

BYSTANDER SEXUAL VIOLENCE PREVENTION PROGRAM:
IMPLEMENTATION AND EVALUATION WITH
HIGH-RISK UNIVERSITY MALES

by

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Presented to the Faculty of the Graduate School of
The University of Texas at Arlington in Partial Fulfillment
of the Requirements
for the Degree of

DOCTOR OF PHILOSOPHY

THE UNIVERSITY OF TEXAS AT ARLINGTON

May 2013

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To my son, Jude, and my soon-to-be son, Luca:
Be The Change
and
To all those who work to end
violence against women

Acknowledgements

I firmly believe that no one who achieves success does so without the help of others, so I wish to acknowledge, with gratitude, all those that have helped me accomplish this endeavor.

First and foremost, I would like to thank my gracious mentor and chairperson, Dr. Beverly Black. She provided guidance, support, constructive feedback, and a listening ear throughout this process. She also gave me the freedom to make decisions, even when I thought I wasn't ready for that freedom. Dr. Black was always readily available throughout the process to assist me, no matter how busy she was. She provided me with an exceptional role model of what I strive to be as an academic and as a feminist. She continues to offer guidance and support. I will always value this relationship and strive to be as good a mentor to future students as she was to me.

I would also like to thank the other members of my dissertation committee – Dr. Richard Hoefer, Dr. Fran Danis, Dr. Norman Cobb, and Dr. Dana Dunn. They were all accessible throughout the process, provided assistance, guidance, and support whenever needed, and offered many helpful criticisms and suggestions.

I would also like to express my appreciation to the University of Texas at Arlington (UTA) for supporting this project. I want to especially thank the assistant director of the UTA Relationship Violence and Sexual Assault Prevention program (RVSP), Charity Stutzman, the director of Fraternity and Sorority Life at UTA, Seth Ressler, and the assistant director of Fraternity and Sorority Life at UTA, Kelli Vincent, for their hard work and support in helping this project come to fruition. I also want to thank

the RVSP peer educators who presented the program to the fraternity members. I know that was a challenging presentation and I am so grateful that you all took on that challenge.

I would also like to thank the many friends (who are too many to name) that have supported and encouraged me throughout this process. A special thanks to: Jeanette Vollintine, for caring for Jude as if he were your own grandson. By caring for him in that manner, you gave me the peace of mind to be able to focus on my work and not worry about him; Dr. Diane Mitschke, for always being available to listen and provide guidance and support throughout this process.

Finally, the completion of this dissertation would not have been possible without the support of my family: To my parents, Elie and Fadia Elias, thank you for your support and encouragement throughout this process and for caring for Jude. Knowing he was in your capable care allowed me to fully dedicate myself to completing this dissertation; to my son, Jude, thank you for being such a good baby and for giving up time with me; to my soon-to-be son, Luca, thank you for giving me a smooth and uneventful pregnancy so I could focus on completing this dissertation; and especially to my best friend and partner, Michael, thank you for always being available to listen, offer suggestions and ideas, for supporting and encouraging me, for believing in me, for all the sacrifices, and for all the love you have shown me throughout this process and our lives, as a whole.

April 1, 2013

Abstract

BYSTANDER SEXUAL VIOLENCE PREVENTION PROGRAM:
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The University of Texas at Arlington, 2013

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This research reports the findings of an evaluation of a theoretically-based, peer-facilitated, bystander sexual violence prevention program to determine its effectiveness at changing attitudes and behaviors related to sexual violence with university males who are at low- and high-risk of using sexually coercive behavior. Bystander interventions focus on men and women as bystanders to change social norms in a peer culture that supports abusive behaviors. Few studies have examined the effectiveness of these interventions with high-risk populations, which is the focus of this study.

A bystander sexual violence prevention program was presented to 142 fraternity members in 2012. A quasi-experimental design utilizing pre-, post-, and follow-up surveys was used to compare the effectiveness of this prevention program with university

males who are at low- and high-risk of using sexually coercive behavior in intervention and comparison groups.

Participants' risk status was measured prior to the intervention using the Modified-Sexual Experiences Survey. The survey instruments included measures to evaluate changes in attitudes (rape myth acceptance and bystander attitudes) and behaviors (sexually coercive behaviors, sexually coercive behavioral intentions, and bystander behaviors).

Data analyses included Repeated-Measures Analysis of Covariances and hierarchical multiple regressions. The findings suggest that a bystander sexual violence prevention program has a positive impact on attitudes and behaviors related to sexual violence among fraternity members, however, the program had less impact on high-risk males. Since both risk status and ethnicity predicted outcomes related to sexual violence, it is important to focus on determining the effect of programs on both high- and low-risk males and developing culturally relevant bystander interventions. The results of this study will expand our ability to design programs that can have an impact on reducing sexual violence on campus by ensuring the programs are having the desired impact on the target audience.

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Chapter 1

Sexual Violence on Campus

Introduction

Sexual violence is a prevalent problem in American culture today. According to the National Violence Against Women Survey, 1 in 6 women and 1 in 33 men in the United States has experienced an attempted or completed rape at some time in their lives (Tjaden & Thoennes, 1998). Every two and a half minutes, somewhere in America, someone is sexually assaulted (Bureau of Justice Statistics, 2005). Sexual violence is a problem in the general population, but it is especially problematic on college campuses. As many as 20%-25% of women and 3% of men are sexually assaulted during their college careers (Fisher, Cullen, & Turner, 2000; U.S. Centers for Disease Control and Prevention, 1995). Rates of sexual victimization among college women have been found to be approximately four times greater than rates among women in the general population (Gidycz, Hanson, & Layman, 1995; Koss, Gidycz, & Wisniewski, 1987). In addition, government statistics indicate that the highest victimization rate exists among the 16- to 19-year-old age group, and the second highest rate exists among the 20- to 24-year-old age group (Bureau of Justice Statistics, 1992). Findings such as these underscore the fact that college-age women are a high-risk group for sexual violence.

Sexual violence encompasses both rape and sexual assault. Rape is legally defined as any type of intercourse without consent. This includes vaginal, anal, and oral intercourse, with penetration no matter how slight, when there is force or threats of force. If objects or fingers are used to penetrate, it is still rape. If alcohol is given to reduce

resistance, it is still rape (Pinzone-Glover, Gidycz, & Jacobs, 1998). The definition of sexual assault has been broadened over the previous definition of rape to include forced sexual aggression or contact, with or without penetration, against a victim (Black, Weisz, Coats, & Patterson, 2000; Rothman & Silverman, 2007).

Sexual violence harms both the victims of the violence and the general community. Exposure to sexual violence has been associated with a variety of negative mental health outcomes across types of samples and communities (Brenner, McMahon, Warren, & Douglas, 1999; Campbell & Soeken, 1999). Research shows victims of sexual violence commonly experience a host of negative repercussions including: shock, humiliation, fear, anxiety, guilt, mistrust, isolation, loss of self-esteem, pain, anger, depression, sleep disturbances, sexual dysfunction, substance abuse, suicidal ideation, sexually transmitted diseases, and Post Traumatic Stress Disorder (Acierno et al., 2002; Kilpatrick, Veronen, & Resnick, 1982; Maletsky, 2000; Meadows & Foa, 1998; Monnier, Resnick, Kilpatrick, & Seals, 2002; Resick, 1993; Schiefelbein, 2002; Steketee & Foa, 1988; Weinstein & Rosen, 1988). According to the World Health Organization (2002), victims of sexual assault are three times more likely to suffer from depression, six times more likely to suffer from post-traumatic stress disorder, 13 times more likely to abuse alcohol, 26 times more likely to abuse drugs, and four times more likely to contemplate suicide. Feminist scholars have argued that sexual violence on a societal level has a negative impact on all women (Brownmiller, 1975; Herman, 1990). The fear of rape itself is experienced by many women in society, regardless of their victimization status (Gordon & Riger, 1989).

The consequences of sexual violence are made all the more problematic as it has been shown that rape and sexual assault remain the more underreported crimes across the country (Rennison, 2002). According to the National College Women's Sexual Victimization Survey, fewer than 5% of completed or attempted rapes against college-age women are reported to law enforcement: a majority of victims (66%) tell friends, but not family or school officials (Fisher et al., 2000). In one study of 650 college-age women, 42% reported that they had been victims of sexual coercion, but only 28% of the victims sought help. Among those who did seek help, most (75%) sought it from a friend rather than from a professional (Ogletree, 1993; Ullman, 1999). Koss and colleagues (1987) similarly found that 42% of college female rape victims had never told anyone about the incident. Sable, Danis, Mauzy, and Gallagher (2006) found that there are still many barriers to reporting sexual violence among college students. Shame, guilt, embarrassment and fear of not being believed were found to be some of the more important barriers perceived by both male and female victims (Sable et al., 2006). There are many reasons to encourage survivors to report assaults such as raising awareness of the consequences of the crime, which would hopefully result in prevention of sexual violence. There is a need for education about cultural influences on rape and rape reporting (Shepherd, 2002). Although the majority of victims of sexual violence are women, efforts to dispel the existing myths about rape and its causes for male and female victims must continue (Kassing & Prieto, 2003). Prevention strategies need to be developed for young men who might become perpetrators (Donnelly & Kenyon, 1996).

Although many individuals believe that rape is most commonly committed by a stranger, it is far more likely that the perpetrator will be an acquaintance (Bureau of Justice Statistics, 2005). Estimates of the percentage of rapes committed by an acquaintance range from 50% to 99%, with many of those being committed by a boyfriend or date (Bridges, 1991; Fisher et al., 2000; Kopper, 1996). College women are more likely to be raped or sexually assaulted by a known individual; indeed, 9 in 10 college women who were victims of rape knew their offender (Fisher et al., 2000). With regard to perpetration, 99% of people who commit rape are men (Rennison, 2002). Depending on the definitions and measures used, studies of college men have found that 25% to 57% acknowledged committing sexual assault, with 7% to 15% describing an act that met standard legal definitions of rape (Abbey, McAuslan, & Ross, 1998; Berkowitz, 1992; Koss et al., 1987; Lisak & Miller, 2002; Muehlenhard & Linton, 1987).

Significance of this Study

Since men have been found to be the majority of perpetrators of sexual violence, Katz (2000) suggests this should lead us to also examine men as a gender for the causes and solutions to sexual violence. Schwartz and DeKeseredy (1997) believe that sexual assault on the college campus will not stop until men stop sexually assaulting women. However, not all men are sexually aggressive. Only some men have a high potential to sexually aggress in the future; these men are therefore deemed as high-risk. Based on a social learning framework, men who have engaged in sexually coercive behavior in the past (high-risk men) will be less receptive to anti-rape content. They are likely to have developed stubborn attitudes, expectancies, and habits commensurate with experiencing

women as legitimate targets of sexual violence. Attitudinally, past perpetration correlates to rape-supportive attitudes (Malamuth, Linz, Heavy, Barnes, & Acker, 1995). Behaviorally, past perpetration predicts nonsexual aggression against women (Malamuth, 1981), arousal to rape depictions (Malamuth, 1986), and sexual harassment (Pryor, 1987). It also predicts a tendency to justify rape (Meuhlenhard, 1988) and to express higher empathy toward rapists rather than victims (Dietz, Blackwell, Daley, & Bentley, 1982). Finally, past perpetration predicts the self-reported likelihood of committing future rape if assured of not being caught (Malamuth, 1981). These findings attest to the close linkage between past sexual aggressiveness and the harboring of congruent attitudes and behavioral tendencies. Men who have been sexually aggressive or coercive in the past are liable to have a vested interest in affirming and potentially defending attitudes that legitimize and condone sexually aggressive inclinations. They are likely to be less swayed by anti-rape content than their noncoercive counterparts. Therefore, these high-risk males may require a different type of prevention program that can help change the stubborn attitudes and habits they have developed.

Bystander Approach to Sexual Violence Prevention

In recent years, one of the more promising directions for sexual violence prevention is to focus on men and women as bystanders to change social norms in a peer culture that supports abusive behaviors (Banyard, Moynihan, & Plante, 2007; Edwards, 2009; Foubert, 2000; Katz, 1993). The bystander model focuses both on increasing community members' receptivity to prevention messages and training and supporting bystander behaviors. Thus, unlike many other programs, this approach does not rely on

identifying men as potential perpetrators or focus on women as victims, messages which may promote defensiveness. The bystander approach may reduce both men's and women's resistance to rape prevention messages and enhance efforts to change broader group and community norms around sexual violence (Banyard et al., 2007).

The bystander model targets all community members as potential bystanders and seeks to engage them in proactive behaviors that establish intolerance of violence as the norm, as well as reactive interventions in high-risk situations, resulting in the ultimate reduction of violence. Specifically, the programs propose to target socially influential individuals from across community subgroups, such as members of the Greek community or athletes. The goal is for these groups to engage in a basic education program that will equip them to integrate moments of prevention within existing relationships and daily activities. By doing so, new norms will be introduced and those within their sphere of influence will be significantly influenced to move from passive agreement that violence is wrong to active intervention to stop violence (Banyard et al., 2007; Edwards, 2009; Foubert, 2000; Katz, 1993). The strategy is to educate socially influential people in the techniques of bystander intervention, who in turn influence others to join in, creating a sort of viral enthusiasm for the cause (Banyard et al, 2007; Edwards, 2009; Foubert, 2000; Katz, 1993).

Fraternity Members and Male Athletes on Campus

Schwartz and DeKeseredy (1997) posit that rape-supportive male peer groups, not fraternity membership, are correlated with college men's dating violence. Schwartz and DeKeseredy (1997) believe that it may not be membership in these groups that correlates

to sexual violence, but the peer support within these groups for intimate partner violence. This suggests a complex connection between male peer group support, social norms, community, and sexual violence. Whether or not members of Greek organizations or student athletes are high-risk groups, they nonetheless represent high status community members who are visibly prominent and could serve as key leaders in changing social norms around these issues (Katz, 1993; Moynihan & Banyard, 2008), and therefore they may benefit from the bystander approach to sexual violence prevention.

Risk Status

There is little empirical support on the effectiveness of bystander sexual violence prevention programs with both males who are at high- and low-risk of using sexually coercive behavior. Studies have examined the effectiveness of these interventions with general college populations (Banyard et al., 2007; Foubert, 2000; Moynihan & Banyard, 2008), but few studies have assessed participants' risk status prior to the intervention (Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009). Fraternity men and athletes on college campuses have often been labeled as high-risk for being sexually coercive, but using fraternity members and athletes as participants in prevention program evaluations may make those studies vulnerable to biased effects that may be driven by low-risk men, men least likely to sexually aggress, who exist within these groups (Choate, 2003; Davis & Liddell, 2002; Foubert, 2000; Foubert & Newberry, 2006; Holcomb, Savage, Seehafer, & Waalkes, 2002). Breitenbecher (2000) concluded that routine pre-testing of participants to determine risk status is needed to assess if interventions are truly effective with their target populations. It is important to assess

participants' risk status prior to the intervention in order to empirically evaluate if the positive program outcomes are due to the majority of males that are low-risk or if the program is producing positive outcomes for the high-risk males also. Without this knowledge, it is impossible to effectively design programs that will engage male bystanders and reduce sexual violence on college campuses. The few studies that have assessed risk status prior to intervention (Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009) have utilized 28-50 minute videos to present the bystander prevention program and found that the attitudes and behaviors of the high-risk participants were unchanged, while the low-risk participants showed positive outcomes. None of these studies used an intensive, in-person, bystander prevention program.

Purpose of this Study

The purpose of this study is to evaluate a theoretically based, peer-facilitated, in-person, bystander sexual violence prevention program at the university level to determine its effectiveness at changing attitudes and behaviors related to sexual violence with university males who are at both low- and high-risk of using sexually coercive behavior. Men's risk status will be determined prior to the intervention and the participants will be classified into low- and high-risk groups. The results of this study will inform prevention educators at universities if bystander interventions produce positive outcomes with both low- and high-risk university males. It will expand our ability to design programs that can have an impact on reducing sexual violence at the university level by ensuring the program is having the desired impact on the target audience.

Chapter 2

Literature Review

Introduction

This chapter provides an overview of the literature related to sexual violence prevention programs on university campuses with a special focus on programs for high-risk males. General themes about the content, theoretical basis, target audience, program facilitators, and research design of the sexual violence prevention programs in this review are identified and explained. The instruments used to assess the outcome measures of the particular programs in this review are also articulated. The prevention programs' effects on sexual violence and bystander attitudes and behaviors is also presented and discussed. Limitations of the program evaluations in this literature review are also identified. Finally, I include a discussion about how this literature review influenced my decisions regarding the theory, content, and measures I used for this research.

Sexual Violence Prevention Programs with High-Risk Males

Currently, American universities are required to take action once a sexual assault is reported and to provide resources for victims, but are not obligated to have a prevention policy. The Campus Sexual Violence Elimination (SaVE) Act (Casey, 2011) that is part of the newly passed Violence Against Women Act will require institutions to provide prevention and awareness programs for all incoming students and new employees (Casey, 2011; Clery Center for Security on Campus, 2012). The alarmingly high incidence of sexual violence on college campuses coupled with the new federal mandates have provided impetus for the development of several innovative sexual

violence prevention programs. A number of reviews have highlighted the variability of these programs and found mixed results concerning their effectiveness (Anderson & Whiston, 2005; Brecklin & Forde, 2001; Breitenbecher, 2000; Lonsway, 1996). In the past, most sexual violence prevention programs at the university level have targeted the general college population, but in the last decade, many new prevention programs have been developed that specifically target high-risk populations on university campuses. The purpose of this research review is to critically examine sexual violence prevention programs on university campuses with a special focus on programs for high-risk males.

The research reports used in this review were chosen based on specific criteria. First, all the research reports evaluated a sexual violence prevention program on a university campus from 1996 - 2009. Next, the prevention programs evaluated in the studies included in this review targeted high-risk men at the university level. High-risk status in these studies was determined in two ways. First, risk status was determined prior to the intervention with the administration of either the Attraction to Sexual Aggression Scale (Malamuth, 1989a, 1989b) or the Modified Sexual Experiences Survey (Dahl, 1993). Second, there is a growing compilation of research that identifies at-risk segments of campus communities for behaviors related to perpetration and victimization of sexual violence, particularly Greek and intercollegiate athletic sub-communities (Brackenridge & Fasting, 2002; Humphrey & Kahn, 2000; Schwartz, DeKeseredy, Tait, & Alvi, 2001). So, if participants were fraternity members or athletes, they were deemed high-risk. There are a few qualitative studies (Foubert & Perry, 2007; Foubert, Tatum, & Donahue, 2006; Wantland, 2008) that address the effectiveness of sexual violence prevention

programs at the university level and these studies offer good insight about the overall effectiveness of the program. However, for the purpose of this review, only quantitative studies were included in order to be able to better compare the effectiveness of the different types of programs. Articles for this research review were located using search engines such as Academic Search Complete, PsycINFO, ERIC, Social Service Abstracts, and Social Work Abstracts.

Table 1 Sexual violence prevention programs for high-risk college males

Author(s)	Sample	Intervention(s)	Theory	Research Design	Measures	Findings
Foubert, 2000	145 fraternity men	E – video in which man being raped is described, how to help survivor, sexual communication, confront sexism and abuse of women (60-min) C – no tx	Elaboration Likelihood Model by Petty and Cacioppo	pretest, intervention, immediate posttest, 7-month f/u	<ul style="list-style-type: none"> • Burt Rape Myth Acceptance Scale • Behavioral Intent to Rape Scale • Sexual Experiences Survey 	<ul style="list-style-type: none"> • Rape myth acceptance significantly declined at post test ($d = .38$) and at 7-month follow-up ($d = .24$) • Likelihood of raping significantly decreased at posttest ($d = .01$) and at 7-month follow-up ($d = .13$) • Men who saw the program did not behave differently at 7-month follow-up in regards to their self-reported sexually aggressive behavior
Foubert & McEwen, 1998	155 fraternity men	E - video in which man being raped is described, how to help survivor, sexual communication, confront sexism and abuse of women (60-min) C - no tx	Elaboration Likelihood Model by Petty and Cacioppo	E1 - pretest, intervention, immediate posttest E2 – intervention, immediate posttest C - posttest	<ul style="list-style-type: none"> • The Burt Rape Myth Acceptance Scale • A State Measure of Central Route Processing • Behavioral Intent to Rape Scale • Demographic Questionnaire 	<ul style="list-style-type: none"> • Rape myth acceptance significantly declined for the pretested intervention group ($d = .45$) and an unpretested intervention group ($d = .57$) • Behavioral intent to rape significantly decreased, but the posttest scores did not significantly differ from the control group; pretested treatment group ($d = .14$) and for the unpretested treatment group (0)
Foubert & Newberry, 2006	261 fraternity men	E1 – Men’s Program with a training module on bystander intervention in situations involving alcohol E2 - Men’s Program with a training module on defining consent in situations involving alcohol C – no tx	Elaboration Likelihood Model by Petty and Cacioppo	pretest, intervention, immediate posttest	<ul style="list-style-type: none"> • IRMAS • Malamuth’s Likelihood of Raping Scale • Rape Empathy Scale • Demographic questionnaire 	<ul style="list-style-type: none"> • Rape myth acceptance significantly declined in both interventions, but they found a greater reduction in rape myth acceptance with E1 ($d = .20$) than E2 ($d = -.21$). • Rape empathy increased more for E1 ($d = .35$) than E2 ($d = .14$). • Likelihood of raping significantly declined from pre to posttest, however the effect size was small for both E1 and E2. • Likelihood of sexual assault significantly declined from pre to posttest with effect sizes of .31 for E1 and .35 for E2.

Table 1—Continued

<p>Heppner, Neville, Smith, Kivlighan Jr., & Gershuny, 1999</p>	<p>119 (57) men (64% were white and members of a White fraternity, 58% of the black students were part of a Black fraternity, 42% were non-fraternity affiliated college men)</p>	<p>E1 - “colorblind” intervention E2 – culturally specific for African-American participants C – not described Each intervention included three 90-min sessions occurring 1 week apart:</p> <ul style="list-style-type: none"> • cognitive change module • affective change module • behavioral change module 	<p>Elaboration Likelihood Model by Petty and Cacioppo and Eagly & Chaiken’s attitude change model</p>	<p>Pretest, 1-week posttest, 5-month post-test</p>	<ul style="list-style-type: none"> • Rape Myth Acceptance Scale • The Scale for Identification of Acquaintance Rape Attitudes • Sexual Experience Survey • Behavioral Indices of Change • Severity of Violence Against Women Scale • Elaboration Likelihood Model Questionnaire 	<ul style="list-style-type: none"> • One group of men whose rape supportive attitudes significantly decreased immediately following the intervention and change was maintained at the 5-month follow-up • Also found a group of men who reported a significant decrease in rape supportive attitudes immediately following the intervention, but whose attitudes rebounded to pre-intervention levels by the 5-month follow-up • The reduction in reported likelihood of raping was maintained for 5 months
<p>Moynihan & Banyard, 2008</p>	<p>127 (106) students (men and women athletes or Greek members)</p>	<p>E – Bringing in the Bystander, basic information about sexual violence and discussion about bystander behaviors (90 min)</p> <p>No control group</p>	<p>Feminist and Ecological Theories</p>	<p>pretest week before program, immediate posttest</p>	<ul style="list-style-type: none"> • Knowledge Scale • Knowledge of interventions • Don’t Know Scale • Illinois Rape Myth Acceptance Scale – SF • Bystander Attitudes • Bystander Efficacy Scale • Post-Program Evaluation Questions 	<ul style="list-style-type: none"> • Significant increases in prosocial bystander attitudes and increased bystander efficacy from pretest to posttest • For women, knowledge of interventions, helping attitudes, and bystander efficacy all improved significantly • For men, an increase in knowledge was the only significant change

Table 1—Continued

<p>Schewe & O’Donohue, 1996</p>	<p>74 high-risk undergraduate men (determined as high-risk by scores on Attraction to Sexual Aggression Scale)</p>	<p>E1 – video of rape supportive cognitions program (50 min) E2 – video of victim empathy/outcome expectancy program (50 min) C – no tx</p>	<p>Social Learning Theory by Bandura</p>	<p>Pretest, intervention, 2 week f/u</p>	<ul style="list-style-type: none"> • Attraction to Sexual Aggression Scale • Acceptance of Interpersonal Violence Scale • Adversarial Sexual Beliefs • Rape Myth Acceptance • Social Desirability Scale – SF • Affective Adjective Checklist • Rape Conformity Assessment 	<ul style="list-style-type: none"> • Rape supportive attitudes significantly improved after both interventions ($d = .63$ for both interventions) • Rape Supportive Cognitions treatment was more effective at decreasing rape myth acceptance ($d = .87$) than the Victim Empathy/Outcome Expectancies intervention ($d = .53$) • Victim Empathy/Outcome Expectancies intervention was more effective at increasing rape empathy than the Rape Supportive Cognitions treatment
<p>Stephens & George, 2004</p>	<p>45 undergraduate men (based on the M-SES, 22 participants were classified as sexually coercive and 23 participants were classified as sexually noncoercive)</p>	<p>E - video “Rethinking Rape” presented rape information and anti-rape messages (28 min) C - video “Thin Air” is a mountain climbing documentary (30 min)</p>	<p>Social Learning Theory by Bandura</p>	<p>pre-screening session (administered SES), intervention, immediate posttest</p>	<ul style="list-style-type: none"> • Modified-Sexual Experiences Survey • Rape Myth Acceptance Scale • Attitudes Toward Women Scale • Sex-Related Alcohol Expectancies Scale 	<ul style="list-style-type: none"> • Rape supportive attitudes did not improve in both non-coercive men and sexually-coercive men • Rape myth acceptance scores were lower after intervention for noncoercive men ($d = .89$), but not for sexually coercive men

Table 1—Continued

<p>Stephens & George, 2009</p>	<p>146 undergraduate men (classified as high or low risk for sexually offending by using the Modified Sexual Experiences Scale)</p>	<p>E - video content included recorded version of the Men's Program and Dr. Jackson Katz's professional interview regarding the negative intersection of alcohol and rape on campus (50 min) C – two Discovery videos about the galaxy (50 min)</p>	<p>Elaboration Likelihood Model by Petty and Cacioppo</p>	<p>pretest, intervention about 11.5 days after pretest, immediate posttest, 5-wk f/u in person or via mail</p>	<ul style="list-style-type: none"> • Background questionnaires • Attitudinal Measures • Illinois Rape Myth Acceptance Scale- SF • Rape Empathy Scale • Sex-Related Alcohol Expectancies Scale • Attraction to Sexual Aggression Scale • M-Sexual Experiences Scale • Elaboration Likelihood Model Questionnaire 	<ul style="list-style-type: none"> • Attraction to sexual aggression significantly reduced at posttest ($d = .33$), but the effects rebounded at follow-up 5 weeks later ($d = .07$) • Rape myth acceptance declined across the entire sample (RMS, $d = .45$; IRMA-SF, $d = .44$) and that was maintained at the 5-week follow-up (RMS, $d = .40$; IRMA-SF, $d = .60$) • High-risk participants' rape myth acceptance was unchanged and the low-risk men produced larger effects than the entire sample, both at posttest (RMS, $d = .59$; IRMA-SF, $d = .45$) and 5-week follow-up (RMS, $d = .70$; IRMA-SF, $d = .85$). • Rape empathy significantly increased at posttest ($d = .40$) and that was maintained for 5 weeks after treatment ($d = .34$) • Assessed self-reported behaviors five weeks after the intervention and found a nonsignificant result that reflected an increase in reported sexually coercive behavior after the intervention compared to the control group
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Description of Research Review Reports

Studies in this research review were categorized by type of sample, intervention, theoretical basis, research design, measures used to evaluate program effectiveness, and findings of each study (see Table 1).

Program Content

The content of the sexual violence prevention programs varied, but they also included some important similarities. The majority of the programs were about one to two hours in length (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Moynihan & Banyard, 2008; Schewe & O'Donohue, 1996; Stephens & George, 2009). Stephens and George's (2004) program used a shorter 28-minute video. Heppner, Neville, Smith, Kivlighan, and Gershuny's program (1999) was the longest and consisted of three 90-minute sessions totaling 4.5 hours. Six programs (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009) presented video-based interventions that ranged from 28 – 60 minutes in length, while two programs (Heppner et al., 1999; Moynihan & Banyard, 2008) were didactic presentations with discussion and behavioral components with one being 90 minutes in length (Moynihan & Banyard, 2008) and the other consisting of three 90-minute sessions that occurred one week apart (Heppner et al., 1999). Three studies (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006) evaluated the same program with slight variations that was presented at different times and using different evaluation measures and populations. The results of these three evaluations, which will be discussed later, varied. Four studies incorporated the discussion of the

bystander's role in prevention (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Moynihan & Banyard, 2008), which is a fairly new approach to sexual violence prevention.

Key features of the sexual violence prevention programs studied include the following: provision of information regarding the prevalence of sexual assault among college students (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999; Moynihan & Banyard, 2008; Stephens & George, 2004, 2009), debunking of rape mythology (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999; Moynihan & Banyard, 2008; Schewe & O'Donohue, 1996; Stephens & George, 2004), discussion of sex-role socialization practices (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Moynihan & Banyard, 2008; Stephens & George, 2004), discussion of dating expectations and communication of sexual intentions (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999; Schewe & O'Donohue, 1996), induction of empathy for rape survivors (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999; Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009), discussion about the intersection of alcohol and rape (Moynihan & Banyard, 2008; Stephens & George, 2004, 2009), information about the causes and consequences of sexual violence (Moynihan & Banyard, 2008; Schewe & O'Donohue, 1996), discussion of the bystander's role in sexual violence prevention (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Moynihan & Banyard, 2008), and strategies to help survivors who

disclose (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999; Moynihan & Banyard, 2008; Schewe & O'Donohue, 1996; Stephens & George, 2004).

Theoretical Basis

All of the sexual violence prevention programs (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al, 1999; Moynihan & Banyard, 2008; Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009) discussed in this review were developed based on particular theories. Five of the programs (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999; Stephens & George, 2009) used the elaboration likelihood model to help develop the prevention program evaluated. The elaboration likelihood model (ELM) suggests that lasting attitude and behavior change occurs when participants are motivated to hear a message, are able to understand it, and perceive the message as relevant to them (Petty & Cacioppo, 1986a). The ELM conceptualizes attitude change on a continuum, the anchors being peripheral route processing and central route processing of the persuasive message. Applying the ELM to rape prevention programs with high-risk university males has shown signs of success in past research through a reduction of rape myth acceptance (Foubert, 2000; Stephens & George, 2009), a reduction in reported likelihood of raping (Foubert, 2000; Heppner et al, 1999), increase in rape empathy (Foubert & Newberry, 2006; Stephens & George, 2009), and a reduction in attraction to sexual aggression (Stephens & George, 2009).

Two of the studies (Schewe & O'Donohue, 1996; Stephens & George, 2004) based their prevention program on social learning theory. Social learning theory suggests that aggressive and violent behaviors are learned from prior experiences (Bandura, 1977). Bandura's social learning model of aggression posits that aggressive behavior is the product of cognitions that (a) make reprehensible conduct ethically acceptable, (b) misconstrue the consequences of the behavior, and (c) devalue or attribute blame to the victim. Bandura's theory suggests that interventions that (i) alter rape supportive cognitions, (ii) decrease problematic rape outcome expectancies, or (iii) increase victim empathy could work to decrease the amount of sexual aggression committed by males (Schewe & O'Donohue, 1996). Based on this information, social learning theory appears to be a useful theory for prevention programming specifically focused on high-risk men and has shown signs of success through the reduction of rape myth acceptance (Schewe & O'Donohue, 1996; Stephens & George, 2004), increase in rape empathy (Schewe & O'Donohue, 1996), and reduction in rape supportive attitudes (Schewe & O'Donohue, 1996).

The Moynihan and Banyard (2008) study based its bystander intervention program partly on feminist theory. They posit that feminist analyses of the causes of sexual violence point to the need to take a broader ecological perspective by examining the ways in which larger community and societal issues such as gender inequality, along with male social control and entitlement, permeate the foundation of attitudes that condone violence against women, blame individuals for their own victimization, and pair sexuality and aggression (Banyard, Plante, & Moynihan, 2004). They suggest that sexual

violence will be eliminated only when the broader social norms are also addressed and a broader range of audiences are reached. Feminist theory has shown signs of success in sexual violence prevention programming with a focus on bystander behaviors through the increase of prosocial bystander attitudes and efficacy (Banyard et al., 2007; Moynihan & Banyard, 2008), along with a reduction in rape myth acceptance (Banyard et al., 2007).

Target Audience

All the programs studied in this report presented material to single-gender audiences. The audiences were all students at the particular universities that the interventions were implemented. Seven studies (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999; Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009) targeted all male audiences. Of those programs, four specifically targeted fraternity members (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999), while three (Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009) classified the participants into high- or low-risk for committing sexually coercive behavior using either the Modified Sexual Experiences Survey (Dahl, 1993) or the Attraction to Sexual Aggression Scale (Malamuth, 1989a, 1989b). The Moynihan and Banyard (2008) program targeted student athletes and members of the Greek community and was presented to both men and women, but in single-gender groups. The sample size for these studies ranged from 45 students (Stephens & George, 2004) to 261 students (Foubert & Newberry, 2006), with most studies' (Foubert, 2000; Foubert & McEwen, 1998; Heppner et al., 1999; Moynihan & Banyard, 2008; Stephens & George, 2009) sample sizes ranging from around 100 to 150

students. All the studies, except the Heppner et al. (1999) study, which specifically addressed the effectiveness of the program with both African-American and European-American students, had a predominantly European-American sample of students.

Most sexual violence prevention programs are developed with European-Americans in mind (Breitenbecher, 2000; Morrison, Hardison, Mathew, O'Neil, 2004). However, based on the Elaboration Likelihood Model (ELM), which suggests that lasting attitude and behavior change occurs when participants are motivated to hear a message, are able to understand it, and perceive the message as relevant to them (Petty & Cacioppo, 1986a), one of the goals of sexual violence prevention programming should be to design personally relevant prevention programs for all participants so that they feel more motivated to listen to and cognitively engage in the message. In order to accomplish this goal, it is critical that prevention programmers attempt to infuse racial and cultural material into their prevention programs in order to better engage all the ethnicities that might attend the program. Heppner and colleagues (1999) conducted an evaluation of two sexual violence prevention programs: one that infused culturally relevant content and one that did not specifically include any explicit culturally relevant information. They found that participants in either intervention were more likely to become more rejecting of rape than participants in the control condition. Although there were too few participants to test the interaction between the type of intervention and ethnicity, results indicated that African-American men in the culturally relevant group self-reported greater cognitive involvement in the intervention than the African-American men in the colorblind intervention.

Program Facilitators

The facilitators of the programs studied varied based on what gender facilitated the program and what type of training those facilitators received. Half of the prevention programs were facilitated by peers (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Moynihan & Banyard, 2008). All of Foubert and colleagues' studies (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006) were facilitated by male peers presenting to a male audience. Moynihan and Banyard's program (2008) was co-facilitated by a male and female pair to single-sex groups. Two programs (Heppner et al., 1999; Stephens & George, 2009) were presented by male professionals to groups of all males. Two studies (Schewe & O'Donohue, 1996; Stephens & George, 2004) did not describe the program facilitators. All, but one (Heppner et al., 1999) of the programs did not discuss the ethnicity of the facilitators and how that might impact the effectiveness of the program. The Heppner et al. (1999) study's goal was to compare the effectiveness of a culturally relevant program with a "colorblind" program, so they had an African-American facilitator for the culturally relevant group and a European-American facilitator for the "colorblind" group.

The training that the facilitators received also varied greatly among the programs studied. Three programs (Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009) used video interventions, so they did not discuss training of facilitators. The Foubert and colleagues' studies (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006) did not specifically describe the training of the program facilitators. The facilitators who presented the program in the Heppner et al. (1999) study received 25 hours of

training that consisted of working with the three primary authors to learn and deliver the manualized intervention in a conversational manner and also addressed how to respond to difficult and challenging questions. The presenters of the Moynihan and Banyard (2008) study received six hours of training specifically on the prevention program curriculum.

Measuring Outcomes

Several male specific measures of outcomes, such as attitudinal measures, victim empathy, and behavioral proxies of sexual aggression, encompass the most commonly used outcome measures in studies of sexual violence prevention with men (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999; Moynihan & Banyard, 2008; Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009). Numerous scales have been developed to assess the changes in attitudes towards sexual violence.

Attitudinal Measures

Rape myth acceptance. One of the most common attitudes studied is rape myth acceptance, which Burt (1980) defined as “prejudicial, stereotypical, or false beliefs about rape, rape victims, and rapists” (p. 217). Typically, such beliefs attribute responsibility to the victim and exonerate the attacker. Researchers have found that rape myth acceptance correlates strongly with sexual conservatism, traditional sex role attitudes, more negative attitudes toward women, adversarial sexual beliefs, self-reported likelihood of committing rape, and self-reported sexually aggressive behavior among men (Burt, 1980; Hamilton & Yee, 1990; Koss, Leonard, Beezley, & Oros, 1985; Lonsway & Fitzgerald, 1994; Malamuth, 1989a). Extensive research on rape myths has

honed this construct and articulated its role as a central attitudinal construct among sexually aggressive men. Rape myth acceptance is by far the most common construct measured in the sexual violence prevention outcome literature (Breitenbecher, 2000). Rape myth acceptance scale development has progressed from Burt's (1980) original Rape Myth Acceptance Scale, to Lonsway and Fitzgerald's (1994) Rape Myth Scale, to most recently Payne, Lonsway, and Fitzgerald's (1999) Illinois Rape Myth Acceptance Scale. All eight studies in this review (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999; Moynihan & Banyard, 2008; Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009) used at least one of these scales as an outcome measure and seven of those studies (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999; Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009) found a reduction in rape myth acceptance after the intervention. The literature reveals consistent support for the short-term effectiveness of sexual assault prevention programs in reducing rape myth acceptance. Most studies that have included longer term follow-ups ranging from one month to five months have shown that positive effects deteriorate over time (Breitenbecher, 2000).

Sexual assault attitudes. Other scales such as the Acceptance of Interpersonal Violence Scale (Burt, 1980; Malamuth, 1986), the Adversarial Sexual Beliefs Scale (Burt, 1980), and the Attitudes Toward Women Scale (Spence, Helmreich, & Stapp, 1973) have also been used to assess change in sexual assault attitudes. The phrase "adversarial sexual beliefs" refers to "the expectation that sexual relationships are fundamentally exploitative, that each party is manipulative, sly, cheating, opaque to the

other's understanding, and not to be trusted" (Burt, 1980, p. 218). Adversarial sexual beliefs have been shown to correlate with rape myth acceptance, traditional sex role beliefs, acceptance of interpersonal violence, and self-reported sexually aggressive behavior among men (Burt, 1980; Koss et al., 1985). Burt (1980) defined acceptance of interpersonal violence as "the notion that force and coercion are legitimate ways to gain compliance and specifically that they are legitimate in intimate sexual relationships" (p. 218). Acceptance of interpersonal violence has been shown to correlate with rape myth acceptance, adversarial sexual beliefs, sex role stereotyping, and self-reported sexually aggressive behavior among men (Burt, 1980; Malamuth, 1986). Four studies in this review (Heppner et al., 1999; Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009) evaluated the change in sexual assault attitudes post intervention using these scales. The study results found weak to moderate support for the effectiveness of prevention programs in producing a positive change in sexual assault attitudes. These attitudes may be deeply seated and may require more intensive intervention efforts compared to more malleable beliefs like rape myths.

Rape empathy. Lack of empathy for rape victims has been associated with both self-reported likelihood to rape (Dietz et al., 1982) and actual sexual aggression (Abel, Mittelman, & Becker, 1985; Rice, Chaplin, Harris, & Coutts, 1994). Based on such evidence, some have argued that men will not recognize their responsibility for stopping rape until they can empathize with the powerlessness and vulnerability felt by victims (Gilbert, 1988; Lee, 1987). Researchers in the field have cautioned that no concise, shared definition of empathy exists (Eisenberg & Lennon, 1983; Wispe, 1986) and this

has led to inconsistent conceptualization and assessment of the construct. In an effort to rectify this situation, Davis (1983) proposed a broad definition of empathy as “the reactions of one individual to the observed experiences of another” (p. 113). Among college men, the role of empathy acquisition in decreasing sexual aggression is not clear (Berg, Lonsway, & Fitzgerald, 1999), however research has found several correlates with participants who report more empathy towards victims including: attribution of more responsibility to the perpetrator, expression of more positive feelings toward the victim, ratings of psychological impact of the victim as greater, and recommendations of longer prison sentences for offenders (Dietz & Byrnes, 1981). Three studies (Foubert & Newberry, 2006; Schewe & O’Donohue, 1996; Stephens & George, 2009) in this review evaluated the program’s effectiveness at increasing rape empathy among college males and results showed that there was moderate support for an increase in empathy for rape victims.

Behavioral Measures

Behavioral intentions. While the assessment of attitudinal variables is valuable, researchers have recommended that sexual violence prevention programs should move beyond attitude change as an outcome measure and include behavioral outcomes also (Brecklin & Forde, 2001; Breitenbecher, 2000; Lonsway, 1996; Schewe & O’Donohue, 1996; Yeater & O’Donohue, 1999). Unfortunately, measuring sexually aggressive behaviors is a complicated undertaking. Many researchers target behavioral approximations or intentions to overcome these complexities. Self-report measures of intentions to be sexually aggressive, such as the Behavioral Intent to Rape Scale

(Malamuth, 1981), the Behavioral Indices of Change Scale (Malamuth, 1981), and the Likelihood of Raping Scale (Malamuth, 1989a, 1989b) have been used as behavioral outcome measures. The most popular behavioral intention measures were originally defined by Briere and Malamuth (1983) and were called Likelihood to Use Force (LF) and Likelihood to Rape (LR). These measures are typically administered by asking participants, “If you could be assured that no one would know, how likely would you be to engage in the following:....” Berg et al. (1999) expanded LF and LR to include Likelihood to Use Coercion (LC; talk a woman into something sexual she doesn’t want to do) and Likelihood to Use Alcohol (LAlc; use alcohol in the hopes of having a woman give in to something sexual she wouldn’t give in to if not drinking). Four studies in this review (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999) measured males’ behavioral intentions regarding their likelihood of raping. All four studies showed that the programs were effective at reducing the participants’ reported likelihood of raping, however the outcome results for the experimental groups did not differ significantly from the control groups. More research is needed to determine if these reductions in intention sustain over time and result in less sexually aggressive behavior.

Self-reported sexually coercive behavior. Another behavioral measure that assesses self-reported sexually aggressive behavior in men is the Sexual Experiences Survey (SES; Koss & Oros, 1982). The SES is the most common measure used to assess self-reported sexually aggressive behavior. The SES has several modified versions that attempt to reduce impression management, include milder forms of sexually coercive

activities, and change the response format from the original Yes-No format to a Likert scale that assesses the frequency of each behavior. Three studies (Foubert, 2000; Heppner et al., 1999; Stephens & George, 2009) included the Sexual Experiences Survey as one of the study measures to assess participants' self-reported sexually aggressive behavior and the results were not promising. One study (Stephens & George, 2009) even found an increase in reported sexually coercive behavior five weeks after the intervention. Breitenbecher (2000) warned any conclusions regarding the effectiveness of programs in reducing sexually aggressive behavior were premature. It is also unclear what timeframe is needed to adequately assess whether or not men engage in sexually aggressive behavior after an intervention. Conducting longitudinal follow-up sessions is difficult, but may be necessary to determine whether or not interventions actually reduce sexual assault incidence.

Research Design

Surveys and pre- and post-tests were the means of data collection in all the studies in this review (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999; Moynihan & Banyard, 2008; Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009). Four studies (Foubert, 2000; Heppner et al., 1999; Schewe & O'Donohue, 1996; Stephens & George, 2009) had a follow-up period where they administered the outcome measures again after a certain amount of time to test if the change was maintained over time. The follow-up period ranged from as short as 2 weeks (Schewe & O'Donohue, 1996) to as long as 7 months (Foubert, 2000). All, but one of the studies (Moynihan & Banyard, 2008) included a comparison group. Two studies

(Stephens & George, 2004, 2009) included a comparison group with a different treatment, while the other studies had a comparison group that did not receive any type of treatment. Three studies (Foubert & Newberry, 2006; Heppner et al., 1999; Schewe & O'Donohue, 1996) included two experimental groups along with a control group to test the effectiveness of two different types of prevention programs. The predominant types of analyses conducted in these studies were an analysis of variance or covariance (ANOVA or ANCOVA) and a multivariate analysis of variance or covariance (MANOVA or MANCOVA).

Results

The findings of this research review are presented in six broad categories including the prevention programs' effects on (1) sexual assault attitudes; (2) rape myth acceptance; (3) empathy towards a rape survivor; (4) bystander behaviors, (5) behavioral intentions; and (6) self-reported sexual aggression in men.

Prevention Programs' Effects on Sexual Assault Attitudes

Four studies (Heppner et al., 1999; Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009) evaluated the change in sexual assault attitudes post intervention using scales such as the Acceptance of Interpersonal Violence Scale (Burt, 1980; Malamuth, 1986), the Adversarial Sexual Beliefs Scale (Burt, 1980), and the Attitudes Toward Women Scale (Spence et al., 1973). All four of these studies were conducted with male only populations. The Stephens and George (2004) study found that the 28-minute video-based intervention that presented anti-rape messages and rape information was not successful in improving rape supportive attitudes in both non-coercive men and

sexually-coercive men. Another study (Stephens & George, 2009) found that men in the treatment group significantly reduced attraction to sexual aggression at posttest with a small effect size of .33, but the effects rebounded at follow-up five weeks later ($d = .07$). In Schewe and O'Donohue's (1996) study conducted with high-risk males as determined by their scores on the Attraction to Sexual Aggression Scale, they found a significant improvement in rape supportive attitudes after both interventions (the Rape Supportive Cognitions intervention that targeted commonly held false beliefs that condone coercive sexual behavior and the Victim Empathy/Outcome Expectancy intervention that targeted poor victim empathy and problematic rape outcome expectancies) with a medium effect size of .63 for both interventions. The Heppner et al. (1999) study found one group of men whose rape supportive attitudes significantly decreased immediately following the intervention and this change was maintained at the five-month follow-up. However, they also found a group of men who reported a significant decrease in rape supportive attitudes immediately following the intervention, but whose attitudes rebounded to pre-intervention levels by the five-month follow-up assessment. Heppner and colleagues' (1999) participants included men from fraternities and also men from the general college population, so a reason for the above mentioned groupings might be the effects of already low-risk males in the study sample. The study would have benefitted from determining risk status of the participants prior to the intervention in order to ascertain if the effects that were maintained were not simply maintained because those participants were already low-risk for being sexually aggressive at the start of the study.

Prevention Programs' Effects on Rape Myth Acceptance

All eight studies (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999; Moynihan & Banyard, 2008; Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009) evaluated the effectiveness of the program to reduce rape myth acceptance using the Illinois Rape Myth Acceptance scale (Payne et al., 1999) or the Rape Myth Acceptance scale (Burt, 1980). Seven studies (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999; Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009) saw a reduction in rape myth acceptance after the intervention. The Foubert (2000) study found that the decline in rape myth acceptance was maintained over seven months, however a small effect size for the intervention was found at both posttest ($d = .38$) and at follow-up ($d = .24$). Foubert and McEwen (1998) also found a significant decline in rape myth acceptance with a sample of fraternity males for both a pretested intervention group ($d = .45$) and an unpretested intervention group ($d = .57$). Another study (Stephens & George, 2004) found that the 28-minute anti-rape video intervention led to lower rape myth acceptance scores for noncoercive men with a large effect size of .89, but not for sexually coercive men. In Stephens and Georges's (2009) study, they found a reduction in rape myth acceptance across the entire sample with medium effect sizes (RMS, $d = .45$; IRMA-SF, $d = .44$) and that reduction was maintained at the five-week follow-up (RMS, $d = .40$; IRMA-SF, $d = .60$). However, the high-risk participants' rape myth acceptance was unchanged and the low-risk men produced larger effects than the entire sample, both at posttest (RMS, $d = .59$; IRMA-SF, $d = .45$) and at the five-week follow-up (RMS, $d = .70$; IRMA-SF, $d =$

.85). Two studies (Foubert & Newberry, 2006; Schewe & O'Donohue, 1996) evaluated the effect of two different experimental interventions on rape myth acceptance. The Schewe and O'Donohue (1996) study found that the Rape Supportive Cognitions treatment, which targeted commonly held false beliefs that promote or condone coercive sexual behavior, was more effective at decreasing rape myth acceptance ($d = .87$) than the Victim Empathy/Outcome Expectancies intervention ($d = .53$), which targeted poor victim empathy and problematic rape outcome expectancies. The Foubert and Newberry (2006) study found a significant reduction in rape myth acceptance in both interventions, but they found a greater reduction in rape myth acceptance with the program that contained the Men's Program with an additional element on alcohol and bystander intervention ($d = .20$) than the same program that included an added portion on alcohol and defining consent ($d = -.21$).

Prevention Programs' Effects on Empathy towards a Rape Survivor

Three studies (Foubert & Newberry, 2006; Schewe & O'Donohue, 1996; Stephens & George, 2009) evaluated the program's effectiveness at increasing rape empathy using either the Rape Empathy Scale (Deitz et al., 1982) or the Affective Adjective Checklist (Fultz, Schaller, & Cialdini, 1988). All three programs were conducted with male only audiences. All three studies showed the program was effective at increasing rape empathy. One study (Stephens & George, 2009) found a significant increase in rape empathy at posttest with an effect size of .40 and that was maintained for five weeks after treatment with an effect size of .34. Two studies (Foubert & Newberry, 2006; Schewe & O'Donohue, 1996) evaluated the effect of two different experimental

interventions on rape empathy. The Schewe and O'Donohue (1996) study found the opposite to be true for rape empathy as was for rape myth acceptance. It was found that the Victim Empathy/Outcome Expectancies intervention, which targeted poor victim empathy and problematic rape outcome expectancies, was more effective at increasing rape empathy among high-risk males than the Rape Supportive Cognitions treatment, which targeted commonly held false beliefs that promote or condone coercive sexual behavior. This finding is logical as each program respectively targeted rape myths or rape empathy. As with rape myth acceptance, the Foubert and Newberry (2006) study found that evidence was stronger for increasing rape empathy for the program that contained the Men's Program with an additional element on alcohol and bystander intervention ($d = .35$) than the same program that included an added portion on alcohol and defining consent ($d = .14$).

Prevention Programs' Effects on Bystander Behaviors

The Moynihan and Banyard (2008) study evaluated the program's impact on participants' behavioral intentions regarding bystander behaviors and bystander efficacy. Bystander behaviors were measured using the Bystander Attitudes Scale (Banyard, Plante, & Moynihan, 2005) and the Bystander Efficacy Scale (Banyard et al., 2005). Bystander behaviors are helping behaviors that bystanders take part in if they notice a situation where someone is in danger and may need help. Examples of bystander behavior questions included in the above scales are "How likely are you to investigate if you are awakened at night by someone calling for help?", "How likely are you to walk a friend home from a party who has had too much to drink?", or "How confident are you

that you could ask a stranger who looks very upset at a party if they are ok or need help?” This study was conducted in single-gender groups of males and females who were members of the Greek community and university athletes. The study found significant increases in prosocial bystander attitudes and increased bystander efficacy from pretest to posttest. In other words, the study found a significant increase in participants’ willingness to engage in prosocial bystander behaviors and also a significant increase in participants’ self-efficacy related to engaging in bystander behaviors. In regards to the effectiveness of the program for both genders, the program worked for both men and women, but results for women showed the same effects as the overall results with knowledge of interventions, helping attitudes, and bystander efficacy all improving significantly. For men, an increase in knowledge was the only significant change showing that the program was not as effective for men as it was for women in changing bystander behaviors.

Prevention Programs’ Effects on Behavioral Intent to Rape

Behavioral intent to rape was measured using the Behavioral Intent to Rape Scale (Malamuth, 1981), the Behavioral Indices of Change Scale (Malamuth, 1981), or the Likelihood of Raping Scale (Malamuth, 1989a, 1989b). Four studies (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999), which were all conducted with male only audiences, measured males’ behavioral intentions regarding their likelihood of raping. All four studies showed that the programs were effective at reducing the participants’ reported likelihood of raping. The Foubert (2000) study found a significant decrease in likelihood of raping after the intervention and also at the seven-month follow-up, however the effect size was small at posttest ($d = .01$) and at

the seven-month follow-up ($d = .13$). Foubert and Newberry (2006) assessed both men's likelihood of raping and also men's likelihood of sexual assault. They made a distinction between rape and sexual assault. They defined sexual assault as "forcing a female to do something sexual that she did not want to." They found a significant reduction in likelihood of raping from pre to posttest, however the effect size was small for both the intervention with the added component about consent ($d = 0$) and the intervention with the added component about bystanders ($d = 0$). They also found a significant decrease in participants' likelihood of sexual assault from pre to posttest with larger effect sizes of .31 for the program with the added component about consent and .35 for the program with the added component about bystanders. The Foubert and McEwen (1998) study also found a significant decrease in behavioral intent to rape, but the posttest scores did not significantly differ from the control group with a small effect size for the pretested treatment group ($d = .14$) and for the unpretested treatment group ($d = 0$). The Heppner et al. (1999) study used a hierarchical cluster analysis to analyze their effects and they found that the reduction in reported likelihood of raping was maintained for five months.

Prevention Programs' Effects on Self-Reported Sexually Aggressive Behavior of Men

Five studies, (Foubert, 2000; Heppner et al., 1999; Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009) conducted with male only audiences, included either the Sexual Experiences Survey (Koss & Oros, 1982) or the Attraction to Sexual Aggression Scale (Malamuth, 1989a, 1989b) as one of the study measures to assess participants' self-reported sexually aggressive behavior. However, two studies (Schewe & O'Donohue, 1996; Stephens & George, 2004) only used these measures to classify participants into

high- or low-risk for perpetrating sexually coercive behavior prior to the intervention. The Heppner et al. (1999) study combined their measures to conduct a cluster analysis, so they did not specifically look at change in self-reported behaviors due to the intervention. Foubert (2000) evaluated the program's effectiveness at reducing self-reported sexually aggressive behavior of men seven months after the intervention using the Sexual Experiences Survey and the study results showed that those who saw the program did not behave differently upon program completion. Stephens and George (2009) also assessed self-reported behaviors using a Modified version of the Sexual Experiences Survey (Dahl, 1993) five weeks after the intervention and they found a nonsignificant result that reflected an increase in reported sexually coercive behavior after the intervention compared to the control group.

Discussion

The primary purpose of this review is to critically examine sexual violence prevention programs on universities with a specific focus on programs targeting high-risk college males. The studies reviewed represent different types of prevention programs all with the same goal of changing knowledge, attitudes, and behaviors about sexual violence among high-risk college males. The results of these evaluations varied, but some trends did emerge.

Target Audience

Several studies suggest that presenting sexual violence prevention programs to single-gender audiences may be more effective than to mixed-gender ones (Anderson & Whiston, 2005; Brecklin & Forde, 2001; Breitenbecher & Scarce, 1999; Choate, 2003;

Foubert & Newberry, 2006; Schewe, 2006). In fact, many experts have suggested that it violates common sense to provide sexual assault education to mixed-gender audiences, given the very different relation of men and women to the issue (Berkowitz, 1992; Lonsway, 1996; Schewe & Donohue, 1993). Some of the topics of mixed-gender programming that are geared towards reducing women's risk of assault may be unethical topics for discussion, as they could provide potential perpetrators with information regarding women's resistance strategies (Gidycz, Rich, & Marioni, 2002). In mixed-gender programming, men who are at high-risk for being sexually aggressive may learn strategies used by women to decrease their victimization risk and this information might allow them to adjust their own strategies, thus increasing their success at coercing women into unwanted sexual activity (Bradley, Yeater, & O'Donohue, 2009). All the studies evaluated in this review were presented to single-gender audiences and many of the programs did show promising changes. Many sexual violence prevention programs are based on social learning theory, which attempts to explain how people acquire and maintain certain behavioral patterns (Bandura, 1977). According to social learning theory, behaviors are learned through modeling what is seen and experienced in one's environment. In our society, men and women learn different behaviors and therefore act in different ways. Sexual violence prevention programs need to be developed to provide a positive impact for the gender they are attempting to address.

Sexual Violence Prevention versus Risk Reduction

Programs targeting all-male groups that attempt to change the behavior of potential perpetrators are often referred to as sexual violence prevention programs, while

programs that target all-female groups and focus on victimization issues or rape avoidance are referred to as risk reduction programs (Lonsway et al., 2009). This terminology highlights the fact that true prevention can only take place by changing the behavior of men as the primary perpetrators of sexual violence and designing programs for women that attempt to deter sexual violence by providing information that can reduce an individual's vulnerability (Lonsway et al., 2009).

Risk Reduction Programs

The goals of sexual violence prevention programming for men and sexual assault risk reduction programs for women do not overlap, which makes it unlikely that mixed-gender programs will be personally relevant to both sexes (Gidycz et al., 2002; Gidycz, Loh, & Rich, 2003). When presenting to an all-female audience, the theoretical underpinnings of the program should be to empower women to reduce their risk of being assaulted by providing safety and communication techniques. Risk reduction programs for women aim to enable participants to assess whether a dating situation is potentially dangerous, acknowledge when a situation is dangerous and label it as such, and then take assertive and forceful action (Nurius & Norris, 1995; Rozee & Koss, 2001).

Because some instances of sexual victimization are unavoidable, developers of risk reduction programs for women must ensure that program content does not have the iatrogenic effect of increasing women's feelings of self-blame or guilt for the experiences of sexual assault (Breitenbecher, 2000). Therefore, a further objective of risk reduction programming is to indirectly assist in the recovery process by decreasing self-blame in women who experience sexual victimization (Gidycz et al., 2002). Gidycz, Rich,

Orchowski, King, and Miller (2006) suggest that sexual assault risk reduction programs may benefit from increased discussion of psychological barriers to resistance that women encounter that make it difficult for them to implement risk reduction strategies that are modeled in the program. Some evidence suggests that prior victims are more likely than other women to use passive resistance strategies and less likely to use active resistance strategies during a rape attempt (Norris, Nurius, & Mieff, 1996). Thus, women who have been raped in the past may require training that specifically addresses this issue and provides opportunities for them to plan and practice more active resistance strategies. This is a critical consideration that is often overlooked in the design and evaluation of risk reduction programs (Lonsway et al., 2009).

Sexual Violence Prevention Programs

Breitenbecher and Scarce (1999) state that there may be an upper limit on strategies that potential victims can employ to protect themselves, thus programs that place the responsibility on the perpetrator and focus on cognitions and behaviors of potential perpetrators may ultimately prove to be more effective in reducing the incidence of sexual violence. When working with all-male audiences, sexual violence prevention programs need to address the saliency of the information being provided to participants. It is not enough to just present factual information regarding sexual assault prevention; programmers must make sure that the information is relevant to the audience members (Foubert & Newberry, 2006). The elaboration likelihood model has been proposed as a theoretical model to guide program efforts to change negative attitudes, to make material more salient to participants, and to maintain audience members' existing self-conceptions

(Petty & Cacioppo, 1986a, 1986b). When presenting to an all-male audience, it is useful to approach men as potential helpers, instead of approaching them as potential rapists. Research has shown that men, regardless of whether they have committed sexual assault, do not perceive themselves to be potential rapists (Scheel, Johnson, Schneider, & Smith, 2001). Sexual violence prevention programs should avoid accusatory tones toward audience members and instead identify positive roles for men to play. For example, men can be taught that taking an active stance in challenging rape-supportive attitudes and behaviors of other men is a positive way to put a stop to the culture of sexual violence. Avoiding accusatory tones and addressing the saliency of the information for men is especially crucial when working with high-risk men. Based on a social learning framework, it can be reasoned that men who have engaged in sexually aggressive or coercive acts previously will be less receptive to anti-rape content (Stephens & George, 2004). They are likely to have developed stubborn attitudes, expectancies, and habits commensurate with experiencing women as legitimate targets of sexual aggressiveness and coerciveness. These men are liable to have a vested interest in affirming and potentially defending attitudes that legitimize and condone sexually aggressive inclinations. They may be less swayed by anti-rape content than their noncoercive counterparts (Stephens & George, 2004). These high-risk men may benefit from a program that attempts to increase their motivation to listen and is presented in ways that are easy to understand and follow. The program should also be intentionally designed so that they will perceive the content as relevant (Foubert & McEwen, 1998). High-risk men may require multiple approaches to sexual violence prevention based on individual

differences. Sexual violence prevention with high-risk men may need to be multifaceted, with longer exposure to anti-rape messaging, and should be derived from etiological research (Stephens & George, 2009).

Program Content

The content of a program has also been found to be crucial in the effectiveness of sexual violence prevention programs. There are many aspects that contribute to the content of a successful sexual violence prevention program. In a meta-analysis of sexual assault education programs, Anderson and Whiston (2005) found that interventions that focus on gender-role socialization, provide general information about rape, discuss rape myths/facts, and address risk-reduction strategies have a more positive impact on participants' attitudes than rape empathy programs and interventions with unspecified content. However, in this review it was found that prevention programs that include a component intended to increase rape empathy were effective at evoking emotion in participants and thereby increasing empathy towards a rape survivor (Foubert & Newberry, 2006; O'Donohue, Yeater, & Fanetti, 2003; Schewe & O'Donohue, 1996; Stephens & George, 2009). An increase in rape empathy is an important finding given that previous research has found that participants evidencing more empathy toward survivors attributed more responsibility to the perpetrator, expressed more positive feelings toward the victim, rated the psychological impact of the victim as greater, and recommended longer prison sentences for offenders (Dietz & Byrnes, 1981). In addition, it is possible that programs that increase individuals' empathy for rape victims may serve to lessen the conflict victims feel, decrease victim blame by themselves and others,

increase their use of intervention services, and potentially decrease victims' risk of repeated assaults (Pinzone-Glover et al., 1998). Gidycz et al. (2002) also found that programs with an active component, such as audience participation or role-playing, seem to be more effective than passive programs. Also, rape prevention programs that address the sex role socialization practices that foster a rape-supportive environment may also show more positive results. Society encourages women to be demure and feminine, yet blames them for not successfully resisting or controlling male aggression. American culture encourages male aggression and female passivity (Milhousen, McBride, & Jun, 2006). If prevention programmers are able to address these dynamics, there is an increased possibility to identify and challenge the sex role socialization practices that currently exist. Another important program component is the inclusion of discussion about how both male and female bystanders can help change social norms to reduce sexual violence in their communities.

Length and Dosage of Programs

The length and dosage of sexual violence prevention programs has also been shown to impact the outcomes. Anderson and Whiston (2005) found that longer interventions are more effective than brief interventions in altering both rape attitudes and rape-related attitudes. Anderson and Whiston (2005) did not specifically test single-versus multi-session programming, however their findings do suggest that semester-long courses or multi-session workshops may be more effective at promoting positive change. In this review, it was also found that educational programs that are longer have more significant impact than shorter ones (Heppner et al., 1999; Moynihan & Banyard, 2008).

It was also found that repeated exposure to programming may increase its impact (Heppner et al., 1999).

Facilitation of Programs

Peer facilitated prevention programs have become more common on college campuses. Anderson and Whiston (2005) found that professional presenters were more successful than peer presenters in promoting positive changes. However, results of this review show that programs presented by peers were more effective at changing participants' behaviors or behavioral intentions (Banyard et al., 2007; Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Moynihan & Banyard, 2008; Orchowski, Gidycz, & Raffle, 2008). Peer educators may be more effective at communicating with similarly-aged students, and thus may be better able to convey information than professionals (Weisz & Black, 2009). Peer facilitation also allows for audience members to feel that the program is more relevant to them since they can see that some of their peers find it important. This idea corresponds with the elaboration likelihood model, which suggests that lasting attitude and behavior change occurs when participants perceive the messages as relevant to them (Petty & Cacioppo, 1986a).

Limitations

Overall, the studies in this review were helpful in addressing the effectiveness of sexual violence prevention programs on college campuses, but there were some limitations and future areas of research that need to be addressed. One key limitation in several studies is the assumption that a change in rape supportive ideologies will decrease the actual incidence of sexual aggression or rape. Even though a positive change in

sexual assault attitudes does not directly relate to a change in behaviors regarding sexual assault, it may lead to less traditional attitudes regarding sexual assault victims. Because more traditional attitudes have been found to be predictive of increased acceptance of forcible date rape (Fischer, 1986), an acceptance of violence toward women (Check & Malamuth, 1983), victim blaming (Weiss, 1989), a decreased ability to appropriately define a rape situation (Shotland & Goodstein, 1983), and self-reported sexually aggressive behavior in men (Muehlenahrd & Linton, 1987), the change in men's attitudes that is often evidenced in studies is promising. However, future research still needs to be conducted to evaluate behavior outcomes to ensure that a decrease in rape supportive ideologies leads to a decrease in the incidence of rape (Weisz & Black, 2009).

Another major limitation is the lack of longer periods of follow-up. Even though longer evaluations can be more challenging and costly, longitudinal evaluations need to be conducted to ensure that the changes in rape supportive ideologies and behaviors are consistent over time and do not rebound after a short period.

The methodological weaknesses in the evaluation process of sexual violence prevention programs is also a limitation. Hoefler (1994) states that evaluations are only of use if they provide adequate information, but many are based on designs that are not properly rigorous. Some studies utilized immediate pre- and post-testing formats (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006), which introduces sensitization issues. Perhaps the most confounding component of this research area is the selection of outcome measures. Virtually, no two studies have utilized the same measures, making cross-study comparisons difficult.

Another limitation is that participants' are asked to self-report their behaviors and beliefs, which may lead to inaccurate results due to social desirability bias. This can also pose a challenge in that the results of the evaluations are based on self-reported behaviors as opposed to observed behaviors. Continuing to develop and expand measures to assess behaviors and behavioral intent would be valuable for more accurate evaluation studies in the future.

The fact that most of the studies were evaluated by the same researcher who developed the prevention program is another major limitation. This could pose a conflict of interest in that the researcher would want his/her program to show promising results.

It would also be useful to evaluate the effectiveness of different types of program content in relation to one another. For example, an evaluation of the effectiveness of a theatrical presentation versus a video presentation or a lecture and discussion format would be useful to learn which type of program is most effective at changing attitudes and behaviors. Learning which program format is most effective at changing rape supportive ideology would be helpful for social workers attempting to develop new programs or improve already existing programs in that it would provide them with information on what particular aspects of prevention programs produce the best outcomes. This would also be very helpful in determining what type of program is most effective with high-risk populations.

As far as samples are concerned, there are several limitations of the studies in this review. A few studies provide mandatory prevention programs, so their sample audiences were required to attend, while others rely on volunteers to attend their presentations. Both

of these factors can affect the outcome of the study since there is no opportunity for randomized, controlled evaluations. Also, studying the effectiveness of already existing programs on a more racially and culturally diverse audience would help to identify changes that could be made to make the information more applicable to different types of audiences.

Quantitative methodologies are imperative to determining the effectiveness of sexual violence prevention programs, but it is believed that qualitative reactions from program participants would also be helpful in improving the relevancy of program information. Gaining insight about if and how the program affected participants would be of use in implementing changes to already existing programs. Qualitative methodologies can be especially helpful when trying to develop and evaluate programs for high-risk populations as it is crucial to learn directly from these populations what might work best.

Conclusion

Overall, there seem to be many sexual violence prevention programs that are effective in changing rape supportive ideologies among college males. However, there is still much work to be done to prevent sexual violence, especially with high-risk populations. Several new prevention methods are showing promising results, but more research needs to be conducted in order to gain a better understanding of the effectiveness of sexual violence prevention programs in actually preventing the occurrence of rape on college campuses. More rigorous evaluation designs need to be implemented in order to truly test the effectiveness of these interventions. Also, researchers need to stay open to the idea of continually revising their programs and continuing to evaluate them in order

to see what is most effective. Prevention is a critical component of social work practice and researchers need to dedicate time and resources to address the effectiveness of prevention programs in order to combat societal problems, such as sexual violence.

This literature review helped guide the development of many areas of my research. I made several decisions about the theory, content, and measures I used for my research based on this literature review.

Theoretical Framework

First, I incorporated both feminist theory and social learning theory in my study. Both of these theories are prominent in the development of sexual violence prevention programs. Also, these theories point to the role of societal norms in perpetuating sexual violence, which is a basis of the bystander approach to sexual violence that will be used in this study. Feminist theory and social learning theory also address the importance of working with the perpetrators of sexual violence, which are mostly high-risk males, in order to help prevent sexual violence.

Bystander Approach

I also used a bystander approach to sexual violence prevention as it has been shown to be a very promising direction for this type of prevention work. The bystander approach to sexual violence prevention focuses on men and women as bystanders to change social norms in a peer culture that supports abusive behaviors (Banyard et al., 2007; Foubert, 2000; Katz, 1993; Moynihan & Banyard, 2008). Norms are one of the most powerful societal and community influences in shaping behavior. They are regularities in behavior with which people generally conform, and they foster disapproval of deviance (Ullmann-

Margalit, 1990). More than a habit, norms are often based in culture and tradition. They are attitudes, beliefs, and standards that are taken for granted. In other words, norms are behavior shapers. They are the way in which the environment tells people what is okay and not okay. There are at least five kinds of damaging norms that contribute to an environment in which sexual violence can occur. There are norms about: (1) women: limited roles for and objectification and oppression of women; (2) power: value placed on claiming and maintaining power; (3) violence: tolerance of aggression and attribution of blame to victims; (4) masculinity: traditional constructs of manhood, including domination, control, and risk-taking; and (5) privacy: notions of individual and family privacy that foster secrecy and silence (Davis, Parks & Cohen, 2006). While most people do not commit sexual violence, and therefore it is not normal behavior, these kinds of social norms imply a level of acceptance and a sense of complacency about sexual violence. They promulgate a toxic environment in which sexual violence can take place and inhibit appropriate action while condoning inappropriate inaction. Given this, it is not surprising that some people commit sexual violence and many bystanders do not speak up or intervene.

Bystander interventions acknowledge and attempt to change these norms in order to create and sustain healthy norms. Bystander interventions approach participants, both men and women, as empowered bystanders who can confront sexist and abusive behavior among their peers, instead of potential perpetrators or victims. This type of format offers an approach that can also motivate men to attend out of a desire to help others, rather than accusing them of being actual or potential perpetrators (Foubert & Marriott, 1996, 1997).

Researchers found that 30% of men reported a bored and hostile response to standard interventions, which can create defensiveness in men and can shut down their willingness to engage the message (Neville & Heppner, 2002). Teaching men skills for helping women around issues of sexual violence removes issues of defensiveness resulting from accusatory tones and is enticing as a positive activity creating high motivation to absorb the messages being offered.

The bystander model targets all community members as potential bystanders and seeks to engage them in proactive behaviors that establish intolerance of violence as the norm, as well as reactive interventions in high-risk situations, resulting in the ultimate reduction of violence. The strategy is to educate socially influential people in the techniques of bystander intervention, who in turn influence others to join in, creating a sort of viral enthusiasm for the cause (Banyard et al, 2007; Edwards, 2009; Foubert, 2000; Katz, 1993).

Measures

I used outcome measures to assess both attitude and behavior changes related to sexually coercive behavior and bystander behaviors. Based on the literature, it seemed appropriate to measure both attitudes (rape myth acceptance and bystander attitudes) and behaviors (sexually coercive behavioral intentions, self-reported sexually coercive behaviors, and bystander behaviors). I realized that assessing risk status of the participants prior to the program evaluation is crucial in order to determine if the program effects are based on the entire population of participants or just the low-risk males. I used

the Modified Sexual Experiences Survey (M-SES; Dahl, 1993) to classify the participants into groups of low- and high-risk of using sexually coercive behavior.

I also assessed the program's effects on rape myth acceptance, as all eight studies in this review (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999; Moynihan & Banyard, 2008; Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009) evaluated the effectiveness of their program to reduce rape myth acceptance. Based on the literature, the Illinois Rape Myth Acceptance Scale (Payne et al., 1999) appears to be a very useful and effective measure to assess rape myth acceptance.

I used two instruments to measure sexually coercive behaviors and behavioral intentions. I readministered the Modified Sexual Experiences Survey at follow-up to assess self-reported sexually coercive behavior that occurred after posttest. I also administered a modified version of the Attraction to Sexual Aggression Scale (Berg et al., 1999) to measure sexually coercive behavioral intentions, such as Likelihood to Use Force (LF), Likelihood to Rape (LR), Likelihood to Use Coercion (LC), and Likelihood to Use Alcohol to attain sexual relations (LAlc).

Since the intervention used in this study is a bystander approach to sexual violence prevention, I also used two scales to measure bystander attitudes and behaviors. Measuring bystander attitudes and behaviors is a fairly new idea in sexual violence prevention program evaluations. Recently, as more bystander sexual violence prevention programs have been developed, measures to assess if the bystander component of the programs is working have also been developed. I used the revised version of the

Bystander Attitude Scale (BAS-R; McMahon, Postmus, & Koenick, 2011) to assess bystander attitudes and the revised version of the Bystander Behavior Scale (BBS-R; McMahon et al., 2011) to assess bystander behaviors that participants have engaged in during the five weeks between posttest and follow-up.

I also administered a background questionnaire to gain basic information about the participants to allow me to control for certain variables such as previous exposure to sexual violence prevention programming. The Marlowe-Crowne Social Desirability Scale was also used to statistically control for participants' socially desirable responses.

Chapter 3

Theoretical Framework

Introduction

In the past, “rape awareness” programs, which focus on delivering information about what rape is, how often it occurs, and how it affects victims, were very common. These interventions were non-theoretically based and appear to be the least successful prevention models (Schewe, 2002). Recently, sexual violence prevention programs are integrating theoretical foundations. Schewe (2002) states that it is important for developers of sexual violence prevention programs to reflect a clear belief about the causes and risk factors for sexual violence and base their curriculum on this belief. Prevention programs that are grounded in a theory seem to be the most effective at preventing sexual violence (Schewe, 2002).

This chapter discusses how both feminist theory and social learning theory guide sexual violence prevention programs. This chapter discusses these particular perspectives, in general, and then also addresses how these perspectives influence program content related to sexual violence prevention with high-risk males.

Feminist Theory

Feminism is a social movement whose basic goal is equality between women and men. Feminist theories were developed to explain the reasons for the pervasive gender inequality that exists in society. Feminist theories include methods of creating and organizing knowledge that assume the sociocultural construction of gender and the institutionalization of unequal power relations in society. Women’s experiences and

perspectives have been frequently excluded from traditional systems of knowledge, which tend to devalue them under “normative” male experience. Gender inequality is built into the structure of the gendered social order because the two statuses, women and men, are treated differently and have significantly different life chances (Lorber, 2010). Gender is a system of power in that it privileges some groups of people and disadvantages others (Lorber, 2010). Gender inequality is not an individual matter, but is deeply ingrained in the structure of societies. Gender inequality is built into the organization of marriage and families, work and the economy, politics, religions, the arts, and the very language we speak. Making women and men equal, therefore, necessitates social and not individual solutions (Lorber, 2010).

Feminist theory is prominent in sexual violence prevention literature (Banyard et al., 2007; Katz, 1993; Lonsway et al., 1998; Moynihan & Banyard, 2008; Salazar & Cook, 2006). If feminist theory is used as a framework through which to view sexual violence, we inherently examine the concepts of power, patriarchy, and gender (Bashir, 2003). In examining differential power relationships within society, the feminist approach argues that the most adequate explanation of the motivation for, and incidence of, sexual violence is found in the complex interplay between existing social structures, conventional attitudes, and socialization, in particular, the differential gender socialization between males and females in patriarchal society. Gender norms and expectations are acted out constantly in interactions with others, building and maintaining the gendered social order. From a feminist perspective, sexual violence is an extension of

the current legal, social, economic, and political systems in which we live, which manifest and reinforce male dominance over women (Lorber, 2010).

Sexual violence prevention is dependent upon changing the kinds of ideas and social norms that support a sexually violent culture. Prevention is about social change, changing the way we think about and treat each other. Social change is about a common understanding that we want to end the violence and oppression for all people. To prevent sexual violence, the patriarchal structures in society that permit sexual violence to occur must be changed. These changes must take place on a societal, not an individual, level. A feminist analysis of sexual violence would suggest that prevention efforts need to be directed at those who commit sexual violence, not those who are victims of sexual violence (Weisz & Black, 2009).

The bystander model is a more recent trend in the sexual violence prevention literature that has a basis in feminist theory as it focuses on changing social norms in a culture that supports sexual violence (Banyard et al., 2007; Foubert, 2000; Katz, 1993; Moynihan & Banyard, 2008). The bystander model of sexual violence prevention involves teaching bystanders how to intervene in situations that involve sexual violence. The bystander model gives all community members a specific role with which they can identify and adopt in preventing the community problem of sexual violence. This role includes interrupting situations that could lead to assault before it happens or during an incident, speaking out against social norms that support sexual violence, and having skills to be an effective and supportive ally to survivors. Additionally important about this perspective is that it may also provide an entry into broader community change. By

presenting material about sexual violence in the context of discussions about sense of community and the interconnections between members of the community, individuals and groups may begin to take on broader challenges in creating social change around these issues. A bystander approach can work within broader community models of change by providing a perspective that shows how all community members have a direct stake and role to play in sexual violence prevention, including community attitude change (Banyard et al, 2007).

Social Learning Theory

Social learning theory, often utilized in sexual violence research (Gidycz et al., 2001, Schewe & O'Donohue, 1996; Stephens & George, 2004), provides a framework for understanding, predicting, and changing human behavior. It explains how people acquire and maintain certain behavioral patterns, while also providing a basis for intervention strategies (Bandura, 1977). The theory is an expectancy model that involves six components: expectancies, skill building, observational learning, modeling, self-efficacy, and reinforcement (Lanier, Elliot, Martin, & Kapadia, 1998). Social learning theory posits that individuals learn behaviors from one another through observation, imitation, and modeling. Social learning theory explains how behaviors are learned in the context of reciprocal determinism, or the interaction between observed behaviors, cognitive factors, and external environments. These interactions affect self-efficacy by either encouraging or discouraging the performance of a particular behavior (Bandura, 1977).

Social learning theory does not view sexual aggression as inevitable, instead aggression is learned, shaped by consequences, and continues if reinforced. According to

social learning theory, violence against women endures because it is modeled at the individual and societal levels, it is deemed to have positive rewards for the perpetrator, and is rarely associated with serious punishment to the perpetrator. Rewards derived from the use of violence may include decreasing conflict-related aversiveness (e.g., feelings of tension, perceptions of neediness) (Jacobson et al., 1994) and increasing feelings of personal control (Dutton, 1995). Bandura's (1977) social learning model of aggression posits that aggressive behavior is the product of cognitions that (a) make reprehensible conduct ethically acceptable, (b) misconstrue the consequences of the behavior, and (c) devalue or attribute blame to the victim. Bandura's theory suggests that interventions that (i) alter rape supportive cognitions, (ii) decrease problematic rape outcome expectancies, or (iii) increase victim empathy could work to decrease the amount of sexual aggression committed by males (Schewe & O'Donohue, 1996). From a social learning perspective, sexual violence continues because there are no real consequences to perpetrators. From this perspective, in order to prevent sexual violence, we must work to change the societal response to sexual violence along with also changing the societal norms that currently exist that allow sexual violence to continue.

Conclusion

Sexual violence prevention researchers are increasingly recognizing the need to base programs on a theoretical framework. Both feminist theory and social learning theory are applicable to the bystander approach to sexual violence prevention with high-risk males. Feminist theory is useful for this study because it points to the fact that sexual violence prevention efforts need to be directed at those committing the violence, which

would be mostly high-risk males. Both feminist theory and social learning theory help guide the bystander approach to sexual violence prevention that is used in this study. The goal of the bystander approach is to begin to help individuals learn how to intervene as active, prosocial bystanders to help change the social norms that continue to allow sexual violence to occur. Since high-risk males are the majority of people committing sexual violence, it may be that working with them to help them learn how to be prosocial bystanders may be an effective way to help prevent sexual violence.

Chapter 4

Methods

Introduction

This chapter provides an overview of the research design and methods for this study as well as the research questions and hypotheses to be tested. Study participants are introduced. The measures utilized for the study are explained. The sexual violence prevention program utilized in the study is also outlined. Finally, data analysis procedures are presented.

This is a quasi-experimental study utilizing a pretest, posttest, follow -up, nonequivalent, comparison group design to evaluate the effectiveness of a theoretically-based, peer-facilitated, bystander approach to sexual violence prevention with university males who are at low- and high-risk of using sexually coercive behavior.

Research Questions

1. Is the bystander approach to sexual violence prevention effective at changing men's attitudes and behaviors about sexual violence?
2. Is the bystander approach to sexual violence prevention equally effective at changing attitudes and behaviors about sexual violence for both men who are at low-risk and high-risk of using sexually coercive behavior?
3. Does risk status, ethnicity, or fraternity leadership predict outcomes related to attitudes and behaviors about sexual violence?

Research Hypotheses

Hypothesis 1

University males who participate in a theoretically-based, peer-facilitated, bystander sexual violence prevention program will show significant positive changes on attitude and behavior outcome measures compared to the comparison group at posttest and five-week follow-up.

Rationale. The bystander model is an innovative approach to the widespread problem of sexual violence prevention across campuses (Banyard et al., 2004; Katz 1995; DeKeseredy, Schwartz, & Alvi, 2000; Foubert, 2000; Foubert & Marriott, 1997; Berkowitz, 2002). This approach involves teaching bystanders how to intervene in situations that involve sexual violence. While still involving programming that trains groups of individuals, this model takes next steps toward a broader community approach to prevention. Each component of the program is based on the empirical literature on bystander behavior (Berkowitz, 2002; Edwards, Jumper-Thurman, Plested, Oetting, & Swanson, 2000; Katz, 1995, 2003; Kilmartin & Berkowitz, 2001), as well as noted best practices regarding rape prevention (Lonsway, 1996). The program incorporates predictors of successful bystander intervention that can be reinforced through education: recognizing inappropriate behavior; skill building, requesting a commitment to intervene, and role modeling (Laner, Benin, & Ventrone, 2001; Christy & Voight, 1994).

Bringing in the Bystander, which is the program that will be evaluated in this study, has been evaluated with both university males and females in the general campus population and also with Greeks and athletes and has shown positive results. One

evaluation (Banyard et al., 2007) was conducted with a general campus population of males and females to evaluate the one-session (90 minutes) and two-session program (4.5 hours) formats. Participants in both treatment conditions showed improvements across measures of attitudes, knowledge, and behavior while the control group did not. These changes were maintained at the two-month follow-up. Therefore, one would expect university males who participate in a theoretically-based, peer-facilitated, bystander sexual violence prevention program will show significant positive changes on attitude and behavior outcome measures compared to the comparison group at posttest and five-week follow-up.

Operational Definitions.

Independent Variable: Bystander sexual violence prevention program

Operational Definition: *Bringing in the Bystander* prevention program as described in the following section titled “Program Selection.”

Dependent Variables.

Attitudinal Measures.

Dependent Variable: Rape myth acceptance

Operational Definition: Measured by the score attained on the short version (20-item) of the Illinois Rape Myth Acceptance Scale (IRMA; Payne et al., 1999). Further discussion of this instrument occurs under the section entitled “Measures.”

Dependent Variable: Bystander attitudes

Operational Definition: Measured by the score attained on the Revised Bystander Attitude Scale (BAS-R; McMahon et al., 2011). Further discussion of this instrument occurs under the section entitled “Measures.”

Behavioral Measures.

Dependent Variable: Sexually coercive behaviors

Operational Definition: The Modified Sexual Experiences Survey (M-SES, Dahl, 1993) was readministered at follow-up to assess self-reported sexually coercive behavior that occurred between posttest and follow-up. Further discussion of this instrument occurs under the section entitled “Measures.”

Dependent Variable: Sexually coercive behavioral intentions

Operational Definition: Measured by the score attained on a modified version of the Attraction to Sexual Aggression Scale (Berg et al., 1999), which was used to assess four behavioral intentions: Likelihood to Use Force (LF), Likelihood to Rape (LR), Likelihood to Use Coercion (LC), and Likelihood to Use Alcohol to attain sexual relations (LAlc). Further discussion of this instrument occurs under the section entitled “Measures.”

Dependent Variable: Bystander behaviors

Operational Definition: Measured by the score attained on the Revised Bystander Behavior Scale (BBS-R; McMahon et al., 2011). Further discussion of this instrument occurs under the section entitled “Measures.”

Hypothesis 2

Intervention effectiveness will be moderated by risk status; specifically, low-risk men will show greater improvement across outcome measures compared to high-risk men. However, high-risk men will show significant positive changes on attitude and behavior outcome measures compared to the comparison group at posttest and five-week follow-up.

Rationale. Based on a social learning framework, men who have engaged in sexually coercive behavior in the past (high-risk men) may be less receptive to anti-rape content. They are likely to have developed stubborn attitudes, expectancies, and habits commensurate with experiencing women as legitimate targets of sexual aggression and coercion. Attitudinally, past perpetration correlates to rape-supportive attitudes (Malamuth et al., 1995). Behaviorally, past perpetration predicts nonsexual aggression against women, arousal to rape depictions (Malamuth, 1986), and sexual harassment (Pryor, 1987). It also predicts a tendency to justify rape (Meuhlenhard, 1988) and to express higher empathy toward rapists rather than victims (Dietz et al., 1982). Finally, past perpetration predicts the self-reported likelihood of committing future rape if assured of not being caught (Malamuth, 1981). These findings attest to the close linkage between past sexual aggressiveness and the harboring of congruent attitudes and behavioral tendencies. Men who have been sexually aggressive or coercive in the past are liable to have a vested interest in affirming and potentially defending attitudes that legitimize and condone sexually aggressive inclinations. They are likely to be less swayed by anti-rape content than their noncoercive counterparts. By contrast, for noncoercive men, anti-rape

messages may fall on receptive ears. Messages debunking rape myths are presumably congruent with their experiences, attitudinal leaning, and behavioral inclinations. Therefore, one would expect that low-risk men will show greater improvement across outcome measures compared to high-risk men. However, high-risk men will show significant positive changes on attitude and behavior outcome measures compared to the comparison group at posttest and five-week follow-up.

Operational Definitions.

Independent Variable: Risk status

Operational Definition: Measured by the score attained on the Modified Sexual Experiences Survey (M-SES, Dahl, 1993), which is a measure used to assess self-reported sexually coercive behavior. High-risk status at pretest was determined by at least one admission to a sexually coercive behavior, whereas low-risk men reported no past sexually aggressive behavior. Further discussion of this instrument occurs under the section entitled “Measures.”

Dependent Variables.

Attitudinal Measures.

Dependent Variable: Rape myth acceptance

Operational Definition: Measured by the score attained on the short version (20-item) of the Illinois Rape Myth Acceptance Scale (IRMA; Payne et al., 1999). Further discussion of this instrument occurs under the section entitled “Measures.”

Dependent Variable: Bystander attitudes

Operational Definition: Measured by the score attained on the Revised Bystander Attitude Scale (BAS-R; McMahon et al., 2011). Further discussion of this instrument occurs under the section entitled “Measures.”

Behavioral Measures.

Dependent Variable: Sexually coercive behaviors

Operational Definition: The Modified Sexual Experiences Survey (M-SES, Dahl, 1993) was readministered at follow-up to assess self-reported sexually coercive behavior that occurred between posttest and follow-up. Further discussion of this instrument occurs under the section entitled “Measures.”

Dependent Variable: Sexually coercive behavioral intentions

Operational Definition: Measured by the score attained on a modified version of the Attraction to Sexual Aggression Scale (Berg et al., 1999), which was used to assess four behavioral intentions: Likelihood to Use Force (LF), Likelihood to Rape (LR), Likelihood to Use Coercion (LC), and Likelihood to Use Alcohol to attain sexual relations (LAlc). Further discussion of this instrument occurs under the section entitled “Measures.”

Dependent Variable: Bystander behaviors

Operational Definition: Measured by the score attained on the Revised Bystander Behavior Scale (BBS-R; McMahon et al., 2011). Further discussion of this instrument occurs under the section entitled “Measures.”

Hypothesis 3

Risk status, ethnicity, and fraternity leadership will predict outcomes related to attitudes and behaviors about sexual violence. Specifically, low-risk males will show more favorable outcomes on attitude (less acceptance of rape myths and higher likelihood to stop their own or someone else's sexually violent behavior) and behavior (less sexually coercive behaviors and behavioral intentions and more prosocial bystander behaviors) measures compared to high-risk males. Also, European-Americans will show more favorable outcomes on attitude (less acceptance of rape myths and higher likelihood to stop their own or someone else's sexually violent behavior) and behavior (less sexually coercive behaviors and behavioral intentions and more prosocial bystander behaviors) measures compared to African-Americans, Asians, Hispanics, and those who self-identify as "other." Finally, fraternity leaders will show more favorable outcomes on attitude (less acceptance of rape myths and higher likelihood to stop their own or someone else's sexually violent behavior) and behavior (less sexually coercive behaviors and behavioral intentions and more prosocial bystander behaviors) measures compared to general fraternity members.

Rationale.

Risk status. See rationale described in section entitled "Hypothesis 2."

Ethnicity. Most sexual violence prevention programs are developed with European-Americans in mind (Breitenbecher, 2000; Morrison, Hardison, Mathew, O'Neil, 2004). However, based on the Elaboration Likelihood Model (ELM), which suggests that lasting attitude and behavior change occurs when participants are motivated

to hear a message, are able to understand it, and perceive the message as relevant to them (Petty & Cacioppo, 1986a, 1986b), one of the goals of sexual violence prevention programming should be to design personally relevant prevention programs for all participants so that they feel more motivated to listen to and cognitively engage in the message. In order to accomplish this goal, it is critical that prevention programmers attempt to infuse racial and cultural material, such specific information about race-related rape myths, statistics on prevalence rates for different ethnicities, and having guest speakers of different ethnicities discuss their sexual violence experiences in a cultural context, into their prevention programs in order to better engage all the ethnicities that might attend the program. The reason for the inclusion of this culturally relevant information is not because different ethnicities necessarily have different attitudes regarding sexual violence, but to increase the personal relevancy of the program messages for participants of different ethnicities and thus encourage all participants to process the program messages more effectively (Heppner et al, 1999). Heppner and colleagues (1999) conducted an evaluation of two sexual violence prevention programs: one that infused culturally relevant form and content and one that did not specifically include any explicit culture related information. They found that African-American men in the culturally relevant group self-reported more engagement in the intervention than the African-American men in the colorblind intervention. Since the *Bringing in the Bystander* program evaluated in this study does not specifically infuse culturally relevant information into the program, one would expect that European-Americans will show

more favorable outcomes on attitude and behavior measures compared to African-Americans, Asians, Hispanics, and those who self-identify as “other.”

Fraternity leadership. Bystander sexual violence prevention programs propose to target socially influential individuals from across community subgroups, such as fraternity leaders. The goal is for these leaders to engage in a basic education program that will equip them to integrate moments of prevention within existing relationships and daily activities. By doing so, new norms will be introduced and those within their sphere of influence (general fraternity members) will be significantly influenced to move from passive agreement that violence is wrong to active intervention to stop violence (Banyard et al., 2007; Edwards, 2009; Foubert, 2000; Katz, 1993). The strategy is to educate socially influential people (fraternity leaders) in the techniques of bystander intervention, who in turn influence others to join in, creating a sort of viral enthusiasm for the cause (Banyard et al, 2007; Edwards, 2009; Foubert, 2000; Katz, 1993). Fraternity leaders represent high status community members who are visibly prominent and could serve as key leaders in changing social norms issues of sexual violence (Katz, 1993; Moynihan & Banyard, 2008). Therefore, one would expect that fraternity leaders will show more favorable outcomes on attitude and behavior measures compared to general fraternity members.

Operational Definitions.

Independent Variables.

Independent Variable: Risk status

Operational Definition: Measured by the score attained on the Modified Sexual Experiences Survey (M-SES, Dahl, 1993), which is a measure used to assess self-reported sexually coercive behavior. Further discussion of this instrument occurs under the section entitled “Measures.”

Independent Variable: Ethnicity

Operational Definition: Measured by self-report of participants on background questionnaire. Further discussion of this instrument occurs under the section entitled “Measures.”

Independent Variable: Fraternity leadership

Operational Definition: Measured by self-report of participants on background questionnaire. Further discussion of this instrument occurs under the section entitled “Measures.”

Dependent Variables.

Attitudinal Measures.

Dependent Variable: Rape myth acceptance

Operational Definition: Measured by the score attained on the short version (20-item) of the Illinois Rape Myth Acceptance Scale (IRMA; Payne et al., 1999). Further discussion of this instrument occurs under the section entitled “Measures.”

Dependent Variable: Bystander attitudes

Operational Definition: Measured by the score attained on the Revised Bystander Attitude Scale (BAS-R; McMahon et al., 2011). Further discussion of this instrument occurs under the section entitled “Measures.”

Behavioral Measures.

Dependent Variable: Sexually coercive behaviors

Operational Definition: The Modified Sexual Experiences Survey (M-SES, Dahl, 1993) was readministered at follow-up to assess self-reported sexually coercive behavior that occurred between posttest and follow-up. Further discussion of this instrument occurs under the section entitled “Measures.”

Dependent Variable: Sexually coercive behavioral intentions

Operational Definition: Measured by the score attained on a modified version of the Attraction to Sexual Aggression Scale (Berg et al., 1999), which was used to assess four behavioral intentions: Likelihood to Use Force (LF), Likelihood to Rape (LR), Likelihood to Use Coercion (LC), and Likelihood to Use Alcohol to attain sexual relations (LAlc). Further discussion of this instrument occurs under the section entitled “Measures.”

Dependent Variable: Bystander behaviors

Operational Definition: Measured by the score attained on the Revised Bystander Behavior Scale (BBS-R; McMahon et al., 2011). Further discussion of this instrument occurs under the section entitled “Measures.”

Methodology

Quasi-Experimental Design

A quasi-experimental design was chosen for this study since the participants are a convenience sample of low- and high-risk university males. The participants were randomly assigned to the intervention and comparison groups, but it was not feasible to randomize these participants from the population as a whole. This quasi-experimental, nonequivalent groups design is the most realistic design to evaluate the *Bringing in the Bystander* program with low- and high-risk university males.

Sample Size

A power analysis was computed using the methods outlined by Cohen (1969, 1992) to determine the sample size needed to provide sufficient statistical power. Cohen argues that experiments should strive for a minimal power of .80 with a medium effect size. An *a-priori* power analysis was computed in G*Power 3.1.2 (Erdfelder, Faul, & Buchner, 1996) to determine prospectively the appropriate sample size for the study hypotheses. Based on a one-tail test, a medium effect size of .5, power of .90, and an alpha level of .05, the total number of participants needed for this evaluation is 140 ($t = 1.66$, $df = 138$); with 70 participants split evenly among the intervention and comparison groups.

Bringing in the Bystander Program in 2011

The *Bringing in the Bystander* (BITB) program can be administered in a one-session (90 minutes) or two-session (4.5 hours) format. The goal of the 2011 program research was to implement and evaluate the 4.5 hour version of the BITB program with

high- and low-risk university males. Thus, the BITB program was conducted with fraternity members from Fraternity and Sorority life in November 2011. However, due to the low attendance (39 participants) at this program, the evaluation component was not feasible. I decided to use this program implementation as a pilot program. There were several benefits to conducting the pilot program. First, 39 fraternity members participated in either the BITB program or a comparison group program (alcohol awareness or suicide prevention) during this implementation of *Bringing in the Bystander*. Second, I was able to create a working relationship with both the director of Fraternity and Sorority Life and the assistant director of the Relationship Violence and Sexual Assault Prevention (RVSP) program at UTA. This relationship allowed me to ensure future BITB program implementation with fraternity members with a sufficient number of participants to conduct an evaluation of the program. There was also more time for the RVSP program assistant director and I to recruit and train more peer educators to implement the BITB program in 2012. I was also able to learn the most effective ways to implement and evaluate the BITB program with Fraternity and Sorority Life. For example, I learned how to respond to some of the participants' questions about the informed consent process. I also learned how best to manage the participants when trying to randomize them into comparison and intervention groups. I realized that the peer educators could help me direct participants to the correct group upon entering the program room. I also realized that having a visual component to aid in the description of the informed consent and randomization process would be helpful, so I developed a PowerPoint presentation to help manage the program administration.

Study Sample

The study took place at the University of Texas at Arlington (UTA), which is located in the Dallas-Fort Worth metroplex. UTA has about 33,000 students and is a very diverse campus including over 21% Hispanics, about 14% African-Americans, 10% Asian-Americans, and 9% international students (University of Texas at Arlington, 2013). The participants were recruited from the UTA student population by working with Fraternity and Sorority Life staff on campus. Fraternity members were chosen as the participants as there is a higher probability that there are more high-risk males in this population (Garrett-Gooding & Senter, 1987; Katz, 1993; Schwartz & DeKeseredy, 1997). Fraternity and Sorority Life staff did make participation in the bystander prevention program mandatory for their members. However, I recruited students to participate in the evaluation component of the program. The participants were informed that they did not have to take part in the evaluation of the study to be part of the program, however very few participants declined to participate in the evaluation component.

Implementation Fidelity and Process Evaluation

To ensure successful program implementation, I focused on determining the extent to which the *Bringing in the Bystander* program and its evaluation proceeded as planned, that each prevention educator was trained to effectively present the program as the curriculum indicates, and that all participants' received the full program. The RVSP assistant director, the Fraternity and Sorority Life director, and I focused on identifying potential barriers to successful implementation in the preliminary stages of the project. Instrumentation used to collect process evaluation data consisted of meeting minutes and

fidelity checklists. A process evaluation for this project was in place to accomplish the following tasks:

- A. Ensure peer educators from the Relationship Violence and Sexual Assault Prevention Program (RVSP) at UTA are well trained on substantive issues related to sexual violence prevention and the Bringing in the Bystander curriculum.*

The RVSP program staff held a two-day long training session for nine peer educators. The training covered basic information and a general overview of the issues that surround sexual violence at the university level, a discussion of potential issues that might arise during the presentations, information on how to assist students who disclose previous sexual victimization, and a detailed training on the BITB curriculum with an emphasis on the importance of fidelity to the curriculum. Peer educators were also required to practice presenting the program with their co-presenter on their own time. They were also required to present the program to other on-campus populations prior to presenting BITB to fraternity members for this evaluation. Peer educators were given the opportunity to ask questions after each presentation to help them feel better prepared to handle questions during the fraternity presentations. All peer educators were required to attend all components of this training.

- B. Ensure peer educators are well versed in group facilitation skills.*

As part of the peer educators' training, the RVSP staff included information on effective group facilitation. Training topics included: The role of

the facilitator, responsibilities of a facilitator, handling difficult situations such as disclosure of abuse, managing uncomfortable discussions related to sexual violence, and specific tips on how to present to high-risk males.

C. Schedule meeting with the RVSP assistant director and Fraternity and Sorority Life director and assistant director to provide them with basic information on the BITB program and evaluation and enlist support for the program implementation and evaluation in 2012.

Since the BITB program held in November 2011 did not have enough participants to conduct an evaluation, I met with the RVSP assistant director and Fraternity and Sorority Life director and assistant director in May 2012 to determine if another implementation and evaluation of the program was possible. During this meeting, I informed the RVSP assistant director and the Fraternity and Sorority Life director what I would need from each of them in order to effectively evaluate the program and obtained their commitment to provide the necessary components for the program implementation and evaluation to be conducted effectively. The RVSP assistant director agreed to provide trained peer educators to facilitate the program in several groups of no more than 30 participants per group. The director of Fraternity and Sorority Life said that he believed the low attendance during the 2011 program implementation was partly due to the length of the program (4.5 hours). It became clear that the only way to receive support for the program implementation and its evaluation was if we presented the shorter version (90 minutes) for the 2012 program. The director and

assistant director of Fraternity and Sorority Life agreed to host the BITB program in October 2012 in a two-hour time frame, which included the 90-minute program and administration of the pre and post surveys, along with the informed consent discussion. They also agreed to make this program a priority on the fall calendar by presenting it to fraternity members as the Greek 201 program for the year. Greek 201 is presented to fraternity members every year, yet the program content of Greek 201 changes yearly. More fraternity members usually attend Greek 201 since it is part of their regularly scheduled yearly calendar. They agreed to make attendance at the program mandatory to help ensure at least 140 participants (70 in the comparison group and 70 in the intervention group) attended. Fraternity and Sorority Life staff also agreed to find a topic for the comparison group program. They also agreed to reserve all the necessary rooms in the University Center to accommodate the program participants in groups of no more than 30 participants for the intervention group and as large as needed for the comparison group program.

The RVSP assistant director and Fraternity and Sorority Life staff were supportive of the BITB program. However, during our meetings, Fraternity and Sorority Life staff expressed concern about the evaluation component for several reasons. First, they found it challenging to implement the program with a comparison group since the fraternity members were not used to attending two different programs presented at the same time. Another major concern was the

program length. They were also concerned that some of the fraternity members had seen the pilot program the year prior.

In order to alleviate their concerns, we discussed several options. The RVSP assistant director assisted Fraternity and Sorority Life staff in determining a relevant comparison group program. Since the BITB program can be presented in either a 4.5-hour version or a 90-minute version and they were concerned with program length, we agreed to present the 90-minute version of the program for this evaluation. Another reason to present the 90-minute version of the BITB program is that the BITB program has been adopted by the university and many on-campus organizations are requesting the 90-minute program versus the 4.5-hour program to be presented for their members. So, an evaluation of the 90-minute version would appear to be more useful to the university. I addressed the final concern by informing them that since we will be presenting the 90-minute version of the program instead of the 4.5-hour version, then the participants who already saw the 4.5-hour version last year will actually see a different program. I also informed them that seeing the program two years in a row can only be beneficial in that the information gained from attending the program will be helpful for the participants. The director of Fraternity and Sorority Life and the assistant director of the RVSP Program at UTA were supportive of this project and willingly worked with me to implement the program and its evaluation (See Appendix B for letters of support).

D. Establish continuous meetings between RVSP assistant director, Fraternity and Sorority Life director and assistant director, and program evaluator to ensure program implementation was progressing as scheduled.

Meetings were scheduled, as needed, between the RVSP assistant director, Fraternity and Sorority Life director and assistant director, and myself to discuss and explore issues related to the planning and implementation of the BITB program and its evaluation. These meetings focused on identifying the best approach to implementing the BITB program with fraternity members, deciding on the comparison group topic, the most effective way of obtaining pre, post, and follow-up data for the evaluation, and detailed discussions of the logistics for the program presentation date. These meetings took place from May 2012 to October 2012 when the program was implemented and evaluated. I sent out meeting minutes to the RVSP assistant director and Fraternity and Sorority Life director after each of our meetings to ensure that everyone agreed with the tasks and deadlines that were assigned.

E. Ensure fidelity by developing a fidelity checklist.

To establish treatment fidelity between the three intervention group programs, I established a fidelity checklist that was filled out by each peer educator after each presentation (see Appendix C). I also had an extra peer educator present in each intervention program to serve as an observer. The observer in each program also completed a fidelity checklist. The fidelity checklist included items such as the number of participants in the program, the

length of the program, the number of questions asked during the program, the number of disruptions that occurred during the program, the amount of time spent discussing both sexual violence content and bystander content. The checklist also included items related to the discussion that occurred during the program, such as what percent of participants engaged in discussion. Peer educators were also asked to rate on a six-point Likert scale how meaningful the discussion was. The checklist also included open-ended questions that asked peer educators to list any issues, ideas for improvement, corrections related to the administration of the program, challenging questions/concerns that came up during the program, and how they handled each of the questions/concerns listed. The answers to these questions were used to improve future implementations of the BITB program. The two ideas for improvement that can help future BITB program implementations run more smoothly would be to have larger rooms to accommodate all the participants without everyone feeling too cramped and more time to present the program so the end of the program is not rushed. The information the peer educators provided about what challenging questions came up during the program and how they handled those questions was included in the peer education training for future peer educators.

Results, based on the data collected from the nine fidelity checklists (six from the program facilitators and three from the observers), showed that the participants received the full program: one intervention group program was 1.5 hours long, while the other two were one hour and forty minutes long. There were

few discrepancies between the fidelity checklists of the two facilitators and the observer in each of the three intervention groups. There were about the same number of participants in each of the three intervention groups: 27 participants in one group and 26 participants each in the other two groups. The number of questions asked during the programs differed slightly between the three intervention groups. One group stated they only had about six to seven questions asked throughout the program, while the other two programs stated they had between 20-30 questions asked throughout the program. The number of disruptions that occurred during the three programs ranged from three to ten.

Results of the process evaluation related to the content of the discussion and the participants' engagement in the discussion show that the discussion component of the program varied slightly between the three intervention groups. The time spent discussing sexual violence content ranged from 20 to 40 minutes and the time spent discussing bystander content ranged from 30 to 60 minutes. The percentage of participants who engaged in the discussion varied between the three programs. Two of the programs had about 60% of the participants engaged in the discussion while the other program only had about 35% of the participants engaged in the discussion. When peer educators were asked to rate how meaningful the discussion was on a scale from one to six with one indicating "not meaningful at all" and six indicating "very meaningful", the results varied slightly between the intervention programs. Two programs' discussions were rated as a six which indicates "very meaningful", while the third program was rated at four.

One-way ANOVAs were used to evaluate the difference in scores between the three intervention groups across all dependent measures at pretest, posttest, and follow-up. No significant differences were found between the three intervention groups on any dependent measures at any time period.

Procedures

A quasi-experimental design was used to compare the effectiveness of the *Bringing in the Bystander* program with both low- and high-risk university males in intervention and comparison groups. The pretest included informed consent and the administration of all measures. About 30 minutes were allotted for participants to complete the pretest measures. Participants were randomized into the comparison and intervention conditions by drawing a colored card from a bag upon entering the Rio Grande room at the University Center where the pretest was administered. Based on the color of the card they drew, they were asked to sit on opposite sides of the room with one side reserved for participants assigned to the comparison group and the other side reserved for participants assigned to the intervention group. After completing the informed consent and pretest measures, the intervention group participants were divided into three groups of no more than 30 participants each and were escorted to three separate rooms on the second floor of the University Center by their respective peer educators. The participants in the intervention condition received the 90-minute *Bringing in the Bystander* prevention program. Each intervention program was presented by two peer educators, one male and one female.

The comparison group participants stayed in the Rio Grande room and received an LGBT training program presented by the Dallas Resource Center staff. This training included information on gender roles, sexual identity, and sexual behavior. There was an emphasis on the idea of sexual orientation being different than gender identity. They also discussed the fact that language matters and presented different terms to avoid when interacting with the LGBT population. There was a discussion about the “coming out” process and an overview of the transgendered experience. Finally, ideas were discussed about how the straight community can be allies to the LGBT community.

The posttest measures were administered following both the comparison and intervention programs. The follow-up survey measures were administered five weeks after each program. As recommended by the director of Fraternity and Sorority Life, I obtained the follow-up data by attending each fraternity chapter’s meeting and administering the survey in person during that meeting. There were members from 16 UTA fraternities that attended the BITB program. I asked the fraternity presidents to sign up for a follow-up time period before leaving the program on the day of implementation, but only five fraternities signed up at that time. I contacted each fraternity president via email and phone several times to attempt to schedule the follow-up survey administration at their fraternity meeting five weeks after the program. I was able to attend eight fraternity meetings and collect the follow-up data for those fraternities. Two fraternities who I had scheduled a follow-up date with canceled: one fraternity was on inactive status during the follow-up time period and the other stated that they were not having their regularly scheduled meeting as the semester was coming to an end. Most of the fraternity

chapter meetings were scheduled for Sunday or Monday nights between 6:00 and 9:00 pm, so there were several meeting dates and times that overlapped, so I had to decide which meetings to attend. If two meetings overlapped, I decided to attend the meeting for the fraternity that had the most participants attend the program to try to ensure the most follow-up data. I did not arrange follow-up meetings with five of the fraternities, who had four or fewer members attend the program, since their meeting times overlapped with other fraternity chapters who had more members attend the program. I was not able to schedule a follow-up with the last of the 16 fraternities because I was not able to contact the president. I attempted to contact him by email and phone many times. I also enlisted the support of Fraternity and Sorority Life staff in contacting him, but was still not able to make contact with him. The main concern with obtaining the follow-up data in this manner was that if the participant who attended the program was not present at the one fraternity meeting I attended, then I was not able to obtain their follow-up data. However, the director of Fraternity and Sorority Life recommended this as the best way to obtain the most follow-up data. He stated that the participants would not complete a mailed or online survey.

Peer Educators

Peer educators from the Relationship Violence and Sexual Assault Prevention Program (RVSP) at UTA presented the *Bringing in the Bystander* program. I worked with the assistant director of RVSP at UTA to recruit peer educators from the university to help present *Bringing in the Bystander*. Peer educators were recruited by advertising at RVSP presentations across campus and UTA activities fairs. Peer education recruitment

announcements were also posted on the RVSP email list and Facebook page. Those interested in becoming an RVSP peer educator had to complete an application and attend an interview with the RVSP assistant director.

Peer educators received two full days of sexual violence prevention training conducted by the RVSP Assistant director and the RVSP Masters Social Work (MSW) intern. The training provided basic information and a general overview of the issues that surround sexual violence. The training also provided basic information on relationship violence and how to work with the LGBTQA population. The training included discussions about gender roles, rape culture, healthy relationships, ethics, and theories. Skills development around programming, facilitation, presenting, team building, leadership skills, and crisis intervention was also a large part of the training. The peer educators also attended a Certified Peer Educator (CPE) training conducted by The BACCHUS Network, which is a nonprofit corporation that promotes peer to peer strategies as effective tools in health and safety education. The CPE training is a 12-hour foundation training suitable for any health and safety focused collegiate peer education group. The training concentrated on the skills needed by all peer educators to understand the basics of prevention, become a caring helper to others, provide awareness on health and safety risks, make referrals of students at-risk to professionals, conduct educational programs and events, increase their leadership abilities, increase awareness of personal wellness, and teach team building. The peer educators also received specific training on the BITB curriculum and the importance of fidelity to the BITB curriculum was emphasized. They were also provided with information about on-campus and off-campus

resources for survivors and students. Finally, the training addressed any potential issues that may arise during the program presentations.

The requirements of the peer educators throughout the semester included attendance at two team meetings a month where they were provided with information, resources, more content training, troubleshooting training, team building skills, leadership and facilitation skills, self-awareness skills, and how to appropriately address certain topics and issues. They were also required to facilitate three BITB programs/presentations each month with different campus organizations.

Six peer educators (three male and three female) presented the BITB program to the fraternity members. These six peer educators were selected out of the nine total peer educators to present the BITB program by the assistant director of the Relationship Violence and Sexual Assault Prevention program based on who had presented the most BITB programs in the past and was most comfortable with the content. The presentations were co-facilitated by one male and one female peer education team. One of the peer educators was a sophomore, two were juniors, two were seniors and one was a graduate student. Their majors included nursing, interdisciplinary studies, political science, English, and a dual masters in sociology and social work. The peer educators were of varying ethnicities including European-American, African-American, Asian, and Hispanic.

Intervention Group Program

Banyard and colleagues' (2004) *Bringing in the Bystander* prevention program was used in this study (See Appendix D or <http://www.unh.edu/preventioninnovations> for

further information). The *Bringing in the Bystander* program is based on studies that point to the role of community norms as a significant cause of sexual violence particularly in communities like college campuses. This program focuses on increasing community members' receptiveness to prevention messages and training and supporting prosocial bystander behaviors with the intent of preventing assaults from happening and assisting survivors who may disclose. The main goal of this program is to work to promote attitude and behavior changes in individuals that are intended to then link to individual empowerment to contribute to community changes and shifts in broader community norms. The *Bringing in the Bystander* program can be administered in a one-session (90 minutes) or two-session (4.5 hours) format. In this study, the 90-minute version of the program was administered in one afternoon.

The bystander model is an innovative approach to the widespread problem of sexual violence prevention across campuses (Banyard et al., 2004; Katz 1994; DeKeseredy, Schwartz, & Alvi, 2000; Foubert, 2000; Foubert & Marriott, 1997; Berkowitz, 2002). This approach involves teaching bystanders how to intervene in situations that involve sexual violence. While still involving programming that trains groups of individuals, this model takes next steps toward a broader community approach to prevention. The bystander model gives all community members a specific role, which they can identify with and adopt in preventing the community problem of sexual violence. This role includes interrupting situations that could lead to assault before it happens or during an incident, speaking out against social norms that support sexual violence, and having skills to be an effective and supportive ally to survivors.

Each component of the program is based on the empirical literature on bystander behavior (Berkowitz, 2002; Edwards et al., 2000; Katz, 1995, 2003; Kilmartin & Berkowitz, 2001), as well as noted best practices regarding rape prevention (Lonsway, 1996). The program incorporates predictors of successful bystander intervention that can be reinforced through education: recognizing inappropriate behavior; skill building, requesting a commitment to intervene, and role modeling (Laner et al., 2001; Christy & Voight, 1994). Following from recommendations from the college campus rape prevention literature, the program uses peer educators (DeKeseredy, Schwartz & Alvi, 2000), single sex groups (Katz, 1994), and active learning methods to address knowledge, attitudes, and behavior.

Bringing in the Bystander has been evaluated with both university males and females in the general campus population and also with Greeks and athletes and has shown positive results. Results of one evaluation (Moynihan & Banyard, 2008) show that the two-session program (4.5 hours) as compared to the one-session program (90 minutes) may be warranted for fraternities and men's athletic teams as these groups may require a "higher dose" intervention when compared with students in the general university population. Another evaluation (Banyard et al., 2007) was conducted with a general campus population of males and females to evaluate the one-session (90 minutes) and two-session program (4.5 hours) formats. Participants in both treatment conditions showed improvements across measures of attitudes, knowledge, and behavior while the control group did not. These changes were maintained at the two-month follow-up.

The program is designed to be administered in single-sex groups led by a pair of peer leaders (one male and one female). A one-woman, one-man team was chosen to model women and men working together successfully and respectfully, with the emphasis on the male member of the team recognizing his female counterpart as a knowledgeable co-leader. The program is scripted and includes a facilitator's guide.

Program content covers basic information about prevalence, causes, and consequences of sexual violence. It also includes discussions of how community members can play important prevention roles as bystanders observing risky situations before and during acts of sexual violence (e.g., observing a very intoxicated person being lead into a bedroom at a party by a group of people) and afterward if approached by a friend who discloses that they have been a victim. Active learning exercises, such as role playing, are used to help participants think about how they might intervene safely and be a supportive ally to survivors. Particular emphasis is placed on participants' own safety and on using resources such as campus police and rape crisis center resources. Participants are also asked to generate a "bystander plan" and to sign a pledge (both of which they are asked to keep) that they would be active, prosocial bystanders in the community.

During the program, participants are introduced to the notion of bystander responsibility, examine issues relating to sense of community membership, and are asked to draw upon their own experiences. Students also increase their awareness of sexual violence and are given an opportunity to apply bystander responsibility to sexual violence. Finally, the program is designed to increase awareness among participants

about the importance of personal safety, resources available to aid them during intervention, and understanding the decision-making process behind successful bystander intervention. Students are also given information about campus resources, and facilitators serve as role models for expected behaviors (Banyard et al., 2004).

Threats to Validity

This quasi-experimental research design attempted to control for several threats to internal validity such as history, maturation, testing, selection, and attrition. The threat of testing may have been a problem in that participant's scores may have been influenced by taking the measures more than once, but this was necessary in order to evaluate change in attitudes and behaviors. To attempt to control for these threats to internal validity, the study included a comparison group that also completed the measures at the same time as the intervention group. Two threats to internal validity that were more challenging to control for were selection and attrition. Since the sample for this study was chosen from a convenience sample of low- and high-risk university males, it was more challenging to control for selection bias. Also, the attrition rate may have posed a threat to internal validity. Since the pretest was given directly before the program and the posttest directly after the program, most of the participants completed both the pre and posttests. However, attrition was still a concern with the five-week follow-up. As stated above in the section entitled "Procedures", I discussed with the director of Fraternity and Sorority Life different options that were available to implement the follow-up survey. We decided the best way to obtain the follow-up data was to have the participants complete the survey during their individual fraternity meetings.

The main threats to external validity with this evaluation design were reactive effects of testing, reactive settings, and unrepresentative samples. Pre-testing the participants may have caused them to react differently to the program than they would have had they not taken the pretest. Another threat that the researcher attempted to control for is the reactive settings, which involves the fact that the subjects knew that they were part of a study, so they may have reacted differently. The researcher attempted to control for this by having the program presented as Greek 201, which is part of the Fraternity and Sorority Life's general programming calendar (as discussed in the section above entitled "Implementation Fidelity and Process Evaluation") and also by having the program be a component of the Relationship Violence and Sexual Assault Prevention Program (RVSP) on campus. The final threat to external validity was unrepresentative samples, since the sample was not randomly selected. Since this study used a convenience sample, it was not possible to generalize to the university population as a whole. With future replication of this evaluation, the hope is that there will be an opportunity for future generalizations.

Measures

Background Questionnaire

In order to control for certain variables, such as previous exposure to sexual violence prevention programming, a background questionnaire was used to collect basic demographic information, such as age, ethnicity, class standing, sexual identification, fraternity membership, athletics participation, housing situation, previous exposure to sexual violence prevention, and attendance at the BITB pilot program (See Appendix C).

Risk Status

Modified - Sexual Experiences Survey

The study's second hypothesis states that intervention effectiveness will be moderated by risk status; specifically, low-risk men will show greater improvement across outcome measures compared to high-risk men. The independent variable of risk status was measured using a modified version (M-SES; Dahl, 1993) of the Sexual Experiences Survey (SES; Koss & Oros, 1982). The M-SES was used to measure self-reported sexually coercive behavior and served as the basis of participant classification into sexually coercive and non-coercive groups. High-risk status at pretest was determined by at least one admission to a sexually coercive behavior, whereas low-risk men reported no past sexually aggressive behavior. For multiple regression analyses, risk status was measured as a continuous variable by summing the responses to items 1-18 on the M-SES. Scores range from 0-72 with higher scores indicating higher risk for using sexually coercive behaviors.

This instrument involves three modifications from the original SES. First, to reduce impression management, several items were reworded to replace the term *threaten* with *persuaded* or *said* or *told*, and to eliminate the phrase *physical force*. Second, items describing milder forms of sexually coercive activities were added to the survey. Specifically, response options concerning nonconsensual petting were included ("fondled a woman's breast after she said she didn't really want you to," "engaged in kissing or petting with a woman when she didn't really want you to," "continued touching a woman's vagina after she said she didn't really want you to.") Third, the response format

across the 18 items consists of a 5-point Likert scale that assesses the frequency of each behavior on a scale ranging from 0 (never) to 4 (10 or more times), replacing the original dichotomous Yes-No response format.

Wheeler, George, and Dahl (2002) reported acceptable reliability in a previous sample ($\alpha = .69$); reliability with the current sample ($\alpha = .60$) is also acceptable. Findings from two studies support the construct validity of this instrument. First, when this instrument was used to classify men, coercive men reported that in the future they would be more likely to use coercive tactics, more likely to commit rape, and less likely to desist unwanted sexual advances, compared to noncoercive men (Dahl, 1993). Second, coerciveness, as assessed with this instrument, correlates with both the hostile masculinity and impersonal sex components of Malamuth et al.'s (1995) confluence model of sexual aggression (Wheeler et al., 2002) (See Appendix C).

Attitudinal Measures

Two outcome measures were used to evaluate changes in attitudes related to sexual violence and bystander attitudes. The Illinois Rape Myth Acceptance Scale – Short Form was used to assess rape myth acceptance. The Bystander Attitudes Scale – Revised was used to assess bystander attitudes.

Rape Myth Acceptance

The dependent variable of rape myth acceptance was measured using the Illinois Rape Myth Acceptance Scale – Short Form. The Illinois Rape Myth Acceptance Scale (IRMAS; Payne et al., 1999) was used to measure rape myth acceptance and addresses two shortcomings of prior work: 1) the failure to address significant aspects of the rape

myth construct (i.e., the issues of victim deservedness and characterization or motivation of perpetrators); and 2) the lack of structural investigations due to the unlikelihood that all rape myths would function the same way across all individual groups. Payne et al. (1999) developed this scale through six studies including a factor analysis for construct definition and item pool selection, a complete-link cluster analysis to determine the structure and dimensions of the scale, item pool selection based on fit to a hierarchical model, and a construct validity study correlating the IRMAS to seven similar measures ($r =$ between .50 and .74, $p < .001$). They also conducted a study where groups known to differ in rape myth acceptance scored differently as predicted on the IRMAS ($p < .001$) and a validity study correlating the IRMAS scores with a content analysis of open-ended scenarios written by participants that were analyzed for rape myth content ($r = .32$, $p < .05$).

The Illinois Rape Myth Acceptance Scale – Short Form (Payne et al., 1999) is a 20-item scale developed to assess participants' endorsement of a variety of common myths about sexual assault. (Three items are filler items and not used in calculating scores.) Participants indicate on a 7-point Likert scale the extent to which they agree with each item. For example, "Women tend to exaggerate how much rape affects them." Higher scores indicate greater acceptance or endorsement of rape myths. The short form version, (IRMAS-SF; $\alpha = .87$, current sample, $\alpha = .85$; Payne et al., 1999) based on the 45-item IRMAS, was validated and assesses only general rape myth acceptance and not any specific rape myth components (See Appendix C).

Bystander Attitudes

A revised version of the Bystander Attitude Scale (BAS-R; McMahon et al., 2011) was used in this study to assess the dependent variable of bystander attitudes. The original version of the Bystander Attitude Scale (Banyard et al., 2005) included a list of 51 potential bystander helping behaviors that were generated from examples in the literature as well as from discussions with advocates and professionals working in the field of sexual violence, a pilot study, and formative evaluation with a sample of college students (Banyard et al., 2007). The Cronbach's alpha for the original Bystander Attitude Scale was 0.94.

The Bystander Attitude Scale – Revised includes 16 items that participants are asked to respond on a five-point scale (1 being less willing to intervene and 5 being most willing to intervene) how willing or likely they would be to engage in that bystander behavior. To establish reliability and content validity of the BAS-R, McMahon and colleagues (2011) based all modifications on a review of the literature, anecdotal information gathered from their own interactions with students, consultation with experts in the field, and through a series of three focus groups with undergraduate students and professionals who work with rape survivors on campus. The Cronbach's alpha for the revised version of the Bystander Attitude Scale was 0.86 (current sample, $\alpha = .76$). Some examples of items on the BAS-R include “How likely are you to stop sexual activity when asked to, even if you are already sexually aroused,” “How likely are you to check in with a friend who looks drunk when s/he goes to a room with someone else at a party,” and “How willing are you to challenge a friend who uses ‘ho’, ‘bitch’, or ‘slut’ to

describe girls.” Scores are created by summing the responses across the items. The range of scores for the BAS-R is 16 to 80, with higher scores indicating more likelihood to stop their own or someone else’s sexually violent behavior (See Appendix C).

Behavioral Measures

Three outcome measures were used to evaluate changes in behaviors related to sexual violence and bystander behavior. The Modified-Sexual Experiences Survey was used to assess self-reported sexually coercive behaviors, the Attraction to Sexual Aggression Scale was used to assess sexually coercive behavioral intentions, and the Bystander Behaviors Scale – Revised was used to assess self-reported bystander behaviors.

Self-Reported Sexually Coercive Behavior

The Modified Sexual Experiences Survey (M-SES; Dahl, 1993) was readministered at the five-week follow-up to assess self-reported sexually coercive behavior that occurred between posttest and follow-up (See Appendix C). This measure was not included in the posttest survey since one would not expect behavior changes from the time of pretest administration prior to the program to time of posttest administration directly after the program.

Sexually Coercive Behavioral Intentions

A modified version of the Attraction to Sexual Aggression Scale (ASA; Berg et al., 1999) was used in this study to assess the dependent variable of sexually coercive behavioral intentions. The behavioral intentions to be assessed include: Likelihood to Use Force (LF), Likelihood to Rape (LR), Likelihood to Use Coercion (LC), and Likelihood

to Use Alcohol to attain sexual relations (LAlc). Scores are created by summing the responses across the above items. The range of scores for the above mentioned behavioral intentions is 4-20, with higher scores indicating more attraction to sexual aggression.

Malamuth (1989a, 1989b) developed the Attraction to Sexual Aggression Scale (ASA) to improve upon the psychometric properties of previous “likelihood” measures and to expand the construct of the “lure” of sexual aggression. The ASA is a 9-item scale with a 5-point Likert format regarding arousal to various deviant and nondeviant sexual activities as well as subject’s likelihood of engaging in those behaviors. The scale shows high internal consistency reliability ($\alpha = .91$; current sample, $\alpha = .78$) and adequate test-retest reliability ($r = .76$). A principal components analysis yielded a single factor that accounted for over 50% of the variance. In addition, the scale was significantly correlated with rape supportive attitudes ($r = .46$), perceptions of a victim’s consent, pleasure, and trauma from a short rape vignette ($r = .30$), and behavioral inclinations (did force sex, will force sex, enjoyed forcing sex; r ’s = .31, .56, and .22, respectively). The scale also demonstrates discriminant validity as it did not correlate highly with attraction to other deviant behaviors (Malamuth, 1989a, 1989b). Malamuth and Dean (1991) defined attraction to sexual aggression as “the belief that aggressing sexually is likely to be a sexually arousing experience, both to aggressors and victims, so that the man believes he might aggress were it not for fear of punishment or other inhibitory factors” (p. 229). The construct is assumed to be continuous such that all men, despite their actual experience with being sexually aggressive, can be placed on a continuum of attraction to sexual aggression (See Appendix C).

Bystander Behaviors

A revised version of the Bystander Behavior Scale (BBS-R; McMahon et al., 2011) was used in this study to assess the dependent variable of bystander behaviors. The original version of the Bystander Behavior Scale (Banyard et al., 2005) included 51 items that assessed whether respondents actually engaged in the behaviors listed in the previous five weeks. The Cronbach's alpha for the original BBS was 0.89. As with the BAS-R, to establish reliability and content validity of the BBS-R, McMahon and colleagues (2011) based all modifications on a review of the literature, anecdotal information gathered from their own interactions with students, consultation with experts in the field, and through a series of three focus groups with undergraduate students and professionals who work with rape survivors on campus. The Cronbach's alpha for the revised version of the Bystander Behavior Scale was 0.69 (current sample, $\alpha = .69$).

The BBS-R includes the same 16 items as the BAS-R, but the response options include "Yes," "No," and "Wasn't in the situation." The response options were modified from the original version to include the option "Wasn't in the situation" because many students highlighted the limitations of only being able to respond "Yes" or "No." Students raised the point that they might be willing to engage in a behavior, but that they didn't have the opportunity, so the response "Wasn't in the situation" was added as an option on the BBS-R (McMahon et al., 2011). Examples of items on the BBS-R include "Have you walked a friend home from a party who has had too much to drink?" or "Have you challenged a friend who made a sexist joke?" Again, scores were obtained by summing the number of behaviors they reported having done. The composite scores for

the BBS-R range from -16 to 16 with higher scores indicating more positive bystander behaviors in which participants engaged in the previous five weeks (See Appendix C). This measure was not included in the posttest survey since one would not expect behavior changes from the time of pretest administration prior to the program to time of posttest administration directly after the program.

Social Desirability Measure

The Marlowe-Crowne Social Desirability Scale – Short Form (MCSDS) was included to assess the degree to which participants responded to the research instruments in socially desirable ways and to statistically control for it. The Marlowe-Crowne Social Desirability Scale – Short Form consists of 11 true/false items and has been shown to be an adequate substitute for the original Marlowe-Crowne Social Desirability Scale with an internal consistency reliability of .74 with a previous sample (current sample, $\alpha = .46$) (Reynolds, 1982). The original Marlowe-Crowne Social Desirability Scale (Crowne & Marlowe, 1960) is a 33-item measure to assess a socially desirable response bias among participants. Participants indicate whether each of the 33 statements is “true or false in terms of their own behavior,” and responses are summed for a total score. Higher scores indicate high socially desirable patterns of responding (See Appendix C).

Since the reliability of the Marlowe-Crowne Social Desirability Scale was low ($\alpha = .46$) with the current study sample, it could not be used as a covariate to control for socially desirable responses. During the data entry process, I noticed several comments written in on the MCSDS scale asking if the questions were related to situation involving sexual violence or just typical life situations. The scale is meant to ask how participants

would react in typical life situations, but it appears that many participants responded to the scale from a perspective of how they would react if sexual violence was present during the situation. For example, one of the questions on the scale states “There have been occasions where I took advantage of someone.” The question is asking if they have taken advantage of anyone in a typical life situation, but it seems that many participants interpreted that to mean taken advantage of someone in a sexual manner. For the above stated reasons, I decided not to use this scale as a covariate since it did not really measure social desirability with the current sample.

Data Analysis

Descriptive statistics, such as frequency distributions and percentages, were used to describe the sample. Independent sample *t*-tests were computed to determine if statistical differences exist between the intervention and comparison groups. Paired sample *t*-tests were computed to compare pre and posttest scores for each participant. Repeated-Measures Analysis of Covariances (ANCOVA) were computed for participants who had multiple data scores, including those participants that took the follow-up assessments. Repeated-measures ANCOVAs were also computed to compare sexually coercive participants’ responses to non-sexually coercive participants’ responses. In order to statistically control for any previous sexual violence program participation, I computed a new variable that included both participants who stated they attended the BITB pilot program and participants who stated they had other previous sexual violence education ($n = 74$). This new variable was included as a covariate in the ANCOVA analyses. Multiple comparison tests were also performed using Scheffe & Tukey post hoc tests to determine

significant group differences. Effect sizes were calculated for statistically significant differences found between the intervention and comparison groups. Hierarchical multiple regression analyses were also computed to determine if risk status, ethnicity, or fraternity leadership predicted outcomes on any of the dependent measures at pretest, posttest, and follow-up. All the numerical analyses were performed using the SPSS 20 statistical software.

Protection of Subjects

Research participants were informed that participation in the survey research was entirely voluntary and that there will be no university-related repercussions if they chose not to participate. The prevention program was required for all members of Fraternity and Sorority Life, but participation in the survey research was entirely voluntary. All information was kept confidential. Privacy was protected by having a master list that shows participants names and their assigned number. Only participants' numbers were used throughout the study. The master list was destroyed after the follow-up, so no data is linked to the participants. All study data will be maintained in a secured, locked file cabinet for at least three years after the completion of the study. The study received approval from the University of Texas at Arlington Institutional Review Board.

Chapter 5

Results

Introduction

This chapter reports the findings with regard to individual variables in the study such as sociodemographic characteristics. Next, the focus shifts to relationships between key variables, such as attitudes and behaviors about sexual violence. The section concludes with a report of the findings from the tests of the hypotheses, based on bivariate and multivariate analyses.

Participants

One-hundred forty-two male fraternity members, who were recruited from Fraternity and Sorority Life, participated in the program. As shown in Table 2, the majority of participants were European-American (47.9%), 29.6% were Hispanic, 11.3% were African-American, 8.5% were Asian, and 2.8% self-identified as “other”. Only 1.4% of the participants were freshman, 36.6% were sophomores, 35.2% were juniors, and 26.8% were seniors; and their average age was 21.0 years ($SD = 1.7$, range 18-26). Participants primarily identified as heterosexual (98.6%). A little less than half of the participants (43.7%) reported participating in sexual violence prevention activities in the past through either a workshop, video, or during orientation. Some participants (20.4%) reported having participated in the *Bringing in the Bystander* pilot program at the University of Texas at Arlington during the fall semester of 2011.

Table 2 Sociodemographic characteristics as a percentage of males in intervention and comparison groups

Characteristics	Intervention Group			Comparison Group			Grand Total (n = 142)
	Low-risk (n = 52)	High-risk (n = 27)	Total (n = 79)	Low-risk (n = 38)	High-risk (n = 25)	Total (n = 63)	
Ethnicity							
European-American	51.9	51.9	51.9	42.1	44.0	42.9	47.9
African-American	7.7	7.4	7.6	10.5	24.0	15.9	11.3
Hispanic	30.8	29.6	30.4	31.6	24.0	28.6	29.6
Asian	5.8	11.1	7.6	10.5	8.0	9.5	8.5
Other	3.8	0	2.5	5.3	0	3.2	2.8
Class Standing							
Freshman	1.9	0	1.3	2.6	0	1.6	1.4
Sophomore	40.4	40.7	40.5	34.2	28.0	31.7	36.6
Junior	40.4	29.6	36.7	28.9	40.0	33.3	35.2
Senior	17.3	29.6	21.5	34.2	32.0	33.3	26.8
Age							
18	1.9	0	1.3	2.6	0	1.6	1.4
19	26.9	14.8	22.8	15.8	12.0	14.3	19.0
20	23.1	25.9	24.1	28.9	16.0	23.8	23.9
21	21.2	29.6	24.1	15.8	28.0	20.6	22.5
22	11.5	11.1	11.4	18.4	24.0	20.6	15.5
23	5.8	7.4	6.3	7.9	20.0	12.7	9.2
24	3.8	7.4	5.1	7.9	0	4.8	4.9
25	3.8	3.7	3.8	2.6	0	1.6	2.8
26	1.9	0	1.3	0	0	0	.7
Sexual Identification							
Heterosexual	100	100	100	100	92.0	96.8	98.6
Homosexual	0	0	0	0	8.0	3.2	1.4
Leadership role in fraternity							
Yes	48.1	70.4	55.7	44.7	60.0	50.8	53.5
No	51.9	29.6	44.3	55.3	40.0	49.2	46.5
Living Situation							
Fraternity house	9.6	14.8	11.5	15.8	12.0	14.3	12.7
Residence hall	7.7	11.1	9.0	15.8	0	9.5	9.2
Other on-campus housing	19.2	18.5	19.2	2.6	12.0	6.3	13.4
Off-campus	61.5	55.6	60.3	65.8	72.0	68.3	63.4
Missing	1.9	0	0	0	4.0	1.6	1.4
BITB pilot program							
Yes	21.2	14.8	19.0	21.1	24.0	22.2	20.4
No	78.8	85.2	81.0	78.9	76.0	77.8	79.6
Sexual violence prevention in past							
Yes	42.3	44.4	43.0	52.6	32.0	44.4	43.7
No	57.7	55.6	57.0	47.4	68.0	55.6	56.3

The Modified-Sexual Experiences Survey (M-SES; Dahl, 1993) was used to classify participants as high- or low-risk for using sexually coercive behaviors. High-risk participants (36.6%) reported perpetrating at least one past sexually coercive behaviors on the M-SES. Low-risk participants (63.4%) reported no past sexually coercive behaviors on the M-SES. At pretest, the breakdown for highest level of sexually coercive behavior reported for high-risk men was: 32.7% - forced sexual contact, 25.0% - verbally coercive sexual behavior, and 42.3% - attempted or completed rape (see Table 3).

Table 3 Percentages and *N*'s of highest level of sexually coercive behavior self-reported on Modified-Sexual Experiences Survey

Sexually Coercive Behavior	High Risk Men				Low Risk Men		Total Sample	
	Pretest		5-Week Follow-up		5-Week Follow-up		5-Week Follow-up	
	Comparison <i>n</i> = 25	Intervention <i>n</i> = 27	Comparison <i>n</i> = 7	Intervention <i>n</i> = 11	Comparison <i>n</i> = 13	Intervention <i>n</i> = 24	Comparison <i>n</i> = 20	Intervention <i>n</i> = 35
None	-----	-----	57.1 (4)	54.5 (6)	84.6 (11)	87.5 (21)	75.0 (15)	77.1 (27)
Forced touching	36.0 (9)	29.6 (8)	0.0 (0)	9.1 (1)	15.4 (2)	8.3 (2)	10.0 (2)	8.6 (3)
Verbally coercive sexual behavior	20.0 (5)	29.6 (8)	14.3 (1)	9.1 (1)	0.0 (0)	4.2 (1)	5.0 (1)	5.7 (2)
Attempted and/or completed rape	44.0 (11)	40.8 (11)	28.6 (2)	27.4 (3)	0.0 (0)	0.0 (0)	10.0 (2)	8.6 (3)

The intervention group consisted of 79 males and the comparison group consisted of 63 males. In the intervention group, 65.8% of the participants were classified as low-risk and 34.2% were classified as high-risk. In the comparison group, 60.3% of the participants were classified as low-risk and 39.7% were classified as high-risk. Chi-square and independent *t*-test analyses were computed at pretest to examine differences between high- and low-risk participants in the intervention and comparison groups. Based on the chi-square analyses, low-risk participants in the intervention and comparison

groups did not significantly differ on ethnicity, $X^2(4, n = 90) = 1.38, p = .847$; class standing, $X^2(3, n = 90) = 3.65, p = .302$; living situation, $X^2(3, n = 89) = 6.96, p = .073$; fraternity leaders present at program, $X^2(1, n = 90) = .10, p = .754$; BITB pilot participation, $X^2(1, n = 90) = .00, p = .991$; and participation in previous sexual violence education, $X^2(1, n = 90) = .94, p = .332$. Also based on the chi-square analyses, high-risk participants in the intervention and comparison groups did not significantly differ on ethnicity, $X^2(3, n = 52) = 2.77, p = .428$; class standing, $X^2(2, n = 52) = 1.04, p = .596$; living situation, $X^2(3, n = 51) = 3.75, p = .290$; fraternity leaders present at program, $X^2(1, n = 52) = .62, p = .432$; BITB pilot participation, $X^2(1, n = 52) = .71, p = .401$; and participation in previous sexual violence education, $X^2(1, n = 52) = .85, p = .357$.

Based on independent *t*-test analyses, low-risk males in the intervention group and low-risk males in the comparison group did not significantly differ at pretest with regard to age, $t(88) = .61, p = .541$; their self-reported sexually coercive behaviors, $t(88) = -.77, p = .445$; rape myth acceptance, $t(88) = -.27, p = .792$; sexually coercive behavioral intentions, $t(88) = .11, p = .911$; bystander attitudes, $t(88) = 1.65, p = .103$; and bystander behaviors, $t(88) = 1.47, p = .144$. Also, high-risk males in the intervention group and high-risk males in the comparison group did not significantly differ at pretest with regard to age, $t(50) = .41, p = .686$; their self-reported sexually coercive behaviors, $t(50) = -1.09, p = .283$; rape myth acceptance, $t(50) = 1.57, p = .123$; sexually coercive behavioral intentions, $t(50) = -.13, p = .897$; bystander attitudes, $t(49) = .10, p = .924$; and bystander behaviors, $t(50) = -.79, p = .436$.

Bringing in the Bystander Pilot Program Attendance in 2011

Out of the 142 program participants, 29 (20.4%) attended the *Bringing in the Bystander* program in 2011. I computed independent *t*-test analyses to determine if there were any differences between participants who attended the BITB pilot program in 2011 and those that did not on any of the outcome measures at pretest, posttest, and follow-up. No significant differences were found between participants who attended the BITB pilot program in 2011 and those that did not on any of the outcome measures at any time period. Therefore, I included those 29 participants in the total sample.

Response Rate

Out of 142 participants who completed the pretest and posttest surveys, 55 (38.7% follow-up response rate) also completed the follow-up survey. Of the 55 participants who completed the follow-up survey, 20 were in the comparison group and 35 were in the intervention group. As discussed in Chapter 4: Research Design in the section entitled, “Procedures”, follow-up survey data was obtained through attendance at each individual fraternity meeting five weeks after program administration. If a fraternity member was not present at that fraternity meeting, then their follow-up data was not obtained. This method of follow-up was recommended by the director of Fraternity and Sorority Life to attempt to obtain the most follow-up data possible. As discussed in Chapter 4: Research Design in the section entitled, “Procedures”, I went to great efforts to obtain as much follow-up data as I could. However, due to the scheduling challenges already previously discussed, I was not able to obtain as much follow-up data as I would have liked. This is

a limitation of this study and will be discussed further in Chapter 6: Discussion in the section entitled, “Limitations”.

Chi-square and independent *t*-test analyses were computed at pretest to examine differences between participants who completed the pretest, posttest, and follow-up survey and those that only completed the pretest and posttest. No significant differences were found on any demographic variables or any dependent measures, except for participation in the BITB pilot program, $\chi^2(1, n = 142) = 6.07, p = .014$. Results found that more participants who completed the follow-up survey attended the BITB pilot program. However, since no significant differences were found between participants who attended the BITB pilot program in 2011 and those that did not on any of the outcome measures at any time period, then this significant finding should not affect the outcome of the study results.

Missing Data and Pretest Correlations

Participants had to answer 90% or more of the questions for each measure to be included in the analyses. Missing data ranged from 0 – 2.1% across all measures. All dependent measures were significantly correlated with one another in the predicted direction, except the Modified-Sexual Experiences Survey (M-SES), which measures self-reported sexually coercive behaviors, was not significantly correlated with the Bystander Behavior Scale (BBS) ($r = -.09, p = .265$) or the Illinois Rape Myth Acceptance Scale (IRMAS) ($r = .16, p = .065$). Since the M-SES and the BBS measure unrelated types of behaviors, it would be expected that they do not correlate. Since the M-SES and the IRMAS measure the distinct constructs of behaviors and attitudes,

respectively, it would also be expected that they do not correlate, since research does not indicate a change in sexual violence attitudes will certainly lead to a change in sexually coercive behaviors (Cook & Flay, 1978; Festinger, 1964; Wicker, 1969; Weisz & Black, 2009).

Pretest Differences between Intervention and Comparison Groups

Chi-square and independent *t*-test analyses were computed at pretest to examine differences between participants in the intervention and comparison groups. Based on the chi-square analyses, participants in the intervention group and in the comparison group did not significantly differ on ethnicity, $X^2(4, n = 142) = 2.97, p = .562$; class standing, $X^2(3, n = 142) = 2.70, p = .440$; living situation, $X^2(3, n = 140) = 4.89, p = .182$; fraternity leaders present at program, $X^2(1, n = 142) = .34, p = .561$; BITB pilot participation, $X^2(1, n = 142) = .23, p = .635$; and participation in previous sexual violence education, $X^2(1, n = 142) = .03, p = .867$.

Based on independent *t*-test analyses, participants in the intervention group and in the comparison group did not significantly differ at pretest with regard to their age, $t(140) = .79, p = .429$; self-reported sexually coercive behaviors, $t(140) = -.70, p = .487$; rape myth acceptance, $t(140) = .81, p = .417$; sexually coercive behavioral intentions, $t(140) = .20, p = .843$; bystander attitudes, $t(139) = 1.27, p = .207$; and bystander behaviors, $t(140) = .64, p = .522$.

Significance Level

For hypotheses testing in this study, the significance level of .10 has been chosen for the following reasons. First, this is an exploratory study evaluating the effects of a

bystander focused sexual violence prevention program on both high- and low-risk university males' attitudes and behaviors related to sexual violence. There is little empirical support on the effectiveness of bystander sexual violence prevention programs with both males who are at high- and low-risk of using sexually coercive behavior. The exploratory nature of this study relates to the issue of determining the most effective way to classify males into high- and low-risk categories. Breitenbecher (2000) concluded that routine pre-testing of participants to determine risk status is needed to assess if interventions are truly effective with their target populations. However, there is debate about the most effective way to classify participants based on risk status. Fraternity men and athletes on college campuses have often been labeled as high-risk for being sexually coercive, but using fraternity members and athletes as participants in prevention program evaluations may make those studies vulnerable to biased effects that may be driven by low-risk men, men least likely to sexually aggress, who exist within these groups (Choate, 2003; Foubert, 2000; Foubert & Newberry, 2006; Holcomb et al., 2002). Some studies (Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009) have classified participants into high- or low-risk for committing sexually coercive behavior using either the Modified Sexual Experiences Survey (Dahl, 1993) or the Attraction to Sexual Aggression Scale (Malamuth, 1989a, 1989b). However, researchers have yet to agree on the most effective way to assess risk status prior to the intervention.

Second, the concept of bystander interventions for sexual violence prevention are still new as are the measures used to evaluate bystander attitudes and behaviors. The goal of bystander prevention programs is to engage third-party bystanders and teach them

effective bystander skills so they are better able to intervene when they become aware of any type of sexual violence occurring. It is critical to evaluate if these programs are effective at increasing bystander attitudes and behaviors. However, the measures that exist to evaluate bystander attitudes and behaviors are still in the development phase. They have been validated and have been shown to be reliable with a few samples (Banyard et al., 2005; McMahon et al., 2011), but they have yet to be validated with larger and more diverse samples. For these reasons, I have chosen the significance level of .10 for hypotheses testing in this study.

Tests of Hypotheses

Hypothesis 1

University males who participate in a theoretically-based, peer-facilitated, bystander sexual violence prevention program will show significant positive changes on attitude and behavior outcome measures compared to the comparison group at posttest and five-week follow-up.

Data analysis. Repeated-Measures Analysis of Covariance (ANCOVA) were computed (for each dependent measure) for participants who had multiple data scores, including those participants that took the follow-up assessments. In order to statistically control for previous sexual violence program participation, I computed a new variable that included both participants who stated they attended the BITB pilot program and participants who stated they had other previous sexual violence education ($n = 74$). This new variable was included as a covariate in the ANCOVA analyses. Multiple comparison tests were also performed using Scheffe & Tukey post hoc tests to determine significant

group differences. Effect sizes were calculated for statistically significant differences found between the intervention and comparison groups.

Attitudinal outcomes.

Rape myth acceptance. Based on repeated-measures ANCOVAs, a main effect of testing time was found for rape myth acceptance among intervention group participants, $F(2, 68) = 2.51, p < .10$. Participants' acceptance of rape myths significantly decreased from the time of the pretest survey ($M = 38.03, SD = 11.17$) to both posttest survey ($M = 33.94, SD = 13.37$) and follow up survey ($M = 35.00, SD = 10.87$) (see Table 4). The effect size at posttest for rape myth acceptance ($d = .26$) (see Table 5) indicated these positive outcomes were modest in magnitude. However, effect size at follow-up was small ($d = .11$).

Table 4 Repeated measures ANCOVAs for total sample by intervention and comparison groups

Dependent Measures					
Intervention Group	Pre (n = 79)	Post (n = 79)	Follow up (n = 35)	F	p-value
Attitudinal Outcomes					
IRMAS	38.03 (11.17)	33.94 (13.37)	35.00 (10.87)	2.51	.09*
BAS	51.51 (8.70)	51.57 (11.76)	53.97 (8.15)	2.39	.12
Behavioral Outcomes					
M-SES	5.46 (5.73)	-----	2.94 (2.27)	6.66	.01**
ASA	6.43 (2.33)	5.29 (2.74)	6.63 (2.64)	4.84	.01**
BBS	.69 (4.78)	-----	.31 (4.17)	.02	.14
Comparison Group	Pre (n = 63)	Post (n = 63)	Follow up (n = 20)	F	p-value
Attitudinal Outcomes					
IRMAS	35.10 (8.24)	31.00 (8.45)	33.60 (13.67)	.24	.67
BAS	57.60 (7.56)	55.90 (15.03)	57.90 (8.73)	.31	.65
Behavioral Outcomes					
M-SES	4.50 (3.56)	-----	3.00 (3.63)	2.79	.11
ASA	6.70 (3.05)	6.50 (4.06)	6.65 (3.83)	.05	.90
BBS	3.10 (4.48)	-----	1.60 (3.80)	.06	.81

* $p < .10$, ** $p < .05$

Note: IRMAS = Illinois Rape Myth Acceptance Scale, BAS = Bystander Attitude Scale, M-SES = Modified-Sexual Experiences Survey, ASA = Attraction to Sexual Aggression Scale, BBS = Bystander Behavior Scale

Lower scores indicate positive change for IRMAS, ASA, and M-SES;

Higher scores indicate positive change for BAS and BBS

Bystander attitudes. Contrary to the hypothesis, no significant differences were found for bystander attitudes from pretest to posttest and follow-up survey. Based on repeated-measures ANCOVAs, a main effect of testing time was not found for bystander attitudes among intervention group participants, $F(2, 68) = 2.39, p = .12$. Participants' bystander attitudes did not differ significantly from pretest survey ($M = 51.51, SD = 8.70$) to both posttest survey ($M = 51.57, SD = 11.76$) and follow up survey ($M = 53.97, SD = 8.15$) (see Table 4). However, effect size at posttest ($d = -.32$) and at follow-up ($d = -.47$) for bystander attitudes indicated the outcomes were moderate in magnitude (see Table 5).

Table 5 Effect size (*d*)

Dependent Measures	Total Sample	Low-Risk Males	High-Risk Males
Attitudinal Outcomes			
IRMAS post	.26	.27	.21
IRMAS fu	.11	.48	-.25
BAS post	-.32	-.74	-.08
BAS fu	-.47	-.70	-.18
Behavioral Outcomes			
M-SES fu	-.02	.27	-.30
ASA post	-.35	-.32	-.40
ASA fu	-.01	.71	-.63
BBS fu	-.32	-.51	-.02

Note: IRMAS = Illinois Rape Myth Acceptance Scale, BAS = Bystander Attitude Scale, M-SES = Modified-Sexual Experiences Survey, ASA = Attraction to Sexual Aggression Scale, BBS = Bystander Behavior Scale

Behavioral outcomes.

Sexually coercive behaviors. Based on repeated-measures ANCOVAs, a main effect of testing time was found for sexually coercive behaviors among intervention group participants, $F(1, 34) = 6.66, p < .05$. As shown in Table 4, participants' sexually coercive behaviors, as reported on the M-SES, significantly decreased from the time of the pretest survey ($M = 5.46, SD = 5.73$) to follow-up survey five weeks later ($M = 2.94, SD = 2.27$). However, effect size at follow-up ($d = -.02$) indicated very little difference in sexually coercive behaviors between the intervention and comparison groups (see Table 5).

Sexually coercive behavioral intentions. Based on repeated-measures ANCOVAs, a main effect of testing time was also found for sexually coercive behavioral intentions as measured by the Attraction to Sexual Aggression Scale, $F(2, 68) = 4.84, p < .05$. As shown in Tables 4 and 5, participants' attraction to sexual aggression significantly decreased from pretest ($M = 6.43, SD = 2.33$) to posttest ($M = 5.29, SD = 2.74$) with a

moderate effect size ($d = -.35$). However, contrary to the hypothesis, participants attraction to sexual aggression significantly rebounded at follow up ($M = 6.63$, $SD = 2.64$), but the effect size was $-.01$ meaning there was very little difference between the intervention and comparison group scores on attraction to sexual aggression at follow-up.

Bystander behaviors. Contrary to the hypothesis, no significant differences were found for bystander behaviors from pretest to posttest and follow-up survey. Based on repeated-measures ANCOVAs, a main effect of testing time was not found for bystander behaviors among intervention group participants, $F(1, 34) = .02$, $p = .14$. Participants' bystander behaviors did not differ significantly from pretest survey ($M = .69$, $SD = 4.78$) to follow up survey ($M = .31$, $SD = 4.17$) (see Table 4). However, effect size at follow-up ($d = -.32$) for bystander behaviors indicated the outcomes were moderate in magnitude (see Table 5).

Comparison group outcomes. As expected, the main effect of testing time was not significant across all measures for the total sample in the comparison group. Participants' scores did not significantly differ from pretest to posttest, or follow-up on any of the dependent measures (see Table 4 for means, F values, and probabilities).

Hypothesis 2

Intervention effectiveness will be moderated by risk status; specifically, low-risk men will show greater improvement across outcome measures compared to high-risk men. However, high-risk men will still show significant positive changes on attitude and behavior outcome measures compared to the comparison group at posttest and five-week follow-up.

Pretest differences between high- and low- risk men. Independent *t*-test analyses were used to evaluate the difference in scores between high- and low-risk men across all dependent measures at pre-test. There was a significant effect of risk status on scores on sexually coercive behaviors (M-SES), $t(140) = -6.77, p < .001$, rape myth acceptance (IRMAS), $t(140) = -2.24, p < .05$, and sexually coercive behavioral intentions (ASA), $t(140) = -3.45, p < .05$. Consistent with etiology literature, high-risk men scored significantly worse on all three measures at pretest compared to low-risk men. A significant effect of risk status was not found on scores on bystander attitudes (BAS), $t(139) = 1.75, p = .083$ and bystander behaviors (BBS), $t(140) = .45, p = .656$.

Data analysis. Repeated-Measures Analysis of Covariance (ANCOVA) were computed for each dependent measure to compare sexually coercive participants' outcomes to non-sexually coercive participants' outcomes. In order to statistically control for previous sexual violence program participation, I computed a new variable that included both participants who stated they attended the BITB pilot program and participants who stated they had other previous sexual violence education ($n = 74$). This new variable was included as a covariate in the ANCOVA analyses. Multiple comparison tests were also performed using Scheffe & Tukey post hoc tests to determine significant group differences. Effect sizes were calculated for statistically significant differences found between the intervention and comparison groups.

Low-risk men. Attitudinal outcomes.

Rape myth acceptance. For low-risk men in the intervention group, a main effect of testing time was found for rape myth acceptance, $F(2, 46) = 2.49, p < .10$. Participants'

acceptance of rape myths significantly decreased from the time of the pretest survey ($M = 37.79$, $SD = 11.50$) to both posttest survey ($M = 35.00$, $SD = 12.65$) and follow up survey ($M = 34.29$, $SD = 11.12$) (see table 6). As shown in Table 5, effect size at posttest for rape myth acceptance ($d = .27$) and at follow-up ($d = .48$) indicated these positive outcomes were modest to moderate in magnitude. For comparison between low- and high-risk males, Table 7 shows means, F values, and probabilities for both low- and high-risk males in the intervention group.

Table 6 Repeated measures ANCOVAs for low-risk males by intervention and comparison groups

Dependent Measures					
Intervention Group	Pre ($n = 52$)	Post ($n = 52$)	Follow up ($n = 24$)	F	p - value
Attitudinal Outcomes					
IRMAS	37.79 (11.50)	35.00 (12.65)	34.29 (11.12)	2.49	.09*
BAS	52.04 (7.53)	54.29 (6.32)	53.63 (8.14)	1.65	.20
Behavioral Outcomes					
M-SES	3.25 (1.96)	-----	2.83 (2.20)	.84	.37
ASA	6.46 (2.36)	5.29 (2.33)	6.42 (2.43)	2.46	.09*
BBS	.46 (3.44)	-----	.29 (3.34)	.05	.83
Comparison Group	Pre ($n = 38$)	Post ($n = 38$)	Follow up ($n = 13$)	F	p - value
Attitudinal Outcomes					
IRMAS	32.84 (6.77)	32.00 (9.51)	29.84 (7.03)	.41	.58
BAS	59.08 (7.02)	60.62 (10.27)	58.54 (5.70)	.85	.44
Behavioral Outcomes					
M-SES	2.92 (2.60)	-----	2.23 (2.31)	3.11	.11
ASA	5.46 (2.03)	6.46 (4.70)	5.00 (1.47)	.07	.86
BBS	3.38 (4.57)	-----	2.23 (4.27)	.12	.74

* $p < .10$, ** $p < .05$

Note: IRMAS = Illinois Rape Myth Acceptance Scale, BAS = Bystander Attitude Scale, M-SES = Modified-Sexual Experiences Survey, ASA = Attraction to Sexual Aggression Scale, BBS = Bystander Behavior Scale

Lower scores indicate positive change for IRMAS, ASA, and M-SES;

Higher scores indicate positive change for BAS and BBS

Bystander attitudes. Contrary to the hypothesis, for low-risk men in the intervention group, no significant differences were found for bystander attitudes from

pretest to posttest and follow-up survey. Based on repeated-measures ANCOVAs, a main effect of testing time was not found for bystander attitudes among intervention group participants, $F(2, 46) = 1.65, p = .20$. Participants' bystander attitudes did not differ significantly from pretest survey ($M = 52.04, SD = 7.53$) to both posttest survey ($M = 54.29, SD = 6.32$) and follow up survey ($M = 53.63, SD = 8.14$) (see Tables 6 and 7). However, effect size at posttest ($d = -.74$) and at follow-up ($d = -.70$) for bystander attitudes indicated the outcomes were large in magnitude (see Table 5).

Behavioral outcomes.

Sexually coercive behaviors. Contrary to the hypothesis, for low-risk men in the intervention group, a main effect of testing time was not found for sexually coercive behaviors, $F(1, 23) = .84, p = .37$. As shown in Tables 6 and 7, participants' sexually coercive behaviors, as reported on the M-SES, did not differ significantly from the time of the pretest survey ($M = 3.25, SD = 1.96$) to follow-up survey 5 weeks later ($M = 2.83, SD = 2.20$). However, effect size at follow-up ($d = .27$) indicated the outcomes were modest in magnitude (see Table 5).

Sexually coercive behavioral intentions. For low-risk men in the intervention group, a main effect of testing time was found for sexually coercive behavioral intentions as measured by scores on the Attraction to Sexual Aggression Scale, $F(2, 46) = 2.46, p < .10$. As shown in Tables 5, 6, and 7, participants' attraction to sexual aggression significantly decreased from pretest ($M = 6.46, SD = 2.36$) to posttest ($M = 5.29, SD = 2.33$) with a modest effect size of $-.32$. However, contrary to the hypothesis, participants

attraction to sexual aggression significantly rebounded at follow up ($M = 6.42$, $SD = 2.43$), with a large effect size of .71.

Bystander behaviors. Contrary to the hypothesis, for low-risk men in the intervention group, no significant differences were found for bystander behaviors from pretest to posttest and follow-up survey. Based on repeated-measures ANCOVAs, a main effect of testing time was not found for bystander behaviors, $F(1, 23) = .05$, $p = .83$. Participants' bystander behaviors did not differ significantly from pretest survey ($M = .46$, $SD = 3.44$) to follow up survey ($M = .29$, $SD = 3.34$) (see Tables 6 and 7). However, effect size at follow-up ($d = -.51$) for bystander behaviors indicated the outcomes were moderate in magnitude (see Table 5).

Comparison group outcomes. As expected, the main effect of testing time was not significant across all measures for low-risk males in the comparison group. Participants' scores did not significantly differ from pretest to posttest or follow up on any of the dependent measures (see Table 6 for means, F values, and probabilities).

Table 7 Repeated measures ANCOVAs for low- and high-risk males in intervention group

Dependent Measures					
	Pre (<i>n</i> = 52)	Post (<i>n</i> = 52)	Follow up (<i>n</i> = 24)	<i>F</i>	<i>p</i> - value
Low-Risk Males					
Attitudinal Outcomes					
IRMAS	37.79 (11.50)	35.00 (12.65)	34.29 (11.12)	2.49	.09*
BAS	52.04 (7.53)	54.29 (6.32)	53.63 (8.14)	1.65	.20
Behavioral Outcomes					
M-SES	3.25 (1.96)	-----	2.83 (2.20)	.84	.37
ASA	6.46 (2.36)	5.29 (2.33)	6.42 (2.43)	2.46	.09*
BBS	.46 (3.44)	-----	.29 (3.34)	.05	.83
High-Risk Males					
Attitudinal Outcomes					
IRMAS	38.55 (10.94)	31.64 (15.23)	36.55 (10.64)	1.30	.30
BAS	50.36 (11.18)	45.64 (17.93)	54.73 (8.51)	1.19	.31
Behavioral Outcomes					
M-SES	10.27 (8.09)	-----	3.18 (2.52)	5.85	.04**
ASA	6.36 (2.38)	5.27 (3.61)	7.09 (3.11)	1.94	.17
BBS	1.18 (7.07)	-----	.36 (5.78)	.11	.75

**p* < .05

Note: IRMAS = Illinois Rape Myth Acceptance Scale, BAS = Bystander Attitude Scale, M-SES = Modified-Sexual Experiences Survey, ASA = Attraction to Sexual Aggression Scale, BBS = Bystander Behavior Scale

Lower scores indicate positive change for IRMAS, ASA, and M-SES;

Higher scores indicate positive change for BAS and BBS

High-risk men. Attitudinal outcomes.

Rape myth acceptance. Contrary to the hypothesis, for high-risk men in the intervention group, a main effect of testing time was not found for rape myth acceptance, $F(2, 20) = 1.30, p = .30$. Participants' acceptance of rape myths did not differ significantly from the time of pretest ($M = 38.55, SD = 10.94$) to both posttest survey ($M = 31.64, SD = 15.23$) and follow up survey ($M = 36.55, SD = 10.64$) (see tables 7 and 8). As shown in Table 5, effect size for rape myth acceptance for high-risk men at posttest ($d = .21$) and at follow-up ($d = -.25$) indicated these outcomes were modest in magnitude.

Table 8 Repeated measures ANCOVAs for high-risk males by intervention and comparison groups

Dependent Measures					
Intervention Group	Pre (<i>n</i> = 27)	Post (<i>n</i> = 27)	Follow up (<i>n</i> = 11)	<i>F</i>	<i>p</i> - value
Attitudinal Outcomes					
IRMAS	38.55 (10.94)	31.64 (15.23)	36.55 (10.64)	1.30	.30
BAS	50.36 (11.18)	45.64 (17.93)	54.73 (8.51)	1.19	.31
Behavioral Outcomes					
M-SES	10.27 (8.09)	-----	3.18 (2.52)	5.85	.04**
ASA	6.36 (2.38)	5.27 (3.61)	7.09 (3.11)	1.94	.17
BBS	1.18 (7.07)	-----	.36 (5.78)	.11	.75
Comparison Group	Pre (<i>n</i> = 25)	Post (<i>n</i> = 25)	Follow up (<i>n</i> = 7)	<i>F</i>	<i>p</i> - value
Attitudinal Outcomes					
IRMAS	39.29 (9.59)	29.14 (6.23)	40.57 (20.13)	.06	.84
BAS	54.86 (8.32)	47.14 (19.14)	56.71 (13.19)	.04	.90
Behavioral Outcomes					
M-SES	7.43 (3.36)	-----	4.43 (5.22)	.99	.37
ASA	9.00 (3.42)	6.57 (2.82)	9.71 (5.02)	.01	.99
BBS	2.57 (4.61)	-----	.43 (2.64)	.04	.85

p* < .10, *p* < .05

Note: IRMAS = Illinois Rape Myth Acceptance Scale, BAS = Bystander Attitude Scale, M-SES = Modified-Sexual Experiences Survey, ASA = Attraction to Sexual Aggression Scale, BBS = Bystander Behavior Scale

Lower scores indicate positive change for IRMAS, ASA, and M-SES;

Higher scores indicate positive change for BAS and BBS

Bystander attitudes. Contrary to the hypothesis, for high-risk men in the intervention group, no significant differences were found for bystander attitudes from pretest to posttest and follow-up survey. Based on repeated-measures ANCOVAs, a main effect of testing time was not found for bystander attitudes among high-risk men in the intervention group, $F(2, 20) = 1.19, p = .31$. Participants' bystander attitudes did not differ significantly from pretest survey ($M = 50.36, SD = 11.18$) to both posttest survey ($M = 45.64, SD = 17.93$) and follow up survey ($M = 54.73, SD = 8.51$) (see Tables 7 and 8). Effect size at posttest ($d = -.08$) and at follow-up ($d = -.18$) for bystander attitudes

indicated very little differences between the outcomes for the intervention and comparison groups (see Table 5).

Behavioral outcomes.

Sexually coercive behaviors. For high-risk men in the intervention group, a main effect of testing time was found for sexually coercive behaviors, $F(1, 10) = 5.85, p < .05$. Participants' sexually coercive behaviors significantly decreased from the time of the pretest survey ($M = 10.27, SD = 8.09$) to follow up survey 5 weeks later ($M = 3.18, SD = 2.52$) (see Tables 7 and 8). At follow-up, the high-risk males self-reported sexually coercive behaviors as reported on the M-SES were almost equal to the low-risk males self-reported sexually coercive behaviors at pretest ($M = 3.25, SD = 1.96$). As shown in Table 5, effect size ($d = -.30$) indicated the outcomes were modest in magnitude. At follow-up, the breakdown for highest level of sexually coercive behavior reported by high-risk males in the intervention group was: 9.1% - forced sexual contact, 9.1% - verbally coercive sexual behavior, and 27.4% - attempted or completed rape (see Table 2).

Sexually coercive behavioral intentions. Contrary to the hypothesis, for high-risk men in the intervention group, a main effect of testing time was not found for sexually coercive behavioral intentions as measured by scores on the Attraction to Sexual Aggression Scale, $F(2, 20) = 1.94, p = .17$. As shown in Tables 7 and 8, Participants' sexually coercive behavioral intentions did not differ significantly from pretest ($M = 6.36, SD = 2.38$) to posttest ($M = 5.27, SD = 3.61$) or follow up ($M = 7.09, SD = 3.11$). However, effect sizes at posttest ($d = -.40$) and at follow up ($d = -.63$) indicate there was a

moderate to large difference in outcomes on attraction to sexual aggression between the intervention and comparison groups (see Table 5).

Bystander behaviors. Contrary to the hypothesis, for high-risk men in the intervention group, no significant differences were found for bystander behaviors from pretest to posttest and follow-up survey. Based on repeated-measures ANCOVAs, a main effect of testing time was not found for bystander behaviors, $F(1, 10) = .11, p = .75$. Participants' bystander behaviors did not differ significantly from pretest survey ($M = 1.18, SD = 7.07$) to follow up survey ($M = .36, SD = 5.78$) (see Tables 7 and 8). Effect size at follow-up ($d = -.02$) for bystander behaviors indicated very little difference in outcomes between the intervention and comparison groups (see Table 5).

Comparison group outcomes. As expected, the main effect of testing time was not significant across all measures for high-risk males in the comparison group. Participants' scores did not significantly differ from pretest to posttest or follow up on any of the dependent measures (see Table 8 for means, F values, and probabilities).

Hypothesis 3

Risk status, ethnicity, and fraternity leadership will predict outcomes related to attitudes and behaviors about sexual violence. Specifically, low-risk males will show more favorable outcomes on attitude (less acceptance of rape myths and higher likelihood to stop their own or someone else's sexually violent behavior) and behavior (less sexually coercive behaviors and behavioral intentions and more prosocial bystander behaviors) measures compared to high-risk males. Also, European-Americans will show more favorable outcomes on attitude (less acceptance of rape myths and higher

likelihood to stop their own or someone else's sexually violent behavior) and behavior (less sexually coercive behaviors and behavioral intentions and more prosocial bystander behaviors) measures compared to African-Americans, Asians, Hispanics, and those participants who self-identified as "other." Finally, fraternity leaders will show more favorable outcomes on attitude (less acceptance of rape myths and higher likelihood to stop their own or someone else's sexually violent behavior) and behavior (less sexually coercive behaviors and behavioral intentions and more prosocial bystander behaviors) measures compared to general fraternity members.

Data analysis. A series of hierarchical multiple regression analyses were performed with the total sample (intervention and comparison) to determine if risk status, ethnicity, or fraternity leadership predicted scores on outcome measures at pretest, posttest, and follow-up. For each of the attitude and behavior outcome measures, a multiple regression analysis was performed at pretest, posttest, and follow up. In each regression analysis, risk status, ethnicity, fraternity leadership, and potential confounders (BITB pilot participation and participation in any previous sexual violence education) were included.

Attitudinal outcomes.

Rape myth acceptance.

Previous sexual violence education. Participation in the *Bringing in the Bystander* pilot program and participation in any previous sexual violence education were included as factors in the multiple regressions and no significant effects on rape myth acceptance were found.

Pretest. As shown in Table 9, at pretest, risk status, ethnicity, and fraternity leadership explained 8% of variance on the Illinois Rape Myth Acceptance Scale (IRMAS) ($R^2 = .08$, $F(8, 133) = 2.57$, $p < .05$). In support of the hypothesis, risk status ($\beta = .22$, $p < .05$) and ethnicity significantly ($\beta = -.26$, $p < .05$) predicted scores on IRMAS at pretest. In support of the hypothesis, at pretest, high-risk males scored higher on IRMAS, meaning more acceptance of rape myths, $t(1) = 2.64$, $p < .05$, than low-risk males. Contrary to the hypothesis, at pretest, African-Americans scored lower on IRMAS, meaning less acceptance of rape myths, $t(9) = -2.96$, $p < .05$, than European-American.

Posttest. At posttest, risk status, ethnicity, and fraternity leadership explained 8% of the variance on IRMAS ($R^2 = .08$, $F(8, 132) = 2.60$, $p < .05$). In support of the hypothesis, ethnicity significantly ($\beta = -.28$, $p < .05$) predicted scores on the Illinois Rape Myth Acceptance Scale (IRMAS) at posttest (see Table 9). Contrary to the hypothesis, at posttest, African-Americans, $t(9) = -3.28$, $p < .05$, and Hispanics, $t(9) = -1.81$, $p < .10$, scored lower on IRMAS, meaning less acceptance of rape myths, than European-Americans.

Follow-up. At follow-up, risk status, ethnicity, and fraternity leadership did not significantly predict outcomes on the Illinois Rape Myth Acceptance Scale (see Table 9).

Table 9 Multiple regressions evaluating predictors of rape myth acceptance at pretest, posttest, and follow-up

Illinois Rape Myth Acceptance Scale - Pretest					
Variable	B	SE B	β	R ²	F
Model 1				.00	1.25
BITB pilot participation	-.55	2.25	-.02		
Past SV education	-2.75	1.83	-.13		
Model 2				.08	2.57**
BITB pilot participation	-.18	2.28	-.01		
Past SV education	-2.26	1.80	-.11		
Risk status	4.85	1.84	.22**		
Ethnicity	-8.59	2.90	-.26**		
Fraternity leadership	-3.03	1.87	-.14		
Illinois Rape Myth Acceptance Scale - Posttest					
Variable	B	SE B	β	R ²	F
Model 1				.02	2.56
BITB pilot participation	-3.83	2.73	-.12		
Past SV education	-3.41	2.23	-.13		
Model 2				.08	2.60**
BITB pilot participation	-3.87	2.80	-.12		
Past SV education	-2.69	2.21	-.10		
Risk status	2.57	2.26	.10		
Ethnicity	-11.65	3.55	-.28**		
Fraternity leadership	-3.04	2.29	-.12		
Illinois Rape Myth Acceptance Scale – Follow-Up					
Variable	B	SE B	β	R ²	F
Model 1				-.02	.58
BITB pilot participation	1.31	3.54	.05		
Past SV education	-3.54	3.34	-.15		
Model 2				.04	1.30
BITB pilot participation	1.90	3.80	.08		
Past SV education	-3.14	3.37	-.13		
Risk status	4.76	3.50	.19		
Ethnicity	-12.20	7.55	-.24		
Fraternity leadership	-6.17	3.49	-.26		

* $p < .10$, ** $p < .05$

Bystander attitudes.

Pretest. At pretest, risk status, ethnicity, and fraternity leadership explained 14% of the variance on the Bystander Attitude Scale (BAS), ($R^2 = .14$, $F(8, 132) = 3.77$, $p < .05$). In support of the hypothesis, risk status ($\beta = -.18$, $p < .05$), ethnicity ($\beta = .15$, $p < .05$), and fraternity leadership ($\beta = .26$, $p < .05$) significantly predicted scores on BAS at pretest (see Table 10). In support of the hypothesis, at pretest, high-risk males, $t(1) = -2.20$, $p < .05$, scored lower on BAS, indicating less likelihood to stop their own or someone else's sexually violent behaviors, than low-risk males. Contrary to the hypothesis, at pretest, African-Americans, $t(1) = 1.78$, $p < .10$, Asians, $t(1) = 2.86$, $p < .05$, and participants who self-identified as "other", $t(1) = 2.32$, $p < .05$, scored higher on BAS, indicating more likelihood to stop their own or someone else's sexually violent behavior, than European-Americans. In support of the hypothesis, at pretest, fraternity leaders, $t(1) = 3.10$, $p < .05$, scored higher on BAS, indicating more likelihood to stop their own or someone else's sexually violent behaviors, than general fraternity members.

Table 10 Multiple regressions evaluating predictors of bystander attitudes at pretest, posttest, and follow-up

Variable	Bystander Attitudes Scale - Pretest				
	B	SE B	β	R ²	F
Model 1				.00	1.25
BITB pilot participation	.33	1.77	.02		
Past SV education	2.20	1.44	.13		
Model 2				.14	3.77**
BITB pilot participation	-.80	1.74	-.04		
Past SV education	2.28	1.38	.15		
Risk status	-3.09	1.41	-.18**		
Ethnicity	4.01	2.27	.15**		
Fraternity leadership	4.42	1.43	.26**		
Variable	Bystander Attitudes Scale - Posttest				
	B	SE B	β	R ²	F
Model 1				.00	.76
BITB pilot participation	1.61	2.57	.05		
Past SV education	2.01	2.09	.08		
Model 2				.07	2.23**
BITB pilot participation	.54	2.63	.02		
Past SV education	2.14	2.08	.09		
Risk status	-5.48	2.13	-.22**		
Ethnicity	4.50	3.34	.12**		
Fraternity leadership	3.73	2.16	.15*		
Variable	Bystander Attitudes Scale – Follow-Up				
	B	SE B	β	R ²	F
Model 1				.08	3.49**
BITB pilot participation	3.85	2.41	.21		
Past SV education	4.07	2.28	.24		
Model 2				.27	3.53**
BITB pilot participation	5.85	2.37	.32**		
Past SV education	4.59	2.11	.27**		
Risk status	1.95	2.19	.11		
Ethnicity	14.17	4.72	.38**		
Fraternity leadership	3.72	2.18	.22**		

* $p < .10$, ** $p < .05$

Posttest. At posttest, risk status, ethnicity, and fraternity leadership explained 7% of the variance on the Bystander Attitude Scale (BAS), ($R^2 = .07$, $F(8, 132) = 2.23$, $p < .05$). In support of the hypothesis, risk status ($\beta = -.22$, $p < .05$), ethnicity ($\beta = .12$, $p <$

.05), and fraternity leadership ($\beta = .15, p < .10$) significantly predicted scores on BAS at posttest (see Table 10). In support of the hypothesis, at posttest, high-risk males, $t(1) = -2.57, p < .05$, scored lower on BAS, indicating less likelihood to stop their own or someone else's sexually violent behavior, than low-risk males. Contrary to the hypothesis, Asians, $t(9) = 2.09, p < .05$ scored higher on BAS, indicating more likelihood to stop their own or someone else's sexually violent behavior, than European-Americans. In support of the hypothesis, at posttest, fraternity leaders, $t(1) = 1.73, p < .10$, scored higher on BAS, indicating more likelihood to stop their own or someone else's sexually violent behaviors, than general fraternity members.

Follow-up. At follow-up, risk status, ethnicity, and fraternity leadership explained 27% of the variance on the Bystander Attitude Scale (BAS), ($R^2 = .27, F(8, 46) = 3.53, p < .05$). In support of the hypothesis, ethnicity ($\beta = .38, p < .05$) and fraternity leadership ($\beta = .22, p < .05$) significantly predicted scores on BAS at follow-up (see Table 10). Contrary to the hypothesis, at follow-up, African-Americans, $t(1) = 3.00, p < .05$, Hispanics, $t(1) = 2.49, p < .05$, and participants who self-identified as "other", $t(1) = 2.84, p < .05$, scored higher on BAS, indicating more likelihood to stop their own or someone else's sexually violent behavior, than European-Americans. In support of the hypothesis, at follow-up, fraternity leaders, $t(1) = 1.71, p < .10$, scored higher on BAS, indicating more likelihood to stop their own or someone else's sexually violent behaviors, than general fraternity members.

Previous sexual violence education. Participation in the *Bringing in the Bystander* pilot program and participation in any previous sexual violence education were included

as factors in the multiple regressions and no significant effects on bystander attitudes were found at pretest and posttest. However, at follow-up, participation in the *Bringing in the Bystander* pilot program and participation in any previous sexual violence education explained 8% of the variance on the Bystander Attitude Scale (BAS), ($R^2 = .08$, $F(2, 52) = 3.49$, $p < .05$). Participation in the *Bringing in the Bystander* (BITB) pilot program ($\beta = .32$, $p < .05$) and participation in any other previous sexual violence prevention education ($\beta = .27$, $p < .05$) significantly predicted scores on BAS at follow-up (see Table 10). At follow-up, those who participated in the BITB program, $t(1) = 2.46$, $p < .05$, and those who participated in any other previous sexual violence prevention education, $t(1) = 2.18$, $p < .05$, scored higher on BAS, indicating more likelihood to stop their own or someone else's sexually violent behavior, than those who did not participate in the BITB pilot program or those who have had previous sexual violence prevention education.

Behavioral outcomes.

Sexually coercive behaviors.

Previous sexual violence education. Participation in the *Bringing in the Bystander* pilot program and participation in any previous sexual violence education were included as factors in the multiple regressions and no significant effects on sexually coercive behaviors were found.

Pretest. At pretest, risk status, ethnicity, and fraternity leadership explained 33% of the variance on the Modified - Sexual Experiences Survey (M-SES) ($R^2 = .33$, $F(8, 133) = 9.64$, $p < .001$). Risk status significantly predicted scores on MSES at pretest ($\beta = .58$, $p < .001$) (see Table 11). As expected, at pretest, high-risk males, $t(1) = 8.18$, $p <$

.001, scored higher on MSES, meaning more sexually coercive behaviors, than low-risk males.

Posttest. The Modified – Sexual Experiences Survey was not included in the posttest survey since it measures sexually coercive behaviors and one would not expect behaviors to change from administration of the pretest prior to the program to administration of the posttest directly after the program.

Follow-up. At follow-up, risk status, ethnicity, and fraternity leadership did not significantly predict outcomes on the Modified – Sexual Experiences Survey (see Table 11).

Table 11 Multiple regressions evaluating predictors of sexually coercive behaviors at pretest and follow-up

Variable	Modified-Sexual Experiences Survey - Pretest				
	B	SE B	β	R ²	F
Model 1				.00	1.15
BITB pilot participation	.89	.96	.08		
Past SV education	-1.04	.78	-.11		
Model 2				.33	9.64***
BITB pilot participation	1.23	.84	.11		
Past SV education	-.67	.66	-.07		
Risk status	5.51	.67	.58***		
Ethnicity	.25	1.06	.02		
Fraternity leadership	-1.00	.68	-.11		
Variable	Modified-Sexual Experiences Survey – Follow-Up				
	B	SE B	β	R ²	F
Model 1				-.03	.34
BITB pilot participation	-.68	.84	-.11		
Past SV education	.25	.80	.04		
Model 2				-.06	.63
BITB pilot participation	-.13	.95	-.02		
Past SV education	.50	.84	.09		
Risk status	1.21	.87	.20		
Ethnicity	-.78	1.88	-.06		
Fraternity leadership	-.74	.87	-.13		

* $p < .10$, ** $p < .05$, *** $p < .001$

Sexually coercive behavioral intentions.

Previous sexual violence education. Participation in the *Bringing in the Bystander* pilot program and participation in any previous sexual violence education were included as factors in the multiple regressions and no significant effects on sexually coercive behavioral intentions were found.

Pretest. At pretest, risk status, ethnicity, and fraternity leadership explained 7% of the variance on the Attraction to Sexual Aggression Scale (ASA) ($R^2 = .07$, $F(8, 133) = 2.35$, $p < .05$). Risk status significantly predicted scores on ASA at pretest ($\beta = .32$, $p < .001$) (see Table 12). As expected, at pretest, high-risk males scored higher on ASA, meaning more attraction to sexual aggression or sexually coercive behavioral intentions, $t(1) = 3.81$, $p < .001$, than low-risk males.

Posttest. At posttest, risk status, ethnicity, and fraternity leadership did not significantly predict outcomes on the Attraction to Sexual Aggression Scale (see Table 12).

Follow-up. At follow-up, risk status, ethnicity, and fraternity leadership did not significantly predict outcomes on the Attraction to Sexual Aggression Scale (see Table 12).

Table 12 Multiple regressions evaluating predictors of sexually coercive behavioral intentions at pretest, posttest, and follow-up

Variable	Attraction to Sexual Aggression Scale - Pretest				
	B	SE B	β	R ²	F
Model 1				-.01	.07
BITB pilot participation	.17	.60	.02		
Past SV education	.09	.49	.02		
Model 2				.07	2.35**
BITB pilot participation	.44	.61	.06		
Past SV education	.08	.48	.01		
Risk status	1.86	.49	.32***		
Ethnicity	-.09	.77	-.01		
Fraternity leadership	-.72	.50	-.13		
Variable	Attraction to Sexual Aggression Scale - Posttest				
	B	SE B	β	R ²	F
Model 1				-.01	.10
BITB pilot participation	-.07	.66	-.01		
Past SV education	-.21	.54	-.03		
Model 2				.01	1.16
BITB pilot participation	-.01	.69	-.00		
Past SV education	-.15	.55	-.02		
Risk status	1.38	.56	.22		
Ethnicity	-.27	.88	-.03		
Fraternity leadership	-.19	.57	-.03		
Variable	Attraction to Sexual Aggression Scale - Follow-Up				
	B	SE B	β	R ²	F
Model 1				-.03	.26
BITB pilot participation	-.53	.93	-.08		
Past SV education	-.29	.88	-.05		
Model 2				.07	1.48
BITB pilot participation	-.49	.98	-.07		
Past SV education	-.19	.87	-.03		
Risk status	2.12	.90	.33		
Ethnicity	-3.15	1.94	-.23		
Fraternity leadership	-1.44	.90	-.24		

* $p < .10$, ** $p < .05$, *** $p < .001$

Bystander behaviors.

Previous sexual violence education. Participation in the *Bringing in the Bystander* pilot program and participation in any previous sexual violence education were included

as factors in the multiple regressions and no significant effects on bystander behaviors were found.

Pretest. At pretest, risk status, ethnicity, and fraternity leadership did not significantly predict outcomes on the Bystander Behaviors Scale (see Table 13).

Posttest. The Bystander Behaviors Scale was not included in the posttest survey since it measures bystander behaviors and one would not expect behaviors to change from administration of the pretest prior to the program to administration of the posttest directly after the program.

Follow-up. At follow up, risk status, ethnicity, and fraternity leadership explained 14% of the variance on the Bystander Behaviors Scale (BBS), ($R^2 = .14$, $F(8, 46) = 2.10$, $p < .10$). Ethnicity significantly ($\beta = .45$, $p < .05$) predicted scores on BBS at follow up (see Table 13). At follow up, African-Americans, $t(9) = 3.27$, $p < .05$, and Hispanics, $t(9) = 2.29$, $p < .05$, scored higher on BBS, indicating more positive bystander behaviors in which they engaged in during the 5-week follow up period, compared to European-Americans.

Table 13 Multiple regressions evaluating predictors of bystander behaviors at pretest and follow-up

Variable	Bystander Behaviors Scale - Pretest				
	B	SE B	β	R ²	F
Model 1				.00	.85
BITB pilot participation	.96	.99	.08		
Past SV education	.57	.80	.06		
Model 2				.03	1.53
BITB pilot participation	.54	1.03	.05		
Past SV education	.57	.81	.06		
Risk status	-.72	.83	-.07		
Ethnicity	2.31	1.31	.16		
Fraternity leadership	1.94	.84	.21		
Variable	Bystander Behaviors Scale – Follow-Up				
	B	SE B	β	R ²	F
Model 1				.01	1.27
BITB pilot participation	-1.47	1.20	-.17		
Past SV education	1.37	1.13	.17		
Model 2				.14	2.10*
BITB pilot participation	-.88	1.23	-.10		
Past SV education	1.06	1.09	.13		
Risk status	-.02	1.14	-.00		
Ethnicity	7.99	2.45	.45**		
Fraternity leadership	1.75	1.13	.22		

* $p < .10$, ** $p < .05$

Chapter 6

Discussion

Summary of the Results

Hypothesis 1

Hypothesis one postulated that fraternity members who participated in a bystander sexual violence prevention program would show significant positive changes on attitude and behaviors measures at posttest and follow-up compared to a comparison group. The findings of this study partially support this hypothesis in that significant positive changes were found for rape myth acceptance, sexually coercive behaviors, and sexually coercive behavioral intentions among the intervention group participants.

Hypothesis 2

Hypothesis two stated that risk status would moderate intervention effectiveness, meaning that low-risk men would show more positive changes on outcomes measures compared to high-risk men, but that high-risk men would still show positive changes. The findings of this study partially support this hypothesis in that significant positive changes were noted for both low- and high-risk participants, but low-risk men showed more positive changes on outcome measures.

Summary of Program Effects

Rape myth acceptance significantly decreased for the total sample and low-risk males, but no change was found for high-risk males. Sexually coercive behavioral intentions significantly decreased, but rebounded at follow-up for the total sample and low-risk males, but no change was found for high-risk males. Sexually coercive

behaviors significantly decreased from pretest to follow-up for the total sample, but no change was found for low-risk males. Sexually coercive behaviors for high-risk males at follow-up significantly decreased to a level similar to low-risk males at pretest. No significant changes were found for bystander attitudes and behaviors for the total sample and both low- and high-risk males.

Hypothesis 3

A final hypothesis postulated that risk status, ethnicity, and fraternity leadership would predict outcomes related to attitudes and behaviors about sexual violence. Findings from this study fully support this hypothesis as discussed below.

Risk Status

Results of this study indicate that risk status predicts rape myth acceptance, bystander attitudes, sexually coercive behaviors, and sexually coercive behavioral intentions. More specifically, the results support the hypothesis that low-risk males would show more favorable outcomes on attitude and behavior measures compared to high-risk males. As expected, high-risk men fared worse on each of these outcome measures, meaning high-risk males had more acceptance of rape myths, were less likely to stop their own or someone else's sexually violent behaviors, had more sexually coercive behaviors, and more sexually coercive behavioral intentions when compared to low-risk men.

Ethnicity

Results of this study suggest that ethnicity predicts rape myth acceptance, bystander attitudes, and bystander behaviors. However, contrary to the hypothesis,

European-Americans fared worse on each of these outcomes measures when compared to African-Americans, Asians, Hispanics, and participants who self-identified as “other”. More specifically, contrary to the hypothesis, African-Americans and Hispanics had more rejection of rape myths and more positive bystander behaviors at follow-up compared to European-Americans. Also, African-Americans, Hispanics, Asians, and participants who self-identified as “other” indicated more likelihood to stop their own or someone else’s sexually violent behavior compared to European-Americans.

Fraternity Leadership

Results of this study indicate that fraternity leadership predicts bystander attitudes. In support of the hypothesis, fraternity leaders indicated more likelihood to stop their own or someone else’s sexually violent behaviors when compared to general fraternity members.

Previous Sexual Violence Prevention Education Participation

Based on the hierarchical multiple regression analyses, participants who participated in either the *Bringing in the Bystander* pilot program or had other sexual violence prevention education in the past indicated more likelihood to stop their own or someone else’s sexually violent behaviors compared to those who did not participate in the BITB pilot program or have any previous sexual violence prevention education.

Discussion of the Results

Outcomes for Total Sample

Rape Myth Acceptance for Total Sample

Similar to findings of other studies (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999; Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009), the results of this study found a significant decrease in rape myth acceptance for the total sample from pretest to posttest after participating in a bystander sexual violence prevention program. Results of this study also indicate that this significant decrease in rape myth acceptance for the total sample was maintained through the five-week follow-up survey, which is similar to some other studies (Foubert, 2000; Stephens & Georges, 2009). This is an important finding given that believing rape myths and conveying that belief to rape survivors can be damaging. One of the best means of support that friends can provide to a survivor is to help determine how to identify what occurred so that the survivor can begin recovery (Warshaw, 1994). If others believe in certain rape myths, such as "it wasn't really rape," they are less likely to be supportive of a survivor. In addition, if men cannot identify what rape really is and is not, one could assume that it would hamper their decisions during intimate encounters.

Seeing a significant decrease in rape myth acceptance after program participation is an especially important finding when discussing the implications of bystander interventions towards sexual violence prevention because the goal of these interventions is to teach men and women how to be proactive bystanders, which includes information on how they can best help a friend if they disclose they are a survivor. So, if after seeing

the program, participants show more rejection of rape myths, we may hope, but have no evidence, that it means that participants will be better able to be proactive bystanders by providing resources and support to someone who discloses they are a victim of sexual violence.

Sexually Coercive Behaviors for Total Sample

A very promising finding of this study is that, for the total sample, participants' self-reported sexually coercive behaviors significantly decreased from pretest to follow-up survey five weeks later. Many studies that attempt to evaluate the effectiveness of a sexual violence prevention programs do not include behavioral measures (Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999; Moynihan & Banyard, 2008; Schewe & O'Donohue, 1996; Stephens & George, 2004) due to the challenges that arise when attempting to evaluate behavior change, such as ensuring a longer follow-up period, attrition during the follow-up period, and the inherent concerns that are involved with participants' self-report on behavior outcomes. However, the few studies that have included behavioral measures of sexually coercive behaviors found either no change in self-reported sexually coercive behaviors after participation in the program (Foubert, 2000) or a nonsignificant result that reflected an increase in self-reported sexually coercive behaviors after the intervention (Stephens & George, 2009). So, the significant decrease in self-reported sexually coercive behavior found in this study shows that participation in a bystander sexual violence prevention program may have great benefits for participants and the community, in general. If this program can effect positive changes in participants' self-reported sexually coercive behaviors, then it is effectively

reducing the total amount of sexually coercive behavior occurring within that community, in this case fraternity members, which in turn would lead to an overall reduction in sexual violence among fraternity members at this university.

Sexually Coercive Behavioral Intentions for Total Sample

Results of this study indicate a significant decrease in sexually coercive behavioral intentions from pretest to posttest, which is similar to findings of other studies (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999). However, this study also found that participants' sexually coercive behavioral intentions significantly rebounded at the five-week follow-up, which is in contrast to findings of other studies that have evaluated sexually coercive behavioral intentions at follow-up (Foubert, 2000; Heppner et al., 1999). Basically, this finding indicates that directly after program participation, men's sexually coercive behavioral intentions decreased, but over time, they increased back to their starting point. This is a disappointing finding because it shows that if men are assured that no one will know their actions, they appear to be more willing to engage in sexually coercive behaviors. Similarly, Malamuth (1989a) asked college men how likely they would be to rape a woman if they were certain there would be no negative consequences. He found that on average, one-third of college men indicated they would be at least somewhat likely to rape a woman if they could be certain they would not get caught. It may be that over the course of time, participants may forget or dismiss the messages presented during the program and revert back to their old behavioral intentions. One reason for this rebound may be the short (90-minute) intervention. In a meta-analysis of the effectiveness of

college sexual assault education programs, Anderson and Whiston (2005) found that longer interventions were more effective than brief interventions at promoting positive change in attitudes related to sexual violence. The Heppner et al. (1999) study evaluated a program that included three 90-minute sessions that were held one week apart and they found that the reduction in sexually coercive behavioral intentions was maintained at the five-month follow-up. Also, Banyard et al. (2007) conducted an evaluation of both versions of the *Bringing in the Bystander* program and found that the two-session program (4.5 hours) as compared to the one-session program (90 minutes) showed greater gains in positive outcomes among participants. It may be that we cannot expect to see huge changes after a 90-minute intervention, as these behavioral intentions have been learned over a lifetime. A longer, more intense intervention may be necessary to effect long-term change in sexually coercive behavioral intentions.

Outcomes by Risk Status

Analyses conducted with both low- and high-risk males revealed outcomes were moderated by risk status, consistent with study predictions. Low-risk men, those least likely to use sexually coercive behaviors, produced similar positive effects for rape myth acceptance and sexually coercive behavioral intentions as for the total sample. While, high-risk men showed significant changes on only one outcome measure: sexually coercive behaviors.

Rape Myth Acceptance and Sexually Coercive Behavioral Intentions by Risk Status

Similar to findings of other studies (Stephens & George, 2004, 2009) and results for the total sample in this study, low-risk men's acceptance of rape myths significantly

decreased from pretest to posttest and was maintained through the five-week follow-up. Similar to results found for the total sample in this study, low-risk men's sexually coercive behavioral intentions significantly decreased from pretest to posttest, but significantly rebounded at follow-up. Of the few studies that have assessed risk status prior to the intervention (Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009), none of them included measures to assess sexually coercive behavioral intentions among the participants. No significant differences were found for high-risk men's rape myth acceptance or sexually coercive behavioral intentions from pretest to posttest and follow-up. As expected, the findings from the current study indicate that attitudes, such as rape myth acceptance and sexually coercive behavioral intentions, may be more easily changed among low-risk participants than high-risk participants. This may be because high-risk men are likely to have developed stubborn attitudes and habits commensurate with experiencing women as legitimate targets of sexual violence and may be less swayed by anti-rape content than their noncoercive counterparts (Dietz et al., 1982; Malamuth, 1981; Malamuth, 1986; Malamuth et al., 1995; Meuhlenhard, 1988; Pryor, 1987). Therefore, these high-risk males may require a different type of prevention program that can help change the stubborn attitudes and habits they have developed. As Moynihan and Banyard (2008) suggested, it may be that longer, more intensive interventions are required to see changes in attitudes related to sexual violence among high-risk males.

Sexually Coercive Behaviors by Risk Status

A very promising finding from this study is that, for high-risk men, sexually coercive behaviors significantly decreased from pretest to follow-up five weeks later. Interestingly, at follow-up, the high-risk males self-reported sexually coercive behaviors were almost equal to the low-risk males self-reported sexually coercive behaviors at pretest. This indicates that after participation in the program, high-risk males reported the same level of sexually coercive behavior as low-risk males reported prior to program participation. Results did not indicate a significant change in low-risk men's sexually coercive behaviors, but that is to be expected since they already started at such a low level of self-reported sexually coercive behavior. The finding that sexually coercive behaviors significantly decreased for high-risk men is especially promising because research suggests that attitudes are more easily changed than behaviors with high-risk males, since they have more change to make when compared to their low-risk counterparts (Abbey & McAuslan, 2004; Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009).

This is an important finding for several reasons. First, the study was able to measure self-reported sexually coercive behavior. As mentioned before, many studies that conduct evaluations of sexual violence prevention programs do not include behavioral measures (Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999; Moynihan & Banyard, 2008; Schewe & O'Donohue, 1996; Stephens & George, 2004) due to the challenges posed when attempting to measure behavior change. Second, not only was the study able to measure sexually coercive behaviors, but findings

indicated a significant decrease in self-reported sexually coercive behaviors among high-risk males. This finding is in contrast to other studies that attempted to measure change in sexually coercive behaviors (Foubert, 2000; Stephens & George, 2009), as their results indicated no significant changes in sexually coercive behaviors among high-risk males. Finally, the significant decrease in self-reported sexually coercive behavior among high-risk participants found in this study shows that participation in a bystander sexual violence prevention program may have great benefits for high-risk men. If this program can effect positive changes in high-risk men's self-reported sexually coercive behaviors, then it is effectively reducing the total amount of sexually coercive behavior occurring within fraternities, since the high-risk men are the ones perpetrating most of the sexually coercive behaviors.

Bystander Attitudes and Behaviors for Total Sample, Low-, and High-Risk Males

Surprisingly, no significant changes among the total sample, low-, or high-risk males were found for both bystander attitudes and bystander behaviors after participation in the bystander sexual violence prevention program, which is in contrast to the few studies that have evaluated bystander attitudes and behaviors (Coker et al., 2011; Moynihan & Banyard, 2008). One reason for this finding may be that the concept of bystander interventions for sexual violence prevention are still new. More programs are beginning to introduce ideas about how to be proactive bystanders to help prevent sexual violence (Banyard et al., 2007; Coker et al., 2011; Edwards, 2009; Foubert, 2000; Katz, 1993; Moynihan & Banyard, 2008), but this message may be something that participants

are not used to hearing and therefore it may take longer, more intensive interventions to help participants make the changes required to be proactive bystanders.

Another reason for this surprising finding is that the measures that exist to evaluate bystander attitudes and behaviors are still in the development phase. They have been validated and have been shown to be reliable with a few samples (Banyard et al., 2005; McMahon et al., 2011), but they have yet to be validated with larger and more diverse samples. So, it may be that the measures used in this study to evaluate bystander attitudes and behaviors may need further development before they are sensitive enough to detect significant changes among a sample of low- and high-risk university males.

Also, the strong male peer support groups that exist within fraternities may be another explanation for this finding. There is strong research on the powerful role of community norms in supporting a continuum of sexual violence among fraternity members (Schwartz & DeKeseredy, 1997, 2000; Schwartz & Nograd, 1996). Due to the powerful influence of community norms among fraternity members, it may be more challenging to change bystander attitudes and behaviors among members of this population. One way to possibly help change bystander attitudes and behaviors among fraternity members may be to help educate fraternity leaders and encourage them to be active prosocial bystanders with the hope that they will spread that information, through discussion and by setting an example, to their fraternity members. After all, that is the main strategy behind bystander sexual violence prevention programs: To educate socially influential people, such as fraternity leaders, in the techniques of bystander intervention,

who in turn influence others to join in, creating a sort of viral enthusiasm for the cause (Banyard et al, 2007; Edwards, 2009; Foubert, 2000; Katz, 1993).

Risk Status

Consistent with study predictions, risk status predicts rape myth acceptance, bystander attitudes, sexually coercive behaviors, and sexually coercive behavioral intentions. More specifically, the results indicate that low-risk males showed more favorable outcomes on attitude and behavior measures compared to high-risk males. As expected, high-risk men fared worse on each of these outcome measures, meaning high-risk males had more acceptance of rape myths, were less likely to stop their own or someone else's sexually violent behaviors, had more sexually coercive behaviors, and more sexually coercive behavioral intentions when compared to low-risk men. This finding is consistent with literature (Dietz et al., 1982; Malamuth, 1981; Malamuth, 1986; Malamuth et al., 1995; Meuhlenhard, 1988; Pryor, 1987) on men who are considered high-risk for using sexually coercive behaviors, in that men who have engaged in sexually coercive behavior in the past, or high-risk men, may be less receptive to anti-rape content. They are likely to have developed stubborn attitudes, expectancies, and habits commensurate with experiencing women as legitimate targets of sexual violence, and therefore it may be harder to change their attitudes and behaviors about sexual violence. Literature (Dietz et al., 1982; Malamuth, 1981; Malamuth, 1986; Malamuth et al., 1995; Meuhlenhard, 1988; Pryor, 1987) attests to a close linkage between past sexual aggressiveness and the harboring of congruent attitudes and behavioral tendencies, meaning men who have been sexually aggressive or coercive in the past are liable to have

a vested interest in affirming and potentially defending attitudes that legitimize and condone sexually aggressive inclinations. They are likely to be less swayed by anti-rape content than their noncoercive counterparts.

Since risk status predicts many outcomes related to attitudes and behaviors about sexual violence, it is critical to focus on determining the effect of intervention programs on both low- and high-risk males. If evaluations can determine the effectiveness of intervention programs with both low- and high-risk males, then researchers may be able to determine if different types of programming are needed to effect change in both groups of males. It may be that high-risk males require longer, more intensive interventions to help change the stubborn attitudes they have developed in regards to sexual violence (Heppner et al., 1999; Moynihan & Banyard, 2008).

Though it is important to assess risk status prior to the intervention in order to ensure effectiveness with both low- and high-risk males (Breitenbecher, 2000), there is debate about the most effective way to classify participants based on risk status. Some studies have labeled fraternity men and athletes on college campuses as high-risk for being sexually coercive (Foubert, 2000; Foubert & McEwen, 1998; Foubert & Newberry, 2006; Heppner et al., 1999), while other studies (Schewe & O'Donohue, 1996; Stephens & George, 2004, 2009) classified participants into high- or low-risk for committing sexually coercive behavior using either the Modified Sexual Experiences Survey (Dahl, 1993) or the Attraction to Sexual Aggression Scale (Malamuth, 1989a, 1989b). However, as previously discussed, both options raise certain concerns, so researchers have yet to agree on the most effective way to assess risk status prior to the intervention. It may be

that using a survey of past self-reported sexually coercive behaviors along with another measure that can assess social norms beliefs among the participants may be a useful way to assess risk status.

Ethnicity

Ethnicity predicts rape myth acceptance, bystander attitudes, and bystander behaviors. However, contrary to the hypothesis, European-Americans fared worse on these outcomes measures when compared to African-Americans, Asians, Hispanics, and participants who self-identified as “other”. This is an interesting finding because the *Bringing in the Bystander* program evaluated in this study does not necessarily infuse culturally relevant information into the program, so the fact that the program was more effective with minority groups versus European-Americans is surprising. It was found that ethnicity specifically predicts bystander attitudes and behaviors. It may be that members of different ethnic groups have learned different values and beliefs about when it is appropriate to intervene and be a proactive bystander. Research has been conducted on the phenomenon known as the “bystander effect”, which refers to cases where individuals do not offer any means of help in an emergency situation to the victim when other people are present (Darley & Latané, 1969; Meyers, 2010). Many factors, such as diffusion of responsibility or characteristics of the victim, contribute to whether a person will intervene and act as a proactive bystander or not, but very little research has been conducted to evaluate if the bystander’s ethnicity plays a role in whether they will intervene or not. One study (Pozzoli, Ang, & Gini, 2012) examined bystander behaviors towards bullying among school-age children from two culturally diverse settings and

found that students' ethnicity moderated the relations between individual predictors and behavior during bullying episodes. In particular, they found that individual attitudes were a stronger predictor of Italian students' behavior, while perceived peer expectations were more strongly associated with behavior of Singaporean participants. This study is one of the first to provide data analyzing the association between bystander behaviors and different correlates using a cross-cultural approach. Based on the findings of the current study, it would be useful to conduct further research to assess if ethnicity plays a part in whether people choose to be proactive bystanders or not. Regardless of the reasons for the differences in outcomes based on ethnicity, it is clear that program developers need to focus on developing culturally relevant bystander interventions since ethnicity does predict changes in both bystander attitudes and behaviors.

Fraternity Leadership

The results of this study suggest that fraternity leadership predicts bystander attitudes. In support of the hypothesis, fraternity leaders indicated more likelihood to stop their own or someone else's sexually violent behaviors when compared to general fraternity members. This finding is promising in regards to bystander interventions as the main strategy behind bystander interventions is to target socially influential individuals from across community subgroups, such as fraternity leaders. The goal is for these individuals to engage in a basic education program that will equip them to integrate moments of prevention within existing relationships and daily activities. By doing so, new norms will be introduced and those within their sphere of influence, general fraternity members, will be significantly influenced to move from passive agreement that

violence is wrong to active intervention to stop violence (Banyard et al., 2007; Edwards, 2009; Foubert, 2000; Katz, 1993).

Schwartz and DeKeseredy (1997) posit that rape-supportive male peer groups, such as fraternities, are correlated with college men's dating violence. Schwartz and DeKeseredy (1997) also believe that it may not be membership in these groups that correlates to sexual violence, but the peer support within these groups for intimate partner violence. This suggests a complex connection between male peer group support, social norms, community, and sexual violence. That sheds light on another reason the finding that fraternity leaders are more willing to be proactive bystanders than general fraternity members is important. No matter the reason for the association between fraternity membership and sexual violence, fraternity leaders represent high status community members who are visibly prominent and could serve as key leaders in changing social norms around issues of sexual violence (Katz, 1993; Moynihan & Banyard, 2008), and therefore they may benefit from the bystander approach to sexual violence prevention.

Previous Sexual Violence Prevention Education Participation

This study found that participation in either the *Bringing in the Bystander* (BITB) pilot program or any other sexual violence prevention education in the past predicted bystander attitudes, meaning those who participated in the BITB pilot or any other previous sexual violence prevention education were more likely to stop their own or someone else's sexually violent behaviors compared to those who did not participate in the BITB pilot program or any other previous sexual violence prevention education. This is an interesting finding because it shows that seeing the BITB program twice may

produce more positive outcomes related to bystander attitudes. The length and dosage of sexual violence prevention programs has been shown to impact the outcomes. Anderson and Whiston (2005) found that longer interventions, such as semester-long courses or multi-session workshops, may be more effective than brief interventions at promoting positive change. A few studies (Heppner et al., 1999; Moynihan & Banyard, 2008) also found that educational programs that are longer have a more significant impact than shorter ones and that repeated exposure to programming may increase its impact. The finding that participation in the BITB pilot or previous sexual violence education predicted more positive bystander attitudes could be evidence to support the implementation of bystander prevention programs over the course of time and not just one-shot programs.

Limitations

The current study used a quasi-experimental pre-, post-, and follow-up survey research design with intervention and comparison groups. Inherent in such a research methodology are certain advantages and disadvantages.

In the present study, respondents were asked to complete the surveys at each time period on their own, but the researcher was present in the room, if needed. This form of survey administration has a number of advantages. It allows respondents to seek clarification or elaboration from the researcher if they are uncertain about instructions or the intent of a question. Also, allowing respondents to complete the survey on their own instead of with an interviewer allows them time to consider their answers and avoids biasing errors associated with interviewers, such as variation in personal characteristics

and in interviewing skills. Self-administered surveys may also deal with sensitive issues more effectively since the participant is able to respond to the questions anonymously (Rubin & Babbie, 2010).

This form of survey administration also has inherent disadvantages. According to Rubin and Babbie (2010), some of the limitations of self-administered surveys may be more incomplete questionnaires, more misunderstood questions, and lower response rates. Self-administered surveys allow some anonymity since the respondent is completing the survey on their own. However, since the researcher is present during survey administration and the survey asks about sensitive subjects, such as sexually coercive behaviors and attitudes about sexual violence, participants may feel some pressure to respond to survey items in more socially desirable ways, which could lead to inaccurate results due to social desirability bias. Similarly, since it was not possible to observe actual behaviors in this study, the survey data was collected through participant self-report and this may also lead to biased results if the participants were not honest in their responses to questions about such sensitive topics. I attempted to control for socially desirable responding by including the Marlowe-Crowne Social Desirability Scale (MCSDS) as one of the survey measures in this study. However, the MCSDS outcomes were not reliable for the sample in the current study (see Chapter 4: Methods in the section entitled, “Measures” for more information), so I was not able to include the survey results in my analyses, and in turn was not able to statistically control for socially desirable responses. Continuing to develop and expand measures to assess socially desirable responses would be valuable for more accurate evaluation studies in the future.

The organization of the instruments in the survey package is another limitation. If I were to conduct this evaluation again, I would organize the instruments in the package differently. First, I would attempt to have the participants take the Modified-Sexual Experiences Survey, which asked about past sexually coercive behavior and was used to assess risk status prior to the intervention, at another time before the program administration. Because this survey asks about self-reported sexually coercive behaviors, it may have made some of the participants somewhat defensive, which is what the bystander programs are intended to prevent. I would also have provided more instructions at the beginning of the Marlow-Crowne Social Desirability Scale (MCSDS) in order to help participants understand that those questions were based on typical life situations and not situations involving sexual violence. Clarifying the instructions on the MCSDS might have made that instrument more reliable with this sample.

Another serious limitation with this study is the low response rate for the follow-up survey. The response rate for the follow-up survey in this study was 38.7%. Some challenges associated with low response rates are non-response bias, since little is known about the characteristics of nonrespondents (Dey, 1997, Groves, 2006) and possible statistical biases (Tomaskovic-Devey, Leiter, Thompson, 1994). However, clarity about what rate of non-response should be considered ‘too high’ is elusive (Baruch & Holtom, 2008; Rogelberg & Stanton, 2007). Obtaining follow-up data was very challenging with this population and I went to great lengths to try to obtain as much follow-up data as possible. However, due to the challenges already described in Chapter 4: Methods in the section entitled “Procedures,” I was not able to obtain as much follow-up data as I would

have liked. I did not have funding to provide incentives to each participant, but I offered a drawing in which three participants received a \$50 gift card. The low response rate is somewhat attributable to the fact that if the fraternity members who attended the program were not at their individual fraternity meeting the week that I went to collect the follow-up data, then I was not able to obtain their follow-up data. Being unable to estimate the effects of non-respondents, I am uncertain of the extent to which the findings are generalizable.

A longer follow-up period would have improved the study, though it would have increased the risks for participant attrition. Since the program took place in October 2012, it was important to try to gather follow-up data before the end of the semester (December 2012) in order to try to reduce the attrition rate. The director of Fraternity and Sorority Life believed that once students left campus for the break between semesters, it would be more challenging to obtain their follow-up data when they returned. With that in mind, I decided to collect the follow-up data before students left for the break, which was five weeks after program implementation. The hope was to reduce the attrition rate, but that meant the follow-up period was shorter than I would have liked. Follow-up periods among studies that assessed the effectiveness of sexual violence prevention programs vary extensively. Some studies did not have a follow-up period, meaning they only administered an immediate posttest (Foubert & McEwen, 1998; Foubert & Newberry, 2006; Moynihan & Banyard, 2008; Stephens & George, 2004), while other studies had somewhat longer follow-up periods such as a two-week follow-up (Schewe & O'Donohue, 1996) or a five-week follow-up (Stephens & George, 2009). Other studies

were able to conduct longer follow-up periods such as the five-month follow-up in the Heppner et al. (1999) study and the seven-month follow-up in the Foubert (2000) study. Lack of funding (Banyard et al., 2007) and smaller sample sizes at follow-up due to attrition (Banyard et al., 2007; Schewe & O'Donohue, 1996) were the two most mentioned challenges with conducting longer follow-ups.

Another major limitation is that the prevention program used in this study was a one-time only treatment that was 90 minutes long. It may be possible that in order to see significant changes across attitudes and behaviors with both low- and high-risk men, a longer, more intensive intervention may be required. Many of the constructs being measured were attitudes and behaviors that participants have likely engaged in for long periods of time and it may be unreasonable to assume that they can be changed with a 90-minute prevention program. Results of one evaluation conducted with the *Bringing in the Bystander* (BITB) program (Moynihan & Banyard, 2008) indicated that the two-session program (4.5 hours) as compared to the one-session program (90 minutes) may be warranted for fraternities and men's athletic teams as these groups may require a "higher dose" intervention when compared with students in the general university population. Due to the challenges previously discussed in working with Fraternity and Sorority Life, implementation and evaluation of the 4.5 hour BITB program was not possible at this time.

Another challenge faced during this program evaluation involves the implementation of the program, itself. There is a political component to program evaluations (Boulmetis & Dutwin, 2000; Shaw, 2000), and this evaluation was no

different. According to Hoefler (1994), there are several reasons for the political nature of program evaluations. First, program administrators may not want to gather information that could be detrimental to their organization. Second, more rigorous evaluations are more troublesome, more expensive, and more time-consuming than less rigorous designs. The implementation and evaluation of this program faced some of these challenges. Obtaining Fraternity and Sorority Life's support was challenging. Once I was able to obtain their support, there were still challenges that arose when working with Fraternity and Sorority Life. First, trying to stress the importance of the evaluation component of the program implementation along with the reasons behind why a comparison group was necessary was very challenging. It was important to have Fraternity and Sorority Life staff's support for the evaluation and comparison group program. In the end, Fraternity and Sorority Life staff understood the importance of the evaluation and comparison group, but were unwilling or unable to put in the work to help achieve those goals. Also, the length of time allotted to present the program and obtain the evaluation information was too short. Fraternity and Sorority Life staff would only agree to implement the program and its evaluation in a 2-hour time slot, which was not enough time to present the 90-minute program and also collect pretest, informed consent, and posttest data. Consequently, the portion of the evaluation measures that the participants may have rushed through since the time allotted for the program ran over was the posttest. So, it is very possible that some responses on the posttest were not accurate since participants were anxious to leave the program. Finally, the fact that the sorority members did not see the program was a limitation to the evaluation as a whole. The Relationship Violence and

Sexual Assault Prevention Program assistant director and I offered to present the BITB program to both fraternity and sorority members. However, Fraternity and Sorority Life staff stated they did not want to present the BITB program to the sorority members as they had arranged for them to attend a presentation by a survivor of sexual violence. Bystander interventions are designed to be presented to both men and women with the same message of encouraging proactive bystander behaviors and attitudes. The hope is that bystander interventions will decrease defensiveness and help participants be more receptive to the prevention messages since the same program is being presented to both genders. However, the men were aware that their female counterparts were not being presented with the same program and that may have led to more defensiveness and resistance to the program messages.

One final limitation involves trying to distinguish between the participants who reported that they had participated in the *Bringing in the Bystander* (BITB) pilot program and those that stated they had other sexual violence prevention programming in the past. There was no way to distinguish between the participants who responded yes to either of those questions on the background questionnaire, so I could not be certain whether the participants who stated they had sexual violence prevention education in the past were referring to the BITB pilot program or not. Since I was not able to make that distinction, I created a new variable that combined those participants who responded yes to either of those questions and included that variable as a covariate in my analyses to attempt to control for previous sexual violence prevention programming.

Future Research

There are several research initiatives that can be undertaken in the future to build on the results of this study. Future studies may benefit from longer follow-up periods to ensure that attitude and behavior changes are maintained over time. Some challenges, such as how to get the most follow-up data, may arise when follow-up periods are extended, however incentives may be an effective way to obtain more follow-up data and ensure longer follow-up periods. Also, garnering university and program support (ie: Fraternity and Sorority Life) for the prevention program implementation would be crucial in obtaining more follow-up data since the participants would be aware the program and university support the project.

Another area future studies can focus on is determining risk status prior to the intervention. As previously discussed, it is crucial to understand the programs' impact on both low- and high-risk males in order to ensure the program messages are reaching the target audiences. It would also be beneficial to assess different ways of measuring risk status, such as by surveys or group membership, to determine which ones are the most accurate.

It would also be useful to evaluate longer, more intensive interventions with high-risk males as they may require a "higher dose" of programming in order to see attitude and behavior changes (Moynihan & Banyard, 2008; Stephens & George, 2004, 2009). If possible, it would be beneficial to evaluate programs that provide prevention information over multiple sessions or semester-long interventions, as they may affect more change for the high-risk males, whose stubborn attitudes and behaviors related to sexual violence

may be harder to change than those of their noncoercive counterparts (Dietz et al., 1982; Malamuth, 1986; Malamuth et al., 1995; Meuhlenhard, 1988; Pryor, 1987).

When evaluating program outcomes, it would be useful to focus on both attitude and behavior outcomes in order to ensure changes in both attitudes and behaviors. There are two schools of thought regarding the link between attitudes and behaviors. One group believes that prior attitudes predict subsequent behavior (Fazio, 1990; Fazio & Zanna, 1981; McGuire, 1968, 1985; Petty & Cacioppo, 1986a). While, the other group believes that behaviors do not change in accordance with attitude change (Cook & Flay, 1978; Festinger, 1964; Wicker, 1969). Regardless of which group one sides with, researchers have suggested that sexual violence prevention studies should include both attitudinal and behavioral outcome measures to ensure that the program is effective at changing not just attitudes, but also behaviors among participants (Brecklin & Forde, 2001, Breitenbecher, 2000; Lonsway, 1996; Schewe & O'Donohue, 1996; Yeater & O'Donohue, 1999). Also, it would be crucial to focus on outcomes related to sexual violence, but also outcomes related to bystander attitudes and behaviors since the goal of bystander sexual violence prevention programs is to increase prosocial bystander behaviors. Also, it would be important to evaluate the above mentioned outcomes for both low- and high-risk males to ensure the program is effecting change with both groups.

One final area of interest would be to focus on campus leaders as the peer educators who present the program. Results of this study suggest that fraternity leadership predicted bystander attitudes, so it would be interesting to assess if a bystander

sexual violence prevention program presented by fraternity leaders to general fraternity members produced different outcomes than a bystander sexual violence prevention program presented by campus peer educators.

Implications for Theory

Feminist Theory

From a feminist perspective, the most adequate explanation of the motivation for, and incidence of, sexual violence is found in the complex interplay between existing social structures, conventional attitudes, and the differential gender socialization between males and females in a patriarchal society (Lorber, 2010). Results of this study indicate that a bystander sexual violence prevention program can change attitudes related to sexual violence among low-risk males, but not among high-risk males. If the program is unable to change attitudes related to sexual violence among high-risk males, then these findings may not support the utility of feminist theory as a framework for this type of programming since no attitudes changes were found. These conventional attitudes have taken years to develop, so one could assume that they would not be easily changed. It may take more than a one-shot prevention program to change these attitudes and the way men and women are socialized within our communities. The program must be able to change, not only the attitudes of high-risk males, but must go a step further to change the social structures within our communities that allow for these attitudes and the differential gender socialization to continue.

The feminist approach also argues that sexual violence is an extension of the current legal, social, economic, and political systems in which we live, which manifest

and reinforce male dominance over women (Lorber, 2010). Results of this study found that it is challenging to change attitudes and behaviors related to sexual violence among high-risk men. If it is challenging to simply change attitudes and behaviors related to sexual violence, then one would assume that it would be almost impossible to change the attitudes and behaviors that have been grounded in these systems via a 90-minute bystander intervention. From a feminist perspective, it would seem that we still have a long way to go before we can expect these types of prevention programs to make larger societal changes to end sexual violence.

Social Learning Theory

Social learning theory is an expectancy model that involves six components: expectancies, skill building, observational learning, modeling, self-efficacy, and reinforcement (Lanier et al., 1998). Social learning theory posits that individuals learn behaviors from one another through observation, imitation, and modeling. The results of this study indicate that fraternity leaders were more likely to stop their own or someone else's sexually violent behaviors when compared to general fraternity members. This finding supports the use of social learning theory as a framework for sexual violence prevention programming especially focused on high-risk males because the program appears to have made changes in bystander attitudes among fraternity leaders, who can then model those positive bystander behaviors to general fraternity members. Based on social learning theory, general fraternity members would observe their fraternity leaders' new bystander behaviors and then imitate them, thereby increasing the overall level of bystander behaviors within the fraternity.

Also, from a social learning perspective, sexual violence continues because there are no real consequences to perpetrators. This is very true within the culture of fraternities as the male peer support that exists within these groups for sexual violence is very strong (Schwartz & DeKeseredy, 1997). Within these rape-supportive male peer groups, such as fraternities, as long as one is not breaking the community norms established within the fraternity that support sexual violence, then there are ultimately no real consequences to perpetrators from their fraternity brothers (Schwartz & DeKeseredy, 1997, 2000; Schwartz & Nogrady, 1996). As long as fraternity members support the community norms that perpetuate sexual violence, then they will receive the positive rewards of support and acceptance from their fraternity brothers. The results of this study indicating that fraternity leaders are more likely to have more positive bystander attitudes than general fraternity members is beginning evidence that supports the utility of social learning theory as a framework for sexual violence prevention programming. If bystander attitudes among fraternity leaders can be changed, then it is very possible that there will then be more consequences to perpetrators of sexual violence within fraternities. It may be that the fraternity leaders will begin to participate in more active bystander behaviors that do not support sexual violence within their fraternities, thus general fraternity members who continue to perpetrate sexual violence will see negative consequences in that they will no longer have the support of their peers within the fraternity.

Implications for Policy

This study indicates that individual and community responses to sexual violence are a crucial part in helping to end sexual violence at universities. The bystander

approach to sexual violence prevention attempts to change how individuals and communities respond to sexual violence by encouraging everyone to be active bystanders. In order to assist in accomplishing this goal, universities must develop policies that address the response to sexual violence on campus. Many universities have a campus policy on how to respond when sexual violence occurs on campus, but there are still some universities that have not updated their sexual violence policies to include consequences or processes for handling sexual violence on campus. It is essential for both university men and women to know that there is a university policy addressing sexual violence and the response process on campus. It is important for women so they understand the process of reporting sexual violence on campus and what the outcome of that report will be. Since so many rapes go unreported, it is important for women to know that the university takes sexual violence seriously, so they will be more likely to make a report. Also, if women are aware of the process that will occur after the report is made, they may be more likely to make a report in the hopes that they will get the help they need. It is also vital that men understand that the university has policies in place regarding sexual violence, so they will be more aware of their actions and hopefully, more likely to act as bystanders since they will be aware of the consequences and processes that the university will undertake once sexual violence occurs. If the university's stance of sexual violence is made clear, there is a higher likelihood that both men and women will act as active bystanders since they will be aware of how the university will handle sexual violence and what types of supports are available to victims.

Since the results of this study indicate that bystanders programs are effective with university populations, it may benefit university communities to make sexual violence prevention programs mandatory for all students on campus. Results of this study indicate that bystander prevention programs are effective with both low- and high-risk males, so universities can use this information to feel confident that the sexual violence prevention message is reaching all their students, regardless of their risk status. If all students on campus are educated about how to be proactive bystanders, there is a good chance that the university community will see a reduction in sexual violence and in turn, possibly a change in the campus norms around sexual violence.

From a social policy perspective, the concept of bystander interventions to reduce sexual violence on campus aligns well with the Campus Sexual Violence Elimination (SaVE) Act (Casey, 2011) that is part of the newly passed Violence Against Women Act. The SaVE Act is a significant piece of legislation that specifically addresses college rape. Currently, American universities are required to take action once a sexual assault is reported and to provide resources for victims, but are not obligated to have a prevention policy. The SaVE Act will require institutions to provide prevention and awareness programs for all incoming students and new employees (Casey, 2011; Clery Center for Security on Campus, 2012). Similar to the concept behind bystander prevention programs attempting to change the social norms on campus that exist that allow sexual violence to continue, the SaVE Act will require institutions to go beyond traditional risk reduction alone and cover primary prevention, consent, bystander interventions, and reporting options with the goal of changing the culture of tolerance for sexual violence on college

campuses (Clery Center for Security on Campus, 2012). The results of this study indicate that bystander prevention programs can be effective with both low- and high-risk university males, which may be promising evidence that moving from traditional risk reduction interventions to bystander interventions, as proposed by the SaVE Act, may be a good option to help prevent sexual violence on campus.

Implications for the Profession of Social Work

According to the National Association of Social Workers (2008), the primary mission of the social work profession is to enhance human well-being and help meet the basic human needs of all people. To accomplish this mission, social workers often focus on treatment and intervention, which are critical processes used to enhance human well-being. However, resource and time constraints pull social workers away from the other critical component of social work: prevention. Concerted attention to prevention may enhance social work's impact by complimenting intervention and treatment efforts and reducing the need for them over time (Bloom, 1981; Bowker, 1983; Meyer 1974).

The findings of this study reveal that prevention efforts may yield positive results in the reduction of sexual violence at universities. It is crucial for social workers to focus on the prevention of sexual violence in order to decrease the occurrence of sexual violence within our communities. The outcome of focusing on prevention of sexual violence could be not only a reduction in sexual violence, but also an increase in community members' understanding about the causes of and solutions to sexual violence. If the bystander approach to sexual violence prevention is incorporated into these prevention efforts, community members have the opportunity to learn the role they each

play in either perpetuating sexual violence in their community or being part of the solution and helping end sexual violence in their community (Banyard et al., 2007; Edwards, 2009; Foubert, 2000; Katz, 1993; Moynihan & Banyard, 2008). If the bystander approach to sexual violence prevention continues to be effective, the overarching goal will be to change the social norms that currently exist that allow sexual violence to continue. So, effectively, the impact of bystander sexual violence prevention programs could be to reduce sexual violence, but also in the long run, hopefully eliminate sexual violence by eliminating the norms in our communities that allow it to continue. According to the Centers for Disease Control and Prevention (2013), the ultimate goal of sexual violence prevention work is to stop sexual violence before it begins, which is what effective bystander prevention programs hope to accomplish.

Implications for Social Work Education

In order for prevention work to play a role in social work practice similar to that of treatment and intervention services, it must be seen as a critical component of social work education. In the past, several voices called for social work to get involved in prevention (Bloom, 1981; Bowker, 1983; Meyer 1974) and also discussed its importance in the schools (Levine, Allen,-Meares, & Easton, 1987). However, schools of social work did not act on this interest and did not incorporate basic preventive concepts (Siefert, Jayaratne, & Martin, 1992). Prevention is still not a priority in social work education as evidenced by a survey that found that of 70 MSW programs (71% response), almost 45% offered no formal training in primary prevention, although 42% claimed that they incorporated prevention content into the curriculum (Diaz & Kelly, 1991). Social work

educators often incorporate treatment and intervention services into their coursework. However, in order for future social workers to also be aware of the importance of prevention, social work educators must incorporate prevention information into their coursework in the same manner that they focus on treatment and intervention services. The addition of prevention information in the social work curriculum for both masters' and baccalaureate programs is essential if we expect students to allot time in their future practice for the goal of primary prevention (Woody, 2006). Social work educators must place an emphasis on not only teaching strategies for effective treatment and intervention, but they also need to incorporate information on how to effectively work at preventing the social problems that exist in our communities, such as sexual violence.

There are many courses in the social work curriculum that would easily lend themselves to the inclusion of prevention science information. For example, to specifically focus on teaching social work students about sexual violence prevention, it would be beneficial to incorporate prevention strategies and theories into interpersonal violence electives within the social work curriculum. Also, prevention science content could be incorporated into child welfare courses, family violence courses, substance abuse courses, and medical social work courses, just to name a few. Incorporating prevention content into current courses would be an effective way to begin teaching social work students about prevention and the role it plays in attempting to ameliorate the social problems that exist within our communities (Woody, 2006).

Implications for Practice

This report concludes with a discussion of the implications of the present research for social work practice. The results of this study provide useful information regarding the effectiveness of bystander sexual violence prevention programs with both low- and high-risk university males. Since this program is effective at changing attitudes and behaviors related to sexual violence among university males, it may be wise to adopt this program and implement it campus wide with different organizations so more members of the campus community will be educated about how to be proactive bystanders with the goal of ending sexual violence on campus.

This study may also be helpful for social workers and others who plan to develop and implement sexual violence prevention programs with university students on their campus. Results of this study suggest that the bystander approach to sexual violence prevention may be an effective tool for changing attitudes and behaviors related to sexual violence among university males. Hopefully, social workers at universities will use this information when developing and/or implementing new sexual violence prevention programs on their campuses.

When implementing sexual violence prevention programs on campus, it is critical that social workers ensure that prevention programs are spreading their message to the intended audience. Findings from this study indicate that bystander prevention programs can affect change in attitudes and behaviors related to sexual violence with both low- and high-risk university men, but that longer, more intensive programs may be more effective to reach the men who are at high-risk for using sexually coercive behaviors. This is vital

information for social workers who are attempting to implement sexual violence prevention programs with high-risk university males in that it can direct them to the most effective types of prevention programs that will help ensure more positive outcomes for all the participants. It is important for those who are implementing sexual violence prevention programs on campus to understand that shorter programs are not as effective at changing attitudes and behaviors related to sexual violence, especially with high-risk males, compared to longer, more intensive programs (Moynihan & Banyard, 2008; Stephens & George, 2004, 2009).

Although this study focuses on primary prevention, secondary prevention efforts, which focus on the immediate responses after sexual violence has occurred to deal with the short-term consequences of violence, may also be informed by the study's findings (Centers for Disease Control and Prevention, 2004). Professionals who work on university campuses, such as campus police officers and counselors, may also benefit from information that allows them to specifically target their intervention efforts. Campus police officers may gain information related to how they can best work with high-risk males on campus to be a part of the solution to help end sexual violence. Campus counselors can also benefit from the results of this study by learning more about the techniques of how to be an active bystander, so they can work with the campus community and engage them in becoming active bystanders in many situations, including when sexual violence occurs.

Conclusion

Bystander sexual violence interventions are a new method of sexual violence prevention used to engage all community members and teach them to be active bystanders to help end sexual violence. Results of this study indicate that bystander interventions produce positive outcomes with both low- and high-risk university males. These findings will expand our ability to design programs that can have an impact on reducing sexual violence at the university level by ensuring the program is having the desired impact on the target audience. The goal is to reach all participants with messages about how to be active bystanders, which will lead to individual changes, which will then hopefully lead to larger societal changes. In the end, the goal is for bystander interventions to help change the current social norms that exist, so that sexual violence is no longer tolerated in our society.

Appendix A

Bringing in the Bystander Logic Model

Goal(s): The main goal of the *Bringing in the Bystander* program is to inform university males about sexual violence and how to be effective bystanders as a means of prevention through education.

Problem: Sexual violence on college campuses.

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INPUTS	ACTIVITIES	TARGET	SHORT TERM OUTCOMES	MEDIUM TERM OUTCOMES	SOCIETAL GOALS
Program Staff Peer Educators Supplies and equipment for presentations (copies, projector, laptop) <i>Bringing in the Bystander</i> curriculum Time Funding Resources	Outreach to UTA Fraternity and Sorority Life director and Relationship Violence and Sexual Assault Prevention Program assistant director to solidify partnership in support of implementing and evaluating a bystander-focused sexual violence prevention program with high-risk university males. Conduct peer educator training. Utilize evidence-based bystander sexual violence prevention program curriculum.	Males who are members of a fraternity at UTA (high-risk university males) during the Fall 2012 semester.	To increase participants' knowledge about sexual violence on college campuses. To decrease acceptance of sexual violence by changing participants' attitudes related to sexual violence on campus. To increase participants' knowledge of how to safely and effectively intervene as a bystander when sexual violence occurs.	To decrease the prevalence of sexual violence among fraternity members at UTA. To increase healthy relationship behaviors among fraternity members at UTA. Enhance participants' sense of self-efficacy to intervene as a bystander when sexual violence occurs.	Create social norms that are less supportive of sexual violence on campus. Reduction in participants' sexual violence behaviors. To prevent sexual violence on campus through education.

Appendix B
Letters of Support



UNIVERSITY OF
TEXAS
ARLINGTON

RELATIONSHIP VIOLENCE &
SEXUAL ASSAULT PREVENTION (RVSP)
THE DIVISION OF STUDENT AFFAIRS

December 1, 2010

Nada Elias-Lambert, LMSW
The University of Texas at Arlington
School of Social Work
Box 19129
211 S. Cooper
Arlington, TX 76019

Dear Ms. Elias-Lambert:

It is with great enthusiasm that I accept your proposal to implement and evaluate the *Bringing in the Bystander* sexual violence prevention program with fraternity and sorority members at the University of Texas at Arlington.

As Coordinator of the Relationship Violence and Sexual Assault Program at UTA, I understand the importance of programming related to sexual violence prevention. I also believe that implementing a bystander prevention program will help raise awareness and educate members of the campus community on how to intervene and assist their peers. These educational efforts will help reduce incidents of sexual violence on campus.

The prevention program will be mandatory for all members of the Greek community at the University of Texas at Arlington. We are planning to implement the program in the Fall 2011 semester, working collaboratively with the Director of Greek Life, Seth Ressler.

In conclusion, I fully support your efforts to implement and evaluate the *Bringing in the Bystander* prevention program designed to raise awareness and aid in prevention of sexual violence at the University of Texas at Arlington. Any programs that can help our students identify behaviors and perceptions associated with relationship violence will ultimately benefit our students, campus, and the community at large.

Sincerely,

A handwritten signature in blue ink that reads "Charity Stutzman".

Charity Stutzman
Coordinator, Violence Prevention and Student Intervention
300 W. First Street, Arlington, TX 76019
Box 19355,
817.272.9250
stutzman@uta.edu



UNIVERSITY OF
TEXAS
ARLINGTON

**GREEK LIFE
& UNIVERSITY EVENTS**
DIVISION OF STUDENT AFFAIRS

November 29, 2010

Nada Elias-Lambert, LMSW
The University of Texas at Arlington
School of Social Work
Box 19129
211 S. Cooper
Arlington, TX 76019

Dear Ms. Elias-Lambert:

Your proposal to implement and evaluate the *Bringing in the Bystander* sexual violence prevention program with fraternity and sorority members at the University of Texas at Arlington has my enthusiastic support.

As the Director of Greek Life at UTA, I understand the importance of programming related to sexual violence prevention. I also believe that implementing a bystander prevention program will help raise awareness and educate members of the Greek community about how to intervene and assist their peers to help reduce incidents of sexual violence on campus.

Understanding the importance of this program we will work to make it an expected or mandatory program for all members of the Greek community at the UT Arlington. We are also planning to implement the program in the Fall 2011 semester. During this process we will work collaboratively with the Violence Prevention and Student Intervention coordinator, Charity Stutzman, to implement this program at UTA.

In conclusion, I fully support your efforts to implement and evaluate the *Bringing in the Bystander* prevention program designed to raise awareness and aid in prevention of sexual violence at the University of Texas at Arlington. Any programs that can help our students make better decisions about relationship violence and its consequences will benefit our students, campus, and the community at large.

Sincerely,

Seth Ressler
Director,
Greek Life and University Events
The University of Texas at Arlington

Appendix C
Measures

Fidelity Checklist

Program Information

Date: _____ Time: _____ Number of Participants: _____

Name of facilitator completing form: _____ Name of Co-Facilitator: _____

Fidelity Items (Please answer the following questions about the program you just facilitated)

1. How long was the program? _____
2. About how many questions were asked during the program? _____
3. About how many disruptions occurred during the program? _____
4. After the program, about what percent of participants can identify causes and consequences of sexual violence? _____%
5. After the program, about what percent of participants can identify appropriate bystander behaviors? _____%
6. Approximately how much time was spent discussing sexual violence content? _____ minutes
7. Approximately how much time was spent discussing bystander content? _____ minutes
8. About what percent of participants engaged in discussion during the program? _____%
9. Please circle the number that best represents how meaningful the discussion was?

Not meaningful at all 1 2 3 4 5 6 Very meaningful

Issues, ideas for improvement, or corrections related to the administration of the program.

Please list any challenging questions/concerns that came up during the program administration that could be addressed in a future facilitators guide.

Please state how you handled each of the above mentioned questions/concerns.

Background Questionnaire

1. How old are you? _____ years old
2. How would you describe your ethnicity?
 - a. Caucasian
 - b. African-American
 - c. Hispanic
 - d. Asian
 - e. Other
3. What is your class standing?
 - a. Freshman
 - b. Sophomore
 - c. Junior
 - d. Senior
 - e. Graduate Student
4. What is your expected date of graduation?

5. What is your sexual identification?
 - a. Heterosexual
 - b. Homosexual
 - c. Bisexual
 - d. Transgendered
6. Are you a member of a fraternity at UTA?
 - a. Yes
 - b. No
7. If yes, do you hold an office or leadership role in the fraternity?
 - a. Yes
 - b. No
8. Are you member of an athletics team at UTA?
 - a. Yes
 - b. No
9. Where do you currently live?
 - a. Fraternity House
 - b. Residence Hall
 - c. Other On-Campus Housing
 - d. Off-Campus
10. Did you participate in the “Bringing in the Bystander” peer education program presented thorough Greek Life last year?
 - a. Yes
 - b. No
11. Have you had any other sexual violence prevention education in the past?
 - a. Yes
 - b. No
12. If yes, please circle any education you have had in the past.
 - a. Workshops
 - b. Videos
 - c. Brochures
 - d. During orientation

Illinois Rape Myth Acceptance Scale – Short Form

1. If a woman is raped while she is drunk, she is at least somewhat responsible for letting things get out of control.
2. Although most women wouldn't admit it, they generally find being physically forced into sex a real "turn-on."
3. If a woman is willing to "make out" with a guy, then it's no big deal if he goes a little further and has sex.
4. Many women secretly desire to be raped.
5. Most rapists are not caught by the police.
6. If a woman doesn't physically fight back, you can't really say that it was rape.
7. Men from nice middle-class homes almost never rape.
8. Rape accusations are often used as a way of getting back at men.
9. All women should have access to self-defense classes.
10. It is usually only women who dress suggestively that are raped.
11. If the rapist doesn't have a weapon, you really can't call it a rape.
12. Rape is unlikely to happen in the woman's own familiar neighborhood.
13. Women tend to exaggerate how much rape affects them.
14. A lot of women lead a man on and then they cry rape.
15. It is preferable that a female police officer conduct the questioning when a woman reports a rape.
16. A woman who "teases" men deserves anything that might happen.
17. When women are raped, it's often because the way they said "no" was ambiguous.
18. Men don't usually intend to force sex on a woman, but sometimes they get too sexually carried away.
19. A woman who dresses in skimpy clothes should not be surprised if a man tries to force her to have sex.

20. Rape happens when a man's sex drive gets out of control.

(Rated on a 5-point scale from 1 = strongly agree to 5 = strongly disagree)

Bystander Attitude Scale – Revised

Please read the following list of behaviors and check how likely you are to engage in these behaviors using the following scale:

1. Ask for verbal consent when I am intimate with my partner, even if we are in a long-term relationship
2. Stop sexual activity when asked to, even if I am already sexually aroused
3. Check in with my friend who looks drunk when s/he goes to a room with someone else at a party
4. Say something to my friend who is taking a drunk person back to his/her room at a party
5. Challenge a friend who made a sexist joke
6. Express my concern if a family member makes a sexist joke
7. Use the word “ho,” “bitch,” or “slut” to describe girls when I was with my friends
8. Challenge a friend who uses “ho,” “bitch,” or “slut” to describe girls
9. Confront a friend who plans to give someone alcohol to get sex
10. Refuse to participate in activities where girls’ appearances are ranked/rated
11. Listen to music that includes “ho,” “bitch,” or “slut”
12. Confront a friend who is hooking up with someone who was passed out
13. Confront a friend if I hear rumors that s/he forced sex on someone
14. Report a friend that committed a rape
15. Stop having sex with a partner if s/he says to stop, even if it started consensually
16. Decide not to have sex with a partner if s/he is drunk.

(Rated on a 5-point scale from 1 = not at all likely to 5 = extremely likely)

Modified Sexual Experiences Survey

How many times have you...[response choices given for each question 1-18]

0 times	1-2 times	3-5 times	6-9 times	< 10 times
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- 1...had sexual intercourse with a woman when you both wanted to?
- 2...had a woman misinterpret the level of sexual intimacy you desired?
- 3...been in a situation where you became so sexually aroused that you could not stop yourself even though the woman didn't want to?
- 4...been in a situation where you engaged in kissing or petting with a woman when she really didn't want to?
- 5...continued to fondle a woman's breast after she said she didn't really want you to?
- 6...continued touching a woman's vagina after she said she really didn't want you to?
- 7...been in a situation where you either held a woman down, twisted her arm, etc. to get her to engage in kissing or petting when she didn't want to?
- 8...persuaded a woman to have sexual intercourse with you when she didn't really want to by telling her that you would end the relationship otherwise?
- 9...persuaded a woman to have sexual intercourse with you when she didn't really want to by pressuring her with continual arguments?
- 10...persuaded a woman to have sexual intercourse with you by saying things that you really didn't mean?
- 11...persuaded a woman to have sexual intercourse with you by giving her drugs or alcohol?
- 12...told a woman that you would hold her down, twist her arm, etc. to get her to have sexual intercourse with you when she didn't want to, but sexual intercourse did not occur?
- 13...to some degree, either held a woman down, twisted her arm, etc. to try to get her to have sexual intercourse with you when she didn't want to, but sexual intercourse did not occur?

14...had sexual intercourse with a woman when she didn't want to because you said you would hold her down, twist her arm, etc. if she didn't cooperate?

15...had sexual intercourse with a woman when she didn't want to because to some degree you either held her down, twisted her arm, etc.?

16...been in a situation where you obtained sexual acts from a woman such as anal or oral intercourse when she didn't want to by saying that you would hold her down, twist her arm, etc.?

17...wanted to force a woman to have sex, but did not?

18...raped a woman?

Modified Attraction to Sexual Aggression Scale

1. If you could be assured that no one would know, how likely would you be to engage in each of the following behaviors:
 - a. Group sex
 - b. Sex with someone else besides your steady girlfriend
 - c. Oral sex
 - d. Force a women to do something sexual she doesn't want to do (LF)
 - e. Bondage sex
 - f. Anal sex
 - g. Talk a woman into doing something sexual she doesn't want to do (LC)
 - h. Same-sex sex
 - i. Force a woman to have sex when she doesn't want to (LR)
 - j. Use alcohol in hopes of having a woman give in to something sexual she wouldn't give in to if not drinking (LAlc)

(Rated on a 5-point scale from 1 = very unlikely to 5 = very likely)

Bystander Behavior Scale – Revised

Now please read the same list below and circle yes for all the items indicating behaviors you have actually engaged in DURING THE LAST 5 WEEKS.

1. Ask for verbal consent when I am intimate with my partner, even if we are in a long-term relationship
2. Stop sexual activity when asked to, even if I am already sexually aroused
3. Check in with my friend who looks drunk when s/he goes to a room with someone else at a party
4. Say something to my friend who is taking a drunk person back to his/her room at a party
5. Challenge a friend who made a sexist joke
6. Express my concern if a family member makes a sexist joke
7. Use the word “ho,” “bitch,” or “slut” to describe girls when I was with my friends
8. Challenge a friend who uses “ho,” “bitch,” or “slut” to describe girls
9. Confront a friend who plans to give someone alcohol to get sex
10. Refuse to participate in activities where girls’ appearances are ranked/rated
11. Listen to music that includes “ho,” “bitch,” or “slut”
12. Confront a friend who is hooking up with someone who was passed out
13. Confront a friend if I hear rumors that s/he forced sex on someone
14. Report a friend that committed a rape
15. Stop having sex with a partner if s/he says to stop, even if it started consensually
16. Decide not to have sex with a partner if s/he is drunk.

(Responses include: a = Yes, b = No, c = Wasn’t in the situation)

Marlowe-Crowne Social Desirability Scale - Short Form

1. It is sometimes hard for me to go on with my work if I am not encouraged.
2. I sometimes feel resentful when I don't get my way.
3. No matter who I'm talking to, I'm always a good listener.
4. There have been occasions when I took advantage of someone.
5. I'm always willing to admit it when I make a mistake.
6. I sometimes try to get even rather than forgive and forget.
7. I am always courteous, even to people who are disagreeable.
8. I have never been irked when people expressed ideas very different from my own.
9. There have times when I was quite jealous of the good fortune of others.
10. I am sometimes irritated by people who ask favors of me.
11. I have never deliberately said something that hurt someone's feelings.

(Responses include: true or false)

Appendix D

Bringing in the Bystander Program Information

(Excerpt taken from The Bringing in the Bystander Facilitator's Guide)

Bringing in the Bystander™

Establishing a Community of Responsibility

Mary M. Moynihan, Robert P. Eckstein, Victoria L. Banyard, and Elizabeth G. Plante

Primary Program Objectives

- Participants will understand the concept of bystander intervention.
- Participants will be able to identify a continuum of inappropriate sexual behavior.
- Participants will develop empathy for those who have experienced sexual violence.
- Participants will understand their role in bystander intervention and make a commitment to intervene in the case of sexual violence before, during and after an incident.
- Participants will understand their own barriers to bystander intervention and techniques to overcome them.
- Participants will develop skills to intervene as a bystander.

Brief Program Description

Participants will come to understand that everyone has an important role to play in the intervention and prevention of sexual violence. Although most of us who live in the University community will not be survivors or perpetrators of sexual violence, each of us will be a bystander or witness to inappropriate behavior at some time. This program identifies a continuum of inappropriate behaviors and asks that each member of the community make a commitment to intervene. The participants will come to explore

individual strategies that reflect an appropriate level of intervention needed for the inappropriate behavior.

The participants will be given role-plays and scenarios and asked to practice intervention strategies and share their observations with others. Approaching men and women as bystanders invites their interest by appealing to their desire to help others, thereby circumventing their potential defensiveness. At the same time, if men and women are asked to confront the inappropriate behavior of others, it is likely that they will adjust or change their own behavior.

Research has identified the following predictors of successful bystander intervention: Recognition of a situation as a problem, being asked to intervene, witnessing intervention by role models, possession of skills to intervene, and group size. For the purpose of this prevention program, we have incorporated those predictors that we can reinforce through education: recognition of inappropriate behavior, skill building, asking for a commitment to intervene, and role modeling. Consistent with recommendations in the general prevention literature, the program includes educational, motivational, and skill building components. The first session is designed to introduce participants to the notion of bystander responsibility and help them begin to recognize inappropriate behavior that requires intervention. Participants will be given examples of both unsuccessful and successful interventions nationally, locally, and on our campus. The second session of the workshop is designed with two goals in mind: a) to give participants an opportunity to apply bystander responsibility to sexual violence, increase their awareness of sexual violence, and develop victim empathy and b), on increasing the

awareness among participants of the resources available and help them to understand the decision process behind successful bystander intervention.

Skill building will be achieved through group discussion and role-playing of scenarios designed to highlight bystander options. The program will focus on skills such as understanding appropriate levels of intervention, being mindful of personal safety, and different personal options bystanders have depending on the nature of the situation. Participants will also be given information about campus resources that they can use to support their role (e.g. becoming knowledgeable about the campus crisis center to help refer a friend who may disclose about being a victim of sexual assault). The facilitators and those in the group who may have already successfully intervened will serve as role models for expected behaviors.

Participants will be encouraged to take a bystander pledge, a key component in both the bystander and the prevention literature, is to increase motivation and commitment to intervene. Facilitators will ask them to intervene in situations of sexual violence – violence that spans the continuum of unacceptable behaviors outlined in the presentation.

To The Facilitator

As someone interested in training participants about sexual violence prevention through bystander education, you no doubt already know that sexual violence is a widespread problem on college campuses. This innovative prevention program that you will be facilitating is based on a model that expands sexual violence prevention efforts in a number of ways. Most sexual violence prevention programs address men as potential

perpetrators and women as potential victims. This program seeks to overcome the limitations of this traditional approach in order to reduce defensiveness 1) for men around being a perpetrator and 2) for women around preventing their own victimization. This program reduces defensiveness by focusing on women and men as active bystanders and by emphasizing this activity as part of their responsibility to the greater community. Men and women have been socialized not to intervene in the case of sexual violence. This program will counter that socialization. An outcome of this approach is that participants will identify themselves as bystanders who have a role in supporting victim/survivors and interrupting situations that could lead to sexual violence, and that they can do this in ways that are safe. To summarize this approach:

It is noticeably different from other sexual violence prevention programs in that it:

- Focuses on sexual violence prevention in a broader community context
 - Overcomes resistance and defensiveness of participants
 - Does not send victim-blaming messages, intended or unintended
 - Promotes engagement of the broader campus community in sexual violence prevention

This approach that you will be presenting to participants will:

- Create awareness of sexual violence, its prevalence and consequences.
- Give strong messages that challenge rape myths and promote empathy for victims of sexual violence.
- Help participants develop strategies for intervention:
 - before sexual violence occurs thereby de-escalating risky situations

- during a sexual assault that is happening and
- after an assault – to be an effective ally to survivors which includes both supporting the survivor, providing helpful information, and not remaining silent if participants have information pertinent for the authorities
- that are sensitive to survivors needs and wants, but driven by a bystander perspective and sense of responsibility and
- that balance responsibility to intervene with their own need for safety and self-care
- Impart to them skills that decrease the ambiguity in situations where the risk for sexual violence is high and empower them to effectively intervene.
- Teach them intervention skills for situations in which friends, acquaintances or strangers may be involved.

This approach includes:

- A message that is adapted for primary prevention that everyone in the community has a role to play.
- A shift away from targeting those most at risk for becoming victims or perpetrators to viewing themselves as bystanders with strategies for intervening.
- An impact that extends to a broader group that will change community norms.
- Sex-segregated to challenge socialization to violence and silence as an acceptable reaction.

PART 1: Introduce Concept of Bystander Intervention

Learning Outcomes

- Participants will gain an understanding of what bystander responsibility is through presentation of concepts and examples.
- Participants will have the opportunity to apply concept of bystander responsibility to their own past experiences.

PART 2: Applying Bystander Concepts to Sexual Violence

Learning Outcomes

- Participants will be able to identify the range of unacceptable sexual behaviors and become aware of the prevalence and context of sexual violence.
- Participants will increase their empathy for victims.
- Participants will cultivate skills in identifying situations where bystander intervention may be appropriate.

PART 3: Developing Skills as a Bystander

Learning Outcomes

- Participants will gain experience in working through the decision process with regard to bystander behaviors including the costs and benefits of intervention.
- Participants will gain knowledge of resources that are available to support bystanders and victim/survivors.
- Participants will express motivation and commitment to be an active bystander.

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Nada Elias-Lambert was born in Herndon, Virginia, on July 4, 1979, to parents Elie and Fadia Elias. She attended Plano Senior High School and graduated in 1997. She received the degree of Bachelor of Arts in Psychology from the University of Texas at Austin in 2001. From 2001 – 2003, she worked as the Community Education Coordinator at The Turning Point Rape Crisis Center in Plano, TX, while also pursuing her Master's degree in Social Work at the University of Texas at Arlington. In 2004, she received the degree of Master of Science in Social Work from the University of Texas at Arlington. During the following year, she was employed as the Neonatal Intensive Care Unit Social Worker at Parkland Memorial Hospital. From 2005-2006, she served as a Youth Development Volunteer with the United States Peace Corps in Ouarzazate, Morocco. Upon returning to the states in 2007, she entered the doctoral program in Social Work at the University of Texas at Arlington. While pursuing her doctoral degree, she worked as the Women's and Children's Social Worker at Arlington Memorial Hospital in Arlington, Texas from 2007-2009 and also as the Clinic Social Worker at the Charlton Methodist Family Practice Center in Dallas, Texas from 2009-2011. She received her doctoral degree in Social Work from the University of Texas at Arlington in May, 2013 and plans to join the social work faculty at Texas Christian University as an assistant professor in August, 2013.