The Effect of a College Sexual Assault Prevention Program on First-year Students’ Victimization Rates

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Abstract. Objective: Although a variety of sexual assault prevention programs are currently available to college health professionals, there is a dearth of information about the effect of these programs on sexual assault victimization rates. Participants: The authors evaluated the efficacy of a sexual assault prevention program for first-year students at a college in the Northeast (N = 1,982). Methods: They used a retrospective cohort design and assessed the prevalence of sexual assault victimization among students exposed to the sexual assault prevention program and students 1 year their senior who were not exposed. Results: Students who had no exposure were more likely to report that they were sexually assaulted during their first year of college (odds ratio = 1.74, 95% confidence interval [1.32–2.29]). Results suggest that the program was effective for males and females, but not for students with a prior history of sexual assault victimization. Gay, lesbian, and bisexual students were at increased risk for victimization as compared with heterosexual students, and students who drank alcohol or engaged in binge drinking were at increased risk as compared with alcohol abstinent students. Conclusions: Findings suggest that this program had a positive effect on victimization rates for certain sub-groups of students.

Keywords: evaluation, rape prevention, sexual assault

Sexual assault prevention is a college health priority. As many as 20%–25% of women and 3% of men are sexually assaulted during their college careers. The physical and psychological effects of sexual assault can be devastating, and college students who are sexually assaulted may face impediments to academic and personal success. Campus administrators are under increasing pressure to develop sexual violence policies and prevention programs. Although a variety of prevention programs are currently marketed to and shared among college health professionals, relatively few have been evaluated, and those that have been evaluated do not conclusively demonstrate success. Although researchers have completed more than 60 unique college sexual assault prevention program evaluation studies, we have identified only 4 published studies in which researchers assessed sexual assault victimization as an outcome, and researchers in only 1 of these found a positive effect. Other evaluations have measured changes in participants’ knowledge about sexual assault, attitudes toward rape victims, acceptance of rape myths, and levels of self-efficacy and anxiety. The findings of the majority of these studies are limited because of small sample sizes, short follow-up periods, lack of control groups, and the use of nonbehavioral outcome measures. Moreover, researchers generally find limited evidence for long-term knowledge and attitude-related change as a result of sexual assault prevention program exposure.

Of the 4 college sexual assault prevention evaluation studies that we identified that assessed sexual assault victimization, researchers in only 1 found an effect. Hanson and Gidycz found that a 1-session hourlong awareness program in which administrators used video clips and group discussion reduced the risk of sexual assault victimization among women with no prior history of sexual assault by 43% at a 9-week follow-up (from 14% of the control subjects to 6% among those in the treatment group). Researchers found no program effect among women who had been sexually assaulted prior to the prevention program. Gidycz et al. in another study with a 9-week follow-up period, found no program effect for women with or without a prior history of victimization and also found no effect of the prevention program on men’s self-reported sexual
aggression behaviors. Breitenbecher and Scarce conducted a similar college sexual assault program evaluation experiment but used a 7-month follow-up and found that, although the program was successful in increasing knowledge about sexual assault among women, it was not successful in reducing the incidence. Breitenbecher and Gidyecz also found that a sexual assault prevention program had no effect on college women’s victimization or knowledge of sexual assault after a 9-week follow-up, regardless of their sexual assault history.

To our knowledge, no evaluations of sexual assault programs on college campuses have been published in which researchers assessed reductions in sexual assault victimization among men, gay and lesbian students, or high-risk groups of students, such as alcohol users or binge drinkers. Although men are far less frequently sexually assaulted than are women, our analysis of National Crime Victimization Survey data revealed that 1.4 per 1,000 college men report rape or sexual assault victimization each year. Research on sexual assault among gay, lesbian, and bisexual college students is scarce, but investigators in one study found a significantly higher prevalence of lifetime sexual assault among sexual minority students as compared with their heterosexual counterparts. Given the risk of sexual assault victimization to both college-attending men and nonheterosexual students, the efficacy of sexual assault prevention programming for these populations should be of interest to college health program planners. In our study, we examined the effect of a sexual assault prevention program on sexual assault victimization among first-year students at a college in the Northeast. We considered the effects of sex, sexual orientation, sexual assault victimization history, and substance use on program efficacy.

METHODS

Administrators at a liberal arts college in the northeastern United States launched a sexual assault prevention program for all first-year students in the fall of 2003 (ie, for members of the graduating class of 2007). Prior to 2003, college administrators had delivered no sexual assault training or education to first-year students. In September 2003, however, all first-year students were exposed to a 90-minute dramatic presentation and discussion called “Sex Signals” during their orientation week. In addition, in October 2003, administrators required all first-year students to participate in a 2-hour sexual assault education workshop in small groups. Resident advisors informed students that attendance at the orientation program and the small group workshops was mandatory. We assessed attendance at orientation and the small group workshop by comparing attendance counts of students at these events with the total class size. More than 95% of the intervention class attended the orientation session, and approximately 85% attended the small-group workshop.

Because the college required all first-year students to participate in the sexual assault prevention training, it was not possible to conduct a randomized controlled evaluation trial. Instead, the evaluation team used a nonexperimental retrospective cohort design, using the graduating class of 2006 (who had not been exposed to any sexual assault prevention programming) as a comparison sample (see Figure 1). At the beginning of their sophomore year, members of the class of 2006 completed an online survey asking them to recall sexual assault experiences during their first year of college. The members of the class of 2007 completed this same online survey at the beginning of their sophomore year. We assessed the incidence of sexual assault victimization during the first year of college reported by each graduating class.

Description of the Sexual Assault Prevention Program

The director of the college sexual assault prevention office, in collaboration with 2 part-time staff members, the director of the local publicly funded rape crisis center, a sexual assault survivor alumnus, and a committee of college administration advisors, designed the sexual assault prevention program. The program-design team conducted a review of the sexual assault program evaluation literature and consulted with directors of offices of sexual assault prevention at several US undergraduate institutions before creating their intervention. On the basis of this review, the program-design team decided that sexual assault would most likely be reduced through education about the definition of consent, encouraging peer support for risk-reduction behaviors, and creating a social environment that was supportive of victims. They developed a 2-pronged program package: (1) the 90-minute “Sex Signals” drama presentation for the first-year student orientation program and (2) a 90-minute

![Diagram](image-url)

**FIGURE 1.** A design evaluation of the sexual assault prevention program for first-year college students.
small group educational workshop, lead by a trained sexual assault prevention specialist for the fall semester. “Sex Signals” is a 2-person show produced by an Illinois-based drama company that has been performed at more than 300 colleges in the United States. The show uses humor and audience participation to educate male and female students about gender role stereotypes, communication styles, and acquaintance rape. Staff members of the college sexual assault prevention office developed and facilitated the 90-minute small group educational workshop. The content of the workshop included a discussion of the definition of rape, the college’s definition of sexual assault, criminal and college-specific consequences for perpetrators, personal risk reduction, peer intervention (eg, helping friends avoid risky situations), improving communication in dating relationships, and basic statistics about sexual assault. The small group workshops took place on weekday evenings in the students’ residence halls and were attended by 10 to 20 students each.

Sample

The US Department of Education funded our study, which was approved by a university Institutional Review Board (IRB). We contacted first-year undergraduate students in both the intervention and comparison classes via e-mail and invited them to participate in the anonymous online evaluation survey during September of their respective sophomore years. We used a different incentive with each class: We paid members of the intervention class $5.00 each for participation, whereas we offered comparison class members the chance to win a prize in exchange for their participation. We provided an informed consent form requiring no signature to participants as the first page of the online survey. We advised prospective participants that their participation was voluntary and that they could quit the survey at any time by closing their Internet browser. We directed respondents who completed the survey to a second Web site at which they could enter their student identification number (for the intervention class) or their e-mail address (for the comparison class). The student identification numbers and e-mail addresses could not be linked to the survey responses. A college administrator unaffiliated with the research project used the student identification numbers and e-mail addresses to award the incentives. Forty-seven percent of the comparison class (n = 744) and 80% of the intervention class (n = 1,244) responded to the survey. Men were slightly underrepresented in the comparison sample (41%) as compared with their classes as a whole (50%) but were adequately represented in the intervention sample (48%).

Measures

We measured sexual assault victimization prior to and during college using 4 items from the revised Sexual Experiences Survey (SES). The revised SES is a 10-item scale often used with college students and has demonstrated good internal consistency (for women, \( \alpha = 0.74 \); for men, \( \alpha = 0.89 \), test-retest reliability \( r = .93 \), and construct validity. \( \alpha = 0.74 \); for men, \( \alpha = 0.79 \). For the purpose of this study, we defined sexual assault as any positive response to the 4 items on our modified version of the revised SES, including any unwanted sexual contact, such as touching or kissing, obtained through force, threat, or coercion.

We assessed sexual orientation (heterosexual/nonheterosexual) by asking students about the sex of their dating and sexual partners. We asked students “Do you ‘date’ or ‘hook up with’ men, women, both, or neither?” We classified men who indicated that they dated or hooked up with men or both men and women as nonheterosexual. We also classified women who indicated that they dated or hooked up with women or both men and women as nonheterosexual.

We measured alcohol use and binge drinking by single items from the Youth Risk Behavior Survey (YRBS) that have demonstrated test-retest reliability. We asked students “In the past 30 days, on how many days did you have at least one drink of alcohol?” and “In the past 30 days, on how many days did you have 5 or more drinks in a row (that is, within a couple of hours)?” We classified students who indicated no alcohol consumption in the past 30 days as alcohol abstinent.

Statistical Analysis

We compared the frequency of sexual assault victimization reported by students exposed to the sexual assault prevention program with the frequency reported by students who were not exposed. To assess the comparability of our samples, we compared the gender, sexual orientation, alcohol and drug use, and sexual victimization distributions using a 2-sample test of proportions \( H_0: p_1 = p_2 \). We considered proportions with 95% confidence intervals (CI) that do not overlap (ie, \( p < .05 \)) to be nonequivalent and to indicate differences between the comparison and intervention group populations. Next, we calculated the prevalence of sexual assault victimization among subgroups of participants in the intervention and comparison groups and used logistic regression to compute the relative log odds of sexual assault victimization among the comparisons as compared with the intervention group participants, holding constant these potential confounders (eg, gender, alcohol consumption, and binge drinking). A logistic regression analysis produces an odds ratio (OR), which is a measure of association that quantifies the relationship between the primary predictor of interest and the outcome. An OR of 1.0 indicates that there is no association between the variables, and the further the OR is from 1.0 the stronger the relationship between the variables. We stratified...
the sample on gender and conducted additional regression calculations by substance use subgroups to determine the relative odds of sexual assault victimization by men and women in the substance abuse subcategories. We then conducted a sensitivity analysis to determine whether the lower response rate among the comparison group was a threat to the validity of results. Sensitivity analysis is a statistical method commonly used to assess how sensitive results are to assumptions about the data with respect to selection bias, response bias, or confounding. In a sensitivity analysis designed to assess nonresponse bias, one repeats the analysis using different assumptions for nonresponse and observes whether the key estimates of interest change.31

RESULTS

The comparison and intervention groups differed with regard to gender and substance use (see Table 1). Men were underrepresented in the comparison group in comparison with the intervention group (41% and 48%, respectively). Members of the intervention group were more likely than were those in the comparison group to report alcohol use and binge drinking in the past 30 days (see Table 1). We controlled for these differences in subsequent logistic regression analyses.

Seventeen percent of the comparison group and 12% of the intervention group reported experiencing sexual assault during their first year of college (see Table 2). After we controlled for differences in gender, and alcohol and binge drinking between these 2 groups, we found that the comparison group had 1.74 times the odds of reporting that they were sexually assaulted during their first year of college than did the intervention group (see Table 2). After identifying specific demographic subgroups within the intervention and comparison groups, we observed a decreased prevalence of sexual assault victimization among men, women, heterosexuals, and those without a prior history of sexual assault victimization among the intervention group compared with its comparison counterparts (see Table 2). We did not have a sufficient number of nonheterosexuals to detect a statistically significant difference in the prevalence of sexual assault among those exposed and unexposed to the prevention program; however, gay, lesbian, and bisexual students exposed to the program were 50% less likely to report being sexually assaulted during their first year of college than were their counterparts in the comparison group (18% and 27%, respectively; see Table 2). Students with a prior history of sexual assault victimization who were exposed to the program were more likely to report that they had been sexually assaulted during their first year of college than were students with a prior history who were not exposed to the program (21% and 7%, respectively; see Table 2).

We stratified the sample by gender and level of substance use to examine possible program effects for each of these subgroups. We detected statistically significant program effects for male alcohol users and women who used no alcohol in the past 30 days (see Table 3). Alcohol-using men in the comparison group had 1.8 times the odds of sexual assault victimization as alcohol-using men in the intervention group (see Table 3). Alcohol abstinent women in the comparison group had 3.2 times the odds of sexual assault victimization as alcohol abstinent women in the intervention group (see Table 3).

Because the response rate among the control group was low, we conducted a sensitivity analysis to determine whether the difference we observed in levels of sexual assault victimization among comparison group members (17%) and intervention group members (12%) could have been caused by self-selection into the study by members of the comparison group. We originally assumed that the non-

<table>
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<th>Variable</th>
<th>Control*</th>
<th>Intervention†</th>
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<tr>
<td></td>
<td>n</td>
<td>%</td>
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Note. OR = odds ratio; CI = confidence interval.
‡The control and intervention groups are nonequivalent.
*\(N = 738\).
†\(N = 1,244\).
responding comparison group members experienced the same rate of sexual assault victimization as did those who responded to our survey. The sensitivity analysis demonstrated how our results would change if we altered that assumption. In particular, we determined that, if as few as 0% to 8% of the nonresponding comparison group members experienced sexual assault, the true victimization rate among comparisons would be lower than that among the intervention group (negating our results). However, if 9% or more of the nonresponding comparison group members were sexually assaulted, the relative odds of sexual assault among all comparison group participants would have been greater than the odds of sexual assault among intervention group members, and the direction of our findings would be the same.

**COMMENT**

We found that exposure to the prevention program was associated with a reduction in the reported prevalence of sexual assault victimization (12% among those exposed, 17% among those unexposed). In stratified analyses, we observed similar positive program effects for women, men, heterosexual students, and students with no prior history of sexual assault victimization. Consistent with prior researchers’ results,13,32 we did not observe this effect among students with a prior history of sexual assault victimization who were at substantially increased risk as compared with those without such a history. It is not clear why students with a prior history of sexual assault victimization are at increased risk for subsequent victimization, nor why the prevention program had no effect for this particular subpopulation. One possible explanation for the relatively high rate of revictimization among sexual assault survivors is that some individuals have poor sexual risk recognition skills, which could be a function of their level of cognitive processing or a trauma disorder.33,34 It is also possible that survivors’ increased vulnerability is somehow perceived by

<table>
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<td>11</td>
<td>2.03</td>
<td>1.52–2.71</td>
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*Note. Adj. OR = adjusted odds ratio; CI = confidence interval.

* N = 738.

† N = 1,244.

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<td>5</td>
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<td>25</td>
<td>1.66</td>
<td>0.93–2.94</td>
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*Note. OR = odds ratio; CI = confidence interval.

* N = 738.

† N = 1,244.
perpetrators, who target them disproportionately. To offset survivors’ elevated risks, college sexual assault prevention programming for student sexual assault survivors may need to be more intensive (eg, take place one on one, in private settings, with greater frequency) and more tailored than are general prevention programs.

We are the first to examine and find positive program effects for men’s victimization and for specific subgroups of students on the basis of their level of substance use (alcohol-using men and alcohol abstinent women). Although we found that men were roughly half as likely to be sexually assaulted during their first year of college than were women, 8% of men reported experiencing at least 1 form of sexual assault (eg, coercion), and exposure to the prevention program appeared to have conferred some benefit. One quarter of male sexual assault victims reported that they were gay or bisexual. Additional studies that clarify the relationship between perpetrators and victims in male sexual assault cases will further inform male-targeted prevention efforts.

To our knowledge, we are also the first to examine the effect of a sexual assault prevention program on sexual assault victimization among gay, lesbian, and bisexual college students. Although the prevalence of sexual assault among nonheterosexual students exposed to the intervention as compared with nonheterosexual controls was reduced by 67% (from 27% to 18%), we did not have sufficient gay, lesbian, and bisexual students in our sample to determine if this was a true difference (ie, the difference was not statistically significant). Additional evaluation studies with larger samples of gay, lesbian, and bisexual students are needed to explore the extent to which mainstream sexual assault prevention programming is beneficial for this subpopulation.

Implications

The primary implication of our research is that sexual assault prevention programming for college populations may hold promise. Our study results suggest that heterosexual women are not the only beneficiaries of population-based sexual assault education programming. Although the incidence of sexual assault among male college students is considerably rarer than it is among female college students, it may be possible to lower risk among both heterosexual and gay or bisexual male college students by including them as targets of general prevention initiatives. Moreover, the higher than expected risk of sexual assault among lesbian and bisexual female students in our sample underscores the importance of using gender neutral language during sexual assault prevention presentations and program activities. Additional research is needed to clarify whether alcohol- or marijuana-using students benefit from sexual assault prevention programs to the same extent as students who refrain from substance use, and whether the amount and frequency of students’ substance use moderates program effectiveness. Researchers in future evaluations of college sexual assault programs should include the incidence of sexual assault as an outcome measure; use reliable, valid measures for outcome assessment; and describe in detail the format, length, and type of intervention that is evaluated to facilitate meta-analyses.

This sexual assault prevention program lacked an explicit theoretical basis. In other words, although the practitioners who designed the program reviewed the existing literature before creating their intervention, they did not rely upon any particular theory of behavior change, nor did they create a program logic model. Logic models help practitioners explicate links between theories of behavior change and specific program activities, making clear precisely why and how participants’ knowledge, attitudes, or behaviors are expected to change as a result of their programs. The positive findings of our study suggest that educating students about rape myths, the definition of consent, and risk-reduction behaviors may be associated with a reduction in the incidence of sexual assault on campus. One theory implicated by our findings is the Theory of Planned Behavior, which posits that individuals’ behaviors are predicated upon their intentions and that intentions are a function of individuals’ attitudes, perceptions of social norms regarding the behavior, and self-efficacy. In keeping with this theory, sexual assault prevention activities that affect students’ perceptions of why sexual assault occurs, whether it is acceptable to their peers and community, and their own capacity to protect themselves and one another from either victimization or perpetration, can reasonably be expected to alter the incidence of sexual assault. Researchers who explore the effects of education about these particular topics to sexual assault incidence are needed. Future sexual assault programs should be theoretically grounded and designed according to a logical framework to facilitate evaluation and replication.

Limitations

The results of this study were limited by several factors. First, as discussed, the low response rate among the comparison group raised concerns about the validity of any inference. To assess this problem, we conducted a sensitivity analysis that revealed that it would take a striking difference in sexual assault victimization rates between respondents and nonrespondents to negate the strength of our findings. To improve response rates, researchers in future evaluation studies should award small incentives to all respondents rather than using a lottery prize-type incentive system. It is possible that the difference in compensation had an impact on students’ participation. Second, because our assessments of the comparison and intervention groups took place 1 year apart, results may be biased because of historical events that took place while members of either class were first-year students. For example, if a sexual assault case received national media attention during the year that the intervention class was in their first year of college (eg, a celebrity on trial for rape), their awareness of, attitudes toward, and risk behavior relative to sexual assault could have been affected in response. Third, all studies of
self-reported sexual assault victimization face limitations related to underreporting.37 Sexual assault victims may be reluctant to disclose their status because of fears of stigmatization or breaches of confidentiality. Some may also minimize the coercive nature of their sexual assault experiences. We do not know whether sexual assault victimization was systematically underreported by certain subgroups of students in our study or by students exposed to the sexual assault prevention program. Our estimates of sexual assault victimization (which ranged from 7% among heterosexual men to 27% among gay, lesbian, and bisexual students) likely underestimated the true rates of sexual assault among first-year students on the campus studied.

In conclusion, our findings suggest that a population-based sexual assault prevention program for first-year college students had a positive effect on victimization rates for at least some subgroups of students, including alcohol-drinking men, alcohol abstinent women, students with no prior history of sexual assault, and heterosexual students. Researchers in future evaluation studies should capitalize on our lessons learned—such as the importance of using small incentives for all students rather than lottery reward systems—to continue to investigate the value of sexual assault prevention programs on campus, particularly for vulnerable student populations (eg, women, nonheterosexuals, and students with prior histories of sexual assault victimization).

NOTE

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REFERENCES


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**APPENDIX**

**Questions Assessing Sexual Assault Experience**

1. Have you ever had sexual contact (touching, kissing, but not intercourse) when you didn’t want to because you were overwhelmed by continual arguments and pressure?

2. Have you ever had sexual contact (touching, kissing, but not intercourse) when you didn’t want to because a person threatened or used some degree of physical force (twisting your arm, holding you down, etc.) to make you?

3. Have you had sexual intercourse when you didn’t want to because a person threatened or used some degree of physical force (twisting your arm, holding you down, etc.) to make you?

4. Have you had sexual intercourse when you didn’t want to because that person gave you alcohol or drugs and you were too intoxicated to resist?