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Capstone Summary Report

Development of a Curriculum to Promote Healthy Dating Relationships among Undergraduate Students at UNC-Chapel Hill

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We have neither given nor received unauthorized aid on this assignment.

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ABSTRACT

Background. Research shows that as much as 82% of college students report perpetrating verbal abuse against a dating partner and 21% report perpetrating physical abuse. Experience of dating abuse has been associated with a number of negative health outcomes including physical injury, illegal drug use, depression, anxiety, and cognitive impairment. The Counseling and Wellness Services (CWS) Capstone team at the University of North Carolina at Chapel Hill (UNC-CH) aimed to address this public health problem of dating abuse among college students by developing a curriculum for preventing intimate partner violence (IPV), specifically among undergraduate students at UNC-CH.

Methods. Our Capstone project included a review of the literature to assess predictors of IPV and evidence-based interventions to prevent IPV. We conducted formative research on healthy dating relationships through focus groups and interviews with UNC-CH undergraduate students, UNC-CH staff, and staff members at neighboring universities (Duke, Elon, NC State). Using findings from the literature review and formative research, we developed a conceptual model of constructs to be targeted by the curriculum in order to promote healthy relationships and prevent IPV. This conceptual model guided the development of our IPV prevention curriculum.

Results. The activities resulted in four deliverables: a report of findings from literature review, a report of findings from formative research, a conceptual model, and an IPV prevention curriculum. The curriculum targets five main constructs, namely norms related to gender and alcohol, dating attitudes, communication about relationship expectations, stress management, and conflict management.

Impacts and Benefits. We hope that this curriculum will prevent IPV among undergraduate students at UNC-CH and enhance their ability to develop and maintain healthy dating relationships. By preventing IPV, we also hope to prevent the associated negative health outcomes.

Deliverables:

1. Literature Review on Predictors of Interpersonal Violence (IPV) and Evidence-Based Interventions (EBIs) to Promote Healthy Relationships
2. Report of Formative Research Findings on Healthy Dating Relationships
3. Final Conceptual Model to Inform Intimate Partner Violence Prevention Curriculum
4. Curriculum to Promote Healthy Relationships and Prevent Intimate Partner Violence among UNC-CH Undergraduate Students

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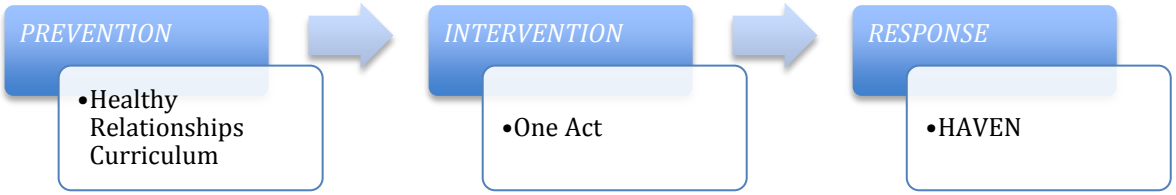
INTRODUCTION

The Capstone project is the culminating experience for Public Health Masters students in the Department of Health Behavior (HB). This project allows students to apply knowledge acquired in coursework to a real-world setting. Student teams are matched with a community partner with whom they collaborate to develop a final set of deliverables (tangible and intangible products) that address the stated needs of the community partner's organization and population.

For our Capstone project, we partnered with Dr. Bob Pleasants, the Interpersonal Violence Prevention Coordinator at the University of North Carolina, Chapel Hill (UNC-CH). In collaboration with UNC-CH Counseling and Wellness Services (CWS), The Women's Center, the UNC-CH Office of the Dean of Students, and various student organizations, Dr. Pleasants leads activities and programs for the University community to raise awareness about and reduce interpersonal violence on campus. CWS is a division of Campus Health Services at UNC whose mission is to create a campus culture that is an inspiring and healthy place to learn, work, play and live by assessing student needs, spreading health message, and building institutional capacity for promoting health.

Two of the main programs led by Pleasants and CWS are HAVEN and One Act. HAVEN is a four-hour training designed to raise awareness on intimate partner violence (IPV) and increase support for survivors of sexual violence, abusive relationships, and stalking. One Act is separate four-hour training that focuses on bystander interventions. One Act participants are trained to recognize warning signs of interpersonal violence with the intent of preventing a specific incident of abuse that may or may not be occurring in the context of an abusive relationship. HAVEN and One Act train participants on aspects of IPV prevention and response, but do not include the role of *healthy* dating relationships as a prevention tool. We conceptualize a prevention curriculum as adding to a continuum of programs (Figure 1) addressing IPV before, during, and after the fact.

Figure 1. CWS Sponsored Programs



It should be noted that the Lesbian, Gay, Bisexual, Transgender and Queer (LGBTQI) Center has a healthy relationships curriculum for LGBTQI students. This indicates that there are some campus efforts to address the prevention component of the above continuum, but only in certain student populations.

The goal of our Capstone project is to advance prevention efforts at UNC-CH, specifically to prevent IPV, by creating a curriculum to promote healthy dating relationships among all undergraduate students. We have not defined what a "healthy" relationship is, as it may differ for each individual, but one aspect is that it is free from violence and abuse. Our curriculum addresses the role of dating attitudes, relationship norms, communication, conflict resolution, and stress in the creation of healthy relationships at UNC-CH.

The following Capstone summary report details our process of developing a healthy relationships curriculum for UNC-CH. It describes the current literature on IPV prevention among young people, the methods we used to develop our deliverables, and their final content. We also describe lessons learned from the process, as well as the potential benefits of our work. Finally, we supply recommended next steps for the 2012-2013 Capstone Team.

BACKGROUND

We began the Capstone project with a literature review to: 1) describe the current problem of dating abuse on college campuses; 2) assess existing evidence-based interventions (EBIs) to promote healthy relationships with adolescents, college students, and young adults; and 3) identify predictors of intimate partner violence in college populations. Below we summarize our findings for each component of this review. A full copy of the literature review was submitted as a Capstone deliverable.

Defining the Problem

In recent years, a number of studies have found a high prevalence of dating violence among college students. Shook, Gerrity, Jurich and Segrist (2000) found that 82% of college students reported perpetrating verbal abuse against a dating partner and 21% reported perpetrating physical abuse. Straus (2004) corroborated these findings in a study that found that 29% of college students in an international sample reported perpetrating physical abuse toward a partner. Another study showed that 75% of college women experienced psychological dating abuse in a six-month period (Neufel, McNamara, & Ertl, 1999).

Experience of dating abuse has been associated with a number of negative health outcomes. Researchers found that psychological abuse among college women was associated with illegal drug use, negative health perceptions, and cognitive impairment (Straight, Harper, & Arias, 2003). Dating violence victimization among college-aged individuals has been linked to physical injuries (bruises, welts, black eyes, swelling, sore muscles and sprains) and higher scores on measures of depression, anxiety, and hostility (Amar & Gennaro, 2005).

To identify constructs to be targeted by the curriculum, we first reviewed the existing literature on IPV, including the existing evidence-based interventions (EBIs), particularly those designed for college populations. After discovering that only a few EBIs address IPV amongst this specific population, we broadened our search to include middle-school, high-school, and young adult (21+) populations.

Assessing Evidence-Based Interventions *(Please refer to the table in Appendix 2 throughout this section.)*

EBIs in college populations. Based on the evidence of negative health outcomes associated with dating abuse, researchers have evaluated a number of interventions designed to prevent dating abuse. Only two such interventions have been tested in college populations.

The first, conducted by Shwartz, Magee, Griffin, and Dupuis (2004), used a randomized controlled trial to test a curriculum-based intervention consisting of four 1.5 hour-long sessions. Administered to undergraduate college students, the curriculum covered topics including awareness of dating violence and aggressive communication as well as skill building in non-verbal communication, expressive and empathic

communication, providing feedback, and conflict resolution. The intervention also built problem-solving skills and awareness of the role of self-esteem, power, and control in relationships.

The intervention led to a decrease in acceptance of stereotypical and traditional gender norms and a decrease in gender-role conflict. The researchers also found an improvement in anger-management skills. The researchers did not examine any abuse-related behavioral outcomes.

The second intervention used a randomized control trial design to assess the efficacy of a motivational interviewing intervention for college students and their partners who reported at least one act of physical aggression by either partner (Woodin & O'Leary, 2010). The goal of this intervention was to prevent partner aggression.

The intervention consisted of one 2-hour session. To begin the session, each member of the couple was counseled separately. Each individual was presented with information about his or her aggressive behaviors (as reported in a prior assessment meeting), as well as risk factors for and consequences of that behavior. They were also presented with information that showed how their behaviors compared with that of their peers (based on a general college sample). These topics were explored in a non-threatening manner, focusing on how the behaviors impacted the individual and their relationship. The interviewer reinforced statements of motivational intent. After the individual sessions, the couple was brought together to discuss hopes and concerns for the relationship. Information from the individual sessions was not shared in this joint conversation. The control condition was a ten-minute non-motivational session. A quantitative survey was administered at follow-up sessions for both conditions at 3, 6 and 9 months.

The study found that that motivational interviewing intervention significantly reduced physical aggression, harmful alcohol use, and acceptance of female psychological aggression. Females also reported a significant reduction in acceptance of male psychological aggression. However, this change was not significant among males, a potential weakness of the intervention.

EBIs in non-college populations. Based on the paucity of evidence-based interventions among college students, we broadened our review to include interventions that assessed middle- and high-school students, as well as young adults (21+). Examination of these interventions offered an additional opportunity

to identify appropriate constructs through which to effect behavioral or attitudinal changes and decrease dating abuse.

Below we summarize our findings by behavioral, attitudinal, skills, and relationship satisfaction outcomes. For the sake of clarity, we have organized the results by goals and outcomes of the research, constructs that were targeted, and delivery method. This approach was selected because when developing our intervention, we will place greater weight on studies associated with behavioral change, versus attitudinal or skill changes that were not linked to significant behavior change. It should be noted that some studies found significant outcomes in more than one of these three outcome categories. We have noted this where relevant.

Behavioral outcomes. Three dating abuse prevention programs conducted outside college populations reduced dating abuse behaviors (Foshee et al., 1998; Wolfe et al., 2003; Wolfe et al., 2009). All three interventions were evaluated using a randomized controlled trial design. Foshee and colleagues (1998) tested their intervention with a middle-school population. Both studies by Wolfe and colleagues (2003; 2009) were conducted among high-school students.

Goals and outcomes. The goal of all three studies was to stop or reduce dating abuse perpetration and victimization. Outcome evaluation showed that all three interventions significantly decreased perpetration of physical dating abuse; however, only Foshee and colleagues (1998; Foshee, Benefield, Ennett, Bauman & Suchindran, 2004) found a decrease in the perpetration of psychological and sexual abuse. Victimization outcomes were less consistent. Wolfe and colleagues (2003) found reduced physical and psychological dating abuse victimization among individuals exposed to the intervention, while Foshee and colleagues (2004) found only decreased sexual abuse victimization.

Although these interventions are grouped together based on successful behavioral outcomes, it should be noted that Foshee and colleagues (1998) also found significant changes in prescribed gender norms, gender stereotyping and awareness of victim services. All three of these changes mediated, or had an effect on, the association between the intervention and sexual violence perpetration, while changes in prescribed norms also mediated the relationship between the intervention and physical violence perpetration. At one-year follow-up, researchers also found less acceptance of dating violence, more perceived negative

consequences from engaging in dating violence, fewer reports of reported destructive responses to anger, and greater awareness of victim and perpetrator services among intervention participants (Foshee et al., 2000).

Targeted constructs. Across all three interventions, the most consistent targeted constructs were communication, gender and dating norms, and awareness of help services. Only Foshee and colleagues (1998) targeted participant beliefs in their need for such help.

The interventions are less uniform in their targeting of conflict resolution and awareness-related constructs. Two interventions included a focus on teaching conflict resolution skills (Wolfe et al., 2003; Foshee et al.1998). Only one of the three interventions explicitly reported targeting knowledge/awareness of dating abuse (Wolfe et al., 2009) or power and control in relationships (Wolfe et al., 2003).

Curriculum delivery methods. All three interventions used multiples sessions (between 10 and 21), but only two were school-based. The remaining intervention was offered through Child Protective Services. Teaching methods varied widely and showed no consistency across interventions.

Attitudinal/Normative outcomes. Four studies reported a decrease in attitudes supportive of dating abuse due to an intervention. Three studies were randomized controlled trials (Jaycox et al., 2006; Pacifici, Stoolmiller & Nelson, 2001; MacGowan, 1997) and one used a non-equivalent control group pre-test post-test quasi-experimental design (Avery-Leaf, Cascardi, O'Leary, & Cano, 1997). Half of the studies were conducted with middle-school students (Jaycox et al., 2006; MacGowan, 1997), and half with high school populations (Pacific et al., 2001; Avery-Leaf et al., 1997).

Goals and outcomes. The goal of all four interventions was to reduce attitudes supportive of dating violence. All interventions showed a significant effect on these attitudes. Intervention participants in the study by Avery-Leaf and colleagues (1997) reported less acceptance of dating violence during an argument. Participants in the Ending Violence curriculum significantly reduced their acceptance of female-on-male dating violence (Jaycox et al., 2006). MacGowan (1997) found that intervention participants significantly increased their agreement with statements that characterized forms of non-physical violence as abuse.

Finally, the study by Pacifici and colleagues (2001) specifically assessed attitudes toward sexual coercion in dating relationships. They found that teens exposed to the intervention whose supportive

attitudes toward sexual coercion scored above the mean at pre-test had significantly reduced scores at post-test. Sexual coercion was an aggregate score of measures assessing rape myth acceptance, adversarial sexual beliefs, and sex role stereotyping.

Targeted constructs. Communication, including negotiation and refusal, were targeted in three interventions. However, only Pacifici and colleagues (2001) targeted communication about relationship expectations, particularly those that were sexual in nature. Only two interventions addressed conflict resolution (Avery-Leaf et al., 1997; MacGown, 1997). Avery-Leaf and colleagues specifically focused on the negotiation of relationship rules for managing conflict.

All four interventions targeted awareness of dating violence and the components of a healthy relationship. Three interventions addressed awareness of the role of power and control in dating relationships (Pacifici et al., 2001; MacGowan, 1997; Avery-Leaf et al., 1997). Three interventions also included knowledge of dating abuse prevention and response resources as a curriculum construct (Jaycox, 2006; MacGowan, 1997; Avery-Leaf et al., 1997). Finally, MacGowan and colleagues (1997) also targeted self-esteem as a construct, including discussion of its role in dating abuse.

Curriculum delivery methods. All four interventions were delivered in a school setting over multiple sessions (3-5). Neither Avery-Leaf and colleagues (1997) nor MacGowan and colleagues (1997) reported on the teaching methods used in their intervention. However, Jaycox (2006) and Pacifici (2001) did show many similarities in their methods including role-play, use of video and discussion.

Skills outcomes. Three studies found a significant intervention effect on skills development. One study used a pre-experimental design (Antle, Sullivan, Dryden, Karam & Barbee, 2010) and was conducted with a high school population. Two studies used quasi-experimental designs and were conducted with young adults 21 years of age and older (Markman, Floyd, Stanley & Storaasli, 1988; Halford, Moore, Wilson, Farrugia & Dyer, 2001).[1]

[1] *Both interventions reported use of a randomized controlled trial. However, Markman and colleagues did not conduct true randomization to condition and Halford and colleagues reported that randomization failed to create equal groups.*

Goals and outcomes. All three studies had a goal of improving communication skills and all three studies found that the intervention had an effect. However, although Antle and colleagues (2010) found a decrease in the use of demand/withdrawal communication and an improvement in conflict resolution skills, these outcomes are based on a pre-experimental design (no randomization or comparison group) which means that we cannot exclude the possibility that changes were attributable to something other than the intervention. Thus, while reported here, the study should be considered with caution.

Targeted constructs. All three interventions targeted communication and conflict resolution. Markman and colleagues (1988) specifically addressed active listening and expressive speaking skills as well as communication about relationship expectations. Conflict resolution skill development included a focus on negotiation of relationships rules for the management of conflict (Markman, Floyd, Stanley & Sotraasli, 1988; Halford et al., 2001).

Awareness and knowledge were not constructs frequently addressed by the interventions. One study addressed the identification of healthy and unhealthy relationship patterns (Antle et al., 2010) and another included education about power dynamics in relationships (Halford et al., 2001). Both interventions delivered to young adults older than 21 years of age (Markman et al., 1988; Halford et al., 2001) targeted knowledge about increasing and improving sexual intimacy. Only Halford and colleagues (2001) addressed gender-role stereotypes.

Curriculum delivery. Again, all three interventions included multiple sessions, ranging from two to five sessions. Antle and colleagues (2010) did not report on their teaching methods, but other interventions employed methods such as discussion and class exercises.

Relationships satisfaction outcomes. Three studies, including two detailed above, also assessed a relationship satisfaction outcome. Two studies were randomized controlled trials (Halford, Moore, Wilson, Farrugia & Dyer, 2001; Halford, Sanders & Behrens, 2004) and one employed a quasi-experimental design (Markman, Floyd, Stanley & Storaasli, 1988). All study populations were young adults over the age of 21.

Goals and outcomes. Markman and colleagues (1998) found that couples in the intervention maintained higher levels of relationship satisfaction than those in the control condition. Halford and colleagues (2001)

found that couples at high risk of abuse that received the intervention reported higher levels of relationship satisfaction than those in the control condition. In another study, Halford and colleagues (2004) found that an intervention focused on self-regulation of behavior in relationships enhanced relationship satisfaction and stability.

Targeted constructs. Targeted constructs included communication, conflict resolution and self-evaluation of the relationship. For this last construct, respondents were asked to evaluate their current relationship and identify areas for improvement.

Curriculum delivery. All three studies employed multiple sessions and video was the most common teaching method (Halford, Sanders & Behrens, 2004, Markman, Floyd, Stanley & Storaasli, 1988). Other methods employed include class exercise and discussion (Halford, Moore, Wilson, Farrugia & Dyer, 2001).

Limitations

While we attempted to make this review as exhaustive as possible, some evaluated interventions may be missing. This review does not include interventions that were not peer-reviewed. Finally, it is possible that EBIs conducted in non-college students may not be effective with college student due to the different characteristics of these populations (ex: age, setting).

METHODS

In addition to conducting a literature review, we used qualitative methods to engage and involve college students and university staff in the curriculum development. Specifically, we held five focus groups with UNC-CH undergraduate students in order to better understand how students define healthy dating relationships. The focus groups provided feedback and suggestions regarding effective curriculum content and delivery methods. We also interviewed staff from UNC-CH and neighboring universities who work to prevent interpersonal violence. Their input deepened our understanding of the dating relationship issues faced by undergraduate students and also allowed us to learn about similar programs and resources that already exist at UNC-CH and other institutions.

Using information from formative research and the literature review, we developed a combined conceptual model to guide our development of a curriculum to prevent IPV and promote healthy

relationships. Using this conceptual model, we referenced activities within existing curricula from our literature review that targeted similar constructs and adapted them to meet the needs of our population. In this document, the term "construct" refers to the factors identified as affecting relationships (ex: attitudes about dating). We also developed original activities for content areas that were unique to our population or that were not addressed in other curricula. UNC-CH students and staff reviewed this draft curriculum and their comments were incorporated to produce a final curriculum for use by CWS. Our review of the literature indicates that interventions can measurably reduce dating abuse in college populations. Equipped with this evidence, we began implementation of Capstone activities. The first step was to develop a project logic model and to identify key factors to consider regarding project sustainability. With these activities completed, we commenced community assessment and engagement, which informed the development of our deliverables. These efforts are described below.

Logic Model

The W.K. Kellogg Foundation (2004) recommends using a logic model as a guide to aid planning, implementation, and evaluation of a program or intervention. A logic model visually reflects the sequence of events and the expected results from program activities. Our team developed a logic model to guide creation of a curriculum to prevent IPV among undergraduate students at UNC-CH (Appendix 3).

During the planning phase, a logic model helps organize inputs and activities necessary for a successful program. Inputs are the resources needed to carry out activities, such as staff, time, and funding. Our inputs specifically included time and personnel provided by the five members of the Capstone team, feedback and eventual implementation of the curriculum by the CWS staff, and the financial resources used to provide students with incentives to participate in formative research. Activities occurred in two stages. First, we conducted formative research including a review of the literature on evidence-based approaches to the problem of dating abuse, and focus groups with students and CWS staff to elicit feedback on student perceptions of healthy relationships and on curriculum design; second, we used the results of formative research to inform the design of a healthy relationships curriculum. The direct results of these activities are

considered outputs, and included five completed focus group discussions with students, one focus group with CWS staff, a report of the results, and development of the curriculum.

Short- and long-term outcomes are the changes that are expected to occur as a result of activities, such as implementation of the completed curriculum, and an increase in awareness of IPV as a problem on the UNC-CH campus among trained participants. The intended impact of this effort is to increase campus-wide awareness and appreciation of the problem of IPV among college students and decrease the prevalence of IPV at UNC. Eventually, we intend the curriculum to be institutionalized at UNC.

Planning for Sustainability

As we conducted formative research and developed a logic model, we began to consider key factors related to program sustainability. For the purposes of our Capstone project, we define sustainability as the ability of a program to continue over the long-term after the initial influx of staff, time, financial backing, and commitment (Shediac-Rizkallah & Bone, 1998). Sustainability is typically the long-term goal of a public health effort because it ensures that program activities are institutionalized and that health benefits associated with such activities are maintained. If sustainability is not achieved, programs may experience rapid declines in the beneficial outcomes of the program, including those related to health (Shediac-Rizkallah & Bone, 1998).

In the context of our Capstone project, sustainability is long-term institutionalization of a dating abuse prevention curriculum at UNC-CH. That is, we aim to have long-term viability and integration of our curriculum into programming and operations of CWS at UNC-CH (Stecklar & Goodman, 1989, as cited in Shediac-Rizkallah & Bone, 1998). Achieving this goal requires planning for sustainability from the outset of project activities (Shediac-Rizkallah & Bone, 1998).

This planning began with close consultation with Dr. Pleasants who provided us with information regarding the design of existing UNC-CH health promotion programs, the financial and organizational structure of UNC-CH CWS and the IPV Prevention office as well as data on state-wide political support for these efforts. This information was supplemented with data obtained during our formative research with UNC-CH students, staff and administrators. All data was used to identify factors that were likely to influence sustainability in the

following categories: project design and implementation, organizational setting, and the broader environment (Shediac-Rizkallah & Bone, 1998).

Project design and implementation factors were given special consideration during design of the curriculum as these factors can be partially addressed by our Capstone activities. Factors in the organizational setting and broader environment factors are not amenable to change by our team. However, we did identify potential ways for addressing these factors in future UNC-CWS activities. The specific factors identified, which range from continued funding of the IPV Prevention Office to student buy-in, are discussed in detail in the "Results" and "Discussion" sections below. These recommendations were shared with Dr. Pleasants.

Engagement and Assessment Activities

Community engagement and assessment were important components of our Capstone team's work. Engagement with our intended beneficiaries and stakeholders—UNC-CH undergraduate students and administrators—provided an opportunity to learn more about the dynamics of student relationships, perceived values and norms of healthy relationships, and environmental factors that affect these relationships. Gaining the perspective of these insiders (i.e., members of our target population, undergraduate students at UNC-CH) and outsiders (i.e., administration that works within this population to provide services) ensured development of a curriculum that is representative of and tailored specifically to the needs of undergraduates at UNC-CH (Eng et al., 2005).

Community engagement also provided us with the opportunity to build trust with and gain support from community members (McCloskey et al., 2011). Trust and support are critical components in the development of relationships with stakeholders and beneficiaries. These collaborative relationships enabled us to collectively and effectively address the issue of IPV prevention.

We used mixed methods to engage and assess Capstone stakeholders and intended beneficiaries. First, we performed a series of "windshield tours." These direct observations of undergraduates occurred in several locations and functioned as an opportunity to observe natural social interactions throughout the

student community[2]. Second, we conducted a focus group with CWS staff to understand counselors' perspectives on student relationships and seek their suggestions on effective curriculum delivery methods. Several Capstone team members also participated in the HAVEN Program, which allowed the team to gain insight on current programs administered by the IPV Prevention Office. Third, we conducted individual interviews (n=6) with IPV prevention staff at Duke, Elon, and NC State, as well as administrators at UNC-CH to gain various perspectives on IPV prevention. During these individual interviews, we asked about aspects of healthy relationships among college students; challenges that college students faced regarding dating and relationships; the programs or activities the interviewees were involved in to prevent IPV or promote healthy relationships; and suggestions for curriculum content, promotion, and delivery. Dr. Pleasants provided the names of key staff and administrators for these interviews.

Finally, we conducted five focus group discussions with both male and female undergraduate students at UNC-CH. Individuals in all focus groups were asked to share their ideas about the components of healthy relationships, challenges to forming these relationships, and suggested content and delivery methods to incorporate into our curriculum.

Focus group participants were recruited through our team's existing connections to undergraduate groups. This included a number of connections facilitated through Dr. Bob Pleasants, his course for undergraduates, and a UNC men's organization. Other connections facilitated recruitment of sorority members and LGBTQI students. Additionally, we sent recruitment emails to undergraduate public health student list-serves, to a UNC LGBTQI student organization, and to other student groups engaged in violence prevention.

A total of 31 undergraduate UNC students participated in our five focus groups. There were a total of 14 male and 17 female students: two focus groups were all male students (n=12, n=1), two focus groups were all female students (n=7, n=4) and one focus group was mixed with 1 male and 6 female students. The

[2] These locations, intentionally diverse to allow for observation of various student social contexts, included: a predominately undergraduate dining hall; a centralized gathering area on the UNC-CH campus; the student union; the undergraduate library; student stores; a local music venue and bar frequented by undergraduates; and an LGBTQI-themed night at a bar.

students ranged from first-years to seniors. Although we sought to recruit a diverse group of participants, the majority of the participants appeared to be White.

Work Plan Deliverables

The Capstone Project was guided by a work plan that evolved throughout the year. Dr. Pleasants, in partnership with the student team and faculty advisor, identified the following final four deliverables to inform and support the development of a final curriculum;

- Literature Review on Predictors of Interpersonal Violence (IPV) and Evidence-Based Interventions (EBIs) to Promote Healthy Relationships
- Report of Formative Research Findings on Healthy Dating Relationships
- Final Conceptual Model to Inform Intimate Partner Violence Prevention Curriculum
- Curriculum to Promote Healthy Relationships and Prevent Intimate Partner Violence among UNC-CH Undergraduate Students

The four deliverables have the collective purpose of advancing efforts to reduce IPV victimization and perpetration in the UNC-CH student community. Each of our deliverables is described in further detail in the results section.

RESULTS

Sustainability Findings

Based on our formative research and the discussions with Dr. Pleasants described above, we identified project design and implementation factors, factors in the organization setting and factors in the broader community environment that will affect institutionalization of a curriculum to prevent IPV at UNC-CH. We discuss these factors below and, where appropriate, explain how they were addressed during our Capstone project.

Project Design & Implementation Factors: Sustainability of an IPV prevention curriculum depends largely on buy-in from the University and the student community. This, in turn, depends on students' awareness

of, and perceived susceptibility to, dating abuse, as well as their motivation to take action to prevent this problem. The Capstone team was able to take a number of steps to address these factors.

First, our Capstone team engaged administration and staff at UNC-CH as well as neighboring universities who demonstrated sustained commitment to the prevention of dating abuse on campus. We sought to determine how these stakeholders defined healthy relationships and to understand their vision for an IPV prevention curriculum. We also requested their review of our final curriculum. These efforts have been described previously in the Methods section. Engaging these individuals in the formative research and refinement of the curriculum resulted in a final product rooted in their input, and thus will help to secure and maintain their commitment to the curriculum.

Second, as described previously, we conducted focus groups with a cross-section of UNC-CH undergraduate students to understand their perceptions of healthy relationships and their recommendations for curriculum delivery. These students also provided feedback on the final curriculum. This engagement ensured that this final document was relevant and useful to the target population and was delivered in a manner desirable to students, thereby increasing the likelihood that students will receive the curriculum positively. Such reception will increase student participation in the program and build student support and advocacy for institutionalizing the curriculum at UNC-CH.

Third, through a focus group session, the Capstone team included UNC-CH CWS staff in the curriculum development process. These staff will play a central role in future promotion and implementation of the IPV prevention curriculum. By engaging CWS staff, we took steps to ensure that they viewed the final product as relevant and feasible for long-term implementation.

Fourth, to sustain interest in the program, we made certain that the content of our curriculum focused on the promotion of healthy relationships as an IPV prevention tool. This ensured that course content—particularly communication, conflict resolution, and stress management components—did not overlap with the bystander intervention and IPV response activities of One Act and HAVEN. Doing so ensures that students view this training as a value-add, not a repetition of existing activities.

Finally, we ensured that our curriculum included tools for assessing how the curriculum is delivered, also known as process evaluation. This evaluation will provide information about the number of students reached by the curriculum, the concepts taught in each session, the quality of the curriculum's facilitation and the student's opinion about the training. This data can be used in initial advocacy activities with UNC-CH stakeholders to highlight the reach of the curriculum as well as positive student reaction.

Factors within Organizational Setting: The sustainability of an IPV prevention curriculum will also be impacted by organizational factors within UNC-CH and, more specifically, CWS. Our community partner, Dr. Robert Pleasants, was hired by UNC-CH in 2009 to work with CWS as the Interpersonal Violence Prevention Coordinator. With funding from the CDC Rape Prevention and Education grant, Dr. Pleasants hired Kelli Raker as the Rape Prevention Education Coordinator. Pleasants and Raker make up the Interpersonal Violence Prevention Office and lead ongoing prevention programs on campus, primarily One Act and HAVEN. Although the Interpersonal Violence Prevention Office is currently a stable department within UNC-CH CWS, the CDC funding expires for Raker's position expires in October 2012. Pleasants feels confident that Raker's position will be funded through June 2012 and that he will receive another grant to support her position for an additional two to three years. However, the uncertainty in funding affects the stability of the Interpersonal Violence Prevention Office and the sustainability of our curriculum.

Additionally, to achieve institutionalization of the curriculum, UNC-CH must continue to fund the Interpersonal Violence Prevention Coordinator position (i.e. Dr. Pleasant's position). The proportion of the UNC-CH budget appropriated to interpersonal violence prevention could change with shifts in university funding and leadership, potentially eliminating this position. In addition, should the Rape Prevention Education Coordinator position be cut due to funding, the Interpersonal Violence Prevention Coordinator will have more responsibilities, less time, and may be unable to maintain our project.

The personality, values, and leadership of the Interpersonal Violence Prevention Coordinator are also important factors to sustaining our program. Dr. Pleasants, who currently fills this role, is passionate about preventing violence and promoting healthy relationships. His charismatic and committed leadership, along with

his positive rapport among UNC-CH students, will help to develop and sustain our program. Conversely, his departure could threaten the long-term operation of a healthy dating relationship curriculum.

Finally, it should be noted that other university programs involved in reducing violence on campus include the Carolina Women's Center, Project Dinah, and the Gay, Lesbian, Bisexual, Transgender and Straight Alliance (GLBTSA). Though all of these groups perform similar violence prevention work, they are not fully integrated into a single IPV prevention and response program and they lack clear centralized leadership. The decentralized nature of activities, as well as the precarious position of the IPV Prevention office, will hinder the stable leadership that is needed for long-term institutionalization of our program.

Factors within the Broader Community Environment: There are several factors within the broader community environment that may also influence the sustainability of this curriculum. First, as with many programs, adequate funding is crucial to long-term sustainability. The general economic environment in North Carolina resulted in major budget cuts throughout colleges and universities ("Carolina Budget Information", n.d.). It will, therefore, be difficult to receive and maintain funding, at least in the near future, for this new program. This poses a major challenge to its endurance. However, the process evaluation we propose, as well as the findings of future outcome evaluation activities can be used to advocate for preservation of the curriculum despite budget cuts.

Second, there is a dearth of intimate partner violence surveillance data due to a lack of strong survey methods and underreporting—at both UNC-CH and in society at large (B. Pleasants, personal communication, September 21, 2011; Saltzman, 2004). This lack of surveillance data results in inaccurate proxy measures and, subsequently, in a false understanding of the reality of intimate partner violence throughout society (Saltzman, 2004). A distorted view on dating violence may affect the ability to garner political support and/or involve various aspects of the community in prevention efforts because these efforts may be viewed as unnecessary in the context of a problem that is perceived as minor.

Despite these challenges, we should note that in our formative research both students and CWS staff expressed interest in discussing and learning about qualities of healthy relationships. This pre-existing community interest in healthy relationships allowed us to more effectively involve and empower the community

in defining their health problems and shaping solutions to those problems (Shediac-Rizkallah & Bone, 1998). This partnership resulted in a more appropriately tailored program that meets the needs of our population. This will positively influence program sustainability. Additional findings from our engagement and assessment activities are described below.

Community Engagement and Assessment Findings

As mentioned previously, we conducted multiple focus group sessions and in-depth interviews with UNC-CH staff and undergraduate students as well as with staff at neighboring universities. The following texts describe the strengths and assets and the weaknesses, gaps, and challenges of these key stakeholders. Our Report of Formative Research Findings, briefly described in the table of deliverables below, provides a more comprehensive summary of our community engagement.

Stakeholder Strengths and Assets: In addition to helping identify targeted constructs for the curriculum and potential delivery methods, our engagement with key beneficiaries and stakeholders also revealed a number of their strengths that helped to influence our intervention activities more broadly. First, UNC-CH undergraduate students thought critically about relationships, and shared those thoughts in a clear and articulate manner as demonstrated in the findings detailed below. Working in collaboration with students to design the intervention helped to ensure it was relevant to the student body, using language and situations that were familiar and appropriate to our target population.

Second, students clearly articulated factors affecting healthy relationships at multiple levels of the socio-ecological framework. This framework suggests that individual behavior is influenced by factors at various levels of society. This includes intrapersonal, interpersonal, organizational, community and policy factors (Sallis, Owen, & Fisher, 2008). For example, gender norms dominant in the University community (e.g., men will want to have sex more often than women) affect individual behavior, as does interpersonal pressure to consume alcohol. This articulation of the diversity of factors influencing individual behavior pushed our Capstone team to address these various levels, maximizing the likelihood of an intervention effect (Sallis, Owen & Fisher, 2008).

Finally, windshield tours revealed students actively participate in student organizations. This indicates a potentially high degree of social capital in the student body, suggesting that relationships with these organizations would be a strong asset for expanding the reach of our activities.

Additionally, CWS staff and IPV staff at peer institution staff were open and engaged in conversations about IPV prevention. Their interest and willingness to afford us their time indicated strong support for this endeavor. It became obvious that their engagement will be a critical asset to build the sustainability of the intervention. Our engagement activities built the groundwork for this support.

Stakeholder Weaknesses, Gaps, and Challenges: Engagement revealed a number of weaknesses, gaps, and challenges among our stakeholders. First, UNC-CH students are an ever-changing population and specific information gained through formative research is only temporarily pertinent to our target population. While we learned invaluable information throughout our formative research regarding student beliefs surrounding relationships, the relevance of this information may not be permanent. Constant engagement with new students is crucial to the maintenance of a curriculum suitable to our target population and, given the time and cost, this may be challenging. Our development of process evaluation tools that ask students for feedback about curriculum activities will partially address this challenge.

Second, UNC-CH students experience a variance of competing demands and, given the busy nature of student schedules, involving members of the target population in curriculum activities may prove difficult. This is complicated by the fact that our curriculum will have to compete with existing curricula at UNC-CH (i.e. HAVEN, One Act, Healthy Relationships in LGBTQI Communities). Despite each curriculum having different foci and underlying purposes when compared to each other, an additional program that addresses IPV will be competing for student and other stakeholder time in the context of already busy schedules. Stakeholder engagement also revealed that IPV prevention efforts are not streamlined; rather efforts are disparately conducted. As previously discussed, various groups on campus perform similar violence prevention work, yet they are not fully integrated into a single IPV prevention and response program. A gap and weakness among the institution of UNC-CH, a primary stakeholder, pertains to the lack of centralized leadership in regards to IPV.

Summary of Deliverables

The table below summarizes the full results of our community engagement as well as other deliverables developed by the Capstone team.

<table>
<tr><th colspan="2">Deliverable 1: Literature Review on Predictors of Interpersonal Violence (IPV) and Evidence-Based Interventions (EBIs) to Promote Healthy Relationships</th></tr>
<tr><td colspan="2">Purpose: To identify predictors of IPV and to identify current evidence-based interventions that promote healthy dating relationships and prevent IPV among adolescents, college students, and young adults.</td></tr>
<tr><td colspan="2">Timeline: August 2011 – November 2011 (~4 months)</td></tr>
<tr><th>Methods</th><th>Key Findings</th></tr>
<tr>
<td>- Conducted all searches using PubMed, GoogleScholar, and Web of Knowledge.
- Used various combinations of over 20 words, totaling over one hundred search terms.
- Used search terms, such as “dating abuse college”, “intimate partner violence college”, “relationship satisfaction college” etc., for predictors.
- Used search terms, such as “healthy relationships intervention”, “college students healthy relationships”, “evidence-based interventions relationships college student” etc., for EBIs.
- Considered 62 peer-reviewed articles.
- Organized information from each of these articles, including population, sample size, study design, goals and objectives, intervention description (when applicable), and key findings, in a table (see Appendix 2).
- Synthesized the information from table to a narrative form.
- Wrote-up final literature review that was used to inform constructs that were targeted with our curriculum.</td>
<td>Predictors: We divided predictors of IPV into those targeted by EBIs and those not targeted by EBIs. Predictors found in the literature and targeted by EBIs included gender norms, conflict management, and communication. Predictors found in the literature but not targeted by EBIs included parental influence (i.e. parental relationship violence and parental childhood beating), partner influence (i.e. partner aggression), peer influence, alcohol, emotion (ex. anger and jealousy), personal attitudes (i.e. narcissism and self-esteem), attachment orientation, and stress.

EBIs: Few EBIs targeted college populations specifically. Thus findings were mostly among adolescents and other non-college populations.

None of the EBIs targeted the promotion of healthy relationships specifically. Rather, all EBIs targeted outcomes that fell into one of these categories:
1. Behavioral outcomes: ex. dating violence perpetration and victimization (physical, psychological, and sexual)
2. Attitudinal/Normative outcomes: ex. acceptance of dating violence, attitudes toward sexual coercion, awareness of dating violence, etc.
3. Skills outcomes: ex. communication, conflict resolution, etc.
4. Relationship satisfaction

Intervention components included topics such as: communication (ex. active listening, expressive communication, etc.), conflict management or resolution (ex. negotiation of relationship rules), self-esteem, awareness and knowledge (ex. of dating violence, role of power and control in a relationship, help services, etc.), gender and dating norms, etc.

The intervention components of all EBIs were</td>
</tr>
</table>

	delivered in multiple sessions. The number of sessions ranged from 3-30, with each lasting, on average, three hours. Most EBIs among adolescents were delivered in a school setting; and finally, the didactic methods used (ex. role plays, videos, manuals, etc.) varied widely across studies.

Deliverable 2: Report of Formative Research Findings on Healthy Dating Relationships	
Purpose: To document findings from focus groups with UNC-CH undergraduate students and interviews with UNC-CH staff and staff at neighboring universities about healthy dating relationships	
Timeline: October 2011 – January 2012 (~4 months)	
Methods	**Key Findings**
- Conducted five focus group discussions with UNC-CH undergraduate students, each lasting one hour. - Conducted one 45-minute focus group with approximately 25 UNC-CH CWS staff members. - Conducted six individual interviews with staff at UNC-CH and neighboring universities who were involved in interpersonal violence prevention. Each individual interview lasted 20-60 minutes. - Recruited focus group participants from various student organizations, including sorority groups, and student listservs. Group sizes ranged from 4-12 students per group. A total of 31 students participated. A majority of the participants were female; and participants ranged from first-years to seniors. - Facilitated focus group discussions using an interview guide developed by the Capstone team. Interview guide included questions that asked students to define healthy dating relationships, and to describe their ideal educational program on healthy dating relationships. The interview guide is included in the formative research deliverable. - Conducted six individual interviews with staff at UNC-CH, Duke University, North Carolina State University, and Elon University. - Conducted individual interviews either in person or over the phone. - Asked staff interviewees questions about aspects of healthy relationships among college students; challenges that college students faced regarding dating and relationships; the programs or activities the	According to UNC-CH students, the following factors influenced healthy relationships: self-esteem, self-respect, self-awareness of personal priorities and needs, a sense of individual identity, past relationship experiences, communication skills, alcohol, relationship expectations, balance, peer influence, parental influence, sex ratio at UNC, and "hooking-up" culture (sex-with-no-strings-attached) at UNC. The most pervasive factors were the uneven sex ratio (more females than males) and the hooking-up culture at UNC. According to students, females perceived themselves to have limited options in finding male partners, and thus often settled for relationships that they otherwise would not accept. For example, settling for a casual sexual relationship with a male partner as opposed to a committed and exclusive relationship; thus promoting the "hook-up" culture on campus. Such relationships based on unclear expectations were highlighted by students as inhibiting factors of a healthy relationship. In terms of curriculum delivery, students advocated for a program that was delivered in multiple sessions and taught students concrete or take-away skills (ex. communication skills to end a relationship in a healthy way). This curriculum, ideally, would be interactive, delivered by peer facilitators, and would be encompassing of different types of relationships (i.e. LGBTQI-friendly). To maximize participation, students suggested making the curriculum a requirement. The program could build on another program at UNC-CH such as the first-year orientation (C-TOPS) or the physical education requirement (LFIT). Another suggestion was to deliver the curriculum in residence halls using Resident Advisors (RAs) as facilitators.

interviewees were involved in to prevent IPV or promote healthy relationships; and suggestions for curriculum content, promotion, and delivery. - Wrote-up final formative research report, which documented the findings from all interviews and focus groups.	University staffs consistently echoed aspects of healthy relationships that were also mentioned by students. All of the staff highlighted the importance of good communication skills and strong individual identity in developing a healthy relationship. These interviews also revealed the pervasiveness of the "hooking-up" culture in other college campuses, and its effect on relationships that were similar to those discussed by UNC-CH students. The staff provided suggestions for curriculum delivery that were also similar to those suggested by UNC-CH students. They advocated for a peer-led program that taught concrete skills, continuously engaged students through multiple sessions, and took into account the diversity of relationships on campus. Finally, students and staff both suggested marketing the program in a provocative or "sexy" manner to gain students' attention and interest. For example, incorporating the word "sex" in the title of the curriculum. Other suggestions included delivering the curriculum in a setting convenient to students (e.g. residence halls) and offering incentives for participation such as buttons and t-shirts.

Deliverable 3: Final Conceptual Model to Inform Intimate Partner Violence Prevention Curriculum	
Purpose: To aid in the development of the IPV prevention curriculum. The final conceptual model will include findings from both the literature review and the qualitative research.	
Timeline: January 2012 – February 2012	
Methods	**Key Findings**
See Appendix 4 - Took findings from literature review and focus groups and combined to make one conceptual model. - Evaluated constructs for importance and changeability. Deleted those constructs that could not be feasibly targeted by a curriculum intervention. - Identified constructs from earlier conceptual models that were actually contextual information for addressing constructs (i.e. information to contextualize *how* to address a construct like communication). - Final conceptual model includes only those constructs that will be targeted by the healthy relationships curriculum. - Circulated final model to faculty advisor and community partner for final input.	A number of constructs included in earlier conceptual models were not true constructs appropriate for inclusion in a final conceptual model. Instead, they were contextual factors that need consideration when deciding how to address core constructs. For example, communication is one key construct in the final curriculum conceptual model. Desire from students for information on how to have a healthy break-up and how to discuss relationship expectations represent contextual factors that will inform how the curriculum targets communication. The final model includes these contextual factors, drawn from our formative research, for each targeted construct. The final conceptual model is organized into five constructs to target • Dating Attitudes (referred to as "Values" in

	the curriculum) • Communication • Relationship Norms • Stress Management • Conflict Management

Deliverable 4: Curriculum to Promote Healthy Relationships and Prevent Intimate Partner Violence among UNC-CH Undergraduate Students	
Purpose: To develop a curriculum to promote healthy dating relationships and prevent IPV using findings from the literature review and the formative research	
Timeline: February 2012 – April 2012	
Methods	**Key Findings**
- Translated each construct in the final conceptual model into a Unit in the curriculum. Hence, there are five units in the curriculum for which activities were developed. - Referred to other curriculum, such as the UNC LGBTQI Healthy Relationships curriculum and the Safe Dates curriculum, for ideas on activity components. - Developed purpose and objectives for each unit. - Created a list of topics (referred to as "Sessions" in the curriculum) to be covered in each unit that met the overall purpose and objectives of the Unit. - Developed activities for each session - Incorporated several learning methods (ex. Small group discussions, role plays, videos, free writing, etc.). - Ensured activities in the units built off each other. For example, a free writing activity in the Unit 3: Norms and Dating Abuse was used as the basis for a role playing activity in Unit 5: Communication. - Distributed curriculum to a variety of stakeholders (community partner, faculty advisor, Capstone teaching team, UNC students, UNC administrators, UNC CWS staff) for feedback. - Incorporated feedback into curriculum - Developed process evaluation tools (adapted from the work of Dr. Allan Steckler) for each unit in the curriculum to assess the fidelity, reach, dose delivered and context of the curriculum. These key components of process evaluation will help answer the research question, "To what extent was the curriculum delivered as intended?"	The final curriculum was divided into seven units. The first and last units were the Introduction and Conclusion, respectively. The other five units represented each construct in the final conceptual model, namely Values, Relationship Norms and Dating Abuse, Stress and Relationships, Communication, and Conflict. Below is a summary of each unit, including the sessions and activities in each unit and their purpose and objectives. **Values**: This unit consisted of the 2 sessions: *Personal Values – What do you value?* The purpose of this session is to help participants identify their personal values and to understand how current lifestyle and activities match these values. This session included one activity, namely Values Clarification. *Relationship Values – What do you want in a relationship and in a partner?* The purpose of this session was to help participants identify what qualities they want in a relationship and in a relationship partner. This session included one activity, namely "Must-haves, Preferred, and Deal-breakers." **Norms and Dating Abuse**: This unit consisted of 3 sessions: *Gender, Relationships, and Alcohol Norms*. The purpose of this session is to help students identify how various norms influence their beliefs about relationships and how these norms can fuel dating abuse. This session included four activities, namely Gender Norms, Relationship Norms, Interaction of Gender Norms and Relationship Norms, and Alcohol Norms. *What makes a relationship healthy or unhealthy?* The purpose of this session is to help participants identify

	aspects of healthy and unhealthy relationships. This session included two activities, namely Healthy and Unhealthy Aspects of a Relationship and How Norms and Values Create These Definitions. *Dating Abuse*. The purpose of this session is to teach students about dating abuse and how to help a friend experiencing dating abuse. This session included four activities, namely Dating Abuse Overview, What Dating Abuse Looks Like, How Norms Can Create Dating Abuse, and Seeking Help and/or Responding to Dating Abuse. **Stress and Relationships**: This unit consisted of 3 sessions: *Competing Demands*. The purpose of this session is to teach students about competing demands and the impact of competing demands on their lives. This session included two activities, namely Identifying Demands for Your Time and Impact of Competing Demands. *Impact of Stress on Relationships*. The purpose of this session is to teach students about the impact of stress on relationships. This session included one activity, namely Case Study on Impact of Stress on Relationships. *Coping with Stress*. The purpose of this activity is to help participants develop effective methods of coping with stress. This session included two activities, namely The Five As and Prioritization. **Communication**: This unit consisted of 4 sessions: *Effective Communication*. The purpose of this session is to help participants understand the important aspects of effective communication. This session included one activity, namely Understanding Effective Communication. *Practicing Effective Communication*. The purpose of this session is to provide participants the opportunity to practice communication skills. This session included one activity, namely Putting Communication Skills to Work. *Bringing up Discussion Topics*. The purpose of this session is to teach participants how to bring up topics to discuss with their new or current partner. This session included one activity, namely Bringing up Tough Topics. *Communication During or After a Break-Up*. The purpose

	of this session is to teach participants about unhealthy forms of communication and behaviors to avoid when breaking up with a partner. This session included one activity, namely Communication During or After a Break-Up. **Conflict**: This unit consisted of 3 sessions: *Understanding Conflict*. The purpose of this session is to teach participants about the origins of conflict, constructive responses to conflict, and potential outcomes of conflict. This session one activity, namely Understanding Conflict. *Principles of Conflict Resolution and the 6 Steps*. The purpose of this session is to introduce participants to the 6 steps for conflict resolution. This session included one activity, namely The Six Steps in Conflict Resolution. *Application of 6 Steps to a Conflict Situation*. The purpose of this session is to apply the lessons learned in the previous sessions. This session included one activity, namely Putting Conflict Resolution Skills to Work.

DISCUSSION

Strengths and Limitations of Engagement and Assessment Activities

Community engagement and assessment activities proved useful in determining topics to include in an IPV prevention curriculum and effective ways of facilitating the curriculum. These activities helped determine constructs to target in our curriculum—particularly gender and alcohol norms, dating attitudes, stress management, communication, and conflict resolution. Many of the evidence-based interventions identified in the literature review included examples of activities targeting these constructs. This triangulation of findings from the literature and formative research provides strong evidence for inclusion of these constructs in our intervention. Additionally, both students and staff provided extensive information about how to effectively deliver the curriculum. Our final deliverable detailing the findings of our formative research provides extensive detail on how our engagement impacted curriculum design.

Another strength of our engagement and assessment activities is that we collected information from more than one source. Specifically, we reviewed quantitative data from existing IPV studies and we collected qualitative data from UNC-CH students, UNC-CH staff, and staff at neighboring universities. The

combination of these methods allowed us to provide a strong evidence-base for our curriculum while also ensuring that the curriculum is relevant to and addresses the needs of our population. Additionally, by collecting information from these three distinct groups (i.e. UNC-CH students, UNC-CH staff, and staff at neighboring universities), we were able to gain distinct perspectives about healthy relationships and IPV among college students.

Key limitations in our engagement activities should be noted. First, despite efforts to recruit a diverse group of participants, focus groups were composed primarily of white women. Therefore, our data may lack an adequate diversity in race/ethnicity, sexual orientation, gender identity, and religion. Second, because participation in the focus group was voluntary with few incentives, individuals who agreed to participate were likely motivated by an existing interest in relationship dynamics. Therefore, students participating in focus groups are unlikely to be the students who could benefit the most from the intervention. This limited personal interest in relationship health among some members of the study body may make it difficult to reach certain student sub-populations for 1) their input during curriculum development and 2) their participation in the curriculum activities once it is developed and being fully implemented. Lastly, male participants may have felt pressured to respond in socially appropriate ways because the facilitators were women.

Time was also a limitation. Eng and colleagues suggest that community engagement may take as long as six months to complete (Eng et al., 2005). Without this time, our assessment activities were conducted rapidly, potentially impacting the quality of our engagement. For example, more windshield tours prior to commencing focus groups may have revealed key issues for probing in focus groups, yielding richer data. Focus groups were conducted over the course of three weeks, limiting our ability to effectively recruit a more representative sample of the student body.

Potential Impacts and Benefits

The intended benefit of our IPV prevention curriculum is to enhance the ability of undergraduate students at UNC-CH to develop and maintain healthy dating relationships that do not include IPV. The curriculum will accomplish this by addressing predictors of both healthy relationships and IPV that have been found in the literature and identified through formative research. These include the influence of alcohol and

gender norms, dating attitudes, stress management, communication skills, and conflict management. If our curriculum successfully prevents IPV among undergraduate students at UNC-CH, the negative health outcomes associated with IPV, such as physical injuries, cognitive impairment, illegal drug use, anxiety, and depression, will also be reduced (Amar & Gennaro, 2005; Straight, Harper, & Arias, 2003).

A decrease in IPV at UNC-CH is a long-term goal that will continue beyond the involvement of this Capstone team, but there is potential for more immediate benefit. In addition to the final curriculum, the Capstone team will have completed a written review of the literature on healthy dating relationships and dating violence, a conceptual model to aid future planning and evaluation, and a written report on formative research with key stakeholders and constituents of the campus community. These resources will be provided to Counseling and Wellness Services and will be on record in the UNC-CH Health Science Library to inform future efforts, including funding proposals, to prevent dating violence and promote healthy relationships at UNC-CH. These resources would also inform the evaluation of the curriculum, which would be carried out by the 2012-2013 Capstone team.

As a result of our recruitment and outreach efforts, including campus-wide e-mails, meetings with UNC-CH staff, and visits to undergraduate classes, sororities and living communities, we increased visibility of the interpersonal violence prevention office and awareness of the subject of healthy dating relationships among college students. In addition, we hope our engagement with students during formative research facilitated relationships between CWS and student groups that will persist beyond our initial involvement. These relationships will be important for ongoing recruitment and advertising of program activities.

Lessons Learned & Challenges

Throughout the Capstone experience, we encountered a number of challenges. These challenges presented an ideal opportunity to enhance our skill set by testing our ability to adapt and apply our knowledge of theory and research methods to "real-world" situations. Below, we outline a few of these challenges and the resulting lessons learned.

Defining an Outcome: Our Capstone community partner initially requested that we developed a curriculum to promote healthy relationships that would complement current campus programs on bystander

interventions (One Act) and IPV response (HAVEN). This request informed the development of our interview guide for focus groups across campus. Questions sought to understand what students defined as a healthy relationship and what factors supported or hindered such a relationship. However, we found that the literature barely examined predictors of a healthy relationship. Instead, most of the literature addressed predictors of physical, psychological, and sexual violence by an intimate partner. We expect this was the case for two primary reasons: 1) Public health often seeks to design interventions that reverse or prevent negative health outcomes. As a result, the published literature largely focuses on the measurement of such negative outcomes. 2) Researchers have better tools for measuring intimate partner violence than they do a more abstract concept like healthy relationships (Foshee, personal communication, January 25, 2011).

As a result, the two stages of our formative research provided data on separate health outcomes. That is, the primary health outcome discussed in the literature review and evidence-based interventions was dating violence; whereas the health outcome we focused on during community engagement with UNC students and staff was healthy relationships. This made it difficult to combine the results into a single conceptual model to inform the development of the final curriculum. We could not assume that the absence of predictors of violence would result in healthy relationships, or that the presence of healthy relationship predictors would prevent violence. To overcome this challenge, we identified common constructs that emerged in both stages of formative research and used these constructs to develop the final conceptual model.

This process taught us an important lesson about ensuring consistency in study outcomes and research questions even in early stages of formative research. For example, if a literature review searches for interventions targeting a particular health outcome, this outcome should also serve as the basis for focus group interviews. To achieve this consistency, it is critical to ensure research questions are clear at the outset of formative research activities. Additionally, assessing the literature prior to developing interview guides will ensure that outcomes documented in the literature are the same explored in focus groups guides.

Formative Research - Focus Groups: At the outset of our formative research, we brainstormed a diverse array of recruitment methods to ensure that we recruited a sample of students that was as

representative of the general UNC-CH student body as possible. This included outreach to specific student groups and student centers, campus wide e-mails, and visits to individual classrooms. However, many of these mechanisms failed to recruit the breadth of students we had hoped. As discussed earlier in this document, our final sample was overwhelmingly white and female.

This taught us an important lesson about the amount of time required to properly recruit a representative sample and the necessity of more aggressive recruitment methods for focus groups, particularly for minority populations. Ultimately, we leave this Capstone experience with a firm appreciation of the need to weigh rapid data collection against the fact that such data is likely to be less representative of the target population.

Formative Research - Literature Review: Within days of beginning our literature review, it was clear that the literature on dating abuse was quite large and that the review could pursue a number of goals including review of evidence-based interventions, predictors of violence, and predictors of relationship satisfaction. We took a number of steps to narrow our review.

We first sought to identify evidence-based interventions in college populations. However, we found that few interventions had been evaluated (n=2), so we broadened our search to middle and high school-aged children and to young adult (21+) populations. Next, we decided to review the literature on predictors of dating abuse in college populations given the paucity of EBIs. This would allow us to see if EBIs with non-college populations targeted constructs that were important for our target population. Once this approach was decided, we were able to move forward more efficiently. Through this process, we learned an important lesson about having a clear research question for a literature review and remaining flexible to alter that question if the literature is not at a stage that the question can be satisfactorily answered.

Developing a Conceptual Model: At the end of each stage of formative research, we developed a conceptual model to reflect our findings. At first, these models were dense, including every predictor that emerged in the literature or in the interviews. This approach ensured that the model fully reflected our findings, but also yielded an unwieldy conceptual model that could not be easily translated into a concise curriculum. Following consultation with our faculty advisor and community partner, our team simplified

these two models and merged them into a single model with seven constructs to target with our curriculum (Appendix 4). Reaching this concise model required a number of steps.

First, we divided the predictors in our model into constructs and contextual factors. This was necessary because many of the findings of formative research that we included as predictors in our first conceptual model were in fact contextual factors that would help us to target key constructs in ways that are meaningful and relevant for UNC-CH students. We then assessed which constructs were feasible for inclusion in the curriculum. To do this, we applied the prioritization principles of PRECEDE-PROCEED, a model for planning public health programs, to assess the importance of the construct, as well as its changeability (Green & Kreuter, 2005). Those constructs that ranked highly in both criteria were included in the final conceptual model that offered a clear guide for curriculum development.

Although a difficult process, overcoming this challenge was an important learning experience about balancing a desire to address all predictors against the reality of what one intervention can achieve. It is also worth noting that, although unintentional, through this process we achieved a final conceptual model that loosely paralleled the Theory of Planned Behavior. This theory posits that behavioral attitudes, norms, and perceived control predict an individual's intention to perform a given behavior. In turn, this intention is predictive of actual behavior (Glanz, Rimer, & Viswanath, 2008).

Curriculum Development – Content: When commencing curriculum development, we were keenly aware that our team had limited skills in curriculum development. With this knowledge, we hoped that some of the evidence-based interventions we reviewed could help inform our intervention development and requested copies of these curricula. Unfortunately, this effort was largely unsuccessful because most authors requested payment for access to the curriculum.

We overcame this challenge in a few ways. First, while we were only able to obtain materials from three EBIs, we were able to obtain curricula for a number of interventions that have not been evaluated in peer-reviewed literature. Some of the activities and content in these curricula can be applied to our prioritized constructs. Second, two members of our team have taken a HB course that builds skills in designing and facilitating trainings that employs adult learning principles and a variety of teaching methods. Referring to

these course materials and applying these skills vigorously assisted in curriculum development. Finally, our Capstone partner and faculty advisor emphasized that with a robust and evidence-based conceptual model as a base we can trust our own intuition for developing individual activities, based on our formative research.

Other lessons learned in developing the curriculum include the following: 1) We learned the importance of drawing upon existing resources to develop curriculum activities, while also including our own ideas, as opposed to "reinventing the wheel". This produced a stronger document and proved to be time efficient, 2) We learned the value of obtaining feedback on the curriculum from a variety of stakeholders, such as students and CWS staff. This ensured that the instructions provided in the curriculum were adequately clear and that the language was age-appropriate and inclusive of all types of relationships, and 3) We learned the importance of having clear learning purpose and objectives for each unit in the curriculum, making it easier to develop activities that targeted specific outcomes.

Curriculum Development - Institutional Barriers: Another challenge in curriculum development was the reality of institutional challenges that limited our ability to address some formative research findings regarding delivery. For example, students recommended that the curriculum be translated into a required course on healthy relationships for all incoming first year students; at this stage in intervention development, such strong institutionalization steps are not feasible. We had a number of conversations with our community partner to ensure that our final curriculum was not only responsive to student recommendations, but also feasible for sustainable implementation. Final decisions regarding how to reach a large number of the student population with the curriculum have yet to be made.

Considerations for Sustainability

Based on the above review of factors that may influence the sustainability of a healthy relationships curriculum at UNC-CH, we believe it is possible to institutionalize the curriculum and its facilitation on campus. In the results section of this report, we discussed a number of steps we took to increase the likelihood of sustainability. Here we outline additional recommendations to continue work towards this end.

First, UNC-CH students, as well as organizations and individuals working in violence prevention, should continue to be actively engaged in refining and testing the curriculum. They should be asked to review

the completed curriculum and participate in pilot activities. Participation in these pilot activities could be in-person, by word-of-mouth, through social media, or via the student newspaper. This engagement will build a supportive environment for program sustainability by ensuring that the curriculum and its implementation will meet the stated needs of the campus community and that the project's long-term success is viewed as the collective responsibility of the campus. Further, as stated earlier, the ever-changing nature of the UNC-CH student body make this constant engagement the more necessary so as to ensure that the curriculum is suitable for the target population at any given point in time.

Second, efforts to recruit student participants, as well as curriculum facilitators, should be student led, mitigating the extent to which program sustainability would be impacted by staff changes. Towards this end, we have developed a detailed facilitation guide to further minimize program interruption during such changes. To mitigate the impact of budget cuts, we have limited the number of physical resources required for facilitation of the curriculum. Supplementary resources for students should be placed online to limit costs for such materials.

Third, to address sustainability challenges in the organizational and community settings, we recommend initiating efforts to raise campus awareness about the curriculum and the benefits of healthy relationships for IPV prevention. This can be done in a variety of ways including advertisement on various University and student group websites and op-eds in the student newspaper. An increased awareness of the prevalence of dating abuse among students will motivate them to participate in our training. Heightened awareness and active participation in the training will increase student buy-in and help build demand for institutionalization by University administration. High-level University administrators will also be reached through op-eds and can be further persuaded in meetings with UNC-CWS to provide sustained funding for the Interpersonal Violence Prevention Office and the healthy relationships curriculum.

Finally, there are a number of steps the University could take to help sustain this and other IPV prevention programs. These steps include formally funding all staff positions within the Interpersonal Violence Prevention Office and centralizing violence prevention efforts in a single unit. Achieving a centralized prevention effort could involve a meeting with representatives from the different university programs mentioned earlier that are involved in reducing violence on campus. This meeting can ensure that efforts by

each program are not being duplicated and that limited resources are being used efficiently. Additionally, as described above, the lack of accurate surveillance data on dating abuse at UNC-CH will impede efforts to evaluate the impact of the curriculum and to advocate for its institutionalization. Efforts should be taken to improve surveillance of IPV at UNC-CH. This could be achieved by adopting a system for formalized surveillance of IPV, or through integration of IPV into existing public health surveillance on campus.

CONCLUSIONS AND RECOMMENDED NEXT STEPS

As discussed in this document, dating abuse is a growing problem on college campuses. Evidence-based interventions using school-based curriculums have successfully prevented psychological, sexual, and physical dating abuse among high school and college students. This evidence served as the basis of our Capstone efforts over the 2011-2012 school year.

Guided by Dr. Pleasants and Dr. Foshee, we developed a curriculum to promote healthy relationships and prevent IPV among undergraduate students at UNC-CH. This curriculum targets five key constructs — dating attitudes, norms related to gender and alcohol, stress management, communication, and conflict resolution. The identification of these constructs was a collaborative process that involved extensive formative research. Engagement of stakeholders including UNC-CH administrators and students, and peer institution staff working in IPV prevention, was critical to this process. Stakeholders played a role in both formative research and in review and improvement of the final curriculum.

With the completion of this curriculum, the following steps are necessary to move the curriculum from its current state to full-scale implementation and evaluation:

1. Decide on curriculum delivery method. In our work, we provided a number of suggestions for delivery, which were derived from students, staff, and published literature (see "Summary of Deliverables"). These findings should serve as the basis for further research and decision-making. Curriculum stakeholders, including CWS staff, UNC-CH students, and UNC-CH administration, should be convened to explore these findings in greater depth and to make joint-decisions about delivery. Involving this cross-section of stakeholders will ensure that the demands of feasibility are balanced against those of student interest and administration support.

2. Tailor curriculum to delivery method. The curriculum created by this Capstone team is comprehensive and covers, in-depth, many of the constructs identified in our formative research. As such, the curriculum is lengthy and designed for delivery over multiple sessions. Once decisions on delivery methods are made, this curriculum should be tailored appropriately. Such tailoring should be sure to adhere to the original curriculum conceptual model (i.e. address all constructs in the conceptual model) even if actual activities are curtailed. All key stakeholders should review this tailored curriculum to ensure their support for this new version.
3. Pilot test the curriculum. The tailored curriculum should be pilot-tested with UNC-CH undergraduate students. A cross-section of students should be recruited for participation. As noted here, concerted efforts should be made to ensure that the participants represent the true diversity of the UNC-CH student body. Special recruitment should target African American students and LGBTQI students. The process evaluation measures included in the curriculum should be used as part of these pilot tests to ensure their feasibility. The curriculum should be revised based on the pilot test findings.
4. Recruit a more representative student-body sample. Any engagement of students in the implementation and evaluation of the curriculum should incorporate a more diverse sample of students, with special attention paid to students of color and students with different sexual orientation, political beliefs, and religious backgrounds. Student groups such as African-American sororities and faith-based organizations could be targeted specifically for this purpose. Additionally, targeting a cross-section of departments, such as Women's Studies or Sociology, to offer class credit incentives for focus group participation could mitigate self-selected participation. Lastly, considerations for sufficient time to recruit such a sample should be made.
5. Create an implementation plan. After the curriculum has been pilot tested, a full implementation plan should be created in consultation with UNC-CWS, the stakeholder with ultimate responsibility for implementation.
6. Create an outcome evaluation plan. An outcome evaluation assesses whether the curriculum changed relationship attitudes and skills or reduced IPV on campus. The references in the literature review

completed by this Capstone team may be used as a source for identification of outcome evaluation measures. It should be noted that UNC-CH does not currently have strong surveillance methods for tracking physical, verbal, and sexual dating abuse on campus. Until these methods are improved, it may be difficult to assess how the curriculum impacts trends in dating abuse on campus. However, as mentioned earlier, the results of the outcome evaluation, as well as the process evaluation, can be used to argue for the institutionalization of the curriculum despite budget cuts.

We hope that our final four deliverables, summarized in the Summary of the Deliverable table, and these recommended next steps outlined above will enable the 2012-2013 UNC-CWS Capstone team to carry out the process and outcome evaluation adequately and efficiently. Given the paucity of interventions that specifically target college students, the results of this process and outcome evaluation will contribute to the evidence-base for preventing dating violence and promoting healthy relationships among this population.

APPENDIX 1: FINAL CAPSTONE WORK PLAN

UNC-Counseling and Wellness Capstone Work Plan
Spring 2011

A. Capstone Team Members

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B. Working Title

Please provide a working title that describes the population, setting, health topic(s), and major deliverable(s) you will be working on. E.g., Evaluation and Adaptation of a Reproductive Health Peer Education Curriculum for NC Latino Youth.

Development of a Curriculum to Promote Healthy Partner Relationships among Undergraduate Students at UNC-Chapel Hill

C. Capstone Project Description

*In narrative format, please describe the significance of the **health problem(s)** the Capstone project aims to address. Describe the **population** that will benefit from the Capstone project work. Describe the **setting** that will be impacted by the Capstone project work. Describe the **methods** that the Capstone team will use to address the health problems. (1-2 paragraphs)*

There is growing evidence that college students experience abuse and physical violence within relationships, also referred to as intimate partner violence (IPV)[3,4,5]. In response to this growing trend, UNC-CH Counseling and Wellness Services (CWS) seeks to develop an education program to promote the development of healthy relationships and the prevention of abuse among undergraduates. The HB Capstone team will partner with CWS to advance these efforts.

Specifically, the Capstone team will review existing evidence on IPV in college settings and use qualitative research methods to assess current need for healthy relationship skill development amongst UNC-CH undergraduate students. This research will act as the foundation of a curriculum to promote healthy relationships and prevent abuse. A directory of resources, educational materials and process evaluation tools will be components of this curriculum. The curriculum will complement CWS' ongoing interpersonal violence prevention programs, HAVEN and ONE ACT.

D. Deliverables & Activities

Please list all Capstone deliverables and their purposes; the activities necessary to complete them; and the timeline for completing them.

Deliverable I: Literature Review
Purpose: To identify predictors of intimate partner violence amongst undergraduate

[3] Shook, N., Gerrity, D., Jurich, J., & Segrist, A. (2000). Courtship Violence Among College Students: A Comparison of Verbally and Physically Abusive Couples. *Journal of Family Violence, 15*(1), 1-22.

[4] Straus, M.A. (2004). Prevalence of Violence Against Dating Partners By Male and Female University Students Worldwide. *Violence Against Women, 10*, 790-811.

[5] Neufel, J., McNamara, J.R., & Ertl, M. (1999). Incidence and prevalence of dating partner abuse and its relationship to dating practices. *Journal of Interpersonal Violence, 14,* 125-137.

students, as well as current evidence-based interventions to promote healthy partner relationships.	
Project Lead: Ije Okereke	
Due Date: December 16, 2011	
Activity	***Approximate Activity Timing***
Identify search key words	September 2, 2011 (complete)
Identify inclusion criteria for studies to be used in literature review	September 2, 2011 (complete)
Use internet search (PubMed, Google scholar, etc.) to identify eligible studies on practices in healthy partner relationships and practices in primary prevention of intimate partner violence. Explore both EBIs and predictors of IPV in college populations.	September 26, 2011 (complete)
Create spreadsheet of the study population, key findings, and conclusions of each article	September 26, 2011 (complete)
Review UNC CWS and ACHA/NCHA findings about IPV at UNC-CH.	October 5, 2011 (complete)
Use findings to write a literature review and develop a preliminary conceptual model.	December 16, 2011 (writing complete, conceptual model pending)

Deliverable II: Institutional Review Board Application	
Purpose: To obtain IRB approval for the completion of formative research using focus groups.	
Project Lead: Rachel Larsen	
Due Date: November 30, 2011	
Activity	***Approximate Deadline***
Develop research questions	September 2, 2011 (complete)
Develop recruitment strategy	September 5, 2011 (complete)
Develop interview and focus-group guides	September 7, 2011 (complete)
Submit completed IRB application to FA and CP for review.	September 7, 2011 (Comments to be returned by COB September 9th). (complete)
Complete IRB application to meet IRB September submission deadline	September 12, 2011 (complete)

Deliverable III: Report of Formative Research	
Purpose: To document the findings from focus groups with UNC undergraduate students about the promotion of healthy relationships on campus. The report will also document key findings from an informal meeting with Counseling and Wellness Staff and telephone interviews with key stakeholders at peer institutions.	
Project Lead: Carlee McConnell	
Due Date: December 16, 2011	
Activity	***Approximate Deadline***
Begin Recruitment (Including outreach to resident advisors, sororities/fraternities, athletes and LGBTQI students. We will also ask for recruitment assistance from colleagues with UNC-CH contacts)	October 10, 2011 (complete)
Hold 4 focus-groups	October 14-28, 2011 (5 focus groups completed)
Interview key stakeholders at UNC and at peer institutions.	October 14-November 15 (complete)
Transcribe focus-groups and interviews (should occur simultaneously with data collection)	November 4, 2011 (complete)
Code the transcriptions	November 18, 2011 (complete)
Analyze coded data	December 2, 2011 (complete)
Write report of findings	December 16, 2011 (complete)

Deliverable IV: Final Conceptual Model	
Purpose: To aid in the development of the curriculum. The conceptual model will be drafted based on information from the literature review and will be used to inform qualitative research. The final conceptual model will include findings from both the literature review and the qualitative research.	
Project Lead: Team	
Due Date: December 16, 2011	
Activity	***Approximate Deadline***
Develop conceptual model based on formative research findings	December 16, 2011 (complete)
Merge literature review/formative research conceptual models into a single model	January 15, 2011 (complete)

Deliverable V: Draft of Curriculum
Purpose: Use findings from the literature review and the formative research to develop a curriculum about healthy partner relationship promotion and abuse prevention,

including education materials, directory of resources, and process evaluation tools.	
Project Lead: Petra Stankard	
Due Date: March 1, 2011	
Activity	***Approximate Deadline***
Develop curriculum outline targeting the key constructs in the final conceptual model	January 30,2012 (complete)
Identify key process evaluation indicators based on curriculum outline	February 10, 2012
Develop educational materials to be used in the curriculum.	February 20, 2012
Completed list of resources for inclusion in curriculum	February 20, 2012
Develop process evaluation tools.	March 1, 2012
Completed curriculum	March 1, 2012

Deliverable VI: Reviewed and Revised Curriculum	
Purpose: To gather input on the draft curriculum from UNC-CH students and staff and to revise the curriculum based on this feedback. This will ensure the curriculum meets students' needs and is positively received by the student body.	
Project Lead: Lesley Copeland	
Due Date: April 10, 2012	
Activity	***Approximate Activity Timing***
Identify students and staff to review draft curriculum	March 14, 2012
Develop questions to guide curriculum review	March 21, 2012
Circulate draft curriculum	March, 23, 2012
Review feedback from UNC-CH students and staff	April 3, 2012
Incorporate feedback into a final curriculum deliverable	April 18, 2012

E. Important HB Principles

a. Theory-Grounded

Please explain how the Capstone project work will be grounded in theory.

We will draw from theories such as the health belief model, social cognitive theory, and theory of planned behavior to inform the development of our interview guides, the project conceptual model and the final curriculum.

Specific theories will be identified as the literature review and formative research are completed and will be reflected in our final conceptual model.

b. Evidence-Based

Please explain how the Capstone project efforts will be evidence-based.

In order to create a healthier campus and increase student success, the Capstone project will develop a curriculum using any existing evidence-base on interventions for healthy relationship promotion and the primary prevention of abusive relationships. The literature review demonstrated that evidence-based interventions in a college-population are few. However, EBIs among teens and young adults will also guide our work. The literature review also found key predictors in college populations that will help determine which aspects of teen/young-adult EBIs are appropriate for adaptation to the college setting.

c. Participatory

Please explain how the Capstone project efforts will involve the intended audience.

The Capstone team will focus on outreach to student groups in order to conduct formative research to inform the development of the curriculum. To do so will require Capstone team members to establish rapport and feel comfortable conversing with undergraduate students.

The Capstone Team will reach out to a number of campus stakeholders to make them aware of our work and facilitate focus group recruitment. This will include athletes, greek communities, various dorm communities, LGBTQI students, students of color and students already engaged in IPV efforts at UNC- CH. It will also include stakeholders at peer institutions who work in IPV prevention and sexual assault response.

Capstone team members will subsequently develop and pilot a curriculum. Efforts will be made to engage the target population in every step of the curriculum development.

d. Public Health-Oriented

Please explain how the Capstone project work will impact public health.

Counseling and Wellness Services (CWS) is committed to providing "culturally-competent service through a continuum of wellness promotion and psychological services to enhance the lives of students and promote social, personal, and academic growth." An integral part of its wellness promotion initiatives is the focus on sexual assault, relationship violence, and stalking prevention. As a part of this initiative, the Capstone project will work to increase healthy relationship skills among students and positively impact the health and well-being of UNC students.

e. Attention to the Potential for Sustainability and Dissemination

Which project outputs should be sustained after the Capstone project ends, how, and by whom? How will you share outcomes with stakeholders, relevant institutions, organizations, and individuals?

The UNC Counseling and Wellness Center has an existing infrastructure to implement this curriculum (i.e. HAVEN and One Act). As a result, we expect sustainability of the curriculum to be high as it will be implemented within this structure. Additionally, our sustainability plan will outline further steps that can be taken to ensure the intervention is sustained.

The Capstone team will not be responsible for dissemination of the curriculum because implementation and outcome evaluation is not included in the activities. As a result, no findings will be available for dissemination. However, the Capstone team may disseminate findings of the literature review through peer-reviewed publication.

F. IRB Implications

Will you be conducting secondary data analysis or primary data collection? Do you plan to pursue additional activities with the same information for dissemination (e.g., conference paper, article)? Please refer to the IRB Guidance for Student Research and Class Projects document to determine whether or not you will need to do an IRB.

The Capstone project will involve both secondary data analysis and primary data collection. Team members will be conducting research that involves direct interaction with individuals, or data from human subjects for which the researchers will have access to identifiers. IRB approval is required.

We received IRB approval to review data collected by CWS regarding abuse on campus. We submitted an IRB application for our formative research, but when we were asked to go to full board review, we decided to withdraw the application and move forward as a class project because we did not plan to publish or disseminate the formative research findings. Our faculty advisor and community partner concurred with this decision.

G. Roles & Responsibilities

The Capstone has four stakeholder groups: students, community partners, faculty advisers, and the HB Department, as represented by the Capstone teaching team. The roles and responsibilities for each of these groups are outlined in Appendix A. The student team has identified the following team members for the roles listed below:

a. Teaching Team Liaison: **Ije Okereke**
b. Mentor (Community Partner and Faculty Adviser) Liaison: **Petra Stankard**
c. Department Liaison: **Rachel Larsen**
d. Undergraduate Liaison: **Lesley Copeland**
   (The undergraduate liaison will be responsible for coordinating the working relationship with undergraduate students who participate in the project through Dr. Pleasants' class.)

H. Resources

a. Capstone Site Resources

The HB department will reimburse up to $100 of expenses relating to the direct activities necessary to carry out the established deliverables of the Capstone team.

The Capstone team will need printing services and supplies for focus groups. CWS will provide funds to purchase pizza as a focus group incentive.

b. Capstone Partner Key Personnel

Please use the table below to identify key personnel (besides the community partner) at the Capstone organization/agency who will interact with the Capstone team.

Name, Degree(s)	Title	Relationship to Capstone Team	Communication Plan
Kelli Raker, MA, Rape Prevention Education Coordinator, UNC Counseling and Wellness (CWS)	Rape Prevention Educator and Coordinator	Involvement in recruiting students for focus groups, helping team understand current CWS projects	As needed, to be determined by Community Mentor
Marianna Garretson, MPH, Associate Director of Evaluation and Dissemination, Injury Prevention Research Center (IPRC)	Injury Prevention Research Center	Consultation as needed; helping team understand current CWS and IPRC Projects	As needed, to be determined by Community Mentor

c. Consultants on Call

Do you require any special expertise beyond what will be provided by your community partner, faculty, adviser, and the teaching team? If so, please use the table below to identify any faculty, adjunct faculty, alumni, PhD students, or other public health professionals who might be able to lend their expertise to the project.

Name, Degree(s)	Title	Area(s) of Expertise
N/A	N/A	N/A

d. Other?

Please describe any other assets available to the team.

N/A

I. Logistical Considerations

a. Timing

Are there any timing considerations that will be important for the student team to be aware of when working on this project and its deliverables?

Establishing buy-in and investment from the students who will inform the project may be challenging. The Capstone team will need to prepare for this difficulty by allotting sufficient time to recruit participants, and conduct formative research. CWS will assist in recruitment of focus group participants to assist the Capstone team in overcoming this challenge. This will include putting the Capstone Team in touch with key contacts in sororities, residence halls, athletics and the LGBTQI center. The provision of these introductions will be a critical component of our successful recruitment efforts. In addition, the Capstone team must be aware of the sensitive nature of working with individuals who have experienced abusive relationships.

b. Travel

What special travel considerations exist for the student team? If travel is required, who is covering that expense?

There will be no travel outside of the UNC/Chapel Hill area for this project. In the unlikely event that travel outside this domain is required, fuel and vehicle access will be provided by the UNC's Motor Fleet. In the event these services are not provided directly, students will be reimbursed the full amount of travel expenses related to the project.

c. Other

Are there any other important issues that the Capstone team (students, faculty adviser, and community partner) or teaching team should know about this Capstone project and/or the deliverables?

N/A

J. Permissible Uses of Information

a. Ownership of the Deliverables

The Capstone partner owns the final deliverables. However, HB reserves the right to publicly list the organization as a Capstone partner, to keep copies of all Capstone teams' final deliverables for review by the HB community, and to include a brief project description in Capstone promotional materials. Please explain the degree to which students will be allowed to use the work produced in pursuit of their educational or professional careers (e.g., thesis, dissertation, manuscript). Describe the procedures for obtaining approval to disseminate the Capstone project deliverables. If there are certain data or products that cannot be disseminated, please list them here.

Students reserve the right to access all final deliverables. The use of these deliverables through any outlets, such as thesis, dissertation, or manuscript, is contingent on the approval by a predetermined UNC faculty, an approved representative of the UNC Counseling and Wellness Services, and Capstone team members.

b. Authorship

What are your plans for authorship if you produce publishable materials?

If published, the Capstone students assigned to the specific deliverable will be included as authors, if their work is of suitable quality. Other Capstone team members could potentially receive co-authorship for a publication, if their contribution warrants authorship.

c. Use of Recorded Materials

Who (e.g., Capstone partner, HB, students) can use the photographs, recordings, interviews, or auditory recording created by HB MPH Students during their Capstone projects?

In accordance with IRB requirements, IRB-approved staff will have access to these materials for project purposes only. The Capstone team and approved UNC Counseling and Wellness Services staff will have ownership over any recorded materials generated from Capstone project work. The department of Health Behavior at UNC cannot use recordings or interview transcripts.

APPENDIX 2: TABLE OF EVIDENCE-BASED INTERVENTIONS

	College-Specific		Behavioral Outcomes			Attitudinal Outcomes				Skills Outcomes			Other	
	Schwartz 2004	Woodin 2010	Foshee 98/00/04	Wolfe 2003	Wolfe 2009	Jaycox 2006	Avery-Leaf 1997	Pacifici 2001	MacGowan 1997	Antle 2010	Halford 2001	Markman 1988	Halford 2004	**Total**
STUDY DESIGN														
Randomized Controlled Trial	X	X	X	X	X	X		X	X		X		X	10
Quasi-Experimental							X					X		2
Pre-Experimental										X				1
STUDY POPULATION ***indicates inclusion of only individuals at high risk of abuse perpetration or victimization***														
Middle School			X			X			X					3
High School				X*	X		X	X		X				5
College	X	X												2
Young Adults (21+)											X	X	X*	3
GOAL OF INTERVENTION														
Prevent partner aggression		X												1
Stop or reduce dating abuse perpetration			X	X	X									3
Stop or reduce dating abuse victimization			X	X	X									3
Reduce attitudes supportive of dating violence			X			X	X	X	X					4
Improve communication skills										X	X	X	X	4
TARGETED CONSTRUCTS														
Communication														
Communication Styles	X				X									1
Communications Skills (incl. active listening, expressing emotion)	X		X	X	X		X	X	X	X	X	X		10
Communication Topics (i.e. expectations)								X			X	X		3
Conflict Resolution														
Conflict Resolution/Management	X	X	X	X			X		X	X	X	X	X	10

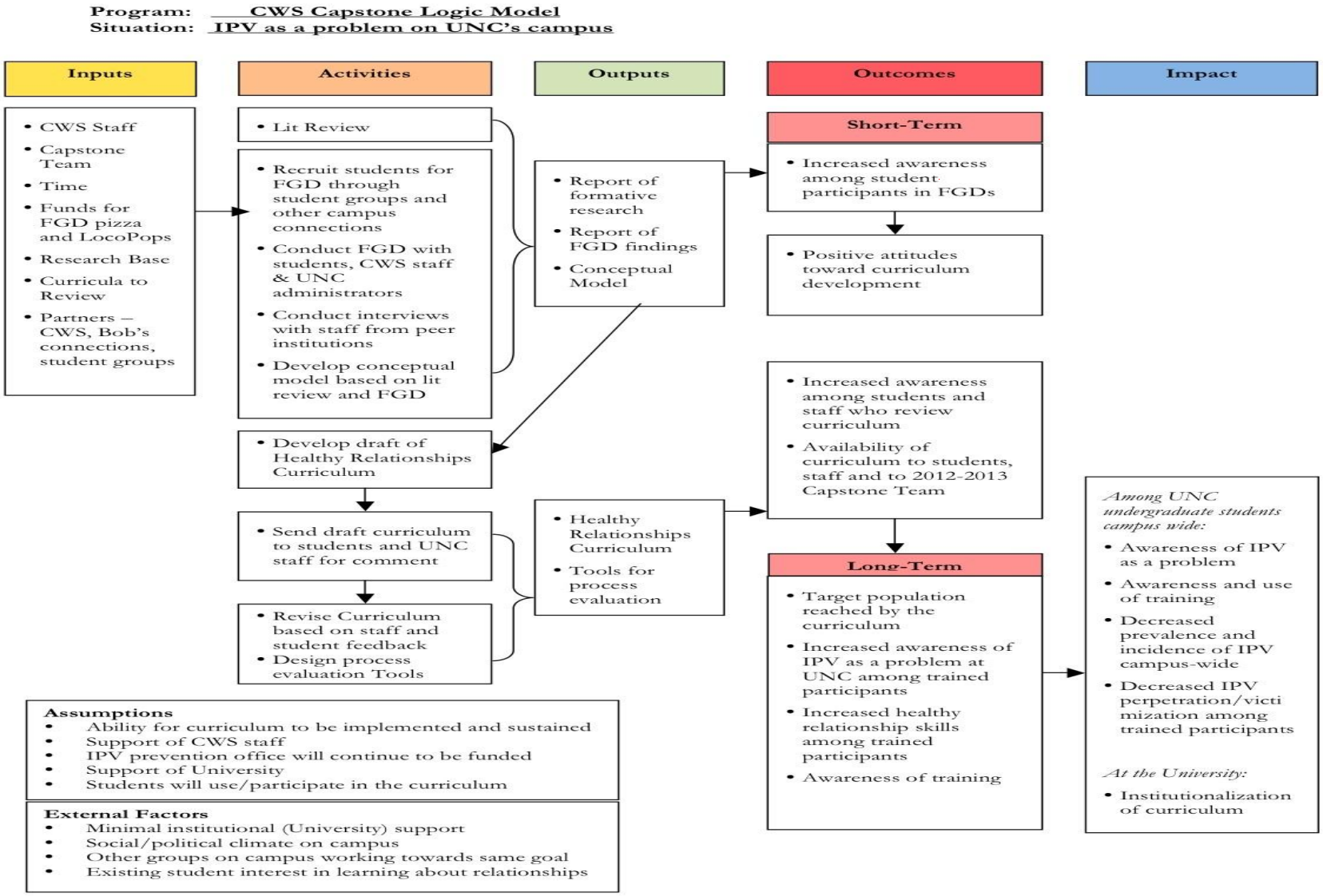
	College-Specific		Behavioral Outcomes			Attitudinal Outcomes				Skills Outcomes			Other	
	Schwartz 2004	Woodin 2010	Foshee 98/00/04	Wolfe 2003	Wolfe 2009	Jaycox 2006	Avery-Leaf 1997	Pacifici 2001	MacGowan 1997	Antle 2010	Halford 2001	Markman 1988	Halford 2004	**Total**
Awareness/Knowledge														
Dating/Gender-Based Violence Awareness	X			X	X	X			X					5
Awareness of sexual coercion and physical assault						X		X						2
Knowledge of Relationship Rights and Responsibilities/Recognizing Healthy & Unhealthy Relationship Patterns				X	X	X			X	X				5
Awareness and Identification of underlying thoughts/opinions that contribute to violence. (i.e. power and control/gender inequality in relationships)	X						X	X	X		X			5
Awareness of services/Identification of Help Services and Resources			X	X	X	X	X		X					6
Belief in Need for Help			X											1
Awareness of IPV legal issues						X								1
Sensual/Sexual/Intimacy Education											X	X	X	3
Self-Esteem & Dating Abuse	X								X					2
Relationship Assessment														
Skills for Self-Evaluation in Relationships												X	X	2
Assessing how a relationship would respond to stress													X	1
Skills for building intimacy (providing partner support, affection, participating in shared activities)													X	1
Norms (Gender/Dating)														
Dating Violence Norms			X											1

	College-Specific		Behavioral Outcomes			Attitudinal Outcomes				Skills Outcomes			Other	
	Schwartz 2004	Woodin 2010	Foshee 98/00/04	Wolfe 2003	Wolfe 2009	Jaycox 2006	Avery-Leaf 1997	Pacifici 2001	MacGowan 1997	Antle 2010	Halford 2001	Markman 1988	Halford 2004	**Total**
Societal Influences and Myths that Contribute to IPV Attitudes and Beliefs				X	X									2
Gender Stereotyping or Patterns/Sex Role Rigidity	X		X	X	X						X			4
OUTCOMES														
Perpetration														
Reduced physical aggression		X												1
Decreased physical dating abuse			X	X	X									3
Decreased psychological and sexual abuse			X											1
Victimization														
Decreased sexual abuse			X											1
Reduced physical and psychological dating abuse				X										1
Norms (Gender/Dating)														
Decrease in acceptance of stereotypical and traditional gender norms	X													1
Decrease in gender-role conflict	X													1
Reduced acceptance of female psychological aggression		X												1
Reduced acceptance of male psychological aggression		X												1
Reduced acceptance of female-on-male dating violence						X								1
Reduced supportive attitudes toward sexual coercion (i.e. rape myth acceptance, adversarial sexual beliefs, and sex role stereotyping)								X						1
Increased agreement with statements that characterize some forms of non-physical violence as abuse									X					1

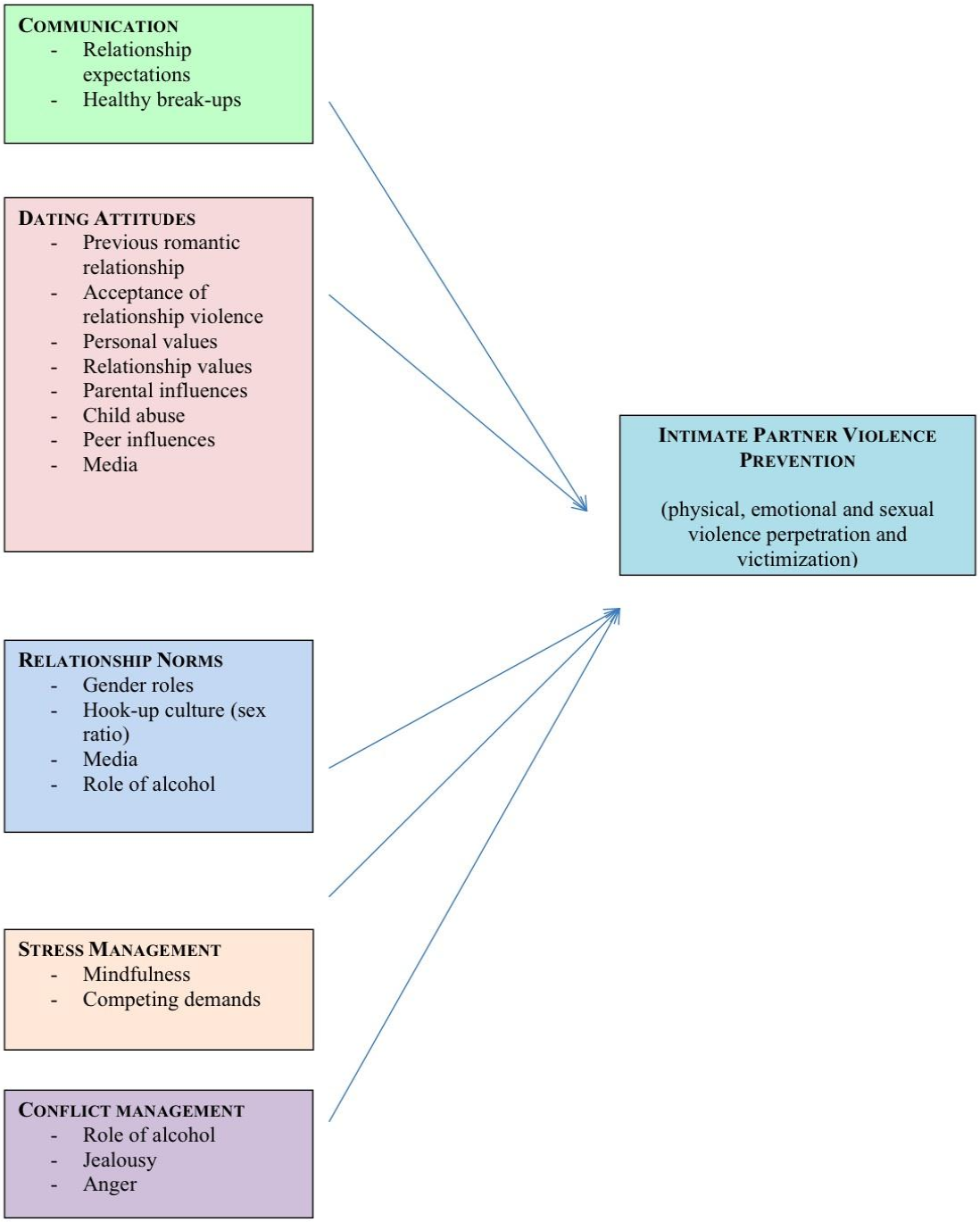
	College-Specific		Behavioral Outcomes			Attitudinal Outcomes				Skills Outcomes			Other	
	Schwartz 2004	Woodin 2010	Foshee 98/00/04	Wolfe 2003	Wolfe 2009	Jaycox 2006	Avery-Leaf 1997	Pacifici 2001	MacGowan 1997	Antle 2010	Halford 2001	Markman 1988	Halford 2004	**Total**
Less acceptance of dating violence during an argument							X							1
Conflict Resolution														
Improvement in anger-management skills	X													1
Improvement in conflict resolution skills										X				1
Communication														
Decrease in the use of demand/withdrawal communication										X				1
Decrease in mutual avoidance pattern of communication										X				
Relationship Characteristics														
Maintenance of higher levels of relationship satisfaction												X		1
Enhanced relationship satisfaction and stability													X	1
Decrease in relationship instability													X	1
Miscellaneous														
Increase in their perception that speaking with a lawyer was helpful						X								1
Reduced harmful alcohol use		X												1
DELIVERY METHOD														
Multiple Sessions			X	X	X	X	X	X	X	X	X	X	X	11
School-Based Implementation	X		X		X	X	X	X	X					7
Manualized	X			X	X								X	3
TEACHING METHODS														
Role Play				X	X	X		X						4
Video				X	X	X		X				X	X	7
Class Exercise						X					X			2
Motivational Interviewing		X												1

	College-Specific		Behavioral Outcomes			Attitudinal Outcomes				Skills Outcomes			Other	
	Schwartz 2004	Woodin 2010	Foshee, 98/00/04	Wolfe 2003	Wolfe 2009	Jaycox 2006	Avery-Leaf 1997	Pacifici 2001	MacGowan 1997	Antle 2010	Halford 2001	Markman 1988	Halford 2004	**Total**
Handouts					X									1
Theatre Production			X											1
Poster Contest			X											1
Guest Speakers				X										1
Discussion	X					X		X			X			4
Games						X								1

APPENDIX 3: LOGIC MODEL



APPENDIX 4: CURRICULUM CONCEPTUAL MODEL



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