Reducing Sexual Assault on Campus: Lessons From the Movement to Prevent Drunk Driving

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I examined similarities and differences between the movement to prevent drunk driving of the 1980s, and current efforts to prevent and address campus sexual assault. As college and university administrators design policies and initiatives to reduce campus sexual assault in response to new federal legislation and regulation, they can apply lessons from successful public health initiatives to reduce drunk driving initiated more than 3 decades ago. I illustrate how interventions at the 5 levels of the social–ecological model, and messages that address entrenched cultural attitudes condoning sexual assault and blaming its victims can be used to combat campus sexual assault as a crime and a public health problem. I also show how efforts to promote community engagement can change behavioral norms and reduce offenses. (Am J Public Health. 2016;106:822-829. doi:10.2105/AJPH.2016.303082)

campus sexual assault. Table 1 enumerates the steps that led to widespread acceptance of the view that drunk drivers' behavior is criminal. Table 2 lists comparable steps necessary to shift the focus of sexual-assault prevention from the victim to the perpetrator if the latter's actions are to be widely recognized as criminal. Victims will be characterized as female and perpetrators as male, in keeping with the very high skew in gender for each group, but it is important to note that victims and perpetrators are of both genders.

Public health researchers and practitioners^{1,2} have amassed a substantial history of drawing attention to campus sexual assault as a public health problem. Only recently, however, have victims, advocates, prevention experts, and federal officials³ acted in concert to bring about federal legislation requiring concrete institutional responses to campus sexual assault (see the box on the next page). As college and university administrators craft new approaches to reduce campus sexual assault in response to these new legislative mandates, they can benefit from examining the aims and methods of the antidrunk-driving movement of the 1980s.

Intensified public awareness of campus sexual assault cannot be attributed to an increase in prevalence: the prevalence of campus sexual assault (according to data collected from students regardless of whether they reported the crime to authorities) has remained static since publication of the first study in 1987.5 Nor did the anti-drunkdriving movement come to public attention 3 decades ago because of an increase in prevalence.⁶ Both problems captured public awareness when an incumbent president-Ronald Reagan in 1982 and Barack Obama in 2014—stood at a White House podium to announce federal initiatives to increase penalties for perpetrators and the consequences for authorities (of states and universities,

respectively) of inadequately addressing the criminal offense in question.

The lessons that can be learned from the movement to prevent drunk driving are particularly timely now that regulatory initiatives and guidance have lent federal authority to efforts to reduce campus sexual assault, including President Obama's creation of a task force to support victims and to help campus officials act to protect students.³ Prevention of campus sexual assault focuses on a smaller segment of the population than did the anti-drunk-driving movement; I argue, however, that the lessons of that movement are salient and that gains made on campuses will in turn change the larger society.

After a brief account of the success of the movement to prevent drunk driving, I will examine differences between the 2 crimes that complicate application of the lessons of the anti-drunk-driving movement to the movement to reduce campus sexual assault. I will then identify changes needed to reduce

THE MOVEMENT TO PREVENT DRUNK DRIVING AS A MODEL

Campus officials can learn a great deal from public health responses to drunk driving in the 1980s.^{6,8} The percentage of traffic fatalities in which alcohol played a role decreased from 60% in the mid-1970s⁹ to 31% in 2012. 10 The prevention and intervention initiatives that increased the stigma of drunk driving and reduced fatalities and injuries illustrate forcefully how cultural norms can be addressed in a context of regulatory change.^{6,8}

Recognition that drunk-driving victims' rights had been violated was unusual in the United States until the early 1980s. Victims and their families were viewed as peripheral to the courts' interpretation of justice in cases of drunk driving. In a 1970 case, for instance, a judge prohibited the parents of a child killed by a drunk driver from attending the driver's trial on the grounds that their presence might jeopardize its fairness.8 Such judicial rulings were quite common until the early 1980s.6

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This article was accepted January 16, 2016. doi: 10.2105/AJPH.2016.303082

The Centers for Disease Control and Prevention defines sexual violence as

"a sexual act that is committed or attempted by another person without freely given consent of the victim or against someone who is unable to consent or refuse. It includes: forced or alcohol/drug facilitated penetration of a victim; forced or alcohol/drug facilitated incidents in which the victim was made to penetrate a perpetrator or someone else; nonphysically pressured unwanted penetration; intentional sexual touching; or non-contact acts of a sexual nature. Sexual violence can also occur when a perpetrator forces or coerces a victim to engage in sexual acts with a third partv."4(p11)

Beginning in that era, the prevailing conceptualization of drunk drivers—as victims of alcohol addiction rather than as criminalswas challenged by activists (many of whom had lost a loved one to a drunk driver), who eventually succeeded at shifting the focus of sympathy from the driver to the victims of the driver's actions.8

Throughout most of the 20th century, drunk-driving fatalities were viewed as unfortunate accidents^{6,8} caused by "sick" or "troubled" individuals, or by upstanding citizens who had made a single misstep, rather than by criminals.^{6,8} This entrenched tradition of compassion for drunk drivers was embodied in tolerance of high blood-alcohol readings and in the norm of minimal fines and punishments for offenders until the early 1980s.^{6,8}

In the wake of the 1982 legislation, victim-advocacy groups successfully changed the prevailing cultural climate by promoting recognition of drunk driving as criminal behavior. 6,8 Public opinion and prevailing discourse gradually shifted in response to the victim-centered approach promoted by journalist Doris Aiken, who founded Remove Intoxicated Drivers in 1978, and by Candy Lightner and Cindi Lamb, who organized Mothers Against Drunk Driving (MADD) in 1980, after their children became victims of drunk drivers.8,11 Ongoing

campaigns to draw attention to the harrowing experiences of victims, survivors, and covictims (families and friends) in the media and in testimony at legislative hearings collectively mobilized public opinion and made drunk driving a prominent public issue.¹¹

Community engagement has consistently been integral to the efforts of Remove Intoxicated Drivers, MADD, Students Against Drunk Driving, and other organizations to promulgate an ethos of shared responsibility for prevention of drunk driving. 11 In the early 1980s, nationwide public health interventions included mass-media campaigns to publicize both the extent of drunk driving and methods to reduce it. 12 Publicservice announcements (PSAs) stimulated community engagement by highlighting the fatalities associated with drunk driving 13 and explaining how to intervene when a friend is too drunk to drive. 12,13

Plentiful PSAs urged party hosts to collect guests' car keys on arrival and encouraged groups of friends to appoint a designated driver; in second-generation PSAs, actors used these prosocial approaches to prevent intoxicated friends from driving. 12 Meanwhile, some bars and restaurants offered free nonalcoholic drinks to designated drivers. 14 Jointly, these actions and recommendations conveyed the larger message that all members of a community have a role in reducing drunk driving.

Qualifications and Applicability of the Anti–Drunk-Driving Model

Obvious differences distinguish campus sexual assault from drunk driving as actionable offenses. First and foremost, the efforts to address campus sexual assault are focused on 1 segment of the adult population. Unlike drunk driving, sexual assault occurs in private and is thus more difficult than public offenses to prosecute or adjudicate. Victims often face blame, and the victim is alleged in many cases to have given consent. Prevailing aspects of popular culture, including the language colloquially used to describe a sexual assault, can obscure its criminal nature. Finally, the movement to prevent drunk driving benefited from consistent and strict enforcement, which made laws not merely punishment methods but also effective deterrence tools.

The movement to prevent drunk driving addressed individuals of all ages but focused on late adolescents, the population that proportionately was and continues to be most at risk for initiating an accident. The National Highway Traffic Safety Administration reported in 2013 that 50% of drivers involved in drunk-driving fatalities were aged between 16 and 24 years. 10 Efforts to combat campus sexual assault are by definition focused on a similar segment of the population—students enrolled in postsecondary education. The example of the anti-drunk-driving movement demonstrates that attitudinal and behavioral change concentrated on college campuses can radiate out into the larger society, spread by media attention and by graduates' entry into the workforce and the adult population.

Questions of Provocation, Evidence, and Actionability

Victim responsibility. A victim of a drunkdriving crash is not blamed for driving home from her restaurant shift at 1:00 AM; by contrast, it is common for a sexual-assault victim's own actions—alcohol consumption, attire, and behavior-to be called into question to cast doubt on her accusations and to "explain" or excuse perpetrators' behavior.

The view that responsibility for prevention lies with potential victims is reinforced by products marketed to women, including whistles, flashlights, and alarms, contraptions that put the onus on the victim, not the perpetrator, to head off an assault. By contrast, devices to prevent drunk driving target the potential perpetrator, preventing drivers with elevated blood-alcohol levels from starting their vehicles.15

Gathering evidence. The crime of sexual assault almost always occurs in private, 16,17 resulting in no witnesses. To gather physical evidence, victims must surrender their soiled clothing and undergo a forensic examination that can be painful and emotionally upsetting. 18 Thus, gathering evidence of sexual assault is far more problematic than collection of data about drunk driving via breathalyzers and other tools.

Perpetrators or their friends sometimes use smartphones to record the crime, and security-camera footage sometimes renders surreptitious behavior less than private. But

| Common Attitudes and Practices | Before the 1980s | Today |
|---|---|---|
| Prevailing beliefs about the use of alcohol | Alcohol promotes bad decisions | Individuals are responsible for their own behavior when they drink |
| Prevailing attitudes toward perpetrators (drunk drivers) | Empathy for drivers "suffering" from alcoholism | Public outrage at drunk drivers |
| Prevailing attitudes toward victims | Peripheral damage caused by the disease of alcoholism | Empathy for victims of drunk drivers |
| Investigative norms | Tolerance for high blood-alcohol levels | Standardized protocols to identify and arrest drunk drivers Breathalyzer Random traffic stops Arrest protocols |
| Mobilization of citizen messengers | None | Mobilization of victims' families |
| Federal sanctions for lack of state laws or lax enforcement | None | Federal highway funds linked to state laws and enforcemen |
| Community engagement | Very little | Social acceptance of intervention to prevent drunk driving |
| Prevention education | Very little | Anti–drunk-driving education in the K–12 curriculum |

the availability of video footage does not always result in conviction; in 1 campus case, video footage resulted in conviction of 2 perpetrators, 19 but in a comparable highschool case, the perpetrators were convicted only of minor infractions.²⁰ Presently there are no empirical studies indicating that bystanders use smartphones to intervene when sexual assault is occurring.

Societal attitudes. Public willingness to excuse perpetrators of sexual assault is roughly analogous to forgiveness of drunk driving.¹⁶ Media descriptions of sexual assault often "qualify" rapists' behavior by invoking alcohol, stress, or past misfortunes. 16 Almost universally, public discourse focuses on alcohol use, and campus investigations probe the degree of the victim's intoxication.²¹ The fact that fully 84% to 98% of campus sexual assaults²² are perpetrated by an acquaintance (a classmate, residence-hall neighbor, or date) or intimate partner of the victim²³ is also used to discredit victims. In contrast to the stark facts of a drunk driver killing or injuring a stranger, such scenarios can be and are interpreted to exonerate the perpetrator. As a result, campus sexual assault has typically been viewed as less than criminal; it is rarely recognized as the premeditated act that researchers have found it often to be. 16,17 This is a striking difference in comparison with a drunk driver who could practically kill or injure anyone on the street. Because of this difference, we may expect the community or society to be more engaged in activities to

prevent drunk driving, whereas there may be somewhat less inclination to do so in the case of combating campus sexual assault.

The impact of trauma. Victims of trauma whether a car crash or a sexual assaulttypically have trouble with memory and temporal sequencing.²⁴ Thus, first responders to car crashes, including drunk-driving crimes, do not typically expect victims to be able to provide thorough and coherent accounts on the spot.²¹ But victims who immediately report sexual assault tend to be held to a higher standard of accuracy and coherence than are victims of other traumas; spotty recall and imprecise chronology are often used to cast doubt on a victim's truthfulness. 21,25

Disentangling sexual assault from consensual sex. Criminal behavior is trivialized when the term "sexual assault" is replaced with milder euphemisms such as "unwanted sex." 16(p5) More seriously, traditional gendered behavioral norms are invoked to blur the distinction between coy resistance²² and genuine resistance to a crime. Sexual assaults are thus more difficult to investigate than are drunkdriving crimes, in which the evidence is less heavily dependent on testimony from victims, perpetrators, and witnesses. Claims of misinterpretation of cues²² or miscommunication²⁶ enable perpetrators to plausibly deny responsibility and amplify victims' accountability. 26(p174) But the miscommunication model overlooks the high

percentage of sexual assaults perpetrated by means of physical force or threats.²⁷

New statutes in California and New York have shifted the onus of prevention away from the victim by mandating that both parties must explicitly agree to a potential sexual encounter. But gender affects interpretations of consent.²⁸ Men typically perceive consent as an event: a woman's consent to go to a man's room, for instance, is taken to imply acceptance of any sexual activities that ensue there; women tend to view consent as a process that continues throughout the interaction.²⁹ Researchers have noted the awkwardness of verbal consent among young adults more comfortable with nonverbal cues.²⁹ Needless to say, questions of consent do not arise in cases of drunk-driving accidents.

The role of alcohol. Alcohol consumption is usually implicated in campus sexual assault (as it is by definition in drunk driving).²² But prevention messages addressed to students about the 2 issues differ strikingly. Messages about drunk driving are typically aimed at drivers (potential perpetrators): students are informed that alcohol impairs driving and urged to appoint designated drivers. By contrast, messages about drinking and sexual assault are almost invariably directed at the potential victim. Potential victims (typically women) are urged to monitor their alcohol consumption and to remain in control of social situations.²² But potential perpetrators are not similarly warned to monitor their own

TABLE 2—Prevailing Attitudes, Investigative Methods, and Preventive Strategies Toward Campus Sexual Assault: Current and Projected (if Recommended Changes Are Implemented)

| Common Attitudes and Practices | Current | Projected |
|---|---|--|
| Prevailing attitudes about use of alcohol | Alcohol "blurs the lines," complicating assignment of blame for a sexual assault | Perpetrators held legally responsible for sexual assault, regardless of whether they or their victims are intoxicated |
| Prevailing attitudes toward sexual-assault perpetrators | Sexual assault attributed to "miscommunication" Tendency to excuse perpetrator's behavior | Awareness that sexual assault is often premeditated, and that alcohol, physical violence, and threats are often used |
| Prevailing attitudes toward victims | Victim blaming: She wore a short dress She drank too much | Awareness of long-term physical and mental-health consequences for victims |
| Mobilization of citizen messengers | Student activism on some campuses; nationwide initiatives lacking | Nationwide student-mobilized activism |
| Investigative norms | No uniform standards for training police and prosecutors Interaction with law enforcement can be revictimizing | Mandated training, standards, and protocols for campus and community police |
| Federal mandates for colleges and universities | Timely investigation of Title IX violations | Uniform mandates: Comprehensive prevention strategies Standards for police response Policies to assist victims Policies to ensure due process Fines for noncompliant campuses (without cutting aid to low-income students) |
| Community engagement | Nascent awareness that prevention is a community responsibility | Prevention strategies that engage entire communities |
| Acceptable forms of consent | Varying definitions of consent | Consent in the form of a voluntary "yes" at each stage of a sexual interaction |
| Prevention education | Rarely addressed in high school | Age-appropriate mandated K–12 curriculum |
| Data-collection efforts | No uniform system to collect data on unreported campus assaults | Mandated uniform collection of data on the prevalence of campus sexual assault |

alcohol intake or to refrain from encouraging others to drink to excess.

Campus Responses to Sexual-Assault Cases

Many college administrators' responses to claims of sexual assault resemble the leniency of the police and the judiciary in drunkdriving cases before the 1980s.^{6,8} One sexual-assault victim quoted a dean as saying that her assailant "couldn't be punished because he didn't know what he was doing."30 "Secondary traumatization" 31 can occur when victims are questioned by officials who lack training; such treatment discourages other victims from coming forward.^{22,25} Researchers have consistently found, in fact, that sexual assault is the most underreported serious crime: between 64% and 96% of victims do not disclose the crime to authorities.²⁵

The combination of underreporting and clumsy or self-serving responses to victims both within and outside college settings has 2 public health implications: many victims fail to receive the medical and mental-health support they need, ³² and underreporting enables perpetrators to repeat their criminal behavior, posing a public health risk for the larger community. ¹⁷

Victims of campus sexual assault whose race, ethnicity, or sexual identity diverge from the conventional profile of a victim report difficulty finding help; most campus response efforts are addressed to heterosexual White women, despite the increasing racial, ethnic, and sexual diversity of student populations.³³ Although gays, lesbians, and bisexuals report rates of sexual assault comparable to those of heterosexuals,³⁴ the language used to describe such violence is typically gendered, increasing the difficulty of reporting the crime.

The Special Status of Campuses

On campus as elsewhere, the accused is innocent until proven guilty. But campus investigations are far less thorough and rigorous than criminal investigations. Campus sexual assaults are treated differently than those handled by town or city police departments, in which most accused perpetrators are required to post bail. Campus leaders are typically hesitant to move known perpetrators out of residence halls where their victims reside, much less to suspend them.

There is a clear parallel between the serial drunk driver, repeatedly stopped and released, perhaps because of his social status, ⁸ until he kills or maims someone, and the campus rapist who commits multiple assaults with impunity ¹⁷ because of his status as a star athlete or campus leader. ³⁷ In the former case, it is the authorities who let the drunk driver escape justice; the campus rapist may be protected by

victims' fear that reporting the crime will provoke harassment by the perpetrator's friends.¹⁷ This scenario closely resembles domestic violence, a crime characterized by high levels of victim harassment and coercion associated with victim recantation.³⁸

CURRENT INITIATIVES TO COMBAT CAMPUS SEXUAL **ASSAULT**

Like Aiken, Lamb, and Lightner almost 40 years ago, victims of campus sexual assault are calling attention to unpunished crimes, and to their frustration with insubstantial institutional responses. Laura Dunn, a lawyer who was raped during college, founded SurvJustice to promote victims' rights and train activists. Dana Bolger and Alexandra Brodsky organized Know Your IX to educate campus rape victims about their rights under the 2011 guidance to Title IX of the Education Amendments of 1972.7 Student activists have used the Title IX amendments to bring lawsuits via the US Department of Education's Office for Civil Rights. At present, 124 campuses are being investigated for possible mishandling of sexualmisconduct cases.³⁹

These and other forms of activism have won the attention of federal lawmakers. Like Aiken, Lamb, and Lightner in the early 1980s, the students and former students working to focus federal attention on campus sexual assault and administrative failure to protect victims and dispense justice have turned frustration into action. Unlike Lamb and Lightner in the 1980s, Dunn, Bolger, Brodsky, and other student victims and their supporters can use the Internet and social media to spread their message and engage other victims. This technology did not exist at the beginning of the movement to prevent drunk driving in early 1980s and its impact is noted in the documentary film, The Hunting Ground. Like Lamb and Lightner, they are reminding the public that these crimes are not victimless.

Prevention initiatives that focus on the role of bystanders, including in-person programs 40-42 and social-marketing campaigns, 43 have the potential to engage the entire campus community. 40,43 Such

strategies, which teach bystanders to intervene in incipient sexual violence and stalking, are strikingly reminiscent of earlier eras' server-intervention programs⁴⁴ and drunk-driving-prevention PSAs. 12 Like the 1980s-era servers who were found to intervene more often when they felt supported by peers and supervisors, 44 student bystanders are more apt to intervene to prevent sexual violence when they feel supported by peers. 40

Many men are willing to intervene but are uncertain how to do so. 45 Bystander strategies educate them about behavior that inadvertently facilitates crimes, such as lending out their bedrooms or purchasing the alcohol used to deliberately intoxicate potential victims. 17 Awareness of the ramifications of these behaviors equips bystanders to step in to prevent facilitation and assaults. 45 The bystander approach is particularly effective when it provides men a range of intervention strategies to draw on. 46

LESSONS FROM THE ANTI-DRUNK-DRIVING MOVEMENT

Bronfenbrenner and others have demonstrated that lasting social change calls for action at all 5 levels of the social-ecological model so that desired individual and group behaviors are promoted and supported by higher-level actions and policies. 47,48 Although there are not overarching studies examining the effectiveness of the antidrunk-driving movement, national data indicate that there has been a decrease in drunk-driving fatalities since this problem became part of the national dialogue in the late 1970s. Bronfenbrenner's model can help explain the remarkable effectiveness of the anti-drunk-driving movement and help pinpoint the lessons it offers. The success of the movement can largely be attributed to its broad-spectrum approach to engagement at all 5 levels of the social-ecological model: (1) individual, (2) relational, (3) community, (4) institutional, and (5) societal.⁴⁷ Programs were instituted to educate the public about the consequences of individual actions such as driving drunk and failing to stop a friend from driving drunk. Researchers found that specific instructional messages, such as a method for choosing a designated driver, 14 were more effective than scare tactics¹³ or shame- and

guilt-inducing tactics. 49 As sexual assault occurs in private, more attention needs to focus on prevention and deterrent penalties for the potential perpetrators.

At the relational level, PSAs portrayed friends and servers intervening to prevent an impaired individual from driving. Experimental research found that customers of servers and bartenders who had received alcohol-intervention training left their premises with lower blood-alcohol levels than customers of untrained servers. 44 Bystander intervention strategies to reduce campus sexual assault strikingly resemble these initiatives.

At the community level, schools, workplaces, and roadway sobriety checkpoints were all equipped to help raise awareness of the dangers of drunk driving. The continued functioning of MADD chapters was found to be crucially dependent on engaging local community leaders and activists; in other words, it was community support, rather than support from the national parent organization, that proved indispensable to the success of local MADD chapters.⁵⁰ Alongside the introduction of Students Against Drunk Driving programs in high schools, antidrunk-driving messages were added to high-school curricula; interactive programs in particular were shown to reduce the incidence of students riding with drunk drivers.51

Community activism and awareness in turn promoted institutional responses: criminalization of drunk driving came about largely because of unremitting pressure from grassroots organizations. Meanwhile, broader normative intolerance for drunk driving gradually permeated the prevailing culture at the societal level; tolerance of drunk driving decreased, and behaviors such as appointing a designated driver became the norm. 52 In a review of traffic fatalities before and after the advent of anti-drunk-driving legislation in Canada in 1969, researchers found that, in addition to criminalization of drunk driving, a confluence of factors reduced fatality rates, including police enforcement, other legislation, social norms, and the influence of grassroots organizations such as MADD.⁵³ The results of this study attest to the importance of addressing a social problem at each level of the social-ecological

| Social–Ecological Framework Levels | Drunk Driving | Campus Sexual Assault |
|------------------------------------|--|--|
| Individual | K–12 education about alcohol's effects on behavior Ignition locks | Education to increase awareness of sexual assault and of situation in which it might occur Services to aid victims |
| Relationship | Public-service announcements that offer strategies to prevent a friend from driving drunk, including designated-driver programs Public-service announcements and educational materials that encourage parents to discuss drunk driving with children | Awareness of how to respond when a friend discloses an assaul Training on how to defuse a risky situation or deter a sexual assaul Materials to help parents educate children on how to avoid or handle risky situations Public service announcements that use social media (e.g., TV, radio, Twitter, Facebook) to inform bystanders about ways to prevent campus sexual assault |
| Community | High-school programs (SADD) Community programs (MADD) Server-training programs Sobriety checkpoints | Partnerships between campus communities and crisis centers to provide appropriate care to victims Development, dissemination, and enforcement of campus sexual misconduct policies Sensitivity training for law-enforcement officers Prevention training for all constituents: administration, faculty, staff, and students Development and distribution of guides for medial outlets on suitable terminology for victims and perpetrators Alcohol policies that limit the availability of alcohol (e.g., alcohol free dorms, higher alcohol pricing in campus communities) |
| Institutional | Statutory consequences for individuals (arrest, loss of license) and states (loss of federal funding) | Federal enforcement of Title IX amendments and the Violence Against Women Act |
| Societal | Decreased tolerance of drunk driving; widespread adoption of methods to discourage drunk driving, including designated | Use of social media to challenge prevailing views of victims and perpetrators |

Note. MADD = Mothers Against Drunk Driving; SADD = Students Against Drunk Driving.

drivers

Table 3 illustrates how the various levels of the social-ecological model can be leveraged to reduce campus sexual assault. Prevention efforts must look beyond their current focus on individuals and peers to address campus police and administrators' responses to victims and accused perpetrators. Prevention efforts must also engage the larger campus community, including faculty, staff, families, and alumni. Federal legislation mandating comprehensive prevention strategies will in turn modify the social norms that shape societal responses to campus sexual assault.

CONCLUSIONS

University officials are adopting various strategies to reduce campus sexual assault in an effort to comply with new federal regulations. But compliance has many facets.

Care must be taken to ensure that campus policies make sense for victims. The rights of the accused need to be protected, but not at the price of interfering with victim support and assistance. Anti-drunk-driving activists successfully shifted the focus of sympathy from drunk drivers to the victims of their actions; efforts to prevent campus sexual assault need to promote the same cultural

The 1980s-era movement to prevent drunk driving was broader in scope than current efforts to reduce campus sexual assault; nevertheless, it is a valuable model for campus communities to examine because it succeeded at changing prevailing social norms and conventional wisdom. It offers an attractive model for administrators whose efforts to reduce campus sexual assault are impeded by ingrained skepticism about victims: the anti-drunk-driving movement demonstrates how concerted action by

legislatures, public health officials, and activists can redefine as a crime a behavior previously excused as a mere unfortunate outcome of a character weakness.

Vigorous responses to messages that reinforce rape myths

Campus administrators should be encouraged to recognize the unique opportunity they possess to change the prevailing larger culture. The years that students spend on campus are a period of important cognitive development⁵⁴: the college experience encourages students to explore new identities and attitudes, and thus represents an opportunity for sexual assault-prevention messages to effectively promote new attitudes and behavioral norms. Changes in institutional policies can also weaken the grip of traditional gender roles and uneven gender structure.

The movement to prevent drunk driving teaches us that the prevalence of sexual assault on campus and in the community will not be reduced by exposing students to

a single program or message at a time.⁵⁵ Activist college students and administrators can and should be in the forefront of broad cultural change like that accomplished by the tireless advocates and legislators whose work transformed drunk driving from a common practice into a crime.⁸ AIPH

ACKNOWLEDGMENTS

The author thanks the University of New Hampshire Office of the Provost for support of this work through a Faculty Scholar Award and the Prevention Innovations Research Center.

Thanks are also due to Mary M. Moynihan, PhD, for reviewing an earlier draft.

HUMAN PARTICIPANT PROTECTION

Institutional review board approval was not obtained or required for this study because human participants were not used in the research.

REFERENCES

- 1. Black MC, Basile KC, Breiding MJ, et al. The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 summary report. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention; 2011.
- 2. Black MC, Breiding MJ. Adverse health conditions and health risk behaviors associated with partner violence—United States, 2005. *JAMA Pediatrics*. 2008;57: 113–117.
- 3. Not alone: the first report of the White House Task Force to Protect Students From Sexual Assault. 2014. Available at: https://www.notalone.gov/assets/report. pdf. Accessed April 29, 2014.
- 4. Basile KC, Smith SG, Breiding MJ, Black MC, Mahendra RR. Sexual Violence Surveillance: Uniform Definitions and Recommended Data Elements, Version 2.0. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention; 2014.
- 5. Koss MP, Gidycz CA, Wisniewski N. The scope of rape: incidence and prevalence of sexual aggression and victimization in a national sample of higher education students. *J Consult Clin Psychol.* 1987;55(2): 162–170
- Reinarman C. The social construction of an alcohol problem: the case of Mothers Against Drunk Drivers and social control in the 1980s. *Theory Soc.* 1988;17(1): 91–120.
- 7. Ali R. Dear colleague letter: sexual violence. Washington, DC: US Department of Education, Office for Civil Rights; 2011.
- 8. Lerner BH. One for the Road: Drunk Driving Since 1900. Baltimore, MD: Johns Hopkins University Press; 2011.
- 9. Fact sheet: alcohol-related traffic deaths. Washington, DC: National Institute on Alcohol Abuse and Alcoholism, National Institutes of Health; 2010.
- 10. Traffic safety facts 2013: a compilation of motor vehicle crash data from the fatality analysis reporting system and the general estimates system. Washington, DC: National Highway Traffic Safety Administration, US Department of Transportation; 2013
- 11. Zeman LD. Mothers Against Drunk Driving: how two mothers' personal pain birthed a social movement.

- In: O'Reilly A, ed. The 21st Century Motherhood Movement: Mothers Speak Out on Why We Need to Change the World and How to Do It. Bradford, ON: Demeter Press; 2011.
- 12. DeJong W, Atkin CK. A review of national television PSA campaigns for preventing alcohol-impaired driving, 1987–1992. *J Public Health Policy*. 1995;16(1): 59–80.
- 13. King KW, Reid LN. Fear arousing anti-drinking and driving PSAs: do physical injury threats influence young adults? *J Curr Issues Res Advert.* 1989;12(1): 155–175.
- 14. DeJong W, Wallack L. The role of designated driver programs in the prevention of alcohol-impaired driving: a critical reassessment. *Health Educ Q.* 1992;19(4): 429–442.
- 15. Marques PR, Voas RB, Hodgins D. Vehicle interlock programs: protecting the community against the drunk driver. *J Prev Interv Community*. 1998;17(1): 31-44
- 16. Coates L, Wade A. Telling it like it isn't: obscuring perpetrator responsibility for violent crime. *Discourse Soc.* 2004;15(5):499–526.
- 17. Lisak D, Miller PM. Repeat rape and multiple offending among undetected rapists. *Violence Vict.* 2002; 17(1):73–84.
- 18. Campbell R, Townsend S, Long S, et al. Responding to sexual assault victims' medical emotional needs: a national study of the services provided by SANE programs. *Res Nurs Health.* 2006;29(5):384–398.
- 19. Blinder A, Perez-Pena R. Vanderbilt rape convictions stir dismay and denial. *New York Times*. January 28, 2015. Available at: http://www.nytimes.com/2015/01/29/us/vanderbilt-rape-trial-didnt-stir-students-on-campus. html?_r=2. Accessed January 28, 2015.
- 20. Oppel RA. Ohio teenagers guilty in rape that social media brought to light. *New York Times*. March 17, 2013. Available at: http://www.nytimes.com/2013/03/18/us/teenagers-found-guilty-in-rape-in-steubenville-ohio. html?_r=1. Accessed April 10, 2015.
- 21. Payne BK. Challenges responding to sexual violence: differences between college campuses and communities. *J Crim Justice*. 2008;36(3):224–230.
- 22. Abbey A. Alcohol related sexual assault: a common problem among college students. *J Stud Alcohol Suppl.* 2002;(14):118–128.
- 23. Fisher B, Cullen F, Turner M. The sexual victimization of college women: findings from two national-level studies. Washington, DC: National Institute of Justice and Bureau of Justice Statistics; 2000
- 24. Halligan SL, Michael T, Clark DM, Ehlers A. Post-traumatic stress disorder following assault: the role of cognitive processing, trauma memory, and appraisals. *J Consult Clin Psychol.* 2003;71(3):419–431.
- 25. Lisak D, Gardinier L, Nicksa SC, Cote AM. False allegations of sexual assault: an analysis of ten years of reported cases. *Violence Against Women*. 2010;16(12): 1318–1334.
- 26. O'Byrne R, Hansen S, Rapley M. "If a girl doesn't say 'no'...": young men, rape and claims of "insufficient knowledge." *J Community Appl Soc.* 2008; 18(3):168–193.
- 27. Banyard VL, Cohn ES, Moynihan MM, Walsh W, Ward S. Unwanted sexual experiences at UNH: incidences and prevalence 2006. Durham, NH: University of New Hampshire; 2007.

- 28. Jozkowski KN, Peterson ZD, Sanders SA, Dennis B, Reece M. Gender differences in heterosexual college students' conceptualizations and indicators of sexual consent: implications for contemporary sexual assault prevention education. *J Sex Res.* 2014;51(8): 904–916.
- Beres MA. Rethinking the concept of consent for anti-sexual violence activism and education. Fem Psychol. 2014;24(3):373–389.
- 30. Anonymous. Dear Harvard: you win. *The Harvard Crimson*. March 31, 2014. Available at: http://www.thecrimson.com/article/2014/3/31/Harvard-sexual-assault/?page=single. Accessed April 1, 2014.
- 31. Campbell R, Adams AE, Patterson D. Methodological challenges of collecting evaluation data from traumatized clients/consumers: a comparison of three methods. *Am J Eval.* 2008;29(3):369–381.
- 32. Sabina C, Ho LY. Campus and college victim responses to sexual assault and dating violence: disclosure, service utilization, and service provision. *Trauma Violence Abuse*. 2014;15(3):201–226.
- 33. Hussar WJ, Bailey TM. Projections of education statistics to 2020 (NCES 2011-026). Washington, DC: US Department of Education, National Center for Education Statistics; 2011.
- 34. Walters ML, Chen J, Breiding MJ. The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 findings on victimization by sexual orientation. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention; 2013.
- 35. Greenfeld LA. Sex offenses and offenders: an analysis of data on rape and sexual assault: NJC 163392. Washington, DC: Bureau of Justice Statistics; 1997.
- 36. Kingkade T. Fewer than one-third of campus sexual assault cases result in expulsion. *Huffington Post*. September 29, 2014. Available at: http://www.huffingtonpost.com/2014/09/29/campus-sexual-assault_n_5888742.html. Accessed November 1, 2014.
- 37. Moynihan MM, Banyard VL. Educating bystanders helps prevent sexual violence and reduce backlash. *FIPV*. 2011;2(4):293–303.
- 38. Bonomi AE, Gangamma R, Locke CR, Katafiasz H, Martin D. "Meet me at the hill where we used to park": interpersonal processes associated with victim recantation. *Soc Sci Med.* 2011;73(7):1054–1061.
- 39. Kingkade T. 124 colleges, 40 school districts under investigation for handling of sexual assault. *Huffington Post.* July 24, 2015. Available at: http://www.huffingtonpost.com/entry/schools-investigation-sexual-assault_55b19b43e4b0074ba5a40b77. Accessed July 24, 2015.
- 40. Moynihan MM, Banyard VL, Cares AC, Potter SJ, Williams LM, Stapleton JG. Encouraging responses in sexual and relationship violence prevention: what program effects remain one year later? *J Interpers Violence*. 2015;30(1):110–132.
- 41. Katz J. Reconstructing masculinity in the locker room: the mentors in violence prevention project. *Harv Educ Rev.* 1995;65(2):163–175.
- 42. Coker AL, Cook-Craig PG, Williams CM, et al. Evaluation of green dot: an active bystander intervention to reduce sexual violence on college campuses. *Violence Against Women.* 2011;17(6):777–796.
- 43. Potter SJ. Using a multimedia social marketing campaign to increase active bystanders on the college campus. J Am Coll Health. 2012;60(4):282–295.

- 44. Russ NW, Geller ES. Training bar personnel to prevent drunken driving: a field evaluation. *Am J Public Health*. 1987;77(8):952–954.
- 45. Fabiano PM, Perkins H, Berkowitz A, Linken J, Stark C. Engaging men as social justice allies in ending violence against women: evidence for a social norms approach. *J Am Coll Health*. 2003;52(3):105–112.
- 46. Casey EA, Ohler K. Being a positive bystander: male antiviolence allies' experiences of stepping up. *J Interpers Violence*. 2012;27(1):62–83.
- 47. Bronfenbrenner U. Toward an experimental ecology of human development. *Am Psychol*. 1977;32(7): 513–531.
- 48. Dahlberg LL, Krug EG. Violence: a global public health problem. In: Krug E, Dahlberg LL, Mercy JA, Zwi AB, Lozano R, eds. *World Report on Violence and Health*. Geneva, Switzerland: World Health Organization; 2002: 1–56.
- 49. Agrawal N, Duhachek A. Emotional compatibility and the effectiveness of anti-drinking messages: a defensive processing perspective on shame and guilt. *J Mark Res.* 2010;47(2):263–273.
- 50. Weed FJ. Organizational mortality in the anti-drunk driving movement: failure among local MADD chapters. *Soc Forces.* 1991;69(3):851–868.
- 51. Elder R.W., Nichols JL, Shults R.A., Sleet DA, Barrios LC, Compton R. Effectiveness of school-based programs for reducing drinking and driving and riding with drinking drivers: a systematic review. *Am J Prev Med*. 2005; 28(5 suppl):288–304.
- 52. Ditter SM, Elder RW, Shults RA, Sleet DA, Compton R, Nichols JL; and Task Force on Community and Preventative Services. Effectiveness of designated driver programs for reducing alcohol impaired driving: a systematic review. *Am J Prev Med.* 2005;28(5 suppl): 280–287
- 53. Asbridge M, Mann RE, Flam-Zalcman R, Stoduto G. Assessing the deterrent impact of Canada's first per se law. *J Stud Alcohol.* 2004;65(4):450–459.
- 54. Chickering AW, Reisser L. Education and Identity. 2nd ed. San Francisco, CA: Jossey Bass; 1993.
- 55. Banyard VL. Improving college campus-based prevention of violence against women: a strategic plan for research built on multipronged practices and policies. *Trauma Violence Abuse*. 2014;15(4):339–351.