

INSIGHT REPORT

August 2013

# The Relationship Between Alcohol and Sexual Assault on the College Campus

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SUMMARY OF RESEARCH – SUMMER 2013

## THE COLLEGE EXPERIENCE

For many teens that graduate high school, moving to and attending a university is an essential milestone on the road to adulthood. This transition often includes increased independence, new opportunities for personal and social exploration, as well as academic and intellectual development. However, with these burgeoning prospects for positive growth, there comes the increased potential for experiencing negative consequences that may result from issues such as financial and academic-related stress, social isolation, substance abuse, and damaging personal relationships<sup>1</sup>. The current investigation focuses on two of these key issues that are impacting college students all over the country: alcohol consumption and attitudes/behaviors surrounding sexual assault.

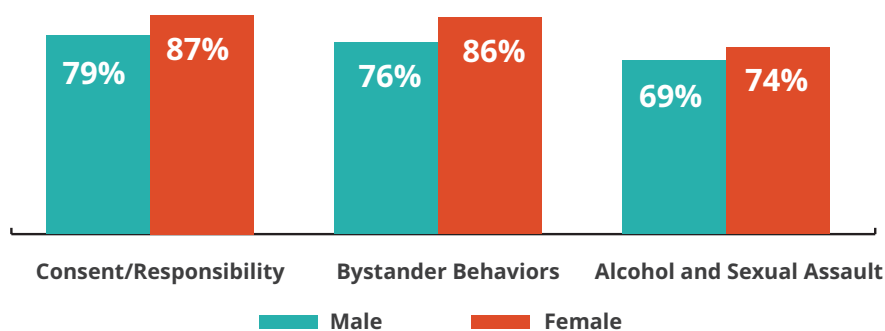
## AN INVESTIGATION OF UNDERGRADUATES

Data was collected during the 2012-2013 school year from over 231,400 students, primarily 18-year-old freshmen, in colleges and universities across the United States. Our sample was 54% female; 71% Caucasian; 12% Asian/Pacific Islander; 9% Hispanic/Latino; and 8% Black/African American. Only 1% of the respondents were members of Greek organizations, while 10% were either intercollegiate and/or intramural athletes. Students were surveyed on their attitudes and behaviors regarding alcohol and drug use, relationship violence, and sexual assault (SA). Survey responses were collected before and after students completed an online course designed to help incoming students avoid suffering negative consequences related to substance abuse and SA.

## ATTITUDES AND BEHAVIORS AROUND SEXUAL ASSAULT

Survey questions regarding SA generally fell into three categories: 1) Consent and Responsibility, 2) Bystander Behaviors, 3) Alcohol and Sexual Assault. Figure 1. illustrates the percentage of students reporting responsible, healthy attitudes in each of these domains. Females' responses were more skewed in the positive direction than males', which included higher percentages of unhealthy attitudes and behaviors.

Figure 1. Agreement with Healthy Attitudes/Behaviors



The greatest increase in drinking rates during the first semester of college is seen in the students who were sexually assaulted during this time

Before taking the course, 5% of male students and 16% of female students reported being sexually assaulted at some point in the past. Comparing pre and post course responses, we saw almost no change in those who said “Yes” and only a slight 1% increase in those reporting that they were “Not Sure”.

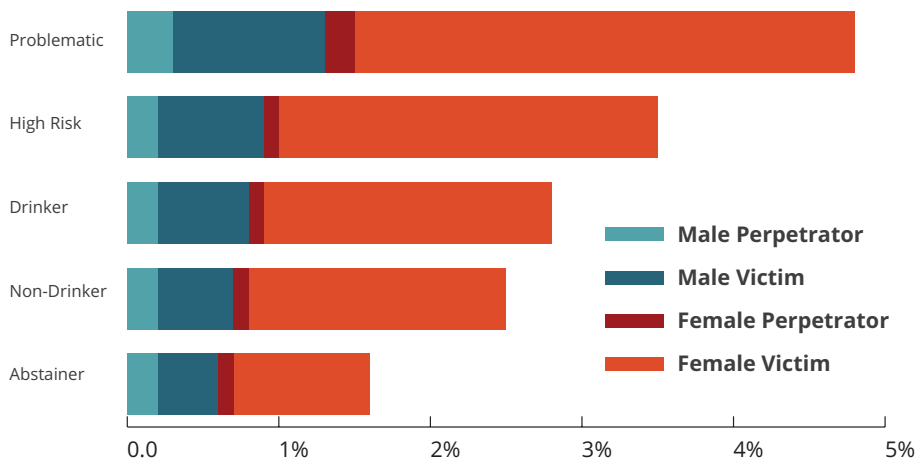
### ALCOHOL USE

Exploratory data analyses revealed that 45% of the entire sample reported no drinks in the past year and only 37% of the students had a drink in the past two weeks. Twenty-two percent of all students admitted to engaging in high-risk drinking (4+ drinks for women, 5+ drinks for men) in the past two weeks and 5% were problematic drinkers (8+ drinks for women, 10+ drinks for men). On average, we found a 6% increase in high-risk drinking comparing pre and post course survey responses, and only a 1% increase in problematic drinking.

### ALCOHOL AND SEXUAL ASSAULT

Our investigation showed a strong relationship between alcohol consumption (especially problematic drinkers) and unhealthy SA perceptions. As alcohol use became more problematic, the chances of a student reporting that they had been sexually assaulted increased as well (Figure 2).

Figure 2. Alcohol Use and Percentages of Survey Respondents Reporting SA



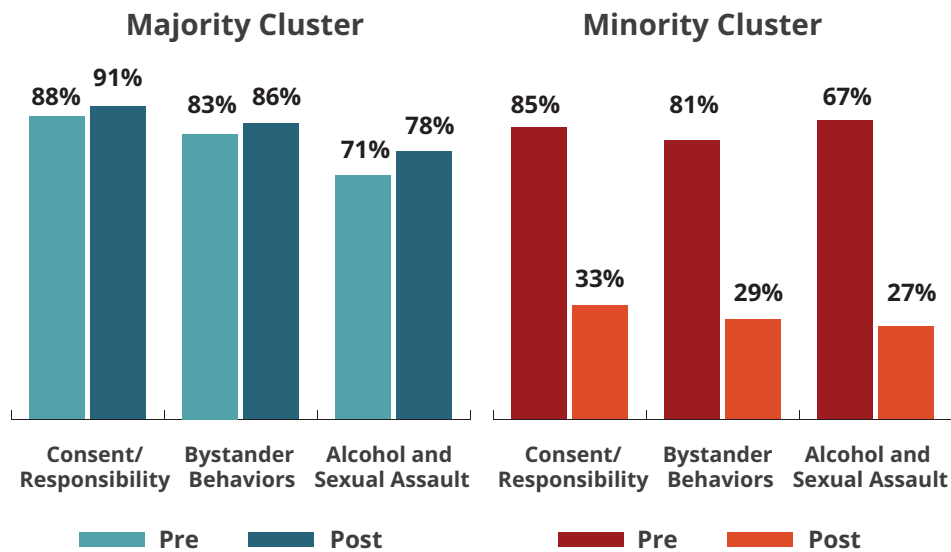
Conversely, experiencing SA may impact drinking rates, as those who answered, “Yes” or “Not Sure” to being a victim of SA were more likely to be high-risk (33% and 29%) and problematic drinkers (9% and 8%). Changes in drinking behavior between pre and post course surveys were similar for most students. However, those who answered “No” to the question about being sexually assaulted pre-course, but answered “Yes” when they took the post course survey, saw a dramatic increase in problematic drinking rates, going from 6% to 10%<sup>2</sup>.

### CLUSTER ANALYSIS: BASED ON PRE TO POST COURSE CHANGE

Students reported minimal change in their attitudes and behaviors around SA when comparing responses pre and post course. In fact, overall average change shifted in a slightly negative direction. In order to better understand these changes we conducted a two-step cluster analysis using the 25 variables created by subtracting pre course from post course responses as categorical variables using a log-likelihood distance measure and Schwarz’s Bayesian Clustering Criterion (BIC) with two fixed clusters. The majority cluster (88%) was primarily female; increased in agreement with healthy SA attitudes and behaviors; and were more likely to abstain from drugs and alcohol. The smaller cluster (12%) displayed responses that moved very strongly in the negative direction comparing pre and post course attitudes and behaviors (Figure 3).

As drinking becomes more problematic, students are more likely to report being sexually assaulted

Figure 3. Course Change by Cluster



While the pre course responses were very similar between groups, the minority cluster members tended to drink more than the majority cluster members. Throughout the semester, the majority cluster increased their protective/healthy drinking behaviors, but the minority cluster did not. They actually reported a drastic increase in the number of negative consequences they experienced from drinking comparing pre to post course reports. One of the most dramatic differences between clusters was that by the end of the course only 0.7% of majority members had sexually assaulted another person (with 2.5% responding “Not Sure”). However, 8.1% of the minority cluster had assaulted another person, with another 8.6% reporting that they were “Not Sure”.

**IMPLICATIONS FOR PRACTICE**

These findings can influence sexual assault prevention efforts in several ways. First, research and prevention efforts need to be targeted toward offenders, especially high-risk males identified by predictors such as alcohol use, aggressive behaviors, and unhealthy attitudes toward SA<sup>3</sup>. Our analysis suggests that those who are most likely to commit sexual assault are extremely resistant to current SA prevention efforts and are acquiring unhealthy attitudes and behaviors during their first semester on campus. It is also vitally important to remember that while people are more likely to be assaulted when they are drinking, we have to avoid victim blaming, especially in situations when alcohol is involved<sup>4</sup>. Post traumatic distress for victims can be absolutely debilitating, especially the blame victims put on themselves. We need to make every effort to assuage the damage incurred by these events and assist them in their recovery and assimilation.

Second, education surrounding sexual assault on the college campus should re-double efforts to improve bystander intervention attitudes and behaviors<sup>5</sup>. The actions of spectators to discourage or even counteract unhealthy conversation, behaviors, and attitudes around SA are extremely important<sup>3</sup>. The college culture surrounding SA appears to be quite poisonous for some students and bystanders can mitigate this effect by openly challenging unhealthy attitudes and behaviors in their conversations, demonstrations, and interactions on campus.

The vast majority of students responded to our course with a small, but significant healthy increase in their attitudes and behaviors surrounding SA. However, a heavily male sub-population moved **STRONGLY** in the unhealthy direction comparing pre and post course responses. This group was 8 times more likely than the majority of students to commit SA

Finally, while substance abuse education should continue for all college students, sexual assault education should be paired with these programs given the great deal of overlap between the constructs. Alcohol use correlates with SA in that those who drink more report more instances of SA and those who have been assaulted tend to increase their drinking as a way to self medicate. Current methods should be placed under rigorous assessments and improved and expanded wherever feasible<sup>5</sup>. Preventing sexual violence needs to be viewed as the responsibility of the entire university community if we truly wish to make progress in this domain<sup>2</sup>.

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