Community Responsibility for Preventing Sexual Violence: A Pilot Study with Campus Greeks and Intercollegiate Athletes

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SUMMARY. Previous research has noted higher incidences of sexual violence on campus among members of campus Greeks and athletes and the need to do prevention programs with them. This article presents the results of an exploratory pilot study of a sexual violence prevention program with members of one fraternity, sorority, men’s and women’s intercollegiate athletic team. The program, experimentally evaluated and found to be effective with a general sample of undergraduates, was used to determine its efficacy specifically with Greeks and athletes. The model on which the program is based calls for prevention efforts that take a wider community approach rather than simply targeting individuals as potential perpetrators or victims. Results from repeated-measures analysis of variance indicate that the program worked overall. Future directions are discussed.
Researchers focusing on sexual violence as a widespread problem on college campuses have found almost unanimously that these locations constitute at-risk communities (e.g., Abbey, Ross, & McDuffie 1996; Banyard, Ward, Cohn, Plante, Moorhead, & Walsh, 2007; Fisher, Cullen, & Turner, 2000; Himelein, 1995; Synovitz & Byrne, 1998). For example, approximately 50% of college women experience some form of unwanted sexual activity (e.g., Abbey, Ross, & McDuffie 1996; Synovitz & Byrne, 1998). The recent National College Women Sexual Victimization study (Fisher, Cullen, & Turner, 2000) estimates that one in five college women experience completed or attempted rape during their college years. Moreover, they found college women to be at higher risk for sexual assault than their non-college peers (Karjane, Fisher, & Cullen, 2005). Studies such as the one conducted by Larimer, Lydum, Anderson, and Turner (1999) and Banyard, Ward, Cohn, et al., (2007) show that college men also report unwanted sexual experiences. Finally, a variety of research also highlights the importance of identifying at-risk subgroups within a campus community such as campus Greeks and intercollegiate athletes (e.g., Binder, 2001). Despite the aforementioned findings, Karjane et al. (2005) found that fewer than half of the colleges and universities in their sample had prevention programs or prevention curricula with a focus on sexual violence. Moreover, the Centers for Disease Control and Prevention recently released a report on sexual violence prevention aimed at spurring more research and program development in this area (2004).

The current article presents data from an exploratory pilot test of a prevention program to reduce sexual violence on campus with specific emphasis on members of the Greek system and athletic teams. The model used is innovative in that it approaches participants as potential bystanders and is embedded within a theoretical framework that stresses sexual violence as a broad community problem that all community members have responsibility for ameliorating. The program was previously evaluated with a general undergraduate population (Banyard, Plante, & Moynihan, 2004, 2005; Banyard,
Moynihan, & Plante, 2007) and found to be successful in improving attitudes, increasing knowledge, and producing positive prosocial behaviors. We wanted to explore the program’s efficacy with both male and female members of campus Greek organizations and intercollegiate athletes. We focused on these groups because of their recognition and prominence on most campus communities and because of mixed findings from past research regarding the relationship between these groups and sexual violence on campus (e.g., Frintner & Rubinson, 1993; Humphrey & Kahn, 2000).

Although discussions of prevention of sexual violence have been going on for quite some time, the persistence of this problem has led to calls for renewed efforts to more effectively prevent these problems (e.g., Breitenbecher, 2000; Lonsway, 1996). One promising approach uses a broader community perspective on prevention that brings in bystanders and teaches them to behave in prosocial ways (Banyard et al., 2005). This model approaches all community members as individuals who may be able to intervene before, during, or after an event occurs. Rather than approaching men as potential perpetrators and women as potential victims, this model is based on the premise that everyone has a role to play in ending sexual violence on campus. The framework fits with research showing that an important causal factor in sexual violence, particularly violence against women on campus is peer/social norms that implicitly and explicitly support these behaviors (e.g., Schwartz & DeKeseredy, 1997).

According to the CDC’s “Sexual violence prevention: Beginning the dialogue,” the first two steps in sexual violence prevention involve careful definition of the problem and related risk and protective factors (CDC, 2004). The program employed in this study was based on research showing the widespread nature of the problem of sexual violence on campuses including a careful needs assessment in the specific community in which the program was to be implemented (Banyard et al., 2004). This research showed that 20% of female undergraduates experienced an unwanted sexual experience during nine months of one academic year, a rate comparable to national statistics. Next, the current study was grounded in the identification of risk and protective factors. In terms of risk, the current program identified strong research on the powerful role of community norms in supporting a continuum of sexually coercive behaviors (e.g., Schwartz & Nogrady, 1996; Schwartz & DeKeseredy, 2000). Furthermore, the current study was based on
a growing compilation of research that identifies at-risk segments of campus communities for behaviors related to perpetration and victimization, particularly Greek and intercollegiate athletic sub-communities (e.g., Brackenridge & Fasting, 2002; Humphrey & Kahn, 2000; Schwartz, DeKeseredy, Tait, & Alvi, 2001).

For example, a number of studies have noted higher association between rape-supportive attitudes held by fraternity men and/or intercollegiate male athletes (e.g., Boeringer, 1999) and greater incidences of sexual aggression on campus committed by fraternity men and/or intercollegiate male athletes (e.g., Boeringer, 1996; Frintner & Rubinson, 1993; Koss & Gaines, 1993; O'Sullivan, 1993; Sanday, 1990) compared to their non-fraternity or athletic team peers. Other studies, however, have not found this association (e.g., Smith & Stewart, 2003) and further research on these two groups is needed to understand better the reasons for these mixed results as they may inform prevention efforts in these communities (e.g., Boeringer, 1999; Brown, Sumner, & Nocera, 2002; Koss, 1996; Sawyer, Thompson, & Chicorelli, 2002). This is key given that research on prevention finds mixed results as to their effectiveness with these groups in terms of reducing adherence to rape myths or other attitudes contributing to sexual aggression on campus (e.g., Brown, et al., 2002; Foubert, 2000; Shultz, Scherman, & Marshall, 2000).

Additionally, research has shown that sorority women are at higher risk for rape than their non-sorority peers (Coperhaver & Grauerholz, 1991; Mohler-Kou, Dowdall, Koss, & Wechsler, 2004). This has led to calls for greater educational programming for sorority women regarding sexual assault prevention. Even so, most of the literature on prevention among Greek communities continues to focus on male fraternities (e.g., Mohler-Kuo et al., 2004).

The plethora of research on fraternity men, sorority women, and male athletes notwithstanding, few studies focus on American women collegiate athletes in terms of their susceptibility to rape or other forms of sexual coercion except for those focusing on sexual harassment or abuse by coaches (e.g., Volkwein, Schnell, Sherwood & Livezey, 1997). In particular, very few studies that have included them in sexual violence prevention programs (O’Brien, 2001; Holcomb, Savage, Seehafer & Waalkes, 2002). Including women athletes in the study of prevention efforts is an important new area of inquiry.

Binder (2001) concludes, based on his review of studies focusing on sexual assaults, campus Greek communities, and intercollegiate
athletes that the “studies suggest that the fraternity and sorority environment and the athletic environments are where prevention efforts should be directed if the culture of sexual assault is to be challenged” (p. 124). To this end, the current article presents a pilot test of a prevention program to reduce sexual violence on campus with members of the Greek system and athletic teams as potential bystanders.

**RESEARCH ON THE ROLE OF THE Bystander**

Focusing on the role of the bystander is an innovative approach to the widespread problem of sexual violence prevention across campuses and other communities (e.g., Banyard et al., 2004, 2005; Banyard, Moynihan, & Plante, 2007; Katz 1994; DeKeseredy, Schwartz, & Alvi, 2000; Foubert, 2000; Berkowitz, 2002; O’Brien, 2001). This approach involves teaching bystanders how to intervene safely in situations that involve sexual violence. While still involving programming that trains groups of individuals, this model takes next steps toward a broader community approach to prevention. The bystander model gives all community members a specific role with which they can identify and adopt in preventing the community problem of sexual violence. This role includes interrupting situations that could lead to assault before it happens or during an incident, speaking out against social norms that support sexual violence, and having skills to be an effective and supportive ally to survivors. It is based on studies that point to the role of community norms as a significant cause of sexual violence particularly in communities like college campuses (Schwartz & DeKeseredy, 1997, 2000) and a large body of theory and empirical studies in social psychology on conditions that facilitate or hinder prosocial helping by bystanders (e.g., see Banyard, et al., 2004 for a review and application to sexual violence). Although the responsibility for sexual violence perpetration properly rests with the offenders, research has identified risk factors and social contexts that may increase the likelihood of sexual victimization and facilitate or hinder support of survivors. Attention to all of these factors will likely facilitate effective primary prevention efforts at the community level. Thus, the aim of the current exploratory study is to test the bystander approach based on the community of responsibility with one fraternity, one sorority, one men’s athletic team, and one women’s athletic team in order to determine its efficacy for future studies with larger numbers of members of these groups.
Consistent with the recommendations from the CDC’s 2004 report, previous prevention efforts were reviewed, and the current study used a program that had demonstrated efficacy over time (e.g., Banyard, Moynihan, & Plante, 2007). Although the program comes in two forms, a shorter, 90-minute program was thought to be easier for practitioners to put into place with campus Greeks and athletes and thus it was chosen for the pilot to determine if it would have the same outcome with these two campus constituencies. The program is conducted with a single-sex group with peer group leaders, two women and two men, facilitating each session. Two of the group leaders had conducted the program previously on numerous occasions, and the two new group leaders were experienced in other forms of leadership roles. They received six hours of training on the prevention program, and each of the newly trained group leaders was paired with a veteran leader.

Each component of the program was based on empirical literature on bystander behavior (See Banyard, et al., 2004 for a review) and noted best practices regarding rape prevention (e.g., Lonsway, 1996). Program content covered basic information about sexual violence as well as discussions of how community members can play important prevention roles as bystanders observing risky situations before and during acts of sexual violence (e.g., observing a very intoxicated person being lead into a bedroom at a party by a group of people), and afterward if a friend discloses that they have been a victim. Active learning exercises (e.g., role plays) were used to model how participants could intervene safely and be a supportive ally to survivors. Particular emphasis was placed on participants’ safety and on using resources such as campus police and rape crisis center resources. Participants were asked to generate a “bystander plan” and to sign a pledge that they would be active, prosocial bystanders in the community.

**METHODS**

**Participants**

With the cooperation of the campus Office of Greek Affairs, Inter-Fraternity Council, and Pan-Hellenic Council, we recruited one
fraternity and one sorority from the recognized chapters affiliated with
the university to participate in our pilot program. In addition, the
Athletic Department provided access to two intercollegiate teams.
Men and women from both of these groups go through some form of
mandatory programming sponsored by their respective campus office
(Athletics Department, Office of Greek Life) focusing on sexual assault;
about 62% of the pilot study participants reported that they had
attended a program on sexual assault or rape, though none of it had
the bystander and community-orientation of the program we evaluated.

One hundred, twenty-seven students (42 fraternity, 46 sorority, 21
men’s athletic team members, and 18 women’s team members) filled
out pretest surveys a week prior to the program, and 106 of them (32
fraternity, 38 sorority, 21 men, and 15 women athletes) filled out postt-
est surveys at the program’s end. Given the potential ease of identifying
students of color from these 4 groups participating in this project and in
order to better maintain the promise of confidentiality to these partic-
ipants, we did not ask students to identify their race or ethnicity. Part-
icipants came from all colleges across the university and their average
age was 19.9. Other background information of interest includes that
38% of this sample had a course in which sexual assault was discussed;
and 61.9% had attended a program on sexual assault. In addition,
59.6% reported that they knew a victim of sexual violence; 41.3% said
they knew “someone who had engaged in unwanted sexual contact with
someone who didn’t want to”; and 22.2% of the women and 6.7% of
the men indicated that “someone forced [them] to engage in unwanted
penetration (oral, anal, and/or vaginal).”

Procedures and Measures

Each of the groups received the program separately from the
others in the group’s fraternity house, sorority house, or athletic
facility. This differed from the original research (Banyard, et al.,
2005) where programs were conducted in campus classrooms.

MEASURES

Knowledge Scale. (Banyard, et al., 2005)

This scale was created from a battery of 9 multiple-choice ques-
tions, recoded into 43 dichotomous items on which a respondent
could score either correctly or not. This scale assesses the participant’s knowledge of facts relating to sexual violence (e.g., the definition of consent, what constitutes sexual violence, the number of women and men who experience sexual assault). Pretest scores ranged from 7 to 28; one participant had missing data on this scale.

Knowledge of Interventions. (Banyard, et al., 2005)

Participants were asked to list “helpful bystander behaviors that could be used in the case of sexual violence.” Participants scored a point for every correct behavior they listed. Pretest scores ranged from 0 to 4; one respondent had missing data on this measure.

Don’t Know. (Banyard, et al., 2005)

With regard to the entire set of the 10 knowledge questions (includes the 9 in the “knowledge scale” and the 1 “knowledge of interventions” question), participants were asked to check “did not know” rather than to guess if they did not know the answer to a question. Participants scored a point for each time they checked “don’t know.” Pretest scores ranged from 0 to 8; one respondent had missing data on this measure.

Illinois Rape Myth Acceptance Scale—Short form. (Payne, Lonsway, & Fitzgerald, 1999)

This is a 20-item set of questions with 17 of the items composing the scale (3 serve as fillers) that was developed to assess participants’ endorsement of a variety of common myths about sexual assault. Participants indicated on a 7-point Likert scale the extent to which they agree with each item. For example, “Women tend to exaggerate how much rape affects them.” Higher scores indicate greater acceptance or endorsement of rape myths. Pretest scores measured from 17 to 105; no participants had missing data on this scale.

Bystander Attitudes. (Banyard, et al., 2005)

Participants are provided a list of 51 potential bystander helping behaviors and are asked to indicate how willing or likely they would be to engage in that bystanding behavior using a five-point Likert scale. For example, “How likely are you to investigate if you are
awakened at night by someone calling for help?” Scores were created by summing responses across the items. Higher scores indicate greater willingness to engage in prosocial bystander behaviors. Pretest scores ranged from 102 to 241; no participants had missing data on this measure.

**Bystander Efficacy Scale.** (Banyard, et al., 2005)

Participants were asked to indicate their confidence, on a scale of 0 “can’t do” to 100 “very certain can do,” in performing each of 14 bystanding behaviors. For example, “How confident are you that you could ask a stranger who looks very upset at a party if they are ok or need help?” Scores were created by subtracting the mean of these 14 items from 100 to create a scale of perceived ineffectiveness thus higher scores indicate lesser effectiveness. Pretest scores ranged from 0 to 59.57; two participants had missing data on this scale.

**Post-Program Evaluation Questions.** (Banyard, et al., 2005)

Five questions appeared at the end of the posttest as part of the program evaluation: (1) What specific information did you receive that was new or surprising?; (2) As a result of this program, I will ...; (3) Would you recommend this program to others on campus including your friends? Why or why not?; (4) Please list three things you liked best about the program; and (5) Please list three things you would change about the program (alternatively, participants could check “I wouldn’t change anything”). Results from these questions were analyzed separately from the analysis of variance or t-tests reported in what follows.

**RESULTS**

The primary method of data analysis was a repeated measures analysis of variance to compare scores across the six outcome measures from pretest to posttest time for all the participants and then for men and women separately (rather than separately for each of the four individual groups because of the small number of athletes remaining in their respective posttest groups, especially women athletes). Overall, there were significant effects for time,
$F(6, 96) = 16.11, \ p < .001$, Wilks’ Lambda = .498, partial eta squared = .50, and for sex $F(6, 96) = 4.02, \ p < .001$ Wilks’ Lambda = .80, partial eta squared = .20, but no significant time-by-sex interaction. This means that the program worked for both men and women. This conclusion is supported by the results of the paired sample $t$-tests presented in Table 1. Paired sample $t$-tests were conducted for participants as a whole and separately for men and women for the 6 outcome variables. A Bonferroni correction was utilized to reduce the chance of making a Type I error, thus setting the alpha level at .008 for a 2-tailed test of significance of the change from pretest to posttest for each of the six outcome variables.

The results indicate that the program worked overall. Of the six outcome variables, knowledge of interventions, helping attitudes, and bystander efficacy all improved significantly from pretest to posttest. In addition, the number of times “don’t know” was given as the answer to the ten knowledge questions dropped significantly from pretest to posttest. Results for the women mirrored the overall results with the same four of the six outcome variables changing significantly from pretest to the posttest time: an increase in their knowledge of interventions, a reduction in the number of times they answered “don’t know,” an increase in willingness to help, and an increase in their confidence to intervene in situations. However, results for the men as a group indicate that only two of the six outcome variables changed significantly: an increase in knowledge of interventions and a decrease in the number of times they answered “don’t know” to the knowledge questions. This suggests that future programming may need to be conducted somewhat differently for men and women from these constituencies.

In addition, results from the open-ended questions support the quantitative findings regarding the combined four groups. About 30% of participants said that they learned something new/surprising rising about general statistics, prevalence, and causes of sexual violence; 23% volunteered that they learned something new/surprising about helping, intervening, and so on; approximately 64% volunteered that they would be more active bystanders as a result of the program; 58% said they would not change anything about the program; and 98% said that they would recommend this program to others on campus, including friends. Overall, these findings suggest that the program’s approach to participants as bystanders rather than as potential perpetrators or victims does seem to make them more
TABLE 1. Descriptive Statistics and Paired Sample t-tests of Pretest and Posttest Measures

<table>
<thead>
<tr>
<th>Scales/Measures</th>
<th>All Participants</th>
<th>Men</th>
<th>Women</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
<td>df</td>
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<tr>
<td>Knowledge questions</td>
<td></td>
<td></td>
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<tr>
<td>Pretest</td>
<td>18.42</td>
<td>5.46</td>
<td>18.79</td>
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<tr>
<td>Posttest</td>
<td>18.88</td>
<td>5.77</td>
<td>104</td>
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<tr>
<td>Knowledge of interventions</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Pretest</td>
<td>1.14</td>
<td>1.30</td>
<td>0.83</td>
</tr>
<tr>
<td>Posttest</td>
<td>2.30</td>
<td>1.24</td>
<td>104</td>
</tr>
<tr>
<td>Don't know</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Pretest</td>
<td>3.96</td>
<td>2.20</td>
<td>4.03</td>
</tr>
<tr>
<td>Posttest</td>
<td>3.04</td>
<td>2.15</td>
<td>104</td>
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<tr>
<td>Rape Myth acceptance</td>
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<tr>
<td>Pretest</td>
<td>32.37</td>
<td>13.78</td>
<td>34.84</td>
</tr>
<tr>
<td>Posttest</td>
<td>33.80</td>
<td>13.36</td>
<td>105</td>
</tr>
<tr>
<td>Helping attitudes</td>
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<td></td>
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<tr>
<td>Pretest</td>
<td>192.22</td>
<td>25.26</td>
<td>184.57</td>
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<tr>
<td>Posttest</td>
<td>200.78</td>
<td>29.70</td>
<td>190.18</td>
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<tr>
<td>Bystander Efficacy</td>
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<tr>
<td>Pretest</td>
<td>18.63</td>
<td>12.68</td>
<td>21.40</td>
</tr>
<tr>
<td>Posttest</td>
<td>15.21</td>
<td>13.64</td>
<td>103</td>
</tr>
</tbody>
</table>

* \( p < .008 \) (2-tailed).
open to listening to the program’s messages about helping to reduce sexual violence before, during, and after it occurs.

**DISCUSSION**

On the whole, the current study found that sexual violence prevention using a bystander approach was effective with campus Greeks and athletes. This extends earlier findings with this model that found success with a more general student population (e.g., Banyard, Moynihan, & Plante, 2007). The extension of this finding of program efficacy indicates that a bystander approach to sexual violence prevention may be an important tool in community efforts to ameliorate this all too frequent community problem. It raises interesting questions about how prevention messages, although still targeted at groups of individuals, may help those individuals to see their actions in a broader community context and take greater responsibility for change in their communities. Future research examining the potential impact of such a program on broader measures of community engagement will be important.

Nonetheless, these results are more encouraging regarding the efficacy of the program for women in these two campus constituencies, but because of the small number of participants, especially the male and female athletes, and that each group only represented membership in one example from their constituency (1 fraternity, 1 sorority, 1 men’s or woman’s intercollegiate athletic team), only provisional answers about the effectiveness of the program can be made.

Based on the results of the *t*-tests, it appears that a longer program may be warranted for fraternities and men’s athletic teams. That is, these groups may require a “higher dose” (e.g., a longer program) compared with students in the general university population. This fits with previous work by Banyard et al. (2007) showing greater gains in positive outcomes for the set of three 90-minute sessions dose intervention compared to the one-session program.

On the qualitative side, these results also led us to wonder about setting effects of going to the participants’ territory to conduct the program and its evaluation. Perhaps the classroom setting, where the original sessions took place, lends a needed atmosphere of “authority” to the program that the common areas of their “house” or “center” do not that increases the program’s impact.
Even so, it is clear from the results of t-test for knowledge of interventions question and from looking at the answers to the open-ended question at the end of the program that many participants from the fraternity and the men’s athletic team appear to have received a good part of the intended message. They used the language of the program in that they completed the sentence “As a result of this program, I will...” “be a pro-active bystander,” “be a more attentive bystander,” “intervene more often,” “intervene when I think a person needs help,” and “pay more attention at parties and help when I can.” These are important messages for them to have learned.

In addition, these tentative findings and the bulk of literature focusing on the relationship between campus Greeks and athletes and sexual violence on campus speak to the great need to extend the audience for this program to a much larger number of members of these at-risk populations and in ways that can be easily built into institutionalizing sexual violence prevention programming regularly over time. We think that this is especially true for intercollegiate women athletes because so little is known about them in terms of their knowledge about, attitudes toward, rates of victimization, and willingness to be prosocial bystanders.

We recognize that in addition to the small sample size, this pilot study has a number of other limitations. First, we have no control group with which to compare posttest results and no longitudinal data to measure change in behavior or persistence of changes in knowledge of interventions. In addition, we understand that finding changes in attitudes does not equate to changes in behavior, although research exists demonstrating that there is a link between the two (O’Donohue, Yeater, & Fanetti, 2003).

This exploratory study does, however, give us a good indication of directions for further research. Clearly, future studies should examine the prevention programming needs of these constituency groups within campus communities. As a first step in developing primary prevention, however, the current study is useful. Beyond its efficacy for some segment of this campus community the prevention model has potential to be adopted and extended to other constituencies including faculty, staff, and administrators. Indeed, that is the promise and potential of this model; it can be used to facilitate the type of broad-based community prevention efforts encouraged by Wandersman and Florin (2003) and by the Centers for Disease Control and Prevention’s report on sexual violence prevention (2004).
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REFERENCES


