	0.30**	0.52**	—				
8. Religiosity	0.09	0.17*	-0.10	-0.19*	0.35**	0.40**	0.62**	—			
9. Self-esteem	-0.19*	-0.03	0.15*	0.01	0.06	0.09	0.18*	0.10	—		
10. Coping with difficulties	-0.30**	-0.12	0.16*	0.03	0.01	0.20*	0.06	0.02	0.59**	—	
11. Gender-based micro-aggressions	0.27*	0.30*	-0.10	-0.05	0.10	0.20*	0.16*	0.17**	-0.03	0.20	—

Note. $p < 0.05$, $p < 0.01$.

The strongest statistically significant positive correlation with internalized misogyny was observed for right-wing authoritarianism ($r = 0.28$, $p < 0.01$), followed by gender-based microaggressions ($r = 0.27$, $p < 0.05$), age ($r = 0.20$, $p < 0.05$), and political orientation ($r = 0.20$, $p < 0.05$). Educational attainment was significantly and negatively correlated with internalized misogyny ($r = -0.21$, $p < 0.05$). Conversely, the strongest negative correlation was observed between internalized misogyny and coping with life difficulties ($r = -0.30$, $p < 0.01$), followed by a significant negative association with self-esteem ($r = -0.19$, $p < 0.05$).

These findings indicate that higher levels of internalized misogyny are significantly associated with older age, lower educational attainment, more right-wing political orientation, higher levels of authoritarianism, lower self-esteem, lower perceived capacity to cope with life difficulties, and a higher frequency of perceived gender-based microaggressions. In contrast, settlement

size, social conservatism, and religiosity did not show statistically significant bivariate associations with internalized misogyny.

As presented in Table 3, a four-step hierarchical linear regression analysis was conducted to examine the independent contribution of sociodemographic, ideological, psychological, and social variables to the prediction of internalized misogyny. Prior to conducting the regression analysis, multicollinearity diagnostics were examined to assess potential overlap among the predictors. Tolerance values ranged from 0.38 to 0.96, while Variance Inflation Factor (VIF) values ranged from 1.15 to 2.29. Because all tolerance values exceeded the commonly recommended minimum threshold of 0.20 and all VIF values were below the conservative threshold of 5.0, the results indicated that problematic multicollinearity was not present among the predictors. These findings support the stability and interpretability of the regression models.

Table 3. Hierarchical Regression Analysis Predicting Internalized Misogyny

Predictors	Model I B (SE)	Model II B (SE)	Model III B (SE)	Model IV B (SE)
Age	0.13* (0.50)	0.05 (0.79)	0.01 (0.48)	0.08 (0.75)
Level of education	-0.15* (0.49)	0.05 (0.77)	0.02 (0.53)	0.06 (0.66)
Size of the settlement	-0.01 (0.54)	-0.05 (0.78)	-0.03 (0.65)	-0.02 (0.54)
Political orientation		0.16* (0.52)	0.16* (0.63)	0.15* (0.74)
Right-wing authoritarianism		0.32** (0.51)	0.19* (0.72)	0.18* (0.61)
Social conservatism		0.23** (0.52)	-0.05 (0.73)	-0.03 (0.61)
Religiosity		-.01 (0.56)	.06 (0.78)	-.02 (0.62)
Self-esteem			-0.15* (0.56)	-0.14* (0.64)
Coping with difficulties			-0.20* (0.57)	-0.21* (0.67)
Discrimination in the family				-.005 (0.59)
Gender-based micro-aggressions				0.12* (0.74)
<i>R</i>	0.18	0.40	0.38	0.39
<i>R</i> ²	0.05	0.14	0.22	0.22
ΔR^2	—	0.09	0.08	0.02

Note. *B* = standardized beta coefficient; *SE* = standard error; ΔR^2 = change in r-squared. $p < 0.05$, * $p < 0.01$.

In the first model, the sociodemographic variables accounted for 5% of the total variance in internalized misogyny ($R^2 = 0.05$), with older age emerging as a significant positive predictor ($B = 0.13$, $p < 0.05$) and higher educational attainment as a significant negative predictor ($B = -0.15$, $p < 0.05$). In the second model, the introduction of political-ideological predictors and religiosity explained an additional 9% of the variance ($\Delta R^2 = 0.09$). Right-wing political orientation ($B = 0.16$, $p < 0.05$), right-wing authoritarianism ($B = 0.32$, $p < 0.01$), and social conservatism ($B = 0.23$, $p < 0.01$) emerged as statistically significant positive predictors, while the initially significant sociodemographic effects became non-significant.

The third model incorporated the psychological variables, which explained an additional 8% of the variance ($\Delta R^2 = 0.08$). Self-esteem ($B = -0.15$, $p < 0.05$) and coping with difficulties ($B = -0.20$, $p < 0.05$) were significant negative

predictors, whereas the predictive contribution of social conservatism became non-significant.

In the final model, the social predictor was added, accounting for an additional 2% of the variance ($\Delta R^2 = 0.02$). The final regression model accounted for 22% of the total variance in internalized misogyny ($R^2 = 0.22$). Within this final model, right-wing political orientation ($\beta = 0.15$, $p < 0.05$), right-wing authoritarianism ($B = 0.18$, $p < 0.05$), self-esteem ($B = -0.14$, $p < 0.05$), coping with difficulties ($\beta = -0.21$, $p < 0.05$), and perceived gender-based microaggressions ($B = 0.12$, $p < 0.05$) remained statistically significant predictors of the criterion variable.

Discussion

In the present study, the descriptive analysis indicated that the aggregate mean score for internalized misogyny among the sample of adult women was below the theoretical midpoint of the scale. This finding suggests relatively low levels of internalized misogynistic attitudes within

the examined Serbian-speaking sample and is broadly consistent with contemporary regional research examining modern expressions of sexism across neighboring cultural contexts^{25,26}.

The first step of the hierarchical regression analysis demonstrated that older age and lower educational attainment were significantly associated with higher levels of internalized misogynistic attitudes. These findings are consistent with empirical evidence indicating inverse associations between educational attainment and gender-based bias among women²⁷. From a cognitive perspective, it may be hypothesized that higher levels of education provide women with analytical frameworks that enable them to critically evaluate and challenge traditional norms of male superiority. Because traditional gender-role expectations may constrain professional autonomy and career development, more highly educated women may be better positioned to resist the internalization of counter-egalitarian gender norms. Furthermore, the observed age-related pattern may reflect broader generational changes within Serbian society. Over recent decades, sociocultural trends have shifted toward greater institutional equality and increased public recognition of systemic sexism²⁸. Consequently, older cohorts, whose formative socialization occurred under comparatively more traditional gender-role norms, may exhibit higher levels of internalized gender bias than younger cohorts.

Within the second hierarchical block, political orientation, right-wing authoritarianism, and social conservatism emerged as significant positive predictors of internalized misogyny. This pattern is consistent with contemporary political-psychological literature suggesting that traditional ideological frameworks contribute to the maintenance of sexist belief systems among women²⁹. Interestingly, contrary to previous research linking religious adherence to traditional gender-role attitudes, individual religiosity did not emerge as a statistically significant predictor in the final model³⁰. This finding may be partly attributable to the multidimensional nature of the focal construct and the specific way in which internalized misogyny was operationalized in the present

study. Internalized misogyny may share stronger conceptual associations with negative and distrustful attitudes toward women than with forms of gender ideology expressed through ostensibly protective or benevolent attitudes. Taken together, these findings provide support for the first alternative hypothesis (*H1*), indicating that sociodemographic and sociopolitical-ideological variables make a significant contribution to the prediction of internalized misogyny.

The third regression step revealed that lower self-esteem and diminished personal mastery were significant predictors of higher levels of internalized misogyny. Both variables exhibited negative associations with the criterion variable, suggesting that weaker internal psychological resources are related to greater internalization of negative gender-related attitudes³¹. From a sociocognitive perspective, individuals who experience lower personal worth and a reduced sense of control over their life outcomes may be more vulnerable to internalizing negative social evaluations. In the context of gender-based marginalization, negative self-evaluations may potentially extend to attitudes toward the broader gender ingroup, contributing to distrust, derogation, and devaluation of other women. However, the cross-sectional design does not permit conclusions regarding the directionality or causal mechanisms underlying these associations. Nevertheless, the findings are consistent with the second alternative hypothesis (*H2*).

In the final regression model, the introduction of social-environmental factors produced only a modest incremental increase in the proportion of explained variance. Nevertheless, perceived gender-based microaggressions maintained a statistically significant partial association with internalized misogyny after controlling for the variables entered in the preceding blocks. Existing literature examining the relationship between exposure to sexist experiences and internalized gender bias has produced mixed findings. Some theoretical perspectives suggest that lower levels of internalization may enable women to more readily recognize and identify systemic microaggressions³², whereas other research indicates

a positive association between chronic exposure to everyday gender-based microaggressions and the internalization of misogynistic schemas³². The present findings are more consistent with the latter perspective, suggesting that frequent exposure to gender-based microaggressions is associated with higher levels of internalized misogyny. Thus, the findings provide support for the third alternative hypothesis (H3).

Conversely, retrospective experiences of childhood gender discrimination within the primary family did not emerge as a statistically significant predictor in the final regression model, despite showing a weak positive bivariate correlation with the criterion variable. This finding may be related to the specific characteristics of the adapted instrument, which primarily captured relatively explicit historical behavioral restrictions and may not have adequately represented more subtle or pervasive forms of emotional and relational marginalization during childhood.

Implications for Nursing Practice and Women's Mental Health

The internalization of misogynistic attitudes has been associated with adverse psychological and public health outcomes, including higher levels of depression, anxiety, and general psychological distress among women³³. Within the context of advanced nursing practice, public health, and psychosocial care, the present findings suggest several potentially relevant avenues for preventive intervention. Psychiatric-mental health nurses and primary healthcare providers may play an important role in recognizing internalized gender-related attitudes and their potential psychological correlates during routine psychosocial assessments. Integrating gender-informed psychosocial support into primary nursing care may help clients identify and critically evaluate internalized gender-related beliefs while strengthening self-esteem and personal mastery. Given the significant association observed between perceived gender-based microaggressions and internalized misogyny, health-promotion initiatives may also benefit from incorporating community-level educational interventions directed toward both women and men. Such inter-

ventions could focus on increasing awareness of the subtle and cumulative nature of gender-based microaggressions and promoting strategies for recognizing and challenging discriminatory social norms. However, because the present study was cross-sectional, these implications should be interpreted as potential directions for prevention and health promotion rather than evidence of demonstrated intervention effects.

Methodological Limitations and Future Directions

Several methodological limitations should be considered when interpreting these findings. First, the measures of microaggressive exposure and familial gender discrimination relied on retrospective self-reports and were therefore susceptible to recall bias, selective memory, and subjective reconstruction of past experiences. Second, the cross-sectional online design limits the ability to establish temporal ordering or causal relationships among the examined variables. The online survey format may also have introduced response fatigue, particularly given the relatively extensive battery of measures and the estimated completion time of approximately 30 minutes. In addition, the use of a convenience-based online sample may limit the generalizability of the findings to the broader population of women in Serbia.

Although the final regression model explained 22% of the variance in internalized misogyny, a substantial proportion of variance remained unexplained. Future quantitative and mixed-methods research should therefore consider additional psychological and sociocultural factors, including social dominance orientation (SDO), broad personality traits, cognitive and thinking dispositions, exposure to gender-role socialization, and other dimensions of sociocultural context. Longitudinal research would also be valuable for examining the temporal relationships among psychological resources, ideological orientations, exposure to gender-based microaggressions, and the development or persistence of internalized misogyny.

Conflict of Interest

The authors declare no conflict of interest.

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