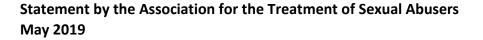
Public policy recommendation:

Addressing campus sexual misconduct





The Association for the Treatment of Sexual Abusers (ATSA) recognizes, supports, and applauds the ongoing dedication and work that many other organizations, entities, and individuals have already achieved to address sexual misconduct¹ on college and university campuses. ATSA's contribution to this effort is a unique perspective due to our focus on the effective assessment, treatment, and management of individuals who have sexually abused or are at risk to abuse. ATSA offers expertise regarding potential responses and interventions for those who have perpetrated sexual misconduct in the campus environment, as well as expertise regarding the risk and protective factors of those who may cause harm. Ultimately, the goal of this work is to prevent sexual misconduct *before* anyone is harmed. It is our hope that the following information and resources contribute meaningfully to a comprehensive and inclusive approach to the prevention of and response to sexual misconduct on college and university campuses.

Introduction

During the past decade, increased awareness and advocacy have focused the public's attention on sexual misconduct on college and university campuses. It is heartening to hear the public discourse and the insistence that something must be done to hold individuals and institutions accountable, as well as provide appropriate services for people who have experienced and committed sexual harm. This unprecedented period of discussion regarding all forms of sexual misconduct calls us to examine campus responses to this behavior and seek opportunities to prevent it in equally unprecedented ways.

Campuses throughout the world face this issue, and different countries have different responses. For example, in the United States, a federal law referred to as Title IX ensures that all students have the right to an education free of sexual harassment, violence, and discrimination. This law also includes the Clery Act, which requires schools to disclose their security procedures, report crime data, and ensure victims' rights are protected. Additionally, the 2013 reauthorization of the Violence Against Women Act included provisions to improve campus safety. These legislative mandates are an example of a framework for responding to and ultimately preventing sexual misconduct on college and university campuses.

¹ The term sexual misconduct encompasses any sexual or sexually motivated behavior that is the result of someone being forced, coerced, or manipulated into witnessing or experiencing sexual harassment, exploitation, or activity for which they did not, or could not, consent.

In Australia, Universities Australia has issued a series of guidelines calling on colleges and universities to improve the way they deal with sexual misconduct on campus. This followed the release of a report by the Australian Human Rights Commission, which found approximately half of students had been sexually harassed in the prior year. Similar results were reported in a study of universities in Great Britain. Canadian universities, facing the same issue, are developing staff training and new reporting and investigatory processes to respond to sexual assaults at the direction of a growing number of provinces.

Advocates worldwide acknowledge that preventing sexual misconduct on college and university campuses requires comprehensive prevention strategies and policies for students, faculty, staff, and institutions. ATSA recommends that effective prevention strategies include providing services to *all* persons impacted by sexual harm – those who have been harmed, those who have caused harm, those at risk to cause harm, and the people connected to these individuals.

Although the ultimate goal is to prevent sexual misconduct *before* anyone is harmed, when sexual abuse or misconduct is perpetrated, it is just as integral to provide relevant and individualized interventions for the individuals who have been harmed as it is for those who committed sexual harm. The Centers for Disease Control and Prevention (CDC) in the United States has argued for the necessary to achieve measurable reductions in the prevalence of sexual violence" (DeGue, Simon, Basile, Yee, Lan, & Spivak, 2012; DeGue, Valle, Holt, Massetti, Matjasko & Tharp, 2014).

To strengthen our ability to respond effectively to campus sexual misconduct, the available knowledge on all aspects of abusive, illegal, or harmful sexual behaviors and prevention should be taken into account. This includes what we know about effective interventions and protective factors for individuals who have committed some form of sexual harassment, assault, or violence.

This paper discusses the need to identify evidence-informed policies and practices that:

- hold individuals who perpetrate sexual assault accountable for their behavior;
- provide safety and support to individuals who have been harmed to facilitate healing;
- provide services for those who have caused harm with the resources necessary to stop their harmful behavior; and
- prevent sexual assault from happening in the first place.

To achieve these goals, this paper discusses what is known (and not known) about individuals who cause sexual harm. This paper also addresses the relationship, community, and societal factors that contribute, rather than inhibit, these behaviors (McMahon, 2000; Letourneau, Eaton, Bass, Berlin, & Moore, 2014; Shields & Feder, 2016; Tabachnick, 2013), with an emphasis on how to prevent sexual misconduct in the first place.

Perpetration Perspective

Studies over the past sixty years have provided varied results on the incidence and prevalence of sexual misconduct, with most focusing on victimization by rape and sexual assault. Most studies have focused on asking women about their experiences of victimization – specifically of being raped or sexually assaulted. Although there have been a range of responses, it is generally accepted that an estimated 20% of undergraduate women have experienced rape or sexual assault since entering college (Koss Gidycz, & Wisniewski, 1987; Krebs, Lindquist, Berzofsky, Shook-Sa & Peterson, 2016; Krebs, Lindquist, Warner, Fisher & Martin, 2007; White House Task Force, 2014). There is also a growing recognition that undergraduate men also experience sexual assault after entering college. While there are fewer studies of this population, research indicates that 6.1% of college males experienced some form of sexual assault while in college (Krebs, et.al., 2007).

If campuses want to focus their prevention efforts on stopping sexual misconduct before anyone is harmed, then a closer examination of the students who perpetrate these behaviors is warranted. Although there is some controversy about how the questions are asked, how rape, sexual assault, and sexual misconduct are defined, and how reliable the results may be, some initial information may help inform what we know, and what we do not know, about the perpetration of sexual misconduct on campus.

Studies show a range from 6% to 13% as to whether a male student has raped (or attempted rape) (Abbey & McAuslan, 2004; Gobbels, Ward & Willis, 2012; Koss et.al., 1987; Lisak & Miller, 2002; Swartout, Koss, White, Thompson, Abbey & Bellis, 2015; Wheeler, George & Dahl, 2002; White & Smith, 2004). When the question focuses on the broader concept of sexual misconduct, the results range from 19% to 47% (Abbey & McAuslan, 2004; Koss et.al., 1987; Loh, Gidycz, Lobo & Luthra, 2005; Mills & Granoff, 1992; Strang, Peterson, Hill & Heiman, 2013; White & Smith, 2004). Given these research results, it is clear that there is a broad range of sexually inappropriate behaviors, and that there are many individuals who commit some form of sexual misconduct. A better understanding of the prevalence, as well as the differing types of sexual misconduct, offers colleges and universities the ability to develop interventions to prevent sexual harm, as well as more effective responses once harmful behaviors are reported. Colleges and universities have a truly unique opportunity to address, respond to, and ultimately prevent sexually harmful behaviors.

Simply knowing the prevalence and types of sexual misconduct, however, is not enough. As with all forms of sexual harm, the factors associated with campus sexual misconduct are nuanced and complicated. Multiple factors contribute to sexually aggressive behavior (Knight & Sims-Knight, 2011; SOMAPI, 2018), and research has consistently shown that individuals who commit sexual harassment, sexual assault, and sexual violence are a diverse group who engage in sexually abusive behavior at differing frequencies for varying reasons, and present with different levels of risk for future sexually abusive behavior (Breiding, Smith, Basile, Walters, Chen & Merrick, 2011; Hanson, Bourgon, Helmus & Hodgson, 2009; Hanson, Harris, Helmus & Thornton, 2014; Hanson & Morton-Bourgon, 2004; Harris & Hanson, 2004). The empirical literature suggests that these behaviors exist along a continuum, and that sexual harassment and sexual coercion covary with similar variables, including high sexualization and hostile sexuality (Knight, 2018).

Research based on individuals convicted of sexual crimes shows that the factors that support sexually harmful behaviors include, but are not limited to, their history of engaging in sexual misconduct as well as current factors such as attitudes of sexual entitlement, peer norms supportive of sexual aggression, intimacy deficits, sexual preoccupation, hostility toward women or other groups, general lifestyle instability, general antisocial or criminal attitudes, their ability to problem solve and recognize the consequences of their actions, and their level of callousness and proneness to manipulative behavior (Mann, Hanson, & Thornton, 2010).

In contrast, the opposite end of the spectrum of these identified factors has also been shown to *reduce* future risk potential for individuals convicted of sexual crimes. For example, cultivating general lifestyle stability within the community, developing prosocial support networks, and establishment of healthy intimacy skills are examples of factors that have been shown to reduce sexual violence risk potential (Boer, 2013; de Vogel, de Ruiter, Bouman & de Vries Robbe, 2009; de Vries Robbe, Mann, Maruna & Thornton, 2014).

The early stages of emotional maturity typically associated with the developmental level of traditionalage college students is a unique factor that can also be a contributing factor to sexual misconduct. The majority of individuals on a college campus typically fall in the age range of 18-24 and, although the members of this cohort are viewed in the legal system as adults, the persons within this group are emerging adults. It is well documented that the brain continues to develop throughout these years, and that many individuals within this age group are still learning skills to better understand social cues, control impulses, develop problem solving and moral reasoning, and negotiate mature sexual relationships. Added to these risk factors is the fact that college marks the first time many young adults are away from close parental supervision and have relatively easy access to alcohol and other substances. It is well documented that cognitive impairments associated with intoxication include a reduced ability to process complex and conflicting information, an overreliance on immediate salient social cues, and difficulty stopping a line of action once it is initiated (Curtin & Fairchild, 2003; Giancola, 2000; Van Brunt, Murphy & O'Toole, 2015). Emerging research also suggests that individuals who consume pornography more frequently, especially violent pornography, are more likely to hold attitudes conducive to sexual aggression and to engage in these behaviors compared to those who do not consume pornography or do so in moderation (Hald, Malamuth, & Yuen, 2010; Wright, 2015). These realities in and of themselves speak to the potential of programs targeting the prevention of sexual misconduct.

Finally, effectively preventing and responding to the perpetration of sexual misconduct on campus requires the use of a broad, comprehensive public health approach (Letourneau et.al., 2014; McMahon, 2000; Shields & Feder, 2016; Tabachnick, 2013) rather than a single focus on the behaviors of the individuals involved. By considering campus sexual misconduct as a public health issue, colleges and universities can improve their prevention and intervention strategies by incorporating the societal, community, relational, and individual factors that contribute to these behaviors and strengthen the protective factors that can prevent the development of sexually abusive behaviors in the first place.

ATSA's Role

Based on what is known about those who cause sexual harm, ATSA offers recommendations for evidence-based clinical approaches for colleges and universities. The information below is offered as a part of the campus toolbox to build more effective responses and prevention initiatives targeting the perpetration of sexual misconduct and are based on the work of many organizations. The reader is also referred to the resources section of this document for a selection of existing information, programs, and research in various jurisdictions.

Provide Access to Local Expertise on the Perpetration of Sexual Misconduct:

Multidisciplinary collaboration is key to finding solutions to such a complex issue. ATSA encourages professionals tasked with responding to campus sexual assault to connect and consult with local clinicians who have experience working with adolescents and young adults who have engaged in illegal, abusive, or harmful sexual behavior. Many ATSA members are specially trained clinicians who can provide individualized assessment of students who have been suspended before they return to school; identify risk and protective factors to facilitate effective interventions and/or safety plans for the student before they return to school; provide specialized treatment or other interventions for the individual who has caused harm; and provide general education regarding those who cause sexual harm to the campus community as a whole. This local expertise could be integrated into the campus counseling services, the campus SART team, or as advisors to those determining sanctions for students found responsible for sexual misconduct. ATSA is available to provide local recommendations. Referral request forms are available at https://www.atsa.com/referral.

Appropriately Sanction and Provide Treatment to Those Who Cause Harm:

Institutions must hold individuals who perpetrate any form of sexual misconduct accountable for their behaviors in a way that contributes to the prevention of future sexual harm and helps guide those individuals toward more prosocial thoughts and behaviors. However, using a one-size-fits-all approach to those who have caused harm does little to increase campus safety or prevent sexual misconduct. Individualized sanctions based on a professional assessment of risk and protective factors are more effective in addressing the diversity among those who have caused harm and the variety of ways to respond to their individual intervention needs. Through years of accumulating knowledge on the assessment and treatment of adults, adolescents, and children who have engaged in harmful sexual behavior, ATSA and its membership now have tools that can be invaluable in the campus environment.

When a student is found responsible for sexual misconduct, an initial assessment of the student found responsible will help determine the best options for holding them accountable, helping them understand what they did and how to stop, and providing for the safety and protection of the victim and the wider campus community. The response to the student found responsible for sexual misconduct could and should consider, at a minimum, the following variables: the individual's vulnerabilities (e.g., cognitive understanding), their triggers (e.g., sexual entitlement), the factors driving their behavior (e.g., high alcohol usage within their fraternity), and the protective factors surrounding them (e.g., stable relationships) (Rich, 2018). With a deeper insight into how to develop an effective response to the student found responsible for sexual harm, campuses will find they can address sexual harm in a more

comprehensive manner that allows them to support survivors, hold individuals who have caused harm accountable in a more meaningful way, and, by doing so, ensure these persons gain the knowledge and skills they need to safely return to the campus community.

Include a Perpetration Prevention Lens to Prevention Programs:

To truly stop sexual violence *before* anyone is harmed, colleges and universities must look at ways to stop first-time perpetration (primary prevention). If campuses focus exclusively on preventing victimization, then half of the picture is missing. A more effective approach, already being used by some campuses, integrates a perpetration prevention focus into existing campus programs such as education and awareness campaigns for incoming freshman, as well as bystander programs to involve students in prevention. These programs include, for example, developing intervention skills for bystanders who see a situation of concern, as well as addressing how to talk with a friend the next day over concerns about their behavior toward another student the previous evening. ATSA can provide recommendations for local experts who can help colleges incorporate this perspective as they develop a range of primary prevention and response programs.

Summary

The harm caused by sexual misconduct is well documented, including the potential for lifelong physical, emotional, economic, and psychological impact on the victim (National Sexual Violence Resource Center, 2016). More recently, research has shown that the cost of sexual misconduct is much higher than any other crime (Peterson, DeGue, Florence & Lokey, 2016). Hence it makes sense that, traditionally, most of the prevention and response efforts have been rightly focused on protecting the victim and keeping the community safe. However, given the extremely high costs of sexual misconduct, it is now recognized that limiting the focus to victims does not fully address the problem of sexually harmful behavior. Efforts also need to focus on the prevention of sexual harm, which include the provision of effective interventions to those who have caused sexual harm. The ultimate goal must be to stop sexual violence before anyone is harmed.

The combination of elements present within the college and university environment has been characterized as the "perfect storm" (Lamade, Lopez, Koss, Prentky & Brereton, 2017) of risk factors for the perpetration of sexual misconduct. This is true of individual students (e.g., they are at an age of sexual exploration, emerging into adulthood with ongoing brain development, experiencing intense emotions, and often engaging in increased risk taking, all while learning new skills to function independently) as well as the environment in which these students live (e.g., a hook-up culture with the ubiquitous presence of alcohol and drugs and freedom from parental supervision). Although these factors contribute to sexual misconduct, they do not excuse it; institutions must take strong action to ensure the safety of everyone within their campus communities. By incorporating knowledge about individuals who have sexually harmed – which includes providing individualized responses to those who have caused harm – with the emerging research and programs that show early and effective interventions can stop sexual misconduct, colleges and universities will be one step closer to achieving the important goal of preventing sexual misconduct.

About ATSA

ATSA is an international, multi-disciplinary, professional organization of more than 3,000 members dedicated to making society safer by preventing sexual abuse. ATSA supports sound research, effective practice, informed public policy, and collaborative community approaches that lead to comprehensive prevention strategies and promote the effective assessment, treatment, and management of individuals who have sexually abused or are at risk to abuse. ATSA's members are available to assist colleges and universities in ending campus sexual assault.

RESOURCES

The following resource list provides examples of currently available resources related to campus sexual misconduct and prevention. Additional resources will be added as available, so please check back periodically for updates.

ATSA

Campus Sexual Assault Edition: Sexual Abuse, Volume 31 (3), April 2019

Canada

Our Turn: A National Student-Led Action Plan to End Campus Sexual Violence (2017)

United Kingdom

The Intervention Initiative

Sexual Harassment & Violence at UK Universities (Brook, 2019)

Sexual Misconduct & Violence Operations Group

<u>Tackling Sexual Violence at Universities</u> (British Psychological Society, 2018)

The 1752 Group

United States

<u>A Public Health Approach to Reducing Sexual Assault: A Report for College Campuses</u> (Johns Hopkins Center for Injury Research and Policy, 2018)

Bringing in the Bystander

Coaching Boys into Men

Green Dot Program

Making Campuses Safer (APA, 2018)

Not Alone: Center for Changing Our Campus Culture

NSVRC Campus Sexual Violence Resource List

Sexual Assault Prevention on U.S. College Campuses: A National Scan (PreventConnect, 2016)

Sexual Violence on College Campus: Strategies for Prevention (CDC, 2016)

White House Task Force Report to Protect Students from Sexual Assault (2017)

REFERENCES

- Abbey, A. & McAuslan, P. (2004). A longitudinal examination of male college students perpetration of sexual assault. *Journal of Consult Clinical Psychology, 72,* 747-756.
- Association for the Treatment of Sexual Abusers. (2014). *Practice guidelines for the assessment, treatment, and management of adult male sexual abusers*. Beaverton, OR: Author.
- Boer, D. P. (2013). Some essential ingredients for sex offender reintegration. *International Journal of Behavioral Consultation and Therapy, 8,* 8-11.
- Breiding, M.J., Smith, S.G., Basile, K.C., Walters, M.L., Chen, J. & Merrick, M.T. (2011). Prevalence and characteristics of sexual violence, stalking, and intimate partner violence victimization National intimate partner and sexual violence survey, United States. *Morbidity and Mortality Weekly Report: Surveillance Summaries*, 63(8).
- Curtin, J. J., & Fairchild, B. A. (2003). Alcohol and cognitive control: Implications for regulation of behavior during response conflict. *Journal of Abnormal Psychology*, *112*, 424-436.
- DeGue S., Simon T.R., Basile K.C., Yee S.L., Lang K. & Spivak H. (2012). Moving forward by looking back: reflecting on a decade of CDC's work in sexual violence prevention, 2000-2010. *Journal of Women's Health, 21,* 1211-1218.
- DeGue, S., Valle, L.A., Holt, M.K., Massetti, G.M., Matjasko, J.L. & Tharp, A.T. (2014). A systemic review of primary prevention strategies for sexual violence perpetration. *Journal of Aggression and Violent Behavior*, 19(4), 346-362.
- de Vogel, V., de Ruiter, C., Bouman, Y. & de Vries Robbé, M. (2009). *SAPROF: Structured Assessment of PROtective Factors for Violence Risk*. Utrecht, the Netherlands: Forum Educatief.
- De VriesRobbe, M., Mann, R.E., Maruna, S. & Thornton, D. (2014). An exploration of protective factors supporting desistance from sexual offending. *Sexual Abuse: Journal of Research and Treatment,* 27, 16-33.
- Giancola, P. R. (2000). Executive functioning: A conceptual framework for alcohol-related aggression. *Experimental and Clinical Psychopharmacology, 8,* 576-597.
- Göbbels, S., Ward, T. & Willis, G. M. (2012). An integrative theory of desistance from sex offending. *Aggression and Violent Behavior*, *17*, 453-462.
- Hald, G.M, Malamuth, N.M., & Yuen, C. (2010). Pornography and attitudes supporting violence against women: Revisiting the relationship in nonexperimental studies. *Aggressive Behavior*, *36*, 14-20.

- Hanson, R.K., Bourgon, G., Helmus, L. & Hodgson, S. (2009). The principles of effective correctional treatment also apply to sexual offenders: A meta-analysis. *Criminal Justice and Behavior, 36*, 865-891.
- Hanson, R.K., Harris, A.J.R, Helmus, L. & Thornton, D. (2014). High risk sex offenders may not be high risk forever. *Journal of Interpersonal Violence*, *29*, 2792-2813.
- Hanson, R. K., & Morton-Bourgon, K. (2004). *Predictors of sexual recidivism: An updated meta-analysis*. Ottawa, Canada: Public Safety and Emergency Preparedness Canada.
- Harris, A.J.R. & Hanson, R.K. (2004). Sex Offender Recidivism: A simple question. Ottawa, Canada: Public Safety and Emergency Preparedness Canada.
- Knight, R. (2018, October). The structure and covariates of sexual harassment and coercion. Session presented at the Association for the Treatment of Sexual Abusers 36th Annual Research & Treatment Conference, Kansas City, MO.
- Knight, R.A. & Sims-Knight, J.E. (2011). Risk factors for sexual violence. *Violence Against Women and Children, 1,* 125-172.
- Koss, M. P., Leonard, K. E., Beezley, D. A. & Oros, C. J. (1985). Nonstranger sexual aggression: A discriminant analysis of the psychological characteristics of undetected offenders. *Sex Roles*, *12*, 981-992.
- 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*, 162-170.
- Krebs, C., Lindquist, C., Berzofsky, M., Shook-Sa, B. & Peterson, K. (2016). *Campus climate survey validation study final technical report*. Bureau of Justice Statistics Research and Development Series. https://www.bjs.gov/content/pub/pdf/ccsvsftr.pdf
- Krebs, C.P., Lindquist, C.H., Warner, T.D., Fisher, B.S. & Martin, S.L. (2007). *The Campus Sexual Assault (CSA) Study*. Washington, DC: National Institute of Justice, U.S. Department of Justice.
- Lamade, R., Lopez, E., Koss, M.P., Prentky, R. & Brereton, A. (2017). Developing and implementing a treatment intervention for college students found responsible for sexual misconduct. *Journal of Sexual Aggression, Conflict and Peace Research, 10,* 134-144.
- Letourneau, E., Eaton, W.W., Bass, J., Berlin, F.S. & Moore, S.G. (2014). The need for a comprehensive public health approach to preventing child sexual abuse. *Public Health Report, 129(3),* 222-228.

- Lisak, D. & Miller, P.M. (2002). Repeat rape and multiple offending among undetected rapists. *Violence and Victims*, *17*, 73-83.
- Loh, C., Gidycz, C.A., Lobo, T.R. & Luthra, R. (2005). A prospective analysis of sexual assault perpetration risk factors related to perpetrator characteristics. *Journal of Interpersonal Violence, 20,* 1325-1348.
- Mann, R.E., Hanson, R.K, & Thornton, D. (2010). Assessing risk for sexual recidivism: Some proposals on the nature of psychologically meaningful risk factors. *Sexual Abuse: A Journal of Research and Treatment, 22,* 191-217.
- McMahon, P.M. (2000). The public health approach to the prevention of sexual violence. *Sexual Abuse:* A Journal of Research and Treatment, 12, 27–36.
- Mills, C.S. & Granoff, B.J. (1992). Date and acquaintance rape among a sample of college students. *Social Work, 37*, 504–509.
- National Sexual Violence Resource Center (2016) downloaded on January 27, 2019. http://www.nsvrc.org/sites/default/files/saam 2016 impact-of-sexual-violence.pdf
- Peterson, C., DeGue, S., Florence, C., & Lokey, C.N. (2016). Lifetime economic burden of rape among U.S. adults. *American Journal of Preventative Medicine*, *52*, 691-701.
- Rich, P. (2018, May). The evolution of practice in the treatment of youth who engage in sexually harmful behavior. Keynote presented at the NYS ATSA/NYS Alliance Joint Annual Conference, Saratoga Springs, NY.
- Shields, R. T. & Feder, K. A. (2016). The public health approach to preventing sexual violence. In *Sexual Violence: Evidence Based Policy and Prevention* (pp. 129-144). Cham, Switzerland: Springer International Publishing.
- Strang, E., Peterson, Z.D., Hill, Y.N., & Heiman, J.R. (2013). Discrepant responding across self-report measures of men's coercive and aggressive sexual strategies. *Journal of Sex Research*, *50(5)*, 458-469.
- Swartout, K.M., Koss, M.P., White, J.W., Thompson, M.P., Abbey, A., & Bellis, A.L. (2015). Trajectory analysis of the campus serial rapist assumption. *JAMA Pediatrics*, *169*, 1148-1154.
- Tabachnick, J. (2013). Why prevention? Why now?. *International Journal of Behavioral Consultation and Therapy*, *8*, 55-61.

- Van Brunt, B., Murphy, A. & O'Toole, M.E. (2015). The dirty dozen: Twelve risk factors for sexual violence on college campuses (DD-12). *Violence and Gender, 2,* 145-160.
- Wheeler, J.G., George, W.H., & Dahl, B.J. (2002). Sexually aggressive college males: Empathy as a moderator in the "Confluence Model" of sexual aggression. *Personality and Individual Differences*, *33*, 637-642.
- White House Task Force Report (2014). https://www.justice.gov/archives/ovw/page/file/905942/download
- White, J.W. & Smith, P.H. (2004). Sexual assault perpetration and reperpetration: From adolescence to young adulthood. *Criminal Justice and Behavior*, *31*, 182-202.
- Wright, P.T., Tokunaga, R. S., & Kraus, A. (2015). A meta analysis of pornography consumption and actual acts of sexual aggression in general population studies. *Journal of Communication*, 66, 183-205.