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Addressing sexual violence in K-12 Education

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Student researcher in sexual and domestic violence

Dr. David A. Martin,

I wish to submit a research article titled Addressing sexual violence in K-12 Education. In this publication, I have evaluated several peer reviewed articles to report on the current state of K-12 sex education and its effectiveness in addressing sexual violence. I find that comprehensive programs generally have positive effects on students' response to violence and intent to intervene, thus reducing instances of violence. Considering the traditional method of sexuality education is rooted in abstinence based instruction, this research indicates a need for comprehensive sex education in protecting youth from instances of violence.

I believe that this manuscript is appropriate for publication by Violence Against Women. The significance of this research is specific to investigating factors in the high rates of sexual victimization against women. Focusing on education on the primary level, the research presented offers examination into prevention of violence before the ages of which it spikes among women.

Thank you for your consideration of this manuscript,

Taylor M. Bowie

ABSTRACT

Sexual assault has been widely recognized as a public health crisis for decades. Since at least the late 1980's, rates of sexual violence have been steady around 25% of women experiencing it by their freshman year of college. Our past and most prevalent prevention methods have consistently shown to be useless, as rates of violence have not decreased, and the results often do not lead to increased understanding about sexual assault and violence intervention. In recent years, college campuses have started to implement a new prevention education known as the bystander model. While the literature generally agrees it has some level of effectiveness beyond traditional rape education programs, the model is often taught too late. This project aims to gauge the effectiveness of traditional K-12 sex education in addressing sexual violence, by two phases. Phase one includes a systematic review in which policies on sexual education and bystander intervention at the K-12 level are examined. The second phase includes interviewing sex education instructors and professionals and their experiences with the topic and prevention in the classroom. Phase one finds that comprehensive based education has shown to be the most effective option in helping adolescents understand safe and healthy sexual interactions. Comprehensive education gives students knowledge on approaching potentially unsafe situations, developing intervention ideas, and knowing when to spot situations that could be harmful, with as much as 44% of students being able to specifically identify sexual violence and develop intervention plans post-programming. Students in comprehensive programming also consistently showed a significantly more positive mindset towards sexual self-esteem. Unfortunately, abstinence-based programming has been the traditional method of sex education for K-12 students for decades, making widespread implementation of comprehensive-based education difficult.

College campus sexual assault has been a constant issue for decades, with reports of victimization as high as 1 in 4 college-aged women reporting experiences that meet the legal definition for or attempted rape in 1987 (Koss, Gidycz, & Wisniewski, 1987). Early research regarding campus sexual assault tries to capture the rates of victimization on campus but given the various types, time frames, and estimates among a sample of college women with incident rates ranging between 9.5 to 66.4 per 1,000 female students, it is apparent that understanding the magnitude through the years has been difficult (Fisher et al., 2000). The most recent research suggests a similar and steady rate of victimization, reporting college-aged 20-23% women and 5% of men report sexual assault during their undergraduate years, with an overall prevalence rate of 11.7 for all students (Cantor et al. 2015; Fisher, Cullen, & Turner, 2000), and between college dating couples, 15%–20% report sexual aggression each year (Bell & Naugle, 2007). There exists minimal research on the rates of perpetration in comparison to the rates of victimization, but M. P. Thompson, Swartout, and Koss (2013) found that out of 795 college men, 30% of participants indicated being in a situation where they considered themselves sexually aggressive at least once.

Though there is difficulty in capturing the actual rates of victimization and perpetration, there has been no confusion that generally, around 20-25% of college-aged women experience sexual assault at least once during their years studying (Fisher & Cullen, 1998; Fisher, Cullen, & Turner, 2000; Fisher et al., 1998; Koss, Gidycz, & Wisniewski, 1987). There have been known adverse mental health consequences for victims, including but not limited to depression, anxiety, eating disorders, suicidal ideation, post-traumatic stress disorder (Black et al., 2011; Campbell, Dworkin, & Cabral, 2009; Gidycz, Orchowski, King, & Rich, 2008; Kaura &

Lohnman, 2007) as well as physical problems such as physical injury, STD'S, and STI'S, and illness (Campbell, Sefl, & Ahrens, 2003; Fisher, Cullen, & Turner, 2000). It is also recognized that college students who have been sexually assaulted are more likely to engage in risky behaviors, such as drug use, binge drinking, have less academic success and potentially are at greater risk for revictimization (Combs, Jordan, & Smith, 2014; Fisher et al., 2000; Gidycz, Hanson & Layman, 1995; Jordan, Combs, & Smith, 2014).

Colleges and universities have attempted to design educational programs to address this issue, although they have been limited in their success rates. Many intervention programs do not consider the various factors of being a bystander, including the social desirability to do so and perceptions of sexual violence. It is also understood that many bystander-focused programs have been studied within the USA, though the prevalence of sexual assault outside of the USA in places like the UK is similar, at around 1 in 7 reports of college-aged women every year (Labhardt, Holdsworth, Brown, and Howat, D, 2017). As a result, many evaluative studies on educational prevention tend to focus on one aspect of bystander behavior and its relation to bystander behavior, with no agreement on which is the most effective in sexual violence prevention. (Anderson & Whitson, 2005; Karjane et al., 2005). Previous intervention programs were limited to the audience of men (Flores and Hartlaub, 1998). However, as mixed-sex and female audiences were researched, it was still found that intervention programs generally did not affect lowering victimization rates did increase knowledge on sexual assault. (Breitenbecher, 2000).

Bystander intervention then became a pivotal introduction into educational prevention methods and has shown better rates of success for college-aged students' attitudes towards

intervening than previously mentioned programs, seeing as it engages all members of the campus community to intervene rather than whittling it down to either a man or woman's issue (Banyard et al., 2016; Banyard, Plante, & Moynihan, 2004; McMahon, Postmus, & Koenick, 2011; Potter, Moynihan, Stapleton, & Banyard, 2009). Understanding that most third parties are present pre-assault, bystander intervention plays an essential role in putting the responsibility on potential bystanders to prevent potentially devastating outcomes (Banyard et al. 2004; Berkowitz 2002; Foubert 2000; Katz 1995; O'Brien 2001; Schewe 2002). This type of programming benefits includes being aware of a situation in which there is potential for sexual assault (recognizing danger), making a commitment to help during programming, which results in higher rates of self-efficacy, knowing you can help to give a sense of responsibility, and seeing others model the behavior. Bystanders then are aware of the potentially detrimental effects of sexual assault (Bachar & Koss, 2001; Campbell, 2008; Koss, Koss, & Woodruff, 1991; Waigandt, Wallace, Phelps, & Miller, 1990), and likely to consider the benefits of their intervention rather than social status (Banyard et al., 2004). Students agree that sexual violence on campus could be prevented through such programming, though most were not involved in any sexual violence prevention programs (Exner & Cummings, 2011). A meta-analysis provides initial evidence supporting the effectiveness of bystander intervention programs, seeing significant effects were observed regarding self-reported bystander intervention, greater knowledge about sexual assault (Banyard et al., 2007; Moynihan & Banyard, 2008; Potter, 2011) and less rape culture centered attitudes (Katz, Moore 2013; Coker, Cook-Craig, Williams, Fisher, Clear, et al., 2011; Banyard et al., 2007). Virtual simulations of bystander behavior programming finds that the behavior was positively correlated with responsibility, efficacy, and intent to

intervene, as well as self-reported bystander behavior (Jouriles, E. N., Kleinsasser, A., Rosenfield, D., & McDonald, R. (2016). Analysis of literature surrounding bystander intervention programming suggests that bystander intervention education programs do have positive effects on confronting sexual violence (Banyard et al. 2016). Students' reception with the bystander model is generally positive, as it tends to increase their knowledge about sexual violence, change their attitude about sexual assault on campus, and increase their desire to help. (McMahon, Gretchen, Johnson, & McMahon, 2018; Breitenbecher, 2000).

The bystander model has also shown promise towards increasing bystander behavior throughout the campus (Banyard et al. 2004; Berkowitz 2002; Schewe 2002). The programming lifts blame of the gendered language surrounding male aggressors female victimization, and instead, it makes everyone an active hero in the pre-assault process for prevention. (Banyard 2008). Banyard et al. (2004) indicate that bystanders can help create a new sense of community responsibility and norms for intervention, increase their feelings of confidence on what to do, and provide a role guide for an active bystander like. By engaging as allies rather than victims or perpetrators, the students are less defensive and willing to participate in such behaviors (Banyard et al. 2004; Berkowitz 2002). If people can learn to recognize the danger in situations in which others are not safe and at risk for sexual violence, make themselves responsible for intervention and know what to do, then it is the possible prevalence of college campus sexual assault that could be reduced. Several studies on bystander programming have shown that students tend to have an increased willingness and efficacy to intervene and that women specifically were more likely to be active bystanders than men (Banyard, Moynihan, & Plante, 2007; Banyard et al., 2004; Banyard, Ward, et al., 2007; Ahrens, Rich, & Ullman, 2011). In addition, men who are

given programming by sexual violence peer educators report a greater intent to intervene in sexually unsafe situations (Bachar & Koss 2001).

Comprehensive sex education has also been recognized as having a significant and positive influence on the students who learn from it. The benefits include decreased sexual activity, lower rates of teen pregnancy, and a significantly higher rate of students who reported being able to feel comfortable and confident saying no to vaginal penetration (Hall & Hall 2011; Kohler et al. 2007). This is consistent with college-aged students, who report wanting "resistance to traditional programming, a need for holistic sexual health programming, and a desire to have an environment, which normalizes conversations surrounding sex, sexuality, and sexual health" (Hubach et al. 2019). Though universities have more flexibility in their ability to produce Comprehensive-based sex education and intervention modeling, K-12 schools do not. Community and parental opposition remain one of the most significant factors in preventing students from learning holistic-based education, limiting curriculum development to best align with university practices (Scales & Kirby 1983). Understanding what primary-aged students are learning and how it connects to their understanding of sex and consent impacts how well they may receive universities' educational efforts.

METHODS

This review targeted peer-reviewed, research-based publications from 1980-present in the following databases: Sage Journals, JSTOR, and ProQuest Social Science. The publications chosen for review were specific to the effectiveness of various methods in addressing sexual violence in K-12 classrooms. Sexual violence and education are typically relevant in several

areas of study, but only publications from an educational, psychological, and social science perspective were included. Studies examining the medical and legal aspects were not included in this review. For the review, publications from varying geographical regions were included as long as they fit the relevance criteria. Phrases that were eventually chosen to be non-useful in the review included "wholistic sex(ual) education" and "abstinence only sexual health education." The search for publications was implemented by searching phrases identified as the standard language to sexual violence and sex education within the social sciences field. Phase one searches began with broad keywords such as "sexual violence," paired with similarly broad keywords such as "sex education." Phase two searches were built upon the previous ones, including more specific language to identify types of sexual violence and sex education types. They are as listed: abstinence-based sex(ual) education, comprehensive based sex(ual) education, sexual assault, rape, prevention, and intervention. Phase three focused on documenting the number of articles within publication criteria from each search and examining the abstracts of each. Articles with an abstract that contained information useful for this review were then saved and examined further, and eventually filed into separate categories of "final review" or "supplemental material" depending on the relevance. Any article retained in the final review was to be used in the systematic review, while supplemental material was retained for a literature review.

The research conducted was organized into a spreadsheet. One page included the list of search terms and databases. Another page specified how many articles were found under each search term specific to each database, narrowing down to how many were useful. Two final pages finished the spreadsheet by acting as the "final review" file or "supplemental material."

Each article listed was later read and summarized with the purpose, recruitment, measures, methods, and results to quickly verify the proposed research's notable contributions and suggestions. A careful review of each article's themes and research left nine selected for the systematic review.

RESULTS

Two hundred thirty-nine searches were completed during this project's duration across the three databases, rendering 133,518 total articles. After excluding dead links, books, results that had turned up previously by either another database and search term and results that did not match publication criteria, the total number of articles examined was reduced to 4,649. A total of nine articles were selected. Articles excluded focused on medical aspects of sexual violence, the intervention of all violence - non-specific to sexual, broad policy in regards to education, CDC publications on education, CDC publications on violence, articles that exclusively focused on the university level, and articles that only examined non-violent consequences of specific types of sex education.

The nine articles included in this review focused on specific connections between sexual violence and sex education in the K-12 learning environment. These articles included children in intervention-intensive programming for sexual violence, abstinence-based classrooms, and comprehensive-based classrooms and educators and community organizations. While most of the studies took place in American schools, a few were conducted in England school settings. Data collection between all the studies varied from in-person interviews, experimental programming, and meta-analysis. The sample sizes ranged from 0 human subjects to 940. Detailing the studies by content and common themes found:

- Three studies worked with students and examined students' ability to identify potentially violent scenarios and safe intervention methods after comprehensive programming.
- Three studies conducted a meta-analysis seeking to understand the effectiveness of comprehensive sexuality in reducing sexual violence. All found that while a comprehensive approach is the most effective in addressing and reducing instances of sexual violence, there are serious limitations to widespread implementation.
- Three focused on the limitations of addressing sexual violence in the classrooms. Of that, two examined the lack of evaluation and difficulty moving away from traditional programming. One offered a solution - a community-based approach with community organizations but focused on the lack of communication between such agencies and the schools.
- Two studies evaluated students' response to comprehensive based education.
- All studies had a theme of denouncing abstinence-based programming's effectiveness in addressing sexual health and violence.

DISCUSSION

The systematic review found consistent themes surrounding addressing sexual violence in the classroom is not effective through abstinence-based education. Abstinence based education often leaves students with incorrect information about sex, contraception, and healthy boundaries with sexuality. It often flirts with coercion boundaries, teaching young girls, specifically their bodies are something to be earned, and boys push the boundaries until they have obtained it. This dynamic raises a question of power and control inherent in abstinence education, as it takes away self-control, and instead imposes one's body on a religious-based promise. Rape and other forms

of sexual violence are then less likely to be perceived as such but instead as lapses of judgment and insult to spiritual judgment. (Fahs, 2010).

Banyard, Hubach, and P de Lijster focused on experimental trials of comprehensive based education as an alternative to abstinence-based education. All three studies find one similar theme: students are responsive to comprehensive education regarding sexual violence, as it raises their intent to intervene, knowledge on safe intervention methods, sexual confidence, and understanding of healthy boundaries to prevent instances of harassment, coercion, and violence.

Schneider & Hirsch, and Reppuci & Herman both examine the potential in comprehensive education from a literary perspective. While Reppuci & Herman do not find specific evidence that sexuality education decreases instances specific to child sex abuse, they find that comprehensive programs are useful in decreasing sexual violence under specific evaluative guidelines. Many schools cannot implement such programs with appropriate evaluations, resulting in a lack of widespread shifts towards comprehensive education despite evidence in its favor.

The ability to implement such programs stem from a wide range of areas, including parental opposition, the unwavering tradition of abstinence, and a lack of agreement on how to implement the programming. Comprehensive based sex education programs can be taught one of three ways:

- Through peers
- Through the instructor
- Through a third party - such as a community organization

Lack of evaluation on comprehensive programs itself points towards a lack of evaluation of its methods. It is difficult for community-based organizations to consistently be involved in students' sex education due to a lack of communication from schools and the uniformity of programs compared to students' diversity. For teachers, parental opposition remains one of the most significant factors in their inability to teach comprehensive education and the blurred lines between understanding promoting normal adolescent behavior, yet helping them understand where to draw the lines in the sand (Lemke & Rogers, 2020). Still, regardless of instruction methods, comprehensive education consistently shows to be more effective than any form of abstinence education in regards to understanding sexual violence and intervention in the K-12 classroom (Hall & Hall 2011; Kohler et al. 2007).

LIMITATIONS AND CONCLUSIONS

This review lacks a thorough evaluation of sexual violence rates in comparison to education, only implications. While experimental studies were conducted, several studies concluded a limited disciplinary review approach, excluding the medical community's perspectives, parents, legal disciplinary, and criminal justice. The mixed methods and approaches pose limitations surrounding the accuracy of the synthesis of information and conclusions drawn by this review.

Comprehensive based education has consistently shown to be the most effective option in helping adolescents understand safe and healthy sexual interactions. It teaches self-control and exploring sexuality, allowing K-12 students to be sexually confident in their decisions and reduce coercion and lack of power with their bodies. Comprehensive education gives students

knowledge on approaching potentially unsafe situations, developing intervention ideas, and knowing when to spot situations that could be harmful. Unfortunately, abstinence-based programming has been the traditional method of sex education for K-12 students for decades. Widespread implementation of comprehensive-based education seems far fetched, under the community's circumstances and inner program challenges, despite its success. Though comprehensive based education is best in addressing sexual violence in K-12 classrooms, many classrooms are resistant to such programming and use traditional education, resulting in a severe lack of effectiveness and understanding against sexual violence by the time the student graduates.

References

- Bachar, K., & Koss, M.P. (2001). From prevalence to prevention: Closing the gap between what we know about rape and what we do. In C. Renzetti, J. Edleson, and R.K. Bergen (Eds.), *Sourcebook on Violence Against Women* (pp. 117-142). Thousand Oaks: Sage Publications.
- Banyard, V., Plante, E., & Moynihan, M. (2004). Bystander education: Bringing a broader community perspective to sexual violence prevention. *Journal of Community Psychology*, 32(1), 61-79. <https://doi.org/10.1002/jcop.10078>
- Berkowitz, A. (2002). Fostering men's responsibility for preventing sexual assault. *American Psychological Association*. <https://doi.org/10.1037/10455-007>
- Breitenbecher, K. H., & Scarce. (2001). An Evaluation of the Effectiveness of a Sexual Assault Education Program Focusing on Psychological Barriers to Resistance. *Journal of Interpersonal Violence*, 16(5), 387-407. <https://doi.org/10.1177/088626001016005001>
- Burn, S. (2009). A situational model of sexual assault prevention through bystander intervention. *Sex Roles*, 60, 779-792. <https://doi-org.ezproxy.gvsu.edu/10.1007/s11199-008-9581-5>
- Campbell, R., Dworkin, E., & Cabral, G. (2009). An ecological model of the impact of sexual assault on women's mental health. *TRAUMA, VIOLENCE, & ABUSE*, 10(3), 225-246. <https://doi.org/10.1177/1524838009334456>
- Campbell, R., Sefl, T., & Ahrens, C. (2003). The physical health consequences of rape: Accessing survivors somatic symptoms in a racially diverse population. *Women's Studies Quarterly*, 31, 90-104.

- Claussen, C., Wells, L., Exner-Cortens, D., Abboud, R., & Turner, A. (2016). The role of community-based organizations in school-based violence prevention programming: An action research project. *Cogent Social Sciences*, 2(1).
<https://doi.org/10.1080/23311886.2016.1238609>
- de Lijster, G. P. A., Felten, H., Kok, G., & Kocken, P. L. (2016). Effects of an interactive school-based program for preventing adolescent sexual harassment: A cluster-Randomized controlled evaluation study. *Journal of Youth and Adolescence*, 45(5), 874-886. <https://doi.org/10.1007/s10964-016-0471-9>
- Exner, D., & Cummings, N. (2011). Implications for sexual assault prevention: College students as prosocial bystanders. *Journal of American College Health*, 59(7), 655-657.
<https://doi.org/10.1080/07448481.2010.515633>
- Fahs, B. (2010). Daddy's little girls: On the perils of chastity clubs, purity balls, and ritualized abstinence. *Frontiers: A Journal of Women's Studies*, 31(3).
- Foubert, J. D. (2000). The longitudinal effects of a rape-prevention program on fraternity men's attitudes, behavioral intent, and behavior. *Journal of American College Health*, 48(4), 158. doi:<http://dx.doi.org.ezproxy.gvsu.edu/10.1080/07448480009595691>
- Gidycz, C., Hanson, K., & Layman, M. (1995). A prospective analysis of the relationships among sexual assault experiences. *Psychology of Women Quarterly*, 19(1), 5-29.
<https://doi.org/10.1111/j.1471-6402.1995.tb00276>
- Gidycz, C. A., Orchowski, L. M., King, C. R., & Rich, C. L. (2008). Sexual victimization and health-risk behaviors: A prospective analysis of college women. *Journal of Interpersonal Violence*, 23(6), 744-763. <https://doi.org/10.1177/0886260507313944>

Hall, K., & Hall, D. (2011). Abstinence-Only Education and Teen Pregnancy Rates: Why We Need Comprehensive Sex Education in the U.S. *PLoS ONE*.

<https://doi.org/10.1371/journal.pone.0024658>

Hubach, R., Story, C., & Currin, J. (2019). "What should sex look like?" Students' desires for expanding university sexual assault prevention programs to include comprehensive sex education. *Qualitative Health Research*, 29(13), 1967-1977.

<https://doi.org/10.1177/1049732319844502>

Jordan, C., Combs, J., & Smith, G. (2014). An exploration of sexual victimization and academic performance among college women. *Trauma, Violence, & Abuse*, 15(3), 191-200.

<https://doi.org/10.1177/1524838014520637>

Katz, J. (1995). Reconstructing masculinity in the locker room: The mentors in violence prevention project. *Harvard Educational Review*, 65(2), 163-174.

Kaura, S. A., & Lohman, B. J. (2007). Dating violence victimization, relationship satisfaction, mental health problems, and acceptability of violence, a comparison of men and women.

Journal of Family Violence, 22, 367-381. <https://doi.org/10.1007/s10896-007-9092-0>

Kohler, P., Manhart, L., & Lafferty, W. (2008). Abstinence-Only and Comprehensive Sex Education and the Initiation of Sexual Activity and Teen Pregnancy. *Journal of Adolescent Health*, 42(4), 344-351. <https://doi.org/10.1016/j.jadohealth.2007.08.026>

Koss, M. P., Gidycz, C. A., & Wisniewski, N. (1987). The scope of rape: Incidence and prevalence of sexual aggression and victimization in a national sample of higher education students. *Journal of Consulting and Clinical Psychology*, 55(2), 162-170.

<https://doi.org/10.1037/0022-006X.55.2.162>

Lee, K., Edwards, K., Banyard, V., Eckstein, R., & Sessarego, S. (2019). Youth strategies for positive bystander action in situations of dating and sexual violence: Implications for measurement and programming. *Journal of Interpersonal Violence*.

Lemke, M., & Rogers, K. (2020). When sexting crosses the line: Educator responsibilities in the support of prosocial adolescent behavior and the prevention of violence. *Social Sciences*, 9(9), 150. <https://doi.org/10.3390/socsci9090150>

National Center for Injury Prevention and Control Centers for Disease Control and Prevention. (2011, November). *The national intimate partner and sexual violence survey* (M. C. Black, K. C. Basile, M. J. Breiding, S. G. Smith, M. L. Waters, M. T. Merrick, . . . M. R. Stevens, Authors). https://www.cdc.gov/violenceprevention/pdf/nisvs_report2010-a.pdf

Reppucci, N. D., & Herman, J. (1991). Sexuality education and child sexual abuse prevention programs in the schools. *Review of Research in Education*, 17, 127. <https://doi.org/10.2307/1167331>

Santelli, J., Grilo, S., Choo, T.-H., Diaz, G., Walsh, K., & Wall, M. (2018). Does sex education before college protect students from sexual assault in college? *PLoS ONE*, 13(11).

Scales, P., & Kirby, D. (1983). Perceived Barriers to Sex Education: A Survey of Professionals. *The Journal of Sex Research*, 19(4), 309-326. Retrieved May 15, 2020, from www.jstor.org/stable/3812057

Schneider, M., & Hirsch, J. S. (2018). Comprehensive sexuality education as a primary prevention strategy for sexual violence perpetration. *Trauma, Violence, & Abuse*, 21(3), 439-455. <https://doi.org/10.1177/1524838018772855>

U.S Department of Justice Office of Justice Programs. (2000, December). *The sexual victimization of college women* (B. S. Fisher, F. T. Cullen, & M. G. Turner, Authors).
<https://www.ncjrs.gov/pdffiles1/nij/182369.pdf>