

**“iCONSENT”:
EVALUATION OF A UNIVERSAL DATING AND SEXUAL VIOLENCE
PREVENTION PROGRAM FOR COLLEGE STUDENTS**

by

KRISTIN MARIE HOLLAND

(Under the Direction of Pamela Orpinas)

ABSTRACT

This study is an evaluation of the iConsent program, a brief intervention designed to prevent dating violence and sexual violence among college students. The goals of the study were to evaluate the outcomes of iConsent, test the causative model, explain the mechanisms by which the intervention influences relationships, and evaluate the difference between the in-person (F-iConsent) and web-based (E-iConsent) program delivery methods.

Students (n=248) in six Health and Wellness classes at the University of Georgia were randomized to one of three conditions (F-iConsent, E-iConsent, or control group) and completed a pre-test, post-test, and 3-month follow-up assessment. Participants also provided open-ended feedback about the program. After completion of quantitative data collection, two one-hour focus groups were conducted to explore participants' responses to the program. Finally, a process evaluation was completed using program implementation and fidelity data. One-way analysis of covariance tests examined whether the program was effective in changing awareness, attitudes, beliefs, norms,

perceived behavioral control, and consent behaviors. Mediation analyses were also conducted to examine whether changes in proximal outcomes mediated change in the distal behavioral outcome.

The iConsent program demonstrated several positive results. At post-test, F-iConsent participants reported significantly increased awareness of consent and fewer beliefs in alcohol-sex disinhibitions compared to the control group, and E-iConsent participants reported significantly fewer attitudes accepting of rape compared to F-iConsent participants. These effects were not sustained at follow-up. The most salient result is the impact that F-iConsent had on men's behaviors. Men in the F-iConsent group reported significantly fewer indirect consent behaviors at post-test than E-iConsent and control group men. At follow-up, the difference between F-iConsent and E-iConsent men remained significant and was more pronounced, suggesting that there is a beneficial component to participation in the in-person version of the program for men on the important behavioral outcome of obtaining consent directly. Mediation analyses were significant only for men and revealed that F-iConsent men compared to E-iConsent men exhibited fewer indirect consent behaviors at follow-up after incorporation of proximal outcome changes into the analytic models, further highlighting the value of the in-person program. Implications of these and other detailed findings are presented.

INDEX WORDS: sexual violence prevention, dating violence, prevention program, effectiveness, evaluation

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DEDICATION

This study is dedicated to a young woman who was sexually assaulted by a friend and never sought help or justice. May the implementation of the iConsent program in the classes that participated in this study, and in more classes to come, serve as some consolation to her, with the hope that the program may prevent others like her from experiencing similar incidents.

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CHAPTER 1

INTRODUCTION

Purpose of the Study

The purpose of this study is to evaluate the impact of a brief, universal intervention entitled *iConsent* (iC), designed to prevent dating violence and sexual violence among college students, and to compare two delivery methods: a) a Facilitator-led intervention, F-iConsent (F-iC); and b) an Electronic intervention, E-iConsent (E-iC). The results obtained from the proposed evaluation will allow prevention scientists to better understand the impact the program has on normative values and attitudes related to dating violence and sexual violence among college students. Results will also lend to a clear understanding of the program's effect on perceived behavioral control and behavioral intent of participants following program implementation. Finally, if the data indicate that the program is effective at modifying norms, attitudes, and beliefs related to dating violence and sexual violence, these findings would progress the field of dating violence and sexual violence prevention science by providing evidence to suggest that high-benefit programs can be widely implemented on college campuses across the United States for a low cost and in a timely manner.

Background and Relevance

Dating violence encompasses a range of behaviors, including non-physical aggression (e.g., verbal belittlement, emotional abuse, privacy intrusions), electronic

harassment and control (e.g., constant contact through emails, instant messaging, phone calls; accessing someone's online accounts without permission), and physical aggression (e.g., hitting, choking, kicking) (Black et al., 2011). Sexual violence also includes a wide array of physical and nonphysical behaviors, such as rape, unwanted touching, sexual harassment, and sexual threats (Basile & Saltzman, 2002). The prevalence of dating violence and sexual violence among college students is high. A recent survey of college students indicated that 43% of women had experienced some form of dating abuse in their lifetime, and 57% of students who reported dating violence stated that it occurred during college (Knowledge Networks for Liz Claiborne, 2011). There is a strong connection between dating violence and sexual violence. Compared to women who have not experienced dating violence, women who have experienced physical dating violence are more likely to also experience sexual violence within the same year (Sousa et al., 2011). Although estimates of sexual violence prevalence vary by study, research suggests that one of four to five women experience attempted or completed rape during college (Fisher, Cullen, & Turner, 2000). In a recent study, 19% of women reported an attempted or completed rape while in college (Krebs, Lindquist, Warner, Fisher, & Martin, 2009). Further, college students are at higher risk for experiencing sexual assault than adults in the same age range who do not attend college (Fisher et al., 2000), making the college setting an important locale for implementation of prevention strategies. Another important fact for prevention efforts is that college rape occurs among students who know each other: Over 90% of college women who are raped know their attackers as a classmate, friend, boyfriend, ex-boyfriend, or acquaintance (Fisher et al., 2000). Finally, because of fear, embarrassment, and perceived stigma, many victims

fail to report sexual violence. Thus, rates of sexual assault are likely underestimated, therefore underlining the need for effective prevention programming.

Innovation

The Society for Prevention Research established a comprehensive set of standards for identifying what constitutes evidence. For a program to be considered efficacious, it must be tested in a minimum of two rigorous trials that “(1) involved defined samples from defined populations, (2) used psychometrically sound measures and data collection procedures; (3) analyzed their data with rigorous statistical approaches; (4) showed consistent positive effects (without serious iatrogenic effects); and (5) reported at least one significant long-term follow-up. An effective intervention under these Standards will not only meet all standards for efficacious interventions, but also will have (1) manuals, appropriate training, and technical support available to allow third parties to adopt and implement the intervention; (2) been evaluated under real-world conditions in studies that included sound measurement of the level of implementation and engagement of the target audience (in both the intervention and control conditions); (3) indicated the practical importance of intervention outcome effects; and (4) clearly demonstrated to whom intervention findings can be generalized,” (Flay et al., 2005, p. 151).

The proposed study addresses many of these requirements (e.g., well defined sample, adequate sample size, sound measures, rigorous statistical approaches, and a 3-month follow-up evaluation). The strong theoretical background and the integration of quantitative and qualitative research methods will facilitate the interpretation of the magnitude and strength of changes among intervention participants. The mixed-methods methodology will also provide insights into the context and prevention of dating violence

and sexual violence. This real-world study with strict process evaluation will clearly demonstrate to whom the intervention can be generalized. Because it may be unlikely that long held, deeply ingrained attitudes, beliefs, and behaviors can be changed as the result of a short, universal intervention, the study will examine its impact on subsamples. I hypothesize that high-risk students will increase their awareness and will increase perceived behavioral control regarding obtaining and providing consent in sexual relationships.

This program has the potential to significantly reduce the prevalence of dating violence and sexual violence at the University of Georgia if implemented continuously over time. Increasing knowledge of the components of dating violence and sexual violence and individuals' self-efficacy to seek out resources in cases of victimization has wide-reaching implications for public health and criminal justice. Increased awareness may result in increased reporting of incidents to authorities and prosecution of perpetrators. In addition, providing information about resources available to victims is expected to increase self-efficacy to obtain help and simultaneously reduce barriers to seeking justice following victimization. Finally, in an effort to increase the benefit to all study participants, the online program will be made available to students in the control condition after completion of the evaluation.

Research Questions

The research questions for the proposed study are:

1. What are the major deficits in students' knowledge, attitudes, and perceived self-efficacy regarding dating violence, sexual violence, and the sexual consent process?

2. Is the iConsent prevention program effective at increasing knowledge about dating violence and sexual violence, decreasing attitudes supportive of dating violence and sexual violence, and increasing students' perceived self-efficacy to communicate effectively in sexual relationships and to intervene in potential dating violence and sexual violence situations?
3. What is the process by which the iConsent prevention program works to increase knowledge about dating violence and sexual violence, decrease attitudes supportive of dating violence and sexual violence, and increase students' perceived self-efficacy to communicate effectively in sexual relationships and to intervene in potential dating violence and sexual violence situations?
4. From the students' perspectives, what are the critical components of the dating violence and sexual violence prevention program?

CHAPTER 2

LITERATURE REVIEW

This chapter consists of four sections describing 1) the risk factors associated with dating violence and sexual violence victimization and perpetration; 2) consent and sexual violence; 3) dating violence or sexual violence strategies previously evaluated; and 4) the importance of universal dating violence and sexual violence prevention strategy implementation.

Dating Violence and Sexual Assault Risk Factors

Many risk factors are associated with dating violence and sexual violence victimization and perpetration, particularly for college students. Individuals who have been exposed to dating violence and sexual violence are likely to experience it repeatedly, even after exposure to preventive interventions (Breitenbecher & Gidycz, 1998; Hanson & Gidycz, 1993; Rothman & Silverman, 2007). College athletes and Greek system members (i.e., fraternity and sorority members) are also at high risk for being victims and perpetrators of sexual violence (Boeringer, 1999; Brown, Sumner, & Nocera, 2002). Further, norms supportive of gender stereotypes, attitudes about women that justify forced sex, attitudes in support of casual sex, and believing common rape myths are some factors that predict sexual violence perpetration, victimization, and risky sexual behavior in general (Abbey & Jacques-Tiura, 2011; Murnen & Kohlman, 2007). Research suggests that athletes and Greek system members often adhere to such norms, attitudes, and beliefs (Murnen & Kohlman, 2007). Finally, alcohol consumption plays a

major role in sexual violence on college campuses. Abbey et al. (Abbey, Ross, McDuffie, & McAuslan, 1996) reported that approximately 50% of sexual assaults on college campuses are associated with alcohol use. In a later study conducted by the same researcher, it was found that when sexual assaults do involve alcohol, both the victim and perpetrator have been drinking (Abbey, McAuslan, & Ross, 1998). Additionally, many college students who are already at high risk for becoming victims or perpetrators of sexual violence (e.g., sorority members, fraternity members, and athletes) report significantly more drinking than their peers (Turrisi, Mallett, Mastroleo, & Larimer, 2006). Thus, dating violence and sexual violence prevention programming in college settings may be uniquely positioned to impact individuals who are at particularly high risk of sexual violence victimization and perpetration.

Because of the overwhelming prevalence of sexual violence on college campuses and the fact that college students are at higher risk for experiencing some form of sexual assault than adults in the same age range who do not attend college (Karjane, Fisher, & Cullen, 2005), federal regulations have recently been instated requiring that colleges and universities help protect their students. The regulations aim to reduce and prevent sexual violence incidents and increase the reporting standards for sexual violence incidents. In developing these policies, many colleges have focused on explicitly defining consent with respect to sexual behavior (Karjane et al., 2005).

Consent and Sexual Violence

Sexual consent is defined as verbal or nonverbal communication given freely by one individual to another to express a willingness to engage in sexual activity (Hickman

& Muehlenhard, 1999). Hickman and Muehlenhard (1999) described the difficulty associated with defining sexual consent in that it can actually be both a mental and a physical act (i.e., respectively, the *decision* to agree to participate in a sexual activity and the verbal or nonverbal *agreement* to engage in sexual activity). The mental act of consent is inherently problematic because of potential misunderstanding between partners that can arise when consent is not explicitly stated (e.g., if an individual consents mentally to a sexual act, the partner can never truly know whether the person is actually consenting). The physical act of consent is challenging for essentially the same reason: nonverbal consent (or dissent) cues can sometimes be misconstrued and could potentially lead to sexual assault.

Many sexual violence incidents, particularly rape, occur between individuals in dating relationships or among people who know each other. Thus, increasing sexual consent self-efficacy and strengthening communication techniques to avoid unwanted sex are potential ways to prevent sexual violence (Borges, Banyard, & Moynihan, 2008; Fisher et al., 2000). Further, increasing awareness about which are the numerous aspects of consent, what methods can be used for obtaining and giving consent, and when consent is required should also be areas of focus for sexual violence prevention programs. According to Borges et al. (Borges et al., 2008), consent is a common topic of confusion: “When conducting discussions on campus, common sources of confusion include ‘What if both people are drunk?’ ‘Do you actually have to say what you want every time?’ ‘Consent doesn’t pertain to me because I’m in a long term relationship,’” (p. 76). Questions similar to these also arose after the Fall 2012 pilot implementation of iConsent, suggesting that even when the importance of consent is explicitly defined and fresh in

students' minds, the concept of obtaining consent continually throughout the sexual intimacy process, during every sexual encounter, and even when a couple has had sex previously seems to be obscure. Perhaps one way to rectify this confusion or misunderstanding is to further clarify the significance of consent in sexual relationships. Specifically, consent is the only factor that separates sex from sexual assault. Further, as Hickman and Muehlenhard (1999) pointed out, if sexual violence were defined purely as any sexual activity for which *verbal* consent is not obtained, prevalence rates would be incredibly high. Thus, consent can be both verbal and nonverbal. However, because nonverbal consent cues can result in misinterpretation, an awareness of feasible and sufficient ways in which a person can grant and attain consent nonverbally is necessary. While sexual partners will undoubtedly continue to use nonverbal cues in sexual relationships, the iConsent intervention strictly defines consent as a *verbal* agreement between two partners expressing a willingness to engage in sexual activity and provides a wide range of examples illustrating how verbal consent can be obtained and provided during sexual activity.

With respect to prevention programming, increasing knowledge related to consent could theoretically result in reduced prevalence of sexual violence since students may become more adept at expressing either their willingness or reluctance to engage in sexual behavior.

Strategies to Prevent Dating and Sexual Violence

Recent strategies aimed at preventing dating violence target youths in an effort to prevent dating violence behaviors before they begin (Ball & Rosenbluth, 2008; CDC,

2012; Foshee et al., 2005). In colleges, programs that target sexual violence are implemented more frequently. These programs often incorporate information about dating violence in an attempt to curb those behaviors as well.

Although some college-based programs are considerably longer than others, many of them are brief, one-session interventions lasting approximately one to two hours. Unfortunately, most universities do not have resources to implement long programs because of the time commitment and expense involved. However, such long programs would likely be better suited than short ones to impact some of the more deeply ingrained attitudes and beliefs of students (e.g., normative beliefs regarding gender stereotypes that are established early in life and reinforced by family, friends, and society over many years).

Brief interventions have several advantages. Several studies have indicated that brief, one-session interventions do have the potential to increase awareness about the problem of sexual violence and produce changes in attitudes and behavioral intent (Borges et al., 2008; Hanson & Gidycz, 1993). The major advantage of these interventions is the minimal time commitment of students and staff, which translates into a monetary advantage. For example, one trained program leader can deliver the program numerous times over the course of one week or semester (e.g., in classes, in fraternity/sorority meetings, to various athletic teams, etc.), whereas with longer programs, the time commitment required to deliver the program limits the ability to implement it in multiple settings or in more than just a few classes. Unfortunately, one of the primary disadvantages of short programs is that they may lack the intensity or dosage necessary to produce change, particularly among high-risk individuals.

Researchers agree that participants with a history of sexual violence are at a greater risk of revictimization, and may not benefit from a short intervention (Breitenbecher & Gidycz, 1998; Hanson & Gidycz, 1993; Marx, Calhoun, Wilson, & Meyerson, 2001; P. H. Smith, White, & Holland, 2003). Hanson & Gidycz evaluated a brief sexual violence prevention program that focused on increasing awareness of the problem of sexual violence, dispelling common rape myths and norms associated with sexual violence, altering dating behaviors associated with date rape, fostering sexual communication, and reducing the rate of sexual violence over a 9-week period in a group of college women. Students in the treatment condition of this study received educational material regarding consent, healthy dating behaviors, and acquaintance rape awareness during a brief, one-session intervention. Women completed assessments at the beginning and end of the quarter, and provided information regarding history of sexual assault. The authors found that women with a history of sexual violence were at much greater risk of reporting revictimization during the course of the quarter. Participants in the treatment condition who had not been sexually victimized in the past reported fewer incidents of sexual assault during the quarter than those non-victims in the control group which received no prevention programming messages. This suggests the program was effective in reducing sexual violence incidence among women who had not been victimized before participating in the study. However, the prevention program was not effective in reducing incidence of sexual assault among women who had experienced moderate and severe victimization prior to participation in the study. Yet, both individuals with and without prior victimization history in the treatment group did report more awareness regarding sexual violence than the control group. This study indicates that one of the

difficulties in sexual violence prevention programming is impacting effectively students who are at high risk for victimization (e.g., students who have previously been victims of sexual violence). While this study appears to have been carefully conducted, it is difficult to assess the true effectiveness of the program, given that the authors were assessing a reduction in prevalence of sexual violence over a small timeframe, and the low base rate of sexual violence reported likely impacted the interpretation of program effect.

Similarly, Rothman and Silverman (2007) found no effect on individuals with a history of sexual violence victimization. They evaluated a 180-minute program entitled “Sex Signals,” which provided information on sexual violence prevalence rates, defined consent, and reviewed communication styles, bystander intervention, and acquaintance rape. The program consisted of a 90-minute drama and a 90-minute educational workshop conducted in small groups. Men and women in the comparison group reported more sexual assaults in their first year of college than students in the intervention group, but no effect was demonstrated for individuals who had been victimized prior to exposure to the intervention. The response rate at the one-year follow up was only 48% for the comparison group, indicating that providing incentives for participation is very important.

Rosenthal, Heesacker, and Neimeyer (1995) evaluated the impact of a 1-hour psychoeducational intervention that included information rejecting interpersonal violence and debunking rape myths, adversarial sexual beliefs, and male dominance. The program presented information in didactic form and through role-played vignettes to maintain participant engagement. The program was effective for traditional and nontraditional (i.e., those who do and do not believe in and adhere to traditional gender role stereotypes)

men and women. Additionally, traditionality (e.g., adherence to gender stereotypes) and rape supportive attitudes decreased.

Prevention programs that addressed normative values and beliefs and were longer in duration also had varied results. Kress et al. (2006) found that the 2.5 hour universal interactive intervention they evaluated led to a significant decrease in rape myth acceptance. This program presented didactic information, but also included several engaging strategies, including peer theater, peer facilitation, and large group discussion. This program was effective regardless of participant gender, age, and race. Unfortunately, this evaluation did not include a long-term follow-up measure, nor did it include a comparison group, so it is difficult to ascertain whether the decreased rape myth acceptance was indeed a product of program participation. The evaluation of another universal program, First Year Campus Acquaintance Rape Education (FYCARE), which included lecture, group discussion, and interactive participation, revealed a positive program impact on attitudes and judgments regarding rape scenarios, but only immediately after the intervention and not at the 4- or 6-month follow-up assessments (Lonsway & Kothari, 2000). This program also resulted in increases in knowledge, which were sustained 7 weeks after program completion. However, this evaluation did not include a pre-test, thus interpretation of these results is difficult, and it is hard to determine whether program effects were definitely due to participation in FYCARE (Lonsway & Kothari, 2000).

Several programs that aimed to impact normative values and specifically targeted high-risk populations have also been evaluated. Some of these studies targeted fraternity and/or sorority members, who are at higher risk than their non-fraternity and sorority

peers for becoming perpetrators and victims of sexual violence (Abbey, BeShears, Parkhill, Clinton-Sherrod, & McAuslan, 2004; Abbey et al., 1996). This increased risk is likely because fraternity and sorority members drink alcohol in excess, which has been identified as a risk factor for both sexual violence perpetration and victimization (Abbey & Jacques-Tiura, 2009; Abbey et al., 1996). Frazer, Valtinson, and Candell (1994) evaluated a 2-hour intervention based on improvisational theater skits that portrayed scenarios of acquaintance rape, followed by interactive discussion with the audience regarding prevention methods. In quasi-experimental research design, participants were assigned to treatment and control groups based on fraternity and sorority schedule availability. The treatment group participants reported fewer rape-supportive attitudes than the control group at post-test; however, these effects were not sustained at the 1-month follow-up assessment. The researchers suggested that the measures used to assess rape supportive attitudes may have been outdated and may not have been valid.

Lenihan and Rawlins (1994) evaluated a lecture style intervention at a university which required that all Greek members receive sexual violence prevention education. The intervention detailed the legal and social duties of Greek organizations, reviewed myths and realities regarding date rape, and emphasized the responsibility of fraternity and sorority members to provide positive leadership examples, avoid alcohol abuse, and provide help and protection for each other. Researchers administered a pre-test to intervention and control students 2 years before the sexual violence program was delivered to the Greek population. After the intervention, students who received the program had fewer rape supportive attitudes than the control group, but overall, fraternity men held more rape supportive attitudes than their female peers in sororities.

Additionally, the program did not change men's or women's attitudes. This study design had some problems. The control group and treatment groups were not properly matched by age, which is important since social maturation could have accounted for the treatment group's more desirable scores on the rape supportive attitudes measure. It is unclear whether the control and treatment groups completed the same measures, the control group completed the survey two years before the Greeks, and long-term impact was not assessed.

Heppner et al. (1999) investigated the short- and long-term effectiveness of a rape prevention intervention on a sample of White and Black college fraternity members. Participants were recruited from predominantly White and predominantly Black fraternities and were randomly assigned to either one of two treatment groups or a control group. One of the treatment groups received a program that incorporated culturally relevant form and content, while the other did not receive any information explicitly related to culture; the intervention took place over a period of three weeks and included three 90-minute sessions. Using hierarchical cluster analysis, the authors identified three groups of intervention participants: 1) a deteriorating cluster whose rape rejection attitudes scores decreased significantly across each assessment; 2) an improving cluster whose rape rejection attitudes scores significantly improved over time; and 3) a rebounding cluster consisting of students who reported relatively low rejection of rape scores at pretest, high scores at posttest, and low scores again at follow-up. Overall, no statistically significant differences in treatment effects were detected between the culturally-specific and non-specific treatment groups. However, Black students in the culturally-specific treatment group were more cognitively engaged (i.e., paid closer

attention) than their peers in the non-specific treatment group. This study, although limited in power due to high attrition, was rigorous in that students were randomly assigned to groups, data were collected six times over a five-month period allowing for long-term effects to be assessed, and hierarchical linear modeling analyses controlled for potential confounders. The small sample size (n=119) lends to the poor generalizability of these findings, but this study did provide some evidence in support of interventions that incorporate culturally relevant material to help engage participants.

Four programs focused on modifying bystander behavior and intent. The purpose of these programs was to empower students to safely intervene in potentially violent situations before, during, and after incidents of violence (Banyard & Cross, 2008; Moynihan, Banyard, Arnold, Eckstein, & Stapleton, 2011; Potter & Moynihan, 2011; Potter, Moynihan, Stapleton, & Banyard, 2009). A bystander approach to sexual violence prevention on college campuses and communities promotes wider dissemination among potential interrupters of violence. The four programs differed in prevention strategies, type of populations, and study designs.

Moynihan et al. (2011) studied the impact of the “Bringing in the Bystander” (BITB) prevention program among a sample of intercollegiate athletes. The student athletes, both men and women, were randomized into a treatment or control cohort and studied over a 2 month period. The treatment group received one 4.5 hour long session of the BITB program which consisted of three sections: 1) introducing the bystander model, 2) applying bystander concepts to sexual and intimate partner violence, and 3) developing skills as a bystander. Participants completed a pre-test, a post-test, and 2-month follow-up that measured rape myth acceptance, intent to engage in bystander

behaviors, bystander confidence, and bystander behaviors. The authors found that male and female athletes who attended the BITB prevention program increased their bystander confidence and intent to engage in bystander behaviors, two key attitudinal correlates of bystander action (Banyard & Cross, 2008). These results indicate that a bystander program for the prevention of sexual violence can be an effective model for changing attitudes related to sexual violence among student athletes. However, bystander behavior did not change, which brings into question the association between attitudes and behavior change. Additionally, because the sample consisted exclusively of intercollegiate athletes, it is unclear whether the same result would be found in a broader population.

In two studies, exposure to bystander prevention programs increased awareness of the problem of sexual violence and willingness to act to reduce the problem (Banyard & Cross, 2008; Potter et al., 2009). A possible confounder is that participants in the treatment and intervention groups may have shared information, thereby diminishing the differences between the cohorts. It seems that with high-risk populations such as athletes and fraternity members who, by definition, fraternize amongst themselves, spillover effects such as these are difficult to avoid and may make evaluation results difficult or impossible to interpret.

A fourth bystander prevention program examined the effect of a poster campaign on participants' knowledge about sexual violence (Potter et al., 2009). Posters depicting sexual violence and intimate partner violence scenarios and modeling bystander behavior were posted for four weeks in 285 sites on campus, including dorms, student centers, and dining halls. Posters were also hung at 65 other places near campus (e.g., Greek houses, coffee shops, bars). With respect to the stages of behavior change, the posters were

found to have an effect on the contemplation and action phases. Individuals who saw the posters had higher contemplation and action scores than those who did not. Additionally, women and students who had previously participated in a violence against women activity had significantly higher precontemplation and action scores than others. Overall, people who saw the posters had greater awareness of the issue and greater willingness to act to reduce the problem after the poster campaign.

The bystander approach to prevention complements traditional sexual violence prevention strategies. However, more research is needed regarding how bystanders' attitudes towards sexual violence ultimately affect their actions. Additionally, more research is needed on the relation among bystander attitudes, alcohol consumption, and bystander behavior. Since alcohol consumption plays such a prominent role in sexual violence (Abbey et al., 2003), the relation between these should be further explored.

Numerous studies on sexual violence prevention programs focused on increasing knowledge about consent. Borges, Banyard, and Moynihan (2008) randomly assigned students to a control group or one of two treatment groups: short or long treatment. The short treatment group received a 10-15 minute educational lecture about four components of consent: seeking consent, receiving consent, expressing consent, and giving permission. Program facilitators provided examples of how each consent component could be communicated in different sexual situations. The long treatment group received the same brief lecture accompanied by discussion regarding the relation between consent and alcohol consumption. The greatest increase in knowledge of consent was in the long treatment group, indicating that not only should a definition of consent be provided to students, but that it is helpful to discuss how various factors affect consent, particularly

drinking alcohol (Turrisi et al., 2006). The study lasted 2 weeks, so long-term impact is unknown (Borges et al., 2008).

Other consent-focused program evaluations indicated that students who participated in programs that educated about obtaining consent in sexual relationships reported better understanding of consent than control groups (Davis & Liddell, 2002; Heppner et al., 1999; Lanier, Elliott, Martin, & Kapadia, 1998). Further, a program that included an interactive drama helped students distinguish consent from coercion in sexual relationships (Heppner et al., 1999). The primary concern associated with some of these programs was that intervention effects were not sustained at 6-week or 5-month follow-up (Davis & Liddell, 2002; Heppner et al., 1999), and in some cases, the evaluators did not obtain long-term follow-up data, making it impossible to know whether changes were maintained over time (Borges et al., 2008; Lanier et al., 1998; Rothman & Silverman, 2007).

Other brief sexual violence prevention programs with various focal topics (e.g., dispelling rape myths, increasing empathy for victims) have demonstrated success in some areas. Bradley, Yeater, and O'Donohue (2009) found that a peer-implemented 50-minute intervention regarding rape myths, risk factors, risk perception, sexual violence response strategies, and victim empathy was marginally effective at increasing men's empathy and decreasing adherence to rape myths. However, it was ineffective at changing women's assault-related knowledge, participation in risky dating behaviors, and sexual communication strategies. Pinzone-Glover, Gidycz, and Jacobs (1998) found that a 50-minute intervention made men and women more empathetic towards victims of sexual violence. Shultz, Scherman, and Marshall (2000) also found that treatment

participants' acceptance of rape myths was lower than control participants' after participation in a brief campus rape prevention program that involved watching and discussing an interactive drama. Unfortunately, these studies did not evaluate the long-term impact of the programs.

To conclude, the evidence in support of brief sexual violence interventions is varied, with some studies indicating that short interventions achieve the desired outcomes and others suggesting that they do not. It is important to note, however, that many of those studies that do not provide evidence in support of the effectiveness of short interventions had flawed research designs and methodology, which may have affected the reported impact of the programs.

The proposed study will fill several major gaps in the literature. First, this study has a rigorous research design with a large sample that will provide sufficient power for detecting program effects. Second, this study evaluates the sustainability of program effects at 3-month follow-up. Third, this study compares two program delivery strategies: in-person and web-based, while at the same time using a no-treatment comparison group.

Universal Prevention of Dating and Sexual Violence

Universities need a comprehensive, multilevel system to prevent sexual assault among students. The overarching goal of such prevention strategies should be to reduce dating violence and sexual violence by changing knowledge, skills, attitudes, and social norms of all students. A combination of a single, brief intervention for all students (universal intervention) with intensive and longer programs for students at high risk for

victimization and perpetration (targeted interventions) should comprise multilevel prevention efforts. High risk refers to individuals who have been victims or perpetrators of sexual assault, students who drink heavily, and students with deeply ingrained attitudes and beliefs that support dating violence and sexual violence. These problems are sometimes reinforced in certain social groups such as athletic teams or Greek systems (Abbey et al., 1998; Abbey et al., 1996; Boeringer, 1999; Roudsari, Leahy, & Walters, 2009; P. H. Smith et al., 2003). Large universities, like the University of Georgia (UGA), provide counseling for high-risk students through their health services center. Thus, the goal of a brief intervention, such as iConsent, is not to change the most at-risk students, who will need a more intense program or individual therapy, but to increase awareness and skills among all students.

Programs should aim to define the minimally sufficient intervention required to promote change. Most universities do not have resources to implement long programs, which would entail funding numerous trained facilitators, allocating space for program implementation, and committing time of students who are typically overloaded with core coursework required to meet graduation standards. Short programs can be delivered by a trained facilitator numerous times over the course of one week or semester (e.g., in classes, in fraternity/sorority meetings, to various athletic teams, etc.), whereas with longer programs, the time commitment required to deliver the program limits its reach and feasibility. Even more critical is the need for an online program that all students can complete. To provide context, UGA admits approximately 5,000 new first-year students every year and has almost 26,000 undergraduate and 9,000 graduate students. Without a web-based intervention, it would be impossible to reach all students.

Brief interventions may be sufficient for preventing victimization and perpetration among the lower risk general college population (Hanson & Gidycz, 1993; Rothman & Silverman, 2007). In addition, increased awareness of risk factors that lead to dating violence and sexual violence can help students counsel friends and be more effective bystanders. High-risk students attending the brief intervention will benefit by recognizing the problem and receiving information about where to ask for help at the University's health center.

CHAPTER 3

METHODS

This chapter describes the study's methodology. First, the specific aims of the study and hypotheses are provided. In the second section, the iConsent intervention and the theoretical model on which it is based are described in detail. Qualitative results from the pilot test of the intervention are also described to demonstrate the need for the program at UGA. The third section of this chapter describes the study design, setting, and sample. The fourth section describes measures used to assess the effectiveness of the iConsent intervention. The methodology describing contextual inquiry is presented in the fifth section. Data collection procedures are described in the sixth section. Finally, the last section describes the analysis plan, including efficacy and mediational analyses, qualitative data analysis, and process evaluation analysis.

Specific Aims and Hypotheses

The goals of this study are to evaluate the impact of a brief, universal intervention designed to prevent dating violence and sexual violence among college students in a randomized trial and to compare two program delivery methods: a) a **F**acilitator-led intervention, F-iConsent (F-iC); and b) an **E**lectronic intervention, E-iConsent (E-iC). The main advantage of in-person delivery is the increased communication between classmates and facilitator, which may result in increased understanding of the material presented during iConsent and strengthening of social norms that reject dating violence.

The advantages of web-based delivery are fidelity of implementation, low cost, high reach, and self-paced instruction.

The **specific aims** and **hypotheses** of the study are:

- a. *Efficacy Outcomes*. Evaluate the impact of iConsent in a quasi-experimental, randomized trial. I hypothesize:
 - i. Students who participate in F-iConsent, compared to the control group, will report greater awareness of consent, stronger attitudes against sexual violence, fewer beliefs in women's refusal of sexual advances and alcohol-sex disinhibitions, stronger norms to obtain sexual consent, stronger perceived behavioral control, and more direct sexual consent behaviors after participating in the intervention.
 - ii. Students who participate in E-iConsent, compared to the control group, will report greater awareness of consent, stronger attitudes against sexual violence, fewer beliefs in women's refusal of sexual advances and alcohol-sex disinhibitions, stronger norms to obtain sexual consent, stronger perceived behavioral control, and more direct sexual consent behaviors after participating in the intervention.
 - iii. Program effects will be maintained at the 3-month follow up.
- b. *Causative Model*. Test the proposed causative model.
 - i. F-iConsent and E-iConsent effects on obtaining sexual consent will be mediated by increases in awareness of consent, stronger attitudes against sexual violence, fewer beliefs in women's refusal of sexual advances and

alcohol-sex disinhibitions, stronger norms to obtain sexual consent, and stronger perceived behavioral control after participating in the intervention.

- c. *Qualitative Evaluation.* Explain from the perspective of the participants the impact of the intervention on dating and sexual relationships.
- d. *Process Evaluation.* Evaluate the implementation process of iConsent.
 - i. Students will report high levels of satisfaction with both programs.
 - ii. Facilitator of F-iConsent will adhere to the program script and format.

Program Design and Implementation

Intervention Description and Theoretical Background

Based on a comprehensive review of the literature and two pilot tests of the program (Chapter 3, “Preliminary Studies”), I included in iConsent the most promising components for facilitating change. This 50-minute, mixed-gender intervention is designed to be implemented in only one class period. It has five sections:

- 1) Short overview (~10 minutes) of the behaviors that constitute dating violence and sexual violence, including physical, non-physical, and electronic abuse.
- 2) Detailed explanation of the process and importance of obtaining and providing consent, a key characteristic of healthy sexual relationships. The program explains the intersection between substance use and sexual violence and debunks gender stereotypes and rape myths.
- 3) A fun and interactive game (based on *Jeopardy*) in F-iConsent only to reinforce attitudes, apply skills to specific scenarios, and strengthen the sustainability of the program’s effects.
- 4) A 13-item quiz completed by E-iConsent and F-iConsent participants upon

completion of the program to test knowledge gained from the program.

5) Resources available for students who need help.

Implementation strategies. This one-session, 50-minute program, is interactive and engages students in activities throughout its duration. The program can be delivered online or in-person. The online version, E-iConsent, created using Adobe Captivate 2.0, includes the components listed above, except for the Jeopardy game. The program is dubbed with a voiceover describing each topic. Students can view the online program at their own pace. Students are instructed to complete an 13-item quiz at the finale of the online version, which serves to test knowledge and reinforce information provided in the online program. Correct answers to the quiz questions appear immediately after the student has responded, and feedback is given for all responses. The F-iConsent program is guided by the same slides as presented in E-iConsent, but the sound is muted. Instead, F-iConsent implementation involves interactive discussion between the facilitator and students regarding students' notions of dating violence and sexual violence.

Program Development and Theory. To build the most effective program, I integrated available research, an existing program at UGA, feedback from students, and theory. First, I conducted an exhaustive review of the literature of brief dating violence and sexual violence interventions to select programmatic strategies identified by researchers as useful or promising, such as incorporating activities to engage students during program implementation (e.g., discussion of interesting facts and concepts) and including culturally relevant depictions of dating violence and sexual violence scenarios (e.g., clips from the pop culture television show, *Teen Mom*) in the program. Second, iConsent integrates some components of the University of Georgia's previously existing

sexual violence prevention communications campaign, *Consent Is Sexy* (Consent Is Sexy, 2011), particularly the description of the elements of consent and the process for obtaining consent throughout the sexual intimacy process. Third, I pilot-tested the program twice, as described in the “Preliminary Studies” section below.

Fourth, the Theory of Planned Behavior (TPB) guided the understanding of individuals’ behavioral intentions, short-term behavioral outcomes, and long-term behavioral outcomes after participation in the dating violence and sexual violence prevention program. Figure 3.1 depicts the conceptual model, based on the TPB. According to this theory, both behaviors and behavioral intent are influenced by knowledge, attitudes, subjective norms, and perceived behavioral control about the behavior of interest (Ajzen, 1991; Montaña & Kasprzyk, 2002). Changes in these constructs as a product of participation in iConsent may be best understood if analyzed using the basic tenets of the TPB. For example, violent sexual behaviors may evolve from a number of factors, including a person’s lack of awareness about how to obtain consent, attitudes supportive of rape myths (e.g., if a woman goes to her date’s apartment, her date can assume she wants to have sex), beliefs about women’s token refusal of sexual advances (e.g., women want to be talked into having sex), beliefs in alcohol-sex expectancies (e.g., people are more likely to engage in sexual activities after drinking alcohol), subjective norms about sexual consent (e.g., sexual intercourse is the only activity that requires consent), and perceived behavioral control over obtaining and giving consent during sexual activities.

Participation in the iConsent program is expected to modify such attitudes, beliefs, subjective norms, and perceived behavioral control in a way such that behavioral

intent and distal behavioral outcomes, such as obtaining consent throughout the sexual intimacy process, will be positively impacted. Effective translation of this theory into practice in the iConsent program involves: 1) increasing awareness of consent; 2) dispelling rape myths in an effort to increase prosocial attitudes about sexual violence; 3) decreasing beliefs about women’s token refusal of sexual advances and alcohol-sex disinhibitions; 4) decreasing negative norms about giving and obtaining consent; 5) increasing perceived behavioral control to give and obtain consent; and 6) increasing direct sexual consent behaviors. Finally, I hypothesize that individuals’ increases in awareness; strengthening of prosocial attitudes, beliefs, and norms; and increases in perceived behavioral control will mediate the distal behavioral outcome of directly obtaining consent during sexual activities.

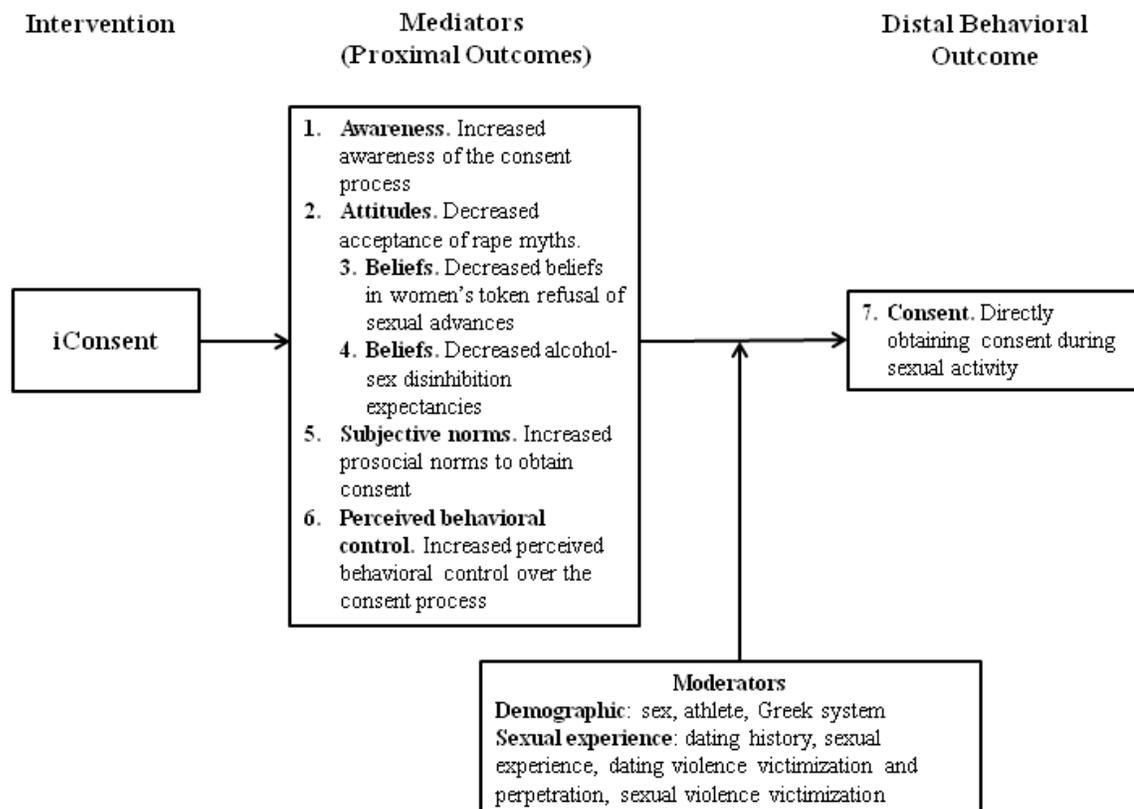


Figure 3.1 Conceptual model indicating iConsent program theory of change based on the Theory of Planned Behavior

Awareness of dating violence, sexual violence, and consent. Fifty-seven percent of college students surveyed in 2011 reported that it is difficult to identify dating violence, suggesting that many students do not know its characteristics or prevalence (Knowledge Networks for Liz Claiborne, 2011). The low awareness of dating violence and sexual violence is likely related to the misunderstanding of what actions constitute dating violence and sexual violence. For instance, students may equate only physical violence with dating violence and rape with sexual violence, without understanding the broad spectrum of behaviors that constitute dating violence and sexual violence. Most importantly, some of the less violent behaviors may be precursors of more severe violence. Many students are also unaware of how to properly obtain consent throughout the sexual intimacy process (Karjane et al., 2005). For instance, students are often confused about whether it matters if one or both partners are drunk at the time sexual intimacy, whether each partner must continuously specify their sex expectancies on each occasion they are intimate, and whether the consent process is the same for people involved in long-term relationships as for those who are casual sexual partners. The iConsent program is designed to increase knowledge about the behaviors that constitute dating and sexual violence, as well as about risk factors associated with dating and sexual violence victimization and perpetration. The program also provides information about when and how people should obtain consent during the course of being intimate.

Attitudes, beliefs, and subjective norms about consent and sex. Modifying the proximal outcomes of attitudes, beliefs, and norms supportive of gender stereotypes and violence against women, rape myths, and women's responses to sexual advances, will theoretically impact behavioral intentions to obtain consent when being sexually intimate,

which will result in a more distal outcome of modifying behavior in a way such that participants directly obtain consent during sexual activities (Fabiano, Perkins, Berkowitz, Linkenbach, & Stark, 2003). It is expected that the iConsent program will dispel common rape myths and gender stereotypes and will, in turn, positively influence participants' attitudes, beliefs, and norms about dating violence and sexual violence victimization and perpetration and the subsequent consent process.

Perceived behavioral control. Perceived behavioral control for specific behaviors is a crucial determinant for an individual's likelihood to consider changing a behavior, as well as to understanding the level of commitment applied to changing the behavior and predicting success in maintaining behavior change (Bandura, 1990). Perceived behavioral control is defined as the extent to which individuals believe they could perform a behavior if they are so inclined (Ajzen, 2011). It is related to Bandura's construct of self-efficacy, when referring to internal controls, which describes people's beliefs about their ability to control certain events related to their behaviors (Bandura, 1977). Further, perceived self-efficacy is associated with external and internal loci of control, with the external locus relating to controllability of environmental factors and the internal locus closely relating to self-efficacy (i.e., the perceived ease or difficulty of performing a behavior; Ajzen, 2002). Perceived behavioral control over communication is critical in maintaining healthy dating and sexual relationships. Individuals involved in violent relationships report a negative communication style (Follette & Alexander, 1992), which has been associated with attributing hostile intent to a partner's actions (Holtzworth-Munroe & Smutzler, 1996). Additionally, adolescent African American women who reported high self-efficacy to communicate with their dating partners were

more likely to refuse unwanted sex than their peers with low self-efficacy regarding communication skills (Sionéan et al., 2002). In a review of studies related to adolescent dating violence and date rape, Rickert, Vaughan, and Wiemann (2002) concluded that prevention efforts should focus on increasing self-efficacy to negotiate safer sex. Inherent in this recommendation is the need to increase perceived behavioral control over expressing and obtaining consent between sexual partners.

Theoretically, increasing individuals' understanding that they control whether their dating and sexual relationships involve violence, as well as increasing their motivation to prevent such behaviors, will influence their behavioral intentions (e.g., they will be more likely to communicate with their partners, obtain and express consent throughout the sexual intimacy process, and prevent and intervene in violent incidents), which will result in individuals being less likely to take an indirect behavioral approach to obtaining sexual consent.

Distal behavioral outcome. The goal of the iConsent program is to increase awareness of consent, strengthen attitudes against sexual violence, change beliefs about women's refusal of sexual advances and alcohol-sex disinhibitions, increase norms that support obtaining consent, and strengthen perceived behavioral control over consent. Making these changes through participation in the iConsent program will theoretically result in increasing participants' direct sexual consent behaviors. Direct sexual consent behaviors include communicating sexual consent through the use of verbal language as opposed to nonverbal signals and body language, directly asking for consent as opposed to making a sexual advance and waiting for a reaction, and directly giving verbal sexual

consent instead of relying on a partner to interpret actions him/herself (Humphreys & Brousseau, 2010).

Preliminary Studies

In the fall of 2012, two pilot tests of the F-iC program were conducted, with a class of 13 and of 70 students. In both sessions, students were very engaged, participating in small group discussions and eagerly responding to questions asked by the facilitator. The pilot evaluations showed that the program is feasible, acceptable, and useful (Flay et al., 2005; Puddy & Wilkins, 2011). Following each session, students provided feedback through an online discussion forum. Five major themes emerged from the students' discussions regarding the program:

1) Dating violence encompasses a wide range of behaviors from privacy intrusions to physical abuse. Almost all students indicated that they did not realize before participating in the program that dating violence consists of such a wide range of behaviors. Comments such as, "Before this I really only considered physical violence (hitting, kicking, punching) as the components of violence," were frequently posted. Additionally, many students stated that they were unaware that privacy intrusions were a form of dating violence: "I also found it interesting when we went through and described all the different types of violence that can occur in relationships, a lot of which you don't think of as violence, like privacy invasion." One student's feedback focused on the fact that advances in technology have created yet another level at which individuals can become perpetrators or victims of dating violence. Many of the previously evaluated dating violence and sexual violence prevention programs do not address privacy intrusion as a component of dating violence; yet, students' feedback indicate that it is a prevalent

behavior but frequently not seen as a form of abuse. Thus, it is important that dating violence and sexual violence prevention programs implemented on college campuses incorporate information about privacy invasion as a form of dating violence to increase awareness and the ability for students to successfully identify different forms of dating violence.

2) Men and women can be victims and perpetrators. Although the consequences of dating violence are significantly worse for women, men and women can be victims and perpetrators of dating violence. The program increased understanding of the mutuality of dating violence, as well as of the consequences. “I see this [women hitting men] all the time on the TV shows I watch, however, I tend to always overlook it since it's the man that is being hit.”

3) Sexual violence is most commonly perpetrated by someone known to the victim and that the prevalence rate of sexual violence on college campuses is high. Knowledge regarding the prevalence of and circumstances related to sexual violence increased as a result of participation in the iConsent program. Students indicated that they were surprised to learn the prevalence of sexual violence was so high, particularly that approximately 25% of women will be raped in their college career. Several students posted comments such as this one: “I think the most shocking thing was that 1 out of 4 girls are going to have some experience with rape before they graduate college. That is scary.” Additionally, students were surprised that the majority of women who are raped know their assailant: “It has never occurred to me that rape can be committed by a person who you knew.”

4) Consent must be obtained continuously throughout the sexual intimacy process, and it is important because it is the only behavior that separates sex from rape.

Students also expressed an increased understanding that consent is a continual process and an increase in knowledge related to the various methods one can use to express consent: “I learned that consent can be given in only a few ways, yet can be misinterpreted in many ways. For example, saying [yes] to having sex with a partner is the only real form of consent. On the other hand, people may mistake body language for consent, may coerce or guilt someone into it, or just flat out force someone to have sex with them.” Additionally, one of the most important aspects about consenting to sex that students expressed learning was that an individual cannot consent to sex while under the influence of drugs or alcohol: “I learned that having sex with someone who is drunk or high is considered sexual assault because they cannot soundly give consent when under the influence”; “The part about giving consent if one is under the influence of drugs or alcohol was good to learn about because that is one area a lot of people are not sure about. That is a very common thing that happens”; “Some of the information on consent was not new to me. However, the fact that if you aren't sober in a situation, it is considered sexual assault [was new]”; “Something I'm glad we went over was that consent only counts as consent if the person is sober. It is a common misconception among college students that an absence of no means yes. However, if a person is too intoxicated to give sound consent then it cannot count. I think it was important to address that.”

5) The program is beneficial because it increases knowledge and skills to identify incidents of dating violence and sexual violence, and increases efficacy to handle the consent process, to communicate with their friends and partners about it, and to seek help using local and national resources. Many students indicated that the program was beneficial and provided useful information that could help them to better identify a dating violence situation or to intervene in one in the future: “I realized it might be hard to notice that we are actually giving or getting dating violence. And even if we noticed, it is tough to admit or talk to someone about the facts. So we need to know how dating violence influence us and what we can do to prevent it.” “[This program gave] me the skills to identify and hopefully help a friend who is in one of these relationships.” “I can identify different forms of violence that I will be able to recognize in my own relationships as well as my close friends so that I can address the problems or help out.”

Additionally, many students posted comments on the interactive nature of the program indicating that the discussions and links to popular culture made the program more enjoyable and interesting to participants: “[Holland] was very encouraging to the students, and seemed very open and knowledgeable about such a serious topic like sexual violence. She maintained a healthy balance of class participation, humor, and information to make the presentation engaging.” “I really enjoyed the activities that came along with the presentation. She really got us involved.” “I especially liked how Ms. Holland involved the class in her presentation. This captured our attention and helped us to stay tuned into what she was saying.”

It is likely that one of the components of the iConsent program that makes it effective is its interactive nature. The students who participated in the pilot tests of the program suggest that the discussions and activities they took part in during the program

were not only interesting and engaging, but also “helped cement the information” into their minds, making it more memorable. Theoretically, this reinforcement of information at the end of the session will ensure that the increase in knowledge will be sustainable. Further, if the changes in knowledge and attitudes immediately experienced by program participants are maintained over time, there is an increased likelihood that the program will result in behavior change.

Study Design, Setting, and Sample

To evaluate the effectiveness of the iConsent program, a quasi-experimental, randomized trial was conducted. Six classes, rather than the students, were randomized to one of three intervention groups: 1) F-iConsent: in-person intervention group; 2) E-iConsent: electronic, web-based intervention group; or 3) no treatment comparison group. Undergraduate Health Promotion and Behavior (HPRB) 1710 Health and Wellness classes were invited to participate in this study. The size of these classes ranged from 25 to 70 students. Each group consisted of two classes, for a total of 6 classes.

Cluster sampling is convenient when working with naturally occurring groups, such as classrooms, and is the most common sampling strategy used in the behavioral sciences. Cluster sampling is less expensive than random sampling and will allow for examination of classroom processes, which is particularly important for the proposed study. The external validity, or generalizability, of the results based on cluster sampling has pros and cons. If the program is effective, it will be implemented in classrooms; thus cluster sampling would be an advantage. A disadvantage of cluster sampling is that individual responses may be influenced by group effects, but by involving only

introductory classes in the areas of social sciences and health, demographic differences between classes will be minimized.

Following the intervention, two waves of data were collected – a post-test immediately following the intervention and a 3-month follow-up – to assess immediate program impacts and whether program effects are sustained over time (Puddy & Wilkins, 2011). The true experimental research design described here with randomization to condition and administration of multiple assessments to measure change, along with the fact that the iConsent program is grounded in theory, is real-world informed, and is expected to have a preventive effect places it in the Emerging category on Puddy and Wilkins’ (2011) Continuum of Evidence of Effectiveness. Programs in this category are in need of more research to move up to the Supported program category.

Initially, 310 students were recruited to participate in the study. Seven (2.3%) students were ineligible because they did not provide tracking information. There was some attrition between baseline and post-test, with N=279 (92.1%) at post-test. Further attrition at the 3-month follow-up survey resulted in a final sample size of N=248 (81.8%; Figure 3.2).

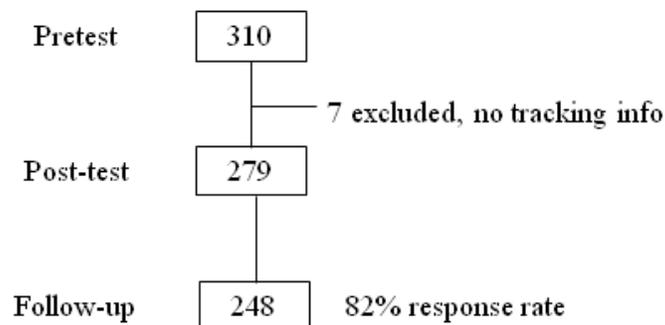


Figure 3.2. Diagram indicating sample size at each assessment

The average age of the entire sample was 19.4 years (SD=2.11). Participants were primarily White (n=168; 68.9%), followed by Black (n=34; 13.9%), Hispanic (n=8; 3.3%), Asian (n=22; 9.0%), and other (n=12; 4.9%). Overall, most participants either lived on campus (n=80; 34.5%) or off-campus with friends (n=127; 54.7%). Further, only a small portion of students reported being a member of a UGA athletic team (n=45; 19.5%) or a sorority (n=67; 29.1%) or fraternity (n=4; 1.7%).

Measures

Students completed a 73-item survey at pre-test, post-test, and 3-month follow-up.

Moderators

Demographics. Students reported on: gender, age, academic year, grades, participation in athletics and the Greek system, and area of residence (dormitory, fraternity/sorority house, off-campus with friends, off-campus with family).

Dating history and sexual experience. Two questions asked about students' dating history (e.g., number of dating partners, current involvement in a dating relationship), and two questions asked about their sexual experience (e.g., ever had oral sex, ever had vaginal intercourse).

Dating violence victimization. Two items assessed dating violence victimization: "Have you ever felt scared, put down, or controlled by a partner or someone you were dating?" and "During the past 12 months, did your partner or someone you were dating ever hit, slap, or physically hurt you on purpose?" (yes/no). The second of these two items is taken directly from the CDC's Youth Risk Behavior Survey (YRBS).

Dating violence perpetration. Two items assessed dating violence perpetration: “Have you ever threatened, put down, or controlled a partner or someone you were dating?” and “During the past 12 months, did you ever hit, slap, or physically hurt your partner or someone you were dating on purpose?” (yes/no).

Sexual violence victimization. Three items from the UGA Risk Behavior Survey (Muilenburg, 2014) assessed sexual violence victimization: “Have you ever had sexual contact when you did not want to?”, “Have you ever had sexual contact when you did not consent or were unable to provide consent (e.g., you were drunk, high, or passed out)?”, and “Have you ever been forced to have sexual contact?” (1=*no*; 2=*yes*).

Program Mediators

The 39-item Sexual Consent Survey Scale-Revised (Humphreys & Brousseau, 2010) assesses five components of consent: 1) awareness of consent, 2) sexual consent norms, 3) (lack of) perceived behavioral control, and 4) indirect consent behaviors, and 5) positive attitude toward establishing consent. The internal consistency, measured with Cronbach’s alpha, among a sample of 372 men and women from three undergraduate universities was 0.87. However, for the purpose of the current study, only 26 items from the first four subscales were administered to evaluate four constructs: 1) awareness of consent, 2) norms about sexual consent, 3) (lack of) perceived behavioral control over consent, and 4) indirect consent behaviors. Response options ranged from 1=*strongly disagree* to 5=*strongly agree*.

All scales were calculated as the mean scores of the items. For awareness of consent, higher scores indicate stronger support for the construct. For all other constructs, higher scores indicate less support for the prosocial outcome (e.g., high score

for attitudes accepting of rape myths indicates participant agreed more with attitudes about rape myths).

1. Awareness of consent

Four items of the Sexual Consent Survey Scale-Revised were used to assess awareness of consent (Humphreys & Brousseau, 2010). Examples of items are “I have not given much thought to the topic of sexual consent,” and “I have discussed sexual consent issues with my current (or most recent) partner at times other than during sexual encounters.” The internal consistency of the awareness of consent scale for the current sample was 0.75. Response options ranged from 1=*strongly disagree* to 5=*strongly agree*. The iConsent program is designed to increase awareness of consent. Higher scores on this scale indicate greater awareness about the topic of consent.

2. Attitudes accepting of rape myths

The 14-item Scale for the Identification of Acquaintance Rape Attitudes assesses attitudes supportive of sexual violence in relationships. Examples of items are “If a woman does not physically resist a man’s sexual advances, it is safe for the man to assume that the woman wants to have sexual intercourse”; “If a woman initiates physical contact on a date, it is okay for her partner to assume she wants to have sexual intercourse”; and “When rape happens on a date, it is usually because the woman sends mixed messages to the man about what she wants sexually.” The internal consistency among a sample of college students, measured with Cronbach’s alpha, was 0.94 (Humphrey, 1996). In this study, 12 items were included in the survey, and the internal consistency was 0.86. Response options ranged from 1=*strongly disagree* to 5=*strongly*

agree. The intervention is designed to decrease attitudes accepting of rape myths. Higher scores on this scale indicate stronger attitudes in support of rape myths.

3. Beliefs about women's token refusal of sexual advances.

Four items from the Sexual Beliefs Token Refusal subscale (Muehlenhard & Felts, 2010) measured beliefs that women often express unwillingness to have sex when they are actually willing to. This scale includes items such as "Girls generally want to be talked into having sex," and "Women often say "No" because they don't want men to think they're easy." The internal consistency of the Token Refusal subscale among 337 university students was 0.71 (Muehlenhard & Felts, 2010). Among the current sample, the internal consistency was 0.78. Response options ranged from 1=*strongly disagree* to 5=*strongly agree*. The intervention is meant to decrease beliefs in women's token refusal of sexual advances. Higher scores on this scale indicate stronger beliefs in women's token refusal of sexual advances.

4. Beliefs about alcohol-sex disinhibitions.

The 4-item Disinhibition Alcohol-Sex Expectancy Scale (Dermen & Cooper, 1994) assesses beliefs regarding sex after consuming alcohol and includes items such as "After a few drinks of alcohol, I am more likely to have sex on the first date." The internal consistency, measured by Cronbach's alpha, of the scale was 0.79 among a sample of 916 sexually experienced adolescents. One additional item was added from Muilenburg's (2014) UGA Risk Behavior Survey: "Alcohol usually influences my decision to have sex," to assess the extent to which participants agree that alcohol influences their sexual decision-making. A confirmatory factor analysis was conducted to ensure that the addition of this item to the scale did not diminish its reliability. The

Cronbach's alpha internal consistency of the 5-item scale among the current sample was 0.90; if Muilenburg's item was deleted, the alpha would decrease to 0.87, indicating that it is a relevant addition to the scale. Response options ranged from 1=*strongly disagree* to 5=*strongly agree*. The iConsent program is designed to decrease beliefs in alcohol-sex disinhibitions. Higher scores on this scale indicate stronger beliefs about alcohol-sex disinhibitions.

5. Norms about sexual consent

Seven items from the Sexual Consent Survey Scale-Revised were used to assess sexual consent norms (Humphreys & Brousseau, 2010). Examples of items are "I think that obtaining consent is more necessary in a new relationship than in a committed one"; "I believe it is enough to ask for consent at the beginning of a sexual encounter", and "If consent for sexual intercourse is established, petting and fondling can be assumed." The internal consistency of this scale for the current sample was 0.70. Response options ranged from 1=*strongly disagree* to 5=*strongly agree*. The intervention aims to decrease negative norms about sexual consent. Higher scores on this scale indicate stronger support for negative norms about consent.

6. Perceived behavioral control over consent.

Eight items from Sexual Consent Survey Scale-Revised measured lack of perceived behavioral control during the consent process (Humphreys & Brousseau, 2010). Examples of items are "I would have difficulty asking for sexual consent because it would spoil the mood"; "I think that verbally asking for sexual consent is awkward"; and "I have not asked for sexual consent (or given my consent) at times because I felt that it might backfire and I would end up not having sex." The internal consistency of this

scale for the current sample, as measured with Cronbach's alpha was 0.84. Response options ranged from 1=*strongly disagree* to 5=*strongly agree*. The intervention is meant to decrease lack of perceived behavioral control over consent. Higher scores on this scale indicate less perceived behavioral control over consent.

7. Behavioral approach to consent.

Six items from Sexual Consent Survey Scale-Revised measured the indirect behavioral approach to consent (Humphreys & Brousseau, 2010). Students responded to items such as “Typically I communicate sexual consent to my partner using nonverbal signals and body language”; “I don't have to ask or give my partner sexual consent because my partner knows me well enough”; and “It is easy to accurately read my current (or most recent) partner's nonverbal signals as indicating consent or non-consent to sexual activity.” The internal consistency of this scale among the current sample was 0.80. Response options ranged from 1=*strongly disagree* to 5=*strongly agree*. The intervention is designed to decrease indirect consent behaviors. Higher scores on this scale indicate more use of the indirect behavioral approach to consent.

Contextual Inquiry

Two sources of qualitative data—open-ended questions and focus groups—provided insight about students' satisfaction with the program, the manners in which they perceived the program to be effective, and how the program could be improved.

First, to understand from the perspective of the participants themselves how the iConsent program did or did not influence them, two open-ended questions were included in the online quiz (Appendix B). Data collected from these questions were used to corroborate the quantitative findings regarding the impact of the iConsent program.

Second, after the follow-up assessment, two one-hour same-sex focus groups with three participants each were conducted to explore students' reactions to the iConsent program and to explain how the program may have resulted in individual-level change. Same-sex focus groups were conducted in an effort to minimize potential embarrassment or socially desirable responses from participants that could be influenced by the presence of opposite-sex individuals. Focus groups serve as a way to elicit detailed information from a group of individuals who, in this case, experienced a similar phenomenon (Krueger & Casey, 2000). The small number of participants in the focus groups allowed the researcher to interact more deeply with each member and allowed members to contribute more meaningful data. Students discussed their thoughts about the program, whether they gained and used skills from the program, and the applicability of program messages (Bystedt, Siri, & Potts, 2003). All focus group interviews were recorded using an iPad WavePad voice recorder. The audio files were transcribed verbatim prior to transcript analysis (Appendix C). Pseudonyms were assigned in focus groups and are used in transcripts to protect the privacy of participants. Additionally, the participants' teacher's names were redacted from focus group data for privacy purposes.

This mixed methods research design uses quantitative and qualitative data to generate a richer, more detailed understanding of programs (Creswell, 2012). Generally, quantitative studies answer questions using quantifiable data, collected in an objective manner based on a positivist philosophical framework (Popper, 1959; Schrag, 1992). Positivism recognizes only a single reality, is objective, and deductive in terms of methodology. Conversely, qualitative research primarily uses a constructivist framework, which appreciates multiple realities, is subjective and somewhat biased in

nature, and uses inductive reasoning to develop themes and, ultimately, theories for the ways things work (J. K. Smith, 1983). Whereas quantitative research focuses mainly on collecting numerical data, qualitative research investigates individuals' experiences of or reactions to different phenomena. Overall, the rationale for conducting a mixed methods study, combining both the deductive methods of quantitative research and the inductive methods of qualitative research, lies in the expectation that doing so yields a superior understanding of the research problem than would investigating the problem using a single method (Burke Johnson & Onwuegbuzie, 2004). Mixing these research methods is an attempt to maximize the strengths and minimize the weaknesses associated with the positivist and constructivist approaches to research, and at the same time, provides a "logical and practical alternative" to conducting purely quantitative or qualitative research (Burke Johnson & Onwuegbuzie, 2004, p. 17).

To maximize the utility of the iConsent program evaluation, both methods were used at several levels. First, methods were mixed at the research question level to understand both the quantitative effect of the program and the qualitative impact of the program as well as to understand how the program is implemented and works. Second, methods were mixed in the data collection stage; and third, in the data interpretation stage (i.e., drawing conclusions, making warranted inferences and generalizations, and describing outcomes relative to the program; Creswell, Plano Clark, Gutmann, & Hanson, 2003).

Figure 3.3 describes the sequential explanatory design of this study. The study is being conducted in sequence with one method preceding another in all but one phase. (Note: I use uppercase—QUAN or QUAL—to signify the priority of data collection

method, and lowercase—quan or qual—to signify a lower priority.) For instance, the QUAN pre-test preceded the intervention, which was the phase at which QUAL data were collected through group observations and facilitator fidelity self-reports (see Process Evaluation Section). Following the intervention, QUAN + qual data were collected concurrently through the post-test, which was accompanied by open-ended questions regarding the program implementation process and aspects about the program that students liked or disliked. Here, qualitative data collection is signified by lowercase “qual” because the quantitative data were a priority in this phase of the study. A QUAN phase consisting of one follow-up survey administered 3 months after intervention completion preceded the final QUAL phase, during which focus groups with students were conducted. QUAN and QUAL data were interpreted during the final stage of the study. Overall, approximately equal priority was placed on the quantitative and qualitative data collection and interpretation.

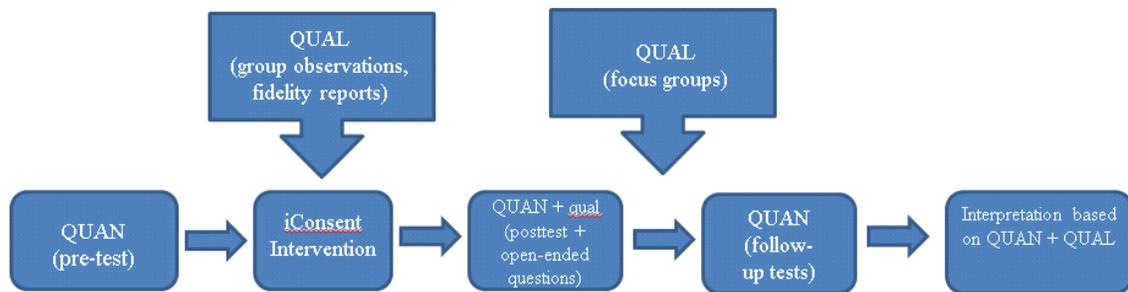


Figure 3.3. Graphic organization of the sequential explanatory research design. Note that uppercase letters symbolize which method attained priority in each phase of the design. Lowercase letters symbolize when the method was incorporated in the design, but not as a priority.

Procedures

All students (i.e., those participating in F-iConsent, E-iConsent, and no-treatment control condition) completed a pretest before program implementation, a post-test the week after participation in the program, and a 3-month follow up. The surveys were anonymous, self-administered, paper-and-pencil surveys delivered during 3 given class periods (one each for pre-test, post-test, and follow-up survey completion). Participants did not provide their name, date of birth, or social security number. Instead, students responded to four items to create a unique identifier to link data from one assessment to another, but did not personally identify students. To create their identifier, students completed four items: “What are the first two letters of your mother’s middle name?”; “What are the last 2 letters of your father’s middle name?”; “How many older siblings do you have?”; and “In what month were you born?”. All participant data are stored on a centrally networked file server and backed up regularly.

The course instructors of the four classes participating in the intervention posted a quiz about information from the program on UGA’s electronic course management system. Students responded to 11 items measuring knowledge gained from the program and two additional open-ended questions requesting qualitative feedback about the program. The responses to the open-ended questions were compiled without any personally identifiable information.

The University of Georgia Institutional Review Board approved all procedures for this study.

As shown in Table 3.1, iConsent was implemented in the Fall semester of 2013, and analysis and dissemination of the results took place in Spring semester of 2014.

Table 3.1. Project Timeline

Activities	July 2013	Aug- Sep 2013	Oct- Nov 2013	Dec 2013	Jan-Feb 2014	Mar- Apr 2014	May 2014
Administrative Activities							
IRB approval	X						
Train research assistant	X						
Recruit classrooms for participation	X	X					
Assessment							
Pre-test		X					
Implement intervention		X					
Post-test		X					
Follow-up				X	X		
Send reminders to complete			X	X	X		
Conduct focus groups				X			
Analyze and interpret data			X	X	X	X	
Fidelity monitoring and group observations		X					
Assessment							
Manuscript preparation and dissemination					X	X	X

Analysis Plan

SPSS for Windows (Version 20.0) was used for data management and statistical analysis. A two-tailed 0.05 significance level was used for all statistical tests. Prior to conducting analyses of specific hypotheses, baseline data were analyzed to ensure adequate psychometric functioning of measurement scales and equivalence of the experimental groups in terms of demographic and risk variables.

Descriptive statistics were calculated using pre-test responses to assess baseline characteristics of the individuals in each condition with respect to demographic variables and sexual experience. One-way analysis of variance (ANOVA) tests were conducted to examine whether any significant differences between groups existed at baseline and found that there was baseline equivalence between groups on all demographic variables.

Analysis of efficacy outcomes (Specific Aim a)

For the primary analysis of efficacy outcomes (*Hypothesis a.i.*), one-way analysis of covariance (ANCOVA) tests were used to examine whether the program was effective in changing awareness of consent, attitudes about rape, belief in women's token refusal of sexual advances, beliefs about alcohol-sex disinhibitions, norms about consent, and perceived behavioral control of all intervention students compared to the control group. Additionally, post-hoc Fisher's least significant difference (LSD) contrast tests was used to examine differences between F-iConsent, E-iConsent, and control conditions to ascertain whether one delivery method was more effective than the other and whether either resulted in outcome scores significantly different from the control. Baseline levels of the outcome variables were included as covariates. Other covariates in these models included sex, age, athletic and Greek-life status (i.e., member or non-member), experience of sexual violence (an index of level of sexual violence victimization with 0=no victimization; 1=unwanted sexual contact; 2=nonconsensual sexual contact; 3=forced sexual contact), dating violence perpetration experience (an index of two items indicating whether the respondent had ever perpetrated psychological or physical violence; 0=never; 1=psychological violence; 2=physical violence or physical + psychological violence), dating violence victimization experience (an index of two items indicating whether the respondent had ever been a victim of psychological or physical violence; 0=never; 1=psychological violence; 2=physical violence or physical + psychological violence), and sexual experience (0=never had oral or vaginal intercourse; 1=had either oral or vaginal intercourse). ANCOVA was used to test for pre- to post-intervention effect as well as sustainability of changes from post-intervention to 3-month

follow-up (i.e., Hypotheses a.ii and a.iii.). These program effects were tested in two separate models. Treatment condition was coded with one variable, Treat (i.e., 1=E-iConsent; 2=F-iConsent; and 3=control). Finally, effect sizes with Cohen's d were calculated using Practical Meta-Analysis Effect Size Calculator (Wilson, 2014).

Analysis of the mediational causal model (Specific Aim b)

Mediation analyses were conducted using ANCOVA to determine the extent to which changes in proximal intervention targets (i.e., awareness of consent, attitudes about rape, belief in women's token refusal of sexual advances, beliefs about alcohol-sex disinhibitions, norms about consent, and perceived behavioral control) mediated intervention effects on changes in behavior.

Qualitative data analysis (Specific Aim c)

The goal of qualitative data analysis is to identify themes and patterns that emerge from open-ended survey questions, focus group transcripts, and group observation memos (used for process evaluation) with regard to the initial research questions. A grounded theory approach involves inquiring about individuals' experiences with a phenomenon or topic (in this case, their participation in the iConsent program), and then identifying common patterns among participants' responses. Interview questions typically focus on the individuals' experiences of the phenomenon and the causal conditions and consequences of the phenomenon (Strauss & Corbin, 2007). For the purpose of this study, the qualitative data were used to generate a theory about whether and how the iConsent program works to create change among participants.

Qualitative data were analyzed with NVivo 10.0 software using grounded theory techniques, such as thematic analysis and the constant comparative method to guide analysis (Richards, 2005; Strauss & Corbin, 2007). This approach involved developing theories about specific phenomena by using a detailed, three-step coding process. First, qualitative data from open-ended survey questions and focus group transcripts were compiled, and open-coding was conducted (i.e., descriptive and topic codes were assigned). Second, axial coding was conducted (i.e., survey responses and transcripts were coded for recurring themes). Last, recurring themes were categorized based on participants' positive and negative evaluations of the program, suggestions for program improvement, and critical program components (Richards, 2005).

Process evaluation (Specific Aim d)

Process evaluation is important for describing the level of program implementation, assuring quality of implementation, and explaining variations in outcomes due to group processes. To evaluate program process, a pre-doctoral research assistant, who is well-trained in qualitative methods and sexual health research, took notes about the program process during F-iConsent program implementation and completed a program fidelity evaluation following the implementation of F-iConsent.

Program fidelity. All program sessions were implemented by Holland. To measure how faithfully the activities were implemented, a research assistant observed each F-iConsent session and completed a program fidelity evaluation (Appendix D). In addition, the research assistant recorded student engagement in activities (e.g., “To what extent were individuals engaged in the program activities?”; “To what extent were

individuals engaged in discussions?”). The observer maintained a record of questions and comments. Students completed the online version of the program at their own pace; however, E-iConsent is dubbed with a voiceover describing the information presented on each slide, thus ensuring fidelity of program administration. For the online version, students completed a quiz at the end of the session to examine the extent to which they understood the material.

Group observation memos. The research assistant recorded group observation memos during the implementation of F-iConsent sessions. Reactions to examples were recorded, along with questions asked during the sessions, student responses, and general information about participant feedback and satisfaction.

Participant satisfaction. Following program implementation, students responded to open-ended questions about their satisfaction with the program (Appendix B).

CHAPTER 4

RESULTS

This chapter is separated into four sections. First, an overview of the study sample is provided, including a comparison of intervention groups at baseline. Second, the unadjusted and adjusted results of the tests of program effectiveness are provided, with descriptions of findings at pre-test and follow-up. Third, qualitative results of open-ended question responses, focus groups, and the process evaluation are provided. Finally, both the quantitative and qualitative are compared.

Comparison of Groups at Baseline

Demographic Characteristics and Dating

Table 4.1 describes the demographic characteristics of the sample at baseline by intervention group. The groups did not differ significantly in any of the demographic variables.

Table 4.2 describes characteristics of dating relationship for participants in each of the intervention groups. Most students (53.7%) reported having had 2 to 3 dating relationships in their lifetime. At baseline, most students were not dating (60.8%); the second most common response was that students had been in a romantic relationship for 6 or more months (28.9%). The majority of participants indicated they had had vaginal intercourse (61.4%) or oral sex (70.5%), and 57% indicated they had had both vaginal intercourse and oral sex. Most participants (74.3%) reported having never or rarely

received sexually charged text or cyber-messages (i.e., “sexts”), and even more (90%) had never or rarely sent such messages.

Table 4.1. Demographic characteristics of participants by intervention group

	E-iC (n=76) %	F-iC (n=100) %	Control (n=72) %	Total Sample (n=248) %
Sex				
Females	76.3	81.0	69.4	76.2
Males	23.7	19.0	30.6	23.8
Year in school				
Freshman	32.9	17.0	29.2	25.4
Sophomore	18.4	4.0	33.3	32.7
Junior	27.6	22.0	27.8	25.4
Senior	21.1	7.9	9.7	16.5
Race				
White	68.9	70.4	66.7	68.9
Black	16.2	10.2	16.7	3.3
Hispanic	6.8	1.0	2.8	3.3
Asian	5.4	15.3	4.2	9.0
Other	2.8	3.0	9.7	4.9
Athletes	19.7	15.0	20.8	19.5
Female athlete	14.9	12.2	13.4	13.4
Male athlete	5.4	4.4	9.0	6.1
Greek life member	25.7	32.6	34.3	30.9
Sorority	23.0	31.4	32.8	29.1
Fraternity	2.7	1.1	1.5	1.7
Living arrangements				
On campus	36.5	27.5	41.8	34.5
Sorority house	5.4	9.9	10.4	8.6
Off campus w/friends	56.8	60.4	44.8	54.7
Off campus w/family	1.4	2.2	3.0	2.2
Mean Age (SD)	19.59 (1.37)	19.41 (2.35)	19.19 (2.41)	19.40 (2.11)

Note: Groups did not differ significantly by demographic characteristics.

Dating Violence and Sexual Violence

Overall, the lifetime prevalence of psychological dating violence victimization was 23.8%, and past year prevalence of physical dating violence victimization was 2.2%. The prevalence of psychological dating violence perpetration was 6.5%, and physical dating violence perpetration was 3.0%. The overall prevalence rate of any sexual violence victimization at baseline was 32.4%, with 58 students (25.1%) reporting they had ever had unwanted sexual contact, 40 (17.3%) stating they had ever had nonconsensual sexual contact, and 16 (7.0%) indicating they had ever experienced forced sexual contact.

Table 4.2. Dating relationship characteristics by intervention group

	E-IC (n=76) %	F-IC (n=100) %	Control (n=72) %	Total Sample (n=248) %
Dating relationships				
Never	10.8	8.8	9.1	9.5
Once	16.2	17.6	13.6	16.0
2-3 times	52.7	48.4	62.1	53.7
4-6 times	18.9	17.6	10.6	16.0
7+ times	1.4	7.7	4.5	4.8
Currently dating				
No	59.5	54.9	70.1	60.8
Less than 1 month	4.1	4.4	1.5	3.4
1-6 months	4.1	11.0	4.5	6.9
6+ months	32.4	29.7	23.9	28.9
Sexual Relationship				
Ever had vaginal intercourse	63.9	62.2	57.6	61.4
Ever had oral sex	73.6	73.0	63.6	70.5
Ever had vaginal OR oral sex	78.1	74.2	68.2	73.7
Received sexual cyber-messages				
Never	32.9	30.0	32.8	31.7
Rarely	35.6	47.8	43.3	42.6
Occasionally	24.7	14.4	19.4	19.1
Often	6.8	7.8	4.5	6.5
Frequently	0	0	0	0
Sent sexual cyber-messages				
Never	56.2	53.3	62.7	57.0
Rarely	32.9	34.4	31.3	33.0
Occasionally	6.8	6.7	4.5	6.1
Often	4.1	4.4	1.5	3.5
Frequently	0	0	0	0

Note: Intervention groups did not differ significantly by dating characteristics.

Table 4.3 describes the prevalence of dating violence and sexual violence experiences among participants in each of the conditions. No significant differences existed between groups at baseline.

Table 4.3. Baseline prevalence of dating violence and sexual violence by intervention group

	E-IC (n=76) %	F-IC (n=100) %	Control (n=72) %	Total Sample (n=248) %
Dating Victimization				
Ever felt scared, put down, or controlled by partner	25.7	22.0	24.2	23.8
Past year: hit, slapped, or physically hurt by partner	2.7	3.3	0.0	2.2
Dating Perpetration				
Ever threatened, put down, or controlled a partner	10.8	4.4	4.5	6.5
Past year: hit, slapped, or physically hurt a partner	4.1	3.3	1.5	3.0
Sexual violence victimization				
Ever had unwanted sexual contact	27.0	29.7	16.7	25.1
Ever had nonconsensual sexual contact	14.9	24.2	10.6	17.3
Ever had forced sexual contact	11.0	5.5	4.5	7.0

Note: Intervention groups did not differ significantly by dating violence or sexual violence.

Effectiveness of the iConsent Program

Unadjusted Results of the iConsent Program Evaluation

Within-Group Unadjusted Results

Table 4.4 compares unadjusted outcome means and standard deviations across time points for each intervention group. Unadjusted means for each of the outcomes were also graphed across all three survey time points and are presented in Figure 4.4.

One-sample t-tests were conducted to examine whether means at post-test were significantly different from baseline means for each intervention group.

Awareness of consent. At post-test, unadjusted means increased significantly only for F-iConsent participants at post-test ($t(94)=3.115, p=.002$). At follow-up, all groups mean scores significantly increased from baseline (E-iConsent: $t(60)=3.012, p=.004$; F-iConsent: $t(83)=2.721, p=.008$); control: $t(68)=2.021, p=.047$). The increase was more pronounced for E-iConsent and F-iConsent participants than for control participants.

Attitudes accepting of rape myths. At post-test, a significant decrease was found only for control group participants, $t(63)=-2.233, p=.029$. At follow-up, no significant differences were observed.

Beliefs in women's token refusal of sexual advances. At post-test, all groups demonstrated a significant decrease in unadjusted means in their beliefs in women's token refusal of sexual advances items (e.g., "Girls say no when they really mean yes."). The F-iConsent group demonstrated the most pronounced decrease ($t(95)=-4.470, p<.001$) compared to E-iConsent and control groups ($t(67)=-2.546, p=.013$ and $t(63)=-2.356, p=.022$, respectively). At follow-up, these effects were maintained only for F-iConsent ($t(86)=-4.431, p<.001$) and control groups ($t(68)=-3.736, p<.001$), with the effect among control group participants becoming more pronounced over time.

Beliefs in alcohol-sex disinhibitions. At post-test, F-iConsent participants were significantly more likely to agree with beliefs in alcohol-sex disinhibitions (e.g., "After a few drinks of alcohol, I am more likely to have sex on the first date"; $t(94)=2.45,$

$p=.016$), indicating a trend in the opposite direction than expected. At follow-up, no significant differences were observed.

Norms about consent. At post-test, participants' level of agreement with negative norms about consent significantly decreased in both E-iConsent and F-iConsent groups ($t(67)=-2.804, p=.007$ and $t(95)=-2.269, p=.026$, respectively), but not in the control group. At follow-up, the decrease was maintained only for F-iConsent participants at the 3-month follow-up ($t(83)=-2.885, p=.005$).

Perceived behavioral control over consent. At post-test, no significant differences between unadjusted baseline and post-test means existed for students' perceived behavioral control over consent. Again, at follow-up, no significant differences existed for this outcome.

Indirect behavioral approach to consent. At post-test, F-iConsent and control participants' level of agreement with the indirect behavioral approach to consent outcome (e.g., use of nonverbal cues to obtain consent) decreased significantly (F-iConsent: $t(94)=-4.837, p<.001$; Control: $t(62)=-2.992, p=.004$). Additionally, the decrease for E-iConsent participants was marginally significant at $t(66)=-1.951, p=.055$. At follow-up, all three groups had significantly lower scores on the indirect behavioral approach to consent outcome (E-iConsent: $t(59)=-2.586, p=.012$; F-iConsent: $t(84)=-4.219, p<.001$; control: $t(68)=-4.030, p<.001$).

Table 4.4. Comparison of within group unadjusted outcome means (SD) across time points (N=248)

Outcome	Pre-test Mean (SD)	Post-test Mean (SD)	Follow-up Mean (SD)	Post vs. Pre <i>p</i> -value	FU vs Pre <i>p</i> -value
Awareness of Consent					
E-IC	2.89 (0.87)	3.04 (0.77)	3.18 (0.74)	.106	.004
F-IC	2.98 (0.96)	3.23 (0.80)	3.21 (0.81)	.002	.008
Control	3.03 (0.87)	2.94 (0.88)	3.22 (0.79)	.402	.047
Attitudes Accepting of Rape Myths					
E-IC	1.84 (0.61)	1.72 (0.60)	1.83 (0.66)	.101	.912
F-IC	1.87 (0.52)	1.84 (0.59)	1.81 (0.51)	.700	.268
Control	1.97 (0.60)	1.81 (0.59)	1.83 (0.63)	.029	.080
Belief in Women's Token Refusal					
E-IC	2.63 (0.81)	2.40 (0.73)	2.28 (0.69)	.013	.359
F-IC	2.61 (0.79)	2.27 (0.75)	2.28 (0.69)	<.001	<.001
Control	2.54 (0.83)	2.32 (0.73)	2.21 (0.73)	.022	<.001
Belief in Alcohol-Sex Disinhibitions					
E-IC	2.12 (1.04)	2.08 (0.96)	2.19 (1.03)	.740	.600
F-IC	2.14 (0.95)	2.39 (0.98)	2.17 (1.00)	.016	.790
Control	2.30 (1.04)	2.25 (1.10)	2.20 (1.07)	.740	.440
Norms about Consent					
E-IC	3.27 (0.51)	3.06 (0.61)	3.14 (0.66)	.007	.124
F-IC	3.35 (0.60)	3.15 (0.88)	3.16 (0.61)	.026	.005
Control	3.29 (0.58)	3.26 (0.67)	3.29 (0.61)	.760	.953
Perceived Behavioral Control					
E-IC	2.12 (0.67)	2.13 (0.73)	2.18 (0.60)	.936	.454
F-IC	2.10 (0.63)	2.14 (0.63)	2.10 (0.62)	.581	.984
Control	2.25 (0.77)	2.14 (0.73)	2.10 (0.72)	.253	.090
Indirect Behavioral Approach to Consent					
E-IC	3.40 (0.72)	3.16 (1.00)	3.13 (0.79)	.055	.012
F-IC	3.53 (0.72)	3.14 (0.77)	3.18 (0.76)	<.001	<.001
Control	3.38 (0.66)	3.07 (0.82)	2.98 (0.82)	.004	<.001

Bold, black: significant differences indicating improvements in the construct. **Bold, Red:** changes in the opposite direction.

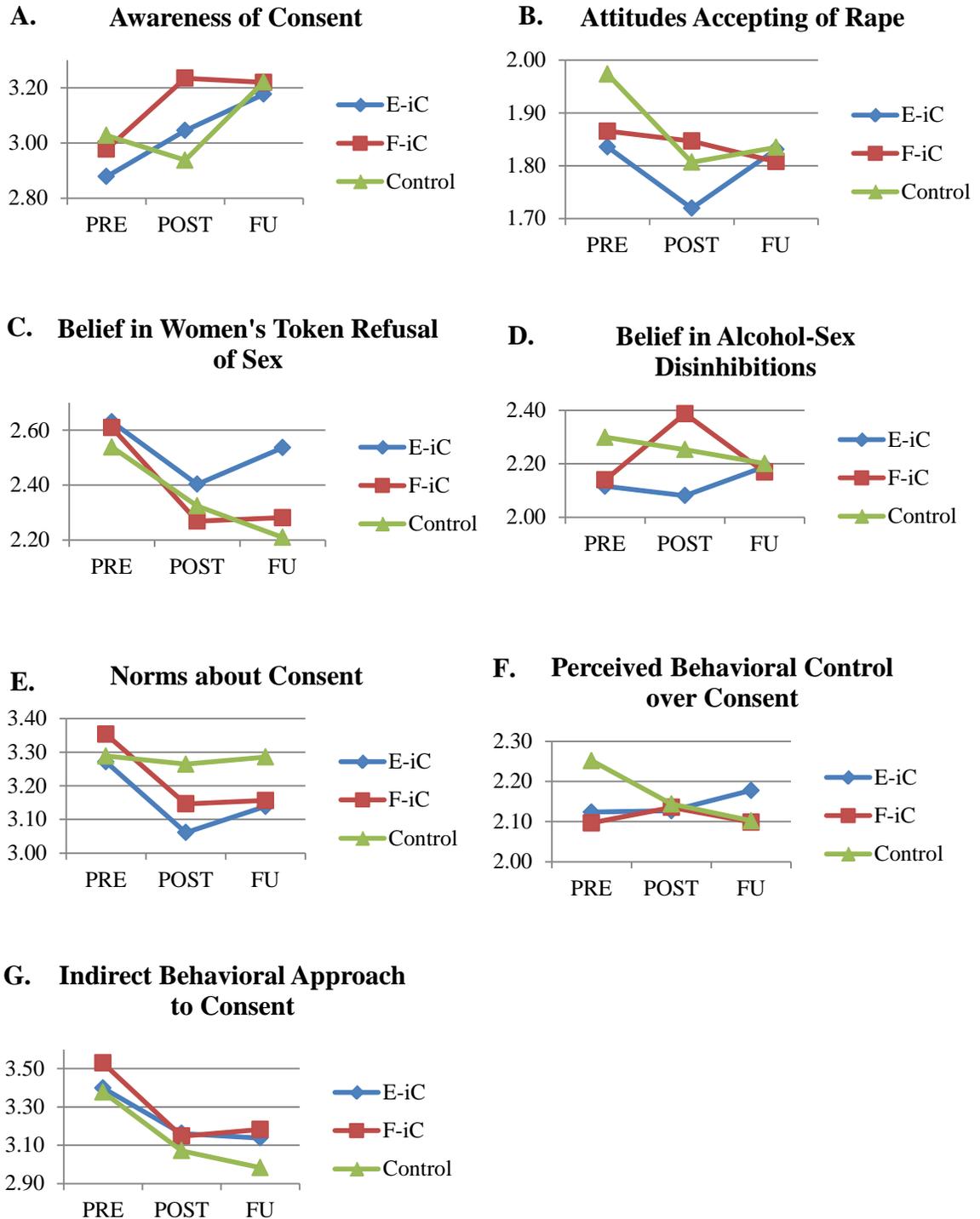


Figure 4.1. A-G. Unadjusted means for outcome scales across time points. Note: It was hypothesized that means for all scales (except Awareness of Consent) would decrease as an effect of the E-iC and F-iC interventions. Figure 4.1.A. Awareness of Consent means were expected to increase over time as a result of the intervention.

Within Group Differences by Sex

Table 4.5 illustrates that significant differences existed between E-iConsent and control group men's and women's mean scores at pre-, post-, and follow-up for the attitudes accepting of rape myths scale (all at $p < .001$ level), with men's attitudes being more accepting of rape myths than women's. Additionally, men scored significantly higher on the beliefs in women's token refusal of sexual advances scale at follow-up ($p = .009$) than women, but not at other time points, indicating that at follow-up, men were more apt than women to agree with statements such as "Girls generally want to be talked into having sex."

Additionally, F-iConsent men scored significantly lower than women at both pre-test ($p = .028$) and post-test ($< .001$) for the norms about consent scale, indicating that men agreed less with statements such as "I think that obtaining consent is more necessary in a new relationship than in a committed one."

E-iConsent men's mean scores were also significantly higher than women's for perceived behavioral control over consent ($p = .009$) suggesting that men have less perceived control over the consent process than women.

F-iConsent group men's and women's mean scores differed significantly at post-test for indirect behavioral approach to consent scores ($p = .002$), suggesting that women use an indirect approach (e.g., nonverbal cues) to give or obtain consent more than men.

For control group participants, there were differences between men's and women's mean scores for the following scales: attitudes accepting of rape myths at pre-test ($p < .001$), post-test ($p < .001$), and follow-up ($p < .001$), belief in women's token refusal of sexual advances at pre-test only ($p = .005$), and norms about consent at pre-test

($p=.002$),

Given the differences between the way women and men responded to these items, one-sample t-tests were conducted to examine differences in unadjusted means across time points for women and men separately (Tables 4.6 and 4.7, respectively).

Table 4.6 illustrates while awareness increased significantly only for female F-iConsent participants from pre- to post-test ($t(78)=2.811, p=.006$), it increased for females in all three groups at follow-up (E-iConsent: ($t(48)=2.813, p=.007, p<.001$; F-iConsent: ($t(68)=2.471, p=.016$; control $t(47)=2.348, p=.023$). Additionally, the only significant decrease in rape supportive attitudes was for women in the control group from pre-test to follow-up ($t(47)=-2.292, p=.026$). Women in the F-iConsent group agreed significantly less with token refusal scale items at post-test ($t(78)=-4.301, p<.001$) and follow-up ($t(70)=-4.759, p<.001$) than at pre-test. The same was true for women in the control group, but only at follow-up ($t(47)=-2.176, p=.035$). Additionally, contrary to expectations, results demonstrate that belief in alcohol-sex disinhibitions significantly increased among female F-iConsent participants at post-test ($t(77)=2.688, p=.009$), but this effect was not sustained at follow-up.

Women in the E-iConsent group agreed with negative norms about sexual consent significantly less at post-test than pre-test ($t(49)=-2.205, p=.032$, but this effect was not sustained at follow-up. Women in the F-iConsent group reported significantly less agreement with negative norms about sexual consent only at follow-up ($t(68)=-3.260, p=.002$). Women in the control group did not experience any significant change for this outcome.

No significant differences existed for women in any of the groups from pre- to post-test or follow-up for the perceived behavioral control over consent measure. However, women in both the F-iConsent and control groups used an indirect behavioral approach to consent significantly less at post-test than pretest (F-iConsent: $t(77)=-3.657$, $p<.001$; control: $t(45)=-2.137$, $p=.038$), and this effect was sustained at 3-month follow-up ($t(68)=-3.283$, $p=.002$; control: $t(47)=-3.075$, $p=.004$). Women in the E-iConsent group did not experience a significant decrease in their indirect consent behaviors from pre- to post-test, but did from pre- to follow-up ($t(47)=-2.286$, $p=.027$).

Table 4.7 demonstrates that men in both the E-iConsent and control groups experienced a significant decrease in their beliefs of women's token refusal of sexual advances from pre-test to post-test ($t(17)=-2.521$, $p=.022$ and $t(16)=-2.544$, $p=.022$, respectively), but this effect was maintained only by men in the control group ($t(20)=-3.294$, $p=.004$). Additionally, the level of agreement with negative norms about consent decreased significantly for men in the F-iConsent group from pre-test to post-test ($t(16)=-3.748$, $p=.002$), but rebounded at follow-up. Conversely, men in the control group did not have significantly lower mean scores on the norms about consent scale at post-test, but did at follow-up ($t(20)=-2.448$, $p=.024$).

Men in the E-iConsent group had significantly higher scores on the perceived behavioral control over consent scale at follow-up than at pre-test ($t(11)=2.383$, $p=.036$), but no other groups' responses to this scale differed significantly over time.

Finally, indirect consent behaviors decreased significantly for men in the F-iConsent and control groups from pre-test to post-test and follow-up (F-iConsent: $t(16)=-$

4.043, $p < .001$; $t(15) = -3.494$, $p = .003$); control: $t(16) = -2.625$, $p = .018$; $t(20) = -2.972$,
 $p = .008$, respectively).

Table 4.5. Differences in unadjusted means (SD) for outcomes between sexes within intervention groups

Outcome	E-IC			F-IC			Control		
	Males	Females	p-value	Males	Females	p-value	Males	Females	p-value
Awareness of Consent									
Pre	2.85 (.67)	2.89 (.93)	.892	3.04 (.75)	2.96 (1.01)	.753	3.05 (.68)	3.02 (.94)	.891
Post	2.93 (.60)	3.09 (.83)	.468	3.31 (.70)	3.22 (.82)	.668	2.71 (.83)	3.02 (.89)	.206
FU	3.02 (.36)	3.21 (.81)	.423	3.25 (.59)	3.21 (.85)	.872	3.08 (.79)	3.28 (.78)	.312
Attitudes Accepting of Rape									
Pre	2.26 (.59)	1.71 (.57)	.001	2.08 (.67)	1.81 (.47)	.054	2.43 (.64)	1.78 (.48)	<.001
Post	2.14 (.65)	1.57 (.50)	<.001	2.01 (.77)	1.81 (.55)	.226	2.23 (.73)	1.66 (.44)	<.001
FU	2.49 (.65)	1.67 (.56)	<.001	2.13 (.50)	1.74 (.49)	.007	2.29 (.77)	1.64 (.44)	<.001
Beliefs in Women's Token Refusal									
Pre	2.96 (.57)	2.53 (.85)	.058	2.38 (.70)	2.66 (.81)	.182	2.96 (.93)	2.36 (.72)	.005
Post	2.49 (.80)	2.37 (.72)	.580	2.06 (.88)	2.31 (.71)	.202	2.44 (.84)	2.28 (.69)	.447
FU	2.96 (.72)	2.43 (.79)	.040	2.34 (.69)	2.27 (.69)	.693	3.36 (.84)	2.15 (.68)	.274
Beliefs in Alcohol-Sex Disinhibition									
Pre	2.42 (1.04)	2.02 (1.03)	.165	2.25 (1.05)	2.11 (.94)	.609	2.45 (1.15)	2.24 (.99)	.442
Post	2.39 (1.00)	1.97 (.94)	.114	2.33 (1.15)	2.40 (.95)	.790	2.35 (1.15)	2.22 (1.10)	.667
FU	2.70 (1.19)	2.06 (.96)	.056	2.28 (1.33)	2.15 (.93)	.643	2.31 (1.04)	2.15 (1.09)	.588
Norms about Consent									
Pre	3.40 (.46)	3.23 (.53)	.229	3.07 (.75)	3.42 (.55)	.028	3.63 (.38)	3.14 (.60)	.002
Post	3.13 (.59)	3.03 (.63)	.556	2.49 (.64)	3.29 (.86)	<.001	3.44 (.52)	3.20 (.72)	.220
FU	3.12 (.51)	3.14 (.70)	.909	3.07 (.59)	3.18 (.62)	.536	3.33 (.57)	3.27 (.63)	.714
Perceived Behavioral Control over Consent									
Pre	2.24 (.50)	2.09 (.71)	.436	2.42 (.85)	2.02 (.55)	.019	2.47 (.84)	2.16 (.73)	.125
Post	2.27 (.45)	2.08 (.80)	.336	2.10 (.73)	2.14 (.61)	.774	2.34 (.67)	2.07 (.75)	.206
FU	2.57 (.48)	2.08 (.59)	.009	2.27 (.65)	2.06 (.61)	.214	2.40 (.74)	1.97 (.67)	.019
Indirect Behavioral Approach to Consent									
Pre	3.45 (.57)	3.38 (.76)	.732	3.40 (.79)	3.56 (.71)	.418	3.53 (.42)	3.31 (.74)	.205
Post	3.23 (.71)	3.14 (1.09)	.732	2.64 (.78)	3.26 (.73)	.002	3.20 (.52)	3.02 (.91)	.466
FU	3.26 (.59)	3.11 (.83)	.538	2.89 (.59)	3.25 (.78)	.084	3.14 (.60)	2.91 (.90)	.285

Bold, black: significant differences indicating improvements in the construct. **Bold, Red:** changes in the opposite direction.

Table 4.6. Comparison of within group unadjusted means from pre- to post-test and pre- to follow-up test across intervention groups—Females

Outcome	Pre-test Mean (SD)	Post-test Mean (SD)	Follow-up Mean (SD)	Post vs. Pre <i>p</i> -value	FU vs Pre <i>p</i> -value
Awareness of Consent					
E-IC	2.89 (.93)	3.09 (.83)	3.21 (.81)	.104	.007
F-IC	2.93 (1.01)	3.22 (.82)	3.21 (.85)	.006	.016
Control	3.02 (.94)	3.02 (.89)	3.28 (.78)	.992	.023
Attitudes Accepting of Rape Myths					
E-IC	1.71 (.57)	1.57 (.50)	1.67 (.56)	.053	.604
F-IC	1.81 (.47)	1.81 (.55)	1.74 (.49)	.956	.227
Control	1.78 (.48)	1.66 (.44)	1.64 (.44)	.059	.026
Belief in Women's Token Refusal					
E-IC	2.53 (.85)	2.37 (.72)	2.43 (.79)	.129	.398
F-IC	2.66 (.81)	2.31 (.71)	2.27 (.69)	<.001	<.001
Control	2.36 (.72)	2.28 (.69)	2.15 (.68)	.445	.035
Belief in Alcohol-Sex Disinhibitions					
E-IC	2.02 (1.03)	1.97 (.94)	2.06 (.96)	.696	.680
F-IC	2.11 (.94)	2.40 (.95)	2.15 (.93)	.009	.753
Control	2.24 (.99)	2.22 (1.10)	2.15 (1.09)	.886	.587
Norms about Consent					
E-IC	3.23 (.53)	3.03 (.63)	3.14 (.70)	.032	.386
F-IC	3.42 (.55)	3.29 (.86)	3.18 (.62)	.178	.002
Control	3.14 (.60)	3.20 (.72)	3.27 (.63)	.558	.163
Perceived Behavioral Control over Consent					
E-IC	2.09 (.71)	2.08 (.80)	2.08 (.59)	.900	.914
F-IC	2.02 (.55)	2.14 (.61)	2.06 (.61)	.073	.599
Control	2.16 (.73)	2.07 (.75)	1.97 (.67)	.434	.055
Indirect Behavioral Approach to Consent					
E-IC	3.38 (.76)	3.14 (1.09)	3.11 (.83)	.124	.027
F-IC	3.56 (.71)	3.26 (.73)	3.25 (.78)	<.001	.002
Control	3.31 (.74)	3.02 (.91)	2.91 (.90)	.038	.004

Bold, black: significant differences indicating improvements in the construct. **Bold, Red:** changes in the opposite direction.

Table 4.7. Comparison of within group unadjusted means from pre- to post-test and pre- to follow-up test across intervention groups—Males

Outcome	Pre-test Mean (SD)	Post-test Mean (SD)	Follow-up Mean (SD)	Post vs. Pre <i>p</i> -value	FU vs Pre <i>p</i> -value
Awareness of Consent					
E-IC	2.85 (.67)	2.93 (.60)	3.02 (.36)	.576	.129
F-IC	3.04 (.75)	3.31 (.70)	3.25 (.59)	.139	.190
Control	3.05 (.68)	2.71 (.83)	3.08 (.79)	.105	.885
Attitudes Accepting of Rape Myths					
E-IC	2.26 (.59)	2.14 (.65)	2.49 (.65)	.439	.238
F-IC	2.08 (.67)	2.01 (.77)	2.13 (.50)	.721	.719
Control	2.43 (.64)	2.23 (.73)	2.29 (.77)	.265	.415
Belief in Women's Token Refusal					
E-IC	2.96 (.57)	2.49 (.80)	2.96 (.72)	.022	.994
F-IC	2.38 (.70)	2.06 (.88)	2.34 (.69)	.151	.837
Control	2.96 (.93)	2.44 (.84)	3.36 (.84)	.022	.004
Belief in Alcohol-Sex Disinhibitions					
E-IC	2.42 (1.04)	2.39 (1.00)	2.70 (1.19)	.896	.433
F-IC	2.25 (1.05)	2.33 (1.15)	2.28 (1.33)	.779	.941
Control	2.45 (1.15)	2.35 (1.15)	2.31 (1.04)	.733	.538
Norms about Consent					
E-IC	3.40 (.46)	3.13 (.59)	3.12 (.51)	.073	.080
F-IC	3.07 (.75)	2.49 (.64)	3.07 (.59)	.002	.983
Control	3.63 (.38)	3.44 (.52)	3.33 (.57)	.146	.024
Perceived Behavioral Control					
E-IC	2.24 (.50)	2.27 (.45)	2.57 (.48)	.783	.036
F-IC	2.42 (.85)	2.10 (.73)	2.27 (.65)	.086	.380
Control	2.47 (.84)	2.34 (.67)	2.40 (.74)	.431	.690
Indirect Behavioral Approach to Consent					
E-IC	3.45 (.57)	3.23 (.71)	3.26 (.59)	.212	.296
F-IC	3.40 (.79)	2.64 (.78)	2.89 (.59)	<.001	.003
Control	3.53 (.42)	3.20 (.52)	3.14 (.60)	.018	.008

Bold, black: significant differences indicating improvements in the construct. **Bold, Red:** changes in the opposite direction.

Adjusted Results of the iConsent Evaluation

The overall effectiveness of iConsent on changing students' awareness of consent, attitudes and norms supportive of sexual violence, beliefs about women's token refusal of sexual advances and alcohol-sex disinhibitions, perceived behavioral control over consent, and behavioral approach to consent was estimated with ANCOVA. Prior to conducting ANCOVA models, bivariate correlations were conducted. Covariates included baseline scores for each outcome modeled and correlated or theoretically associated demographic and mediational variables (e.g., sex, year in school, dating history, dating violence and sexual violence histories, and sexual experience). ANCOVA results comparing post-test and follow-up means to pre-test means for the three experimental groups are in Tables 4.8 to 4.10.

Between-Groups Adjusted Pre-test to Post-test Results

Table 4.8 describes the overall effect of treatment on each of the study outcomes, and Table 4.9 provides the ANCOVA post-hoc test results comparing each of the three intervention group means. The iConsent program increased awareness of consent at post-test, $F(2, 187)=3.654, p=.028$. Awareness significantly increased in F-iConsent participants ($M_{adj}=3.258$) compared to the control participants ($M_{adj}=2.988; p=.031$), but not E-iConsent participants ($M_{adj}=3.076$; Table 4.9). Cohen's d effect size for sexual consent awareness was .345 at post-test.

The effect of treatment on attitudes accepting of rape myths was significant at post-test, $F(2, 189)=4.545, p=.012$. E-iConsent participants ($M_{adj}=1.699$) had significantly lower scores at post-test on the attitudes accepting of rape myths outcome

than F-iConsent participants ($M_{adj}=1.881$). The Cohen's d effect size for this estimate was $-.24$.

The overall effect of treatment on intervention participants' beliefs in alcohol-sex disinhibition outcome was significant, $F(2, 189) = 3.943$, $p = .021$. Cohen's d effect size for alcohol-sex disinhibition at post-test was $.46$. Sidak post-hoc tests indicate that students who participated in E-iConsent ($M_{adj} = 2.099$) had significantly lower scores on the alcohol-sex disinhibition scale than students who participated in F-iConsent ($M_{adj}=2.362$, $p=.019$). Neither students who participated in E-iConsent or F-iConsent had significantly different scores than those who participated in the control group ($M_{adj}=2.296$) for their beliefs in alcohol-sex disinhibitions. In other words, students who participated in E-iConsent agreed less than their F-iConsent counterparts with statements such as "After a few drinks of alcohol, I am more likely to have sex on the first date." However, there were no statistically significant differences in the way that E-iConsent or F-iConsent and control students responded to these items.

After controlling for sex, age, athletic and Greek life status, sexual experience, dating violence victimization and perpetration, and sexual violence victimization, no statistically significant differences existed for norms about consent, belief in women's token refusal of sexual advances outcomes, perceived behavioral control over consent, or indirect consent behaviors consent.

Table 4.8. Univariate ANCOVA models testing the overall effect of intervention group at post-test

Outcome	Sum of Squares	df	Mean Square	F-value	p-value
Awareness of Consent	2.522	2	1.261	3.654	.028
Attitudes Accepting of Rape Myths	1.189	2	.595	4.545	.012
Belief in Women's Token Refusal	1.461	2	.731	2.61	.076
Belief in Alcohol-Sex Disinhibitions	2.507	2	1.253	3.943	.021
Norms about Consent	1.954	2	.977	2.225	.111
Perceived Behavioral Control over Consent	.531	2	.266	1.072	.344
Indirect Behavioral Approach to Consent	.583	2	.291	.635	.531

^a ANCOVA model included the covariates sex, year in school, athletic and Greek-life status, sexual experience, sexual violence victimization experience, dating violence victimization and perpetration experience.

Table 4.9. Sidak post-hoc comparisons of means between groups at post-test

Outcome	Comparisons	Mean Difference	Std. Error	Lower Bound	Upper Bound	p-value
Awareness of Consent						
	E-iC to F-iC	-.182	.100	-.423	.059	.197
	E-iC to Control	.088	.110	-.176	.352	.809
	F-iC to Control	.270	.104	.018	.522	.031
Attitudes Accepting of Rape Myths						
	E-iC to F-iC	-.183	.061	-.330	-.035	.010
	E-iC to Control	-.076	.067	-.238	.086	.592
	F-iC to Control	.106	.064	-.048	.261	.269
Belief in Women's Token Refusal						
	E-iC to F-iC	.072	.089	-.142	.285	.806
	E-iC to Control	-.142	.099	-.380	.097	.395
	F-iC to Control	-.213	.094	-.438	.012	.069
Belief in Alcohol-Sex Disinhibitions						
	E-iC to F-iC	-.262	.095	-.491	-.033	.019
	E-iC to Control	-.196	.105	-.450	.057	.180
	F-iC to Control	.066	.100	-.174	.306	.881
Norms about Consent						
	E-iC to F-iC	-.066	.111	-.334	.202	.912
	E-iC to Control	-.252	.123	-.548	.045	.121
	F-iC to Control	-.186	.117	-.468	.096	.305
Perceived Behavioral Control over Consent						
	E-iC to F-iC	-.099	.083	-.300	.102	.554
	E-iC to Control	.012	.092	-.210	.235	.999
	F-iC to Control	.112	.088	-.099	.323	.497
Indirect Behavioral Approach to Consent						
	E-iC to F-iC	.125	.115	-.152	.402	.624
	E-iC to Control	.037	.127	-.270	.344	.988
	F-iC to Control	-.088	.121	-.380	.204	.851

^a ANCOVA model included the covariates sex, year in school, athletic and Greek-life status, sexual experience, sexual violence victimization experience, dating violence victimization and perpetration experience.

^b Negative values for mean difference denote decreases in the intervention group; all of which are in the anticipated direction based on the way each variable (except for awareness of consent) was scored (e.g., lower scores demonstrate more prosocial attitudes/norms). Awareness of consent was expected to increase over time as a result of the intervention.

Between-Groups Adjusted Pre-test to Follow-up Test results

While the iConsent program was effective either through the in-person or online version at increasing awareness of consent and decreasing attitudes accepting of rape

myths, and beliefs about alcohol-sex disinhibitions, these effects were not sustained at follow-up. In fact, Table 4.10 demonstrates that the only statistically significant treatment effect observed three months after iConsent implementation was a decrease in belief in women’s token refusal of sexual advances, $F(2, 187)=2.151, p=.026$; however, the treatment effect was in the opposite direction than anticipated. Sidak post-hoc tests demonstrated that E-iConsent participants scored significantly higher ($M_{adj}=2.488$) on the token refusal scale at follow-up than control group participants ($M_{adj}=2.215; p=.024$).

No statistically significant differences were exhibited between any of the groups at follow-up for the negative norms about sexual consent, the perceived behavioral control over consent outcomes, nor the indirect behavioral approach to obtaining consent.

Table 4.10. Univariate ANCOVA models testing the overall effect of intervention group at follow-up

Outcome	Sum of Squares	df	Mean Square	F-value	p-value
Awareness of Consent	.378	2	.189	.459	.663
Attitudes Accepting of Rape Myths	.519	2	.259	1.873	.157
Belief in Women’s Token Refusal	2.151	2	1.076	3.709	.026
Belief in Alcohol-Sex Disinhibitions	.164	2	.082	.146	.865
Norms about Consent	.841	2	.420	1.638	.197
Perceived Behavioral Control over Consent	.923	2	.461	1.832	.163
Indirect Behavioral Approach to Consent	.391	2	.195	.524	.593

^a ANCOVA model included the covariates sex, year in school, athletic and Greek-life status, sexual experience, sexual violence victimization experience, dating violence victimization and perpetration experience.

Differences in Adjusted Results by Sex

Results demonstrated that the program affected women and men differently. Thus, ANCOVA models were conducted to examine the effect of treatment between

groups on women and men separately. Sex was removed from these models as a covariate.

Women, Post-test. For women, the effect of treatment at post-test was significant for four outcomes (Table 4.11). First, women’s attitudes accepting of rape myths were significantly lower in the E-iConsent group ($M_{adj}=1.592$) than the F-iConsent ($M_{adj}=1.805$), $F(2,145)=5.975$, $p=.003$. Second, beliefs in women’s token refusal of sexual advances were significantly lower in the F-iConsent group ($M_{adj}=2.216$) than women in the control group ($M_{adj}=2.484$), $F(2,146)=3.321$, $p=.039$. Third, women’s beliefs in alcohol-sex disinhibitions were significantly lower in the E-iConsent group ($M_{adj}=2.053$) than in F-iConsent ($M_{adj}=2.376$), $F(2,144)=4.753$, $p=.01$. Fourth, perceived behavioral control over consent was significantly lower in E-iConsent ($M_{adj}=2.017$) than in F-iConsent ($M_{adj}=2.228$), $F(2,146)=3.108$, $p=.048$.

Women, follow-up. No statistically significant results were found for women at follow-up.

Table 4.11. Univariate ANCOVA models testing the overall effect of intervention group—Post-test, Females

Outcome	Sum of Squares	df	Mean Square	F-value	p-value
Awareness of Consent	.793	2	.396	1.152	.319
Attitudes Accepting of Rape Myths	1.295	2	.648	5.975	.003
Belief in Women’s Token Refusal	1.733	2	.866	3.321	.039
Belief in Alcohol-Sex Disinhibitions	2.941	2	1.470	4.753	.010
Norms about Consent	1.654	2	.827	1.733	.180
Perceived Behavioral Control-Consent	1.580	2	.790	3.108	.048
Indirect Behavioral Approach to Consent	.229	2	.114	.255	.775

^a ANCOVA model included the covariates year in school, athletic and Greek-life status, sexual experience, sexual violence victimization experience, dating violence victimization and perpetration experience.

Men, Post-test. For men, the effect of treatment at post-test was significant for three outcomes (Table 4.12). First, men’s awareness of consent was significantly higher in the F-iConsent group ($M_{adj}=3.396$) than the Control group ($M_{adj}=2.722$), $F(2, 34)=3.840$, $p=.031$. Second, norms about consent were significantly lower in the F-iConsent group ($M_{adj}=2.683$) than the control group ($M_{adj}=3.383$), $F(2, 35)=4.928$, $p=.013$. Third, while indirect consent behaviors were significantly higher in the E-iConsent group ($M_{adj}=3.095$) than in F-iConsent ($M_{adj}=2.510$), men in the F-iConsent group had significantly lower scores than those in the control group ($M_{adj}=3.272$), $F(2, 35)=5.845$, $p=.006$.

Men, Follow-up. For men, the effect of treatment at follow-up was significant for one outcome (Table 4.13). Men’s indirect behavioral approach to consent was significantly lower in F-iConsent ($M_{adj}=2.752$) than in E-iConsent ($M_{adj}=3.458$, $p=.009$), $F(2, 33)=5.206$, $p=.011$.

Table 4.12. Univariate ANCOVA models testing the overall effect of intervention group —Post-test, Males

Outcome	Sum of Squares	df	Mean Square	F-value	p-value
Awareness of Consent	2.723	2	1.362	3.840	.031
Attitudes Accepting of Rape Myths	.041	2	.020	.093	.911
Belief in Women’s Token Refusal	.148	2	.074	.206	.815
Belief in Alcohol-Sex Disinhibitions	1.384	2	.692	2.585	.090
Norms about Consent	2.637	2	1.318	4.928	.013
Perceived Behavioral Control over Consent	.822	2	.411	1.895	.165
Indirect Behavioral Approach to Consent	4.204	2	2.102	5.845	.006

Bold, black: significant differences indicating improvements in the construct.

^a ANCOVA model included the covariates year in school, athletic and Greek-life status, sexual experience, sexual violence victimization experience, dating violence victimization and perpetration experience.

Table 4.13. Univariate ANCOVA models testing the overall effect of intervention group —Follow-up, Males

Outcome	Sum of Squares	df	Mean Square	F-value	p-value
Awareness of Consent	.507	2	.253	.894	.419
Attitudes Accepting of Rape Myths	1.114	2	.557	2.529	.096
Belief in Women’s Token Refusal	2.448	2	1.224	2.915	.068
Belief in Alcohol-Sex Disinhibitions	2.438	2	1.219	1.677	.202
Norms about Consent	.272	2	.136	.486	.620
Perceived Behavioral Control-Consent	1.494	2	.747	2.378	.108
Indirect Behavioral Approach to Consent	2.501	2	1.250	5.206	.011

Bold, black: significant differences indicating improvements in the construct.

^a ANCOVA model included the covariates year in school, athletic and Greek-life status, sexual experience, sexual violence victimization experience, dating violence victimization and perpetration experience.

Differences in Adjusted Results for Selected Subgroups

Differences between Groups by Athlete Status

Athletes, Post-test. While sample sizes for athletes were small across groups, significant treatment effects were still detected at post-test for one outcome (E-iConsent $n=12$, F-iConsent $n=12$, Control $n=11$). Athletes in the E-iConsent group ($M_{adj}=1.741$) reported significantly lower agreement with alcohol-sex disinhibitions than those in the control group ($M_{adj}=2.399$), $F(2, 23)=5.283$, $p=.013$.

Athletes, Follow-up. No significant effects between groups of athletes were found at follow-up.

Non-athletes, Post-test. For non-athletes at post-test, E-iConsent participants ($M_{adj}=1.671$) reported significantly lower levels of agreement with attitudes accepting of rape myths than their non-athlete F-iConsent counterparts ($M_{adj}=1.842$), $F(2, 157)=3.689$, $p=.027$.

Non-athletes, Follow-up. Only one significant treatment effect was observed for non-athletes at follow-up. Contrary to expectations, non-athletes' beliefs in women's token refusal of sexual advances were significantly higher in E-iConsent ($M_{adj}=2.457$) than in the control group ($M_{adj}=2.095$), $F(2, 148)=5.202, p=.007$. The unadjusted means for athletes vs. non-athletes for the outcomes that underwent significant changes are presented in Figure 4.2.

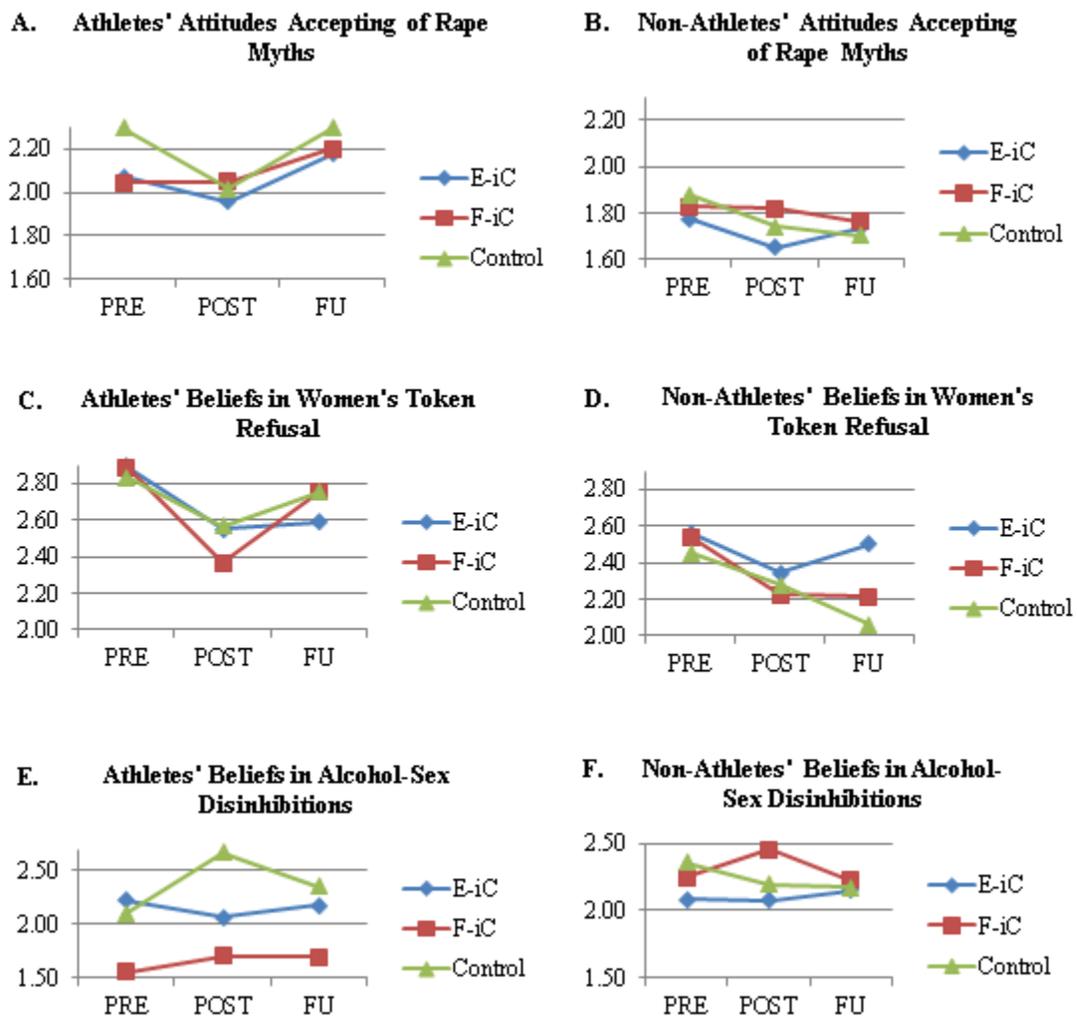


Figure 4.2. Athletes and non-athletes' unadjusted means graphed at pre-test, post-test, and follow-up

Differences between Groups by Greek Status

Greek members, Post-test. No significant treatment effects were found for Greek-life members (i.e., sorority or fraternity members) at post-test. While the sample sizes for this group were small (E-iConsent $n=17$, F-iConsent $n=27$, Control $n=20$), at post-test, the treatment effect on negative norms about consent approached significance at $p=.072$, but was not significant.

Greek members, Follow-up. At follow-up (E-iConsent $n=16$, F-iConsent $n=25$, Control $n=21$), the effect on negative norms about consent became more pronounced, as Greek life members in the E-iConsent group ($M_{adj}=3.109$) reported significantly lower levels of agreement with negative norms about consent than Greek members in the control group ($M_{adj}=3.538$), $F(2, 50)=3.997$, $p=.025$. While F-iConsent Greek members also reported lower levels of agreement with such norms ($M_{adj}=3.307$), the difference was not significantly different from those in the E-iConsent or Control groups. No other treatment effects for Greek life members were observed.

Non-Greek members, Post-test. Treatment effects for non-Greeks were observed on three outcomes at post-test (E-iConsent $n=47$, F-iConsent $n=55$, Control $n=36$). First, awareness of consent was higher among F-iConsent non-Greek participants ($M_{adj}=3.258$) than control group non-Greeks ($M_{adj}=2.988$), $F(F(2, 187)=3.654$, $p=.028$. Second, attitudes accepting of rape were significantly lower among E-iConsent non-Greek participants ($M_{adj}=1.699$) than F-iConsent non-Greeks ($M_{adj}=1.881$), $F(2, 189)=4.545$, $p=.012$. Third, beliefs in alcohol-sex disinhibitions were significantly lower in E-iConsent ($M_{adj}=2.099$) than F-iConsent ($M_{adj}=2.362$), $F(F(2, 189)=3.943$, $p=.021$.

Non-Greek members, Follow-up. No significant treatment effects were observed.

For ease of interpretation, unadjusted means for Greeks' and non-Greeks' awareness of consent, attitudes accepting of rape myths, and beliefs in token refusal and alcohol-sex disinhibitions are graphed in Figure 4.3.

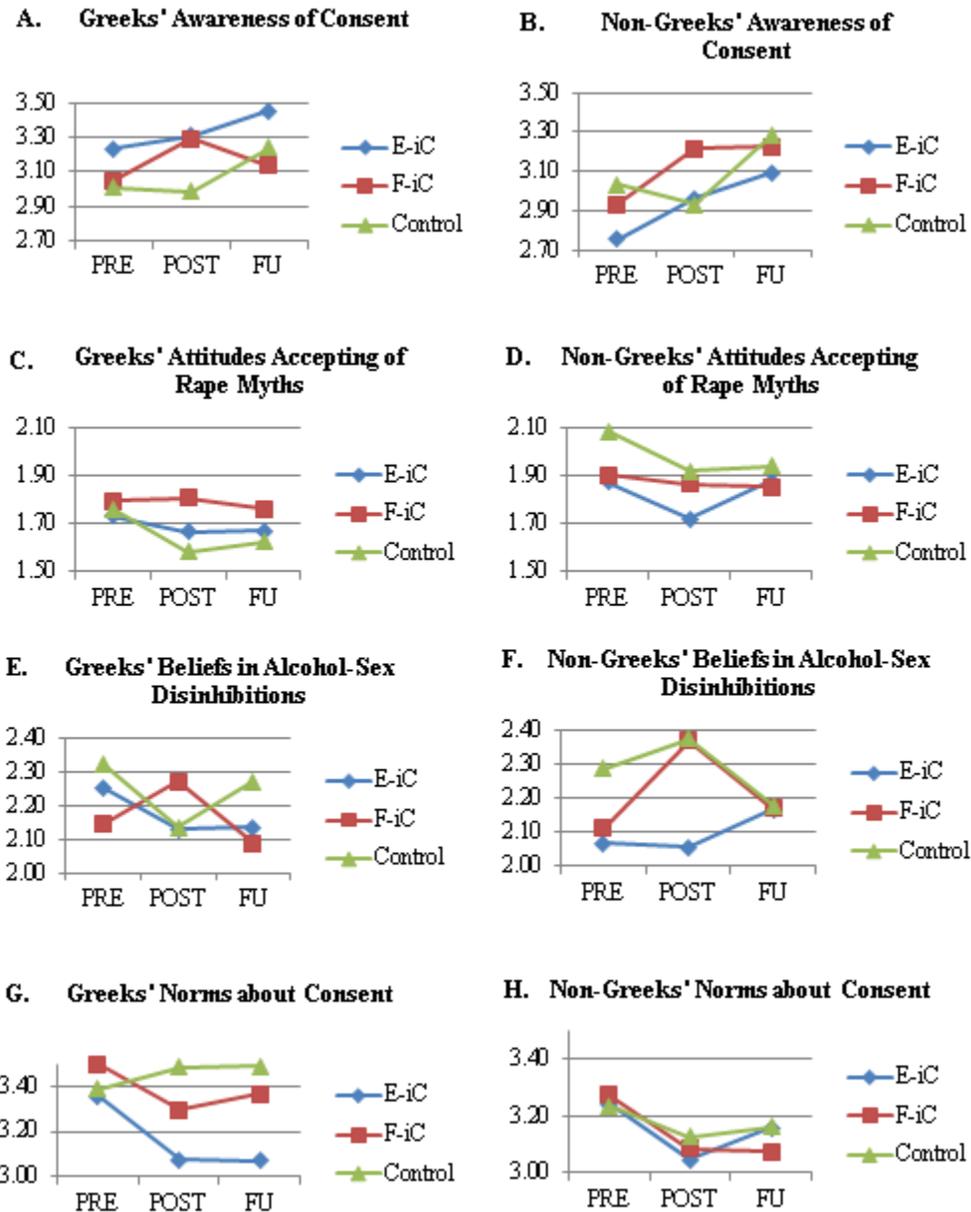


Figure 4.3. Unadjusted means over time for Greek and non-Greek study participants

Examination of Mediational Effects on Participants' Behavior

To assess whether individual changes in awareness of consent, attitudes supportive of sexual violence, beliefs about women's token refusal of sexual advances and alcohol-sex disinhibitions, norms about sexual consent, and perceived behavioral control over consent (i.e., proximal outcomes) mediated the effect of the intervention on participants behavior following implementation, ANCOVA models incorporating changes from pre-test to post-test and pre-test to follow-up for the proximal outcome scales as covariates were conducted using the indirect behavioral approach to consent scale as the outcome variable. However, no statistically significant results were found.

Mediation Model Differences by Sex

To further examine whether potential mediational effects existed, mediational models were conducted separately for women and men. While no statistically significant effects were found for women, two models were significant for men, both of which examined the impact of proximal outcomes on indirect behavioral approach to consent at follow-up. The first model considered change in proximal outcomes from pre-test to post-test. Indirect consent behaviors were significantly lower for F-iConsent men ($M_{adj}=2.684$) than E-iConsent men ($M_{adj}=3.684$). Additionally, indirect consent behaviors were significantly lower for control group men ($M_{adj}=2.806$) than E-iConsent men ($M_{adj}=3.684$), $F(2, 20)=11.305, p=.001$.

Significant treatment effects also existed for the distal outcome of indirect behavioral control for men after incorporating pre-test to follow-up changes in proximal outcomes, with the same trend repeated. Indirect consent behaviors significantly

decreased in men in the F-iConsent group ($M_{adj}=2.775$) than men in the E-iConsent group ($M_{adj}=3.471$), $F(2, 27)=4.122$, $p=.027$.

Summary of Quantitative Results

In summary, it was hypothesized that students who participated in F-iConsent or in E-iConsent, compared to the control group, would report greater awareness of consent, stronger attitudes against sexual violence, stronger beliefs against women's token refusal of sexual advances and about alcohol-sex disinhibitions, stronger norms about consent, stronger perceived behavioral control over consent, and more direct sexual consent behaviors after participating in the intervention. It was also hypothesized that the program effects would be maintained at the 3-month follow-up.

Summary of Unadjusted Results

Overall, the unadjusted results suggest that the iConsent program is effective at changing some outcomes within groups, when no other variables are controlled for. For the E-iConsent group, significant decreases in beliefs in women's token refusal of sexual advances and negative norms about consent were observed at post-test. While these changes were not sustained over time, significant increases in awareness and decreases in indirect consent behaviors were observed at follow-up.

For F-iConsent participants, several changes were observed at both post-test and follow-up, including significant increases in awareness of consent and decreases in beliefs in women's token refusal of sexual advances, negative norms about consent, and most importantly, the distal behavioral outcome of indirect consent behaviors. Contrary

to expectations, F-iConsent participants also experienced significant increases in their beliefs in alcohol-sex disinhibitions from pre-test to post-test. However, expected changes for this scale could be misinterpreted. For instance, increases in mean scores to items such as “After a few drinks, I am more likely to do sexual things that I wouldn’t do when sober,” and “Alcohol usually influences my decision to have sex,” could represent an increase in participants’ awareness that alcohol can modify sexual inhibitions, rather than a report of participants’ beliefs about alcohol-sex disinhibitions expectancies, thus explaining the increase of F-iConsent participants’ mean scores for this scale.

Participants in the control group also experienced significant decreases at post-test and follow-up for beliefs in women’s token refusal of sexual advances and indirect consent behaviors. Additionally, their attitudes accepting of rape myths significantly decreased from pre- to post-test, and their awareness of consent significantly increased from pre-test to follow-up.

When examined separately, women experienced more changes than men, with women in the E-iConsent group showing significant changes in three outcomes (awareness of consent, norms about consent, and indirect consent behaviors) as opposed to changes in only two outcomes for E-iConsent men (perceived behavioral control and beliefs in women’s token refusal of sexual advances). Further, women in the F-iConsent group experienced an increase in awareness about consent and significant decreases in norms about consent, beliefs in women’s token refusal of sexual advances and alcohol-sex disinhibitions, and indirect consent behaviors, as opposed to men in the same group who experienced changes only in norms about consent and indirect consent behaviors. Also of note, women in the control group experienced increases in awareness of consent

from pre-test to follow-up. They also experienced decreases in indirect consent behaviors at both post-test and follow-up and in belief of women's token refusal of sexual advances and attitudes accepting of rape at follow-up.

While these unadjusted results provide an interesting view of general within group changes over time, they do not account for the effect of covariates that were theoretically expected to influence program impact, nor do they test the effectiveness of the iConsent program in comparison to the control group.

Summary of Adjusted Results

To examine the effect of treatment on participants' proximal and distal outcomes, data were analyzed using ANCOVA models that incorporated gender, year in school, dating history, dating violence and sexual violence histories, and sexual experience as covariates. Sidak post-hoc tests were conducted to determine whether significant differences existed between a) E-iConsent and F-iConsent groups; b) E-iConsent and control groups; and c) F-iConsent and control groups, thereby indicating whether either treatment was effective compared to the control and whether the E-iConsent treatment was more effective than the F-iConsent treatment (and vice versa).

E-iConsent versus Control

The only significant difference between E-iConsent participants and control participants was observed at follow-up. Unfortunately, this treatment effect was in the opposite direction than anticipated, with E-iConsent participants reporting higher beliefs

in the token refusal scale at follow-up than control group participants, indicating a potentially iatrogenic effect of the program.

F-iConsent versus Control

F-iConsent participants exhibited an increase in awareness of consent compared to control participants at post-test. However, this effect was not sustained at follow-up.

Women and men in the F-iConsent group responded differently to the program when compared separately to women and men in the control group. For instance, women in the F-iConsent group scored lower than women in the control group in terms of their beliefs in women's token refusal of sexual advances at post-test, suggesting that the in-person version of the program made women believe less in statements such as "Girls usually say NO even when they mean YES." Additionally, men in the F-iConsent group had higher awareness of consent at post-test compared to men in the control group, indicating that the program made them think about and discuss the topic of consent. F-iConsent men also scored lower than control men on the negative norms about consent scale at post-test.

Perhaps most importantly, men in the F-iConsent group reported fewer indirect consent behaviors at post-test than control group men. This finding suggests that participation in F-iConsent decreased men's likelihood to obtain consent through nonverbal cues compared to control group men. This effect, however, was no longer observed at follow-up.

E-iConsent versus F-iConsent

Two statistically significant differences were observed between E-iConsent participants and F-iConsent participants at post-test. E-iConsent participants reported fewer attitudes accepting of rape myths and beliefs in alcohol-sex disinhibitions than students who participated in F-iConsent. However, these effects were not sustained at follow-up.

Again, interesting sex differences were found in the way women and men responded to the iConsent program. At post-test, E-iConsent women reported fewer beliefs in alcohol-sex disinhibitions and attitudes less supportive of rape myths than F-iConsent women. This finding suggests that participation in E-iConsent may be more effective at changing outcomes than participation in F-iConsent. These effects, however, were not sustained at follow-up.

Men in the F-iConsent group reported fewer indirect consent behaviors than E-iConsent men at post-test, and this effect was sustained and had become more pronounced at follow-up. This finding suggests that participation in the F-iConsent program had a strong impact on men's behavior such that they began to directly obtain consent during sexual activities.

Summary of Differences in Adjusted Results for Selected Subgroups

Analyses conducted to assess whether athletes in each of the intervention groups responded differently to treatment than non-athletes found only one significant treatment effect. It was found that E-iConsent athletes reported significantly fewer beliefs in alcohol-sex disinhibitions than control group athletes. Conversely, E-iConsent non-

athletes reported fewer attitudes accepting of rape myths than their non-athlete counterparts in F-iConsent at post-test. At follow-up, however, non-athlete participants demonstrated an unexpected result – they were more likely than their non-athlete counterparts in the control group to espouse beliefs in women’s token refusal of sexual advances.

Analyses were also conducted to examine whether students who were members of Greek organizations responded to the iConsent program differently than those who were not. It was found that Greek life members in the E-iConsent group reported less agreement with negative norms about consent than Greek members in the control group at follow-up, but this was the only significant treatment effect for Greek members. Conversely, non-Greek participants demonstrated more treatment effects on awareness of consent, attitudes accepting of rape, and beliefs in alcohol-sex disinhibitions.

While it is interesting to review the differences in ways that selected subgroups respond to the iConsent program compared to their lower-risk counterparts, it may be best to refrain from viewing the results of these participants in isolation, particularly because the small sample size of each of these groups makes it difficult to generalize results.

Summary of Mediation Analyses

Mediational models were conducted to test the influence of changes in awareness of consent, norms and attitudes supportive of sexual violence, beliefs about women’s token refusal of sexual advances and alcohol-sex disinhibitions, and perceived behavioral control over consent on indirect consent behaviors. It was expected that greater increases

in awareness and decreases in norms, attitudes, and beliefs supportive of sexual violence and lack of perceived behavioral control and attitudes would result in participants using indirect sexual consent behaviors less frequently. Mediation models were analyzed in three ways – using the entire sample, separated by level-of-risk score, and separated by sex.

No statistically significant results were found for mediation analyses, except for when models were split by sex. While no significant results for women were found, there were significant results for men. Men in the F-iConsent group compared to men in the E-iConsent group exhibited fewer indirect consent behaviors at follow-up after incorporation of changes in proximal outcomes from both pre-test to post-test and pre-test to follow-up into the analytic models.

Contextual Inquiry

Qualitative Analysis of Open-Ended iConsent Program Feedback

Axial coding and thematic analysis were conducted in NVivo 10.0 on feedback obtained through two multi-pronged questions: “Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?” and “Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?” Qualitative analysis of this feedback provided context regarding participants’ responses to the program. While all of the qualitative feedback were compiled, reviewed, and are presented in Appendix C, feedback was coded only until to the point at which saturation was reached (approximately 5/8 of responses), suggesting that no new themes were emerging from the data.

Four overarching nodes were developed during the axial coding process (i.e., Program Effectiveness, Facilitation Style, Likes/Dislikes, and Recommendations for Program Improvement). Program effectiveness subnodes included “Program conveyed message”, “Gained knowledge” (further subdivided into knowledge about consent, dating abuse, and sexual abuse), “Learned how to ask for consent”, and “Learned how to intervene or help someone.”

Text from students’ open-ended feedback were coded according to subnodes, and four major themes emerged from the students’ responses regarding the program: 1) the program is useful and informative, and it should be disseminated more broadly; 2) the program increased knowledge on a variety of topics; 3) the facilitation style of the F-iConsent program helped to keep students engaged in the program; and 4) participants thought the program was good as is, but recommended several ideas for ways to improve upon it.

The program is useful and informative, and it should be disseminated more broadly. Generally, participants felt the program was useful, helpful, and should be offered more broadly in an effort to increase awareness at UGA about dating violence and sexual assault. This idea was shared by F-iConsent and E-iConsent participants alike: “I just think the program needs to keep being shared around the campus to make college kids more aware of some of the harmful things that could occur.” (Female, F-iConsent) “I just wish that a program like this would be a required part of freshman orientation so that women and men could be better equipped to navigate their sexual experiences more proficiently.” (Female, F-iConsent); “I think it should be required prior to beginning at UGA to go through this program.” (Female, E-iConsent). One female

participant in the E-iConsent disclosed that she was raped by a close friend her sophomore year of college. She suggested disseminating the iConsent program broadly by making it a mandatory requirement during freshman orientation.

The program increased knowledge on a variety of topics. Many students (n=113) responded that the program was effective in some way, with the majority of effectiveness responses being coded as “Gained knowledge” (n=85), and most of those suggesting that participants gained knowledge about sexual abuse (n=40) and the consent process (n=22). With respect to knowledge gained about sexual abuse, participants often indicated that they were surprised to learn how prevalent sexual assault on campus is: “It was very eye opening about college campuses and rape statistics.” (Female, F-iConsent). Additionally, some responses indicated that while participants learned how prevalent sexual assault is, they also learned about the broad spectrum of behaviors that comprise sexual assault and that nonconsensual sex is merely one of those behaviors. For example, one student stated, “What I liked about the iConsent program is that it brought awareness to the fact that many women are being sexually abused whether they know it or not.”

With respect to gaining knowledge about the consent process, students responded with feedback such as “I learned how to ask my partner for consent and to not feel like it is awkward.” (Male, F-iConsent); “The information about what exactly consent is and the specifics of when and how to obtain consent was useful information.” (Female, F-iConsent); and “I liked that it taught me more about the consent process that is necessary before any sexual action...I liked learning more about the consent aspect of participating in sexual activity. I was not aware of it and very glad I was informed.” (Sex unknown, E-iConsent).

Students also reported gaining knowledge about dating abuse, particularly with respect to the prevalence of the problem and how controlling behaviors and privacy intrusions constitute dating violence in ways they had never before recognized: “I did not realize that dating violence is a big issue among the college population.” (Female, E-iConsent); “The percentages about dating violence were the most interesting.” (Female, E-iConsent); “I thought it was helpful in informing people on a lot of information they may not have known before. With dating violence, I feel like most people would assume that it is just physical things. I was surprised to find out that it included privacy invasions or jealousy issues. I feel like most people would just assume that violence meant physical abuse.” (Female, E-iConsent); “I liked the fact that she taught us such a broad range of information. I didn't know that dating violence could be so broad.” (Female, F-iConsent).

Participants also reported that the examples of ways in which they could ask for and give consent during sexual activity without feeling awkward were helpful. Students provided responses such as, “[I learned] tools for asking for consent without being formal but still being open and very clear with your partner, the questions were realistic and not too awkward or uncomfortable, just knowing how to approach these situations can make both parties safer.” (Male, E-iConsent); “I learned different questions that could be asked to get consent from my boyfriend.” (Female, E-iConsent). Still, some responded that one way to improve the program would be to provide additional examples of how to ask for or give consent and to further press the idea that consent is a continual process: “Give more examples of how to ask for consent without it breaking the mood or sounding awkward.” (Female, F-iConsent); “More specific examples would be helpful, and

convince others that it is possible to ask for consent at all times needed without causing awkwardness and ruining the moment.” (Female, F-iConsent).

Further, students reported gaining knowledge about how to intervene in a potentially violent situation or how to help a victim of dating violence or sexual assault: “I think the most useful aspect of the iConsent program was having all the different numbers and resources to have handy if there ever is a situation where I would be involved or know someone to be involved.” (Female, F-iConsent); “I learned to look out for the signs of violence so I can better take care of myself and the people around me.” (Female, E-iConsent); “I believe that the parts describing the helping of others are the most useful. I learned that I am supposed to try to help anyone that I can if they are in an abusive relationship.” (Male, E-iConsent); “After watching the video, I noticed some behavior that I see in my friends and peers every weekend so I will be sure to look out for abusive behavior, whether directed at myself or someone to somebody else.” (Female, E-iConsent).

The facilitation style of the F-iConsent program helped to keep students engaged in the program. With respect to participant engagement, many students referenced the facilitation style as a positive aspect of the F-iConsent program, citing that the material was presented in a manner relevant for college students and that the discussion topics made the program engaging and enjoyable. “...the speaker especially did a great job in her presentation. I liked that she actively involved the audience and presented the information in a way that was easily understandable by the audience.” (Female, F-iConsent); “I really liked the openness and the use of examples during the presentation. The instructor really made sure to get on a student's level, so we could

relate to what she was saying.” (Female, F-iConsent); “I think that the program was presented in a relevant way that was easy to understand and enjoyable. Usually the information within the presentation can be awkward, but the guest speaker was very personable.” (Female, F-iConsent).

Participants thought the program was good as is, but recommended several ideas for ways to improve upon it. Overall, few negative responses to the program were reported. Two individuals who participated in the F-iConsent program referred to the facilitation style or the audience interaction as inappropriate or immature (Females, F-iConsent). Other negative feedback included was that the Jeopardy game was too long or unhelpful (Female, F-iConsent) and the videos were not interesting (Female, E-iConsent). Negative feedback specifically related to the E-iConsent program was received infrequently and primarily suggested that the voiceover narration was monotonous and could result in participants losing interest in the program. However such feedback was often accompanied by comments, such as “I really enjoyed the fact that [the program] was very informative yet not too dense. It kept my attention the entire time. The videos were great...” (Female, E-iConsent).

Other suggestions for programmatic improvement include making the program “...more realistic. People are going to go out and get drunk and have sex. More realistic expectations for people need to be acknowledged.” (Female, F-iConsent). Students also suggested adding more videos of real-life examples and more opportunities to discuss those examples. One student also added, “Give more examples of how to ask for consent without it breaking the mood or sounding awkward.” (Female, F-iConsent).

Additionally, there were some common and divergent findings with respect to open-ended quiz question responses elicited from F-iConsent and E-iConsent participants. For instance, it was more common for F-iConsent participants to indicate that they learned about the broad spectrum of relationship violence (e.g., from verbal abuse to sexual assault). Conversely, E-iConsent participants often indicated that they were surprised by the statistics presented in the program: “It was interesting that one out of four women in college will be sexually assaulted” (Female, E-iConsent). This difference may be because, while the information presented in the slides is exactly the same for both delivery methods, the F-iConsent program allows for more dialogue between facilitator and participants, resulting in deeper explanations of the material presented in the slides.

Further, several F-iConsent participants indicated that they liked that the program was engaging and interactive. While E-iConsent participants also described the program as engaging, they typically referred to the videos as the most engaging portion of the program: “I thought the sexual consent video with the lawyers was entertaining and made a good point about the importance of talking about what you are and are not comfortable with doing sexually in a relationship” (Female, E-iConsent); “I enjoyed the video examples rather than simply reading the information” (Female, E-iConsent). Some F-iConsent participants described the Jeopardy game and the facilitator interaction as the most engaging part of the program: “I really liked the openness and the use of examples during the presentation. The instructor really made sure to get on a student's level, so we could relate to what she was saying” (Female, F-iConsent).

Finally, both F-iConsent and E-iConsent participants indicated that they learned how to ask for consent in their relationships, but F-iConsent participants frequently referred to their newfound ability to do so without feeling awkward. This difference may have been due to the facilitator providing specific examples of how to ask for consent and calling on program participants to describe examples and practice doing so as well.

Figure 4.4 depicts a word frequency query tag cloud created in NVivo from program participants' open-ended responses to quiz questions. The tag cloud illustrates the 40 most commonly used words included in the open-ended data, with words presented in large font occurring more frequently than those in smaller font. This figure demonstrates that participants responded similarly to the program by indicating that it was "informing", that they "learned", and that the program was "helpful" and students "enjoyed" it. The tag cloud also indicates that constructs central to the program were frequently represented in participants' feedback (e.g., consent, statistics, examples, sexual situations).

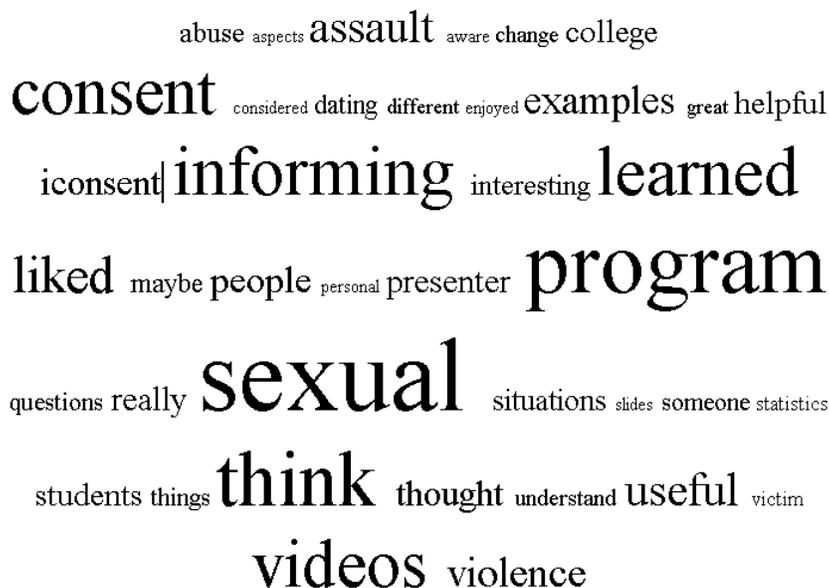


Figure 4.4. Tag cloud depicting words frequently used in participants' responses to the program

Qualitative Analysis of Focus Group Data

Two one-hour focus groups were conducted to explore participants' responses to the iConsent program. Each of the focus groups involved three female participants – two women who participated in the F-iConsent program and one who participated in the E-iConsent program.

Seven main themes emerged from focus group data: 1) participants perceived the program material to be relevant; 2) the program may not change deeply ingrained norms about sexual violence; 3) the program's advice about alcohol use and sex may be perceived as unrealistic among participants; 4) the interaction allowed by the F-iConsent program potentially makes it more engaging than the E-iConsent program; 5) participants perceive that the program likely facilitates change among its participants; 6) the program resulted in increased awareness about the topic of consent and initiated discussion among friends and partners about consent; and 7) students are largely unaware of other sexual health programs ongoing at UGA.

Participants perceived the program material to be relevant. Overall, participants from both F-iConsent and E-iConsent agreed that the material presented was “very relevant,” particularly the material presented and discussions engaged in about the topic of alcohol, sex, and sexual consent: “...with the drinking things – my friends have told me stories about how they went home with a guy and they had sex with him and then they don't remember – not that they weren't wanting to do it. Even if they were sober the next day, they would have wanted to do it, but at the time, they were like, ‘Well, I don't remember.’ It just makes it kind of hard to decide what's wrong and what's right. And then how to change it.”

The program may not change deeply ingrained norms about sexual violence.

The topic of alcohol and sexual consent is one of the more controversial, yet more popular, topics of discussion during the program. The controversy happens because the line between consensual sober sex and nonconsensual intoxicated sex is not always a distinctive one, particularly if both parties have been drinking, or if one party must make a decision about the ability of the other to consent. Additionally, the popularity of the topic may be related to the fact that participants perceive the prevalence of intoxicated sex at UGA to be high. Further, an important goal of the iConsent program is to dispel rape myths and increase knowledge about the components of consent. However, one of the examples given by a participant indicates that these deeply ingrained norms and attitudes related to sexual violence, and specifically the intersection between alcohol and sexual consent, are difficult to change. Haley (Focus Group 2) described a situation in which her friend was sexually assaulted after she had gone home with a man after drinking. Haley's responses to my probes indicate that she did not recall the resources presented in the F-iConsent program that could have helped her friend following the assault. Further, two of the focus group participants appeared to be hesitant to label the experience as a sexual assault that could have garnered attention from local resources such as the Cottage Sexual Assault Center, confirming that the program did not change some of the deeply ingrained norms to which these women espouse. Some of the responses from focus group participants about this situation were:

“She doesn't talk to him anymore, but still...they were both wrong. I don't know the message she was sending him by going to his house drunk at 2 in the morning,

and they had tried to hook up before... It was still all his fault, but she was also in the wrong.”

“I remember you talked about the Cottage, but it’s hard when it’s something like that. I feel the Cottage is just sexual assault, and that’s if my friend was raped, but then it’s, what do you define as rape because I still think of it as like someone kidnapped her and left her in a ditch, and if she woke up like that, then I’d be, ‘Let’s go,’ but it’s hard when it’s kinda, I don’t know...I’m so iffy about like, okay, girl’s drunk, goes home with guy – to me, that’s leading him on still, though. [Haley agrees.] Because if she didn’t want to get put in a situation where that could happen, then she shouldn’t have let it happen in the first place...And I know that’s not right because then you’re like well, if she wants to go home with a guy, then she doesn’t have to sleep with him, but then how do you make the guy feel like he was not led on?”

While the third focus group participant did not reiterate these attitudes and norms as strongly as Haley and Erin, she did add to the discussion that one reason the sexual assault victim may have decided not to report the incident was because she, too, had been drinking: “I think that one thing that keeps a lot of people from going forward with stuff is that usually...one person is drunk a lot of times, and so if, maybe I was the victim and I went, then I’d have to admit that I was drunk and I was leading someone on, and I think a lot of people don’t want to have to admit that they were wrong and then say, ‘Oh, I did all this stuff wrong, but then he did this to me,’ so it’s almost saying that you asked for it basically, but then not at all. It’s like you have to admit a lot to report someone else.”

The program's advice about alcohol use and sex may be perceived as unrealistic among participants. In response to participants' thoughts about the relation between alcohol use and sexual assault and how it can be mitigated, participants were asked whether they considered the prevention advice provided during the program to be realistic. Here, it is worthwhile to reiterate that nearly all of the qualitative feedback obtained from both E-iConsent and F-iConsent participants indicated that the material presented, particularly the information covering alcohol use and sex, in the program is relevant. However, when it came to how realistic participants perceived the advice about alcohol use and sex to be (i.e., that individuals should abstain from having sex under the influence), one participant's response may summarize what other program participants were too modest to verbalize: "...it makes sense...you need definite consent, and you can't get that if your judgment is impaired by any means whether it's alcohol or drugs, but at the same time, a lot of people want to go downtown to get drunk, and sorry, but f**k." She further elaborated, "...there's sex in a relationship and sober sex, and then there's drunk hook ups. There's different categories almost." When asked which kind of sex she thought occurs most frequently at UGA, she replied, "Hook ups," and further clarified that she was referring to drunk sex. Another participant added to this conversation by offering an explanation for the prevalence of drunk sex: "I think people almost think it's more okay if they're drunk. Like, 'Oh, I had sex with a guy, but I was drunk so it's okay; it doesn't count.'"

Moreover, participants suggested that the program's advice to abstain from drunk sex may not be realistic: "I don't think people are going to consent as much as you were recommending." Another participant agreed, "Especially if you've been dating someone

for a few months, I don't think you're going to ask for consent – verbal consent – every single time.” This was further confirmed with another response: “Like with drinking, most people aren't going to really discuss it – not that it's expected, but it's hard to ask, ‘Hey do you want to do it?’”

Such thoughts regarding the frequency of sex under the influence of alcohol and the idea that asking students to abstain from sex when intoxicated is perceived as unrealistic in a college setting like UGA is further evidence in support of the need for prevention programming like iConsent. Additionally, these responses indicate that it would be useful to incorporate more information about the topic of alcohol use and sex, as well as the negative consequences of sex under the influence that go beyond sexual assault (e.g., contraction of sexually transmitted diseases, inability to keep an erection, etc.).

The interaction allowed by the F-iConsent program potentially makes it more engaging than the E-iConsent program. Some focus group data suggest that F-iConsent may be more effective than E-iConsent because of the interactive nature of the in-person delivery method. F-iConsent participants expressed that one aspect of the in-person iConsent program that differs from the web-based version is the ability to “hear other people's reactions” to material presented during the program. One participant stated, “I think it helped just to get another perspective – to see how things are seen from a male's eyes.” Participants from both focus groups indicated that the facilitation style of F-iConsent likely made it more engaging for participants. For example, “I think I would probably say the in-person version was probably better [than E-iConsent]. It just felt a little lecture-y.”

Participants perceive that the program likely facilitates change among its participants. The two F-iConsent participants from one focus group agreed that they thought the program would result in changes in either their or their fellow classmates' behavior, but the E-iConsent participant expressed that she thought the program would result in changes in attitudes or beliefs more so than behaviors: "I think it may not change people's behavior outwardly so much, but maybe they would think about what they were doing a little more and maybe subconsciously think twice about it, but they probably wouldn't be like, 'Oh my gosh, that iConsent thing just changed my life.'"

Conversely, F-iConsent participants suggested that "...the girls probably actually thought about it and thought they should be more careful. Although it shouldn't be our responsibility to take care of ourselves, it is...so maybe they'll think about taking all those drinks from a guy who may be expecting something, and think that, 'Hey, I don't have to give him anything for him buying me drinks.' And maybe the guys will think, 'I'm not going to buy her all these drinks so she'll go home with me – I'm just going to buy them to be nice.' But you can't always expect the best out of other people." Another focus group participant indicated that she thought it would change others' behavior, and it also changed her own beliefs: "I think it would definitely be a change for the better... maybe guys or girls would think about the fact that someone doesn't say no, that doesn't mean you have consent. I never thought about that before, so I definitely think that's a change you would see."

One of the first comments one participant made about the F-iConsent program was that it "changed [her] perspective." She later elaborated on that concept and indicated that she has thought about some of the program's messages over time: "I guess

what we were talking about earlier about constantly getting consent...if you're with a guy, you...in the beginning, you're like, 'Yeah', but really throughout the process, you have to be like, 'Do you want to keep doing it?' instead of just committing to something in the beginning. I've thought about that a lot."

The program resulted in increased awareness about the topic of consent and initiated discussion among friends and partners about consent. With respect to awareness about the topic of consent and perceived self-efficacy about discussing consent, participants agreed that they are more knowledgeable on the topic after having participated in the program, and as a result, would be more comfortable discussing it with their partners or friends. Further, two focus group participants indicated that the program sparked discussion between themselves, their friends, and their partners: "I went home and told my friends about what I'd learned, and I told my boyfriend's friends...that just because a girl doesn't say no doesn't mean you can do whatever. Which, the law in GA – it is a yes state, you have to say yes. So just because she doesn't make a sound or doesn't do anything, doesn't mean she said yes...I just told them, be careful what you're doing because it could ruin your life just because you didn't ask for verbal permission."

Students are largely unaware of other sexual health programs ongoing at UGA. When probed about whether students had been exposed to other prevention programs similar in nature to iConsent on campus at UGA, generally the same response was received in both focus groups. Focus group participants suggested they had a general knowledge about other sexual or dating violence prevention programs ongoing at UGA, but did not indicate a broad knowledge of such programs. One student who touted the relevance of the iConsent program, even stated that she did not "like the way [the

Consent Is Sexy message was] phrased at all,” and further elaborated, “I don’t know if it’s being advertised right...last year, my roommate was like, ‘Hey, I got this coozie that says Consent Is Sexy.’ Well, great, I have a coozie or I have a shirt, but what does that mean? I just don’t know if it’s being taught – like here’s this, this, and this, and it’s supposed to provoke you to think about it, but I just think that’s weird because I’m never going to use that or anything.” This statement combined with other feedback from focus group participants suggesting that students did not have broad knowledge of other prevention campaigns and obtained through the open-ended quiz questions regarding the relevance and applicability of the iConsent program material, underlines the need for promotion of such prevention programs.

iConsent Program Implementation Fidelity

Analysis of the data presented in these forms demonstrates that the iConsent program was implemented with fidelity in the two classes randomized to the F-iConsent condition. In fact, few differences between program implementation in the two classes were noted by the research assistant. The primary difference was that students in Class A engaged in more discussion than students in Class B. Compared to the F-iConsent program implemented in Class A, facilitation of the program implemented in Class B involved using more group time to respond to questions from and stimulate discussion among program participants. Additionally, I occasionally provided opportunities to group members to raise unplanned questions and issues about relationships in Class B whereas the program implemented during Class A more strictly followed the presentation and Jeopardy game sequence structure. As such, participants of the program implemented during Class B completed less than half of the Jeopardy game, as opposed

to about half of the game completed in Class A. Additionally, participants of Class B shared personal experiences and feelings more frequently than the participants who completed Class A.

In the program fidelity notes, the research assistant indicated that students in both classes were engaged, with participants in both classes providing much feedback during the program. Based on the extent to which participants shared personal experiences and engaged in discussion, it is likely that students who participated in Class B were more engaged than those who completed Class A, who did not share experiences during the session, but did appear to be taking notes about important topics and enjoying the content of the program (e.g., “watched video – some giggles from students”; “students are taking notes/very quiet...quietly engaged”; Research Assistant Notes from Class A).

The research assistant further indicated that the same examples were used in both program sessions and that students responded by “raising hands” and “react[ing]” verbally to some of the examples.

The review of program fidelity data indicate that both F-iConsent classes were implemented with high fidelity. Further, students who completed the online version of the program did so at their own pace. Since E-iConsent is dubbed with a voiceover describing the information presented on each slide, it is designed for students to listen to the voiceover and complete the slideshow accordingly thus ensuring fidelity of program administration.

Quantitative and Qualitative Data Triangulation

Overall, the results suggest that the iConsent program was effective at changing some proximal and distal outcomes within and between groups.

One unexpected result was that, according to unadjusted within group results, participants in the control group experienced significant decreases at post-test and follow-up for beliefs in women's token refusal of sexual advances and indirect consent behaviors.

Their attitudes accepting of rape myths also significantly decreased from pre- to post-test, and their awareness of consent significantly increased from pre-test to follow-up.

Control group participants also experienced some significant changes compared to the two intervention groups. Focus group participants indicated that UGA's Relationship and Sexual Violence Prevention (RSVP) coordinator visited their classes to present information on maintaining healthy dating and sexual relationships. Focus group participants also stated that they knew of the Consent Is Sexy campaign and another program at UGA, Sexual Health Helpers at UGA (SHHUGA). It is possible that students in the control group experienced changes in proximal and distal outcomes as a result of interaction with the RSVP coordinator in their Health Promotion and Behavior class or other classes at UGA, or that they learned information during the course of the semester through alternative vehicles such as events coordinated by SHHUGA.

According to adjusted results, F-iConsent participants increased their awareness of consent compared to control participants at post-test. This change was not observed for E-iConsent participants. The open-ended quiz question responses represent data both convergent and divergent with this finding. Students in the F-iConsent and E-iConsent groups indicated overwhelmingly that they found the program to increase their

knowledge on a variety of topics, including the spectrum of relationship violence: “I’ve learned that abuse in a relationship goes past simply verbal and physical abuse” (Female, F-iConsent); “It made me aware of the different types of dating and sexual violence that I didn't even know was considered that” (Female, F-iConsent); “The iConsent program was very informative about sexual violence and the guest speaker provided some information I had never heard before. The quiz truly got me thinking about how serious sexual violence was and how it normally goes unnoticed” (Female, E-iConsent).

Participants in both groups also expressed increased awareness about the need for establishing consent and not having sex while intoxicated: “I realized how it is incorrect to have sex with girls when they are drunk because they are not in the right state of mind to consent to sex” (Male, F-iConsent); “The aspects that were most useful I believe would be when the guest speaker talked about the use of alcohol and sex combined. It can be dangerous and in most cases not a good thing. College kids need to be more aware of this and cautious when making decisions like that. The main skills I learned are to be cautious and more aware of my surroundings and make good decisions when going downtown or to a party” (Female, F-iConsent); “I liked that it informed me on the topic of having consent before any sexual activity. I liked that it taught me more about the consent process that is necessary before any sexual action. This was very informative and useful to know” (Male, E-iConsent).

Women and men in the F-iConsent group responded differently to the program when compared separately to women and men in the control group. For instance, women in the F-iConsent group scored lower than women in the control group in terms of their beliefs in women’s token refusal of sexual advances at post-test. Additionally, men in the

F-iConsent group had higher awareness of consent at post-test compared to men in the control group, indicating that the program made them think about and discuss the topic of consent. Men in the F-iConsent group also reported fewer indirect consent behaviors at post-test than control group and E-iConsent men. This difference between men in the F-iConsent and E-iConsent was sustained and became more pronounced at follow-up. This finding suggests that participation in the F-iConsent program had a strong impact on men's behavior. The qualitative data collected may shed some light on these findings. For instance, one focus group participant indicated that she thought some women may like the anonymity that the E-iConsent program provides. While the F-iConsent women who participated in the focus groups indicated that they did not feel uncomfortable in the mixed-sex program sessions, they suggested that they thought some women might, particularly if they had been victimized in the past. If this is the case, the E-iConsent may provide women an atmosphere more conducive to absorbing the material presented. Conversely, the interactivity of the in-person version and the reinforcement of positive norms by fellow F-iConsent male and female classmates may have been the cause of men responding better to the in-person delivery method.

CHAPTER 5

DISCUSSION

The purpose of this study was to evaluate the impact of the iConsent program and to compare two different delivery methods: a) F-iConsent, implemented by a Facilitator, classroom based, in-person delivery; and b) E-iConsent, Electronic, online, web-based delivery. The goals of this study were to evaluate the impact of iConsent using a quasi-experimental, randomized trial, test the proposed causative model, explain from the perspective of the participants the impact of the intervention on dating and sexual relationships, and evaluate the implementation process of iConsent. This chapter is organized in six sections: overview of dating violence and sexual violence prevalence, implications of the iConsent program's effect on awareness of consent, implications of the program's behavioral effects, next steps for program modification and dissemination, limitations, and conclusions.

Prevalence of Dating, Dating Violence, and Sexual Violence

The majority of the sample (90.5%) had experience with dating relationships. Further, most of the sample indicated they had some level of sexual experience, with about two thirds reporting they had had vaginal or oral sexual intercourse.

Approximately one quarter of the sample indicated they had been a victim of psychological dating violence, and 6.5% reported they had perpetrated psychological dating violence. Fewer students reported physical dating violence victimization and perpetration.

These rates of violence are similar to national averages. Specifically, the prevalence of psychological victimization among study participants is higher than national rates. In 2011, 17% of college students reported being the victim of psychological dating violence. The rate of physical dating violence victimization among the current sample is somewhat lower than the national average of 15% (Knowledge Networks for Liz Claiborne, 2011). Some participants in the current study may have responded to dating violence perpetration items in the survey in a socially desirable manner, which could explain the difference between rates of victimization and perpetration in the current sample and the prevalence of perpetration between the current and national samples. The rates of sexual violence victimization in the current sample are very similar to national averages. In the current sample, 18% of participants indicated they had experienced unwanted sexual contact or nonconsensual sexual contact, and 7% indicated they had experienced forced sexual contact. The rate of unwanted/nonconsensual sexual violence is lower than the national average of approximately 1 in 20 (Black et al., 2011), and the rate of forced sexual contact in the current sample is lower than the rate of 20-25% in the college population (Fisher et al., 2000). However, these differences could be a result of the manner in which the sexual violence victimization items were phrased in the current study (i.e., as “sexual contact” as opposed to “sexual intercourse”).

Addressing the Problem of Dating Violence and Sexual Violence in College Settings

Regardless of the minor variations between the current sample and national statistics, the rates of dating violence and sexual violence presented indicate that there is

a need for implementation of dating violence and sexual violence prevention strategies at UGA. The White House recently acknowledged the astounding statistics related to college sexual assaults and mandated the establishment of the White House Task Force to Protect Students from Sexual Assault. The Task Force will include representatives from various agencies, including the Departments of Education, Health and Human Services, the Office of Science and Technology, and the Domestic Policy Council, among others, and its ultimate goal of the Task Force is to ensure safe and secure learning environments for students. However, it is clear that doing so will require a comprehensive and coordinated Federal effort. One of the objectives of the Task Force is to provide institutions with evidence-based practices for preventing and responding to sexual assaults. With further improvement and evaluation, the iConsent program could be one such evidence-based program that can be widely disseminated for large scale impact.

Increasing Awareness of Sexual Consent and Facilitating Behavior Change among College Students

The current evaluation has shown that one outcome consistently and positively impacted by the iConsent program was increased awareness of sexual consent. While increasing awareness alone will not result in behavioral changes, without achieving the first step of increasing knowledge, behavior change cannot occur (Bandura, 2004). According to Bandura, knowledge is the predecessor of behavior change; therefore, when individuals lack knowledge about health risks and benefits, they experience no impetus or perceived benefit for changing behaviors. The consistent outcome of increased awareness about sexual consent across groups in this evaluation serves as a starting point

for changing the distal behavior of directly obtaining consent throughout the sexual intimacy process. Additionally, some analyses indicated that even control group participants' awareness of sexual consent, among other outcomes, changed in the positive direction over time. These changes, while too significant to be explained by chance, may have resulted from spill-over effects of the program. Some students indicated they enjoyed the iConsent program so much that they spread the messages and information from the program to their friends outside of class. Further, based on findings from the focus group analysis, it may also be possible that students are learning about some of these constructs from other places, such as through the Consent Is Sexy campaign or by having the UGA Relationship and Sexual Violence Program (RSVP) manager present on overlapping topics (e.g., sexual health, sexually transmitted diseases) in their HPRB 1710 class.

Results from the current evaluation demonstrate that many of the changes observed at post-test were not sustained at follow-up. This is a common finding among health promotion and behavior evaluations and underlines the necessity of having common messages repeated in multiple venues in order to facilitate and sustain change. DiClemente et al. (2013) conducted a study aimed at defining the rate of decay in efficacy outcomes of a CDC evidence-based intervention. They found that condom use behavior of African American adolescent females who had reported increased use of condoms at a 6-month post-intervention assessment decayed steadily over the course of a 24-month study. At 2 years post-intervention, rates of condom use did not differ from baseline. Moreover, the greatest decrease in behavior change was demonstrated in the first 6 to 12 months after implementation of the intervention. These findings indicate that while even

evidence-based interventions may be effective at initiating behavior change in the short-term, the changes may not be sustained over longer periods of time, resulting in only a brief period of declined risk. DiClemente and his colleagues suggest that strategies to optimize intervention effects be implemented post-intervention in an effort to increase sustainability of effects. One strategy the authors proposed was the use of phone-delivered messages to continue to provide prevention information and behavioral skills coaching to participants after the intervention. Further, the authors indicated that while implementation of expensive, long-lasting interventions is not a sustainable prevention strategy, the development of innovative technology serves as a potential cost-effective approach for public health scientists to continue to reach populations in need even after interventions have ended.

The idea of persistently reaching out to intervention participants can be scaled down in clearly targeted populations. For instance, reaching out to college students who participate in an intervention during freshman orientation over extended periods of time would not be difficult. While it may not be feasible for students to participate in the iConsent program more than once, it would be feasible for the main messages of the program to be conveyed multiple times. Program lessons can be reiterated in all health promotion classes, in biology, psychology, and sociology classes, and the key information conveyed by iConsent can even be incorporated creatively into readings and assignments in non-health disciplines (e.g., history, political science, theater, and literature). This method of dissemination is already being practiced with respect to other public health messages (e.g., encouraging students not to drink and drive and to practice safe sex). Additionally, the comprehensive approach this method comprises (i.e.,

universal dissemination with reiteration of key messages across disciplinary fields) mirrors the Federal Task Force's objective to implement a comprehensive strategy to prevent sexual violence in college settings.

Behavior Change as a Result of the iConsent Program

The iConsent program did result in some behavioral changes. A key finding from the evaluation was that not only did the F-iConsent program result in increased awareness and decreased negative norms about consent among men, but it also had a strong impact on men's indirect consent behaviors. It was found that participation in F-iConsent decreased men's likelihood to obtain consent through nonverbal cues compared to both E-iConsent and control group men at post-test. Moreover, when compared to E-iConsent men, this effect was sustained and had become more pronounced at follow-up, further indicating that participation in the F-iConsent program had a strong impact on men's behavior such that they began to directly obtain consent during sexual activities. This is a very meaningful finding. Responses from the open-ended quiz questions, such as "I thought it was very informative and interactive. I learned that many more acts are considered sexual thought than I previously had known about. I learned how to ask my partner for consent and to not feel like it is awkward. The presenter was great!" (Male, F-iConsent), in combination with the fidelity monitoring evaluations, suggest that this finding may be a result of participant engagement in the F-iConsent sessions, as opposed to limited engagement and no opportunities for discussion in E-iConsent sessions. Additionally, engagement in F-iConsent may have allowed for group reinforcement of positive norms among men, resulting in more positive responses over time to the

program's messages. Contrarily, the E-iConsent program was narrated by a female voice, which could have impacted men's responses to the program, as previous researchers have indicated that sexual assault prevention program participants prefer same-gender facilitators (Ball & Rosenbluth, 2008; Imbesi, 2008).

Further, mediation analyses to examine the causative model of the iConsent program found that men in the F-iConsent group compared to men in the E-iConsent group exhibited fewer indirect consent behaviors at follow-up after incorporation of changes in proximal outcomes from both pre-test to post-test and pre-test to follow-up into the analytic models. These findings indicate that there is indeed a beneficial component to participation in the in-person, facilitated version of the program for men on the very important behavioral outcome.

These results have important implications for the program's potential impact. The goal of the iConsent program is to influence students universally. However, the findings demonstrating that men in the F-iConsent program are more likely to change their behavior in response to the intervention suggest that it may be most efficient, both in terms of cost and time, to target college men with the in-person version of the program. Further, when combined with the fact that most sexual assaults are perpetrated by men, the positive impact that the F-iConsent program is shown to have on men underlines the need to target men with the in-person version to result in the most detectable impact on sexual violence prevalence rates. Targeting men with the F-iConsent program may be most efficiently coordinated during freshman orientation.

Meanwhile, the program can still be implemented universally. The E-iConsent version demonstrated effects among women, particularly resulting in fewer beliefs in

alcohol-sex disinhibitions and attitudes less supportive of rape myths than F-iConsent women. If properly improved in accordance with suggestions obtained through participants' open-ended feedback and focus groups, it may be equally as beneficial to target women with the E-iConsent version as it would be to target men with the F-iConsent version.

Next Steps

Prior to broad dissemination of the iConsent program, it would be worthwhile to modify the program based upon feedback received from participants. With respect to E-iConsent in particular, it was suggested that modifying the voiceover so that it is not as monotonous may make it more enjoyable to complete. Further, including both male and female narrators may mitigate the risk of men and women responding differently to the program based on a perceived association with the narrator. Additionally, adding more videos depicting potential "real-life" scenarios and soliciting participant responses about the situations could make it more engaging. Both E-iConsent and F-iConsent participants suggested adding more opportunities for discussion of contextual factors related to sexual violence, particularly regarding the relation between alcohol use and sexual assault.

Using the constructive feedback provided by program participants for programmatic improvement purposes will not only validate and heed participants' concerns about the program, but also may result in increased effectiveness of the program. Future research should include an evaluation of changes made to the program and whether those changes result in more positive effects on program outcomes.

Limitations

This study has some limitations. First, upon review and analysis of some of the measures used to assess attitudes and behaviors in the study, it was found that they could be improved. For instance, the scale measuring beliefs in alcohol-sex disinhibitions could have been misinterpreted. As suggested earlier, increases in mean scores to items such as “After a few drinks, I am more likely to do sexual things that I wouldn’t do when sober,” and “Alcohol usually influences my decision to have sex,” could represent an increase in participants’ awareness that alcohol can modify sexual inhibitions, rather than a report of participants’ actual behavior. The potential misinterpretation of this scale by study participants could translate into misinterpretation of the study’s results.

Additionally, the manner in which items about sexual violence victimization were posed could also have been misinterpreted. Students were asked about unwanted, nonconsensual, and forced sexual contact, as opposed to sexual intercourse, which may have led to an overrepresentation of sexual violence victims. For instance, students may have reported any sexual contact, rather than the intended request for responses regarding nonconsensual and forced sex. Further, the initial plans for the evaluation included a survey measuring bystander intervention intent and behavior, which would have allowed for further analysis regarding the effectiveness of the iConsent program to impact intervening intent and more distal intervening behaviors. Intent is important as over half of the sample was not dating at the time of completing the survey.

Monitoring the fidelity to the E-iConsent program presents some challenges. Future research on E-iConsent program fidelity could incorporate a timer to be linked to the program so that researchers can assess the amount of time it takes participants to

complete the program. Those who skip some slides may not be receiving the program with full fidelity or may not be as engaged in the program as individuals who attend to the whole program. In addition, program implementation may impact how participants respond to the program. A facilitator with a different delivery style or level of knowledge about the topic may elicit different results from participants.

Finally, based on focus group findings and communications with instructors of the participating classes, it is possible that UGA's Relationship and Sexual Violence Program coordinator may have presented information on similar or overlapping topics (e.g., sexual health, sexual violence victimization and perpetration) to participants in Health Promotion and Behavior classes. Knowledge gained during such presentations could explain outcome changes in the control group and make results more difficult to interpret.

Strengths

This study had a number of strengths, particularly the strong research design. The three groups enabled examination of the effect of the intervention compared to a control group, as well as the differential effects of the web-based and in-person delivery methods. The study design also mitigated threats to internal validity. For instance, while testing and history could impact the internal validity of the study, these threats would have been balanced across the multiple intervention groups (i.e., control, E-iConsent, and F-iConsent) thereby minimizing the potential influence on results. Additionally, a trained, external evaluator who is skilled in qualitative research methods completed key pieces of the process evaluation component (i.e., fidelity monitoring and F-iConsent program observations), resulting in an unbiased approach to process evaluation.

Conclusion

This study serves as an initial evaluation of the iConsent program, and it yields promising results suggesting that the program is effective in increasing awareness about the problem of dating violence and sexual violence, modifying participants' attitudes, beliefs, and norms related to dating violence, sexual violence, and consent, and perhaps most importantly, in strengthening sexual consent behaviors of some individuals, particularly men who participated in the F-iConsent program. It is important to note that the program impacted individuals in different groups differently, but the limitations of the analytic tests used to confirm these differences (e.g., small subsample size) must be considered when evaluating the program's effectiveness.

While the results of the program varied based on the sample and subsample of each analysis, it is critical to consider the qualitative feedback from intervention participants. An overwhelming majority of participants indicated they liked the program, and many suggested that they believed it would be beneficial for their fellow classmates if the program were to be disseminated more broadly.

Perhaps the best way to promote the further dissemination of the iConsent program is by referring to the sexual violence-related norms that surfaced during one of the focus groups. The appearance of these norms during the focus group discussion is indicative of the fact that such ideas are prevalent, even among women and particularly among college samples. Presenting a one-hour program designed to dispel such attitudes, norms, and beliefs in four classes at UGA may be a good start, but ultimately, widespread dissemination will be required to begin to truly move towards a culture that is not in the

least accepting of relationship and sexual violence and where obtaining sexual consent is expected rather than taken for granted.

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APPENDICES

A. List of Measures and Survey

Construct	Measure	Description of measure	Internal consistency in previous studies (alpha)	Reference	Internal consistency in current study (alpha)
Demographic characteristics		Items measuring gender, age, race, grades, sexual orientation, academic year, participation in athletics, Greek system, and area of residence (e.g., dormitory, fraternity/sorority house, apartment, etc.), and dating behaviors (e.g., number of dating partners in past year, current involvement in a dating relationship, length of most recent dating relationship)			
Sexual beliefs associated with risk for sexual violence	Sexual Beliefs Scale (No Means Stop and Token Refusal Subscales)	The Token Refusal contains 4 items to examine the beliefs that women often indicate unwillingness to engage in sex when they are actually willing.	$\alpha=0.71$	Muehlenhard & Felts, 2010	$\alpha=0.78$

Construct	Measure	Description of measure	Internal consistency in previous studies (alpha)	Reference	Internal consistency in current study (alpha)
Sex expectancies after alcohol consumption	Disinhibition Alcohol-Sex Expectancy Subscale	4-item scale assessing beliefs that alcohol disinhibits sexual behavior	$\alpha=0.79$	Dermen & Cooper, 1994	5-item scale $\alpha=0.90$
	UGA Risk Behavior Survey	1 item assesses the degree to which alcohol influences sexual behavior		Muilenburg, 2014	
Attitudes and norms about consent	Sexual Consent Survey – Revised	26 items to assess lack of perceived behavioral control over consent (PBC), indirect behavioral approach to consent (IBA), sexual consent norms (norms), and awareness of consent (awareness). Taken from a 39-item scale to measure 5 factors of consent: 1) (lack of) perceived behavioral control; 2) positive attitude toward establishing consent; 3) indirect consent behaviors; 4) sexual consent norms; and 5) awareness of consent.	$\alpha=0.87$	Humphreys & Brousseau, 2010	Awareness of consent: $\alpha=0.75$ Norms about consent: $\alpha=0.70$ Perceived behavioral control: $\alpha=0.84$ Indirect behavioral approach to consent: $\alpha=0.80$
Perceived self-efficacy					
Awareness of consent					
Behavioral approach to consent					

Construct	Measure	Description of measure	Internal consistency in previous studies (alpha)	Reference	Internal consistency in current study (alpha)
Dating violence victimization / perpetration	Youth Risk Behavior Survey	1 YRBS item measures physical dating abuse victimization. 1 item measures physical dating abuse victimization and perpetration. 2 items measure psychological dating abuse victimization and perpetration.		CDC, 2010	
Sexting behaviors	Sexting Behaviors Scale	2 items from 11-item scale to measure frequency of sexting behaviors.	$\alpha=0.81$	Dir et al., 2013	
Attitudes towards rape myths	Scale for the Identification of Acquaintance Rape Attitudes	12 items from 14-item scale to assess attitudes supportive of sexual violence in relationships.	$\alpha=0.94$	Humphrey, 1996	12-item scale $\alpha=0.86$
Sexual victimization / perpetration	UGA Risk Behavior Survey	3 items to assess unwanted sexual contact, nonconsensual sexual contact, and forced sexual contact		Muilenburg, 2014	

I Consent

Thank you for participating in this anonymous survey. You will not be asked to include any information on this survey that will allow us to link your responses to you as an individual. However, you will be asked to respond to four questions that will allow us to link your responses from one time point to another. These are questions like “What are the first two letters of your mother’s middle name?” and “What month were you born?” This information is unique to you, so while it will not allow us to link your responses to you, it will allow us to see whether people who complete the surveys change their responses over time. This will help us figure out if students’ behaviors changed at all over the course of the semester.

Please be as honest as possible when responding to these questions. None of the information you provide on this survey will be available to UGA. The doctoral student who asked you to participate in this study and her supervisor are the only individuals who will have access to your data, which is anonymous, so there is no way they can link your responses to you.

Mark your response using an X, check mark, or circle, unless question requests more detailed information such as letters of your mother’s middle name.

1. What are the first two letters of your mother’s middle name? _____
2. What are the first two letters of your father’s middle name? _____
3. How many older siblings do you have? _____
4. In what month were you born?

<input type="checkbox"/> ₁ January	<input type="checkbox"/> ₇ July
<input type="checkbox"/> ₂ February	<input type="checkbox"/> ₈ August
<input type="checkbox"/> ₃ March	<input type="checkbox"/> ₉ September
<input type="checkbox"/> ₄ April	<input type="checkbox"/> ₁₀ October
<input type="checkbox"/> ₅ May	<input type="checkbox"/> ₁₁ November
<input type="checkbox"/> ₆ June	<input type="checkbox"/> ₁₂ December
5. How old are you? _____
6. I am...

<input type="checkbox"/> ₁ male
<input type="checkbox"/> ₂ female
<input type="checkbox"/> ₃ transgender
7. I am a...

<input type="checkbox"/> ₁ freshman in college
<input type="checkbox"/> ₂ sophomore in college
<input type="checkbox"/> ₃ junior in college
<input type="checkbox"/> ₄ senior in college

8. What were your grades for the last semester you completed?

- ₁ mostly As ₅ Cs and Ds
₂ As and Bs ₆ Fs
₃ Bs

9. What was your GPA for the last semester you completed? _____

10. Which of the following best describes you?

- ₁ Caucasian / White ₆ Native Hawaiian or
Other Pacific Islander
₂ African American / Black
₃ Hispanic or Latino ₇ Other
₄ Asian
₅ Native American or Alaskan Native

11. I live in...

- ₁ on-campus housing, such as a dorm.
₂ a sorority or fraternity house.
₃ off-campus housing with friends or roommates.
₄ off-campus housing with my parents or other family members.

12. Are you a member of a university athletic team (not including intramural sports)?

- ₁ No
₂ Yes

13. Are you a member of a sorority or fraternity?

- ₁ No
₂ Yes

14. How many times have you been in a dating relationship?

- ₁ Never
₂ One time
₃ 2-3 times.
₄ 4-6 times
₅ 7 or more times

15. Are you currently in a dating relationship?

- ₁ No
- ₂ I have been dating for less than one month.
- ₃ I have been dating the same person for 1 to 6 months.
- ₄ I have been dating the same person for 6 or more months.

16. Have you ever had oral sex?

- ₁ No
- ₂ Yes

17. Have you ever had sexual intercourse?

- ₁ No
- ₂ Yes

Indicate the extent to which you agree with the following statements.

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
18. Girls usually say “No” even when they mean “Yes”.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
19. Girls generally want to be talked into having sex.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
20. Girls say “No” so that guys don’t lose respect for them.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
21. Women often say “No” because they don’t want men to think they’re easy.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
22. After a few drinks, I have sex with people whom I wouldn’t have sex with if I were sober.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
23. After a few drinks, I am more likely to do sexual things that I wouldn’t do when sober.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
24. After a few drinks, I find it harder to say no to sexual advances.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
25. After a few drinks, I am more likely to have sex on the first date.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
26. Alcohol usually influences my decision to have sex.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
27. I would have difficulty asking for sexual consent because it would spoil the mood.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
28. I am worried that my partner might think I'm weird or strange if I asked for sexual consent before starting any sexual activity.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
29. I think that verbally asking for sexual consent is awkward.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
30. I have not asked for sexual consent (or given my consent) at times because I felt that it might backfire and I would end up not having sex.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
31. I believe that verbally asking for sexual consent reduces the pleasure of the encounter.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
32. I would have a hard time verbalizing my consent in a sexual encounter because I am too shy.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
33. I feel confident that I could ask for consent from a new sexual partner.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
34. I feel confident that I could ask for consent from my current partner.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
35. Not asking for sexual consent some of the time is okay.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
36. Typically I communicate sexual consent to my partner using nonverbal signals and body language.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
37. It is easy to accurately read my current (or most recent) partner's nonverbal signals as indicating consent or non-consent to sexual activity.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
38. Typically I ask for consent by making a sexual advance and waiting for a reaction, so I know whether or not to continue.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
39. I don't have to ask or give my partner sexual consent because my partner knows me well enough.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
40. I don't have to ask or give my partner sexual consent because I have a lot of trust in my partner to "do the right thing".	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
41. I always verbally ask for consent before I initiate a sexual encounter.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
42. I think that obtaining sexual consent is more necessary in a new relationship than in a committed relationship.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
43. I think that obtaining sexual consent is more necessary in a casual sexual encounter than in a committed relationship.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
44. I believe that the need for asking for sexual consent decreases as the length of an intimate relationship increases.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
45. I believe it is enough to ask for consent at the beginning of a sexual encounter.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
46. I believe that sexual intercourse is the only sexual activity that requires explicit verbal consent.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
47. I believe that partners are less likely to ask for sexual consent the longer they are in a relationship.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
48. If consent for sexual intercourse is established, petting and fondling can be assumed.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
49. I have discussed sexual consent issues with a friend.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
50. I have heard sexual consent issues being discussed by other students on campus.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
51. I have discussed sexual consent issues with my current (or most recent) partner at times other than during sexual encounters.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
52. I have not given much thought to the topic of sexual consent.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
53. If a woman does not physically resist a man's sexual advances, it is safe for the man to assume that the woman wants to have sexual intercourse.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
54. If a woman goes to her date's apartment, she is letting her date know that she is open to having sexual intercourse.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
55. Any time a woman dresses seductively, she is indicating that she is willing to have sexual intercourse.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
56. If a woman initiates physical contact on a date, it is okay for her partner to assume she wants to have sexual intercourse.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
57. If a woman is saying "yes" to sexual intercourse with her body language, but she is saying "no" verbally, a man should listen to the woman's body language because it is more accurate.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
58. A person who thinks all sexual jokes about women are offensive is just overreacting.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
59. The extent of acquaintance rape on college campuses has been greatly exaggerated.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
60. It is not right for a man to be accused of raping his date if the date does not say “no” to sexual intercourse.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
61. It is okay for a man to joke around with his friends about forcing a woman to have sexual intercourse, as long as he never actually does it.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
62. When rape happens on a date, it is usually because the woman sends mixed messages to the man about what she wants sexually.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
63. A woman who gets upset when a man jokingly grabs her breast at a party is overreacting.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
64. A woman would probably think it was romantic if a man assumed she wanted to have sexual intercourse without actually asking her first.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

Indicate the frequency with which you have engaged in the activities below.

	No	Yes
65. Have you ever felt scared, put down, or controlled by a partner or someone you were dating?	<input type="checkbox"/> 1	<input type="checkbox"/> 2
66. Have you ever threatened, put down, or controlled a partner or someone you were dating?	<input type="checkbox"/> 1	<input type="checkbox"/> 2
67. During the past 12 months, did your partner or someone you were dating ever hit, slap, or physically hurt you on purpose?	<input type="checkbox"/> 1	<input type="checkbox"/> 2
68. During the past 12 months, did you ever hit, slap, or physically hurt your partner or someone you were dating on purpose?	<input type="checkbox"/> 1	<input type="checkbox"/> 2
69. Have you ever had sexual contact when you did not want to?	<input type="checkbox"/> 1	<input type="checkbox"/> 2
70. Have you ever had sexual contact when you did not consent or were unable to provide consent (e.g., you were drunk, high, or passed out)?	<input type="checkbox"/> 1	<input type="checkbox"/> 2
71. Have you ever been forced to have sexual contact?	<input type="checkbox"/> 1	<input type="checkbox"/> 2

Indicate the frequency with which you have engaged in the activities below.

	Never	Rarely (a few times)	Occasionally (2-3 times per month)	Often (2-3 times per week)	Frequently (daily)
72. How often have you <u>received</u> suggestive or sexually charged text messages, pictures, e-mails, or other messages over the phone or internet (e.g., Facebook, MySpace)?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
73. How often have you <u>sent</u> suggestive or sexually charged text messages, pictures, e-mails, or other messages over the phone or internet (e.g., Facebook, MySpace)?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

B. Qualitative Feedback to Open-ended Survey Items

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
F-iC Participants		
F	I liked learning about what exactly constitutes sexual violence. I learned how to help someone who may be in trouble.	Maybe more realistic. People are going to go out and get drunk and have sex. More realistic expectations for people need to be acknowledged.
F	I think the iConsent program was very effective in getting its message across; the speaker especially did a great job in her presentation. I liked that she actively involved the audience and presented the information in a way that was easily understandable by the audience. I've learned that abuse in a relationship goes past simply verbal and physical abuse.	I think the program was already very effective and engaging. Maybe incorporating more humor into the program would improve it; more videos would be great!
F	The little videos kept me interested and they were funny, which gave a lighter tone and made us more receptive to listen and engage in discussion.	Make it even more discussion based and allow the instructor to play devil's advocate.
F	I liked that it was interactive at the end with the jeopardy game	I'm not sure what needs to be changed but I didn't care too much for the speaker. She made it very awkward by asking

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
		specific people if they like certain sex positions. I thought that was an inappropriate way to try and get the class involved with the program.
F	It was very eye opening about college campuses and rape statistics.	Make it shorter.
F	It was interactive. We discussed real life examples that were helpful to determine what was sexual abuse, what was consent, and what was consent.	Maybe anonymously having people write down questions and those be answered to the entire class by the person lecturing. That way we can learn the answers to questions that directly affect us here on campus instead of discussing theoretical things.
M	I realized how it is incorrect to have sex with girls when they are drunk because they are not in the right state of mind to consent to sex.	I would not change anything. Good program.
M	learning about different types of sexual abuse was very informative.	i would show more videos and scare the students who are learning to take this more seriously.
M	I learned that it is incorrect to have sex with girls when they are drunk because they are not in the right state of mind to consent to sex.	I would not change anything because it is a good program.
M	I liked the whole thing about sexual assault and the consent	I think the program is just fine the way it is. I really enjoyed

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
	method. I learned something new.	it.
F	I did not realize how many rapes occur on campus and that most assaults come from people that the victim knows.	Get the presentation to work correctly
M	Fun, Everything, How not to be a rapist.	Nothing, it was fine.
M	I thought it was very informative and interactive. I learned that many more acts are considered sexual thought than I previously had known about. I learned how to ask my partner for consent and to not feel like it is awkward. The presenter was great!	I don't think anything can be improved. It is just difficult sometimes because the questions and situations are so subjective.
	Like all of the examples.	Describe scenarios and the correct response
F	It gave the facts straight forward.	Maybe make it a 2 day lecture
F	I liked the presenter's attitude; she didn't make the presentation awkward. It was useful to learn how subtle the difference is between sex and sexual assault.	Discussing the subjectivity of when someone feel assaulted or in danger can help solidify why consent is so important.

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
F	I liked that it was interactive. I learned that sexual violence is a lot more common than people think.	The presentation was very monochromatic, and didn't fit the screen well. Also, the Jeopardy part wasn't very helpful.
M	I thought that most of the information was rather straight forward. however it was good to be reminded of certain precautions that you should take.	I do not believe that 1/4 girls in college are raped. From the survey i took i think that the questions do not fully support the data that is being taken from the answers.
F	I thought the iConsent program was very interesting and eye opening. It made me aware of the different types of dating and sexual violence that I didn't even know was considered that. The aspects that were most useful I believe would be when the guest speaker talked about the use of alcohol and sex combined. It can be dangerous and in most cases not a good thing. College kids need to be more aware of this and cautious when making decisions like that. The main skills I learned are to be cautious and more aware of my surroundings and make good decisions when going downtown or to a party.	I believe the program is great and really informative. I just think the program needs to keep being shared around the campus to make college kids more aware of some of the harmful things that could occur.
F	The speaker was very straightforward. The most useful aspects were the speaker's presentation of some different ways to phrase certain sentences that might be awkward to say if you didn't know the right wording.	Give more examples of how to ask for consent without it breaking the mood or sounding awkward.

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
F	This information opened my eyes as I didn't know it was as much as a prevalent issue. I liked all of the statistics and scenarios she presented, it was essential to hear about those things.	Possible have the kids be more interactive and raise more discussion questions.
F	I learned a lot and it was useful information. I thought it was helpful to know what is considered sexual assault and what is not.	found everything you did to be useful, I honestly cannot think of anything that needs to change.
F	What consent was and how to get it.	Be more descriptive about alcohol.
F	I like that it covered all aspects of sex, such as raping, drinking, and actual sex and how iConsent can be used or abused in each situation	I honestly thought it was good how it was
F	I really liked the openness and the use of examples during the presentation. The instructor really made sure to get on a student's level, so we could relate to what she was saying.	The jeopardy game got to be a little long. Other than that, the presentation was really good.
F	Controversial issues were discussed. The material was interesting and I learned several new things.	There was a level of immaturity in the classroom and it was not handled very well. I felt like there was not a very good atmosphere for academic discussion on the topic.

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
F	It was interesting to see what is considered rape even though I don't think a lot of it is. In my opinion. That video was funny too.	Emphasize that there isn't a distinct between someone being raped and someone making a bad decision. Just because my partner of 5 years doesn't ask to have sex with me before he does, doesn't mean that I've been sexually assaulted. Smoking weed does not make you more likely to be a perpetrator of sexual assault. Have you ever actually smoked weed? Since when did it make you want to rape someone...? It's not like you're out of control of yourself at any point.
F	Helped me understand what exactly sexual violence is and how to spot it. Learned how to help someone who has been sexually violated.	Thought it was overall a great program. More interactive though with more situations to talk through.
F	I learned what people consider to be rape/sexual violence. I was not aware of some of these situations.	Make it more realistic.
F	I liked the fact that it was interactive. I think the jeopardy situations helped because it allowed the audience to have a more personal spin on the situations.	I think there needs to be more situations the class can read and discuss, but overall I think it was a good program and presentation!
F	It explained a lot of gray areas that I think most college	Some examples are unrealistic and hard to relate too.

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
	students face often.	Maybe update certain examples.
F	The information about what exactly consent is and the specifics of when and how to obtain consent was useful information. Also, the statistics are very eye-opening.	The speaker mentioned that consent can be smooth in the moment, but i don't think people were really buying it. More specific examples would be helpful, and convince others that it is possible to ask for consent at all times needed without causing awkwardness and ruining the moment.
F	It was an interesting way to inform students about sexual assault. The professor was engaging and knew how to connect with the students. The professor was extremely engaging! I learned that you must have verbal consent every time before engaging in sexual intercourse even if you have had the same partner.	Use more examples where girls are committing sexual assault so the program does not look biased to any gender.
F	The iConsent program is a great way to inform college students about what it is going on in their communities. Great Program	Nothing at all
F	What i liked about the iConsent program is that it brought awareness to the fact that many women are being sexually abused whether they know it or not. i think the iConsent program did a good job at making people aware that both	I think one thing that could be improved from the iConsent program would be to stress the fact that it goes both ways. women and MEN can be abused. Also i think that many times women exaggerate the fact that they were "raped"

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
	women and men are victims of dating violence	only because of the fact that they regret what they did. Maybe you can touch on that? i think that the IConsent program does a very good job with delivering their message.
F	All the data given and examples clearly explained what the program was all about. I have learned exactly what dating violence and sexual assault are in all circumstances.	I believe the program was done in a great presentation. The topics were clear and easy to follow.
F	I think that the program was presented in a relevant way that was easy to understand and enjoyable. Usually the information within the presentation can be awkward, but the guest speaker was very personable.	I think the presentation was pretty well put together. I'm not sure if there was anything that I would have changed.
M	Learned what consent truly was and there was interesting information.	Present more situations so that they can be discussed. Also talk more about alcohol and consent.
M	It was an interesting lecture, and the statistics were helpful to understanding the material.	I think it was well put-together and have no suggestions.
F	The speaker talked about dating violence and alcohol in an empathetic way and made the presentation easy to relate to.	The consent video could be shortened.

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
F	I just like that idea of the whole program, in general. Sexual assault is such a pervasive part of the party culture that develops in and around college campuses...but it's almost become so normalized that we don't ever stop to think critically about just what exactly is going on and how we can prevent it. I've heard that the majority of sexual assaults occur during the first few weeks and typically involve freshman females...I just wish that a program like this would be a required part of freshman orientation so that women and men could be better equipped to navigate their sexual experiences more proficiently.	When we talked about victims of sexual assault, we talked about what the *victim* could have done to not get into that situation and what the *victim* did wrong that ultimately resulted in the sexual assault. Often, when we hear about a sexual assault, the first question we ask is: Was there consent?...but then the very second question usually sounds something like, "What was she wearing? How many drinks did she have?"--questions that takes the focus of the blame away from the perpetrator and places the blame on the victim. I guess my biggest issue was that I felt like there was a little bit of that language and discourse of "victim-blaming" in the presentation...but, I mean, I guess it would be really hard to give a presentation without using at least some of that kind of language and rhetoric, particularly considering that we live in a society where such thought-processes are so pervasive and the language we use when talking about sexual assault has become so entrenched in the ideology of "victim-blaming."
M	The aspects teaching people that consent has to be given verbally and not just by body language. I learned ways to deal with a person who has been sexually assaulted. I learned a lot about what dating violence is and when sexual assault is sexual assault. The statistics given in class really helped put into perspective how "much" dating	It is pretty useful the way it is. Just by continuing to stress the importance of getting consent. Can't think of any.

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
	violence is around us.	
F	the statistics	i like how it is
M	I liked how it was geared towards people our age. Obviously, the problem isn't only with people our age, but the program showed just how big of a problem this is for college students. I learned the ins and outs and sexual and dating violence and can know apply that whenever I need to	I really liked the program and can't really think of anything that I would personally change about it.
F	I liked the fact that she taught us such a broad range of information. I didn't know that dating violence could be so broad. I learned that I need to talk to my boyfriend if I am ever uncomfortable.	I think it was great. Maybe if you changed the survey at the end to make it different than the one at the beginning. I felt it was repetitive.
F	I learned some interesting statistics and I learned about some websites to consult if I ever need any help with a sexual assault.	I liked that iConsent program and I thought it was very useful in educating me on what sexual assault was as well as dating assaults.
F	I think the most useful aspect of the iConsent program was having all the different numbers and resources to have handy if there ever is a situation where I would be involved or know someone to be involved. I learn many skills to avoid being a victim to dating violence, and learning ways	One thing to improve the iConsent program might be to get more audience participation? People say an effective presenter keeps the audience peeked in interest by showing entertaining videos. It might be more effective to make the audience feel as if they could also relate more to the topic.

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
	to avoid the chances of being sexually assaulted.	
F	I learned the correct way to ask and receive consent from a partner. I liked that we saw a lot of statistics from college students and it was very interesting to see what they said.	I think there should maybe be a few videos of real people to show the emotional consequences.
E-iC Participants		
M	I didn't know that 1 in 4 women are sexually assaulted in college.	Probably best not to make us do it out of class. I have 5 exams this week and no time for this.
F	To make young girls more aware	Make it a part of UGA orientation. I was raped by a close friend my sophomore year
F	I liked how it informed us of the reality of sexual abuse in university. Also, that sexual consent is a difficult thing to show.	Keep it targeted and related to younger people.
F	I like the inclusion of videos and examples of domestic violence and sexual assault. It helped define the topic by giving real world examples.	I believe it is a good program; however, before enrolling in my intro to health class, I was unaware of the program. So to improve the program, I would suggest educating students more by doing various presentations at dorms, Greek houses, and other student events, just so the campus is more aware of the topic

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
F	I liked how it informed me about the dangers of sexual assault and it surprised me to learn so many women would be raped before the end of their college career.	There could be more advice on how to prevent sexual assault.
M	Didn't like it.	
F	I learned what to do if seeing or being involved in an unsafe relationship. The videos were entertaining and helped to draw everything together.	The PowerPoint was unappealing and the reading monotone. Adding spice and originality to the slides would keep the watcher more engaged.
	I love the fact that it raises such awareness to the instances of rape occurring on college campuses all over the country	I feel like the iConsent program is actually superb and cannot think of any factors that would make it any better
F	The percentages about dating violence were the most interesting. Also, the definition of consent was very informative.	Adding a little bit more information, or adding a personal story from a girl or boy that have been involved in dating violence would make a big impact on the program.
F	It was interesting that one out of four women in college will be sexually assaulted.	I think that the program was very good. I don't think that any changes need to be made.
F	I really enjoyed the fact that it was very informative yet not too dense. It kept my attention the entire time. The videos	The only thing I can think of would be to have the narrator not be so monotonous. Although it is a very serious matter,

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
	were great because it gave us very recent examples which helped us relate to the topic better than an out dated source. It was also very easy to understand. I really enjoyed it.	monotone can cause people to lose interest. Over all though I really did think the program was very well presented.
F	I thought the sexual consent video with the lawyers was entertaining and made a good point about the importance of talking about what you are and are not comfortable with doing sexually in a relationship.	iConsent could go in depth more about what to do in a situation where someone is getting raped and how to escape perpetrator.
M	Having the forward button in the video to forward to each section of the video	Maybe add a rewind option that goes back to the previous section instead of the start of the video
F	I thought that it was beneficial to see all the different statistics to really bring light to the situation. It doesn't seem that common but there are so many different forms of abuse that it sometimes goes unnoticed. The sexual consent information was interesting too.	No suggestions to change a thing
F	I liked how the questions showed that both women and men are victims of sexual assault.	You can make the questions more scenario based instead of statistics
F	I enjoyed the video examples rather simply reading the information.	Don't have any complaints. I thought all the media used was extremely helpful and I think it is an excellent program to inform others.

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
F	I didn't learn anything because I didn't find the answers.	Be more specific with your questions.
F	It helped me realize how serious sexual assault can be.	I think it was great the way it is.
F	I liked how simple the information was and each slide had adequate information.	I think it was just great.
F	I liked the examples and pictures.	Nothing
M	The videos really helped you see the actual big picture. I liked that it informed me on the topic of having consent before any sexual activity. I liked that it taught me more about the consent process that is necessary before any sexual action. This was very informative and useful to know. I liked learning more about the consent aspect of participating in sexual activity. I was not aware of it and very glad I was informed.	I think that it is very good and is very useful! I think to have even more statistic to back up the things that are said. It was great though! I think the program could improve by telling us more statistics and facts about the things that were told.
F	The whole PowerPoint was useful. The part that stuck out the most was the video about different ways to ask for sexual consent.	The program was very useful and helpful. It should be kept as is.

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
F	The program was very informative with facts that I was unaware of in terms of dating and sexual violence. I learned to look out for the signs of violence so I can better take care of myself and the people around me.	The program is good as it stands.
F	The iConsent program was very informative about sexual violence and the guest speaker provided some information I had never heard before. The quiz truly got me thinking about how serious sexual violence was and how it normally goes unnoticed. I learned that if I ever get in a bad situation, no matter how small I think it may be, I should tell someone.	There could be more personal stories shared from people comfortable speaking to others about their experiences in order to show students that it really could happen to them.
M	The section on how to continually ask for consent was great and very helpful. I also learned that doing this can give your partner the sense that you respect them and also improve your sex life.	I was a little worried by the consent video with the lawyers... I understood that it was supposed to make light while informing, but I expected more follow-up and clarification on that video about why certain parts (coercion, etc) were not ok.
M	Very informative, and eye opening.	make it mandatory
F	I thought the video was very clear and it was easy to understand and pay attention. I thought the aspects of	Maybe beforehand let the students know how long the video is, so that we can find a good time to watch the entire

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
	defining what is sexual assault were most useful because I did not know that information before. I had no idea how common sexual assault was. I learned a few skills such as how to deal with a friend who tells you she had been sexually assaulted. You must tell her to let someone know.	thing.
F	It was useful in learning more about dating a rape and what is considered rape.	maybe more real life examples
F	It was interesting to learn how many people are victims of sexual assault. It was useful to know that most people are raped by someone that is close to them.	I thought it was a good program
M	It helped me to become more informed and educated about sexual consent and dating violence.	More statistics and data about dating violence and sexual consent could be used to explain how much of a problem these two terms are causing for our society to even strengthen the program.
F	the videos	maybe include personal testimonies
F	I think the general aspect of verbally asking consent is useful. I learned that how important it is to ask consent and to always make sure the other person is completely	Make it more interesting and expand the topic honestly. I think the consent part is a very small part of the problem with sexual abuse. If you're going to get sexually abused,

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
	comfortable in the situation.	your consent clearly is a concern of the abuser, so instead. This should focus on what to do once you realize your consent doesn't matter to the person who is performing the act.
M	Learned a lot in a little amount of time. Being verbal with a young lady can also be used as rape.	more videos or examples of the ways you can get in trouble by words and actions when it comes to sex etc.
F	Very informative and easy to pay attention to.	Victim testimonial
M	I thought this program was very informative. I would say the information about the frequency of sexual assaults was the most shocking and useful to know	I believe this program is very good as it currently is. I believe it would be more useful if there was more information about how to prevent these situations and how they can be avoided
M	I learned a lot about sexual consent, and I believe that the parts describing the helping of others are the most useful. I learned that I am supposed to try to help anyone that I can if they are in an abusive relationship.	By adding some scenario video clips, the iConsent program would be far more useful. It would give people a real life example they could relate to a little bit better.
F	The videos incorporated were very good. Gave a perspective on the entire topic. I learnt how you should talk to someone if they were sexually assaulted	Maybe add more real life example or situations where sexual abuse occurs because sometimes people don't know that not giving verbal consent even to your partner is sexual abuse.

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
M	I learned about new ideas concerning sexual consent that I found beneficial.	I think it is good.
F	I think the aspects that were the most useful was the consent area. I did not know there were various ways to give consent to you partner without verbal expressing it. I learned how to give consent to my partner and what is really considered sexual assault.	I honestly feel that the program was very interesting yet informative. I like it the way it was and the videos in the midst of the program were highly entertaining.
F	It was short and to the point.	I can't think of anything.
M	Very straight forward and easy to understand. Nice reading voice. Liked the options for keeping consent sexy I liked the layout of the program. It provided useful information, and the program got to the point.	The videos were malfunctioning for me. Playing over other slides (so hear the VO and the video). May just be glitchy. I don't like the videos. I think the bullet points are more effective in learning, and the bullet points are not as corny.
M	The un awkward was to go about getting consent	Add more videos applying to college age students.
F	iConsent was useful because the powerpoint that correlated with the listening activity was not just verbatim what the voiceover was saying. It added more to the activity then just	For this specific instance, it would be convenient if you could access the pdf from the quiz page.

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
	reading along to the voiceover.	
F	I liked the video examples. They helped me to better view these real life situations.	I thought it was very useful and realistic.
F	I like that this issue is being addressed, and that it was further explained what sexual assault is defined as, because I think that the majority of college students do not know that.	I think it should be required prior to beginning at UGA to go through this program.
F	I think that the program does a good job of contradicting popular beliefs about rape and sexual violence. It reminds us that it can happen to anyone and that it is not the victim's fault.	Aspects that could be changed to make iConsent more useful, I think would be to further explain what is considered sexual assault especially when alcohol is involved. I feel like there is a fine line here and that many are confused on just what is considered crossing this line.
F	I like how all of the information is easy to follow and understand.	It may be useful to go into more detail in certain questions asked.
F	The iConsent program was every informative and easy for college students to relate to. After watching the video, I noticed some behavior that I see in my friends and peers every weekend so I will be sure to look out for abusive behavior, whether directed at myself or someone to	The iConsent program is very informative but I think more college students need to hear about it. Sexual violence is not taken as seriously as it should be and the word needs to be spread faster.

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
	<p>somebody else.</p> <p>I personally liked the humorous example videos provided. And what i thought to be useful is that certain things that i did not consider to be abusive can be very abusive. Therefore during a relationship be thoughtful of how you treat your partner and you are being treated.</p>	<p>I think the program should relate more imagery to the students (add more pictures?), I felt like reading the slides than actually thinking or visualizing during the presentation. Additionally asking more rhetorical questions during the presentation may allow viewer to relate to the topic and stay within the subject discussed.</p>
F	<p>I liked the phrases which i could use to ask people if they need any help.</p>	<p>You could give more examples and have more videos in order students understand whether they have abusing problems.</p>
F	<p>I learned a lot. I did not realize how many people have been effected by sexual violence.</p>	<p>The video was a little dry and boring. It was filled with good information but was presented poorly.</p>
F	<p>I just liked that it reinforced information that we need to know about sexual consent and emphasized the importance of it.</p>	<p>I believe that it is fine the way it is. I think it was important for the visual examples to be included.</p>
F	<p>I liked that the iConsent program was quick and to the point. I learned what qualifies as sexual assault and how to stop it</p>	<p>Have a quick summary of key facts at the end as a refresher.</p>

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
	<p>if I see it happening.</p> <p>I like the video element of it and the various examples given within it to explain sexual consent. It is very straight forward and keeps this serious topic simple and easy to understand.</p>	<p>Explain preventive ways to stop sexual violence from happening instead of just providing risk factors and statistics.</p>
F	<p>I loved the videos in the iConsent program. It is entertaining and very informative.</p>	<p>I think the audio voice-over was helpful sometimes; however, it was a bit annoying when I am trying to read the slides. I think I will remember the information better if I read the material myself.</p>
M	<p>I think the most useful aspect was about what you should do if you were sex raped. Those type of things are a little bit different in my country (Brazil) because students usually are close and live with their family during college. So, those rapes are more difficult to happen. But I think the idea of sexual consent with the partner is interesting.</p>	<p>I think the program is really good and it is trustful. In my opinion, the program does not need changes.</p>
F	<p>I liked the videos we watched, especially the one about consent. What was most useful were the questions and comments you could say to a friend or someone you know who has been sexually assaulted. I learned how to react to their situation in a non-judgmental way.</p>	<p>One way to improve would be to give more real life examples of people who have not consented and have consented, just too see the outcomes and affects that would take place.</p>

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
F	I think it was interesting to hear about the frequency of events like this, especially in a college atmosphere. I was unaware of the frequency before and what all was considered sexual assault.	I really thought it was an informative and easy to follow program overall. There isn't anything specific that I would suggest to change.
F	The videos added a nice mix and were not boring. The presentation was clear and easy to understand.	Maybe something a little more visually stimulating than a basic powerpoint.
F	I liked how informative the program was. I had no idea that 25% of women in college experience a rape incident. The videos were good tools to use.	I really liked the program. Maybe including examples that happened here at UGA could help enforce the idea of how prevalent sexual assault and abuse actually are here.
F	The best part of the program was the videos. Being able to see real-world examples of abuse, like the MTV video, and then putting consent in a humorous way is much more effective than simply stating facts and figures.	Adding more real-world examples and videos would make it more entertaining and easy to learn. The more pictures and physically appealing the slides are, the more I will gain from them.
F	i liked it.it was easy to follow and easy to learn information	i would make the questions following a short video for each topic along with words so you see hear and then act on it
F	It's ok.	give more real life examples

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
	It was very informal. I did not there was so much involved in sexual consent. It definitely encouraged me to be more aware and prepared me for possible future situations.	It was hard to read the slides and see the videos because the browser wasn't big enough.
F	I liked that it explained it is not just men that predators. That it explain examples of coercion and what is okay and what is not okay about consent.	To make it more interactive along the way.
F	Knowing when to say no and what is right is important with sexual consent	Apply it to both men and women circumstances and also what to do for the after effects of thinking you were sexually abused or coerced.
F	I think its important to know your options and rights in the event that a sexual assault happens to you. iConsent does a good job of getting the word out.	I know there is already a required video on sexual violence and sexual health on Georgia's website before you may enroll for admission, but maybe we could incorporate the iConsent in there and require it every year not just for entering freshmen.
F	I really enjoyed the videos. They were a nice change of pace from the slides. I learned the difference in verbal and nonverbal consent.	More visual examples would be beneficial. Also more videos to keep it from being boring towards the end.
M	I really enjoyed the videos. They were a nice change of pace from the slides. I learned the difference in verbal and	More visual examples would be beneficial. Also more videos to keep it from being boring towards the end.

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
	nonverbal consent.	
F	I liked that the iConsent program was very relevant and informative. I learned to not be silent & help others to know that abuse is not okay.	I thought it was useful.
F	What I really liked about the iConsent program was that it was clear and concise. The information was straight forward and easy to understand. The example videos provided us a better idea as to what to look for when it comes to sexual content. I also like the last part of the iConsent program where it gave examples on what we should say if we witness or suspect someone of being a part of sexual violence. It gives us an idea as to how forward we need to be.	Overall, the iConsent program is great and it is very simple for people to use. Possibly having some type of interactive portion in the program could have been interesting, such as different scenarios being listed out and providing us with choices we can choose regarding how to respond to the scenarios.
M	It used humor as a way to make the information more memorable and relatable.	Provide examples with imaginary couples to better get the point across.
F	The information presented was interesting and very concise as to what matters most about sexual violence. The different ways of coercion were most interesting to me because I have never thought of many of them before.	I think it is great just like it is. The program is very easy to use and understand. The information and statistics are very interesting.

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
F	I enjoyed the video clips added to the presentation.	Maybe have someone lecture the PowerPoint, and play the lecture instead of just having someone read from the slides.
M	The videos were helpful in describing what the slides mean. I liked the way the video was set up. It was easy to watch and understand.	The slides are kind of long and there could be more interactive parts or videos to go along with the slides.
M	I learned things about consent that I have never heard. It gave me knowledge that I may not have gotten otherwise.	The way that it was presented was already very neat and precise.
M	Tools for asking for consent without being formal but still being open and very clear with your partner, the questions were realistic and not too awkward or uncomfortable, just knowing how to approach these situations can make both parties safer	It could be more interactive and incorporate the quiz as the module is playing, a lot of the facts were not very well known and there could be answers as to why each one is correct or incorrect
F	Easy to understand and well-organized format.	Effective program, keep the videos and update as needed.
M	The most useful aspects from the iConsent program is to show the numbers that describe the reality. The percentage of the rape activities, relationship related to violence, all of these data express how the reality is and we are more close to it than we thought. Another important point is the consent	The slide show presented is already very good. I think one only thing that could be done to make it better, besides using parallel videos about some situations, create short videos for better make an example of the situations, and that could also make the students more similar to the

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
	for sexual activities that is needed.	situations.
F	I did not know that having sex while intoxicated was considered assault.	The clips were a nice, funny touch but overall it was still a little boring and could maybe use a more exciting voice!
F	The program offered shocking statistics that I was not aware of. I did not realize that dating violence is a big issue among the college population. The information about what to do when sexually assaulted is very useful. In addition, I learned of ways to approach someone that has been a victim of dating violence.	I think the iConsent program is good. I think the program should be more interactive.
F	Interesting information and relevant to me because I'm a college female. Will definitely keep some of these topics/answers in mind and apply them to risky situations!	I wouldn't really change anything. I thought it was pretty straightforward. If you were to change anything maybe add more "real life" scenarios as questions and ask students how to go about them the right way, I feel like that's where most college students struggle.
F	Learning exact examples of what different things such as coercion and sexual assault was helpful and learning how best to speak up for someone else was really good.	It was all pretty good...no complaints
M	I learned that there are so much you can do to limit the amount of sexual assault.	We can just make it more readily available for people to access.

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
	<p>I liked that there was a wide variety of questions and it didn't all focus on one type of sexual assault. I also liked that it focused on both sexes instead of just one.</p> <p>its creative and appealing for younger people. making it personal was useful and i learned that most people know their attackers</p>	<p>I really didn't see much area for improvement. I liked the program. Maybe it would be good to add more about how both sexes can be at risk for sexual assault and rape. Even though there is material covering it, I feel as though people still don't realize that men are at risk as well as women. give some more information and maybe a real account from a person</p>
F	<p>I found it very informative and useful, and learned ways to recognized signs of sexual assault.</p>	<p>Providing more scenarios involving college aged students, possibly geared to each campus more specifically.</p>
F	<p>I found it very informative and useful, and learned ways to recognized signs of sexual assault.</p>	<p>Providing more scenarios involving college aged students, possibly geared to each campus more specifically.</p>
M	<p>I learned more about consent and how one should get a definite yes before doing any sexual activity.</p>	<p>Have more true and false questions for the sexual abuse myths and truths</p>
F	<p>I liked how it was easy to follow and understand. The most useful was the information that was in bullet format. I learned about consent throughout sexual behaviors, like</p>	<p>The videos were difficult at first, but it may have just been the computer. Besides that, everything was great.</p>

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
	during sex.	
F	I loved the videos! I thought the one about sexual consent with the lawyers was very funny but also informative.	I honestly thought it was good, it wasn't too long i can't think of anything i would change
F	I liked the videos (especially the teen mom one) because it showed that women can actually be the perpetrator, and that consent should be mutual.	I actually thought this program was very cohesive, easy to understand, and overall good. Maybe this program should be more widespread throughout UGA, such as mandate incoming freshman to take this short course.
F	I liked the way that the quiz was set up and that there weren't too many questions, but the point was still made.	If it was more visually appealing it would be more enjoyable to take.
	Even though, majority of my classes discuss "Date Violence," I enjoyed iConsent program. I also believe that encouraging individuals to speak up if they see something versus waiting for someone to speak up for their own sake, reduces victims of Date Rape. I learned that even if we do not know the individual, it's important to show them that we all, as a society, cares.	I believe this program as a tad bit too long. I know there is a lot of information that was presented; however, I would like to see another interactive approach. Perhaps, this program could provide more clips.
F	I thought it was helpful in informing people on a lot of information they may not have known before. With dating	I thought that the program was actually designed very well. I thought it was informative and concise and was helpful in

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
	violence, I feel like most people would assume that it is just physical things. I was surprised to find out that it included privacy invasions or jealousy issues. I feel like most people would just assume that violence meant physical abuse. I also thought this program was very helpful in detailing what consent means. I feel like most teens or college students would assume that as long as their partner doesn't say stop that they are consenting.	using humor to appeal to a specific audience. I think it could be made more useful if it was more accessible to its audience. I thought it was very helpful and informative, but the only problem is that the audience it caters too may not know about it. I think it would have great results and improvements in consent and sexual violence if it had better publicity.
F	I liked that it was verbal and something to read along with. It seemed to help get the point across a lot more effectively that way.	I really liked the YouTube videos, maybe having some more personal experiences in the PowerPoint can really help drive the message home as well.
F	I enjoyed how the program described consent as being sexy. I'm glad it listed out resources that students can access if they are a victim of dating violence. I learned different questions that could be asked to get consent from my boyfriend.	I found no problems with the program. The PowerPoint worked just fine, the slide changed when necessary, and all the video links worked properly. I enjoyed the iConsent program.
F	I liked the videos and the easy to read bulleted lists.	Make the layout more visually appealing.
F	I really enjoyed this. I think it was important to know about dating violence and consent. Many people do not understand what consent is and might unintentionally push their partner	I think it is important to really explain what consent is and go over very specific incidents. You could target the

Sex	Describe what you liked about the iConsent program. What aspects were most useful? What skills did you learn?	Describe how we can improve the iConsent program. What aspects could be changed to make it most useful?
	to do something. Many men do not understand that having sex with a drunk girl is wrong, but do not see it as rape.	situation to different audiences (boy vs girl)
M	Some of the skills I acquired was being able to recognize signs of sexual violence and identify risks or factors that put one at a higher risk/chance.	A lot of the scenarios were based on girls. I think if there was portions that specifically identified certain situations regarding females and males we could point out factors that aren't as obvious and it could be beneficial to be quizzed on those because sometimes we don't think alike. (men don't think like women, women don't think like men, etc.)
F	I liked that it was tailored directly to college students. It was helpful to learn how to help a friend who gets placed in a bad situation due to sexual assault.	It seems to assume that every college student is having sex, which is not useful. Also, I did not like the song at the end of the video about verbal consent.

C. Focus Group Transcripts

Focus Group 1

November 2013 / Start time: 1:30 pm, End time: 2:28 pm

Facilitator (bolded) & Kellie, Emilee, and Meagan (Pseudonyms; Participants)

[...] Talk in middle of other's talk

... Pause

1 **Facilitator: So you both participated in the iConsent program, right?**

2 Kellie: Yes.

3 Emilee: Yes.

4 **Facilitator: Okay. Are you both in Class B?**

5 Emilee: Mmmhmm.

6 **Facilitator: Okay, so I know that you guys were there in person, right?**

7 Kellie: Yes.

8 **Facilitator: Okay, so this session is being audio recorded. We'll use your real**
9 **names for now, but when I transcribe the recording, I'll change them. So only**
10 **you two and Nancy – this is Nancy, she's my note-taker – will know that you**
11 **guys were here, and your names will never be used, will never be written**
12 **anywhere, and I'll delete all of our email correspondence. If you are**
13 **uncomfortable answering any of the questions that I ask, which this is not as**
14 **uncomfortable as the program itself may have been – because I know we talked**
15 **about some pretty descriptive things in there, right? If you're uncomfortable**
16 **with anything, you don't have to answer. There is a small risk of breach of**
17 **confidentiality, and basically that risk is between you two, so if you leave here**
18 **and you say "Oh, so and so was in that focus group with me..." then, that is the**
19 **risk. But it's a minimal risk because I've discussed with both of you that this is a**
20 **confidential discussion we're having today. And you...asked for a Target gift**
21 **card, right?**

22 Kellie: Yes.

23 **Facilitator: Okay, here you are. Alright, do you have any questions for me before**
24 **we get started?**

25 Kellie, Emilee: No.

26 **Facilitator: Okay, so again, I'm going to ask you some questions about the**
27 **iConsent Program that you guys participated in. And feel free to be very**
28 **verbose since it's just the two of you. So first of all, I just want to get your**
29 **perspective generally about the program – did you guys like it, did you not like**
30 **it, were you uncomfortable because there were guys in the room with you, um,**
31 **were some of the topics that I discussed uncomfortable? So just – general – give**
32 **it all to me now.**

33 Emilee: I liked it. I didn't really feel uncomfortable because we were all in the same
34 position. I don't know – we're old enough to discuss that kind of stuff now, so I don't
35 really think it was a big deal.

36 **Facilitator: Okay.**

37 Kellie: I liked it, too. I thought it was really informative and it kinda changed my
38 perspective on a lot of things, so that was good. And as far as being uncomfortable, I
39 didn't think it was too – and if something was uncomfortable, it was good because it
40 was something that needed to be brought to our attention, so it was good. Overall I
41 really liked it. It was interesting. It was our most interesting class, so that was good.

42 **Facilitator: Okay. Tell me what you guys thought was so interesting about it.**

43 Kellie: Well, I liked when we played the Jeopardy game a lot at the end because it was
44 like real life situations, so that was interesting. And just overall the topic is kinda like
45 a – kind of a taboo topic, so you don't really hear much about it, so that was good.

46 Emilee: Yeah, and it's something that everyone needs to learn about, but it wasn't like a
47 boring lecture. It was like interactive and exciting, I guess.

48 Kellie: Yeah, the fact that you like asked us questions and we had to talk

49 Emilee: And hear other people's reactions as well.

50 **Facilitator: Okay. So, just out of curiosity, because I'm trying to figure out**
51 **whether the program could work well online versus in the classroom where I**
52 **was able to come and talk to you guys – um, and you know sometimes it's**
53 **difficult to get people in such a big class – [Door opens] oh, hi.**

54 Meagan: Sorry I'm so late.

55 **Facilitator: Okay, that's fine. Let me back up just a little bit and let you know,**
56 **Sarah, what we're doing right now. This is the consent form which I need you to**
57 **sign before we jump back into it. So basically, we're audio recording everything**
58 **today, and we can use your real name today, but no one will ever hear this audio,**
59 **and when I transcribe it, I'll be sure to change your name so you can't be**
60 **identified. So everything that we talk about today is confidential, so just keep in**
61 **mind that your classmates here who participated in the program and try not to**
62 **talk about anything we've talked about here today – or, you can talk about what**
63 **we talked about, but don't mention any names of other participants. If you're**
64 **uncomfortable with any of the questions I ask, you don't have to answer them.**
65 **And I owe you a Target gift card, right? Okay, so we'll be out of here by 2:30.**

66 Kellie: Okay.

67 Meagan: Okay.

68 **Facilitator: And that's about it for that. So, basically, we really kind of just got**
69 **started and I was just asking Kellie, right? And Emilee, and this is Meagan – I**
70 **was asking about just a general perspective about the program. So you**
71 **participated in the iConsent program, right? And you were in Class A?**

72 Meagan: Class C

73 **Facilitator: Oh, Class C? Oh, great! So you did the electronic version of the**
74 **program, right? Well, that's great. That gives us a better dynamic I feel like. So,**
75 **Kellie and Emilee both participated in the in-person version, so this will help me**
76 **to understand which one kind of works better and the pros and cons of each. So**
77 **before we go back to the conversation that we were having, let me just ask you**
78 **kind of broad overview what you thought of the program.**

79 Meagan: I thought it was good. We had a lot of sexual consent stuff in the class – it
80 seemed to go together, but um, I think I was surprised by things that sometimes
81 people don't consider sexual violence I guess.

82 **Facilitator: Okay. So tell me a little more about that. What were you surprised**
83 **about in particular?**

84 Meagan: One of the things was that like over six month relationship thing where people
85 stop asking for sexual consent. I thought that was like – I mean, if you're in a
86 relationship, you should ask for consent, but I understand why and stuff like that.

87 **Facilitator: Okay, so that's great. Well I'm glad to hear that you realize that and**
88 **were surprised that maybe other people didn't.**

89 **Okay, so again, I'm just trying to figure out whether this program can take**
90 **place online and in-class, so in-class we kind of have a very different dynamic.**
91 **I'm able to give some very specific examples of things that could happen in real**
92 **life and you know, why you absolutely have to give verbal consent vs. non-verbal**
93 **consent and things like that. So I kind of just want to get a good idea from you**
94 **guys what the pros and cons of each version are. So let me back up just a little**
95 **here and ask first of you who participated in the in-person version of the**
96 **program whether there was anything about the program that stands out in your**
97 **mind about it – about anything we talked about.**

98 Emilee: A specific topic we talked about or just like what we covered in class?

99 **Facilitator: All of it.**

100 Emilee: All of it? Well, I remember that you made it fun so that it was like engaging –
101 and it was not a fun topic, but you made it so we could like laugh about it and make it
102 not so serious. And we had football players in our class so you could use them as
103 examples because their lives are different than ours, [Laughter.] and I thought their
104 examples – like a guy was talking about how a girl wouldn't leave his house.

105 **Facilitator: Right.**

106 Emilee: And we were talking about how the girls always want the football players.
107 [Laughter]. You couldn't do that online.

108 Kellie: Yeah, I remember that you like had the PowerPoint like the computer program,
109 and you were going through it, and what was on the slides was pretty – you know,
110 like – pretty like set in stone information, but when you were talking about it, you
111 were putting it into like a real life situation so that it was easier to understand from
112 our perspective. I really liked that, and I think that maybe, if that was online, it
113 wouldn't be as engaging and it wouldn't be as interesting because you made it so –
114 you know like incorporating the football players and making it into real life
115 situations.

116 **Facilitator: Okay, so before I ask you about that same topic, I wanted to ask you**
117 **again, Emilee, about how – you mentioned that I sort of made it humorous.**

118 Emilee: Mmmhmm.

119 **Facilitator: So some of the feedback that I've gotten through the quizzes that you**
120 **all took online is that maybe it wasn't appropriate to make it humorous. But I'll**
121 **admit that I didn't get much feedback like that, but I understand that it could**
122 **make people uncomfortable that I'm making a very serious topic humorous and**
123 **so I just want to get your feedback about what you thought about that. Do you**
124 **think it's useful?**

125 Emilee: I mean, I think it's useful for our age people – I mean, you have to keep
126 everyone engaged because you know, we have phones and we have so much stuff like
127 distracting us, so if you didn't make it fun and engaging and if we weren't having a
128 good time, then people would just kind of zone out and not give it any consideration,
129 but just like making it a real situation – I mean, life's not always super serious.

130 **Facilitator: Okay.**

131 Kellie: Yeah, I agree with that. I think it was better that you were making it humorous,
132 and I didn't think it was offensive or anything like that, and I think the only people
133 who would be like if that situation applied to them, then like, I'm sure they wouldn't
134 find it humorous.

135 **Facilitator: Right.**

136 Kellie: But it's like a small percentage that feel that way. But I didn't think it was
137 offensive.

138 **Facilitator: Okay. So Meagan, I want to hear from you about just your – things**
139 **that you recall in particular about the program that you participated in online.**

140 Meagan: Um, I remember a lot of information about examples – like this is assault, this
141 is assault, this is assault, but it's hard to recall all of it, so I think probably seeing it in
142 person and having you put it in a real life situation would probably have made me
143 remember more, but I don't know. And then they said it could be uncomfortable for
144 some people, but I guess just watching it online, you don't have that since you're
145 watching it by yourself.

146 **Facilitator: Okay, so you bring up a couple points that I want to discuss. So first of**
147 **all is that I'm not able to give very focused examples in an online version. How**
148 **would you recommend that we change that?**

149 Meagan: Online?

150 **Facilitator: Yeah.**

151 Meagan: Um, I don't know if there's a way for you to ask questions or something for us
152 to answer, or to provide a real life example that we've heard from a friend or
153 something.

154 **Facilitator: Okay. And some of the feedback that I got from the online version is**
155 **that maybe it would help to have specific scenarios kind of played out like on**
156 **video for you. Do you think that would help?**

157 Meagan: Yeah, probably.

158 **Facilitator: Okay. Let's talk about comfort level in the class. So, Meagan, you**
159 **mentioned that doing it online kind of provides some anonymity and if it's a**
160 **sensitive topic for you, then maybe you're less uncomfortable if you're able to**
161 **watch it online. And I think that is definitely one of the pros of the online**
162 **version, but let me hear again from you guys who were in class about just the**
163 **comfort level and if you think that it would have been better if you were in a**
164 **same-sex classroom only with other women, or do you think it helped to have**
165 **guys in the same classroom as you?**

166 Kellie: Yeah, I think it helped just to get another perspective – to see how things are
167 seen from a male's eyes. I wasn't really uncomfortable during it.

168 Emilee: Yeah, I wasn't uncomfortable. I mean, it wouldn't be a setting where I would
169 want to raise my hand and tell a story about something that happened probably, but it
170 didn't make me feel weird to be in the class.

171 **Facilitator: Okay. Do you think if you were in a group of just women, you would**
172 **have felt more comfortable to raise your hand and...**

173 Emilee: It would depend on the size of the group and – I mean I talk about stuff with my
174 friends all the time, but I don't know that I would talk about it with strangers. If it
175 was like a huge group of girls that I don't know, I probably wouldn't – not that I have
176 a story to tell. [Laughter.]

177 **Facilitator: Okay, okay. And what about you?**

178 Kellie: Well, I don't know, I think girls can be a little more judgy than guys, so in a
179 room of all women, I don't know that I'd share.

180 **Facilitator: Yeah, yeah. That's a good point. And did you think that the Jeopardy**
181 **game kind of allowed for that opportunity to talk about things that actually**
182 **probably have happened to some of the girls in that class and it kind of provided**
183 **an avenue to discuss those topics?**

184 Emilee: It was really fun to see how guys – like when you'd give the scenarios and the
185 guys would give their input on it, how we would differ completely, and their minds
186 think different, so it's good to see what they think so that we – I mean, we don't
187 always get to know exactly what is going on in their brains.

188 **Facilitator: Yeah.**

189 Kellie: Yeah, definitely. Because I remember one question specifically that was like
190 talking about a girl who went home with a guy downtown, and I remember – not to
191 generalize football players – but they were saying that they didn’t think – like she
192 should have expected to know what would happen.

193 Emilee: That he was like buying her drinks and she went home with him and they had
194 sex.

195 Kellie: Yeah, like I didn’t know – I was just like, “Oh my god, guys actually think that
196 way?” Like, that’s pretty messed up.

197 **Facilitator: Yeah, and actually, I think that it was your class in which a girl raised**
198 **her hand and agreed with the guys.**

199 Kellie: Yeah, I remember that! It was a girl sitting in the back, and I was like “Whaatt?
200 Are you female?!? You put your hand down!” [Laughter]

201 **Facilitator: Okay, I’m glad to hear that reaction from you. Um, what did you guys**
202 **think about the – and this question is for all of you – about the relevance of the**
203 **material in terms of what you guys are experiencing as college students and also**
204 **– well, I’ll just start with that.**

205 Meagan: I think it’s very relevant.

206 **Facilitator: Can you expand upon that?**

207 Meagan: I mean, I’ve seen people like who – not that they’ve been victims of sexual
208 violence, but they definitely have problems or issues. Like both guys and girls –
209 where a girl is like forcing herself to go home with a guy and things like that.

210 Emilee: And like the ones that you said, with the drinking things – my friends have told
211 me stories about how they went home with a guy and they had sex with him and then
212 they don’t remember – not that they weren’t wanting to do it. Even if they were sober
213 the next day, they would have wanted to do it, but at the time, they were like “Well, I
214 don’t remember”. It just makes it kind of hard to decide what’s wrong and what’s
215 right. And then how to change it.

216 Kellie: Yeah, I think the fact that you talked a lot about alcohol, that relates to us
217 definitely, and also when you were talking about cell phone use – that was one of the
218 things that had to do with dating violence, like constantly checking someone’s phone
219 and things like that – that put it into perspective too because I never thought of that as
220 dating violence before.

221 **Facilitator: Yeah, I didn’t think about that as being dating violence when I was in**
222 **college and when it was happening to me – when I had a boyfriend who was**
223 **constantly checking my phone and – well, actually back then, it wasn’t a phone,**
224 **it was my email. [Laughter.] It’s been awhile. But yeah, so it does put things into**
225 **perspective, I think, and I think a lot of people don’t think about stuff like that**
226 **as dating violence.**

227 Emilee, Kellie, Meagan: Mmhmm.

228 **Facilitator:** Alright, so it sounds like you do think it's pretty relevant – the topics
229 that were covered. How realistic do you think the advice that I gave during the
230 program was?

231 Emilee: Realistic to be followed?

232 **Facilitator:** Mmhhh. Realistic to be followed, realistic to be – or just realistic in
233 general for a college population.

234 Meagan: I don't think people are going to consent as much as you were recommending.

235 Kellie: I agree. I think, especially if you've been dating someone for a few months, I
236 don't think you're going to ask for consent – like verbal consent – every single time.

237 Emilee: Like with drinking, too, most people aren't going to really discuss it – not that
238 it's expected, but it's hard to like ask “Hey do you want to do it?” [Laughter.]

239 **Facilitator:** Well, when I'm doing it with my husband, I say “Hey, do you want to
240 come upstairs?” You know it's not just the while you're in the act, but you
241 know, you can say beforehand, hey are you in the mood? [Laughter] And
242 obviously that can change while you are in the act, but even after you know, 10
243 years of marriage almost for me, we're not saying with every single activity, “are
244 you in the mood for this, Are you in the mood for that”, but you know I'll say
245 “Do you want to go upstairs,” and then you know, he'll do the same. So there
246 are just other ways to consent, but I want to hear from you guys, because I agree
247 that it's probably unrealistic to ask people – and based on some of the surveys
248 that I've seen – maybe it's not unrealistic, but to ask people to expect that
249 everyone is going to follow that advice. And based on the surveys that I've seen
250 even after the program, it seems like some people don't realize that that is
251 exactly what you should be doing. So, how do you think that we could improve
252 the program to provide some advice that people would follow?

253 Meagan: Um, maybe have an educational slide – like if a guy is buying a girl drinks
254 downtown, the girl needs to be aware that in the guy's head, she's going to be
255 expected to do something. And it shouldn't be...or if it should be, then she needs to
256 be aware of that.

257 **Facilitator:** Okay. So do you think that – one of the concepts that came up over
258 here is that we were able to kind of discuss that in class, like it came out that
259 guys really do think, “Hey, if I get this girl drunk, she'll come home and have sex
260 with me.” Was that same message conveyed in the online version?

261 Meagan: I don't really think it was. I think people feel like there needs to be a defined
262 line, but they're not verbalizing that.

263 **Facilitator:** Okay.

264 Emilee: I think that people kind of need to be aware of how other people think. You
265 can't control how everyone else is going to act, like you can only control what you're
266 going to do, but you know what you're going to do, so girls going downtown need to
267 know that some things are expected of them from guys – not that they need to comply
268 with that. But girls need to be taught how to say no or boys need to be taught how to
269 respect everyone. I mean I don't have a problem saying no I don't want you talk to

270 me, I don't want you touch me or anything, but some people are afraid to say it. I
271 mean, I Have a friend, who, literally, the word no does not come out of her mouth.
272 Like, she'll go to someone's house and then be like "I didn't want to go there." Like,
273 you can say no! Just don't go!

274 **Facilitator: You just defined me. [Laughter.] I have a hard time saying no. So, to**
275 **piggyback on just what you were saying, coming out of this program, and**
276 **thinking about some of the things that you guys learned, um, what advice would**
277 **you give to your friends who you may know are at risk for either sexual violence**
278 **or maybe are in a violent dating relationship. What would you say to them?**

279 Emilee: That it's not a bad thing to say no, stand up for yourself, when you don't feel
280 comfortable, don't do it. Um...and like, I think that some people are afraid once they
281 get themselves into a situation, they're afraid that they don't know how to get out of
282 it, or they're afraid to try and get out of it. I'm very – I go out of my way to help my
283 friends when they're uncomfortable, like, I would never say, well you shouldn't have
284 been there to begin with, or you shouldn't have done that.

285 Kellie: Yeah, I think I definitely have friends – you know, I could see them going
286 downtown and drinking a lot and not really thinking about their actions – I think I
287 would just let them know beforehand that you don't owe a guy anything – even if he
288 buys you drinks, you don't have to go home with him – there's always another
289 option, like you could call me, and I would always come downtown and get you out
290 of the situation even if you're already in the middle of the situation, you don't have to
291 go home with a guy, you can stop at any point.

292 **Facilitator: Okay, yeah, I think that's great advice, and I think that's one thing**
293 **that I didn't really bring up in the program is that no matter what, you don't**
294 **owe anybody anything.**

295 Meagan: Yeah, I agree with them.

296 **Facilitator: Okay, alright, so what did you guys like best about the program?**

297 Meagan: I guess a pro of the online version is the anonymity of it.

298 **Facilitator: Mmhm. Would you have been uncomfortable, you think,**
299 **participating in an in-class version?**

300 Meagan: No, but I think some other people would. Like I think I have friends who have
301 been in situations like that, and they may be uncomfortable, but I wouldn't be.

302 **Facilitator: Okay. What did you guys like best?**

303 Emilee: I just liked how it was engaging and it wasn't like a boring lecture where you
304 were just giving us the facts – like people would give examples or you would ask us
305 what we thought about it, and I learned more from that than you just sitting up there
306 talking.

307 Kellie: Yeah, I agree. I like the fact that you like walked out and were walking around
308 asking people questions like that because I was paying attention the entire time and
309 was actually thinking about my own life when you were bringing up these issues. I
310 liked that the best.

311 **Facilitator: So, they brought up the engagement part of the in-person version. Did**
312 **you feel very engaged with the online version?**

313 Meagan: No, not really.

314 **Facilitator: Okay. How do you think we could make it more engaging?**

315 Meagan: I think if you played examples of – even like examples from *Friends*, the TV
316 show that people can relate to.

317 **Facilitator: Oh, okay. Do you have any – I don't get to watch a lot of tv as a new**
318 **mom and a student and someone with a full time job – but I do tune into Teen**
319 **Mom every once in a while when I have a chance. [Laughter.] But, um, so do you**
320 **guys have any advice for TV shows that are on TV right now that I could get**
321 **examples from?**

322 Meagan: Maybe for like guys' perspective, you could do *How I Met Your Mother*
323 because it's pretty manly and would have thoughts about women that would be
324 different.

325 **Facilitator: Okay.**

326 Emilee: Scandal is pretty popular right now.

327 **Facilitator: I've heard that.**

328 Emilee: It has a lot of dominance kind of stuff between men and women.

329 Kellie: I feel like the *OC* has good examples.

330 Emilee, Meagan: Ooh, yeah! I love that show. It's not on tv anymore, but...

331 **Facilitator: I was going to say – is that even still on?**

332 Emilee: No, but oh my gosh, it's so good. There's one episode where a girl gets roofied
333 at a party and in the first season, Marissa gets drunk in pretty much every single
334 episode.

335 Meagan: Yeah, there's one where Marissa gets assaulted by her boyfriend's brother.

336 Kellie: Then her boyfriend ends up shooting him, and...[Laughter]

337 **Facilitator: Okay, I think I stopped watching the *OC* before all that happened.**
338 **[Laughter]**

339 Meagan: I think it's also important to show that it's not just the girl who's the victim
340 because there's definitely some stuff that happens to guys, too. I mean, I have a
341 boyfriend who goes to another school, and it's really hard when I hear about girls
342 hitting on him and stuff, but I just, I don't know – it's wrong for girls to do and it puts
343 him in an uncomfortable position.

344 **Facilitator: Mmmhmm, yeah. I was actually just thinking yesterday about how it's**
345 **nice that when you get married, you get a symbol of getting married – you get a**
346 **ring, and so you should know that when you're with someone, not to hit on**
347 **another person.**

348 Meagan: Yeah, but that doesn't always work. [Laughter.]

349 **Facilitator: No, it doesn't. Okay, alright, now what was the worst part about the**
350 **program. What did you like the least, or what was most boring, what could be**
351 **spruced up a little bit?**

352 Meagan: I think I would probably say the in-person version was probably better. It just
353 felt a little lecture-y.

354 **Facilitator: Okay.**

355 Kellie: I can't really think of anything that was boring.

356 Emilee: No, my favorite class days were the ones that you came into.

357 **Facilitator: Aww, thank you!**

358 Emilee: You would stand up there, and everyone would be like, "Yes!!"

359 **Facilitator: "Yes – we get to take a 15 minute long survey!" [Laughter.]**

360 Kellie: Yeah, I couldn't think of anything that was boring. I was interested the entire
361 time.

362 **Facilitator: Okay. Good. Let's see...so thinking about the program, do you think**
363 **that you guys or anyone else who participated in the program would have**
364 **changed their behavior for better or worse? And if so, give me an example.**

365 Emilee: Um, I think the girls probably actually thought about it and thought they should
366 be more careful. Although it shouldn't be our responsibility to take care of ourselves,
367 it is. So um, maybe they'll think about taking all those drinks from a guy who may be
368 expecting something, and think that "Hey, I don't have to give him anything for him
369 buying me drinks." And maybe the guys will think, "I'm not going to buy her all
370 these drinks so she'll go home with me – I'm just going to buy them to be nice." But
371 you can't always expect the best out of other people.

372 Kellie: I think it would definitely be a change for the better. Because I think maybe guys
373 or girls would think about the fact that someone doesn't say no, that doesn't mean
374 you have consent. I never thought about that before, so I definitely think that's a
375 change you would see.

376 **Facilitator: Okay.**

377 Meagan: I think it may not change people's behavior outwardly so much, but maybe
378 they would think about what they were doing a little more and maybe subconsciously
379 think twice about it, but they probably wouldn't be like, "Oh my gosh, that iConsent
380 thing just changed my life."

381 **Facilitator: Okay. So, you mentioned that it kind of changed your perspective.**
382 **Can you tell me a little more about that?**

383 Emilee: Well, I guess what we were talking about earlier about constantly getting
384 consent – because you know, if you're with a guy, you – just because like in the
385 beginning, you're like, "Yeah", but really throughout the process, you have to be like
386 "Do you want to keep doing it?" Instead of just committing to something in the
387 beginning. I've thought about that a lot.

388 **Facilitator: Okay. Good. I'm glad to hear that. Do you think that now either you**
389 **are your classmates are more likely or more comfortable even talking to your**
390 **peers about these topics?**

391 Kellie: I think I'd be comfortable talking to my friends about these things, but not really
392 my classmates.

393 **Facilitator: More comfortable than before?**

394 Kellie: Probably more comfortable because I'd be more knowledgeable about the
395 subject, but still I'm not going to approach anyone.

396 **Facilitator: Yeah, I could understand that. [Laughter.]**

397 Emilee: I mean, I went home and told my friends about what I'd learned, and I told my
398 boyfriend's friends so that when they go out and talk to girls...[Laughter]

399 **Facilitator: That's awesome! What'd you tell them?**

400 Emilee: I just told them that just 'cause a girl doesn't say no doesn't mean you can do
401 whatever. Which, the law in GA – it is a yes state, you have to say yes. So just
402 because she doesn't make a sound or doesn't do anything, doesn't mean she said yes.
403 So I just told them, be careful what you're doing because it could ruin your life just
404 because you didn't ask for verbal permission.

405 Meagan: Yeah, I know someone who – it wasn't really consensual, I mean she was
406 drunk and she was saying yes, but the guy didn't know she was drunk, so she sued
407 him.

408 Kellie: Did she win?

409 Meagan: Um, I think it was settled because...

410 Emilee: Yeah, I was going to say because it's really hard to prove rape cases.

411 **Facilitator: Wow. So, you just brought up another point that I want to talk about,**
412 **which is alcohol and sex. In the class, and online, I say that talking about alcohol**
413 **and sex together is just controversial in general because the lines are really**
414 **blurry, right? Like you just said, the guy didn't know that she was drunk – well,**
415 **technically, that doesn't matter, right? If she was drunk, by law, she cannot**
416 **provide consent. She doesn't have the ability to. So, it's really difficult to convey**
417 **that message – especially at UGA, you know it's a big party school. I drank a lot**
418 **when I was here, and I don't doubt that the people in the program drink a lot**
419 **when they go out – not everyone, but a lot of people here do. So what did you**
420 **guys think about the way that I talked about that intersection between alcohol**
421 **and sex?**

422 Kellie: I liked it because I didn't feel like you weren't telling us, "Oh no, you should
423 never drink, you should never go out and have alcohol, but you were telling us more
424 so what could happen if you drink.

425 **Facilitator: Mhmm.**

426 Emilee: Yeah, you gave us kind of like just an idea that we should be thinking smarter
427 about it even as we're – or before we start drinking, or even try to think about it even

428 as we're drinking. Um, just so you know, I feel like you still have – even when
429 you're blackout – I feel like you still have this idea of who you are and the things you
430 wanted to do before you went out. So if you like already had that firm belief in your
431 head before you went out that like I'm gonna say no if I'm uncomfortable, then you
432 would be safer, so I think you helped us realize that you just need to think about it all
433 the time and not just kinda live nonchalantly.

434 **Facilitator: Right. And what did you think about the online version – did you**
435 **think that we talked about that enough in the online version?**

436 Meagan: Um, I don't really remember it being that big of a component of it in the online
437 version.

438 **Facilitator: Okay, okay. So, um, again, thinking back to the program, do you**
439 **think that people in your class would be more willing to intervene now if they**
440 **saw a potentially violent situation going on or if they think their friends might be**
441 **in a violent relationship – things like that?**

442 Emilee: Yeah, I think a lot of times I'm impressed with how willing people are to think
443 about others. I remember a few weeks ago I was downtown and got a little too drunk
444 and I was fighting with my boyfriend and I was crying. But I do this thing where I
445 cry and I don't know why I'm crying. [Laughter] But I was sitting on the sidewalk
446 like with my hands on my head and this girl came up and she was like talking to him
447 and she was like "Did you hurt her?" and she was trying to defend me, and I was like
448 "No, he's fine." [Laughter], but when he told me that, I was like, "That is so sweet
449 that someone would stop and make sure I was okay."

450 Kellie: I mean, I think I would definitely intervene if I saw someone like – if I see
451 someone grabbed the wrong way or something. Like, I'm really protective of my
452 friends downtown, like if someone grabs them when they're walking by, I'll be like,
453 "You don't touch her. Like that is not yours."

454 Emilee: Yeah, I mean, sometimes people impress me, but other times everyone just
455 ignores what's going on.

456 **Facilitator: Anything else to add?**

457 Kellie: Well, I think that people would be more likely after having this – especially in
458 like dating violence and violent relationships because now they know more of like the
459 triggers and what could be leading up to that, so they're more likely to talk to their
460 friends about it and be more likely to say, "Hey you might want to be careful,"
461 because it could lead to something more.

462 **Facilitator: Yeah. Did you feel like the cues that were on one of the slides were**
463 **helpful – kind of those quotes that were like "Would you want someone to do**
464 **that to your sister?"**

465 Kellie: Yeah, kind of like making people more aware of who it's happening to.

466 Emilee: It's always helpful to – for like guys to see stuff like that because sometimes
467 they do things and they don't think well, if this happened to my sister I wouldn't feel
468 the same way about it. Like they'll treat girls one way and then expect their sisters to

469 be treated a different way, so I think it's good to show stuff like that so they'll think
470 about it the next time they're doing something.

471 **Facilitator: Okay. Any other big picture thoughts about the program?**

472 Kellie: I thought it was good. I think it does make people think – I mean, I didn't know
473 some of those things were sexual violence – the phone thing or the email...

474 **Facilitator: Yeah? Okay. Are there any examples that you think I should use that**
475 **you haven't seen in the versions you guys saw? Anything you guys see going on**
476 **here that maybe I wouldn't know about?**

477 Emilee: No.

478 Kellie: I'm trying to think like if you talked about if maybe you're at a party and you see
479 someone you don't know who's like pretty passed out or drunk – like what you would
480 do. I was at a party a couple weeks ago and there was this girl, you could just tell that
481 she was like blacked out and beyond drunk, so I approached her, but she wasn't very
482 coherent, so I couldn't really talk to her, so I wasn't really sure what to do in that
483 situation. Because like there were guys coming up to her and trying to dance with
484 her, and she was really, really drunk, so she was trying to dance, too. And I was
485 trying to find her friends, but there was no one around. So maybe just like talk about
486 what to do in that situation because I didn't know what to do.

487 **Facilitator: Okay, yeah. I think that would be a hard situation to handle because**
488 **obviously you don't want to call the cops to a party you're at, but maybe trying**
489 **to find someone shes' with that can get her home, or if you can't find her friends,**
490 **maybe calling her a cab or I think there's a volunteer cab service in town?**

491 Emilee: Dawgs after Dark.

492 Kellie: Oh, and yeah, I did find one of her friends. So yeah, I think she took her back
493 home.

494 **Facilitator: Okay, yeah that's good. I'll definitely start to cover that.**

495 Emilee: I can't remember if you discussed ways to protect yourself before you go out –
496 like always having a friend keeping account of you at some point, because normally
497 one person can kind of keep up with everybody. We're always like watching out for
498 each other. Like, I had a friend who kind of passed out one week, and I sent my
499 boyfriend to take care of her and I went and got her stuff and was like "Don't let her
500 out of your sight." So I think it's always good to have a friend keeping tabs on you
501 and making sure you're making the right decisions like if you want to go home with
502 this guy or you don't, or being like, "No, you're coming with me."

503 Emilee: Yeah, I told my friends if they want to go home with someone, that's fine, but if
504 they can just text me so I know they didn't get like kidnapped or wind up in a ditch
505 somewhere.

506 **Facilitator: Yeah, that's something that I haven't talked about before.**

507 Emilee: Yeah, just like a buddy system.

508 Kellie: Always keeping your phone around and

509 Emilee: Because everyone gets like split up downtown, and making sure your phone is
510 charged before you go downtown because how many times does your phone die when
511 you need it most. They should have chargers in all the bars.

512 **Facilitator: Hey, that's a good idea.**

513 Kellie: Well if you take your charger, most bartenders will charge it for you.

514 Emilee: Oh yeah, I didn't think about that because I always see people charging their
515 phone in like random places. No one wants to be without their phone.

516 **Facilitator: That's so true. I feel naked without mine. Okay. Well kind of just to**
517 **wrap things up, is there anything else that you want to bring up- anything else**
518 **that sticks out in your minds that was great, not so great, could be improved...**

519 Meagan: Maybe if you like – like I have a friend that I would see their relationship as
520 violent, but she doesn't necessarily think it is – maybe have how to like help that
521 person without being rude about it.

522 Emilee: Because people are going to take offense to that. Someone's told me my
523 relationship was unhealthy before and I didn't take offense, but that's because it's
524 not. [Laughter.] But if there's like a good motive behind it...like sometimes when
525 people criticize your relationship, you can see it as like "Oh, she's just jealous", but if
526 someone helps you like find a good way to talk to someone about it, because if I saw
527 one of my friends like that, I don't know how I'd bring it up.

528 **Facilitator: Okay, that's great advice. Anything else? [Silence] Okay, so again just**
529 **to wrap things up, there are some other campaigns on campus – I think just**
530 **today an email came out about the Relationship and Sexual Violence Prevention**
531 **stuff here.**

532 Emilee: I just saw that.

533 **Facilitator: Right. So do you guys know about those programs?**

534 Meagan: I've heard of it.

535 Kellie: I actually just heard of it last week when I went to this extra credit thing for our
536 class and it was on stalking, and so I heard about RSVP for the first time.

537 **Facilitator: Okay. Have you ever heard of the Consent Is Sexy campaign here at**
538 **UGA?**

539 Emilee: Yeah. They have the coasters that say Consent Is Sexy and something else on
540 the other side. I saw people taking pictures of them and was like "Oh, that's so cool."

541 Kellie, Meagan: Nope.

542 **Facilitator: Yeah. So basically, a lot of the info that I covered in the program is**
543 **covered by the campaign. It's all about making consent something you want to**
544 **do – something that's sexy, and it makes your relationship better – even if it's**
545 **just a one night stand. Obviously you're going to have much more fun if you're**
546 **sleeping with someone who you want to be sleeping with. Um. So, that's the**
547 **program on campus and I just wanted to get a feel for whether you guys had**

548 **heard of those things, but it sounds like they're not getting their message out as**
549 **well as they could be.**

550 Kellie: I think I probably heard about the RSVP one, too, only because I was in Health
551 Promotion.

552 **Facilitator: Okay. Is there anything that you have heard of on campus that's**
553 **maybe related to dating or sexual violence?**

554 Emilee: I've heard of SHUGA. I don't know if that applies – I think it means Sexual
555 Health, though.

556 Meagan: Oh yeah. I heard about that last year.

557 **Facilitator: Okay. Well is there anything else you want to tell me that we haven't**
558 **already talked about?**

559 Emilee, Kellie, Meagan: No.

560 **Facilitator: Thank you guys so much for participating. You have no idea how**
561 **much I appreciate it. You're helping me graduate! [Laughter.] And someone**
562 **will repay the favor for you one day. So, thank you! And again, if you guys have**
563 **any questions about anything we've talked about today, please feel free to**
564 **contact me.**

565 Kellie: Thanks for the gift cards!

566 Emilee, Meagan: Yeah, thanks!

Focus Group 2

November 2013 / Start time: 2:30 pm, End time: 3:22 pm

Facilitator (bolded) & Erin, Sarah, and Haley (Pseudonyms; Participants)

[...] Talk in middle of other's talk

... Pause

1 **Facilitator: Okay, so basically, I just want to talk to you guys about the iConsent**
2 **program, which is what I'm doing my research on. I came to your class – are**
3 **you both in Class A?**

4 Erin: No, I am in Class B.

5 **Facilitator: Oh, okay, okay. So you guys had some really different experiences, I**
6 **think. One of the classes is a little bit rowdier than the other.**

7 Erin: Yeah, I think that was mine. [Laughter.]

8 **Facilitator: And, Sarah, you did the online version which was not rowdy at all.**
9 **[Laughter].**

10 Sarah: Yep.

11 **Facilitator: So I just want to kind of hear from you guys what you liked about the**
12 **program, what you disliked, and I'll ask some pointed questions to get to that,**
13 **but first I want you to think back to the program, and I know it might be harder**
14 **for you just because you weren't in class, and...**

15 Sarah: Yeah, it was a while ago.

16 **Facilitator: Yeah, it's been awhile. But, um, if you guys could just think about the**
17 **program and tell me in general what you thought about it.**

18 Sarah: Yeah, it was good. It was clear just the way all the information was presented like
19 you need to get consent, and if you don't get consent, then it doesn't matter what the
20 circumstances are – really cut and dry with no grey area in between.

21 **Facilitator: Yeah.**

22 Erin: And no biases, because my class was like if there's any kind of bias, we'll call you
23 out on it, but there wasn't really anything, and it's not really talked about. Girls will
24 talk about it if it's like if they think they didn't give consent, or if like a guy didn't get
25 consent, but otherwise it's kind of taboo.

26 **Facilitator: So you said it's not really talked about among couples – or sexual**
27 **partners – or...?**

28 Erin: I feel like people who are in a dating relationship probably talk about it, but hook
29 ups probably don't a lot of times.

30 **Facilitator: Okay. Do you guys ever hear about it in other classes, like health classes**
31 **or...?**

32 Erin: That's my first health class I've ever taken.

33 Haley: Yeah, it's my first too.

34 **Facilitator: Okay, cool. Okay. What'd you think?**

35 Haley: I don't know. I thought it was cool. I didn't really know that you had to be
36 sober. I didn't know that counted. Like I've been dating my boyfriend for over three
37 years, so we don't really bother with like consent, but like I didn't know all that stuff.
38 So it was good to learn.

39 **Facilitator: So it was new material for you?**

40 Haley: Yeah.

41 **Facilitator: Good. Okay, so thinking back, was there anything that stood out to you**
42 **guys about what you learned or what was presented?**

43 Sarah: I never thought about girls asking for consent. I usually thought about it as just
44 the guy needs to make sure everything is okay with the girl, so I never thought about
45 it that way. Because I usually feel like it's the guy who wants to initiate stuff first.

46 **Facilitator: Yeah.**

47 Erin: People complain about that, too. I don't know, I feel like girls don't step up
48 sometimes.

49 **Facilitator: Yeah, okay. So girls complain about not getting consent, or not giving**
50 **it?**

51 Erin: Probably both, I don't know. I think girls jump to conclusions more. They think
52 guys think about it a lot more.

53 **Facilitator: Yeah. Any thoughts over here?**

54 Haley: Not really. I can't really remember the presentation. It was at the beginning of
55 the year.

56 **Facilitator: Yeah, I know.**

57 Haley: So it's just been a while, but I remember it was two days long, right?

58 **Facilitator: No, it was just one.**

59 Haley: Oh – you came two days, though?

60 **Facilitator: I did come two days. I came quite a few times to your class to get the**
61 **survey and stuff.**

62 Haley: Oh yeah.

63 **Facilitator: So, if you think about some of the conversations we had in class, do any**
64 **of those stand out to you?**

65 Haley: I still think like being sober and then how girls don't really ask for it. They just
66 kind of assume that guys always want it instead of just asking.

67 **Facilitator: Yeah, okay. So I guess my next question is, do you recall the material**
68 **that we covered? I mean, obviously you do about the consent – was there**
69 **anything else that you thought was particularly interesting, or anything that was**
70 **boring? I know that the online version is not as exciting as the in person version.**

71 Sarah: Yeah, I mean it was still fine. I mean, the person’s voice was kind of monotone,
72 but ... [Laughter}. Oh, I’m so sorry! I am so sorry.

73 **Facilitator: No, trust me.**

74 Haley: But you were probably like reading it.

75 **Facilitator: Yes, I was, and I know that I am not a radio show personality, I admit**
76 **that.**

77 Sarah: Well you sound different in person. I didn’t mean to offend you.

78 **Facilitator: No, trust me I’m not offended, I felt the same way. I was like, “Oh, it**
79 **would be great if I had someone else to do this because I am not good at it.”**

80 Sarah: Well at least you spoke clearly.

81 **Facilitator: I didn’t mean to make you feel uncomfortable.**

82 Sarah: [Laughter] No, I’m sorry if I made you uncomfortable.

83 **Facilitator: No. I agree it should be a little more exciting, and we’re working on**
84 **that.**

85 Erin: I don’t know, I liked the survey part of it, too because you taught everything about
86 it and everyone was like, “Yeah, okay, that’s how it’s supposed to be, that’s what I
87 do,” and then you get to it on the survey, and you’re like, “How would I respond?”
88 Like, “What would I actually do in the situation?”

89 **Facilitator: Yeah, so that’s a really a good point. When you guys were taking the**
90 **survey, if you could think back to the first time you took it, were you thinking,**
91 **“How should I respond, or how do I feel?”**

92 Erin: Mine was kind of interesting because the first time I took it, I wasn’t dating
93 anyone, and then the second time – one week later I got into a very serious
94 relationship, and with like a serious boyfriend, so it was cool for me to like, I guess,
95 be like, “Okay, I’ve been taught this my whole life like how this is supposed to go
96 and then later on it’s like, this is how it flies.”

97 **Facilitator: Yeah.**

98 Erin: I guess it was good because I had the experience to respond and I know that like
99 the girl who sits next to me in class had never had sex, so she was like, “Oh, this is
100 wrong, this is wrong, this is wrong,” but you don’t know how you should act.

101 **Facilitator: Yeah. So do you feel like you were able to apply some of that**
102 **information – were you thinking about it at all when you got into that**
103 **relationship?**

104 Erin: Mmmhmm.

105 **Facilitator: Yeah? Cool.**

106 Erin: Yeah, I was talking to him last night, I was like, “I’m going to be in a focus group.”
107 And he was like, “Well, I hope I followed your rules.” [Laughter.]

108 **Facilitator: Yeah, I hope he did too! Okay, cool. So, how about you?**

109 Haley: Well, I don’t think I could really answer some of the questions that well because
110 I’ve never really hooked up with someone that I don’t know. Like, I’ve always been
111 in a relationship, so I didn’t really know. Like I’ve never been in that situation, so I
112 didn’t know how to answer the question, so I just did what I was supposed to
113 write...like just following all the rules and everything.

114 **Facilitator: Okay.**

115 Sarah: Yeah, it was kind of the same for me. And also some of the questions had to do
116 with alcohol, but I don’t really drink, so I think I just put strongly disagree for like
117 whether or not my consent was influenced because like, I hadn’t had any influence, so
118 I wasn’t influenced.

119 **Facilitator: Okay.**

120 Sarah: I feel like if there was a “Does not apply” option, I feel like that would be good in
121 the future.

122 **Facilitator: Oh, that’s great advice. Thank you. Let’s see. Do you feel like,**
123 **especially you, Erin, do you feel like any of your responses on the survey**
124 **changed over time?**

125 Erin: They could have because, I don’t know, if I think about it, there were a few times
126 when I answered it wrong or scratched it out because I accidentally misread the
127 question. I can’t – I feel like the last time I took the survey, I thought “Oh, this one
128 was a little bit different” or maybe I moved from strongly disagree to neutral. I feel
129 like I had more neutrals, because I know what’s supposed to be taught, but I also
130 know how life goes, so it’s kinda like, “Eh, it happens.”

131 **Facilitator: Yeah, so that’s actually a really good point. So one of the things that**
132 **I’m trying to assess with these focus groups is how realistic is the program.**
133 **What do you think about the advice that I gave during my talk or during the**
134 **online version? Like in terms of how you should be getting consent every time**
135 **you do something new or every time you have a sexual interaction with someone,**
136 **or how you’ve been giving it, um, things that are happening that could be**
137 **considered dating violence, and things like that. What do you guys think about**
138 **how realistic it is?**

139 Haley: I don’t really ask my boyfriend every time, but if he says no, I’ll stop, but if he
140 doesn’t, I won’t, and it goes both ways.

141 Sarah: Yeah, that’s kinda what I was thinking, like once you have done it a few times,
142 then I feel like it’s not as important to ask every single time. So I feel like some of the
143 things you were saying, like physically, if someone says stop, then it’s like
144 withdrawing consent, but after you’ve consented several times in the past, then I feel
145 like it’s not as important to ask every time.

146 **Facilitator: Okay.**

147 Erin: I want it to be broadcasted more. I don't know, I feel like there's a lot of people
148 who don't know anything. I feel like every time I go out, there's like, "Oh, well she
149 goes to whoever buys her the most drinks," or like, "You make her drink to that limit
150 and then she'll be fine." And you hear it and you're like, "Oh," because that's what
151 happens, and yeah it kinda sucks because then the next day, or if a girl gets too drunk
152 and then hooks up with a guy, she'll want people to sympathize with her, and it's hard
153 to sometimes.

154 **Facilitator: Yeah.**

155 Erin: Because you know what happens. But I feel like more people need to know about
156 consent just so we can be more respectful and, because you know someone's hurting,
157 and you're like, "Oh, well, you let him buy you so many drinks..."

158 **Facilitator: Yeah, right, right.**

159 Sarah: And I think that in the program that it was saying that if there's no consent, then
160 it's rape, so I think that's something that people are like, "Oh, well I should probably
161 ask, but it's no big deal." But if you say that it's rape – like putting a name on it –
162 then people will think, "Well maybe it's a bigger deal than I thought."

163 **Facilitator: Yeah. So, there's a couple things I want to follow up on here. So, first,**
164 **in the program, I try to call it sexual assault because rape is such a really strong**
165 **word. Do you guys think I should use the word rape instead of sexual assault?**
166 **Would it be more – would it kind of drive home the point better?**

167 Erin: Or even like defining rape. Because you know it is sexual assault, but when people
168 think of rape, they think unknown person, like kidnapping and trapping someone, but
169 that's not what rape is always, or probably like 95% of the time.

170 **Facilitator: Yeah. Any other thoughts?**

171 Sarah: I think that's good.

172 **Facilitator: Okay. So we're kind of getting into the alcohol and sex and consent**
173 **issue. So obviously this is a really blurry issue when you bring alcohol into the**
174 **equation, you know, how much is too much, how much is "I can still make a**
175 **rational decision," so what did you guys think about the advice that I gave about**
176 **drinking and then having sex afterwards? So basically, I tried to say, and it's a**
177 **little easier for me to talk about that in the in person version of the program**
178 **because we're – it's more of a dialogue between me and the class, versus online, I**
179 **say it once and you move right on. But, I guess, did you think that advice was**
180 **realistic in saying, "If you've been drinking, you cannot consent to have sex."**
181 **This is the hardest part, right?**

182 Erin: Yeah, I think, like it makes sense, like you need definite consent, and you can't get
183 that if your judgment is impaired by any means whether it's alcohol or drugs, but at
184 the same time, a lot of people want to go downtown to get drunk, and like, sorry, but
185 fuck. You know, like all the songs say that, and...

186 **Facilitator: Yep, there's a lyric about that.**

187 Erin: There's lots of them. But, I don't know. That's not an issue for me, but I know so
188 many people who are like "I just want to get drunk and take someone home."

189 **Facilitator: Yeah.**

190 Erin: It's almost like it's different. Like there's sex in a relationship and sober sex, and
191 then there's drunk hook ups. Like there's different categories almost.

192 **Facilitator: Yeah.** What do you think is going on most frequently here?

193 Haley: Hook ups.

194 **Facilitator: Drunk sex?**

195 Erin: Yeah.

196 Sarah: I think people almost think it's more okay if they're drunk. Like, "Oh, I had sex
197 with a guy, but I was drunk so it's okay, it doesn't count."

198 **Facilitator: Uh huh.**

199 Sarah: I'm not saying it's okay.

200 **Facilitator: No, no.**

201 Erin: Some people are just like, "I blacked out, it's not my fault."

202 Sarah: Yeah, they're just like "I was drunk, so it's okay."

203 **Facilitator: That's interesting. Okay. So, if you were talking to one of your friends**
204 **after having gone through this program, or maybe talking to a group of your**
205 **friends and talking about going out on Friday night and getting drunk and**
206 **hooking up, what would you say to them based on what you learned in the**
207 **program?**

208 Erin: Probably just how realistic sexual assault and how there's so many different ways to
209 occur and ways to prevent it that you just don't think about it. And how to stand up
210 for yourself, too. Because you may know, but there's tons of people who haven't had
211 the program or haven't had any other consent education. I mean, your parents or
212 whoever your mentor is just like, "Make sure the other person is okay with it, too."
213 But how do you make sure if it's not out on the table?

214 **Facilitator: Right. Okay.**

215 Sarah: And I think it's just like knowing what you believe before going into a situation,
216 the more sound you are, and what you believe when you're sober, you're more likely
217 to stick with those decisions, and if you thought about it, you're more likely to make a
218 good decision.

219 **Facilitator: Yeah, so that's actually – I talked a lot about that in the in-person**
220 **version – you know, setting your personal boundaries before you go out at night,**
221 **and think, you know, "What would I do if I were sober?" And try to continue to**
222 **think about that throughout the night even if you do get drunk and decide to**
223 **hook up...So, do you have any thoughts about that?**

224 Haley: Well, I was thinking about it a couple weeks ago, because me and my roommate,
225 we live kind of far from campus. She went out on a Tuesday night, and she didn't

226 want to find a way home, so she stayed with a – this like creepy guy that she knows
227 that’s like tried stuff before. He was like trying stuff on her, but she tried to sleep on
228 the couch, but he made her go to the room, and like when she was asleep, he started
229 doing stuff on her, and she didn’t want to tell anyone, but she told us, but she was
230 like, “I’m not going to like go report him or anything because I was drinking,” and
231 then she could have left, but she didn’t leave until the morning. So I think we need to
232 – like she still – he still did the wrong thing. It doesn’t matter if they were both
233 drunk. Like, she told him to stop and he didn’t stop. But she doesn’t want to speak
234 up.

235 **Facilitator: So what did you tell her?**

236 Haley: I told her like I think she should say something, but not everyone is going to
237 believe her because she was drinking, so. She doesn’t talk to him anymore, but still.
238 It’s just. I mean, they were both wrong. I don’t know the message she was sending
239 him by going to his house drunk at like 2 in the morning, and they had tried to hook
240 up before, so. It was still all his fault, but she still was also in the wrong.

241 **Facilitator: Yeah, so you’re bringing up a lot of good points here, “I don’t know**
242 **who was in the wrong...obviously she did go to his house at 2 o’clock in the**
243 **morning, but you know, he still shouldn’t have expected anything...” So**
244 **another big part of this program is to address the norms about that kind of**
245 **situation, like, yeah, she went home with him, but absolutely, he should not have**
246 **expected anything. You know? She said she wanted to sleep on the sofa, but he**
247 **made her go to his room. It sounds like there was a lot of coercion going on**
248 **there, like he coerced her into his bedroom, and then after she fell asleep or**
249 **whatever, there was definitely some nonconsensual stuff going on there, right?**

250 Haley: Yeah, mmhmm.

251 **Facilitator: Um, so I think part of this program is really just about getting that**
252 **message out there so that everyone on campus knows, and obviously there are**
253 **going to be people who don’t abide by those norms and follow those rules, but**
254 **just so that everybody knows, if you know, if you’re asleep, if you’re passed out**
255 **drunk, if you are high, you cannot consent. Right?**

256 Haley: Mmhmm.

257 **Facilitator: So, you’re just bringing up some great points about things that I should**
258 **talk about in the presentation. Oh, so also I was going to ask you about how –**
259 **did you think when she came to you about this at all about some of the resources**
260 **that I provided in the presentation, so kind of at the end of the presentation,**
261 **there’s a whole list of resources that are available here at UGA and in Athens...**

262 Haley: I mean, I forgot about that, but she doesn’t feel like – I remember, when we were
263 freshman we had to take that alcohol thing. Was there a part on dating violence and
264 all that stuff? I don’t remember.

265 **Facilitator: Yeah, I think that there is. I’m not involved in that in particular, but I**
266 **know someone who is, and I think there’s a part on dating violence and sexual**
267 **assault.**

268 Haley: And I guess she had – he was like biting her back. Like she woke up with bruises
269 all over her, like it was just weird – she was going home and going to visit her parents
270 and she had to wear a sweater all weekend. She said it was bad. Like she had to – like
271 she woke up with hickeys and bite marks all over her back.

272 **Facilitator: Wow.**

273 Erin: Whoa.

274 Haley: Yeah, and then she – he was like squeezing her at some point, and she was like
275 “Can you not” because she had just fell off a horse and had a cracked rib, and he just
276 like squeezed her tighter. So he was just like, out of it, not even listening to her. It
277 was just a weird situation.

278 **Facilitator: Mmm. Yeah. So this is like a great situation to kind of sp- I mean,**
279 **obviously that situation is not great. But it’s a great way to kind of spark our**
280 **discussion and to kind of guide it because there are so many parts of the**
281 **program that I tried to gear towards what do you do in a situation like that,**
282 **what do you do after a situation like that – so, as a friend who she’s confided in,**
283 **I guess, I’m just wondering if – it just sounds like maybe even after the**
284 **presentation you still don’t feel like you were completely, um, I guess, like you**
285 **were completely able to respond to that kind of situation?**

286 Haley: Mmhmm. Like, we’re not that close, so like I wasn’t going to force her to tell
287 anyone, but I was just like “That’s wrong,” and she took pictures for documentation,
288 but she never really did anything with it.

289 **Facilitator: Okay.**

290 Haley: We kind of left it – me and my other roommate kind of left it up to her, but she
291 decided she just wanted it to go away.

292 **Facilitator: Mmhmm. Yeah.**

293 Haley: So, I don’t know.

294 **Facilitator: So, how about you two. If something like that happened to one of your**
295 **friends or someone you know, how would you respond?**

296 Erin: The only thing, like, I don’t know if you talked about CATS (inaudible), but I
297 remember you talked about the Cottage, but it’s kind of hard when it’s something
298 like that, because, I just – I don’t know. I feel like the Cottage is just sexual assault,
299 and that’s like if my friend was like raped, but then it’s like, what do you define as
300 rape because I still think of it as like someone kidnapped her and left her in a ditch,
301 and if she woke up like that, then I’d be like, “Let’s go,” but it’s hard when it’s kinda
302 like, I don’t know.

303 **Facilitator: This is...**

304 Erin: I’m so iffy about like, okay, girl’s drunk, goes home with guy – to me, that’s
305 leading him on still, though.

306 Haley: Mmhmm.

307 Erin: Because if she didn't want to get put in a situation where that could happen, then
308 she shouldn't have let it happen in the first place.

309 **Facilitator: Mmhhh. So this is a pretty big party school, so...**

310 Erin: But that's just like, I don't know. And I know that's like not right because then
311 you're like well, if she wants to go home with a guy, then whatever, she doesn't have
312 to sleep with him, but then how do you make the guy feel like he was not led on?

313 **Facilitator: Mmhhh.**

314 Erin: Because I could – you could like role reversal that any way, but not have it be sex
315 and have it be something else, so like if a cop is driving down the street going way
316 over and you behind him, and then he pulls you over because you're speeding, but he
317 was leading the way, then you're like “No, dude, you led me on! You did it, I
318 thought I could do it. You weren't going to an emergency.” Because that's what
319 happened to me the other day, and I was like, “Dammit.”

320 Haley: Whoa.

321 **Facilitator: Okay, these are all good points. You guys are really bringing up a lot**
322 **of things that make me think, “Ah, I need to point this out,” so if I were doing**
323 **the presentation over now, I'm totally going to use this as an example now from**
324 **now on, you know where maybe sexual intercourse didn't exactly happen, but**
325 **that's still sexual assault. That is totally sexual assault, and I would feel very**
326 **comfortable telling your friend to call the Cottage or go to the Cottage, have**
327 **them do a medical exam on her. You know, I think she did the right thing by**
328 **taking pictures and things like that, and you know, it is up to her if she ever**
329 **wanted to press charges against that person, but um, but that's definitely a**
330 **really good example of sexual assault, where you could use any one of those**
331 **resources that I provided in the presentation, so...but, I think that you're right**
332 **that sometimes it's unclear, “Well, she didn't have sex, so what are they going to**
333 **do when she goes there?”**

334 Erin: Especially if they're drunk because she's going to be like, “I was drunk, I couldn't
335 make the decision” and they try to frame the guy, but what if the guy was drunk,
336 too?”

337 **Facilitator: Yeah, and so that's another thing that I get a question about every time**
338 **I do this presentation – what if both people are drunk. And obviously that's a**
339 **hard question to answer, but if both people are drunk, they shouldn't be having**
340 **sex. That's kind of the end all, be all, because it could be turned around either**
341 **way. You know the guy could go to the cops and say, “She was all over me, and**
342 **she made me have sex with her, and that's what happened.” And the girl could**
343 **do the same thing, and Georgia state law is that if you're drunk, you shouldn't**
344 **be having sex, and so...alright. Did you have any thoughts about...what did you**
345 **think, how do you think you would respond to a situation like that?**

346 Sarah: Well, I think...it's up to whoever it happened to. It's completely up to them
347 what they want to do with it, but I think that one thing that keeps a lot of people from
348 going forward with stuff is that usually people, like, one person is drunk a lot of
349 times, and so like if, maybe I was the victim and I went, then I'd have to admit that I

350 was drunk and I was leading someone on, and I think a lot of people don't want to
351 have to admit that they were wrong and then say like, "Oh, I did all this stuff wrong,
352 but then he did this to me," so it's like almost saying that you asked for it basically,
353 but then not at all. So it's like you have to admit a lot to report someone else.

354 **Facilitator: Yeah.**

355 Sarah: So I think maybe if more of the pros of reporting someone were known, then
356 maybe that would be good. I don't know exactly what happens if you report
357 someone, but...

358 Erin: I know online there's like all the pictures of – like I can't remember what it's
359 called, but they have all the posters of some really – like one I saw recently was a
360 picture of this girl when she was like 2 years old, and it said "Was my nightgown too
361 short?" and like she got raped when she was a child. But they came out with one with
362 guys, like grandparents aged, parents aged, and 25 year olds and younger kids, and I
363 don't know, like guys don't ever get talked about really, and girls are always
364 victimized.

365 **Facilitator: Yeah. That's absolutely true, and if you ever go into this field of**
366 **research, they'll tell you it's sometimes bad to talk about how guys can be**
367 **victims too because women are so often the victims, and it's just so typical for**
368 **women to be the victims and not guys, so it's almost unfair to focus on the guys,**
369 **or it's almost like it minimizes the burden to women, but that's a whole other**
370 **story.**

371 **Um, alright, so let's think back to – we'll talk just a little bit more about alcohol and**
372 **sex, um, and so did you guys think it was realistic at all to say, "If you're**
373 **drinking, you shouldn't be having sex,"?**

374 Erin: It's like, yes, but nooo....

375 Sarah: In an ideal world, yes, but I don't think that that's the way it works a lot of
376 times.

377 **Facilitator: Okay.**

378 Erin: It's a great idea when you think of like, there are varying levels "Are you blacked
379 out?" Well, if you're blacked out, then no, you probably shouldn't. But it's hard to
380 know, it's hard to tell.

381 **Facilitator: Alright, um, so what did you guys like the best about the presentation?**

382 Erin: I felt like it was really comfortable - like factual, so that was nice.

383 **Facilitator: Okay, you two – you guys both had a coed class, so would have been**
384 **more or less comfortable if it were just girls – just women?**

385 Erin: It didn't really bother me, I mean, besides all the football players making
386 comments the whole time, but that's – you can't really change that, so, I mean, I
387 thought it was fine. I feel like if it was just a room of guys, they wouldn't really pay
388 attention anyways.

389 **Facilitator: Really?**

390 Erin: So, I don't know. I feel like they wouldn't really pay attention because it's not
391 about them.

392 **Facilitator: Ha! But it's all about them, right? It's all about what they need to be**
393 **doing that they sometimes are not.**

394 Erin: It was like perfectly timed in my class because the day before we had played like a
395 game where we all debated our opinions, and we were all screaming at each other,
396 and we have this issue where none of us really know, and I was kinda like, "I have a
397 lot to learn." It was just interesting to see that everyone had a lot to learn – no one
398 really...Or you could know it, sure you know it, but you may not follow it when you
399 think about it.

400 **Facilitator: Yeah, okay. So was there anything at all that stands out in your minds**
401 **that you're like, "Oh, I really liked that part of the program,"?**

402 Erin: If I could look back at my notes, I could probably answer that better.

403 **Facilitator: Okay. Any conversations that come to mind because of the – because**
404 **of anything I brought up, or...?**

405 Erin: With the alcohol and girls leading on guys – that started a big debate in our class.

406 **Facilitator: Yeah, it did.**

407 Erin: Yeah, it got out of hand. But yeah, that's a really hard thing to figure out who's
408 right and wrong.

409 **Facilitator: Yeah...do you think that the conversation that we had because of that,**
410 **though, was helpful at all?**

411 Erin: Yeah, I mean, I know that we shouldn't be having sex if we've been drinking.
412 You know that when you go out, but a lot of people go out with the intention to go
413 home with someone. Like my roommate that had that, like she still does that.

414 **Facilitator: Okay. Anything that stands out for you?**

415 Sarah: Um, I'm trying to think since we didn't have a class discussion or anything, but I
416 think it was really good how the facts were presented. Like I said before, it's just like
417 right or wrong, no in between.

418 **Facilitator: Okay. So was there anything that you really did not like about the**
419 **program, like any of the conversations that it sparked in class. I know that there**
420 **was some – I got feedback from everyone from the quizzes that you guys took**
421 **online, and it was an optional quiz in your class, so I know you didn't have to**
422 **take it, but a lot of people really good, great feedback, and some people gave**
423 **some more negative feedback about like the examples that I provided in class –**
424 **were they inappropriate, or do you think other examples would have been**
425 **better? Do you remember any of the examples I gave?**

426 Erin: I mean, it's hard to talk about sex in front of a group because even though – like
427 right after you, we had a woman named Katie come – I think she's like UGA's sex
428 person, and she was just like, "Here's all these facts and bad things that can happen."
429 So, there were probably people who were like, oh it's iffy and there were these

430 examples that could really happen, but you could probably get a lot more graphic. I
431 don't remember any that offended me. I thought they were applicable.

432 **Facilitator: Okay. What about you?**

433 Haley: I don't know, I don't remember anything bothering me. It normally doesn't –
434 it's just an example you used to teach what you were trying to tell us.

435 **Facilitator: Okay. Was there anything that you guys didn't like? What did you**
436 **think of the videos?**

437 Sarah: I thought it was good. I think maybe more could have been – well it was like
438 trying to make consent not seem awkward, but I felt like there weren't that many
439 examples of how to go about having that conversation – like giving consent is good
440 and doesn't have to be awkward, but maybe not like a filmed example of people
441 giving consent, but maybe like ways you could phrase it in a less awkward way.

442 **Facilitator: Yeah, so actually we're thinking about ways we could bring in maybe**
443 **the drama program here at UGA and have them do some vignettes for the online**
444 **and in-person versions so they could do a little bit of role playing so you could**
445 **see how that happens in real life. Do you think that would be helpful?**

446 Sarah: Mmhmm.

447 **Facilitator: Okay. Was there anything that you guys didn't like about the**
448 **program? Sorry, I feel like I'm talking too much over here.**

449 Haley: No, I thought it was good.

450 **Facilitator: Okay, what did you guys think about the Jeopardy part?**

451 Erin: Well, we had test questions on it, so I paid attention. [Laughter.] I think we all
452 did, though, just because of the way [teacher name redacted] teaches, like if there's
453 questions that get put on the board, they're probably going to be on the test. So we all
454 paid attention. I know I made an A on the test, so I think I got them right. I mean, I
455 thought it was a good way – didn't we do it at the end, I think to review? Yeah, I
456 thought that was a good way to review instead of you just like lecturing to us to see
457 what we all know and everything.

458 **Facilitator: Yeah, okay. Alright, so after you completed the program, do you think**
459 **that either you guys, your friends, your classmates who were there – do you**
460 **think any of y'all changed your behavior at all? Did it make you think about**
461 **things in a different way?**

462 Sarah: I think it made me think a little bit more. Like, it's in the back of your mind
463 whether or not you think it is, so if you're put in that situation, you can think about
464 that stuff and maybe apply it differently than you would have in the past.

465 **Facilitator: Okay. Any other thoughts?**

466 Erin: It's just like funny to know the list – like verbal, enthusiastic, and then comparing
467 it to your real life experience, and you're like, "Well, I gave consent, but I wasn't like
468 'Hell yeah!'" [Laughter.] But, it's just like sort of the word enthusiastic – I know

469 what it means, and I understand it, but I don't know if that's like the right word.
470 Does that make sense?

471 Sarah: Yeah.

472 Erin: Yeah, because you want to be willing and you want to be looking forward to it, but
473 a lot of times, a lot of people can be like, "Are you sure?" and you're like, "Yeah,"
474 but you're not like, "Oh yeah!!" [Laughter.]

475 **Facilitator: Don't you think the sex would be better, though, if you're like "Oh**
476 **yeah!!" [Laughter.]**

477 Erin: No, I'd probably laugh, and then be like, "Oh no, you killed [the mood], just stop."
478 [Laughter.]

479 Facilitator: Okay. Alright, um, how about you – anything to weigh in on?

480 Haley: Not really, I feel like everything's kind of been covered.

481 **Facilitator: Okay. Um, so we've kind of covered this before, but are any of you**
482 **more willing now to talk to your friends about consent or your partners about**
483 **things that maybe have not been consensual?**

484 Erin: I'm more informed.

485 Sarah: Mmhmm.

486 Erin: You can't just be like, "Dude, that's wrong," and not give an example of the
487 missing link, but now I know how...to complete the chain, I guess.

488 **Facilitator: Okay, cool.**

489 Sarah: Yeah, I don't know if I would talk to my friends about it necessarily. I feel like
490 people don't really talk about consent that much, but if it came up, I'd know what to
491 tell them.

492 Erin: Yeah, like the issues. I wouldn't just start a conversation about it, unless I just like
493 walked out of class and was like, "Guess what we learned today..." But, yeah.

494 **Facilitator: How about with your partners?**

495 Haley: It's never been a problem for me.

496 **Facilitator: Yeah? Good. Um, so I kind of also gave some examples of things to**
497 **say if you see something happening to someone else, like downtown or at a party.**
498 **Do you think you would be better able to step into a situation now and say,**
499 **"Hey, that's not right, and this is why," or...?**

500 Erin: I don't know, I feel like I just normally would pull my friend away and remove
501 them from the situation.

502 **Facilitator: So you already do intervene?**

503 Erin: Yeah, because I just don't put up with that. Yeah, I don't know, I just don't want
504 them to make bad decisions that they'll regret later. I'd rather just stop it at the
505 source.

506 **Facilitator: Yeah, that's awesome.**

507 Erin: I don't know, I feel like those situations are easier because if it's downtown, I'll
508 just be like, "Yeah, you don't know him." But then you have, like, I've been in bad
509 relationships or I have friends who have been in bad relationships, where it's like,
510 they get in a fight, and their boyfriend won't let them leave, or they get in a fight and
511 one of them hits the other, and it's no big deal to them because it happens all the time,
512 but they're both miserable, and you're just kind of like, "You need to stop," but that
513 doesn't always work. It's hard thing to understand if you haven't been there, because
514 I feel like everyone they say the cliché thing like, "You're not trapped," or "You need
515 to get away, you need to contact someone." But that's how you feel. It's hard for
516 people to understand, like, "If he treats you bad, why don't you leave him?" or "If she
517 screams at you and won't let you do anything, why don't you leave her?" But it's
518 hard to...

519 **Facilitator: Yes, it is hard to tell someone who's in that situation that they're in it**
520 **because they probably – I mean, we're all college educated people here, right?**
521 **They probably realize that it's not a healthy relationship, but there's always**
522 **kind of a – maybe a hesitancy to get out of a relationship like that maybe because**
523 **they're afraid of what their partner might do to them, or they're afraid of being**
524 **alone – things like that. But, yeah, it's hard to bring up, but as long as you feel**
525 **like you could bring it up, that's good. Ultimately, it's up to the person in the**
526 **relationship what they're going to do, right?**

527 Erin: Mmmhmm.

528 **Facilitator: Um, alright, so a couple questions to wrap things up. First of all, is**
529 **there anything that you guys want to tell me about the program that we haven't**
530 **already talked about?**

531 [Silence.]

532 **Facilitator: Okay, well there are a couple things going on here at UGA like other**
533 **programs like the Consent Is Sexy campaign – have you guys heard about that?**

534 Erin: I've seen the shirts.

535 Sarah: Yeah.

536 **Facilitator: Where have you seen them?**

537 Erin: Like people wearing them, I guess. But I don't know – I don't like the way that's
538 phrased at all.

539 **Facilitator: Consent Is Sexy?**

540 Erin: Yeah, it's just weird.

541 Sarah: Yeah, it's kind of cheesy.

542 Erin: Yeah.

543 Sarah: I don't know where I've heard it. I just know I've heard the phrase before.

544 Erin: I don't know if it's being advertised right. Like, last year, my roommate was like,
545 "Hey, I got this coozie that says Consent Is Sexy." Well, great, I have a coozie or I
546 have a shirt, but what does that mean? I just don't know if it's being taught – like

547 here's this, this, and this, and it's supposed to provoke you to think about it, but I just
548 think that's weird because I'm never going to use that or anything.

549 **Facilitator: Yeah, I think that it is, um, just supposed to like make you think about**
550 **it because there's no real presentation about it or anything like that – it's not a**
551 **real program, it's just a campaign. So that's kind of why I came in and thought,**
552 **we need to talk to these people about what's going on here. So, have you guys**
553 **heard of any other – like you mentioned that Katie came and spoke to your class**
554 **– have you guys gone to any other talks or heard any other sexual health stuff**
555 **here on campus?**

556 Sarah: Not besides her talking to our class. And I know they gave out condoms at the
557 Tate Center one time – it was around Halloween, and they said like, “Wrap your
558 Halloweiner,” or something like that.

559 **Facilitator: I just saw that the other day! That's so cool.**

560 Sarah: And then in the dorms, you had those bulletin boards in your hall, and one of
561 them was about sexual health and stuff like that.

562 Erin: I think there's something like dating violence, too, but I don't think that's talked
563 about as much as it should be. Because, I mean, you think about it and it's like
564 violence is like verbal, physical, emotional, mental, but when – I don't feel like
565 people usually count those together. I mean that even goes with consent too.

566 **Facilitator: Yeah, I totally agree. Okay, well, I think that's about it, and I know**
567 **we're running out of time here. But thank you so much for participating today.**
568 **Is there anything else we haven't covered that you want to bring up?**

569 Erin: No...Thank you.

570 Sarah: Yeah, thanks. And thanks for the gift card!

571 **Facilitator: Yeah, no problem. Thank you guys for coming.**

572 Sarah: Good luck with your research.

573 **Facilitator: Thanks! I appreciate it.**

D. Program Fidelity Evaluation

F-iConsent Class A Fidelity Monitoring Evaluation

To what extent did the content of group discussions focus on abusive relationships or sexual violence?

- Content or discussion about abusive relationships or sexual violence occurred during most of this session.
- Content or discussion about abusive relationships or sexual violence occurred in half of this session
- Content or discussion about abuse or healthy relationships occurred in less than half of this session

Please identify other content or themes discussed:

To what extent did the facilitator use discussion questions either generally or from the Jeopardy program to stimulate discussion?

- Discussion questions were used in all or most of this session
- Discussion questions were used in some parts of this session
- Discussion questions were not used in this session.

Please identify what types of discussion questions the facilitator used:

Asked questions freq. and encouraged discussion during jeopardy. She asked questions throughout to keep students on toes

Please identify what types of activities were completed:

Jeopardy was used to assess knowledge

To what extent was the Jeopardy game completed?

- The entire game was completed (all questions were answered).
- More than half of the game was completed. about half
- Less than half of the game was completed.

How did the facilitator use group time in this session?

- frequently used group time to respond to questions or stimulate discussion
- occasionally used group time to respond to questions or stimulate discussion
- used group time primarily for structured activities (e.g., presentation and Jeopardy game)

To what extent did the facilitator allow group members to direct the group session?

- frequently gave room for group members to raise questions and issues (or initiate discussion) about relationships that are relevant to them even if they were not planned discussion points generated by the presentation or Jeopardy game.
- occasionally gave room to group members to raise questions and issues about relationships even if they are not planned.
- followed the presentation and game sequence and structure

Did the facilitator use check-in or icebreakers at the beginning of the session?

- Used in this session
- Not used in this session

How would you describe the role of the facilitator in this session?

- facilitator talked less and allowed group to initiate and lead discussion
- facilitator initiated discussion but then group took the lead
- facilitator initiated most of the discussion and talked more as group members were passive and quiet

How would you describe the participation in this session?

- Participation was balanced (everyone participates more or less equally)
- Participation was semi-balanced, but some participants dominated while others were more quiet or withdrawn.
- Participation was very much dominated by a few participants

What was the level of support or feedback among participants in this session?

- high level of support/feedback among participants
- moderate level of support/feedback among participants
- low level of support/feedback among participants

Did you see participants learning new skills and strategies in this session?

- Most participants demonstrated or reported learning new communication or problem solving strategies for relationships or sexual encounters.
- A few participants demonstrated or reported using new communication or problem solving strategies for relationships or sexual encounters.
- Participants didn't demonstrate or report using new communication or problem solving strategies for relationships or sexual encounters.

To what extent did participants share personal experiences?

- Participants frequently shared personal experiences and feelings in this session
- Participants sometimes shared personal experience and feelings in this session
- Participants didn't share personal experiences and feelings in this session

What did group members learn or gain by being in this group? How were members in this group impacted by the program? Was any specific feedback about the program provided by group members?

They seemed to have learned bc they got all the answers right for jeopardy and were able to elaborate

Did students express any concerns about the observer in the room?

Did the facilitator notice any marked differences in the group members because of the observer? (Or, did the facilitator describe the observed group as different in any way from an unobserved group?)

Notes about session/engagement

intro - what is dating violence
encouraged discussion > icebreaker

explain what is dating violence
good examples

students taking notes

Prev of dating violence

who are victims (asked class?)

- Nods from them
- showed clip from Teen Mom
- slight laughs

How big is problem? (sexual violence)

Purpose of iConsent

What is sexual consent? → good explanation of it and
examples from survey

- watched video - some giggles from students

Why is consent important? rhetorical question

- verbal
- enthusiastic
- active
- honest

students are taking notes/very quiet... quietly engaged

- sober → sexual assault
- asked question - good response good rapport
building (do something stupid when drunk)
- continual

How can I obtain consent continually?

Why is consent sexy

Asked class if they heard? Students responded
by raising hands

Examples of coercion - nice examples → sexual assault
risk for being victim/perp

Preventing violent dating relationships

what to do if you have been assaulted

supporting friends

campaign in NY - asked class if they've seen it (some
hands raised)

Resources - asks if any questions

Jeopardy game

students seemed vested

answered correctly !!

encouraged discussion about Kevin & Meagan's
relationship

F-iConsent Class B Fidelity Monitoring Evaluation

To what extent did the content of group discussions focus on abusive relationships or sexual violence?

- Content or discussion about abusive relationships or sexual violence occurred during most of this session.
- Content or discussion about abusive relationships or sexual violence occurred in half of this session
- Content or discussion about abuse or healthy relationships occurred in less than half of this session

Please identify other content or themes discussed:

To what extent did the facilitator use discussion questions either generally or from the Jeopardy program to stimulate discussion?

- Discussion questions were used in all or most of this session
- Discussion questions were used in some parts of this session
- Discussion questions were not used in this session.

Please identify what types of discussion questions the facilitator used:

She asked gave an example and asked students if it was sexual violence

Please identify what types of activities were completed:

Jeopardy/Survey

To what extent was the Jeopardy game completed?

- The entire game was completed (all questions were answered).
- More than half of the game was completed.
- Less than half of the game was completed.

I think we got through 3 or 4 questions

How did the facilitator use group time in this session?

- frequently used group time to respond to questions or stimulate discussion
- occasionally used group time to respond to questions or stimulate discussion
- used group time primarily for structured activities (e.g., presentation and Jeopardy game)

What did group members learn or gain by being in this group? How were members in this group impacted by the program? Was any specific feedback about the program provided by group members?

I think this jeopardy really facilitated a great discussion and it showed they were really thinking about what kristin was talking about

Did students express any concerns about the observer in the room?

Did the facilitator notice any marked differences in the group members because of the observer? (Or, did the facilitator describe the observed group as different in any way from an unobserved group?)

Notes - 9/10/2013

(students taking notes throughout)

Class is bigger than yesterday and much more rowdy!!!

Objectives of consent

- purpose, how to avoid it

What is dating violence (posed to class) → wheel of violence

What does dating violence look like (asked about bf/gf & privacy)

• examples of each one ... forcing to watch porn (students giggled)

Prev. of dating violence

→ if just women at battered shelter

Who are victims? (asked class → verbal response)

- asked who watch Teen Mom → students reacted/answered

- students around me reacted ("that girl's crazy")

Prev. of sexual violence

Sexual consent

What is sexual consent?

- shows video (students around me chuckling in response)

- survey example - sex consent can be awkward

Why is consent important?

Consent is...

voluntary - BF examples → students giggling

enthusiastic - BF you should want to! giggling again

verbal - boundary about doggy vs. anal. (All laughing)

Active - respectful example

Honest - convo/ex. about compromising

Sober - (students whispering about this). asked how many have done something stupid? students raised hands

- student asked, "what if neither remember?"

- asked if wouldn't you want to remember?

continual - giggles to foreplay comment.

- students laughing to how to get consent continually

ex.

Asked if they heard about consent is sexy. hands raised

Why is consent sexy?

* students all still taking notes

LOVED the ex. of how consent equalizes power in relationship

Ex. of coercion

- good examples - condom ex/contraception deception/virgin

- asked if they had any questions

Who's at risk?

Is that sexual violence? Asked students. Talked about examples to clarify the line of being sober vs. drinking and having sex
If you are in a violent dating relationship... → shared his feelings
If you are sexually assaulted

Support friends

See something, say something

- Asked how many have told a friend... Hands raised

Resources - Any questions

JEOPARDY

Students willing to answer and quickly stimulated a discussion about what would you do w/ your friend

Discussion about Lindsey question

- The blurred line was clear in the comments
The idea of it being subjective, came through

Asked if the lin 4 girls if it's reported by girls as rape

Students were disagreeing a lot. very controversial convo. said the scenario wasn't rape / sex assault and it shouldn't be pinned on Jason bc she took drinks and went home

girl said she would get the message if a guy bought her drinks and ~~took her~~ home asked her