

An ACHA Toolkit

Shifting the Paradigm:

Primary Prevention of Sexual Violence



American College Health Association

Table of Contents

Preface and Acknowledgements	.3
Purpose of the Toolkit	.4
Background	
ACHA Position Statement on Preventing Sexual Violence on College and University Campuses	.5
Sexual Violence Prevention	.7
Re-visioning the Sexual Violence Continuum	.10
Screening for Sexual Violence	.12
Spread the Word about Preventing Sexual Violence	.13
10 Ways Young Men Can Prevent Sexual Violence	.14
The Importance of Consent	.15
Preventing Sexual Violence through Empowering Campus Bystanders	.16
Alcohol and Sexual Violence	.19
Prevention of Sexual Violence on Campus: An Assessment Tool	.21
Resources	.23

The American College Health Association (ACHA) will be the principal advocate and leadership organization for college and university health. The association will provide advocacy, education, communications, products and services, as well as promote research and culturally competent practices to enhance its members' ability to advance the health of all students and the campus community.

Shifting the Paradigm: Primary Prevention of Sexual Violence was developed by the American College Health Association and supported by The Centers for Disease Control and Prevention (CDC) Program Announcement #05040 (US4/CCU324945-02): Enhancing Healthcare Providers Ability to Prevent Sexual Violence. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the CDC.

August 2008



American College Health Association

P.O. Box 28937
Baltimore, MD 21240-8937
Tel: (410) 859-1500
www.acha.org

Preface and Acknowledgements

Preface

The 2005 ACHA *Campus Violence White Paper* (www.acha.org/info_resources/06_Campus_Violence.pdf) stated that

“...acts of violence have continued to force U.S. colleges and universities to address the dangerous and alarming violent events that send shockwaves throughout many campuses and compromise students’ health and safety.”

The Campus Violence White Paper also reported that “approximately 20-25% of college women are projected to be victims of an attempted or completed rape during their college careers.” Further, in the Spring 2007 ACHA-National College Health Assessment, 3.9% of college women reported attempted or actual sexual penetration against their will within the last academic year, 10.6% reported sexual touching against their will, and 1.9% reported a sexually abusive relationship. College men reported 1.4%, 4.4%, and 1.3% on the same variables respectively. Clearly, the challenge is upon us that more needs to be done to address the prevention of sexual violence on campus.

While there is a rich volume of tools, knowledge, and resources for intervention *after* sexual violence, the emphasis of this toolkit is to encourage **prevention** activities that take place **before** sexual violence has occurred and create social change and shift the norms regarding sexual violence. As D. Lee, L. Guy, and B. Perry state:

“To address sexual violence prevention in a truly comprehensive manner, strategies to prevent its initial perpetration and victimization (primary prevention) must reach the same level of efficacy and adoption as programs that respond to its consequences” (page 7).

Thus, a primary prevention approach to preventing sexual violence requires a paradigm shift in the thinking of the campus community. Primary prevention helps create environments that promote respect, equality, civility, healthy relationships, and healthy sexuality — and ultimately, a campus environment where students are safe and learning successfully.

The campus community has a stake in preventing sexual violence and all members have a valuable role to play. With our commitment, we can raise awareness of the primary prevention of sexual violence within our college communities. We hope this toolkit is a start on this much needed journey.

Acknowledgements

ACHA would like to thank Joetta L. Carr, PhD, Professor, Western Michigan University (lead consultant), Terri Kersch, MS, CHES, CWC, Health Educator, Siena College, and Donna M. Barry, RN, APN-C, Director, University Health Center, Montclair State University, for their tireless work and support of this project and especially for making this toolkit a reality. ACHA would also like to thank the many ACHA members who provided feedback on the previous drafts of the ACHA *Position Statement on Preventing Sexual Violence on College and University Campuses* and this final publication. It would not have been possible without the feedback, guidance, and support. Lastly, ACHA thanks the U.S. Centers for Disease Control and Prevention for its support.

For additional information about this project or this toolkit, visit www.acha.org/SexualViolence or contact Robert L. Ward, MS, ACHA Project Director at rlward@acha.org.

PREVENTING SEXUAL VIOLENCE ON CAMPUS

- Identify social norms that support sexual violence
- Strengthen sense of community
- Target entire community
- Link to alcohol campaigns
- Use peer educators

Purpose of the Toolkit

The purpose of this toolkit — *Shifting the Paradigm: Primary Prevention of Sexual Violence* — is to provide facts, ideas, strategies, conversation starters, and resources to everyone on campus who cares about the prevention of sexual violence. Whether you are a faculty or staff member or an administrator or student, there are resources included that are directly relevant to your role in the campus community. Please take a moment to look through these materials and decide how you can best utilize this toolkit as an individual, in your center/office, department, or at the overall institution level. If you are tempted to simply pass this toolkit off to the person or office that deals with sexual assault, consider this — the only way to prevent sexual violence and promote a culture of caring is for the *entire campus community* to focus on this campus concern.

All American College Health Association (ACHA) members have been sent this toolkit and we are asking that you disseminate this resource across your campus. You may either copy all of it or portions of it or download it at www.acha.org/SexualViolence. Likewise, you may choose to electronically send the toolkit to key stakeholders at your institution. As you review the toolkit, we ask that you consider:

- ❖ Organizing a meeting of key leaders to discuss how to disseminate (See “Key Partnerships in Sexual Violence Prevention” and “Spread the Word”) and utilize the toolkit for your campus community. Be sure to include representatives from the president/chancellor's office, faculty, health center, counseling center, health promotion, women's center/studies, Panhellenic/Interfraternity Councils, athletics, dean of students, student affairs, peer educators, and other interested parties.
- ❖ Encouraging your student health/counseling/health promotion staff to review this toolkit and discuss how to incorporate the “Screening for Sexual Violence” tools into your interactions with students and “Opportunities for Prevention Messages during Campus Health Visits.”
- ❖ Distributing the *ACHA Guidelines: Position Statement on Preventing Sexual Violence on College and University Campuses* to all college health professionals and other key people. Likewise, use the “Position Statement Assessment Tool” to guide your campus efforts at preventing sexual violence.
- ❖ Distributing the handout “10 Ways Young Men Can Prevent Sexual Violence” to male students and discussing these points with them.
- ❖ Initiating or facilitating roundtable discussions, events, trainings, and/or workshops on:
 - How your campus can embrace the shifting paradigm concept of primary prevention of sexual violence (See “Sexual Violence Prevention”)
 - How your campus can address the connection between oppression and violence (See “Re-visioning the Sexual Violence Continuum”)
 - How to analyze your campus culture and the social norms regarding alcohol, sexual behavior, and sexual violence (See “Alcohol and Sexual Violence”)
 - How your campus can address the specific needs of international students, LGBT students, and cultural diversity groups regarding this topic
 - How to develop bystander intervention strategies (See “Preventing Sexual Violence through Empowering Campus Bystanders”)
 - How to promote a culture of caring and sexual ethics on your campus
 - How to gain consent for all sexual activities and encounters (See “Importance of Consent”)
 - How to address gender roles, gender inequality, and male peer support for sexual aggression
 - How protective factors in your particular campus culture can be strengthened
- ❖ Encouraging student organizations, fraternities, sororities, campus activities, student government, and others to bring in national speakers on sexual violence prevention.
- ❖ Discussing the best strategy for enlisting buy-in and endorsement from the president or chancellor of your institution.
- ❖ Utilizing this toolkit in programming for Sexual Assault Awareness Month (SAAM) each April.
- ❖ Adapting any of the materials or tools to fit your unique campus needs and change them to fit your campus culture

Lastly, talk about this issue! The health and academic success of our students will only be enhanced once there is a commitment to address sexual violence on campus. Good luck to you all.

Position Statement on Preventing Sexual Violence on College and University Campuses

The American College Health Association (ACHA) recognizes sexual violence as a serious campus and public health issue. The ACHA *Campus Violence White Paper* documents current research that reveals high rates of sexual violence on college and university campuses and low levels of reporting of these incidents by students. *Healthy People 2010* identifies “injury” and “violence” as a leading public health indicator. In recognition of this campus health concern, ACHA’s *Healthy Campus 2010* developed health objectives that serve as a basis for developing plans and programs to reduce sexual violence and improve student health.

High levels of victimization, coupled with cultural acceptance of rape myths, create an environment where victimized students are disempowered and alienated from their college experiences. This environment has resulted in impediments to academic success, lower graduation rates, health problems, and persistent mental health issues. Students cannot learn in an atmosphere where they do not feel safe. ACHA members are uniquely positioned to play a leading role in sexual violence prevention and to create a culture of caring. College campuses contain rich venues for educating students about healthy sexuality and communication skills.

Reframing the Issue

All levels of prevention are necessary to stop the occurrence of sexual violence and to significantly improve the health status of campus communities. True primary prevention is population-based using environmental and system-level strategies, policies, and actions that prevent sexual violence from initially occurring. The U.S. Centers for Disease Control and Prevention suggests that sexual violence is conceptualized by risk and protective factors on individual, relationship, community, and society levels. Sexual violence prevention activities include those that are aimed at addressing the domains of influence of potential victims, perpetrators, and bystanders. College health professionals can facilitate conversations about sex that focus on individual choices along the continuum of sexual activity. These conversations identify and popularize healthy sexuality that respects gender, sexual orientation, and gender identity.

The creation of a living and learning environment free of sexual violence is the ultimate goal. This vision requires a cul-

tural shift that moves beyond the mere prevention of violence towards a community that adopts healthy and caring sexual attitudes and practices. Faculty, staff, administrators, and students must play key roles in the creation of a campus culture that reflects civility, honor, respect, and nonviolence. This campus/community culture shift conceptualizes sexual activity as a choice and as consensual. Consensual sexual activity involves the presence of the word “yes” without incapacitation of alcohol or other drugs, pressure, force, threat, or intimidation. As this conversation moves from the shadows into the public arena, individuals can learn skills necessary for consent and intimate communication.

Engaging The Campus Community

Successful primary prevention of sexual violence requires recognition of the problem at the highest levels of campus leadership. Likewise, policy development and accountability for all policies that reflect intolerance for sexual violence across its continuum — from sexist statements to sexual harassment to sexual assault — should be enforced. Further, it is the responsibility of faculty, staff, and administrators to serve as mentors and role models for students as well as to provide educative opportunities for the primary prevention of sexual violence.

Efforts to prevent sexual violence should be multifaceted and include but not be limited to such strategies as classroom discussions, health promotion programs, media campaigns, peer education, and discussions during student health and counseling services visits. It is also critical to infuse messages about healthy sexuality and sexual violence prevention into the curriculum at all levels. Faculty in women’s studies, biology, health sciences, religious studies, sociology, psychology, criminal justice, ethics, and other areas can be mobilized to share research and establish critical thinking skills to assist students in making healthy decisions that will decrease sexual violence.

A critical component of successful primary prevention of sexual violence is its recognition as a public health issue that involves both men and women. Encouraging the commitment of men to serve as positive role models for other men to be intolerant of sexual violence is as fundamental to prevention of sexual violence as are programs that provide continuous opportunities that empower women to develop self-respect, self-esteem, and

POSITION STATEMENT ON PREVENTING SEXUAL VIOLENCE ON COLLEGE AND UNIVERSITY CAMPUSES

assertiveness. Further, student groups that research has identified as high-risk for actions of sexual violence and vulnerable populations at-risk for victimization should be addressed with specific outreach efforts.

Alcohol use/abuse is implicated in the majority of incidents of campus sexual assaults. Therefore, awareness initiatives related to alcohol use/abuse and its relationship to sexual violence need to be consistent and comprehensive across policy, education, and role modeling.

In addition, campus communities need to develop programs on bystander intervention techniques. Bystander techniques are skills that allow students, faculty, and staff to recognize the continuum of violence and empower them to intervene, prevent, or stop inappropriate comments and actions. The goal is to create a culture shift from bystander apathy to bystander intervention, thus creating a culture in which violence cannot occur.

Recommended Actions

ACHA recommends the following actions be taken to address policy, prevention, and intervention as it pertains to sexual violence:

1. Develop a policy statement and directive from the president/chancellor of the institution that demonstrates recognition of sexual violence as a problem, a commitment to reduce its occurrence, and action steps for the campus community.
2. Develop a multidisciplinary taskforce on campus to address sexual violence prevention and response services that includes high-level campus administration, academic leaders, student leaders, and community partnerships.
3. Create policies that reflect an expectation of civility, honor, respect, and nonviolence for all members of the community and encourage behaviors that build a sense of community.
4. Revise, enforce, and widely distribute disciplinary regulations in the student code that demonstrate an intolerance of all forms of sexual violence and implement sanctions for violations by faculty, staff, and students.
5. Educate disciplinary boards on perpetrator patterns and possible victim responses and patterns.
6. Provide comprehensive training on all aspects of sexual violence for campus administrators; campus law enforcement; health and counseling services staff; faculty; staff; and student leaders that includes the dynamics of sexual violence, access to care, victim response, and federal/state statutes.
7. Develop a coordinated, seamless, victim-centered response service between campus and community resources that offers the options of:
 - anonymous reporting
 - law enforcement involvement
 - judicial/disciplinary board actions
 - forensic/medical care
 - emergency contraception
 - academic/housing accommodations
 - follow-up counseling, support, and advocacy
8. Integrate screening for sexual violence into patient history protocols.
9. Adhere to federal, state, and local statutes and reporting requirements.
10. Integrate sexual violence prevention education into curricular and non-curricular activities.
11. Offer residence hall and extra-curricular activities that are alcohol free.
12. Develop educational/outreach programming that:
 - recognizes that sexual violence is a learned behavior
 - teaches bystander intervention techniques
 - addresses the role of consent in sexual relationships
 - encourages the involvement of men
 - addresses alcohol and other drugs issues and the connection with sexual violence
 - provides concepts that encourage healthy, consensual sexual relationships
 - addresses non-stranger sexual violence and dispels traditional beliefs
13. Create and codify amnesty policies for underage drinking for victims who report sexual assault.
14. Invest men in the prevention of sexual violence, including those actions that dehumanize and objectify women.
15. Publish and announce the availability of protocols on campus websites for all campus members to access resources, referrals, and helping strategies for victims of sexual violence.

4/07

NOTE: Use the Assessment Tool on page 21 to note your institution's level of completion of each of the Recommended Actions.

Sexual Violence Prevention

By David S. Lee, MPH, Lydia Guy, BA, and Brad Perry, MA

Primarily prevention involves developing comprehensive strategies that stop violence before initial perpetration or victimization, especially those that make community and society level changes. The best sexual violence prevention strategies combine the socio-political analysis of the feminist anti-rape movement and the systematic approach to promoting healthy behaviors central to public health theory.

Prevention work focused on college-age students is an important element to any comprehensive strategy to prevent sexual violence. From a primary prevention perspective, college-age men and women are at a developmental stage where lifelong behaviors are shaped. Young men and women are continuing to learn how to perform their socially influenced gender roles, and how to act out their gender-based sexual scripts. Appropriately timed prevention strategies can reduce future sexual violence.

In this article, we will review the foundations of sexual violence prevention work. Then we will explore the use of education sessions to prevent sexual violence, and then review more comprehensive strategies, such as community mobilization, changing social norms, social marketing, and policy work.

Foundations for Preventing Sexual Violence

The foundation of efforts for preventing sexual violence come from both the feminist movement and from empirical data from research on associated risk and protective factors. Feminist theory understands rape as a cultural phenomenon requiring interventions beyond the personal and interpersonal. It is the foundation of the anti-rape movement (Roze & Koss, 2001). Feminist theory articulates sexual violence in the context of a rape culture, a complex system of beliefs that encourages male sexual aggression and supports violence against women (Buchwald et al., 1993). Interpreting sexual violence as a foreseeable consequence of rape culture has a profound effect on sexual violence prevention strategies. Sexual violence is seen as a continuum of behaviors instead of an isolated, deviant act. Feminist models of sexual violence hold that it is not inevitable, and can be prevented by making changes to societal norms surrounding sexuality, violence, gender, and oppression (hooks, 1989).

Research has identified *risk factors* for individual victimization, such as being female and having experienced past sexual victimization. Risk factors for individual perpetration include being male, having coercive sexual fantasies, hostility towards women, a history of childhood sexual victimization, growing up in an emotionally unsupportive family environment, and adherence to societal norms supportive of sexual violence, male superiority, and male sexual entitlement (Jewkes, Sen, & Garcia-Moreno, 2002). However, little is currently known about *protective factors* that may reduce vulnerability to victimization and risk for perpetration, or environmental factors that may contribute to prevalence. Notwithstanding, promoting protective factors and addressing negative social and environmental contributors are important components of a public health approach to prevent sexual violence (NCIPC, 2006).

Preventing Sexual Violence Before It Occurs

Over the last 30 years, most anti-sexual violence efforts have been responses after the sexual violence or efforts to promote awareness of sexual assault and resources available to survivors of sexual violence. To address sexual violence prevention in a truly comprehensive manner, strategies to prevent its initial perpetration and victimization (primary prevention) must reach the same level of efficacy and adoption as programs that respond to its consequences.

Public health theory also advises that sexual violence prevention efforts be specific to an intentional audience. Audiences can also be categorized by their likely *role* in an act of sexual violence: as potential *victims* of the violence (Roze & Koss, 2001), as potential *perpetrators* of the violence (Clinton-Sherrad, et al., 2003), or as potential *bystanders* who have an opportunity to prevent or intervene in the act (Banyard, Plante, & Moynihan, 2004).

Educational Sessions

Educational sessions are perhaps the most commonly recognized form of sexual violence prevention work, and there are a wide variety of prevention curricula (see Morrison, et al., 2004 for a review). The goal of primary prevention education sessions is to prevent first-time perpetration or victimization by improving knowledge and attitudes that correspond to the origins of sexual violence (such as adherence to societal norms supportive of sexual violence, male superiority, and male sexual

entitlement), build skills for respectful interactions, and empower participants to become agents of change. Primary sexual violence prevention education commonly addresses attitudes about sexual assault, the impact of gender roles, healthy relationships, consent, conflict resolution, respecting personal boundaries, and skill building for these topics (CDC, 2004).

Impacting individual knowledge and attitudes is more effective as part of a broader comprehensive approach, which also addresses how those attitudes interact with interpersonal influence, and the manner in which norms, policies, and institutions shape the environment in which it all occurs. Thus, single-session sexual violence awareness presentations have limited opportunities to support young people to adopt positive behaviors. Successful education programs augment presentations with other activities.

Comprehensive Models

Comprehensive models such as the Ecological Model and the Spectrum of Prevention (Davis, Parks, & Cohen, 2006) highlight the range of activities to build effective responses. The Ecological Model explains the occurrence of sexual violence and helps identify potential prevention strategies on four levels (Heise, 1998): individual, relationship, community, and societal. Individual level factors relate to a person's knowledge, attitudes, behavior, history, demographics, or biology. Risk factors such as being male, displaying a pattern of denigrating women, and adherence to beliefs that condone the use of violence and coercion are all addressed by strategies that operate on the individual level (Carr & VanDeusen, 2004; Jewkes, Sen, & Garcia-Moreno, 2002). Relationship level strategies address the influence of parents, siblings, peers, and intimate partners. For example, young men who experience caring and connection from adults are less likely to perpetrate violence (Resnick, Ireland, & Borowsky, 2004), while men with peers who encourage sexual coercion are at a heightened risk for perpetration (Loh, et al., 2005). Community level strategies look at norms, customs, or people's experiences with local institutions, such as schools, workplaces, places of worship, or criminal justice agencies. Societal level strategies address broad social forces, such as inequalities, oppressions, organized belief systems, and relevant public policies (or lack thereof). Because factors at one level are influenced by connected factors at other levels, primary prevention strategies should seek to operate on multiple levels of the social ecology simultaneously.

Community Level Prevention Strategies

In order to sustain long-term changes in individuals, communities must reinforce and support those changes. In the next section, we will examine several comprehensive strategies: community mobilization, social norms approaches, social marketing, and policy work.

Community Mobilization

Community mobilization is a participatory process focused on changing community norms, basic patterns of social interac-

tion, values, customs, and institutions in ways that will significantly improve the quality of life in a community. Effective implementation of any community mobilization requires promoting positive changes in community norms. The process of community mobilization is as important as the output. "When people have an opportunity to participate in decisions and shape strategies that vitally affect them, they will develop a sense of ownership in what they have determined, and commitment to seeing that the decisions are sound and that the strategies are useful, effective and carried out" (Lofquist, 1996, p. 4). A leading example of community mobilization is Washington State's (Washington State Office of Crime Victims Advocacy, 1997) adaption of Lofquist's Community Development framework (Lofquist, 1996) to focus on the following key activities: define the parameters of the community and engage key community members, facilitate a process in which these key individuals define sexual violence as it occurs in their community, develop a plan focused on changing societal conditions, implement the community mobilization plan, and evaluate the effort.

Changing Social Norms

The social norms approach suggests that peer pressure is the primary influence on shaping people's behavior. However, many behaviors are influenced by incorrect perceptions of how peers think and act. Based on research primarily conducted with college-age populations, the social norms approach can be applied to the prevention of sexual violence by correcting these misperceptions of group norms to decrease problem behaviors or increase healthy behaviors. According to Berkowitz, "a key to effective [sexual violence] prevention is the fact that most males are uncomfortable when we witness harassment and other forms of violence, even when we don't know how to respond" (Berkowitz, 2003). While there may be some utility to the notion that individuals behave in a sexually violent manner because they mistakenly believe their peers are more accepting of corresponding social norms, there are still situations in which harmful social norms are perceived accurately and internalized accordingly, for example, viewing heterosexual sexual interactions as a "game" in which men should try to "win" at the "expense" of women (Loh, et al., 2005). In spite of the shortcomings of overly broad applications of the social norms approach, the idea that some of these norms can be revealed to adolescents as both harmful and less accepted than previously thought has led to some promising strategies. For example, there is a cluster of adolescent sexual violence prevention initiatives that expose young men to the pressures exerted upon them by traditional (and often violent) ideas about masculinity, show them how to resist these pressures to find their own positive identities, and build their skills as peer leaders to show others the link between the norms these pressures create and sexual violence. In short, these initiatives empower young people, particularly young men, to shift the behaviors of their peers. "Men of Strength Clubs" and "Mentors in Violence Prevention" bystander programs (Lee & Lemmon, 2006; Katz, 1995) are examples of such initiatives.

Social Marketing

Social marketing campaigns draw upon marketing research and behavior change theory to develop strategies to shift behaviors. Key components include orientating the campaign toward a target audience, conducting formative research and pre-testing of messages, developing strategies to address barriers and competition to adapting new behaviors, and using a standard marketing mix (product, price, place, and promotion) (Lefebvre & Flora, 1988). California's MyStrength Campaign uses peer-to-peer contact to create new social norms reinforced by a supportive school environment, paid advertising, and earned media. The campaign theme "My Strength Is Not for Hurting" repositions the concept of male strength to encourage, motivate, and enable young men to take action to prevent sexual violence (Lee & Lemmon, 2006).

Policy to Promote Primary Prevention

The implementation of education and social norms changing activities, and other pieces of a comprehensive strategy against sexual violence among youth, requires ongoing support from key decision-makers in the community, and in state and federal organizations. The Ecological Model places policy activities at the societal level, influencing factors such as gender-equality and social norms. Establishing policies that mandate university staff respond to sexual harassment and changing advertising practices that sexualize or objectify women are examples of potential policies.

The Future of Sexual Violence Prevention

Whether or not we see a future decrease in the prevalence of sexual violence will hinge on how effective today's efforts are with adolescents. By engaging young people to be part of the solution, a new generation of leaders will be empowered to further prevention efforts.

Sexual violence prevention efforts are in the midst of a transition from creating awareness of sexual violence to advancing comprehensive primary prevention strategies for community change. Since sexual violence is a cultural issue, solutions must go beyond stopping sexual violence, and should promote behaviors and cultural norms that are healthy, such as egalitarian gender roles, gender equity, healthy relationships, and healthy sexuality. Both women and men must be engaged in this effort to create the day when sexual violence no longer exists so that we can, "... begin the real practice of equality, and then, instead of rape we will for the first time in our lives — both men and women — begin to experience freedom" (Dworkin, 1983).

David S. Lee, MPH, is Prevention Director at the California Coalition Against Sexual Assault. Lydia Guy, BA, is Prevention Services Director for the Washington Coalition of Sexual Assault Programs. Brad Perry, MA, is the Sexual Violence Prevention Coordinator at the Virginia Sexual and Domestic Violence Action Alliance.

This article has been adapted from D. S. Lee, L. Guy, B. Perry, C. K. Sniffen, S. A. Mixson, (2007) *Sexual Violence Prevention, The Prevention Researcher, Volume 14(2)*, pp. 15-20.

References

- Banyard, V.L., Plante, E.G., & Moynihan, M.M. (2004). Bystander education: Bringing a broader community perspective to sexual violence prevention. *Journal of Community Psychology*, 32, 61-79.
- Berkowitz, A. (2003). Young Men as Allies in Preventing Violence and Abuse — Building Effective Partnerships with Schools, Family Violence Prevention Fund's 2003 Online Discussion Series: "Building Partnerships to End Men's Violence" — Discussion 4, Retrieved November 2006, www.vawnet.org/DomesticViolence/PreventionAndEducation/Approaches/SocialNorms.php
- Buchwald, E. et. al. (1993). *Transforming a Rape Culture*. Minneapolis, MN: Milkweed Editions.
- Carr, J.L., & VanDeusen, K.M. (2004). Risk factors for male sexual aggression on college campuses. *Journal of Family Violence*, 19(5), 179-189.
- Centers for Disease Control and Prevention. (2004). *Sexual Violence Prevention: Beginning the Dialogue*, Atlanta, GA: Centers for Disease Control and Prevention.
- Clinton-Sherrod, M., Gibbs, D., Amy Vincus, A., Squire, S., Cignetti, C., Pettibone, K, & Igoo, J. (2003). *Report Describing Projects Designed to Prevent First-Time Male Perpetration of Sexual Violence*. Retrieved from www.nsvrc.org/resources/docs/rti_report.pdf
- Davis, R. Parks, L. F., & Cohen, L. (2006). *Sexual Violence and the Spectrum of Prevention*, Enola, PA: National Sexual Violence Resource Center.
- Dworkin, A. (1983). I Want a Twenty-Four-Hour Truce During Which There Is No Rape. In A. Dworkin (1989) *Letters From a War Zone: Writings 1976-87*. New York: E. P. Dutton. Retrieved November 2006 from www.nostatusquo.com/ACLU/dworkin/WarZoneChaptIII.html
- Heise, L. (1998). Violence against women: An integrated, ecological framework. *Violence Against Women*, 4(3), 262-290.
- hooks, b. (1989) *Talking back: thinking feminist, thinking black*. Boston, MA: South End Press.
- Jewkes, R., Sen, P., & Garcia-Moreno, C. (2002). Sexual violence. In E. G. Krug, L.L. Dahlberg, J.A. Mercy, A.B. Zwi & R. Lozano (Eds.), *World Report on Violence and Health* (pp. 147-181). Geneva: World Health Organization.
- Katz, J. (1995) Reconstructing masculinity in the locker room: The Mentors in Violence Prevention Project. *Harvard Educational Review*, Vol. 65, No. 2.
- Lee, D.S., & Lemmon, P. (November 2006). MyStrength: California's social marketing campaign to engage young men to prevent sexual violence Poster session presented at the annual meeting of the American Public Health Association, Boston, MA.
- Lefebvre R.C., & Flora, J. A. (1988). Social Marketing and Public Health. *Health Education Quarterly* Vol. 15 (3), 299-315.
- Loquist, W. (1996). *Technology of Development*. Development Publications.
- Loh, C., Gidycz, C.A., Lobo, T.R., & Luthra, R. (2005). A prospective analysis of sexual assault perpetration: Risk factors related to perpetrator characteristics. *Journal of Interpersonal Violence*, 20, 1325-1348.
- Morrison, S., Hardison, J., Mathew, A., & O'Neil, J. (September 2004). *An Evidence-Based Review of Sexual Assault Preventive Intervention Programs*. Retrieved on November 30, 2006 from www.ncjrs.gov/pdffiles1/nij/grants/207262.pdf
- National Center for Injury Prevention and Control. (2006, September 7). Sexual Violence: Fact sheet. Retrieved November, 2006, from www.cdc.gov/ncipc/factsheets/svfacts.htm
- Resnick, M.D., Ireland, M., & Borowsky, I. (2004). Youth violence perpetration: What protects? What predicts? Findings from the National Longitudinal Study of Adolescent Health. *Journal of Adolescent Health*, 35, 424-433.
- Roze, P.D., & Koss, M. P. (2001). Rape: A century of resistance, *Psychology of Women Quarterly*, 25, 295-311.
- Washington State Office of Crime Victims Advocacy, (August 1997). *Sexual Assault Prevention Plan for Washington State*. Office of Crime Victims Advocacy, Department of Community, Trade and Economic Development and Washington State Department of Health, The Evergreen State College.

Re-visioning the Sexual Violence Continuum

By Lydia Guy, BA

Rape as a cultural phenomenon, or stated more simply, rape as a predictable consequence of the power differential between men and women has been a topic of discussion since the creation of the first rape crisis centers. Academics tended to use terms like patriarchy, misogyny, and sexism, and those words became integral parts of the lexicon used by the women who became the founding mothers of our current sexual assault service delivery system. The basic premise of this concept is that rape does not happen just because one individual chooses to rape another. Rape happens because there are attitudes and norms that allow it to happen.

“WHAT IS RAPE CULTURE? It is a complex of beliefs that encourages male sexual aggression and supports violence against women. It occurs in a society where violence is seen as sexy and sexuality as violent. In a rape culture, women perceive a continuum of threatened violence that

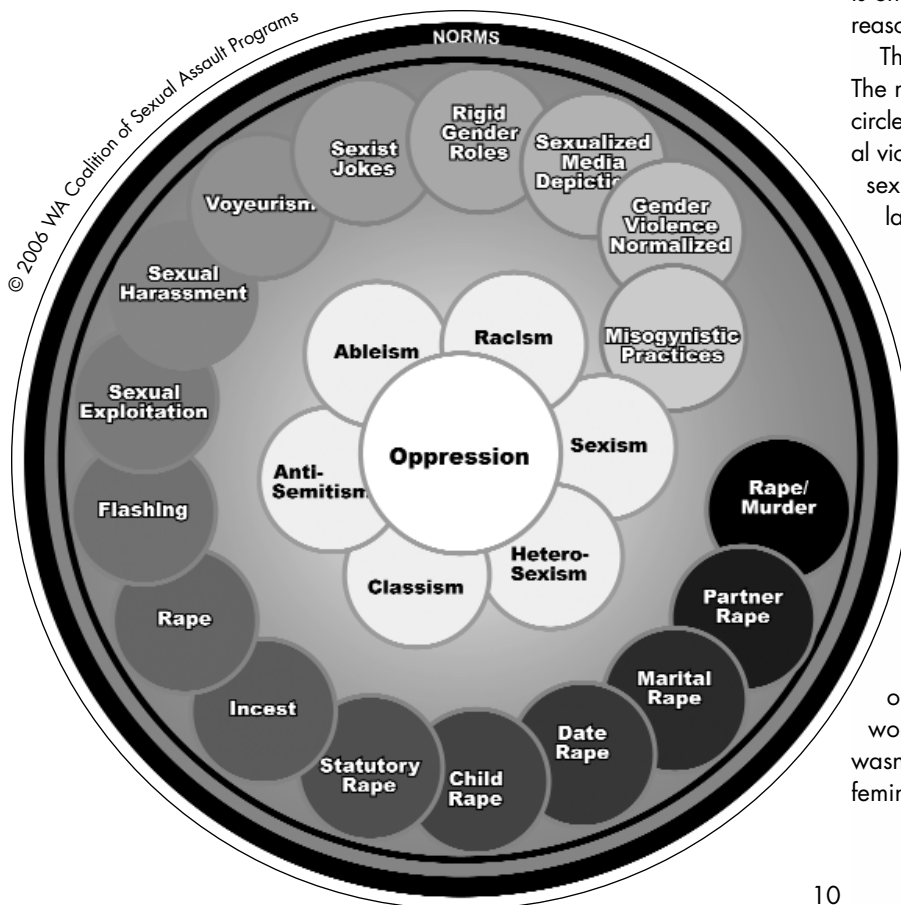
ranges from sexual remarks to sexual touching to rape itself. A rape culture condones physical and emotional terrorism against women as the *norm*. In a rape culture, both men and women assume that sexual violence is a fact of life, inevitable as death or taxes. This violence, however, is neither biologically nor divinely ordained. Much of what we accept as inevitable is in fact the expression of values and attitudes that can change.”

Buchwald, E. et. al. (1993) *Transforming a Rape Culture*. Minneapolis, MN: Milkweed Editions.

The continuum was designed as a visual aid to illustrate the concept of rape culture. The objective was to provide a simple way to describe a complex phenomenon. The interesting thing about portraying something as a picture is that even though we draw the picture to represent how we see the issue, how we see the issue is affected by our experience of looking at the picture. In most visual conceptualizations the image not only reflects our belief system but also shapes our belief system. This is one of the things that make them so profound, and the main reason I choose to re-envision the sexual violence continuum.

There are many depictions of the sexual violence continuum. The most common shapes have been straight lines, spirals, and circles. They all have a key factor in common: they depict sexual violence as a range or succession of related behaviors. Some sexual violence continua list individual acts of sexually violating behaviors, while others tend toward less tangible items such as norms or attitudes. Some depictions are very careful not to present sexual violence as a progression from “minor” to “extreme;” this is usually done to respect the fact that we cannot quantify the experiences of survivors. As I reviewed different sexual violence continua, I noticed another thing they all had in common: they all had strong linkages between sexism and sexual violence, the base underlying assumption that sexual violence is the inevitable result of sexism.

The assumption that sexism and sexual violence are inextricably linked together seemed reasonable at first glance. The current depictions seem to imply that we can end sexual violence by ending sexism alone. It has been my belief that it is impossible to end a single oppression; to work to end one oppression requires us to work to end them all. It was then I realized my critique wasn't just about the continuum but about rape culture and feminist theory as a whole. I decided to try to create a more



holistic depiction. My hope is that by providing a visual conception of the continuum that is more inclusive (of class, race, disability status, sexual orientation, and anti-Semitism, in addition to gender) that it will remind and inspire us to develop a vision of comprehensive sexual violence prevention work that routinely encompasses all forms of oppression.

This version of the sexual violence continuum depicts a range of sexually violating behaviors in overlapping circles as grey circles on a grey background. The background is meant to represent society. The outer ring of the society circle includes the word "Norms" — representing the reinforcing nature of norms. In the center is the word "Oppression," and overlapping white circles listing six specific forms of oppression. This is meant to convey the idea that all forms of oppression are linked and are often experienced in conjunction with one another. In the animated version, the grey circles rearrange themselves into a non-ordered overlapping pattern which attempts to express the fact that sexual violence is very rarely experienced as a discreet event and one's experience of sexual violence is impacted by one's experience of oppression.

My goal was to create a continuum that clearly shows the connection between all forms of oppression and violence. One way to show a connection would be to make continua depicting different types of violence, for instance the "The Racist Violence Continuum" and "The Heterosexist/Homophobic Violence Continuum." Each continuum would have a similar range of behaviors but would be related to the specific type of violence. However, the center of the circle would remain the same. If we were to place several of the continua on top of one another it would show all forms of violence as a result of oppression and all forms of oppression contributing to all types of violence. Given this framework, we may choose to focus on one type of anti-violence work but understand the interconnectedness of the oppressions. Creating and utilizing frameworks that incorporate our knowledge, philosophy, and experience is one way to help ensure the creation of innovative and relevant programming.

Lydia Guy, BA, is Prevention Services Director for the Washington Coalition of Sexual Assault Programs.

This article has been adapted from L.Guy, (Fall 2006) Re-Visioning the Sexual Violence Continuum, Partners in Social Change, pp. 4-7.

HOW WOULD YOU RESPOND FOR YOUR INSTITUTION?

*Highlights from the Spring 2007
ACHA Preventing Sexual Violence Survey
(297 responses)*

To what extent do you think your institution is effective in addressing the problem of sexual violence?

- 11.8% Very effective
- 61.1% Somewhat effective
- 8.1% Unsure
- 15.5% Somewhat ineffective
- 3.4% Not at all effective

Does your institution have a policy or a set of procedures addressing sexual violence published on your campus website or in printed materials?

- 82.4% Yes
- 4.7% No
- 12.9% Unsure

Does your campus have a sexual assault/violence prevention task force/committee?

- 61.2% Yes
- 26.5% No
- 12.2% Unsure

To what extent do you think your institution is engaged in primary prevention of sexual violence?

- 22.0% Very engaged
- 53.7% Somewhat engaged
- 5.4% Unsure
- 16.9% A little engaged
- 2.0% Not at all engaged

Do your waiting areas, offices, and exam rooms let students know that you are willing to listen and talk about sexual violence? It is suggested that you put up posters and distribute educational materials that lets students know they are in a “safe” place.

Screening for Sexual Violence

Current research demonstrates that the majority of completed and attempted sexual assaults go unreported to law enforcement. However, survivors of sexual violence often seek health/wellness services secondary to an incident but only reveal the experience to an individual if asked at the time of the visit. Therefore, college health professionals have a significant opportunity to open the door to care for sexual assault victims and integrate primary prevention strategies to reduce the incidence of sexual violence.

The following suggestions are primary prevention strategies for use within the college health setting:

- ❖ Integration of screening questions for sexual violence into **all** patient history forms
- ❖ Use written assessment tools to measure vulnerability and risk behaviors for sexual violence including alcohol/drug use

- ❖ Use non-threatening, inclusive language and questions when obtaining patient information
- ❖ Develop patient teaching methodology that addresses vulnerability and risk reduction
- ❖ Develop patient teaching methodology that includes healthy relationships
- ❖ Seek training to heighten awareness of options, rights, and referral resources for campus victims

The topic of sexual violence is a difficult one for discussion. The following are suggested questions that can be used on intake forms or asked in a direct and non-judgmental way:

- ❖ Has someone ever touched you in a sexual manner against your will or without your consent?
- ❖ Have you ever been forced or pressured to have sex?
- ❖ Have you ever recognized you had “unwanted” sex while drunk or using drugs?
- ❖ Within the past year, have you ever felt fearful of your partner because of verbal or physical threats?
- ❖ Do you feel that you have control over your sexual relationships and your partner will respect your wishes if you say no to specific sexual activities?
- ❖ Is your visit today due to an experience you did not want to happen?

The suggestions provided can offer a wealth of information from students and allow college health professionals to evaluate, educate, treat as appropriate, and refer for further services.

Opportunities for Prevention Messages during Campus Health Visits

All student visits should be inclusive of sexual violence screening, but especially during:

- ❖ STI testing
- ❖ Gynecology exams
- ❖ Pregnancy testing
- ❖ Emergency contraception requests
- ❖ Birth control requests
- ❖ Health education visits
- ❖ Mental health referrals/visits
- ❖ Alcohol/other drug related visits
- ❖ Immunizations
- ❖ Sports physicals
- ❖ Triage

SURVEY RESULTS...

Does your student health service integrate questions regarding sexual violence into your general patient history or intake forms?

36.5% Yes

42.9% No

20.6% Unsure

ACHA Spring 2007 Preventing Sexual Violence Survey

Is your campus encouraging an environment that supports in every way the comprehensive and consistent message of prevention of sexual violence? If not, ask what needs to change, and how you can elicit that change. If yes, how can you spread the word to other campuses?

Spread the Word about Preventing Sexual Violence (PSV)

College health professionals have a very powerful and unique opportunity to educate students who come to their offices about how to prevent sexual violence through primary prevention. The goal of this toolkit is to reach as many students as possible about this important topic. However, not all students will come to your office during the school year. Therefore, the following are recommendations for spreading the word through different avenues on campus and in the community.

New Student Orientation

- ❖ New students always receive welcome materials, information, and resources when they start their first year. Take the opportunity to include PSV information in their welcome packs to make sure that every student knows the facts about sexual violence and where to receive additional information and/or support on campus. Consider sending an email to all entering students about the resources on campus.

Residence Hall Programs

- ❖ Reach out to residence hall staff, including resident assistants, to ensure that they are educated and well-informed about PSV and the specific resources on campus and in the local community. Offer to be a guest speaker and/or resource for issues around sexual violence prevention.

Sorority and Fraternity Housing

- ❖ If your campus has a Greek system, meet the Interfraternity and Panhellenic Council leaders. They are the gatekeepers to all Greek students on campus. Offer the toolkit as a resource to be shared among leaders and Greek houses.
- ❖ Sororities and fraternities typically schedule many events for their members during the academic year. Offer to present or facilitate a program around primary prevention of sexual violence. The “10 Ways Young Men Can Prevent Sexual Violence” on page 14 is particularly relevant to fraternities. Enlist Greeks in peer education and/or invite individual houses to play a significant part of primary prevention on campus.

Organizations, Clubs, and Teams on Campus

- ❖ Reaching out to clubs, organizations, and teams on campus is a unique way to reach high-risk target groups of students.

Providing information about PSV to athletic teams (including coaches and athletic trainers), Greeks, women’s center or interest groups, religious groups, LGBT students, and cultural diversity groups will spread the word about the importance of primary prevention. These opportunities are also unique ways to recruit peer educators and leaders in bystander intervention programs.

Academic Departments

- ❖ Contact faculty who teach courses related to sexuality and relationships. They may teach courses in women’s studies, psychology, sociology, health and wellness, medicine, social work, counseling, etc. This toolkit could be used in class projects, research, and for class discussions. Offer to guest lecture in classes when faculty need to cancel class. Ask your institution’s faculty senate/union to send an email to all faculty about the availability of the toolkit and presentations on SVP.

Campus Radio Stations

- ❖ If your campus has a radio and/or closed circuit TV station, an excellent way to share news about PSV on campus with students is through public service announcements (PSAs). Stations are required to air a certain number of PSAs each week. Create and send a PSA to your campus station and request that it be aired — it likely will be heard/seen many times over the course of a year. An interview with a Sexual Assault Response Team (SART) member or student advocate would provide a strong message of prevention.

Reaching Parents

- ❖ Share prevention of sexual violence resources on campus and in this toolkit with parents. This communication can include emails, direct mail, or through Alumni offices.

Community Groups

- ❖ Community groups are a well-known resource for young people seeking information or services regarding sexual health and sexual violence. We suggest contacting your county government offices, health departments, community clinics, local police departments, and other relevant groups to let them know the resources on campus for students in need. Share this toolkit with any partner community organization, coalition, or collaborative partner.

10 Ways Young Men Can Prevent Sexual Violence

Most guys don't commit rape, but every guy can play a vital role in ending sexual and dating violence. Read the list below and learn what you and your friends can do every day. It can be something small or something large. Whatever you do, you're making a difference. Don't stand on the sidelines.

Be Bold, Be Strong, Take Action!

1 Define Your Own Manhood

Consider whether messages about manhood like "don't take no for an answer" play a role in creating unhealthy and unsafe relationships. Choose what kind of man you want to be. Be a positive role model.

2 Talk It Over

Better communication in sexual situations — listening to the other person, stating desires clearly, and asking when a situation is unclear — will make relationships safer and healthier. Create a space to enthusiastically say yes.

3 Understand the Ability to Consent

Drugs and alcohol can affect people's ability to decide whether they want to be sexual with someone. If a person is "really out of it" and can't give consent, wait until you both are ready to enthusiastically say yes.

4 Get a Woman's Perspective

Ask women how the fear of rape affects their daily lives and whether they know someone who has been raped. Listen and learn from them about the impact of rape and how to stop it.

5 Ask Guys

Ask men how it would feel to be seen as a potential rapist and how they would feel if a woman or girl in their life was sexually assaulted. Learn about the ways sexual violence touches the lives of men.

6 Be Aware of Pop Culture's Messages

We are surrounded daily by TV shows, music, magazines, video games, and movies that communicate messages about masculinity and relationships. Don't let images in popular culture dictate your behavior.

7 Choose Words Carefully

When you use words to put women down, you support the belief that they are less than fully human. It is easier to ignore women's well-being when they are seen as inferior. Choose language that respects women.

8 Speak Out

You probably will never see a rape in progress, but you will hear attitudes and see behaviors that degrade women and promote a culture of violence. When your friend tells a joke about rape, say you don't find it funny. Use your voice.

9 Get Involved

Join a student group working to prevent violence against women. Or, if there isn't a student group, start your own. Men's anti-rape groups are becoming more and more common on college campuses. Make a difference.

10 Show Your Strength

Don't ever have sex with anyone against their will. Make a pledge to be a man whose strength is used for respect, not for hurting.

Before you have sex, ask yourself...

Have I expressed what I want? Do I know what my partner wants? Am I certain that consent has been given? Is my potential partner sober enough to decide whether or not to have sex? Am I sober enough to know that I've correctly gauged consent?

The Importance of Consent

Consent for any sexual activity is the centerpiece for preventing sexual coercion and unwanted sexual behavior. Consent can and should be incorporated as an essential and fun part of sexual communication. Likewise, it is a vital component of mutual pleasure and healthy sexuality.

A simple Internet search will produce many campus "Consent is Sexy" campaigns. ACHA would like to thank the University of Georgia University Health Center's Health Promotion Department (www.uhs.uga.edu/consent/index.html) and Columbia University Health Service's Sexual Violence Prevention and Response Program (www.health.columbia.edu/docs/services/svprp/consent.html) for their permission to reprint many of their materials used on this page.

We encourage you to share these resources with peer educators, student leaders, etc., and encourage them to be creative with "Consent is Sexy." Remember these materials can be downloaded at www.acha.org/SexualViolence and then tailored for your campus environment.

What is consent?

- ❖ Consent is a voluntary, sober, enthusiastic, creative, wanted, informed, mutual, honest, and verbal agreement.
- ❖ Consent is an active agreement; Consent cannot be coerced.
- ❖ Consent is a process, which must be asked for every step of the way; if you want to move to the next level of sexual intimacy, just ask.

Gauging Consent

Red: Signs You Should Stop

You are too intoxicated to gauge or give consent.
Your partner is asleep or passed out.
You hope you partner will say nothing and go with the flow.
You intend to have sex by any means necessary.

Yellow: Signs You Should Pause and Talk

You are not sure what the other person wants.
You feel like you are getting mixed signals.
You have not talked about what you want to do.
You assume that you will do the same thing as before.
Your partner stops or is not responsive.

Green: Keep Communicating

Partners come to a mutual decision about how far to go.
Partners clearly express their comfort with the situation.
You feel comfortable and safe stopping at any time.
Partners are excited!

- ❖ Consent is never implied and cannot be assumed, even in the context of a relationship. Just because you are in a relationship does not mean that you have permission to have sex with your partner.
- ❖ A person who is intoxicated cannot legally give consent. If you're too drunk to make decisions and communicate with your partner, you're too drunk to consent.
- ❖ The absence of a "no" doesn't mean "yes."
- ❖ Both people should be involved in the decision to have sex.
- ❖ It is not sexy to have sex without consent!

Why is consent important?

- ❖ Communication, respect, and honesty make sex and relationships better.
- ❖ Asking for and obtaining consent shows that you have respect for both yourself and your partner.
- ❖ Positive views on sex and sexuality are empowering.
- ❖ It questions traditional views about gender and sexuality.
- ❖ It eliminates the entitlement that one partner feels over the other. Neither your body nor your sexuality belongs to someone else.
- ❖ It is normal and healthy for women to expect to be included in the consent process.

ASKING FOR CONSENT

Show your partner that you respect her/him enough to ask about her/his sexual needs and desires. If you are not accustomed to communicating with your partner about sex and sexual activity, the first few times may feel awkward. But, practice makes perfect. Be creative and spontaneous. Don't give up. The more times you have these conversations with your partner, the more comfortable you will become communicating about sex and sexual activity. Your partner may also find the situation awkward at first, but over time you will both be more secure in yourselves and your relationship.

When? Before you act. It is the responsibility of the person initiating a sex act to obtain clear consent. Whenever you are unsure if consent has been given, ask. Check-in throughout. Giving consent ahead of time does not waive a person's right to change their mind or say no later.

How? Consent is not just about getting a yes or no answer, but about understanding what a partner is feeling. Ask open-ended questions. Listen to and respect your partner's response, whether you hear yes or no: "I'd really like to... how does that sound?" "How does this feel?" "What would you like to do?"

Preventing Sexual Violence through Empowering Campus Bystanders

By Joetta L. Carr, PhD

A promising approach to preventing interpersonal violence is to teach and encourage bystanders to intervene with peers and support potential or actual victims. A “bystander” is a friend, classmate, teammate, coworker, teacher, family member, or stranger who is aware of or observes situations and interactions that could lead to sexual harassment, intimidation, coercion, or assault. The goals of bystander intervention programs are to increase awareness and understanding of the problem, increase feelings of responsibility to solve this problem, increase commitment to act, and to empower people to act both individually and collectively (McGann, 2005). By fostering a sense of caring and community, campus cultures can be transformed and become safer.

Instead of focusing on young men as perpetrators or potential perpetrators, this model views men as allies who have critical and unique roles in sexual violence prevention. By reducing defensiveness, messages can be heard and collaboration cultivated.

“Men have powerful influences on male peers and can learn how to use their persuasive abilities in healthy ways” (Kilmartin, 2001, p. 6). “When men understand that the bystander role is not neutral, that hypermasculinity and sexism are toxic, and that they have an important influence on their peers, they can begin to accept responsibility for their behavior within the social group” (p. 45).

Instead of focusing on young women as victims or potential targets, this approach teaches young women how to safely intervene and interrupt abusive and potentially risky scenarios. In fact, everyone in the campus community has a role to play, including professors, administrators, healthcare professionals, student leaders, graduate assistants, clerical staff, etc.

Student behavior is greatly determined by prevailing cultural and social norms governing sexual attitudes and behaviors in society. It is important to understand college sexual violence within the context of social relations. Contrary to the myth of the stranger rape, friends and acquaintances commit between 80 and 90% of the sexual assaults against women on college campuses. Research findings suggest that only a minority of male students on campus commit the vast majority of sexual violence on campus, are undetected, and are repeat offenders (Lisak & Miller, 2002). A campus culture that accepts and tolerates less severe sexual misbehavior by many more students contributes to sexual aggression at all levels.

We have all observed inappropriate sexual encounters that alarm us, make us uncomfortable, or cause embarrassment or humiliation. These behaviors may occur in class, in corridors, at sports events, parties, at fraternity or sorority houses, at the health center, student union, school events, and bars. As bystanders to inappropriate sexual behavior, we not only have opportunities to intervene, we have a shared responsibility to prevent harm, foster a sense of community, and create a culture of caring at our institutions.

This approach draws from ally development programs where campus men are engaged as social justice allies to end violence against women (Fabiano, Perkins, Berkowitz, Linkenbach, & Stark, 2003).

Research by Berkowitz (2002) suggests that college males underestimate their peers’ discomfort with sexist behavior. Correcting this misperception may result in men’s greater willingness to challenge inappropriate peer behavior and speak out against rape-supportive attitudes and behavior. Interpreting sexist behavior as a problem is a step toward feeling responsible for intervening and possessing the necessary skills to act.

Banyard, Moynihan, and Plante (2007) have developed a bystander intervention program at the University of New Hampshire using a community of responsibility model. This approach goes beyond the individual level (with a focus only on men) to community levels of change. Goals of this program include:

- ❖ Create new situational norms for intervention
- ❖ Provide role models of helping behavior
- ❖ Build a repertoire of specific skills for bystanders
- ❖ Foster bystander’s sense of responsibility for intervening
- ❖ Develop sense of competence and identify situations for intervening

BYSTANDER INTERVENTION KEY COMPONENTS

- Role modeling is crucial
- Entire campus community has a stake (see “Key Partnerships in Sexual Violence Prevention” on page 18)
- Support bystander intervention on campus
- Teach skills to intervene
- Obtain commitment to intervene
- Teach how to interrupt a possible sexual assault
- Reduce defensiveness to the message

SURVEY RESULTS...

How familiar are you with Bystander Intervention techniques to address prevention of sexual violence?

- 12.2% Very familiar
- 25.7% Somewhat familiar
- 11.1% Unsure
- 12.8% Less familiar
- 38.2% Not familiar at all

ACHA Spring 2007 Preventing Sexual Violence Survey

Plante, Banyard, Moynihan, and Eckstein (2007) have developed "Bringing in the Bystander — Establishing a Community of Responsibility" workshops and a facilitator's guide regarding sexual violence prevention. There are three components to this training: 1) Educational, 2) Motivational, and 3) Skill Building. Using active learning approaches and peer educators, this program targets attitudes, beliefs, and behaviors designed to increase bystander efficacy and willingness to intervene.

Katz (n.d.) has developed a prosocial bystander model to prevent violence called "Mentors in Violence Prevention (MVP)." The MVP model has been utilized in numerous educational settings and the playbooks and trainer's guides are customized for diverse student bodies. The training consists of role-plays in which students identify and practice numerous options in response to incidents of harassment, abuse, and violence before, during, and after the event. It challenges students against passivity, silence, and complicity in the face of abusive behaviors. The MVP workshops discuss provocative questions such as:

- ❖ How do cultural definitions of manhood contribute to sexual violence and sexist behaviors?
- ❖ How do cultural definitions of womanhood contribute to women's victimization or to their resistance?
- ❖ Why do many young men remain silent when their peers behave badly and how is the silence of peers understood by abusers?
- ❖ What message is conveyed when the abuser's friends don't confront him?
- ❖ Why do some heterosexually identified men harass and beat up gay men?

Men Can Stop Rape's "Men of Strength" program includes a college campus affiliate component based on the bystander approach. The goal is to create a national network of support on college campuses. "My Strength Is Not for Hurting" posters illustrate bystander media projects and are used by many campuses (P. McCann, personal communication, October 2007).

Preliminary research to evaluate the effectiveness of the "Men of Strength" program by Men Can Stop Rape, the University of New Hampshire program, and the Mentors in Violence Prevention program indicates that students and others can increase their awareness of sexual violence, learn how to recognize and identify inappropriate sexual behaviors, develop skills to intervene safely, and make a commitment to intervene.

Workshops and training sessions for all of the programs described above are usually conducted in single gender groups with male and female trainers who are preferably peers of the group. For example, a football team would be trained by a former or current athlete or coach who understands sports culture, the pressures on young athletes, peer support for sexual conquests, etc. One-session workshops are less ideal than multiple sessions where bystander interventions can be practiced and discussed and troubleshooting can occur.

The formats focus on interactive, lively discussions using scenarios that are based on real-life experiences. Students may enjoy developing scenarios that are typical at their school. Examples include observing a student being targeted through the use of alcohol or date-rape drugs, conversations where women are denigrated sexually, observing a passed out student being carried upstairs to a bedroom, or seeing sexually explicit photos of classmates on student Internet sites.

A number of institutions have augmented bystander training programs with media campaigns to change campus norms and achieve a more comprehensive prevention package. Media campaigns focus on community-wide prevention and are designed to educate and elicit behavior change. Potter, Stapleton, and Moynihan (in press) and Potter, Moynihan, Stapleton, and Banyard (in press) have developed and evaluated a poster campaign designed to empower bystanders with the tag line "Know Your Power. Step In, Speak Up. You Can Make a Difference."

The University of Kentucky violence prevention model targets "popular" students across social groups for bystander training (D. Edwards, personal communication, 2007). Using social diffusion theory, this model identifies popular opinion leaders who may be more effective in shifting the campus norms from passive bystanders to active intervention. To create a sense of immediacy and personal ownership, they conduct empathy exercises using violence data specific to their campus, emotionally evocative segments from monologues created by students based on their personal experiences with sexual violence, and sharing in small groups. They target student leaders from each year for training and 15% of first-year students to create a "critical mass" with enough momentum to create a tipping point to shift campus norms.

KEY PARTNERSHIPS IN SEXUAL VIOLENCE PREVENTION

Campus Administrators

1. Create a Presidential Task Force on Campus Violence.
2. Establish an institutional Position Statement on Preventing Sexual Violence.
3. Acknowledge institutional commitment to reduce sexual violence through press releases to campus community, community-at-large, alumni, and parents.
4. Mandate sexual violence prevention programming for all students.
5. Mandate the establishment of a coordinated, comprehensive, victim-centered response system for sexual violence incidents.
6. Revise Student's Code of Conduct and faculty/employee policies to demonstrate intolerance to sexual violence at any level.
7. Maintain compliance with federal and state regulations.
8. Support funding for prevention initiatives and bystander intervention programs.
9. Demonstrate mentorship to all campus constituencies for effective collaboration.
10. Participate in campus activities and programming to prevent sexual violence.

Academic Affairs

1. Educate students on primary prevention of all levels of sexual violence through curriculum infusion.
2. Seek classroom opportunities to participate in campus programming and prevention activities.
3. Participate in training to understand how to assist victims of sexual violence.
4. Serve as mentors and role models to encourage a culture of caring.

Student Affairs

1. Develop programming for all campus groups such as incoming students, transfer students, international students, athletic teams, and Greek organizations.
2. Serve as mentors and role models to students to encourage behavioral change and support a culture of civility and respect.
3. Participate in training to understand how to assist victims of sexual violence.

Community

1. Encourage/invite community groups to participate in campus trainings to understand the culture and dynamics of campus life.
2. Develop strategies for collaboration in sexual violence prevention initiatives.
3. Create partnerships for a coordinated, comprehensive, victim-centered response to sexual violence incidents.

PREVENTING SEXUAL VIOLENCE THROUGH EMPOWERING CAMPUS BYSTANDERS

Bystander interventions include a full range of options and levels of action, from speaking to a resident assistant about an encounter in a residence hall to calling the police. Interventions can occur with friends, acquaintances, and strangers, such as bartenders, designated drivers, professors, hotline staff, counselors, roommates, and others. Some interventions are best done by a group of friends and others are more effective in private, side conversations. Staying safe is always emphasized and balanced with keeping others safe. When people feel seriously threatened, authorities such as campus police should be called.

There are many reasons people do not intervene. They may not see the problem, do not know what to do, choose to mind their business, or feel out of their comfort zone. People must overcome many fears such as getting hurt, losing a friend, creating conflict, breaking a code of silence, embarrassment, or making someone angry. These obstacles to intervening should be discussed openly and pros and cons of intervening in various situations should be flushed out by the trainers. The moral imperative of intervening can be emphasized, as well as the benefits to the entire community. Students cannot learn well in an atmosphere of sexual intimidation.

Therefore, the entire campus community must grapple with the questions — how can we change the campus culture that gives rise to, promotes, creates the conditions for, condones, or ignores sexual violence on campus? How can we create a culture of caring where we do not allow humiliating, insulting, and harmful sexual attitudes and behaviors to flourish?

Joetta L. Carr, PhD is a professor at Western Michigan University.

References

- Banyard, V.L., Moynihan, M.M., & Plante, E.G. (2007). Sexual violence prevention through bystander education: An experimental evaluation. *Journal of Community Psychology, 35*(4), 463-481.
- Berkowitz, A.D. (2002). Fostering men's responsibility for preventing sexual assault. In P.A. Schewe (Ed.), *Preventing violence in relationships: Interventions across the lifespan* (pp. 163-196). Washington, DC: APA.
- Fabiano, P.M., Perkins, H.W., Berkowitz, A.D., Linkenbach, J., & Stark, C. (2003). Engaging men as social justice allies in ending violence against women: Evidence for a social norms approach. *Journal of American College Health, 5*(3), 105-112.
- Katz, J. (n.d.). *Mentors in Violence Prevention (MVP): Gender violence prevention education and training*. Retrieved 2007 from <http://www.jacksonkatz.com/mvp.html>.
- Kilmartin, C. (2001). *Sexual assault in context: Teaching college men about gender*. Holmes Beach, FL: Learning Publications.
- Lisak, D. & Miller, P.M. (2002). Repeat rape and multiple offending among undetected rapists. *Violence and Victims, 17*, 73-84.
- McGann, P. (2005). *The effectiveness of Men of Strength Clubs*. Presentation at the National Sexual Assault Conference, Pittsburg, PA. [www.mencanstoprape.org]
- Plante, E.G., Banyard, V.L., Moynihan, M.M., & Eckstein, R.P. (2007). Facilitator's Guide: Bringing in the bystander. A prevention workshop for establishing a community of responsibility. [Contact Victoria Banyard (Victoria.Banyard@unh.edu) or Mary Moynihan (marym@unh.edu) for a copy of the Facilitator's Guide]
- Potter, S.J., Moynihan, M.M., Stapleton, J.G., & Banyard, V.L. (in press). Empowering bystanders to prevent campus violence against women: A preliminary evaluation of a poster campaign. *Violence Against Women*.
- Potter, S.J., Stapleton, J.G., & Moynihan, M.M. (in press). Designing, implementing, and evaluating a media campaign illustrating the bystander role. *Journal of Prevention and Intervention in the Community*.

Alcohol and Sexual Violence

Approximately 50-70% of all sexual assaults involve alcohol. The relationship between alcohol and sexual violence is multifaceted and involves different pathways. Alcohol can lower inhibitions, impair judgment and reaction time, diminish recognition of vulnerability, reduce one's ability to obtain or give consent, and decrease the capacity to resist unwanted sexual activities (Abbey, 2002; Carr & VanDeusen, 2004). Alcohol-fueled sexual aggression is anti-social behavior that harms thousands of students each year.

According to the NIAAA College Task Force Report (April 2002), preconceived expectations about the effect of alcohol may be as important as the pharmacological effect of the drug. The influence of alcohol on behavior and judgment may increase misperceptions of sexual interest and lead to perpetrators ignoring refusal cues or victims disregarding risk cues. Alcohol is often used to blame victims, as a justification by offenders, and a frequent weapon in sexual violence. Thus, unwanted, pressured, and/or "regretted" sexual activities become a common occurrence among college students.

A national survey indicated that approximately 44% of college students reported binge drinking (five or more drinks in a row for men and four or more in a row for women) in the last two weeks (Wechsler, et al., 2002). The Spring 2007 ACHA-NCHA data showed that approximately 36% of female college students and 35% of male college students had an estimated Blood Alcohol Concentration (BAC) greater than or equal to .08 the last time they "partied" or socialized (ACHA, 2007).

College drinking frequently occurs in sexually charged settings such as bars, nightclubs, and parties where sexual

1.8% of female college students and 0.9% of male college students who drank alcohol reported the consequence of having someone use force or threat of force to have sex with them in the last school year (ACHA, 2008). The Spring 2007 ACHA-NCHA also showed that 12.9% of female college students and 6.2% of male college students reported some form of sexually aggressive experience within the last school year. These experiences included verbal threats for sex against their will, sexual touching against their will, and attempted and completed sexual penetration against their will (ACHA unpublished data, 2008).

SURVEY RESULTS...

The use of alcohol by students is the primary reason for the majority of sexual assaults on campus.

- 20.2% Strongly agree
- 48.8% Agree
- 11.1% Unsure
- 15.2% Disagree
- 4.7% Strongly disagree

ACHA Spring 2007 Preventing Sexual Violence Survey

activity may be desired or expected and students may be pressured to drink. Female college students in particular are often targeted and incorrectly believe that they are safe among friends. Women are consistently rated as more culpable for acquaintance rape when they have been drinking. Humphrey and White (2000) reported that in their first year of college, 31% of college women experienced some type of sexual assault and 6.4% experienced completed rape. Further, Mohler-Kuo, Dowdall, Koss, and Wechsler (2003) reported that 72% of female students who experienced rape were so intoxicated they were unable to consent.

In order to change individual campus norms, it is necessary to understand the context and reasons (the how, when, and why) that students use alcohol and the connection to sexual violence. By obtaining data on alcohol use and sexual violence on individual campuses and consequently identifying high-risk groups, institutions can focus efforts to lessen high-risk alcohol use as well as incidents of sexual violence. Campuses might also consider conducting focus groups of diverse student populations and high-risk groups (e.g., athletes, Greeks, etc.) to determine the reasons and decisions to drink.

Ultimately, collecting campus data can lead to a collaboration between students, faculty, staff, and administrators to develop strategies to promote positive change appropriate to an individual campus — change that includes alcohol-free recreation, athletic events, social activities, and campus celebrations, as well as daily student life in residence halls and other campus housing.

The Task Force of the National Advisory Council on Alcohol Abuse and Alcoholism (April 2002) offers a clear structure for change around alcohol use on campuses including a series of approximately 20 recommendations (see www.collegedrinkingprevention.gov/StatsSummaries).

Primary prevention of sexual violence holds powerful implications for campuses. Positive campus experiences, student safety, student retention, and student learning are high priorities for all institutions. As campuses shift the paradigm to primary prevention of sexual violence, the following actions are suggested:

- ❖ Recognize that students provide the data and the solution to changing a campus culture.

BRIEF SCREENING FOR HIGH-RISK ALCOHOL USE

College health professionals have limited time with students. Research shows, however, that a brief intervention can decrease alcohol use significantly among people who drink in high-risk fashion.

A single question (or more, if time allows) can be included on a student history/intake form or asked at each health/wellness visit. In just a few minutes, one can ask the question, reflect understanding, and use the teachable moment to make a referral, if appropriate, to health education, counseling, and/or community resources.

A single alcohol intervention question might be:

How many times in the past year have you had five or more drinks on one occasion (for men) or four or more drinks on one occasion (for women)?

One or more heavy drinking days indicates high-risk alcohol use. Even one episode of high-risk drinking can have negative physical, academic, social, and/or emotional consequences.

If time allows, ask about a pattern of alcohol use. Questions might include:

❖ **How often do you drink alcohol?**

❖ **How many drinks do you consume when you drink?**

❖ **How often do you drink five or more drinks on one occasion?**

As reflected in the national data, increased quantity and frequency of alcohol consumption increases the risk for negative consequences. Early intervention can reduce risk and help students make more healthy decisions around alcohol use and thus academic success.

For more information and resources about brief alcohol intervention, visit: http://pubs.niaaa.nih.gov/publications/Practitioner/CliniciansGuide2005/clinicians_guide.htm

- ❖ Examine and revise campus policies regarding alcohol and violence.
- ❖ Establish campus-community coalitions to support campus policies regarding alcohol use and the control of alcohol access by students.
- ❖ Enlist support and involvement of large social groups such as Greeks and athletes to take a stand against high-risk drinking and/or forced sex (Abbey, 2002).
- ❖ Encourage collaboration between those on campus who are responsible for alcohol programming and those who are responsible for sexual violence prevention (Abbey, 2002).
- ❖ Employ multiple modalities in education programming on alcohol use and negative consequences of poor decisions.
- ❖ Include questions about sexual violence and alcohol use in all health, counseling, and judicial affairs visits.

College health professionals can become catalysts and powerful agents of change on the issue of campus sexual violence prevention and alcohol misuse. Further, college health professionals can lessen alcohol-related violence on campus through continuous, timely, accurate, comprehensive, and consistent primary prevention efforts.

References

- Abbey, A. (2002). Alcohol-related sexual assault: A common problem among college students. *Journal of Studies on Alcohol*, Supplement No. 14, 118-128.
- American College Health Association (ACHA). (2007). National college health assessment: Reference group executive summary spring 2007. Baltimore, MD: Author.
- American College Health Association (ACHA). (2008). American College Health Association-National College Health Assessment spring 2007 reference group data report (abridged). *Journal of American College Health*, 56(5), 469-479.
- American College Health Association (ACHA). (2008). American College Health Association-National College Health Assessment spring 2007. Unpublished raw data.
- Carr, J.L., & VanDeusen, K.M. (2004). Risk factors for male sexual aggression on college campuses. *Journal of Family Violence*, 19(5), 279-289.
- Humphrey, J.A., & White, J.W. (2000). Women's vulnerability to sexual assault from adolescence to young adulthood. *Journal of Adolescent Health*, 27, 419-424.
- Mohler-Kuo M., Dowdall, G.W., Koss, M.P., & Wechsler, H. (2004, January). Correlates of rape while intoxicated in a national sample of college women. *Journal of Studies on Alcohol*, 65, 37-45.
- National Institute on Alcohol Abuse and Alcoholism (NIAAA) Task Force on College Drinking. (April 2002). *A Call to Action: Changing the Culture of Drinking at U.S. Colleges*. (NIH publication No. 02-5010). Author.
- Wechsler, H., Lee, J.E., Kuo, M., Seibring, M., Nelson, T.F., & Lee, H. (2002). Trends in college binge drinking during a period of increased prevention efforts. Findings of 4 Harvard School of Public Health College Alcohol Study Surveys: 1993-2001. *Journal of American College Health*, 50(5), 203-217.

Prevention of Sexual Violence on Campus

An Assessment Tool

ACHA’s “Position Statement on Preventing Sexual Violence on College and University Campuses” recommends the following 15 actions be taken to address policy, prevention, and intervention as it pertains to sexual violence. College health professionals, who are in a powerful position to prevent campus sexual violence, are encouraged to use the assessment tool below periodically to note your institution’s level of completion of each action. Once the assessment is completed, the information should be shared with administrators, faculty, staff, and students. This simple tool can also guide your campus efforts at primary prevention of sexual violence.

	Action yet to be addressed				Completed
	1	2	3	4	5
1. Develop a policy statement and directive from the president/chancellor of the institution that demonstrates recognition of sexual violence as a problem, a commitment to reduce its occurrence, and action steps for the campus community.					
2. Develop a multidisciplinary task force on campus to address sexual violence prevention and response services that includes high-level campus administration, academic leaders, student leaders, and community partners.					
3. Create policies that reflect an expectation of civility, honor, respect, and nonviolence for all members of the community and encourage behaviors that build a sense of community.					
4. Revise, enforce, and widely distribute disciplinary regulations in the student code that demonstrate an intolerance of all forms of sexual violence and implement sanctions for violations by faculty, staff, and students.					
5. Educate disciplinary boards on non-stranger assaults, perpetrator patterns, and possible victim responses and patterns.					
6. Provide comprehensive training on all aspects of sexual violence for campus administrators; campus law enforcement; health and counseling services staff; faculty; staff; and student leaders that includes the dynamics of sexual violence, access to care, victim response, and federal/state statutes.					
7. Develop a coordinated, seamless, victim-centered response-service between campus and community resources that offers the options of:					
❖ Anonymous reporting					
❖ Law enforcement involvement					

PREVENTION OF SEXUAL VIOLENCE ON CAMPUS: AN ASSESSMENT TOOL

	Action yet to be addressed				Completed
	1	2	3	4	5
❖ Judicial/disciplinary board actions	1	2	3	4	5
❖ Medical care/forensic examination	1	2	3	4	5
❖ Emergency contraception	1	2	3	4	5
❖ Academic/housing accommodations	1	2	3	4	5
❖ Follow-up counseling, support, and advocacy	1	2	3	4	5
8. Integrate screening for sexual violence into patient history protocols.	1	2	3	4	5
9. Adhere to federal, state, and local statutes and reporting requirements.	1	2	3	4	5
10. Integrate sexual violence prevention education into curricular and non-curricular activities.	1	2	3	4	5
11. Offer residence hall and extra-curricular activities that are alcohol free.	1	2	3	4	5
12. Develop educational/outreach programming that:					
❖ Recognizes that sexual violence is a learned behavior	1	2	3	4	5
❖ Teaches bystander intervention techniques	1	2	3	4	5
❖ Addresses the role of consent in sexual relationships	1	2	3	4	5
❖ Encourages the involvement of men	1	2	3	4	5
❖ Addresses alcohol and other drugs issues and the connection with sexual violence	1	2	3	4	5
❖ Provides concepts that encourage healthy, consensual sexual relationships	1	2	3	4	5
❖ Addresses non-stranger sexual violence and dispels traditional beliefs	1	2	3	4	5
❖ Encourages positive role modeling and mentoring for men and women	1	2	3	4	5
13. Create and codify amnesty policies for underage drinking for victims who report sexual assault.	1	2	3	4	5
14. Invest men in the prevention of sexual violence, including those actions that dehumanize and objectify women.	1	2	3	4	5
15. Publish and announce the availability of protocols on campus websites for all campus members to access resources, referrals, and helping strategies for victims of sexual violence.	1	2	3	4	5

Resources

Organizations

The following organizations provide information and resources on sexual violence prevention issues and/or innovative programs. The list is provided as a starting point and is not intended to be an exhaustive listing. Please note that a listing here is for the reader's convenience and does not represent an endorsement by ACHA. URLs are also subject to change.

American Academy of Pediatrics

www.aap.org

California Coalition Against Sexual Assault

www.calcasa.org
www.mystrength.org

Dating Violence Resource Center

www.ncvc.org

Higher Education Center for Alcohol and Other Drug Prevention

www.higheredcenter.org

International Association of Forensic Nurses

www.iafn.org

Men Can Stop Rape

www.mencanstoprape.org

Men Stopping Violence

www.menstoppingviolence.org

Mentors in Violence Prevention

www.sportinsociety.org/mvp

National Alliance to End Sexual Violence

www.naesv.org

National Crime Prevention Council

www.ncpc.org

National Online Resource Center on Violence Against Women

www.vawnet.org

National Sexual Violence Resource Center

www.nsvrc.org

National Violence Against Women Prevention Research Center

www.musc.edu/vawprevention

**Office of Justice Programs
National Institute of Justice**

www.ojp.usdoj.gov/nij

Prevention Institute

www.preventioninstitute.org

Rape, Abuse, and Incest National Network

www.rainn.org

Security on Campus, Inc.

www.securityoncampus.org

Sexual Assault Resource Service

www.sane-sart.com

U.S. Centers for Disease Control and Prevention. National Center for Injury Prevention and Control. Division of Violence Prevention

www.cdc.gov/injury

Violence Against Women on Campuses. (U.S. Department of Justice)

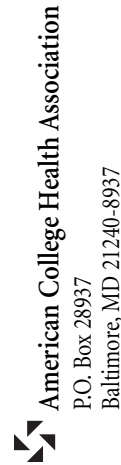
www.ovw.usdoj.gov

Who should be interested in this toolkit?

- ❖ President/Chancellor
- ❖ Provost
- ❖ Vice President for Student Affairs
- ❖ Faculty
- ❖ Dean of Students
- ❖ Student Affairs/Life staff
- ❖ Student Health Center staff
- ❖ Health Promotion/Wellness staff
- ❖ Student Counseling Center staff
- ❖ Peer Educators
- ❖ Students

What is the focus of this toolkit?

Primary prevention of sexual violence
— approaches that take place *before*
sexual violence has occurred to prevent
initial perpetration or victimization



American College Health Association
P.O. Box 28937
Baltimore, MD 21240-8937

NONPROFIT ORGANIZATION
U.S. POSTAGE PAID
LINTHICUM HEIGHTS, MD
PERMIT NO. 6

**Share this ACHA Toolkit widely across your campus!
(download at www.acha.org/SexualViolence)**