

Sexual Violence Prevention

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From the beginnings of the anti-rape movement in the early 1970s, education has been an important component of the response to sexual violence. Initial efforts focused on raising awareness about the prevalence and impact of the experience of rape, bringing forward the voices of survivors, and emphasizing the need for dedicated resources. These educational activities established the foundation which eventually led to an improved criminal justice response to sexual violence, expanded healthcare services such as Sexual Assault Examinations, and funding for a wide range of sexual assault prevention and intervention programs (especially the federal Violence Against Women Acts of 1994, 2000, and 2005).

A focus on primary prevention emerged as the public health field recognized violence as a public health issue in 1985 (Koop, 1986) and the Centers for Disease Control and Prevention began addressing sexual violence in 2001 (NCIPC, 2002). Primary prevention involves developing comprehensive strategies that stop violence before initial perpetration or victimization, especially those that make community and society level changes. The best sexual violence prevention strategies combine the socio-political analysis of the feminist anti-rape movement and the systematic approach to promoting healthy behaviors central to public health theory.

Prevention work focused on adolescents is key to any comprehensive strategy to prevent sexual violence. In order to prevent first time victimization and perpetration, from a primary prevention perspective, adolescent boys and girls are at a developmental stage where lifelong behaviors are shaped. Adolescents are learning how to perform their socially influenced gender roles, and how to act-out their gender-based sexual scripts. Appropriately timed prevention strategies can reduce future sexual violence. In this article, we will review the foundations of sexual violence prevention work. Then we will explore the use of education sessions to prevent sexual violence, and then review more comprehensive strategies, such as community mobilization, changing social norms, social marketing, and policy work.

Foundations for Preventing Sexual Violence

The foundations of efforts for preventing sexual violence come from both the feminist movement and from empirical data from research on associated risk and protective factors. Feminist theory understands rape as a cultural phenomenon requiring interventions beyond the personal and interpersonal. It is the foundation of the anti-rape movement (Roze & Koss, 2001). Feminist theory articulates sexual violence in the context of a rape culture, a complex system of beliefs that encourages male sexual aggression and supports violence against women (Buchwald et al., 1993). Interpreting sexual violence as a foreseeable consequence of rape culture has a profound effect on sexual violence prevention strategies. Sexual violence is seen as a continuum of behaviors instead of an isolated, deviant act. Feminist models of sexual violence hold that it is not inevitable, and can be prevented by making changes to societal norms surrounding

sexuality, violence, gender, and oppression (hooks, 1989).

Beyond the feminist theory, data from a variety of research informed sexual violence prevention work.

Research has identified *risk factors* for individual victimization,

such as being female and having experienced past sexual victimization. Risk factors for individual perpetration include being male, having coercive sexual fantasies, hostility towards women, a history of childhood sexual victimization, growing up in an emotionally unsupportive family environment, and adherence to societal norms supportive of sexual violence, male superiority and male sexual entitlement (Jewkes, Sen, & Garcia-Moreno, 2002). However, little is currently known about

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protective factors that may reduce vulnerability to victimization and risk for perpetration, or environmental factors which may contribute to prevalence. Notwithstanding, promoting protective factors and addressing

negative social and environmental contributors are important components of a public health approach to prevent sexual violence (NCIPC, 2006).

Preventing Sexual Violence Before It Occurs

The Centers for Disease Control and Prevention (CDC, 2004) classifies sexual violence prevention and intervention activities according to when they occur in relation to the violence:

Primary Prevention: [Activities] that take place *before* sexual violence has occurred to prevent initial perpetration or victimization.

Secondary Prevention: Immediate responses *after* the sexual violence has occurred to deal with the short-term consequences of violence.

Tertiary Prevention: Long term responses *after* sexual violence has occurred to deal with the lasting consequences of violence and sex offender treatment interventions.

Over the last 30 years, most anti-sexual violence efforts have been secondary and tertiary prevention. To address sexual violence prevention in a truly comprehensive manner, strategies to prevent its initial perpetration and victimization (primary prevention) must reach the same level of efficacy and adoption as programs that respond to its consequences.

Public health theory also advises that sexual violence prevention efforts be specific to an intentional audience. A *universal* strategy is one that targets an entire population without regard to their



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exposure to sexual violence, a *selective* strategy targets those who have a heightened risk of becoming a victim or perpetrator of sexual violence, and an *indicated* strategy targets those who are victims or perpetrators (CDC, 2004). Audiences can also be categorized by their likely *role* in an act of sexual violence: as potential *victims* of the violence (Rozee & Koss, 2001), as potential *perpetrators* of the violence (Clinton-Sherrod et al., 2003), or as potential *bystanders* who have an opportunity to prevent or intervene in the act (Banyard, Plante, & Moynihan, 2004).

Educational Sessions

Educational sessions are perhaps the most commonly recognized form of sexual violence prevention work, and there are a wide variety of prevention curricula (see Morrison et al., 2004 for a review). The goal of primary prevention education sessions is to prevent first-time perpetration or victimization by improving knowledge and attitudes that correspond to the origins of sexual violence (such as adherence to societal norms supportive of sexual violence, male superiority, and male sexual entitlement); build skills for respectful interactions; and empower participants to become agents of change. Primary sexual violence prevention education commonly addresses attitudes about sexual assault, the impact of gender roles, healthy relationships, consent, conflict resolution, respecting personal boundaries, and skill building for these topics (CDC, 2004).

Beyond content, how a prevention education program is structured and delivered also informs its effectiveness. With little research on specific sexual violence prevention programs, sexual violence prevention work draws on research from other successful prevention efforts with common risk factors such as substance abuse prevention. Participants need multiple sessions of adequate length and intensity, with an opportunity for follow-up. Appropriately timed prevention education programs need to be provided before risk factors arise and in a manner that fits participants' developmental levels. Programs should also engage participants in curriculum development/modification to address diverse cultural backgrounds. Multiple learning styles should be taken into account by employing varied teaching methods, and providing interactive activities and opportunities to practice new skills. Prevention education programs should also be organized in such a manner that new information reinforces and expands upon previous material (Kirby, 2005), and it should be delivered by prepared, competent facilitators who are able to foresee potential controversies and strategically create learning opportunities.

Impacting individual knowledge and attitudes is more effective as part of a broader comprehensive approach which also addresses how those attitudes interact with interpersonal influence, and the manner in which norms, policies, and institutions shape the environment in which it all occurs. Thus, single session sexual violence awareness presentations have limited opportunities to support young people to adopt positive behaviors. Successful education programs augment presentations with other activities. For instance, teachers and parents in a given school are trained to teach about skills and messages corresponding to those used with students, thus increasing the likelihood that the skills and messages will be internalized and put into practice. The community and the school then collaborate to institutionalize these messages into their permanent school curriculum.

Comprehensive Models

The Ecological Model and the Spectrum of Prevention are the two models most commonly applied to sexual violence prevention by those in the public health field. The Ecological Model explains the occurrence of sexual violence and helps identify potential prevention strategies on four levels (Heise, 1998): individual, relationship, community, and societal. Individual level factors relate to a person's knowledge, attitudes, behavior, history, demographics, or biology. Risk factors such as being male,

Box 4.1

Student Connections Club

The Student Connections Club (SCC), a project of The Collins Center in Harrisonburg, VA, illustrates a program with numerous linked components working at multiple levels of the social ecology (Rubacky, 2005; T. Wagler, Collins Center Staff Member, personal communications, February 8, 2007). Currently there are 3 high schools in the Harrisonburg area with SCCs. In each of these high schools, students participate in educational sessions to gain skills and knowledge about the dynamics of sexual and dating violence, qualities of healthy relationships, root-causes of sexual violence, and how to intervene in high-risk situations. They are also trained on designing campaigns/events in their own schools to address these issues, and facilitation of a 3-session class on sexual and dating violence prevention.

The process of SCC members learning how to deliver the 3-session class and create the short films shows how youth are empowered to become peer leaders within this program. While the presence of these peer leaders can begin to change how the rest of the students in a given school relate to one another, it is also crucial to recognize that all youth are the "experts" of their own environments. For example, a large part of the 3-session health class involves a set of highly interactive exercises where 9th graders learn the skills to identify behaviors/attitudes that set the stage for sexual and dating violence. Once identified, SCC peer educators then ask their fellow students how these behaviors could be addressed in a constructive manner. The fact that teens are identifying these potentially harmful behaviors/attitudes and generating potential solutions for themselves is as important as what they articulate. This process, combined with the messages and skills themselves, fosters an environment where it is acceptable to talk about sexual violence and its precursors, even if that means having difficult conversations with each other.

In order to reinforce these improvements in student-to-student relationships, the entire "community" of the school must also be engaged. Two of the SCC sites recently made inroads with their schools by gaining the status "officially school-sponsored clubs," and institutionalizing their 3-session peer education components as a required part of the 9th grade health syllabi in each school. This accomplishment legitimizes the SCCs within their schools, and helps mobilize teachers and the overall school community to support other projects developed by the SCCs.

displaying a pattern of denigrating women, and adherence to beliefs that condone the use of violence and coercion are all addressed by strategies that operate on the individual level (Carr & VanDeusen, 2004; Jewkes, Sen, & Garcia-Moreno, 2002). Relationship level strategies address the influence of parents, siblings, peers, and intimate partners. For example, boys who experience caring and connection from adults are less likely to perpetrate violence (Resnick, Ireland, & Borowsky, 2004), while men with peers who encourage sexual coercion are at a heightened risk for perpetration (Loh et al., 2005). Community level strategies look at norms, customs, or people's experiences with local institutions, such as schools, workplaces, places of worship, or criminal justice agencies. Societal level strategies address broad social forces, such as inequalities, oppressions, organized belief systems, and relevant public policies (or lack thereof). Because factors at one level are influenced by connected factors at other levels, primary prevention strategies should seek to operate on multiple levels of the social ecology simultaneously.

The Student Connections Club, a project of Collins Center in Harrisonburg, VA, (see Box 4.1) illustrates a program with multiple components. On the individual level, high school students participate in multiple educational sessions to gain skills and knowledge about sexual violence, prevention concepts, and being active bystanders. On the relationship level, students become peer leaders who deliver educational sessions to other students and model appropriate responses to interrupt disrespectful behavior. Community level efforts include conducting school-wide "healthy relationship" campaigns and gaining endorsement of the program as an officially designated club. With activities on multiple levels, programs such as the Student Connections Club facilitate change in both individuals and the environment in which they live.

The Spectrum of Prevention is another model used to develop comprehensive prevention programs (Davis, Parks, & Cohen 2006). Like the Ecological Model, it goes beyond working with individuals and emphasizes efforts to change community, organizational, and social norms. The six levels of the Spectrum (see Table 4.1) are designed to support developing comprehensive efforts on multiple levels to shift social norms that are associated with sexual violence. When working on multiple levels of the Spectrum, the results are greater than an effort only on one level.

Educational sessions are more effective in adapting positive behaviors when the messages are reinforced with a community education campaign, and providers reinforce the messages. The Coaching Boys into Men Campaign uses both a community education advertising campaign and provides specific tools for coaches to teach young men how to respect women (Carr, Morgan, & Lee, 2005). Other prevention efforts integrate wide collaborations with community education campaigns, such as the Dangerous Promises campaign to prohibit sexualized violence in alcohol advertising (Woodruff, 1996).

Community Level Prevention Strategies

In order to sustain long term changes in individuals,

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communities must reinforce and support those changes. In the next section we will examine several comprehensive strategies: community mobilization, social

norms approaches, social marketing, and policy work.

Community Mobilization

Community mobilization is a participatory process focused on changing community norms, basic patterns of social interaction, values, customs, and institutions in ways that will significantly improve the quality of life in a community. Effective implementation of any community mobilization requires promoting positive changes in community norms. The process of community mobilization is as important as the output. "When people have an opportunity to participate in decisions and shape strategies that vitally affect them, they will develop a sense of ownership in what they have determined, and commitment to seeing that the decisions are sound and that the strategies are useful, effective, and carried out" (Lofquist, 1996, p. 4).

Providing a leading example of community mobilization to prevent sexual violence, Washington State has adapted Lofquist's Community Development framework (Lofquist, 1996) to focus on the following key activities: define the parameters of the community and engage key community members; facilitate a

Table 4.1
Spectrum of Prevention

Level of Prevention	Sample Activity
Influencing Policies and Legislation	Dangerous Promises campaign to prohibit sexualized violence in alcohol advertising (Woodruff, 1996)
Changing Organizational Practices	Developing sexual harassment prevention policies for a high school
Fostering Coalitions and Networks	Developing coalitions to promote primary prevention of violence against women, such as the DELTA project (CDC, 2006)
Educating Providers	Training coaches to teach young men on how to respect women, such as Coaching Boys into Men (Carr et al., 2005)
Promoting Community Education	Advertising campaigns to prevent sexual violence such as MyStrength (Lee & Lemmon, 2006)
Strengthening Individual Knowledge and Skills	Classroom presentations (Morrison et al., 2004)

Adapted from Davis, Park & Cohen (2006)

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process in which these key individuals define sexual violence as it occurs in their community; develop a plan focused on changing societal conditions; implement the community mobilization plan; and, evaluate the effort (Washington State Office of Crime Victims Advocacy, 1997).

At the Washington Middle School Project in Seattle, Washington, (see Box 4.2) a multifaceted approach targeting individual, relationship, and community levels was developed to engage students, school staff, and parents in separate, but coordinated

Box 4.2

The Washington Middle School Project

The Washington Middle School (WMS) Project was one of three demonstration projects funded in Washington State to pilot test the community development strategy adopted by the state in 1997.

Community mapping and stakeholder exercises revealed that the school was actually a series of connected but distinct communities with the same physical location: student, staff, and parent communities. A stakeholder group representative of all three categories determined the main focus of the project would be to address the issue of sexual harassment within in the school setting as a subset of sexual violence. The intended outcomes were: 1) to increase community investment in the issue of sexual violence, 2) to increase knowledge of sexual violence among students, families/parents, staff and community, 3) to increase skills of addressing sexual violence among students, families/parents, staff, and community, 4) to decrease the acceptance level of sexually violating behavior among students, and 5) to decrease gender stereotyping and rigid gender roles.

The activities involving students consisted of three main components: S.A.V.E. a student led "natural helpers" group of both genders providing peer training and producing videos and "zines" focused on sexual violence prevention; a girls' group focused on promoting potential protective factors in eighth grade girls who self identified experiencing sexual violence or having a specific interest in the issue; and an elective course offered to sixth graders that incorporated violence prevention and comprehensive sexuality education curricula to provide students with a broad-based sexual violence prevention education.

Staff and parent activities were designed to be supportive of the youth activities in addition to supporting change in school climate. Baseline evaluation indicated a school-wide tolerance of sexual harassment by teachers in addition to a lack of systematic consequences. Strategies included an anonymous reporting system, participation in the administration/counseling staff team, a review of disciplinary actions, and staff-wide teacher training. A parent was recruited to communicate with parents regarding the specific student and staff components as a way of ensuring parent support. At the end of the pilot period the Office of Crime Victims Advocacy (OCVA) concluded that community development was viable sexual violence prevention strategy and adopted it as one of the core services provided by its rape crisis centers.

efforts to prevent sexual harassment. Specific activities included multiple classes on life skills, revision of school policies, additional training for school staff, creation of an anonymous reporting system, and peer-education (Stringer, 2000). These types of community-specific and participant-centered community mobilization approaches are effective in meeting the needs of non-mainstream communities including, but not limited to historically marginalized communities, teens, and subcultures. The youth themselves played crucial roles as agents of change in their community. A comprehensive evaluation of Washington State's community development projects indicates that youth-led efforts are especially effective in prevention programs (Riesman et al., 2000).

Changing Social Norms

The social norms approach suggests that peer pressure is the primary influence on shaping people's behavior. However, many behaviors are influenced by incorrect perceptions of how peers think and act. Based on research primarily conducted with college-age populations, the social norms approach can be applied to the prevention of sexual violence by correcting these misperceptions of group norms to decrease problem behaviors or increase healthy behaviors. According to Berkowitz, "a key to effective [sexual violence] prevention is the fact that most males are uncomfortable when we witness harassment and other forms of violence, even when we don't know how to respond" (Berkowitz, 2003). While there may be some utility to the notion that individuals behave in a sexually violent manner because they mistakenly believe their peers are more accepting of corresponding social norms, there are still situations in which harmful social norms are perceived accurately and internalized accordingly, for example, viewing heterosexual sexual interactions as a "game" in which men should try to "win" at the "expense" of women (Loh et al., 2005). In spite of the shortcomings of overly broad applications of the social norms approach, the idea that some of these norms can be revealed to adolescents as both harmful and less accepted than previously thought has led to some promising strategies. For example, there is a cluster of adolescent sexual violence prevention initiatives that expose young men to the pressures exerted upon them by traditional (and often violent) ideas about masculinity, show them how to resist these pressures to find their own positive identities, and build their skills as peer leaders to show others the link between the norms these pressures create and sexual violence. In short, these initiatives empower young people, particularly young men, to shift the behaviors of their peers. "Men of Strength Clubs" and "Mentors in Violence Prevention" bystander programs (Lee & Lemmon, 2006; Katz, 1995) are examples of such initiatives.

Social Marketing

Social Marketing campaigns draw upon marketing research and behavior change theory to develop strategies to shift behaviors. Key components include orientating the campaign toward a target audience; conducting formative research and pre-testing of messages; developing strategies to address barriers and competition to adapting new behaviors; and, using a standard marketing mix (product, price, place, and promotion) (Lefebvre & Flora, 1988).

California's MyStrength Campaign uses peer-to-peer contact to create new social norms reinforced by a supportive school environment, paid advertising, and earned media (see Box 4.3). This was accomplished through a variety of paid and earned communication, and development of MyStrength Clubs for teen

males. The campaign theme “My Strength Is Not for Hurting” repositions the concept of male strength to encourage, motivate, and enable young men to take action to prevent sexual violence. Marketing strategies included using a group of young men to appear at community events in a branded vehicle, heavy radio advertising on youth-orientated stations, a youth-oriented Web site, and distribution of youth friendly collateral materials. This

social marketing strategy helped develop young men as leaders in their local communities to promote positive uses of masculinity while speaking out against sexual violence (Kirby, 2006).

Policy to Promote Primary Prevention

The implementation of education and social norms changing activities, and other pieces of a comprehensive strategy against sexual violence among youth, requires ongoing support from

key decision-makers in the community, and in state and federal organizations. The Ecological Model places policy activities at the societal level, influencing factors such as gender-equality and social norms. Establishing policies that mandate school staff respond to sexual harassment and changing advertising practices that sexualize or objectify women are examples of potential policies.

Without dedicated funding for primary prevention programs, there is little chance for sustained and progressive efforts to interrupt the cycle of sexual violence. Additional primary prevention resources are needed that do not compete with or take away from services to victims. In many states, sexual violence primary prevention efforts are funded exclusively with federal resources, making policy-level work at the federal level critical. However, being dependent on federal resources leaves primary prevention of sexual violence vulnerable to budget fluctuations. It is becoming increasingly important that state and local partners collaborate and become more adept at communicating with decision-makers at all levels with the goals of implementing broad policy changes, protecting against budget cuts, and obtaining additional funding that can be sustained over time. Effective policy activities that aim to improve decision-maker’s perception of public health and sexual violence prevention as worthy of their support require an understanding of what motivates them in their leadership role. Federal, state, and local policy-makers must be informed about the lifelong impact of sexual violence on individuals and communities, the cost to society as a whole, and the importance of undertaking comprehensive primary prevention activities that focus on youth.

The Future of Sexual Violence Prevention

Whether or not we see a future decrease in the prevalence of sexual violence will hinge on how effective today’s efforts are with adolescents. By engaging young people to be part of the solution, a new generation of leaders will be empowered to further prevention efforts.

Sexual violence prevention efforts are in the midst of a transition from creating awareness of sexual violence to advancing comprehensive primary prevention strategies for community change. Through the collaborative efforts of public health, grassroots anti-rape organizations, and researchers, key questions will need to be addressed in the coming years. Adequate funding for services after sexual violence takes place must be maintained while moving forward with primary

Box 4.3

MyStrength Campaign

California Coalition Against Sexual Assault (CALCASA), with support from the California Department of Health Services, developed a comprehensive integrated social marketing campaign to prevent perpetration of sexual violence. CALCASA obtained the license agreement with Men Can Stop Rape (MCSR) to use their “Strength Campaign.” CALCASA conducted 10 focus groups with young men ages 14–18 in English-speaking rural, Spanish-speaking rural, and multicultural urban communities to determine the best images and language for a California audience. With this data, CALCASA and MCSR developed materials to form a California-specific campaign called “MyStrength” and “MiFuerza” using materials and activities around the theme “My Strength Is Not For Hurting.” Examples of the materials are available online (at www.MyStrength.org and www.MiFuerza.org).

In September 2005, the California Coalition Against Sexual Assault launched this statewide campaign. Throughout California there was a significant media campaign: radio ads played over 30,000 times; over 500 billboards, transit ads and mall kiosks were displayed; slides were displayed at over 350 movie theaters; over 400 high schools displayed materials; and over 60 rape crisis centers distributed posters, postcards, t-shirts, wristbands, and mini-footballs. The “Strength Team” consisting of three young men traveled throughout California as ambassadors of MyStrength delivering the campaign messages and generating local support for the campaign.

At six pilot sites comprehensive implementation of MyStrength included a community launch event, a 16-session club for young men to explore how they can prevent sexual violence, and a community action project. The clubs for young men were based on the curriculum and principles of Washington DC’s Men Can Stop Rape.

Preliminary evaluation demonstrates the success of the program. MyStrength Club participants demonstrated significant increase in self-reported ability to make changes in their community ($p < .05$) and significant increases in self-reported likelihood to take action to interrupt in sexual harassment ($p < .05$) (Lee & Lemmon, 2006). School-wide surveys show the MyStrength Campaign reached high school students and students were receptive to the campaign; students who were exposed to the campaign were slightly more likely to have favorable (more respectful and equitable) attitudes; and the MyStrength campaign was consistently associated with small but positive differences in social climate and attitudes (Kim, 2006).



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prevention. Research must be conducted to further understand individual and environmental-level risk factors and all levels of protective factors. Links to related issues must be explored and strategies to effectively address multiple issues forged. Evaluation of existing promising practices will help prevention work in determining what strategies to pursue. Since sexual violence is a cultural issue, solutions must go beyond stopping sexual violence, promoting behaviors and cultural norms that are healthy, such as egalitarian gender roles, gender equity, healthy relationships, and healthy sexuality. Both women and men must be engaged in this effort to create the day when sexual violence no longer exists so that we can, "...begin the real practice of equality, and then,

instead of rape we will for the first time in our lives—both men and women—begin to experience freedom" (Dworkin, 1983).

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References

- Banyard, V.L., Plante, E.G., & Moynihan, M.M. (2004). Bystander education: Bringing a broader community perspective to sexual violence prevention. *Journal of Community Psychology, 32*, 61–79.
- Berkowitz, A. (2003). Young Men as Allies in Preventing Violence and Abuse – Building Effective Partnerships with Schools, Family Violence Prevention Fund's 2003 Online Discussion Series: "Building Partnerships to End Men's Violence" – Discussion 4, Retrieved November 2006, <http://www.vawnet.org/DomesticViolence/PreventionAndEducation/Approaches/SocialNorms.php>
- Buchwald, E., et al. (1993). *Transforming a Rape Culture*. Minneapolis, MN: Milkweed Editions.
- Carr, J.L., & VanDeusen, K.M. (2004). Risk factors for male sexual aggression on college campuses. *Journal of Family Violence, 19*, 179–189.
- Carr, M., Morgan, L., & Lee, L. (2005). *Coaching Boys into Men Playbook*. San Francisco, CA: Family Violence Prevention Fund. Available at <http://www.coaches-corner.org/>
- Centers for Disease Control and Prevention. (2004). *Sexual Violence Prevention: Beginning the Dialogue*, Atlanta, GA: Centers for Disease Control and Prevention.
- Centers for Disease Control and Prevention. (2006). *Domestic Violence Prevention Enhancement and Leadership Through Alliances (DELTA)*. Retrieved November 30, 2006, from www.cdc.gov/mill1.sjlibrary.org/ncipc/DELTA/default.htm
- Clinton-Sherrod, M., Gibbs, D., Amy Vincus, A., Squire, S., Cignetti, C., Pettibone, K., & Igoe, J. (2003). *Report Describing Projects Designed to Prevent First-Time Male Perpetration of Sexual Violence*. Retrieved from http://www.nsvrc.org/resources/docs/rti_report.pdf
- Davis, R., Parks, L.F., & Cohen, L. (2006). *Sexual Violence and the Spectrum of Prevention*, Enola, PA: National Sexual Violence Resource Center.
- Dworkin, A. (1983). I Want a Twenty-Four-Hour Truce During Which There Is No Rape. In A. Dworkin (1989) *Letters From a War Zone: Writings 1976–87*. New York: E. P. Dutton. Retrieved November 2006, from www.nostatusquo.com/ACLU/dworkin/WarZoneChaptIIIE.html
- Heise, L. (1998). Violence against women: An integrated, ecological framework. *Violence Against Women, 4*(3), 262–290.
- hooks, b. (1989) *Talking Back: Thinking Feminist, Thinking Black*. Boston, MA: South End Press.
- Jewkes, R., Sen, P., & Garcia-Moreno, C. (2002). Sexual violence. In E.G. Krug, L.L. Dahlberg, J.A. Mercy, A.B. Zwi, & R. Lozano (Eds.), *World Report on Violence and Health* (pp. 147–181). Geneva: World Health Organization.
- Katz, J. (1995) Reconstructing masculinity in the locker room: The Mentors in Violence Prevention Project. *Harvard Educational Review, 65*(2).
- Kim, A. (2006) *California's MyStrength Campaign and MOST Clubs: Preliminary Findings on Attitude and School Climate*. Report for the California Coalition Against Sexual Assault.
- Kirby, K. (2005, June). Promising Practice: Systematic Approach to Prevention Education. *Moving Upstream Newsletter, 1*(2). Retrieved November, 2006, from www.vsdvalliance.org/secPublications/Moving%20Upstream%201-2.pdf
- Kirby, S. (November 2006). "Health Behavior Marketing," A presentation at the annual meeting of the American Public Health Association, Boston, MA.
- Koop, C.E. (1986). *Report of the Surgeon General's Workshop on Violence and Public Health: Leesburg, Virginia, October 27–29, 1985*. Rockville, MD: U.S. Dept. of Health and Human Services.
- Lee, D.S., & Lemmon, P. (November 2006). MyStrength: California's social marketing campaign to engage young men to prevent sexual violence Poster session presented at the annual meeting of the American Public Health Association, Boston, MA.
- Lefebvre R.C., & Flora, J.A. (1988). Social Marketing and Public Health. *Health Education Quarterly, 15*(3), 299–315.
- Lofquist, W. (1996). *Technology of Development*. Development Publications.
- Loh, C., Gidycz, C.A., Lobo, T.R., & Luthra, R. (2005). A prospective analysis of sexual assault perpetration: Risk factors related to perpetrator characteristics. *Journal of Interpersonal Violence, 20*, 1,325–1,348.
- Morrison, S., Hardison, J., Mathew, A., & O'Neil, J. (September 2004). *An Evidence-Based Review of Sexual Assault Preventive Intervention Programs*. Retrieved on November 30, 2006, from <http://www.ncjrs.gov/pdffiles1/nij/grants/207262.pdf>
- National Center for Injury Prevention and Control. (2006). *Sexual Violence: Fact Sheet*. Retrieved November, 2006, from www.cdc.gov/ncipc/factsheets/svfacts.htm
- National Center for Injury Prevention and Control. (2002). CDC's Injury Center's 10th Anniversary Timeline. Retrieved November, 2006, from www.cdc.gov/ncipc/anniversary/media/1993.htm
- Resnick, M.D., Ireland, M., & Borowsky, I. (2004). Youth violence perpetration: What protects? What predicts? Findings from the National Longitudinal Study of Adolescent Health. *Journal of Adolescent Health, 35*, 424–433.
- Riesman et al. (2000). Office of Crime Victims Advocacy Sexual Assault Prevention Program Interim Process and Outcome Reports 1–4, Organizational Research Services 1998–2000.
- Roze, P.D., & Koss, M.P. (2001). Rape: A century of resistance, *Psychology of Women Quarterly, 25*, 295–311.
- Ruback, J. (2005). Promising Practice: Teen Peer Education & School Buy-in. *Moving Upstream Newsletter, 1*(1). Retrieved November 30, 2006, from www.vsdvalliance.org/secPublications/Moving%20Upstream%20March%202005.pdf
- Stringer, G. (2000). *Community Development & Social Change*. Washington Coalition of Sexual Assault Programs (video).
- Washington State Office of Crime Victims Advocacy, (August 1997). *Sexual Assault Prevention Plan for Washington State*. Office of Crime Victims Advocacy, Department of Community, Trade and Economic Development and Washington State Department of Health, The Evergreen State College.
- Woodruff, K. (1996). Alcohol advertising and violence against women: A media advocacy case study. *Health Education Quarterly, 23*(3), 330–345.