EXPLORING KNOWLEDGE IN SEXUAL ASSAULT PREVENTION PROGRAMS

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EXPLORING KNOWLEDGE IN SEXUAL ASSAULT PREVENTION PROGRAMS

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A Project

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by

Pammeli Maureen Carlos

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ABSTRACT

Campus sexual assault is a prominent social problem that has gained traction within recent years. It is prevalent among college students, with 26.1% women and 6.1% of men reporting experiencing an attempted or completed rape at some point during their college career (Graham et al., 2017). The purpose of this study is to help college students define and understand rape and consent to potentially lower sexual assault incidents. A quantitative research design was utilized with this research study. The study design used an online self-administered survey, with measures from established questionnaires and surveys. Towards the end of the survey, research applied sexual misconduct scenarios, to address student retention of sexual assault prevention knowledge. By making sexual assault an area of focus within social work practice, it would provide social work students with knowledgeable information on sexual assault prevention programs. Which they can use to educate and empower clients whom have been assaulted. Finding suggest, that there is no significant difference between undergraduate students participating in SA prevention program in being able to correctly identify consent and rape.

ACKNOWLEDGEMENTS

DEDICATION

I dedicate this project to my parents, friends, and family members who have been affected in every way possible by this quest. Thank you, for all your support and patience's. My love for you can never be quantified.

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CHAPTER ONE

INTRODUCTION

Problem Formulation

Campus sexual assault (SA) is a prominent social problem that has

gained traction within recent years (Graham et al., 2017). Sexual assault is

defined as sexual acts that are performed against a victim without their consent

by means of physical force or incapacitation (Koss, 1993). Rape, a form of

campus SA, is described as the inability to make a sexual consent decision due

to inebriation, age, or are not mentally competent (Federal Bureau of

Investigation, 2013). Graham et al. (2017), found within 27 United States

campuses, that an estimated 26.1% of undergraduate college women and 6.1%

of undergraduate college men had experienced SA by the time they had

graduated. SA incidents leave victims in an unsteady view of their life and

surroundings.

Countless professions struggle with preparing their professionals to work

with SA survivors. The field of social work education is one that continues to

struggle with preparing graduate students to deal with issues of sexual assault

after completion of their program (Danis & Lockhart, 2003; Warrener, Postmus, &

McMahon, 2013). There are limited social work programs that offer courses

dealing specifically with SA violence. One study conveyed that 55% of social

work students have little to no academic training for working with SA survivors

and lack knowledge of resources that survivors may need (Danis, 2003; Warrener et al., 2013).

Due to the number of reported cases of campus SA, procedures were set forth by the United States (US) government, which called for college campuses to create a rules and guidelines for SA. Along with presentations created to educate college students on what consent is. One of the policies set in by our government is the Title IX of the Education Amendments of 1972 (Title IX), which prohibits sex discrimination in higher education, requiring institutions to take instant steps to eliminate the hostile atmosphere sexual assault creates (U.S. Department of Education, 2017). However, many sexual assault cases are never reported, due to shame or the victim being unware that they have been raped (Campbell, et al., 2014).

Although changes have been made on college campuses SA policies and consent definitions, due to involvement from the federal government. Who required for school to increase guidance on Title IX SA related compliance (Jozkowski, 2015). College students, continue to struggle with comprehending and defining consent and rape. Social workers must continue to improve upon these definitions to provide better clarity. A college student's perception of sexual consent and rape can be shaped and reinforced by social setting that normalize these abusive chrematistics (Warren, Swan, & Allen, 2015).

Purpose of Study

The purpose of this research study is to help college students to define and understand rape and consent to potentially lower SA incidents. Prevention programs that lack clarity on whether an event is viewed as rape diminishes reporting of incidents to authorities; prevention programs must include theoretically derived evidence, that is practical and effective in preventing sexual violence before it begins (Stewart, 2014). To address the problems involving college students' ability to define both rape and consent; data must be collected to focus the specific causes related to SA prevention programs. These research findings will help social workers to utilize SA program formats that show significance in helping students learn SA concepts. While also evaluating program and formats we can improve upon.

A quantitative research design was used in this research study. The study design utilized an online self-administered design, which used measures from established questionnaires and surveys. The researcher used this research design due to having applied sexual misconduct scenarios, towards the end of study. Having this research design will eliminate complications with data analysis. Using this type of research design ultimately helped with keeping participants' confidentiality and decreased potential biases, such as social desirability.

Significance of the Project for Social Work

The present study needs to be conducted to address the barriers that prevent students from retaining SA prevention knowledge. The results from this study will provide better understanding within college campuses, but also within the social work field as well. By making SA an area of focus within social work practice, it would impact students and professionals understanding on how to create treatment plans.

The impact on micro practice would be that social workers would be equipped to present resource options regarding mental health, along with counseling programs. Creating changes in our legal systems and adding policies in our legislation are opportunities for social workers make an impact within our government; thus, advocating for SA survivors. The study address the problems in social work by: providing social work students with information on SA prevention programs to educate students and help empower clients whom have been assaulted; provide implications in research that can be helpful in future research for social work students.

Regarding the generalist intervention process this study evaluated how effective SA programs are in facilitating college students' comprehension of SA. The study addressed if students were successful in achieving an understanding of what constitutes as rape and are able to define consent. The research question this study is: How are sexual assault prevention programs working to

help college students to understand what the difference between consent and

rape is?

CHAPTER TWO

LITERATURE REVIEW

Introduction

This chapter entails information and research that is significant in discussing campus SA. Some of the content explains the statistical information and how the public views SA survivors. Subsections include mental health coping mechanisms, rape myths, and defining consent and rape. The final section in this chapter will examine the social ecological model and community readiness theory, these theories are relevant to how we model assault prevention programs.

Scope of the Problem with Sexual Assault on College Campuses

Rape is a frequent and underwhelmingly reported occurrence on college and university campuses in the United States (Russell & Davis, 2007). Survivors' reluctance to disclose and seek treatment after being assaulted, comes from a lack of understanding on what has occurred and how others will perceive them following disclosure (Ahrens, 2006). Survivors of SA suffer from various adverse psychological disorders that leads to: physical, emotional, and interpersonal struggles (Steenbok, Hasina, Zimmerman, & Kayson, 2015). Despite these destructive outcomes, most SA survivors are unwilling to seek out treatment from professionals, such as social workers or therapist, or medical officials (New & Berliner, 2000).

<u>Mental Health</u>

Post-traumatic stress disorder (PTSD), is a mental health disorder which develops after experiencing or witnessing a life-threatening event, like murder, natural disaster (i.e. hurricane, tornado), or sexual assault (American Psychiatric Association, APA, 2013). The effects of SA and resulting PTSD are wide-ranging from person to person. Some of the physical symptoms that a person with PTSD may have are persistent body aches, fatigue, and poor health (Bandermann & Szymanski, 2014). Psychological disorders and symptoms that affect PTSD clients are feeling of hopelessness, suicidal idealizations, depression, and substance abuse (Bell & Reardon, 2011). One study found that SA survivors are more likely, than those who have never experienced sexual violence, to commit suicide (National Institute of Justice, 2008). A diagnosis of PTSD, associated with SA leads to higher rates of comorbidity. Hirschfeld (2001), defines comorbidity as numerous mental health and/or physical health diagnosis in which a person is suffering from at one period of time.

<u>Coping Mechanisms</u>

Coping mechanism are cognitive and behavioral strategies that SA victims use as an avoidance tactic to lessen their distress; without directly addressing the cause (Thompson et al., 2010). SA victims often turn to alcohol and drug usages as a coping strategy. The use of these substances has been often associated with heightened depression symptoms and PTSD symptoms (Ullman et al., 2014). When diagnosing PTSD, the DSM-V lists avoidance as a trademark

symptom in diagnostic criteria; avoidance has shown to habitually maintain PTSD disorder (APA, 2013). While substance abuse can temporarily cease troubling thoughts, it does not address the underlying cause of them. These notions can only be dealt with through the help of psychological treatment (Turchik & Wilson, 2010).

Rape Myth Acceptance and Understandings

There are five phases to sexual abuse; the engagement phase, sexual interaction phase, secrecy, disclosure, and suppression (Crosson-Tower, 2014). During the engagement phase, the perpetrator will continuously test the victim to see how close they can get and gauge their reactions. In the sexual interaction phrase, various degrees of intimacy will occur between victim and perpetrator. The next phase is secrecy; the perpetrator will manipulate the victim into secrecy by victim-blaming/shaming and threatening them. The fourth phase is disclosure; in which the victim finally reveals that they have been sexual assaulted. The final phase is suppression, feelings of denial, guilt, anxiety, anger, and insecurity comes from the victim trying to ignore that they were abused (Crosson-Tower, 2014).

These feelings of suppression from an SA incident are the leading cause for the prevalence in rape myth acceptance or denial; Rape myth are false beliefs about rape and rape victims (Baldwin-White, Thompson, & Gray, 2016). These stereotypical beliefs often create an unpleasant environment and cast a cloud of doubt on the SA victims. Rape myths, which are strongly viewed as true within

the US, include notions about rape content, SA, and whether an event is deemed as true (King & Roberts, 2011).

A common rape myth is that women are the ones that provoked their perpetrator to assault them. Thus, leading the public to believe that the SA event was the victims fault and that they need to take ownership (Baldwin-White et al., 2016). Regarding, college student and rape myth acceptance; compared to other populations, college students do not endorse these same beliefs. But rather, they have created their own understanding and philosophies to conceptualize SA and rape (Baldwin-White et al., 2016). McMahon (2010), found that college students will not directly place blame, but will express ideas that the victim should have not placed themselves in the dangerous situation which lead to their rape or assault.

Defining Consent and Sexual Assault

One factor that narrates the allowance of a SA perpetrator to justify their violence is lack of understanding or care of their victims' rights (Warren, Swan, & Allen, 2015). Therefore, having an operationalized definition of consent available to college students can play a substantial role in lowering the rates of SA and sexual misconceptions Graham et al. (2017). Fisher, Daigle, and Cullen's (2010) study on college women found that those who have experienced rape do not recognize their experience as such. This is due to a belief that rape must be a brutal incident executed by an unknown individual, as opposed to acquaintance, which accounts for most campus rapes (Fisher et al., 2010).

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Graham et al. (2017), found that most 4-year universities and colleges have SA polices and consent definitions available for their student to review. These definitions of consent vary from precise definitions to others which only provided a minimal understanding. It is noted that for sexual consent to be granted, the person giving consent must meet the following criteria: meet the states age of consent, mental and physical competence to give consent, and all involved must agree to participate (Rape, Abuse, and Incest National Network, 2009).

While most prevention programs address verbal consent, many still do not address accountability for engaging in sexual activities when outside influences (e.g. alcohol or drug use) are present. A person who is not in their right state of mind is unable to give consent (Graham et al., 2017). If university and college campuses begin to address these issues involving sexual consent and accountability, then incident involving SA may be lower. Thus, providing students who have been experienced SA, the reassurance that they are not to blame and will be encouraged report (Warren et al., 2015).

Research Focusing on Sexual Assault and Consent

While there has been an increase in the amount of research conducted on SA, and consent, there are still gaps and barriers that have yet to be explored. Hence, why this study reviews these apertures within the research conducted on this subject, within the social work practice in the previous years. Along with research studies conducted on the disparities with SA prevention and treatment

possibilities. Regardless of the surge in prevention programs, school officials, continue to struggle with adopting prevention programs that focus on promoting healthy sexual attitudes and behaviors. Rather they concentrate on strategies that involve fear of punishment and blame to students (Thomas, Sorenson, & Joshi, 2016).

In nationally representative study of the review of SA polices and defining sexual consent, Graham et al. (2017), sought to find inconsistencies in the way university and college campuses define sexual consent. For this study, the differences in defining sexual consent from several colleges and universities is categorized as barrier or gap.

Graham et al. (2017), found that larger schools and public schools are more likely than their counterpart schools to provide detailed SA polices and definitions. An explanation offered was that smaller schools and public schools tend to have a different amount in available resources, capacity, and staff to be able to address SA polices. Schools with lower female student enrollment were less likely to provide information regarding SA and consent definitions, as compared to school with higher enrollment (Graham et al., 2017).

An additional barrier are views regarding males and their roles regarding SA idealizations. Often, researchers and schools gear SA prevention programs and policies towards women, given that they are targeted more frequently (Stewart, 2014). While literature focuses on increasing male's conceptualization

of SA, but does not examine if they are learning and processing this information. These gaps in literature will be explored within the current study.

Theories Guiding Conceptualization

The theoretical perspectives that were used to conceptualize this study are community readiness theory and social ecological model. When approaching effective ways to prevent SA, efforts must be inclusive to all members in the community. This means being prepared to engage with individuals whom have various levels of SA understandings. While some members may view SA as a concept that effects the entire university, there will be others who minimize or block the existence of the dilemma (Cox et al., 2010). The theory of community readiness is a beneficial tool, used to evaluate the level of understanding college students have, to address the types of interventions or programs that should be utilized for their respective campus (Cox et al., 2010).

The theory of community readiness was first developed and tested in communities' willingness to engage in substance abuse prevention (Plested et al., 1999). Thus, creating the foundation of the theoretical concept in understanding the community process and phrases that they proceed through to prepare for changes (Cox et al., 2010). Plested et al. (1999), developed six dimensions within the community and assign the community readiness from a scale that ranges from one of nine stage. These stages range from no awareness, meaning that the university does not acknowledge SA (Cox et al., 2010). To professionalization, in that the school has a group of professionals

who are conducting prevention efforts (Cox et al., 2010). The six dimensions of community readiness theory are as follows: current community interventions, campaigns, and policies; knowledgeable community endeavors; leadership, including appointed leaders and representatives; university environment; community understanding of the scope of the problem; and resources for prevention such as funding, space, time, and opportunities, members (Cox et al., 2010).

A popular technique used to exercise this understanding are bystander interventions programs. Bystander interventions approaches SA as a community (i.e. universities and colleges) problem in which all members (students) must take responsibility in addressing the issue, rather than a single individual (McMahon, 2010). The use of bystander inventions derives from the social ecological model, which suggest that contributing factors such as: individual, relationship, community, and societal factors all play major roles in the occurrence of SA (Cox, Lang, Townsend, &Campbell, 2010). When applied social ecological model, rather than focusing on changing the individual, aims to be inclusive to the whole community. Social workers use the social ecological model to empower college students to apply their self-efficacy to create changes in SA prevention programs and to build new polices at their universities (Cox et al., 2010).

Summary

This study investigated the best approach in teaching undergraduate students about SA. Increasing this knowledge is not something that can be completed by one individual. School officials, staff members, students and social worker must work together to promote societal-level change (Cox et al., 2010). The social problem of rape and SA is an area that university and college officials should willing commit their time and energy into providing students with the best resources available for preventions. Through education and a greater awareness of SA we can achieve and potentially end the cycle of victimization. The study aims to include utilized theories like community readiness theory and social ecological model to create better prevention programs for students.

CHAPTER THREE

METHODS

Introduction

The following chapter describes in detail of how this study was conducted. Sections included within this chapter will be: study design, sampling, data collection and instruments, procedures, protection of human subjects, and data analysis.

Study Design

The purpose of this research study is to learn about how SA prevention programs help college students to define and understand rape and consent, so that we may potentially lower SA incidents. The goal is to increase the precision and accuracy on whether SA prevention programs are teaching college students to identify and define topics related to SA. Finding these gaps and barriers will help social workers to create better SA interventions to implement on college campuses. Given that this study will also compare types of SA programs, a quantitative study design will be used to provide an accurate representation of population. This study utilized questionnaires and surveys as data collecting tools from participants.

Using a descriptive quantitative methodology created the strongest design for this research study. By applying this research design and the use of questionnaires and surveys, the researcher was able generate precise

information. That will help to confirm or undermine, if SA prevention programs are working to help student to retain topics involving SA. Using this design type helped in being able to identify which type of prevention program correlates with understanding these topics and higher retention rates. Another strength in using questionnaires and surveys in an online form, this helped with keeping participants anonymous and decreasing the chances of selection bias.

The first limitation would be the sampling method used in this study has limited generalizability. While this study may be able to identify gaps within SA prevention programs at the sampled university, it would not be generalizable to all university or college campuses in the United States. Another limitation would be the use of questionnaires and surveys. Using these data collection tools make subject data more difficult to analyze, due to subject topics being separated into standard categories. Whereas in a qualitative design there is an unlimited range in subject categories that a participant may fall into. Lastly, there is no way to reveal or measure how truthful participants are in their responses.

Sampling

A convenience sample of a Southern California University undergraduate students was the sampling technique used in this study. A convenience sample is a form of non-probability sampling. These students would have had participated in SA prevention program within the last year. Participants were recruited through the university social work department. Approval from the

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Social Work Department was gained from the program Director. The sample size was n=40.

Data Collection and Instruments

Quantitative data was collected via Qualtrics from May 2018 through March of 2019. The measures include demographic information, which include age, gender, ethnicity, marital status, and year in college. The remaining measures consisted of Likert scale items related to rape myth acceptance. The independent variable was form of sexual assault prevention programs that the respondent participated in, with the variable values being: in-person training, online training, and bystander program. The dependent variable was: increase in knowledge of rape and consent. The dependent variable was measured by the score on the rape myth acceptance scale.

Rape myth acceptance was assessed using the Illinois Rape Myth Acceptance scale. This scale created by Payne, Lonsway, and Fitzgerald (1999), measures the degree to which students believe false information about rape culture. This study utilized the short-form scale, which consists of a 22-item from the original 45-item Illinois Rape Myth Acceptance Scale (IRMAS; Payne, Longsway & Fitzgerald, 1999). Participants used a 5-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree) how much they agreed or disagreed with 22 testimonies that cover four of the seven major subscales of rape myth acceptance. The subscales that covered within the study are as follows "she asked for it", "he didn't mean to", "it wasn't really rape" and "she

lied." Model items included "if the accused "rapist" doesn't have a weapon, you really can't call it rape and "if a girl doesn't say "no" she can't claim rape" (Payne et at., 1999).

Responses the IRMS items were summed to create a total IRMS score. Participants with greater scores on IRMS indicate higher levels of agreement with prevalent rape myths (Hust, Marett, Lei, Ren, & Ran, 2015). Payne et al., (1999) assessed the validity and reliability of the IRMAS by completing three studies. The results revealed that the IRMAS retains ample internal consistency and reliability (Payne et al., 1999).

One limitation to the IRMAS is that when it was originally tested, the population came from a Midwestern university students. However, since college students are an interest in research. Due to, their overrepresentation in figures within SA prevention and rape myth (Payne et al., 1999). Studies, like the present one, should continue to expand and explore topics related to this subject matter, because of their large representation. Despite the limitations, the IMRAS does have strengths, such as its reliability and validity. The greatest strength is that it has contributed to numerous studies that have helped to conceptualize our understanding of myth acceptance and its subscales (Payne et al., 1999).

Lastly, five short sexual misconduct vignettes, consisting of real life scenarios involving consent and rape were presented to participants at the end of the questionnaire. Three scenarios described situations regarding consent within relationships. The final two scenarios described a person being sexually

assaulted. Participants were asked if the situation was a consensual act of intimacy and if it was rape. All scenarios were rated by participants answering yes or no questions. The scenarios were developed by the researcher and discussed and reviewed with, Dr. Lizano, research project supervisor.

The purpose of including these vignettes to students at the end of the study to review whether students are fulling grasping to the materials given during SA prevention programs, which could greatly strengthen research regarding if SA programs are truly helping college students to understand consent and rape. Due to the nature of this study, the component of using vignettes which describe examples of assault; may cause distress for participants. Counseling resource were provided to all participants, in case any felt discomfort or distress upon taking the survey.

Procedure

Participants were recruited at a social work department in a University in Southern California, using classroom and poster announcements throughout campus and school dorms. The study was conducted using Qualtrics and all participants participated in a pre-screening. Included in the pre-screen was one item to identify participants as having participated in a SA prevention program within the last year, speak English, and be at least 18 years of age.

Eligible participants gained access to complete the survey through an online testing database, Qualtrics. Once the survey was completed, participants were eligible to win one of three gift cards that was valued up to 100 dollars.

Participants were informed that this study was voluntary and that unwillingness to participate would not have any adverse effects. Upon accessing the surveys through Qualtrics, participants were provided with an informed consent form to sign electronically. Once informed consent form was signed, participants began to complete demographic information. Once finished with demographic information, participants proceeded to the survey questions, followed by the vignettes. Lastly, a debriefing statement was given where participants were thanked for their participation.

<p style="text-align:center">Protection of Human Subjects</p>

The identity of the participants was kept completely confidential by the use a participant ID in the Qualtrics system. When participants accessed the survey link, they were assigned a participant ID in an excel spreadsheet and uploaded it to a Qualtrics panel. To keep data anonymous, the excel spreadsheet included ID# within data responses. This can only be viewed by the researcher and research advisor. Confidentiality was explained to participants during the informed consent process, in which all participants read and sign an informed consent prior to participating in survey. Participants were given a debriefing statement at the end of the survey. All data information was stored on a password protected USB drive and kept in a locked desk. One year after completion of the study, all data and documentation are to be deleted from the USB drive.

Data Analysis

A series of chi-square tests were conducted determine relationships among variables. All data for this research study was gathered by using an online survey. The independent variable in this study was participated in a SA prevention programs, with the response options being yes or no. The dependent variable was students' being able to correctly answer rape and consent vignettes. Next, a series of independent samples t-tests were conducted to explore the relationship between rape myth acceptance scores between those who have or have not participated in SA prevention program. Participants also completed demographic characteristic items designed to capture age, gender, ethnicity, marital status, college year, and income. Student emails were asked for, for student to participate in an opportunity drawing for gift cards. Once the opportunity drawing was completed, emails were deleted permanently.

Summary

This study explored if university sexual assault programs are working to help college students understand consent and define rape. The questions and vignettes used in this study actively test participants' knowledge learned in prevention programs, and will highlight the barriers related to being able to correctly identify and define sexual consent. The quantitative design used in this study is the best fit for answering the research question.

CHAPTER FOUR

RESULTS

Introduction

The following chapter describes in detail the results from the study conducted. This section includes specifics on how the data was analyzed and will display both descriptive and inferential analysis results.

Presentation of Findings

Descriptive Analysis

The study consisted of n=40 undergraduate student participants, 33 women and 7 men from a University in Southern California. The mean age of participants in this study was 25, with the youngest being 18 and the oldest being 50. From these participants 18 had participated in an SA program within the last year, whereas the remaining 22 did not. Demographic information showed that 62.8% of participants were of Hispanic decent, 23.3% Caucasian, 9.3% African American, and Asian with 4.7%.

Inferential Analysis

A Chi-Square test was used to explore if undergraduate students who had participated in a SA prevention program were more likely to correctly answer the SA vignettes, compared to students who did not. Results for all vignettes indicated that there was no significant association between students who had or had not participated in a SA program in being able to correctly answer the

vignettes. Analysis for vignette one and two, regarding consent, along with vignette one and three, regarding rape, was unnecessary due to a lack of variance, all respondents answered the vignettes correctly. The remaining vignettes yielded results as follows: Vignette two rape χ^2 (1, n=40) = .52, p = .47, Vignette three consent χ^2 (1, n=40) = .10, p = .75, Vignette four consent χ^2 (1, n=40) = .15, p = .70, Vignette four rape χ^2 (1, n=40) = .00, p = 1.00, Vignette five consent χ^2 (1, n=40) = .34, p = .56. Table 1, shows the results from vignette 3 consent. The results indicate that there is no difference between students who have participated in SA program compared that those who have not taken an SA program in being able to correctly identify scenarios which include consent and rape.

Table 1. Chi-square Analysis Between Students Correctly Answering All Vignettes

Participated in SA Program	Correctly Answered Vignette		
	Correct	Incorrect	Total
Yes	10	8	18
No	10	12	22
Total	20	20	40

Note. χ^2 (1, n=40) = .10, p = .75.
*$p < .05$

An independent samples t-test was conducted to compare the rape myth scores for student who have and have not participated in SA program. There was no significant difference in mean scores for student who had participated in SA program ($M = 94.28$, $SD = 12.06$) and students who had not participated ($M = 94.00$, $SD = 10.18$; $t(40) = .08$, $p = .94$. These results suggest that participating in a SA prevention program does not have an impact on rape myth acceptance. Specifically, the results suggest that when students participate in SA prevention programs, it does not affect their level of rape myth acceptance.

Table 2. Rape Myth Acceptance Scores by Program Participation

| | Participated in Sexual Assault Prevention Program | | | | | | |
| | Yes | | | No | | | |
	N	M	SD	N	M	SD	P
Rape Myth Score	18	94.28	12.06	22	94.00	10.18	.98

Students who had participated in an SA prevention program were expected to have higher scores in on the IMRAS. Higher scores on the IMRAS are associated with rejecting rape myths. When researcher completed individual t-test with each rape myth question for student who had and had not participated

in SA prevention program, researcher did find some differences in means, though the differences were not statistically significant. Table 3 displays the results from the individual test mean scores for question one through six on IMRAS. Which found that many of the times, students who had participated in SA prevention program averaged higher means in rejecting rape myths.

Table 3. Individual Rape Myth Acceptance Answers by Program: Subscale 1

	Participated in Sexual Assault Prevention Program	
	Yes	No
RM 1	4.56	4.64
RM 2	4.72	4.50
RM 3	4.78	4.59
RM 4	3.72	3.59
RM 5	4.44	4.50
RM 6	4.11	1.30

Note. RM 1= If a girl is raped while she is drunk, she is at least somewhat responsible for letting things get out of hand. RM 2= When girls go to parties wearing slutty clothes, they are asking for trouble. RM 3= If a girl goes to a room alone with a guy at a party, it is her own fault if she is raped. RM 4= If a girl acts like a slut, eventually she is going to get into trouble. RM 5= When girls get raped, it's often because the way they said "no" was unclear. RM 6= If a girl initiates kissing or hooking up, she should not be surprised if a guy assumes she wants to have sex.

Table 4 displays the results from the individual test mean scores for question seven through 12 on IMRAS. Within these IMRAS questions, students

who had participated in a SA prevention program, had higher overall means in rejecting rape myths. With the expectation of question 11, which only had a 0.01 difference between the two groups. Table 5 displays the individual mean scores for questions 13 through 17 of the IMRAS. The results revealed that student who had not participated in a SA prevention program had higher means scores of rejecting rape myths, than undergraduate students who had participated in a SA prevention program. Except for question 16, which was rejected unanimously by both groups.

Table 4. Individual Rape Myth Acceptance Answers by Program: Subscale 2

	Participated in Sexual Assault Prevention Program	
	Yes	No
RM 7	3.61	3.45
RM 8	4.44	4.00
RM 9	4.50	4.32
RM 10	4.44	4.23
RM 11	4.56	4.55
RM 12	4.11	3.95

Note: RM 7= When guys rape, it is usually because of their strong desire for sex. RM 8= Guys don't usually intend to force sex on a girl, but sometimes they get too sexually carried away. RM 9= Rape happens when a guy's sex drive goes out of control. RM 10= If a guy is drunk, he might rape someone unintentionally. RM 11= It shouldn't be considered rape if a guy is drunk and didn't realize what he was doing. RM 12= If both people are drunk, it can't be rape.

Table 5. Individual Rape Myth Acceptance Answers by Program: Subscale 3

	Participated in a Sexual Assault Prevention Program	
	Yes	No
RM 13	4.72	4.91
RM 14	4.67	4.95
RM 15	4.72	5.00
RM 16	5.00	5.00
RM 17	4.56	4.64

Note: RM 13= If a girl doesn't physically resist sex—even if protesting verbally—it can't be considered rape.RM 14= If a girl doesn't physically fight back, you can't really say it was rape.RM 15= A rape probably doesn't happen if a girl doesn't have any bruises or marks. RM 16= If the accused "rapist" doesn't have a weapon, you really can't call it rape.RM 17= If a girl doesn't say "no" she can't claim rape.

Table 6 displays the individual mean scores for questions 18 through 22 of the IMRAS. The results revealed that student who had not participated in a SA prevention program had higher means scores of rejecting rape myths, than undergraduate students who had participated in a SA prevention program.

Table 6. Individual Rape Myth Acceptance Answers by Program: Subscale 4

	Participated in a Sexual Assault Prevention Program	
	Yes	No
RM 18	3.72	4.05
RM 19	3.61	3.86
RM 20	3.78	4.18
RM 21	3.72	3.82
RM 22	3.78	3.45

Note: RM 18= A lot of times, girls who say they were raped agreed to have sex and then regret it. RM 19= Rape accusations are often used as a way of getting back at guys.RM 20= A lot of times, girls who say they were raped often led the guy on and then had regrets. RM 21= A lot of times, girls who claim they were raped have emotional problems. RM 22= Girls who are caught cheating on their boyfriends sometimes claim it was rape.

Summary

This study explored if university sexual assault programs are working to help college students understand and recognize consent and rape. The results of from this study showed that there was not significant difference between student who had participated in SA program and those who had not. Rape myth acceptance scores were also measured to explore rape myth acceptance difference between both SA prevention groups. The results indicated that there were no findings in rape myth acceptance between either group.

CHAPTER FIVE

DISCUSSION

Introduction

The following chapter discusses the results of this study in detail. This section further explains the results within the study, along with trends that were discovered. This chapter will include a section which provides recommendations for social work practice, policy, and research.

Discussion

When comparing undergraduate students' abilities in being able to correctly answer the research vignettes. It was found that there was no evidence to show that participating in a SA prevention program would give students a higher advantage to answer correctly. There were also non-significant findings between undergraduate students who had and had not participated in SA program in impacting their rape myth acceptance scores.

Researcher was surprised to discover that most study participants stated they had not participated in a SA program within the last 12 months. Due to the University's Title IX policy, which mandates all students to complete a yearly "End Sexual Violence Training." Students have from the beginning of the fall quarter and are required to complete it before the end of January, otherwise they are unable to register for classes in the spring quarter. This Southern California University does offer student alternative options in completing this training.

Student may have not been aware or considered their training as a SA prevention training, which might explain the high responses in those who stated they had not participated in a SA prevention program.

While there were no significant findings between students who had participated in a SA prevention program, the researcher did notice trends throughout the results. For example, when looking at students' abilities in being able to correctly answer the research vignettes; When the SA vignette consisted of a common SA scenario, students were unanimously able to answer correctly. However, when the SA vignettes described a scenario, which was not common, it was noticed that many students struggled to correctly answer the vignette. At times, students would answer in a hypervigilant manner when they were unsure of the correct vignette answer. This may indicate that students are able to recognize SA scenarios, which are most commonly taught to them, but are unable to use the knowledge they have learned in their prevention programs to recognize new scenarios.

When comparing rape myth scores for students who have and have not participated in SA program. There was no significant difference in mean scores for student who had participated in SA program. The same results were found when each IRMAS question was tested individually. Researcher did find some differences in means and trends. When looking at the first scale in the IRMAS scale, which contains questions regarding "she asked for it," found that many of the times, students who had participated in SA prevention program averaged

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higher means in rejecting rape myths. Except for questions one (If a girl is raped while she is drunk, she is at least somewhat responsible for letting things get out of hand; Payne, Longsway & Fitzgerald, 1999) and question five (When girls get raped, it's often because the way they said "no" was unclear; Payne et al., 1999). The questions within this subscale involved victim blaming, while most students rejected rape myths. When the questions had an indication of ambiguity, students were more accepting of these rape myths.

The second subscale of the IRMAS was titled "he didn't mean to," like subscale 1, students who had participated in a SA prevention program, had higher overall means in rejecting rape myths. With the expectation of question seven and 11. Both questions minimize the perpetrators actions, which is a common theme within SA research. Camp, Sherlock-Smith and Davies (2018), found that students often develop a perpetrator typology. In their study, students who could identify with the perpetrators or viewed them as "nice guys," would often disregard the actions of the perpetrator (Camp, Sherlock-Smith & Davies, 2018).

The third subscale of the IRMAS included questions describing doubt of the situation and the final subscale included questions, which implicates the victim as a liar. The results from both subscales revealed that students who had not participated in a SA prevention program had higher means scores of rejecting rape myths, than undergraduate students who had participated in a SA prevention program. This was quite surprising, due to the fact that the goal of SA

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prevention programs is to provide students with the knowledge and skills to recognize SA and rape myths. The literature regarding the effectiveness of SA prevention programs, has shown that students will gain an understanding of SA, but that does not necessarily translate into students changing their own personal views (Breitenbecher, & Scarce,1999).

Recommendations for Social Work Practice, Policy, and Research

There are implications for social work practice based on findings from this study. It would be beneficial to develop new strategies and to revive current SA training programs. A recommendation for social work practice would be to assist in developing a variety of SA scenarios and vignettes. Since social workers are frequently exposed to clients who have experienced an attempted or completed rape, their unique perspective and understanding can assist in bringing a new perspective and thus challenge students' incorrect notions on SA. The conceptual understanding of how changes in SA prevention program are working to assist undergraduate students in recognizing consent topic. Universities are focused on providing undergraduate student with taking mandated SA prevention program, but they are not looking at the outcomes success of these program. Future studies should consider exploring the effectiveness of sexual assault programs. Future studies should also consider cultural sensitivity when developing new scales and measures. The IRMS phrases rape myth question items in ways that may not be easily translated for use in other cultures. For example, not all cultures expect that women would wear ''short dresses or slutty

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clothes.'' Cross-cultural sensitivity in the development questionnaires should be explored for future research.

Conclusion

The results of this project show that there is still much that can be expanded and built upon to create more effective SA prevention programs. The trends within this study showed that while students do develop a knowledge of SA scenarios, when atypical scenarios or uncommon SA scenarios or vignettes are given, students' struggle to correctly recognize consent and rape.

APPENDIX A

ILLINOIS RAPE MYTH ACCEPTANCE SCALE (SHORTENED

ILLINOIS RAPE MYTH ACCEPTANCE SCALE (SHORTENED)

Subscale 1: She asked for it

1. If a girl is raped while she is drunk, she is at least somewhat responsible for letting things get out of hand.

2. When girls go to parties wearing slutty clothes, they are asking for trouble.

3. If a girl goes to a room alone with a guy at a party, it is her own fault if she is raped.

4. If a girl acts like a slut, eventually she is going to get into trouble.

5. When girls get raped, it's often because the way they said "no" was unclear.

6. If a girl initiates kissing or hooking up, she should not be surprised if a guy assumes she wants to have sex.

Subscale 2: He didn't mean to

7. When guys rape, it is usually because of their strong desire for sex.

8. Guys don't usually intend to force sex on a girl, but sometimes they get too sexually carried away.

9. Rape happens when a guy's sex drive goes out of control.

10. If a guy is drunk, he might rape someone unintentionally.

11. It shouldn't be considered rape if a guy is drunk and didn't realize what he was doing.

12. If both people are drunk, it can't be rape.

Subscale 3: It wasn't really rape

APPENDIX B

SEXUAL MISCONDUCT VIGNETTES

SEXUAL MISCONDUCT VIGNETTES

Scenario #1:

Lupe and Luis are at the local bar near campus and have been heavily drinking since 7:00 pm. Luis notices that Lupe is intoxicated and offers to take her home. As they are walking, Lupe is tripping over her feet and is confused on where she is located. When they get into Lupe's room, Luis initiates sexual activity. Lupe looks confused and tells Luis goodnight. Lupe goes to sleep. Luis, then has sex with Lupe, while she is sleeping.

Scenario #2:

Lissette and Brian have been in a new sexual relationship for about 3 month. Things have been amazing and Lissette is really amazed with the sex they are having. Lissette has been bragging to her friends about Brian's sexual performance and wants to show them. Before having sex one night, Lissette hides a video camera on her dresser and tapes them. Brian has no idea about camera.

Scenario #3:

Kendall and Damien have been flirting with each other all quarter, and agree to go to a party together. At the party, they are hanging together for most the night, quite closely. Damien suggest that they head back to his house, Kendall says yes. As they are leaving, they wave some friends and let them know they are going to Damien's house together. Kendall let's her roommate know that she

won't be coming home tonight. Once they get to Damien's house and they go up to his room and have sex.

Scenario #4:

Timothy and Amber are dating. Amber is not sure if she wants to have sex with Timothy, but Timothy is able to convince her. As they are having in sex, Amber says "hold on – stop – that hurts." Timothy does not listen, and continues to have sex with Amber. Amber tries to get him off, but Timothy is too strong and hold res Amber down. When finished, Amber is shakeup. Timothy apologizes, but said that they had already started and he could not stop.

Scenario #5:

Julie and Ken are studying together. During a study break, Julie begins to touch Ken in intimate way. Ken allows it, but says "I don't want to get carried– we have our final exam tomorrow." Once they are finished with studying, Julie suggests again that they should have sex. Ken says that its late and should go home, but continues to touch Julie. Before he leaves, Julie asks one more time. Ken thinks about it, then says okay and pulls Julie onto the bed. They have sex.

APPENDIX C

DEMOGRAPHIC QUESTIONS

DEMOGRAPHIC QUESTIONS

Please answer each question to the best of your knowledge.

1. Age:_____

 2. Gender: M ____   F ____   Other (Please specify) ____

3. Please indicate your ethnic background.

1) African American

2) Asian American

3) European/White American

4) Hispanic or Latino American

5) Middle Eastern

6) Native American

7) Other _____ (please specify) _____

3. Student Yearly Income:

$0 - $14,999 _____ $15,000-$29,999_____ $30,000-$44,999_____

$45,000-$59,999_____ $60,000-$74,999_____ $75,000-$89,999_____

$90,000-$99,999_____   Over $100,000_____

4. Year in College?

1 = Freshman

2 = Sophomore

3 = Junior

4 = Senior

5 = Master's Student

6 = Other

5. What is your student email? (Note: This will only be used to keep track of your info and for gift card drawing once the study is complete, your student email will be removed from the data.)

6. Marital Information

 1. What is your current "relationship status"?

1= Not currently dating or involved with anyone

 2=Casually Dating

3=Seriously or Exclusively Involved

4=Engaged

 5=Cohabitating (living together)

6-Married

7=Other (please specify)

APPENDIX D

DEBRIEFING STATEMENTS

DEBRIEFING STATEMENT

Thank you for your participation in this study, the purpose of your participation in this study was to examine the effectiveness of sexual assault prevention programs, with an emphasis on students being able to distinguish between consent and rape scenarios. If you are a student, you will be entered a drawing to win a gift card, ranging from $100, $50, and $25. It is unlikely that participation in this study may cause distress; however, if you would like to discuss any distress, please contact the Psychological Counseling Center at (909)537-5040.

APPENDIX E

PRESCREENING QUESTIONS

PRESCREENING QUESTIONS

Have you participated in a Sexual Assault prevention program within the last 12 months?

1. Yes
2. No.

What type of Program have you participated in?

1. Online based
2. In-person Training
3. Bystander Intervention
4. Other (specify)

APPENDIX F

INSTITUTIONAL REVIEW BOARD APPROVAL LETTER

CALIFORNIA STATE UNIVERSITY, SAN BERNARDINO
SCHOOL OF SOCIAL WORK
Institutional Review Board Sub-Committee

Researcher(s) _Pammeli Carles_

Proposal Title _Exploring Knowledge learned in Sexual Assault Prevention programs_

_SW186C_

Your proposal has been reviewed by the School of Social Work Sub-Committee of the Institutional Review Board. The decisions and advice of those faculty are given below.

- -

Proposal is:

☑ approved

_____ to be resubmitted with revisions listed below

_____ to be forwarded to the campus IRB for review

Revisions that must be made before proposal can be approved:

_____ faculty signature missing

_____ missing informed consent _____ debriefing statement

_____ revisions needed in informed consent _____ debriefing

_____ data collection instruments missing

_____ agency approval letter missing

_____ CITI missing

_____ revisions in design needed (specified below)

_____

_____

_____

_____

_____

_____

Committee Chair Signature _____   Date 5/9/2018

Distribution: White-Coordinator; Yellow-Supervisor; Pink-Student

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