Establishing Prevention Programming: Strategic Planning for Campuses

Colleges and universities have made great strides in addressing and preventing sexual assault, yet there is still much we need to know. This document outlines key points that campuses should consider in strategic planning for sexual violence prevention. Specifics of this process will look different for each campus. This document provides preliminary guidelines and questions to get the process started.

Know your learning goals.

As part of strategic planning, it is important to identify the specific prevention goals for your campus. Specific learning goals can help campuses identify what kinds of prevention programs will best meet their needs and can also help when designing an assessment of the effectiveness of these efforts. Below are some examples:

- Increasing students' knowledge about policies and resources on campus. We know from research that many students often lack this knowledge.[1]
- Increasing positive bystander attitudes and actions.[2]
- Reducing women's risk of sexual assault and reducing potential self-blame after an assault.[3]

Research on sexual assault prevention on college campuses is limited in the methods used and the number of programs actually evaluated (see DeGue, Evidence Based Strategies for the Prevention of Sexual Assault). The evaluation research to date shows that we are relatively good at changing attitudes, such as rape myth acceptance, over the short term (e.g. for several months). It is more difficult to create behavior change (e.g. reducing victimization or perpetration, or increasing bystander behavior) and these outcomes have rarely been researched.

Know your target audience.

Who is the focus of your prevention efforts? Given scarce resources, campuses may choose to focus prevention education on at-risk groups rather than all students. This can be challenging to do, however, as research is mixed about what groups may be most at risk for victimization and perpetration of sexual assault. For example, some research shows student athletes and students who are members of the Greek system to be at risk, while other research shows many differences within these groups. It is likely that individual student's attitudes or peer norms for particular subgroups, rather than group membership, per se, that is important.[4] Thus, it is best for campuses to provide universal prevention education for all students, as much as possible.

When doing so, however, it is important for campuses to attend to sub-groups on campus who may need different prevention messages or methods for delivering prevention education. For example, research shows that bystander education may be better for students who already have some level of awareness about sexual assault, and that attitude change can be different depending on perpetration history among men.[5] Prevention can be more effective if it is tailored to a community's level of motivation or preparedness to address the issue. A campus that has never engaged in sexual assault

prevention efforts will need to start in a different place than a campus that has been using a program for years but has not yet collected any data on its effectiveness.[6]

Consider these examples: commuter students will likely have difficulty accessing programs that take place on campus. Prevention programs also need to be culturally competent; this means that the information should be presented using frameworks that are specifically relevant to different groups.[7] First year students likely need different prevention messages than juniors and seniors. For example, some researchers have suggested that first year students may be best able to engage with prevention that emphasizes knowing how to help a friend who discloses a sexual assault, while more complex bystander intervention actions are better taught later, once students have experience on campus.[8]

Campus climate surveys, if well conducted, can help generate useful information for tailoring learning goals to a specific campus and to identifying sub-communities on campus that might have different prevention needs.[9]

Use the best practices available.

Although few prevention tools meet the standards for being evidence based (i.e. they have been carefully assessed using groups of students who do and do not receive the prevention messages, use rates of sexual assault to measure outcomes, and use groups of college students that carefully represent the population of students), many tools exist that are evidence informed or promising.[10] This means that they were designed using well-researched theories about what causes sexual assault and how attitudes and behavior can be changed. It also means that preliminary data have been collected, perhaps by giving surveys to participants before and after they took a prevention program. For example, the CDC's Rape Prevention Education program (RPE) describes a theoretical framework for its programs.[11] (See *A Roadmap for Getting to Evidence-Based Sexual Violence Prevention on Campus* on page five of this document for more information about standards of evidence.)

As a field, sexual assault prevention on campuses will move forward more quickly if we work to build and improve upon programs that have already been developed and show promise. New and innovative projects are also needed, but should be built on clearly written logic models drawn from research that helps explain why the new programs should work. All of these efforts should continue to be evaluated to generate new knowledge about what works and under what conditions.

Consider what is needed for implementation on your campus.

Prevention tools are more effective if students can see themselves reflected in the stories and images used.[12] Tools like social marketing campaigns taken from one campus will likely need to be modified when implemented on another campus. Researchers have worked to describe key factors that influence the translation of prevention work from one group to another. There is a tension between keeping the program as it was designed (and shown to be effective), and making changes so that the language, images, and ideas fit with the new campus context.[13] Campuses need to think about how well the prevention tool fits with current policies, the community's definition of the problem, and current initiatives already in place to address sexual assault. Researchers also highlight the importance of having

enough training and resources to implement the prevention tool; buy-in from leadership; rewards or incentives for using the prevention tool; and chances to talk about staff and community members' reactions to the prevention methods.[14] Finally, campuses need to pay attention to how well they are using the program or prevention tool as it was designed. While changes may need to be made so that the prevention tool fits with a new campus community, the key parts of the program or campaign that help to create attitude and behavior change need to be retained. Research can help assess if the implementation was effective and if the revised program continues to have an impact even with changes that were made.

Find the resources to go big.

Research on many areas of prevention finds that short, single session prevention tools do little to create long-term attitude of behavior change (see DeGue, Evidence Based Strategies for the Prevention of Sexual Assault). More successful are comprehensive, multi-pronged strategies that are interconnected in a planned way.[15] For example, we know that individuals learn better through multiple exposures to material, and that attitudes and behaviors are changed more successfully via active learning opportunities such as role-playing. These techniques take time and will need to be repeated.

If campuses are truly invested in changing rates of sexual assault on their campus, they need to embrace and devote resources to prevention education. This includes multiple components over time (such as social marketing campaigns, educational workshops, and interactive theater) and reaching broad audiences (including students, faculty, staff, and administrators). While describing these efforts is beyond the scope of this document, the research literature contains examples of many different programs, each of which address a piece of the puzzle. Rather than deciding between prevention approaches like bystander education or risk reduction, or in-person workshops versus social marketing campaigns, campuses need to think about how to include all of them in a comprehensive strategy.[16]

Connect your work to other prevention efforts on campus.

Research is also clear that sexual violence is connected to many other problems that campuses struggle with – substance use, intimate partner violence, stalking, risky sexual behavior, and mental health concerns. Many campuses have separate offices that address each of these issues. Prevention work could be much more effective if offices worked more collaboratively.[17]

Prevention is not just for students.

College students are more likely to report concerns about violence if they trust campus authorities.[18] In high schools and middle schools, rates of gender violence and bullying were lower in schools with school-level interventions, teachers who expressed anti-bullying attitudes, or schools with climates that work toward respect and against violence.[19] All of this points to the need to go beyond prevention programming for students alone; faculty, staff, and administrators need training, too. They are part of the community norms that can support prevention, bystander action, and victim assistance. There are few examples of this type of training in the field and no research about best practices. This is an area in need of development and evaluation.

Evaluate and help move toward an evidence base.

The field of sexual violence prevention, especially in the context of college campuses, needs more knowledge development. Research is clear that we have not yet solved the problem. Campuses are centers of knowledge generation and thus potentially ideal locations for answering key next questions for prevention. What is more, they are well positioned to evaluate the effectiveness of new efforts. On the way to implementing more rigorous studies (like randomized control trials), there are many methods and assessments that can be conducted to help us learn what is promising and determine the best focus of more advanced research.

Campuses can start with formative evaluations – for example, conducting focus groups with different student groups before rolling out a social marketing campaign to find out whether the images and messages resonate with students. Campuses can ask participants in prevention programs to answer a short survey before and after a program that tests what they have learned, and then follow up a few months later to learn if they have used new skills. Other options are to include prevention questions in campus climate assessments/surveys, to encourage innovation in prevention tools and collect information on what impact these innovations are having, and to find ways to share the results with other campuses so they do not need to reinvent the wheel.

Plan for sustainability.

A strategic prevention plan should look to the future. How will prevention tools that work for your campus be continued over time? This is especially important if the early efforts for prevention are made possible by time-limited grants, special short-term funding, or particularly passionate individual staff members who may be transitory. Again, research and evaluation can be helpful. If you are able to document the positive effects of prevention efforts, it may be easier to make the case for continuing resources to support them.

Conclusion

Prevention of sexual assault on college campuses is incredibly important. Evaluation research is still in its early stages and it is not possible to offer a specific roadmap that every campus should follow. Rather, we offer suggestions supported by research for how campuses can develop a strategic plan to prevent sexual assault. Such a plan is built on engaged conversations between multiple campus stakeholders to design a comprehensive and sustainable plan of action. A key component of this plan needs to be assessment and evaluation research, including a plan to disseminate findings. This knowledge generation can serve as the platform for moving all campuses and the field of sexual violence prevention forward toward a strong evidence base and toward ending violence.

A Roadmap for Getting to Evidence-Based Sexual Violence Prevention on Campus

	Supported/evidence based	Promising	Emerging	Evidence Informed	Innovative	Harmful
Research Design and Effects	Some degree of experimental design (control group, random assignment to groups). Representative samples.	Some research evidence using rigorous methods like quasi-experimental designs OR program is based on a program that has been experimentally evaluated but with a different population (for example, adapting Safe Dates for use with college students).	Some research data, for example, pre- post-tests without a control group but with outcome measures beyond participant reactions and satisfaction. Good formative evaluation data.	Based on empirical data about best practices for prevention and empirical data about key risk factors and leverage points for prevention work. May have qualitative data in support of it. Formative evaluation data may be pending. Evaluation mostly focuses on reactions from participants.	Based on principles of prevention (Nation et al., 2003) and recent research that identifies new methods or new risk factors to focus on in prevention.	
Effects/ Outcome Measures	Program shows evidence of actual behavior change, not just attitudes or risk factors.	Program shows effects on attitudes or other risk factors only.	Program mostly looked at in terms of formative evaluation – participant reactions and suggestions.	No outcome data for program, just strong logic model for why effects would be hypothesized to exist.	Little or no outcome data.	Research data show prevention tool does not create change or is harmful.

Research Settings	Program has been examined in more than one setting. These settings may be similar but is even better if communities are different from one another.	Program may have been evaluated in only one setting.	Program design is based in empirical research about key factors related to the problem and key factors related to its solution. Has clear theory and logic model and specific learning goals that follow from those.	Design of program follows from body of empirical work and practice-based evidence.	Program uses innovative delivery methods like interactive theater or online learning that have been used for other educational purposes but have not yet been tried in relation to sexual violence. prevention	
Implementation Guidance	Program provides information about how to implement it and how to adapt it to meet needs of specific target audience/community.	Program provides information about adaptation and use so that others can replicate prevention tool.			Program may be in development and may not yet have clear guidelines.	
Population	Program is being used with age group for which it was designed. Program has been assessed with different groups/demonstrates cultural competence.	Prevention strategy is being implemented with or adapted for a different age/demographic group than it was originally designed.	Program or tool is being used with narrow range of participants/groups.			

Note. Model adapted from the CDC's "Continuum of Evidence of Effectiveness"[20] to provide more specific guidance on the development of the evidence base for campus sexual violence prevention.

[1] Hayes-Smith & Hayes-Smith (2009). A Website Content Analysis of Women's Resources and Sexual Assault Literature on College Campuses. *Critical Criminology, 17*, 109-123.

Walsh et al. (2010). Disclosure and service use on a college campus after an unwanted sexual experience. *Journal of Trauma & Dissociation, 11*:134–151.

Karjane, H.K., Fisher, B.S., & Cullen, F.T. (2002). Campus Sexual Assault: How America's Institutions of Higher Education Respond. Final Report, NIJ Grant # 1999-WA-VX-0008. Newton, MA: Education Development Center, Inc.

Borges, A., Banyard, V.L., & Moynihan, M.M. (2008). "Clarifying consent: Primary prevention of sexual assault on a college campus*." Journal of Prevention and Intervention in the Community*, 36(1-2): 75-88. PMCID: PMC19042464

[2] Banyard, V. L., Plante, E. G., & Moynihan, M. M. (2003) Bystander education: Bringing a broader community perspective to sexual violence prevention. *Journal of Community Psychology, 32,* 61-79.

[3] Gidycz, C. & Dardis, C. (2014). Feminist self-defense and resistance training for college students: A critical review and recommendations for the future. *Trauma, Violence, and Abuse*. Online first.
http://tva.sagepub.com/content/early/recent

[4] Gage, E. A. (2008). Gender attitudes and sexual behaviors comparing center and marginal athletes and nonathletes in a collegiate setting. *Violence Against Women*, *14*, 1014-1032.

Humphrey, S. E. & Kahn, A. S. (2000). Fraternities, athletic teams, and rape: Importance of identification with a risky group. *Journal of Interpersonal Violence, 15*, 1313-1322.

McMahon, S. (2010). Rape myth beliefs and bystander attitudes among incoming college students. *Journal of American College Health, 59*, 3-11.

Popson. H. C. (2009). *A protection hypothesis: Alpha characteristics and risk factors for sexual victimization among athletes and non-athletes*. Master's Thesis Miami University. Dept. of Kinesiology and Health.

Schwartz, M. D. & Nogrady, C. A. (1996). Fraternity membership, rape myths, and sexual aggression on a college campus. *Violence Against Women, 2*, 148-162.

Sønderlund, A. L., O'Brien, K., Kremer, P., Rowland, B., De Groot, F., Staiger, P., ... & Miller, P. G. (2013). The association between sports participation, alcohol use and aggression and violence: A systematic review. *Journal of Science and Medicine in Sport*, 17, 2-7.

[5] Moynihan, M. M., Banyard, V. L., Cares, A., Potter, S. J., Williams, L. M., & Stapleton, J. G. (accepted pending revisions). Encouraging Responses in Sexual and Relationship Violence Prevention: What Program Effects Remain One Year Later? *Journal of Interpersonal Violence*. Gidycz, C. A., Orchowski, L. M., & Berkowitz, A. D. (2011). Preventing sexual aggression among college men: An evaluation of a social norms and bystander intervention program. *Violence Against Women, 17,* 720-742.

[6] http://triethniccenter.colostate.edu/communityReadiness_home.htm

[7] http://triethniccenter.colostate.edu/CRP.htm;

Hamby, S. (2000). The importance of community in a feminist analysis of domestic violence among American Indians. *American Journal of Community Psychology, 28*, 649-669.

[8] Banyard, V. (2014). Improving college campus-based prevention of violence against women: A strategic plan for research built on multipronged practices and policies*. Trauma, Violence, and Abuse*. Online first
http://tva.sagepub.com/content/early/recent

[9] Cantalupo, N. C. (2014). Institution-specific victimization surveys: Addressing legal and practical disincentives to gender-based violence reporting on college campuses. *Trauma, Violence, and Abuse*, 1524838014521323, first published on March 12, 2014 as doi:10.1177/152483801452132.

[10] Lonsway, K. A., Banyard, V. L., Berkowitz, A. D., Gidycz, C. A., Katz, J. T., Koss, M. P., . . . Ullman, S. E. (2009, January). Rape prevention and risk reduction: Review of the research literature for practitioners. Retrieved from VAWnet Applied Research Forum website: http://www.vawnet.org

[11] Cox, P. J., Lang, K. S., Townsend, S. M., & Campbell, R. (2010). The rape prevention and education (RPE) theory model of community change: Connecting individual and social change. *Journal of Family Social Work*, *13*, 297-312.

[12] Potter, S., Moynihan, M., & Stapleton, J. (2010). Using social self-identification in social marketing materials aimed at reducing violence against women on campus*. Journal of Interpersonal Violence, 26*, 971-990.; Potter, S. J., & Stapleton, J. G. (2011). Bringing in the target audience in bystander social marketing materials for communities: Suggestions for practitioners. *Violence Against Women, 17*, 797-812.

[13] Noonan, R. K., Emshoff, J. G., Moos, A., Armstrong, M., Weinberg, J., Ball, B. (2009). Adoption, adaptation, and fidelity of implementation of sexual violence prevention programs. *Health Promotion Practice, 10 (Supplement),* 59S-70S.

[14] Noonan, R. K., Emshoff, J. G., Moos, A., Armstrong, M., Weinberg, J., Ball, B. (2009). Adoption, adaptation, and fidelity of implementation of sexual violence prevention programs. *Health Promotion Practice, 10 (Supplement),* 59S-70S.

[15] Banyard, V. (2013). Go big or go home. *Psychology of Violence*, *3*, 115-120. Nation, M., Crusto, C., Wandersman, A., Kumpfer, K. L., Seybolt, D., Morrissey-Kane, E., & Davino, K. (2003). What works in prevention: Principles of effective prevention programs. *American Psychologist, 58*(6-7), 449;

Anderson, L. & Whiston, S. (2005.) Sexual assault education programs: A meta-analytic examination of their effectiveness. *Psychology of Women Quarterly, 29*, 374–388.

[16] Wandersman, A. & Florin, P. (2003). Community interventions and effective prevention. *American Psychologist, 58*, 441-448.

[17] Hamby, S. & Grych, J. (2013). *Web of Violence*. Springer Publishers.

[18] Sulkowski, M. L. (2011). An investigation of students' willingness to report threats of violence in campus communities. *Psychology of Violence, 1*, 53-65.

[19] Taylor, B. G., Stein, N D., Mumford, E. A., & Woods, D. (2013). Shifting boundaries: An experimental evaluation of a dating violence prevention program in middle schools. *Prevention Science, 14*, 64-76;

Ruggiere, S., Friemel, T., Sticca, F., Perren, S., & Alsaker, F. (2013). Selection and influence effects in defending a victim of bullying: The moderating effects of school climate. *Social and Behavioral Sciences, 79*, 117-126;

Sapouna, M. (2010). Collective efficacy in the school context: Does it help explain victimization and bullying among Greek primary and secondary school students? *Journal of Interpersonal Violence, 25*, 1912-1927.

[20] http://www.cdc.gov/violenceprevention/pdf/continuum-chart-a.pdf