

Maastricht University



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## Contents

Executive summary .....	2
Introduction, or: why should we have a sexual safety course for incoming students? .....	3
1. What is Real Consent? .....	4
2. What are the alternatives to RealConsent? .....	4
3. How does RealConsent work for potential survivors, perpetrators, and bystanders?.....	5
4. Doesn't the male/female version imply the presence of only two genders? Are we not excluding students based on male/female students? .....	6
5. Why are there a different number of modules in the male and female version? Does this affect the duration of the program? .....	7
6. How explicit are sexuality and sexual violence discussed in the program? .....	7
7. How are gender diversity and sexual orientation discussed in the program? .....	7
8. Is a course developed in the US applicable to our students? Is it still effective?.....	8
9. How can the program address the diversity of students? Especially since many of our freshmen students will arrive with a diversity of knowledge and skills regarding sexuality and sexual violence prevention?.....	8
10. Can you show examples from the programs? .....	9
References	10
Appendix 1. RealConsent Women's version: learning objectives, module segments, and behavioral outcome	12
Appendix 2. RealConsent Male's version: learning objectives, module segments, and behavioral outcome	16

## Executive summary

- Sexual violence affects students world-wide, including countries such as the Netherlands, and Maastricht University. Implementing sexual violence prevention strategies to protect our students are therefore extremely important to ensure safety and well-being of all members of our community.
- Freshmen students are a cohort that is most at risk for experiencing sexual violence. By giving an effective prevention training to this group, as well as all incoming students, we expect that incidences of sexual violence can be reduced. Additionally, UM sends a strong signal about behavior it will and will not tolerate.
- RealConsent is an evidence-based, RCT evaluated e-learning programme that takes three hours to complete. Instructors are informed when students complete the course. RealConsent presents honest, realistic scenarios via a serial drama and interactive content. Furthermore, it creates an emotional connection with a high level of engagement and allows students to imagine themselves in these situations.
- Research showed that participants who followed the course had greater knowledge of effective consent, were less likely to experience sexual violence, perpetrate sexual violence, greater legal knowledge of sexual violence, more empathy towards rape victims, and endorsed less rape myths (Salazar et al., 2014; Salazar et al., 2019; Salazar et al., 2023).
- The programme is gendered; that is, there is a male and a female version. Students are allowed to pick the gender they feel most comfortable with to complete the programme. There is not yet a version for genderqueer or questioning students; however, this document makes several suggestions as to how genderqueer or questioning students might still make use of the programme, and how UM can support this group.

## Introduction, or: why should we have a sexual safety course for incoming students?

Students at universities world-wide experience sexual violence (Cantor et al., 2020; Barata et al., 2014;), and students in the Netherlands are no exception to this (Driessen & Polet, 2021; Wellum et al., 2021; Wellum et al., 2023). An important cornerstone in a culture of change is giving students access to programs that prevent perpetration or victimization, increase pro-social bystander interventions, including empathy for rape victims, and teach effective consent strategies. To the extent of these authors' knowledge, UM is currently leading in its efforts to demonstrate this culture of change in the Netherlands. Focusing on groups who are most at risk and groups who are most likely to experience the most benefit of a prevention program is another step in this process.

By offering a prevention training to incoming students, we are focusing on a cohort at risk for experiencing sexual violence (Cranney, 2015; Fisher et al., 2000; Kimble et al., 2008). Studies show that freshmen students are more likely to experience sexual assault than students are in later years (Kimble et al., 2008). Several reasons for this have been put forward, including freshmen students' relative vulnerability as new students (Armstrong et al., 2006); their lack of knowledge regarding the specific scripts sexual assaults often follow (Schwartz, 1997); and their lack of experience around alcohol (Gross et al., 2006).

Our considerations when choosing an effective prevention course therefore included:

1. The course should ideally target a range of student participants: *a.* those who were most at risk for becoming victims/survivors, *b.* those who were most at risk for becoming perpetrators, *c.* bystanders, and *d.* any student who wants to learn more about asking for consent and/or sexual violence prevention.
2. The course should be based on a solid foundation of evidence, best practice, and should have gone through some kind of evaluative process that showed that it reduced rape-increasing attitudes, beliefs, or behaviors. The latter consideration is particularly important in the field of sexual violence prevention, where programs that are frequently given at universities have been shown to be ineffective (e.g., consent-based programs – see Beres et al., 2020 for more information), or have had an adverse effect, such as making some groups of participants more likely to perpetrate sexual violence (see for example Bosson et al., 2015; Malamuth et al., 2018; Stephens & George, 2009).
3. The course should dispel common rape myths: for example, that men cannot be victims of sexual assault, that women frequently lie about being assaulted, etc.
4. Experts in the field who created evidence-based prevention courses that were effective should preferably endorse the course.

We argue that a course that meets the above goals would not only benefit freshmen students but *all* incoming students (masters, exchange, etc.).

Additionally, in terms of technical delivery, we wanted the course to be:

- *Practical:* given that the number of students it should be delivered to is estimated around 8000, administration of the program should be relatively easy. It is not effective to train a workforce to deliver an extensive and in-depth sexual violence prevention program for all freshman students.
- *Safe:* students should be able to follow the course in their own environment and at their own pace.
- *Sustainable:* in terms of pricing, deliverable beyond the pilot year.

We believe that the only way UM can feasibly achieve this without an unrealistically large budget is to offer an *online training*. **RealConsent** is an online course that can be completed in three hours by students in front of their laptop, PC, or even on their phone. Instructors are notified when students have completed the program.

## 1. What is Real Consent?

Real consent is an online sexual violence prevention and alcohol combined program that students can follow on their phone, laptop, or PC. It provides evidence-based, inclusive content for students, and has been evaluated by randomized controlled trials with over 1500 students (Salazar et al., 2019; Salazar et al., 2014; Salazar et al., 2023). The information is presented in an engaging way: through a serialized narrative, TV-show style discussions, quizzes, and skits.

RealConsent is targeted at all target groups mentioned above: a. potential victims, b. potential perpetrators, c. potential bystanders, d. interested students, etc. The course is based on theoretical evidence for preventing sexual violence and has been through an evaluation process, which demonstrated that:

- Female students who had experience sexual assault before starting RealConsent were significantly less likely to experience sexual violence after completing the program (Salazar et al., 2023).
- Male students who completed RealConsent were less likely to perpetrate sexual violence, had greater knowledge of effective consent, greater legal knowledge of sexual violence, more empathy towards rape victims, and less rape myths (Salazar et al., 2019).

### *How was RealConsent Developed?*

RealConsent was developed by Dr. Laura Salazar, a behavioral scientist with PhD in community psychology with a 20-year record of developing rigorously tested public health programs. RealConsent is based on proven behavioral change techniques coupled with a social norms approach. While it integrates the knowledge and opinions from multiple experts from public health, social services, web design and marketing, the program content has been validated with students. It integrates multiple experts from public health, social services, web design and marketing

### *What are the program's learning objectives?*

By the end of the program, participants have:

- Increased knowledge of informed consent to have sex.
- Increased knowledge of the legal definitions of assault/rape.
- Increased empathy for rape victims.
- Decreased hostility towards women.
- Decreased normative beliefs regarding sexual violence towards women.

### *What makes RealConsent different to other programs?*

RealConsent speaks to students in real language. It presents honest, realistic scenarios via a serial drama and interactive content. Furthermore, it creates an emotional connection with a high level of engagement and allows students to imagine themselves in these situations. Finally, it integrates alcohol education. This is important, as up to 70% of sexual violence assaults at Maastricht University apparently involved alcohol use, either by the victim/survivor, the perpetrator, or both (Wellum et al., 2021).

## 2. What are the alternatives to RealConsent?

First it is important to note that currently there are only three online programs that claim to tackle sexual violence prevention for all students at a scale we require. One program did not respond; however, inquiries showed that it was not based on evidence and experience with the programme was mixed.

One course we piloted was ConsentMatters, an online course offered by Epigeum. During the pilot, it became clear that this course was neither based on evidence nor had it been effectively evaluated. Experts in the field of sexual

violence prevention had apparently also not been involved at any step of the course creation; at least, none who had consented to be listed as part of the expert panels consulted for the course in the appendix.

We find this approach extremely problematic. We also believe that the lack of scientific grounding also made the course less enjoyable: none of our staff or students reported any benefit in terms of knowledge or enjoyment when participating in it. For example, asking participants to reflect on headlines of newspaper articles on sexual violence is not as effective as e.g. unpacking underlying environmental factors that make sexual violence more likely.

Finally, it is also important to note that a course focusing on consent will be ineffective in preventing sexual violence. Asking for consent plays a minor role in preventing sexual violence, and to offer a course on consent as the main training for freshman students will not be effective as other prevention programs (e.g. Beres, 2020). For all of these reasons, we decided to not choose Epigeum's ConsentMatters course.

However, experts in the field of support for sexual violence victims/survivors *had* been involved in Epigeum's How To Respond Effectively To Disclosure Course. Staff at UM who had been involved in sexual violence prevention or support found it to be effective, which is why UM has chosen to provide this course as a CPD activity for its staff.

### 3. How does RealConsent work for potential survivors, perpetrators, and bystanders?

#### *Bystanders*

One of the goals of RealConsent is to help students become effective bystanders who recognize the warning signs of sexual violence, and feel both confident and empowered to help the victim/survivor in a safe way. A large component of RealConsent focuses on effective and safe bystander interventions, and evaluations of the program show that significantly more pro-social intervening behaviors to stop violence were reported among participants who followed the program.

Both versions of the course (male/female) include a significant bystander component. For example, the female version teaches students how to spot ambiguous behavior that may result in sexual violence, and how they can safely intervene to keep their fellow students safe. The male version also does this and, in addition, teaches students how to intervene if their (male) friend or acquaintance is in danger of accidentally hurting someone else (for example, intervening when friend/acquaintance is too drunk to tell whether the other person is able to consent to sex or not).

#### *Victim/Survivors*

In both the male and the female version, survivors/victims are treated with empathy. In order to dispel rape myths, the program repeatedly makes clear that what happened to them was *not* their fault. In order to increase empathy for victims/survivors of all genders, both versions of the course also includes a video of a male survivor talking about how sexual violence affected him, thus also making it clear that men can be affected by sexual violence. The training unpacks environmental factors that make sexual assault more likely, such as increased alcohol consumption, and discusses alternatives.

#### *Perpetrators*

Since most perpetrators of sexual violence are male (see e.g., Fischer et al, 2000; Cantor et al., 2017; Wellum et al. 2021, etc.), the male version of RealConsent spend a lot of time focusing on perpetrator prevention. For example, it discusses the three types of perpetrators: the unintentional perpetrator, the predator, and the opportunistic perpetrator. The training emphasizes that most male students are *not* perpetrators, and that if sexual violence happens, it is probably unintentional. The tone is therefore not one of accusation or inevitability, but rather of

sharing information and skills that are pertinent to students who want to have successful relationships, sexual or otherwise. The male version also dives into issues of consent, how to ask for effective consent, and explores how alcohol plays into this and may affect (lack of) consent. Empathy towards anyone who is victimized is dealt with in a further unit- including empathy towards male victims of sexual violence.

#### *Final comments*

Since only 20% of sexual violence takes place in the presence of bystanders, a comprehensive sexual violence prevention program needs to offer more than just bystander intervention training. RealConsent therefore also increases participants' knowledge of informed consent, legal definitions of sexual violence (we will amend these to the Dutch context), and increases empathy for rape victims. It does this by taking a realistic approach to the gendered nature of sexual violence, which acknowledges that the majority of sexual violence survivors identify as female, and that the majority of sexual violence perpetrators identify as male. This is a trend we also saw within our own UM community.

The lived experiences of young people necessitates a nuanced and individual approach that addresses their real concerns. For example, there are many male-identifying students within our community who are worried about being falsely accused of rape: a common myth on social media, though being falsely accused of rape is less likely than being bitten by a shark. RealConsent addresses this concern in the male-identifying version, but not the female-identifying version, since this is generally not a common concern among female students.

#### 4. Doesn't the male/female version imply the presence of only two genders? Are we not excluding students based on male/female students?

Effective sexual violence prevention programs need to consider the underlying factors that, in certain circumstances, make people more likely to perpetrate or become victims. A gendered approach is essential to this and has been most successful in reducing sexual violence. Within the primary sexual violence prevention field, it is in fact recognized as non-negotiable and essential if one wants to reduce the number of sexual violence incidences.

In RealConsent, students can choose whether they want to follow the male or the female version. This means that trans students, non-binary students or questioning students will be able to follow the version that fits them best. We understand that this is still not ideal for non-binary students and of course, we want to offer a sexual violence reduction program that addresses non-binary, genderqueer or questioning individuals.

Unfortunately, effective sexual violence prevention programs have only been developed for the past ten years, and currently no such programs exist. This means that also in the Netherlands there are zero (scientifically proven) programs for non-binary or queer students. Yet the problem of sexual violence at UM is so large that we cannot in good conscience wait until we have programs for all our students.



We are going to address the issue of choosing a program in the following way:

- By being transparent about the strengths and weaknesses of the program (including the fact that there currently it not a non-binary version, but that the researchers are looking for funding to develop this),
- By suggesting that non-binary students pick the version they have been socialized in,
- By giving additional support to non-binary students.

In our pilot group, one of our students identified as non-binary, but lived as female most of their life and therefore was also socialized as such. They followed both the male and female programs, and while they found the male program very interesting, aspects of the female version of the program addressed their concerns more strongly.

## 5. Why are there a different number of modules in the male and female version? Does this affect the duration of the program?

While male-identifying individuals follow six modules and female-identifying individuals follow four modules, the total amount of time spent on each program is the same. Each of the modules in the male-identifying version 30 minutes long; each module in the female group takes about 45 minutes. Each version therefore takes about three hours to complete. The number of units relates how easy it was to break the respective topics into more or less segments; we have no say about this. The respective titles were meant to be engaging and reflective of how society often thinks that people of a certain gender should behave.

 <p><b>Female Program</b></p> <p>Engaging, interactive learning in four modules that include:</p> <ul style="list-style-type: none"> <li>◦ Think Before You Drink</li> <li>◦ Let's Get Consensual</li> <li>◦ Can We Just Talk</li> <li>◦ Circle of Defense</li> </ul>	 <p><b>Male Program</b></p> <p>Engaging, interactive learning in six modules that include:</p> <ul style="list-style-type: none"> <li>◦ Listening—Try it Sometime</li> <li>◦ Get Consent or Go Home</li> <li>◦ Man Up</li> <li>◦ Conversation with Benefits</li> <li>◦ Think Before You Drink</li> <li>◦ You've Got This</li> </ul>
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## 6. How explicit are sexuality and sexual violence discussed in the program?

RealConsent is a sexual violence prevention program and not a sex education program. Therefore, sexual health is not discussed, although there is a discussion in the serialized episodes about talking to your partner about your sex history and sexual communication. The program is also not graphic in terms of sexual violence: the purpose is to give enough information that informs about the situation. Therefore, sexual violence is talked about but the graphic nature of it is not elaborated on.

## 7. How are gender diversity and sexual orientation discussed in the program?

The program does not explicitly discuss the existence of diverse sexualities: instead, it shows them. The serialized part of the program, where viewers follow the stories of two groups of undergraduate students, includes both trans and non-binary characters without much fanfare. Likewise, same-sex relationships are portrayed as a normal part of the storyline.



## 8. Is a course developed in the US applicable to our students? Is it still effective?

This is a question we asked ourselves when teaching EAAA, a program offered in Canada, the US, Australia, New Zealand, but not yet in Europe. After extensive piloting and discussing this issue with both participants and facilitators (the student-teachers who gave the training), we came to the following conclusions:

First, the risk factors for sexual violence appear to be the same in the US and in the Netherlands (Wellum et al., 2023): gender, alcohol, membership of student association, LGBTQ+ sexual orientation, disability, etc. are all factors that can make an individual more at risk for experiencing sexual violence in our UM community. One can therefore assume that the underlying risk factors are not culturally bound, and that although there are nuances, these do not seem to have a strong impact. Therefore, a US evidence-based program that has shown to reduce sexual violence, or behaviors and attitudes that increase the likelihood that an individual experiences sexual violence, is likely to be effective in the Netherlands.

In order to minimize any cultural differences, RealConsent will be adapted to the Dutch context as much as possible. Therefore, for example, any slides about Dutch law, UM policy, but also components on drinking will be tailored towards our student population.

However, even without changes, the group of students who piloted RealConsent gave feedback that while US culture was clearly present in the program, they did not find it terribly distracting. As one student pointed out, our students are used to seeing US culture in Netflix series, on TikTok, etc., to a much greater degree than previous generations are. We are not introducing them to something unfamiliar.

It would be, in the long run, interesting to have a program produced in the Netherlands and specifically targeted at our student audience. However, in the absence of such a program for now, programs like RealConsent seem to be the best alternative. In a speculative future, we wonder whether Real Consent and other Dutch universities may want to collaborate to produce a 'Dit is nou écht Consent' e-learning.

## 9. How can the program address the diversity of students? Especially since many of our freshmen students will arrive with a diversity of knowledge and skills regarding sexuality and sexual violence prevention?

We do not think it is possible to have a single program that will benefit all students to the same degree. This is also somewhat reflected in the sexual violence prevention literature where it is commonly acknowledged that “one size fits none”.

This is why we are in favor of a longer, more extensive program, rather than a short one: there is time to unpack several issues linking to sexual violence, and to make it interesting for people with more or less understanding of the topics. RealConsent has been made to be interactive, interesting and entertaining, so we anticipate that even students who are more familiar with sexual violence prevention will be interested enough to continue following it.

Here are a few other things we are doing to address diversity among the student population:

- While the spoken language of the program is English, we are adding English and Dutch subtitles so all students can follow the program with more ease.

- In terms of sexual orientation, the program does portray sexual violence between a same-sex couple, but this is not a major storyline. The reason for this is that gender, rather than sexual orientation, is still a larger risk factor for sexual violence. It is possible that in the future more versions of RealConsent can be offered: Dr. Salazar and her team are currently looking for a grant to make the program more relevant for non-binary individuals.

## 10. Can you show examples from the programs?

Here are two links to “Crew” and “Squad” episodes:

- <https://vimeo.com/681046356/cc4d88dc26>
- <https://vimeo.com/304828864/0c294394c0>

These are screenshots from the “Think before you Drink” module for female students

The screenshot shows the Real Consent program interface. At the top, there is a blue header with the 'realconsent' logo and the text 'BEHAVIORAL SCIENCE FROM GLOTTES?'. Below the header, the 'EMORY' logo is visible. The main content area is titled 'Module 1 THINK BEFORE YOU DRINK'. Underneath, there is a section for 'Objectives' with four bullet points:
 

- Increase understanding of how alcohol (and especially heavy alcohol use) is a situational risk factor for sexual assault
- Learn to identify situations that involve alcohol consumption and require help from network members
- Increase understanding of how alcohol alters men and women's behavior and reduces women's perceptions of risk
- Learn how alcohol affects cognitive abilities; learn how alcohol can influence informed consent
- Learn how to identify risky situations for a sexual assault and to identify good decision-making strategies when at a party or bar and how to cope with peer pressure to consume alcohol

 At the bottom of this section are 'PREVIOUS' and 'NEXT' navigation buttons. Below this is another section titled 'THE SQUAD GETS INTO FORMATION' which features a video player showing a young woman in a red shirt. Again, 'PREVIOUS' and 'NEXT' buttons are at the bottom.

The screenshot shows a challenge interface with the Emory logo at the top left. The background is a blurred image of a bar counter with glasses and a pitcher. The text reads:
 

WELCOME TO THE  
"SO SHE THINKS SHE CAN DRINK" CHALLENGE

We've all seen statistics and we've been warned against alcohol since our early teens — now it's time to show what you know.

 At the bottom, there is a blue button that says '4 CATEGORIES | 27 QUESTIONS'.

## References

- Armstrong, E. A., Hamilton, L., & Sweeney, B. (2006). Sexual assault on campus: a multilevel, integrative approach to party rape. *Social Problems, 53*(4), 483–499. <https://doi.org/10.1525/sp.2006.53.4.483>
- Barata, P., Newby-Clark, I., Senn, C., Thurston, W., Eliasziw, M., Hobden, K., & Radtke, H. (2014). Sexual violence in the lives of first-year university women in Canada: no improvements in the 21st century. *Bmc Women's Health, 14*(1), 1–8. <https://doi.org/10.1186/s12905-014-0135-4>
- Beres. (2020). Perspectives of rape-prevention educators on the role of consent in sexual violence prevention. *Sex Education, 20*(2), 227–238. <https://doi.org/10.1080/14681811.2019.1621744>
- Bosson, J. K., Parrott, D. J., Swan, S. C., Kuchynka, S. L., & Schramm, A. T. (2015). A dangerous boomerang: injunctive norms, hostile sexist attitudes, and male-to-female sexual aggression. *Aggressive Behavior, 41*(6), 580–593. <https://doi.org/10.1002/ab.21597>
- Cantor, D., Fisher, B., Chibnall, S., Harps, S., Townsend, R., Thomas, G., Lee, H., Kranz, V., Herbison, R., Madden, K., (2020). Report on the AAU Campus Climate Survey on sexual assault and misconduct. Westat.
- Cranney, S. (2015). The relationship between sexual victimization and year in school in U.S. colleges: investigating the parameters of the “Red Zone.” *Journal of Interpersonal Violence, 30*(17), 3133–3145. <https://doi.org/10.1177/0886260514554425>
- Driessen M., Polet J. (2021). *Studenten over verkrachting [Students' thoughts and experiences of rape]*. [https://www.amnesty.nl/content/uploads/2021/06/AMNESTY\\_IO\\_Rapport-verkrachting-studenten-def.pdf?x28092](https://www.amnesty.nl/content/uploads/2021/06/AMNESTY_IO_Rapport-verkrachting-studenten-def.pdf?x28092)
- Fisher, B., Cullen, F. T., Turner, M. G., & National Institute of Justice (U.S.). (2000). *The sexual victimization of college women* (Ser. Research report). U.S. Department of Justice, Office of Justice Programs, National Institute of Justice. Retrieved September 5, 2023, from [https://books.google.nl/books?hl=en&lr=&id=PLynPFXoKF8C&oi=fnd&pg=PR2&dq=info:-pmjEM--7rsJ:scholar.google.com&ots=9lRmHZZo1M&sig=-RtDEP0iicLtKxF7VRQF9-N4HtQ&redir\\_esc=y#v=onepage&q&f=false](https://books.google.nl/books?hl=en&lr=&id=PLynPFXoKF8C&oi=fnd&pg=PR2&dq=info:-pmjEM--7rsJ:scholar.google.com&ots=9lRmHZZo1M&sig=-RtDEP0iicLtKxF7VRQF9-N4HtQ&redir_esc=y#v=onepage&q&f=false)
- Gross, A. M., Winslett, A., Roberts, M., & Gohm, C. L. (2006). An examination of sexual violence against college women. *Violence against Women, 12*(3), 288–300. <https://doi.org/10.1177/1077801205277358>
- Kimble M., Neacsiu A. D., Flack W. F., Horner J. (2008). Risk of unwanted sex for college women: Evidence for a red zone. *Journal of American College Health, 57*, 331-338.
- Malamuth, N. M., Huppini, M., & Linz, D. (2018). Sexual assault interventions may be doing more harm than good with high-risk males. *Aggression and Violent Behavior, 41*, 20–24. <https://doi.org/10.1016/j.avb.2018.05.010>
- Salazar, L. F., Schipani-McLaughlin, A. M., Sebeh, Y., Nizam, Z., & Hayat, M. (2023). A web-based sexual violence, alcohol misuse, and bystander intervention program for college women (realconsent): randomized controlled trial. *Journal of Medical Internet Research, 25*, 43740. <https://doi.org/10.2196/43740>
- Salazar, L. F., Vivolo-Kantor, A., Hardin, J., & Berkowitz, A. (2014). A web-based sexual violence bystander intervention for male college students: randomized controlled trial. *Journal of Medical Internet Research, 16*(9), 203. <https://doi.org/10.2196/jmir.3426>

- Salazar, L. F., Vivolo-Kantor, A., & Schipani-McLaughlin, A. M. (2019). Theoretical mediators of "realconsent": a web-based sexual violence prevention and bystander education program. *Health Education & Behavior*, 46(1), 79–88.
- Schwartz M. D. (1997). *Sexual assault on the college campus: The role of male peer support* (p. 230). Thousand Oaks, CA: Sage.
- Senn C. Y., Eliasziw M., Barata P. C., Thurston W. E., Newby-Clark I. R., Radtke H. L., Hobden K. L. (2015). Efficacy of a sexual assault resistance program for university women. *New England Journal of Medicine*, 372(24), 2326-2335. <https://doi.org/10.1056/NEJMsa1411131>
- Senn C. Y., Eliasziw M., Hobden K. L., Barata P. C., Radtke H. L., Thurston W. E., Newby-Clark I. R. (2021). Testing a model of how a sexual assault resistance education program for women reduces sexual assaults. *Psychology of Women Quarterly*, 45(1), 20-36. <https://doi.org/10.1177/0361684320962561>
- Stephens, K. A., & George, W. H. (2009). Rape prevention with college men: evaluating risk status. *Journal of Interpersonal Violence*, 24(6), 996–1013. <https://doi.org/10.1177/0886260508319366>
- Wellum, A., Lange, G., Adams, E., & Hurks, P. (2021). *Sexual Violence and Sexual Harassment among Maastricht University Students*. Maastricht University report. Retrieved September 5, from <https://www.maastrichtuniversity.nl/file/um-report-sexual-violence-and-sexual-harassmentwebpdf>
- Wellum, A., Ramaekers, R., Schepers, J., Welie, J. V. M., Lange, G., & Hurks, P. P. M. (2023). Prevalence rate and risk factors of sexual assault among university students in the Netherlands. *Journal of Interpersonal Violence*. <https://doi.org/10.1177/08862605231192849>

## Appendix 1. RealConsent Women’s version: learning objectives, module segments, and behavioral outcome

***RealConsent Women’s Version: Modules Organizational Matrix***

Modules*	Learning Objectives	Module Segments	Behavior Change Techniques	Theoretical Mediators	Behavioral Outcome
Think Before You Drink	<ul style="list-style-type: none"> <li>• Increase understanding of how alcohol (and especially heavy alcohol use) is a situational risk factor for sexual assault</li> <li>• Learn to identify situations that involve alcohol consumption and require help from network members</li> <li>• Increase understanding of how alcohol alters men and women’s behavior and reduces women’s perceptions of risk</li> <li>• Learn how alcohol affects cognitive abilities; learn how alcohol can influence informed consent</li> <li>• Learn how to identify risky situations for a sexual assault and to identify good decision-making strategies when at a party or bar and how to cope with peer pressure to consume alcohol</li> </ul>	<p>Module Content:</p> <ol style="list-style-type: none"> <li>1. Bossy Pants Intro to program (before the module starts)</li> <li>2. Learning Objectives</li> <li>3. Real Truths with Wanda pt. 1</li> <li>4. Squad episode 1</li> <li>5. Bossy Pants</li> <li>6. So She Thinks She Can Drink quizzes (split into 3 quizzes)</li> <li>7. A Day in the Life (alcohol abuse)</li> <li>8. Squad episode 2</li> <li>9. Talking Squad</li> <li>10. Real Truths with Wanda pt. 2</li> <li>11. Risky Business #tragic (alcohol still images – commercial)</li> <li>12. In or Out of Control</li> <li>13. Going Out 101</li> </ol>	<ul style="list-style-type: none"> <li>• Provide information on the link between behavior and health (#1)</li> <li>• Provide information on consequences (#2)</li> <li>• Provide general encouragement (#6)</li> <li>• Provide instruction (#8)</li> <li>• Model or demonstrate a behavior (#9)</li> <li>• Provide feedback on performance (#13) – quiz?</li> <li>• Teach to use prompts or cues (#15)</li> <li>• Provide opportunities for social comparison (#19)</li> </ul>	<ul style="list-style-type: none"> <li>• Knowledge on role of alcohol use in victimization and self-defense</li> <li>• Personal and social outcome expectancies for alcohol consumption</li> <li>• Self-efficacy related to decreased alcohol use in risky contexts</li> <li>• Social learning of responsible alcohol use</li> </ul>	<ul style="list-style-type: none"> <li>• Decrease alcohol use in risky contexts</li> </ul>

		14. In case you missed it			
Let's Get Consensual	<ul style="list-style-type: none"> <li>• Increase knowledge of effective consent – fully conscious, equal ability to act, sincere, clearly communicated</li> <li>• Increase knowledge of the risk factors for rape and sexual assault victimization</li> <li>• Understand the negative consequences of rape and sexual assault upon both women and men</li> <li>• Debunk rape myths and enhance understanding of contributors to rape and sexual assault</li> <li>• Increase knowledge of national and local statistics and information on rape and sexual assault</li> <li>• Increase empathy for rape victims</li> </ul>	<p>Module Content:</p> <ol style="list-style-type: none"> <li>1. Learning Objectives</li> <li>2. Break it down part 1: Sexual violence</li> <li>3. Real Truths with Wanda: Defining Consent/Sexual consent</li> <li>4. Squad episode 3: The Aftermath</li> <li>5. A wake-up call</li> <li>6. Health Educators: 4 elements of consent</li> <li>7. Rape Mythbusters</li> <li>8. Squad episode 4: Getting Back into the Groove</li> <li>9. Talking Squad</li> <li>10. It's not always what you expect transition segment</li> <li>11. Rape is For Real: Rape testimonial and male rape story from male version</li> <li>12. Real Truths with Wanda: reporting sexual assault</li> <li>13. In case you missed it</li> </ol>	<ul style="list-style-type: none"> <li>• Provide information on the link between behavior and health (#1)</li> <li>• Provide information on consequences (#2)</li> <li>• Prompt intention formation (#4)</li> <li>• Prompt barrier identification (#5)</li> <li>• Provide general encouragement (#6)</li> <li>• Provide instruction (#8)</li> <li>• Model or demonstrate behavior (#9)</li> <li>• Provide feedback on performance (#13) – quiz?</li> <li>• Teach to use prompts or cues (#15)</li> <li>• Plan social support/social change (#20)</li> <li>• Prompt identification as a role model (#21)</li> <li>• Relapse prevention (#23)</li> <li>• Stress management (#24)</li> </ul>	<ul style="list-style-type: none"> <li>• Knowledge of informed consent</li> <li>• Outcome expectancies of engaging in risky dating behaviors</li> <li>• Positive outcome expectancies for protective dating behaviors</li> <li>• Social learning of communication about sex</li> <li>• Knowledge about assertive communication</li> <li>• Self-efficacy to communicate assertively</li> <li>• Self-efficacy to communicate sexual consent</li> </ul>	<ul style="list-style-type: none"> <li>• Increase communication about sexual consent</li> </ul>
Can We Just Talk?	<ul style="list-style-type: none"> <li>• Identify barriers to effective communication with a male partner</li> <li>• Learn strategies for overcoming communication barriers and enhance communication skills</li> </ul>	<p>Module content:</p> <ol style="list-style-type: none"> <li>1. Learning Objectives</li> <li>2. Real Truths with Wanda: points 1-3</li> <li>3. Squad episode 5: Frankie's big decision</li> </ol>	<ul style="list-style-type: none"> <li>• Provide information on the link between behavior and health (#1)</li> <li>• Provide information on consequences (#2)</li> </ul>	<ul style="list-style-type: none"> <li>• Increase knowledge about assertive communication and bystander intervention</li> </ul>	<ul style="list-style-type: none"> <li>• Increase sexual communication</li> </ul>

	<ul style="list-style-type: none"> <li>• Build self-efficacy to engage in communication in general and in situations involving bystander intervention</li> <li>• Emphasize consequences of making good choices surrounding bystander intervention and sexual behavior</li> <li>• Learn assertive communication for intervening and for articulating sexual boundaries, wants, and need</li> </ul>	<ol style="list-style-type: none"> <li>4. Dating 101</li> <li>5. Squad episode 6: The Squad Plus One</li> <li>6. Talking Squad</li> <li>7. Transition segment: “You can always stop”</li> <li>8. Real Truths with Wanda: points 4-5</li> <li>9. Bossy Pants doing responses for interactive quiz titled, “What do you mean?”</li> <li>10. Health educators: #NOTawkward</li> <li>11. In case you missed it</li> </ol>	<ul style="list-style-type: none"> <li>• Prompt intention formation (#4)</li> <li>• Prompt barrier identification (#5)</li> <li>• Provide general encouragement (#6)</li> <li>• Provide instruction (#8)</li> <li>• Model or demonstrate behavior (#9)</li> <li>• Provide feedback on performance (#13) – quiz?</li> <li>• Teach to use prompts or cues (#15)</li> <li>• Plan social support/social change (#20)</li> <li>• Prompt identification as a role model (#21)</li> <li>• Prompt self-talk (#22)</li> </ul>	<ul style="list-style-type: none"> <li>• Social learning of communication about sex</li> <li>• Self-efficacy to communicate about sex</li> </ul>	
Circle of Defense	<ul style="list-style-type: none"> <li>• Identify barriers to creating a supportive network that can be tapped into for help in a risky situation</li> <li>• Learn strategies and techniques to resist unwanted sexual activities and for effective self-defense</li> <li>• Build self-efficacy to engage in resistance strategies and self-defense techniques</li> <li>• Emphasize positive consequences of using Circle of 6</li> </ul>	<p>Module content:</p> <ol style="list-style-type: none"> <li>1. Learning Objectives</li> <li>2. Break It Down: Physical violence and stalking</li> <li>3. Real Truths with Wanda points #1-2</li> <li>4. Health educators: 4 D’s</li> <li>5. Squad episode 7: Girls Night Out 2.0</li> <li>6. Bossy Pants doing introduction to “What Would You Do?”</li> </ol>	<ul style="list-style-type: none"> <li>• Provide information on the link between behavior and health (#1)</li> <li>• Provide information on consequences (#2)</li> <li>• Prompt intention formation (#4)</li> <li>• Prompt barrier identification (#5)</li> <li>• Provide general encouragement (#6)</li> <li>• Provide instruction (#8)</li> </ul>	<ul style="list-style-type: none"> <li>• Knowledge of protective behaviors to prevent SV while going out and self-defense</li> <li>• Self-efficacy to engage in protective behaviors and encouraging friends to do the same</li> <li>• Positive outcome expectancies for self-protective behaviors</li> </ul>	<ul style="list-style-type: none"> <li>• Establish network to prevent sexual violence</li> <li>• Engaging in self-protective behaviors</li> <li>• Encouraging friends to do the same</li> </ul>

	<p>app and encouraging friends to create supportive networks</p>	<ol style="list-style-type: none"> <li>7. Bossy Pants reinforcing positive consequences of intervening</li> <li>8. Squad episode 8: Wonder Women</li> <li>9. Talking Squad</li> <li>10. Health educators: Be the Resistance</li> <li>11. Real Truths with Wanda point #3</li> <li>12. Self-defense tutorial</li> <li>13. Game Plan</li> <li>14. In case you missed it</li> </ol>	<ul style="list-style-type: none"> <li>• Model or demonstrate behavior (#9)</li> <li>• Provide feedback on performance (#13) – quiz?</li> <li>• Teach to use prompts or cues (#15)</li> <li>• Prompt identification as a role model (#21)</li> <li>• Prompt self-talk (#22)</li> </ul>	<p>and encouraging friends to do the same</p>	
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Module content is presented in order of which they appear in the RealConsent program.



## Appendix 2. RealConsent Male’s version: learning objectives, module segments, and behavioral outcome

Modules*	Learning Objectives	Module Segments	Behavior Change Techniques	Theoretical Mediators
1. Get consent or go home	<ul style="list-style-type: none"> <li>• Identify the 4 elements of informed consent</li> <li>• Understand effective consent for sex</li> <li>• Understand the indirect negative social consequences of sexual</li> <li>• Review campus policies toward violence against women (both legal and social consequences)</li> <li>• Review statistics and information on dating violence and sexual assault</li> </ul>	<p>Module Content:</p> <p>14. Intro to EC</p> <p>15. “Break it down”</p> <p>16. Learning Objectives</p> <p>17. Crew Epi#1: The Crew Discusses Douchebag Donald.</p> <p>18. It’s not always who you would expect</p> <p>19. Four elements of consent</p> <p>20. Harmless? Preventable Discomfort</p> <p>21. Betterhenry episode: “The Tea on Getting Consent”</p> <p>22. Informed consent scenarios</p> <p>23. “Don’t be a Dick”</p> <p>24. Surprising reality-what you don’t know (alcohol still images – commercial)</p> <p>25. Crew Ep#1.2 “The Crew Recognizes Rape</p> <p>14. This is what you learned</p>	<ul style="list-style-type: none"> <li>• Provide information on the link between behavior and health (#1)</li> <li>• Provide information on consequences (#2)</li> <li>• Provide general encouragement (#6)</li> <li>• Provide instruction (#8)</li> <li>• Model or demonstrate a behavior (#9)</li> <li>• Provide feedback on performance (#13) – quiz?</li> <li>• Teach to use prompts or cues (#15)</li> <li>• Provide opportunities for social comparison (#19)</li> </ul>	<ul style="list-style-type: none"> <li>• Outcome expectancies for nonconsensual sex;</li> <li>• Knowledge of sexual assault</li> <li>• Knowledge of effective consent</li> <li>• Empathy for rape victims;</li> </ul>

<p>2. Man Up!</p>	<ul style="list-style-type: none"> <li>• Identify and define rape myths</li> <li>• Recognize traditional gender roles are</li> <li>• Understand sex-role stereotypes</li> <li>• Recognize there is never justification for using violence against women</li> <li>• Understand male and female socialization process</li> </ul>	<p>Module Content:</p> <ul style="list-style-type: none"> <li>• Learning Objectives</li> <li>• Crew Ep#2.1: “The Crew gets a lesson in catcalling”</li> <li>• Fact and Fiction</li> <li>• “Who’s the Rapist” game</li> <li>• Ridiculous Reality video</li> <li>• Crew Ep#2.2: “the Crew Deals with their Demons”</li> <li>• This is what you learned</li> </ul>	<ul style="list-style-type: none"> <li>• Provide information on the link between behavior and health (#1)</li> <li>• Provide information on consequences (#2)</li> <li>• Prompt intention formation (#4)</li> <li>• Prompt barrier identification (#5)</li> <li>• Provide general encouragement (#6)</li> <li>• Provide instruction (#8)</li> <li>• Model or demonstrate behavior (#9)</li> <li>• Prompt identification as a role model (#21)</li> </ul>	<ul style="list-style-type: none"> <li>• Empathy for sexual assault victims,</li> <li>• Rape myths,</li> <li>• Outcome expectations for nonconsensual sex</li> <li>• Hyper-male gender ideology;</li> <li>• Hostility toward women;</li> <li>• Communication about sex</li> </ul>
<p>3. Conversation with benefits</p>	<ul style="list-style-type: none"> <li>• Identify barriers to communication with a female partner</li> <li>• Learn strategies for overcoming barriers</li> <li>• Enhance communication skills</li> <li>• Build self-efficacy to engage in communication</li> <li>• Emphasize consequences of making good choices surrounding sexual behavior</li> <li>• Distinguish miscommunication from abuses of power</li> </ul>	<p>Module content:</p> <ul style="list-style-type: none"> <li>• Learning Objectives</li> <li>• Crew Ep#3.1: “The Crew levels up their communication”</li> <li>• BetterHenry: “The Tea on Copulating”</li> <li>• It’s not complicated, just listen..</li> <li>• Simple Truths-another point of view</li> <li>• #NOTawkward</li> <li>• Yes No? Maybe?</li> <li>• Crew EP#3.2: “The Crew “Gets” Consent”</li> </ul>	<ul style="list-style-type: none"> <li>• Provide information on the link between behavior and health (#1)</li> <li>• Provide information on consequences (#2)</li> <li>• Prompt intention formation (#4)</li> <li>• Prompt barrier identification (#5)</li> <li>• Provide general encouragement (#6)</li> <li>• Provide instruction (#8)</li> <li>• Model or demonstrate behavior (#9)</li> </ul>	<ul style="list-style-type: none"> <li>• SE for communication about sex;</li> <li>• misperceptions of cues;</li> <li>• adversarial sexual beliefs;</li> <li>• outcome expectances for nonconsensual sex;</li> <li>• knowledge of informed consent for sex</li> </ul>

		<ul style="list-style-type: none"> <li>This is what you learned</li> </ul>	<ul style="list-style-type: none"> <li>Provide feedback on performance (#13) – quiz?</li> <li>Teach to use prompts or cues (#15)</li> <li>Plan social support/social change (#20)</li> <li>Prompt identification as a role model (#21)</li> <li>Prompt self-talk (#22)</li> </ul>	
4. Think before you Drink	<ul style="list-style-type: none"> <li>Understand how alcohol and other drugs, in particular, club drugs often available at parties, alters men and women’s behavior</li> <li>Recognize the effects of alcohol on the body</li> <li>Identify the effects of alcohol on cognitive abilities such as misperceiving others behavior</li> <li>Recognize that alcohol can negate the informed consent process</li> <li>Recognize how alcohol impairs decision-making processes</li> <li>Understand the gender stereotypes surrounding alcohol</li> <li>Identify decision-making strategies, including handling parties and coping with peer pressure</li> </ul>	<p>Module content:</p> <ul style="list-style-type: none"> <li>Learning Objectives</li> <li>Crew EP#4.1: “The Crew Pulls Out the Protocol”</li> <li>There is no rewind button</li> <li>So he thinks he can drink challenge</li> <li>The law does not consider intent video</li> <li>Betterhenry: “The tea on Immoderate Imbibing”</li> <li>Never too late</li> <li>You own your choices</li> <li>The Real Deal</li> <li>Wasted Informed Consent Meter</li> <li>Everyone isn’t doing it reasons</li> <li>Alcohol poisoning</li> <li>Crew EP#4.2: “The Crew Debriefs the Day After”</li> <li>Drinkin 101</li> <li>This is what you learned</li> </ul>	<ul style="list-style-type: none"> <li>Provide information on the link between behavior and health (#1)</li> <li>Provide information on consequences (#2)</li> <li>Prompt intention formation (#4)</li> <li>Prompt barrier identification (#5)</li> <li>Provide general encouragement (#6)</li> <li>Provide instruction (#8)</li> <li>Model or demonstrate behavior (#9)</li> <li>Provide feedback on performance (#13) – quiz?</li> <li>Teach to use prompts or cues (#15)</li> <li>Prompt identification as a role model (#21)</li> <li>Prompt self-talk (#22)</li> </ul>	<ul style="list-style-type: none"> <li>Communication about sex;</li> <li>Alcohol and informed consent for sex</li> <li>Outcome expectancies from nonconsensual sex;</li> <li>Knowledge of alcohol’s effects on body and judgment;</li> <li>Knowledge of effective consent for sex;</li> </ul>

<p>5. Listening – Try it sometime</p>	<ul style="list-style-type: none"> <li>• Understanding the victim experience of sexual violence</li> <li>• Recognize the elements of sexual coercion</li> <li>• Contrast the reality of sexual assault to the myths</li> <li>• Understand the outcomes of sexual violence</li> </ul>	<p>Module content:</p> <ol style="list-style-type: none"> <li>1. Break it down</li> <li>2. Crew EP#5.1: “The Crew Runs into Emily”</li> <li>3. Freaky Friday video</li> <li>4. Rape myths: fact or fiction</li> <li>5. The Real Deal</li> <li>6. What’s normal?</li> <li>7. Can you imagine?</li> <li>8. Aiding a survivor</li> <li>9. Crew EP#5.2: “The Crew Gets Hit Close to Home”</li> <li>10. This is what you learned</li> </ol>	<ul style="list-style-type: none"> <li>• Provide information on the link between behavior and health (#1)</li> <li>• Provide information on consequences (#2)</li> <li>• Prompt intention formation (#4)</li> <li>• Prompt barrier identification (#5)</li> <li>• Provide general encouragement (#6)</li> <li>• Provide instruction (#8)</li> <li>• Model or demonstrate behavior (#9)</li> </ul>	<ul style="list-style-type: none"> <li>• Outcome expectations for nonconsensual sex</li> <li>• Empathy for victims</li> <li>• Rape myth acceptance</li> <li>• Normative beliefs about sex</li> <li>•</li> </ul>
<p>6. You’ve Got This</p>	<ul style="list-style-type: none"> <li>• Understand how to intervene to stop sexual violence</li> <li>• Understand how to become a social justice ally</li> <li>• Recognize favorable outcomes of safely intervening</li> <li>• Recognize how alcohol alters perceptions and affects ability to notice a SV event</li> <li>• Identify good decision-making strategies that can be used while drinking alcohol</li> <li>• Identify alcohol-related risky situations for a sexual assault</li> <li>• Understand how to create a plan to intervene while drinking alcohol</li> </ul>	<p>Module content:</p> <ol style="list-style-type: none"> <li>1. Crew EP#6.1: “The Crew Steps In”</li> <li>2. Betterhenry: The Tea on Skullduggery”</li> <li>3. The Four D’s</li> <li>4. Why don’t you do something scenarios</li> <li>5. Stepping up and Stepping in</li> <li>6. The Real Deal</li> <li>7. The Drunken 4 D’s</li> <li>8. Be a Hero</li> <li>9. Crew EP#6.2: “The Crew Runs Full Circle”</li> <li>10. This is what you learned</li> </ol>	<ul style="list-style-type: none"> <li>• Provide information on the link between behavior and health (#1)</li> <li>• Provide information on consequences (#2)</li> <li>• Prompt intention formation (#4)</li> <li>• Prompt barrier identification (#5)</li> <li>• Provide general encouragement (#6)</li> <li>• Provide instruction (#8)</li> <li>• Model or demonstrate behavior (#9)</li> </ul>	<ul style="list-style-type: none"> <li>• Hyper-gender ideology</li> <li>• Bystander intervention</li> <li>• Bystander intervention while under the influence</li> <li>• Intentions to intervene</li> <li>• Outcome expectations for intervening</li> <li>• Self-efficacy to intervene</li> </ul>

	<ul style="list-style-type: none"><li>• Understand the favorable outcomes of intervening and the negative outcomes for not taking action</li><li>• Enhance the self-evaluation attached to SV intervention while consuming alcohol or within alcohol contexts</li></ul>			
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