Risk Factors for College Sexual Victimization: The Central Role of Women’s Heavy Episodic Drinking

Maria Testa
College Sexual Victimization

- Highly prevalent – 20% SV and 10% rape since starting college (Conley et al 2017; Krebs et al 2007; Mellins et al 2017)

- Half of college SV events involve alcohol (Abbey 2002) and most rapes result from Incapacitation not Force (Krebs et al 2009, Mohler-Kuo et al 2003)

- Range of negative consequences – depression, PTSD, academic failure, STI, injury, increased drinking
Definition of SV

- Sexual Victimization includes range from contact, coercion, attempted rape, rape (e.g., SES, Koss et al 2007)

- Rape or attempted rape - penetration or oral sex using force or incapacitation

- *Incapacitated rape – victim unconscious, unable to consent or resist – force not necessary
  - Alcohol, drugs, mental incapacitation
  - Drug or alcohol may be admin by perpetrator
Sexual Victimization is hard to predict!

- SV is not something you do, but something that happens to you
- The victim doesn’t cause it to happen – the perpetrator causes the event to happen
- But some victim behaviors and characteristics increase risk of being victimized
Understanding Risk Factors:
Routine Activities Theory

- Motivated offender
- Attractive (i.e., vulnerable) target
- Lack of guardians (e.g., isolated setting)

- Victimization more likely with increased exposure via lifestyle activities
- In no way are victims responsible!
Major Risk Factors: Demographics

- College women are vulnerable to SV by virtue of being young women
- Non-college ≥ college (Sinozich & Langton 2014)
  - Among college, freshmen are higher risk
Major Risk Factors

- Prior victimization
- Risk perception/responses
- Sexual Assertiveness
- Alcohol**
- Consensual Sex Partners/Hookups
Prior Victimization

- Pre-college SV/IR predicts college SV/IR
  - women not previously victimized are also at risk in college (Carey et al 2015)

- Partially reflects continuation – or even increased risky behaviors - HED, hookups, lower sexual assertiveness (Kelley et al 2016; Testa et al 2010)

- Can’t explain all of the effect
Revictimization Effects Partially Mediated via Risky Alcohol and Sex Behaviors

HS SV $\rightarrow$ HS risk $\rightarrow$ college $\rightarrow$ college SV

behavior risk behavior

Testa et al 2010 JCCP
Risk Recognition & Response to Risk

- Experimental analog studies – recognize risk cues, indicate when to leave
  - Deficits in responses more strongly associated with victimization than recognition (Gidycz et al 2006)
  - Victimized women impaired responses - waiting longer to leave dangerous situation predicts later victimization (Messman-Moore & Brown 2006)
Sexual Assertiveness


- Victimization also predicts lower assertiveness – reciprocal effect (Livingston et al 2007)
  - SV > lower assertiveness > SV
Alcohol

- HED associated cross-sectionally and prospectively with SV, particularly with alcohol-involved SV and IR

- Half of all SV and majority of rapes include alcohol (IR)

- Drinking at the daily level associated with increased odds of SV later that day – 19x!

  (Parks et al 2008; Neal & Fromme 2007; Scaglione et al 2015)
How does HED > SV Risk?

- Incapacitation from alcohol – direct
- Indirect impact due to impaired risk perception/responses
- Association via drinking settings/environments that pose risk for SA independent of drinking quantity
- HED is a marker of risk taking
Incapacitated Rape

- Nonconsensual due to incapacitation of victim - unconscious, unable to object or consent – force not required
- Meets legal definitions
- Most common type of college rape, predicted by HED (Carey et al 2015; Krebs et al., 2007; Mohler-Kuo et al, 2003) — Forcible rape not pred by HED (Krebs et al 2009)
- May involve drugs ("roofies") but much less common
## Forcible vs. Incapacitated Rape

**Testa et al, 2003 JSAD**

<table>
<thead>
<tr>
<th></th>
<th>Forcible rape (n = 65)</th>
<th>Incapacitated rape (n = 48)</th>
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<tbody>
<tr>
<td>After bar/party</td>
<td>16.9%</td>
<td>70.8%</td>
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<tr>
<td>Prior sex with</td>
<td>39.1%</td>
<td>14.6%</td>
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<tr>
<td>perpetrator?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Force used</td>
<td>96.9%</td>
<td>31.3%</td>
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<tr>
<td>Woman’s substance use</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alcohol only</td>
<td>8.5%</td>
<td>62.5%</td>
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<tr>
<td>Drugs only</td>
<td>1.5%</td>
<td>4.2%</td>
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<tr>
<td>Alcohol and drugs</td>
<td>4.6%</td>
<td>33.3%</td>
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<tr>
<td>None</td>
<td>75.4%</td>
<td>0%</td>
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<tr>
<td>Number of drinks</td>
<td>4.00 (3.38)</td>
<td>9.11 (5.26)</td>
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<tr>
<td>Intoxication (1-7)</td>
<td>4.00 (2.10)</td>
<td>6.70 (0.59)</td>
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</tbody>
</table>
How does HED > SV Risk?

- Incapacitation from alcohol – direct
- Indirect impact due to impaired risk perception/responses
- Association via drinking settings/environments that pose risk for SA independent of drinking quantity
Impairment due to Intoxication

- Alcohol at moderate doses (BAC = .08/4-5 drinks) impairs cognition, judgment, risk perception & responses, increases risk taking (Melkonian & Ham 2018)

- Impairment may influence the other risk factors
  - Assertiveness & communication
  - Risk recognition and responses to risky situations
Risk Recognition & Response to Risk: Influence of Alcohol

- Alcohol influences willingness to take risks (Testa et al 2000)
- Impairs ability to recognize risk (Mitchell et al 2016)
- Impairs responses (e.g., increased passive and polite resistance) Norris et al 2006
How does HED > SV Risk?

- Incapacitation from alcohol – direct
- Indirect impact due to impaired risk perception/responses
- Association via drinking settings/environments that pose risk for SA independent of drinking quantity
Drinking Settings

- Sexually charged, sexual advances normalized
- Attract people seeking to hook up – or predatory men
- Intoxicated guardians – may fail to notice but may inhibit more severe aggression

- Women recognize dangers – and seek to mitigate - but still go to parties and bars
Drinking settings

- **Direct risk** – unwanted sexual advances, IR occurring at the party (Graham et al 2014)

- **Indirect** - public drinking settings lead to hookups
  - more dangerous because of isolated, private nature
Sexual Partners/Hookups

- Women with more partners and more hookups more likely to be victimized
  - Greater exposure/odds of encountering SA
  - Might reflect indiv differences in risk-taking
  - Many SV events start out as consensual (Harrington & Leitenberg 1994)
  - Regular/previous/boyfriends/dates perpetrate a lot of SV!
All Sexual Partners pose a risk... including previous/regular/steady partners

<table>
<thead>
<tr>
<th></th>
<th>30 - 44%</th>
<th>7 – 17%</th>
<th>16 – 23%</th>
<th>12 – 21%</th>
<th>12 – 20%</th>
<th>47 – 68%</th>
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<tbody>
<tr>
<td>Girlfriend</td>
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<td>Date</td>
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<td>Friend</td>
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<td>Acquaintance</td>
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<td>Someone I don’t</td>
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<td>know</td>
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<td>Previous intercourse?</td>
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College men, SES

Testa & Cleveland 2017
Hookups are risky – Alcohol makes them more risky

- Hookups common context for SV (Flack et al 2007)
- Hookups with alcohol result in more negative affect, regret (LaBrie et al 2014) – impaired communication? Greater male aggr? (Testa et al 2018)
- Hookups with alcohol more likely to end in rape (Ford 2017)
  - 7,481 college hookups - 2.4% ended in rape
Central Role of Alcohol as a Risk Factor for SV

- Directly implicated in IR
- Drives attendance at social settings that involve exposure to perpetrators, are the nexus for hookups, sexual advances
- Associated with casual sex (Claxton et al 2015)
- At event level, alcohol influences:
  - sexual intimacy, risk perception, assertiveness
  - sexual aggression, odds that hookup ends with unwanted sex
What are Implications for SV Prevention and Risk Reduction?

- Alcohol is heavily involved – at different levels – but is it a ‘cause’ of college SV?
- Intervene with victims? Perpetrators? Environment?
Is it victim-blaming to intervene with women?

- Unethical not to share what we know
  - We advise people to lock doors to avoid theft
- Presume that women more motivated to avoid rape than men are to avoid raping
- Environmental interventions may be particularly appropriate because SV requires perp and setting
Implications for Prevention: Reduce Drinking?

- Reduce women’s HED to reduce IR (Testa & Livingston, 2009) and SV (Farris & Heppner 2014)

- Efficacious alcohol interventions targeting individual
  - Successful in reducing drinking, less so is preventing IR/SV (Carey; Clinton-Sherrod)
  - Not enough reduction in drinking to matter?
  - Risk via sexual or other behaviors not addressed?
Making Drinking Safer?

- **Protective Behavioral Strategies**
  - Drink less (e.g., alternate with non-alcoholic)
  - Monitor safety (Gilmore et al 2016; Sell et al 2016)

- **Bystander Intervention** (Coker et al 2015)

- **Friends** (Group RCT - Kelley-Baker et al)
  - College women report doing this naturally – efficacy? Or just feel safer?
Risk Reduction Efforts while Intoxicated

- Friends and bystanders likely to be drinking, impairing their ability to recognize, monitor and respond
- Other risk reduction efforts – e.g., increasing assertiveness – may also be impaired by alcohol
Environmental Interventions to Reduce Drinking and IR/SV

- Influence whole environment – victims, perps, bystanders, norms
  - Campuses with lower HED, less IR (Mohler-Kuo et al 2003)
  - Campuses with more restrictive alcohol policy lower SV (Stotzer & MacCarney 2016)
  - RCT – drinking decreased on 7 campuses after new alcohol controls (Saltz et al 2010)