

University of Kentucky UKnowledge

Theses and Dissertations--Communication

Communication

2021

Communication Strategies to Intervene in Intimate Partner Violence Among Young Adult Couples

Kaylee Marie Lukacena
University of Kentucky, kaylee.lukacena@uky.edu
Author ORCID Identifier:
https://orcid.org/0000-0001-6618-0073

Digital Object Identifier: https://doi.org/10.13023/etd.2021.452

Right click to open a feedback form in a new tab to let us know how this document benefits you.

Recommended Citation

Lukacena, Kaylee Marie, "Communication Strategies to Intervene in Intimate Partner Violence Among Young Adult Couples" (2021). *Theses and Dissertations—Communication*. 108. https://uknowledge.uky.edu/comm_etds/108

This Doctoral Dissertation is brought to you for free and open access by the Communication at UKnowledge. It has been accepted for inclusion in Theses and Dissertations--Communication by an authorized administrator of UKnowledge. For more information, please contact UKnowledge@lsv.uky.edu.

STUDENT AGREEMENT:

I represent that my thesis or dissertation and abstract are my original work. Proper attribution has been given to all outside sources. I understand that I am solely responsible for obtaining any needed copyright permissions. I have obtained needed written permission statement(s) from the owner(s) of each third-party copyrighted matter to be included in my work, allowing electronic distribution (if such use is not permitted by the fair use doctrine) which will be submitted to UKnowledge as Additional File.

I hereby grant to The University of Kentucky and its agents the irrevocable, non-exclusive, and royalty-free license to archive and make accessible my work in whole or in part in all forms of media, now or hereafter known. I agree that the document mentioned above may be made available immediately for worldwide access unless an embargo applies.

I retain all other ownership rights to the copyright of my work. I also retain the right to use in future works (such as articles or books) all or part of my work. I understand that I am free to register the copyright to my work.

REVIEW, APPROVAL AND ACCEPTANCE

The document mentioned above has been reviewed and accepted by the student's advisor, on behalf of the advisory committee, and by the Director of Graduate Studies (DGS), on behalf of the program; we verify that this is the final, approved version of the student's thesis including all changes required by the advisory committee. The undersigned agree to abide by the statements above.

Kaylee Marie Lukacena, Student

Dr. Donald W. Helme, Major Professor

Dr. Anthony Limperos, Director of Graduate Studies

COMMUNICATION STRATEGIES TO INTERVENE IN INTIMATE PARTNER VIOLENCE AMONG YOUNG ADULT COUPLES

DISSERTATION

A dissertation submitted in partial fulfillment of the requirements for the degree of Doctor of Philosophy in the College of Communication and Information at the University of Kentucky

By
Kaylee Marie Lukacena
Lexington, Kentucky
Director: Dr. Donald W. Helme, Professor of Communication
Lexington, Kentucky
2021

Copyright © Kaylee Marie Lukacena 2021 https://orcid.org/0000-0001-6618-0073

ABSTRACT OF DISSERTATION

COMMUNICATION STRATEGIES TO INTERVENE IN INTIMATE PARTNER VIOLENCE AMONG YOUNG ADULT COUPLES

Intimate partner violence (IPV) is a social and behavioral health issue of importance among the young adult population (Cupp et al., 2015). IPV includes acts of physical violence, sexual violence, psychological aggression, and stalking enacted by an intimate partner (Smith, Zhang, Basile, Merrick, Wang, Kresnow, & Chen, 2018). In the United States., approximately one in three women and one in ten men experience IPV during their lifetime (Smith et al., 2018). Furthermore, over more than 70% of women who experience indicate that the first act occurred before the age of 25. One approach to preemptively address IPV on college campuses is through the implementation of bystander intervention campaigns and training. Although IPV can and does occur in private settings, approximately one-third of acts of IPV occur in the presence of individuals external to the couple, and these individuals have the opportunity to intervene (Planty, 2002). The overall objective of this dissertation study was two-fold: (a) examine college students' attitudes, norms, and perceived behavioral control in the context of intervening in acts of IPV; and (b) assess college students' intentions to intervene using different communicative strategies when presented with portrayals of IPV.

The study was conducted in two phases. Phase One comprised an online, primarily qualitative questionnaire including (a) a pilot-test of the vignettes depicting acts of IPV with a small subset of young adults attending a university; and (b) an elicitation questionnaire to gather readily accessible beliefs for behavioral outcomes, normative referents, and control factors as they relate to the behavior of bystander intervention. Phase Two included online survey data collection. First, participants completed measures assessing their beliefs about IPV and their attitudes, normative beliefs, perceived behavioral control, and intentions to intervene using different communication strategies as a bystander in the context of IPV. Second, participants were presented with one of six written vignettes portraying three different types of IPV enacted by either a male or female partner and asked to identify how they would respond when presented with the scenario using four different communication strategies to intervene: direct, distract, delegate, delay; and the option to do nothing to intervene.

The results of this dissertation evidence that bystander intervention is not a one-size-fits all approach in the context of IPV. The findings provide a basis to inform future messages for campaigns, interventions, and programmatic materials developed to improve young adult college students' awareness and understanding of IPV and tools to help them become active bystanders. The data sheds light on theoretical mechanisms that may increase young adults' intentions to intervene, the types of IPV for which young adult college students are most inclined to intervene, and what communication strategies students find to be most accessible when confronted with IPV as a bystander. This information is crucial because bystander intervention efforts should be continually adapted over time to more effectively influence their target audiences. This dissertation seeks to make interdisciplinary contributions, spanning the fields of health communication, health promotion, and violence prevention.

KEYWORDS: intimate partner violence, bystander intervention, communication strategies to intervene, young adults, violence prevention

Kaylee Marie Lukacena

12/10/2021 Date

COMMUNICATION STRATEGIES TO INTERVENE IN INTIMATE PARTNER VIOLENCE AMONG YOUNG ADULT COUPLES

By Kaylee Marie Lukacena

> Donald W. Helme Director of Dissertation

Anthony Limperos Director of Graduate Studies

12/10/2021

DEDICATION

First, I dedicate this dissertation to my Dad, John Nicholas "Nick" Lukacena. Because of you I had the courage and perseverance to finish this research project. Gone but not forgotten. Love eternal.

Second, I dedicate this dissertation to those who have survived intimate partner violence, those we have lost to intimate partner violence, advocates of survivors, and friends and family who have supported survivors through their healing.

Third, I dedicate this dissertation to my partner, John, who shows me each day what a healthy, loving relationship truly can be. You are the joy of my life.

AKNOWLEDGMENTS

To my family

I express my deepest gratitude to my family. I was lucky to be raised by both my parents and my grandmother, Meme – all of whom encouraged me to put my education at the forefront and to work endlessly to achieve my dreams. My mom, Bonnie Lukacena, thank you for staying up late to review my scholarship applications over a decade ago. You were exhausted after a 60+ hour work week, but always made time to show me your support. I can never repay you. My siblings: Daniel Jenkins, Bryana Polen, and Nicholas Lukacena. Y'all think I am crazy for pursuing higher education for a decade. I've had to forgo important events, but you all have supported me through and through. The cards, calls, and texts kept me going even far from home. Stormy Lukacena, you truly should be my co-author on this dissertation because you have yet to leave my side. You kept me heart healthy with 5,475+ walks during graduate school and kept my feet warm while I wrote many papers. You are the best puppy boy. Dad, "Mr. Luke", you should be here. My Ph.D. journey has not been a smooth process, but you remained my motivation. On the days I couldn't seem to type a word, I re-read your master's thesis for inspiration. You once told me you wanted me to be the most educated Lukacena as Dr. Luke. Although I am the "most educated" of our bunch, of all the lessons I've learned, you taught me the greatest one of all: In this life, devote yourself to genuinely caring for others, create meaningful relationships, and do everything with love. You did everything you could to provide me with the best start to this life. For that, I am eternally grateful. All my love, Dad.

To my friends

I wish to thank my community of friends. You all have made this journey one woven with laughs and love amidst the challenges. My Kentucky Family – Gabby, I remember sitting in the Grehan bull pen. We didn't know each other well but connected over the loss of our dads. You normalized me talking to my dad while I drove, and from that moment on, you were my person. We have experienced so much: the late-night grad seminars, qualifying exams, proposal writing... to COM Proms, weddings, heartbreaks, births, and moves. You're my best friend and my sister. Liz, you have a heart of gold. Your endless grace and support helped me survive the trials and tribulations of not only graduate school, but grieving losses. Joshua, from health communication to fashion sense to job applications, I know you always have my back. NCA will always be our reunion for shenanigans and searching for pizza at 3am. Vinny, I would be remiss if I didn't thank you for the countless meals you cooked, nights you tolerated me swearing while grading student papers, and your ongoing encouragement.

The Quick Clique – Christofer, my Com Big. Thank you for hosting me for my Illinois visit so many years ago. Who knew that would spark the most special friendship? You are a shining star. Tobias, your support has never faded, along with your dad jokes. Being your friend and collaborator has been a pleasure and I look forward to many more years of research and grants. Lillie, my twin and confidant. I will never forget sharing my graduate school visits with you. I am grateful we both chose Blue and Orange. Thank you for seeing me through the bad and good. Andrea, you have always been a role model, even if I never communicated this to you. You are a strong woman and confidence is admirable.

To my mentors

I wish to thank the members of my Dissertation Committee. Don Helme, what can I say? You graciously took me under your wing as your advisee. I would not be where I am today without you. You believed in my ability to learn grant writing. Once awarded the grant, you trusted me to manage the activities from start to finish. You always cared about me as a student, but more so as a whole person. It's been a privilege being your young padawan. Nancy Grant Harrington, thank you for always believing in me even in my darkest moment. You cared for me when I returned from my leave of absence and made sure I did not give up on this academic journey. You will never know how much this meant to me. Kelly McAninch, I appreciate you always watching over me from Illinois to Kentucky. Your mentorship in teaching and research has been constant. Kristen Mark, you welcomed me with open arms when I pursued KHP as my cognate. I recall telling you I loved researching the dark side of intimate relationships. You said, "Well, how can you truly know the dark side of relationships if you don't know what constitutes a healthy relationship?" Of course, you were right. Your class opened my mind and heart to so many facets of relationships. Thank you for being a rockstar instructor, researcher, collaborator, and human.

I wish to express my gratitude to my other mentors throughout my academic journey. Brian Quick, thank you for believing in my ideas and mentoring me near and far. Our paths crossing was no coincidence and I am thankful to have you as a mentor, colleague, and friend. Marian Huhman, you were a phenomenal master's advisor. Your work on the *Verb* campaign inspired me as a young researcher and that yellow ball is forever imprinted in my memory, as I was a tween in during the launch. Your expertise

served as an inspiration for my interest in message design and health behavior change campaigns. More so, your kind heart and passion for making sustainable changes in health are forever part of my career goals. The CSBS Team: Brent Roberts, Cristina Alvarez-Mingote, and Peter Ondish. You welcomed me to the center with open arms as a Ph.D. candidate, in good faith I would finish. That 'twas a risky bet but your healthy balance of support and peer pressure helped me push forward. Thank you for caring so deeply. Last, but surely not least, Gene Alesandrini. You are more than my undergraduate academic advisor. You are my second dad and advisor for life. You are indeed the catalyst that helped me engage in two very important behaviors during my lifetime: (a) applying for graduate programs, and (b) finally leaving the abusive intimate relationship that inspired this line of research. "Thank you" will never be enough.

TABLE OF CONTENTS

ACKNOWLEDGMENTS				
LIST OF TABLES				
LIST	OF FIGURES	X		
СНАР	TER ONE. INTRODUCTION AND RATIONALE	1		
CHAF	PTER TWO. REVIEW OF THE LITERATURE	6		
2.1	Intimate Partner Violence	6		
2.2	2.2 Impact of Intimate Partner Violence			
2.3	Primary Prevention: Bystander Intervention	11		
2.4	Contextual Factors Related to Bystander Intervention	15		
2.5	·			
СНАР	PTER THREE. THEORETICAL FRAMEWORK	24		
3.1	The Reasoned Action Approach	24		
	3.1.1 Attitudes	25		
	3.1.2 Normative Beliefs	26		
	3.1.3 Perceived Behavioral Control	27		
	3.1.4 Behavioral Intentions	27		
CHAF	PTER FOUR. METHODS	32		
4.1	Phase One: Pilot Testing of Stimuli	32		
	4.1.1 Stimuli Selection and Development	33		
	4.1.2 Pilot-testing Rationale	33		
	4.1.3 Recruitment and Participants	34		
	4.1.3.1 Data Analysis and Results for Vignette Testing	35		
	4.1.3.2 Data Analysis and Results for Elicitation Questions	38		
4.2	Phase Two: Primary Study Quasi-Experimental Data Collection			
	4.2.1 Recruitment and Participants	41		
	4.2.2 Attention Check	45		
	4.2.3 Measures	46		
	4.2.3.1 Intimate Partner Violence Attitudes Scale – Revised	46		
	4.2.3.2 Attitudes	46		
	4.2.3.3 Perceived Norms	46		
	4.2.3.4 Perceived Behavioral Control	47		
	4.2.3.5 Perceptions of Severity	47		
	4.2.3.6 Behavioral Intentions	47		

		4.2.3.7 Covariates	48		
СНАР	TER FIV	E. PHASE 2 RESULTS	49		
5.1	Main Eff 5.1.1 5.1.2	Pects Hypothesis 1—Independent Samples T-tests: Gender of Perpetrator Hypothesis 2 – Analysis of Variance: Type of Violence	54 54 56		
5.2	Interaction Effects				
5.3	5.3.1 5.3.2 5.3.3	Hypothesis 3 Hypothesis 4 Hypothesis 5 Hypothesis 6 Hypothesis 7	70 70 72 75 78 80		
CHA	PTER SIX	. DISCUSSION	83		
6.1	Impact o	f Perpetrator Gender on Intentions to Intervene	83		
6.2.	Impact of	f Violence Portrayed on Intentions to Intervene	86		
6.3	6.3.1 6.3.2	7 1	90 91 91 92 93		
6.3	Theoretic	cal and Practical Implications	95		
6.4 6.5	Limitation Summary	ons and Future Directions	98 101		
APPE	NDICES		103		
APPENDIX A. PHASE ONE – ORIGINAL VIGNETTES					
API	PENDIX E	B. PHASE ONE – INFORMED CONSENT/COVER LETTER	105		
API	APPENDIX C. PHASE ONE – DATA COLLECTION INSTRUMENT				
API	APPENDIX D. PHASE TWO – REVISED VIGNETTES				
API	APPENDIX E. PHASE TWO – CONSENT FORM/COVER LETTER				
API	PENDIX F	F. PHASE TWO – DATA COLLECTION INSTRUMENT	117		
REFE	REFERENCES				
VITA	VITA				

LIST OF TABLES

Table 1 Manipulation Distribution of Message Variables	45
Table 2 Correlation Matrix for Study Variables	51
Table 3 ANOVA: Type of Violence – Direct Communication Strategy	59
Table 4 ANOVA: Type of Violence – Distract Communication Strategy	61
Table 5 ANOVA: Type of Violence – Delegate Communication Strategy	63
Table 6 ANOVA: Type of Violence – Delay Communication Strategy	65
Table 7 ANOVA: Type of Violence – Do Nothing to Intervene	67
Table 8 Hierarchical Regression: Direct Communication Strategy	72
Table 9 Hierarchical Regression: Distract Communication Strategy	75
Table 10 Hierarchical Regression: Delegate Communication Strategy	78
Table 11 Hierarchical Regression: Delay Communication Strategy	80
Table 12 Hierarchical Regression: Do Nothing to Intervene	82

LIST OF FIGURES

Figure 1 Schematic Presentation of the Reasoned Action Model

25

CHAPTER ONE: INTRODUCTION AND RATIONALE

"Gabby, bless her heart," Glenn said, "she will be a beacon for why we need to continue to talk about intimate partner violence, why we need to continue to address it and why we really need to take action."

Ruth M. Glenn, President of the National Coalition Against Domestic Violence
 (NCADV)

Twenty-two-year-old Gabby Petito and her fiancé, Brian Laundrie, were on a cross-country road trip when they were stopped by police in Utah, after an onlooker witnessed a fight between the couple. Although the officer's body camera footage from the police stop shows a distraught Petito expressing that Laundrie injured her, she attempts to take the blame. When police inquired where Laundrie hit her, she responded, "Well he, like, grabbed me with his nail, and I guess that's why it looks ... definitely I was cut right here [pointing to her cheek]." Despite physical harm and Petito's visible emotional distress, the police officers let the couple go, without any action taken.

On September 11, 2021, Petito was declared a missing person. On September 21, 2021, the Teton County coroner confirmed her remains were found in the Bridger-Teton National Forest. After watching the body camera footage, the president of the NCADV expressed that the officers who responded to the domestic dispute did not seem to be "educated or trained or have had information about the dynamics of domestic violence... If they had, they would have recognized the most prominent red flag, which was her distress and her taking the blame for the actions that were happening..." (Paúl, 2021).

The case of Petito shines a light on an important social and behavioral health issue among the young adult population – intimate partner violence (Cupp, Savage, Atwood, &

Abadi, 2015). Intimate partner violence (IPV) includes acts of physical violence, sexual violence, psychological aggression, and stalking enacted by a romantic or sexual partner (Smith et al., 2018). In the United States, approximately one in three women and one in ten men experience IPV during their lifetime (Smith et al., 2018). Furthermore, more than 70% of women who experience physical violence, sexual violence, and/or stalking indicate that the first act occurred before the age of 25. According to a national data set, one in ten U.S. college students self-identify as having been involved in an abusive romantic relationship in the prior year (Oswalt, Wyatt, & Ochoa, 2018). These statistics underscore that young adult college students are a particularly vulnerable population and an important audience to focus on when examining preventative and tertiary responses to IPV (Smith et al., 2018).

College campuses across the United States are striving to better understand the prevalence of IPV among their students given that most survivors do not seek help, especially from professional entities such as law enforcement and social services (Buhi et al., 2008). One method to gather a more accurate representation of these experiences is via campus climate surveys (Wood, Sulley, Kammer-Kerwick, Follingstad, & Busch-Armendariz, 2017). For instance, at the University of Kentucky, the Campus Attitudes Toward Safety (CATS) survey is administered to assess the safety of students on campus. The most recent CATS survey contains data collected during the 2015-2016 school year. According to this data, approximately 17% of students enrolled at the University of Kentucky report experiencing serious psychological violence from an intimate partner and 8% reported severe physical violence perpetrated by an intimate partner (University of Kentucky, 2016). Proactively addressing the social and behavioral health issue of IPV

is important given the grave short-term and long-term impacts on survivors (e.g., post-traumatic stress disorder, depression; Coker et al., 2002).

One approach to proactively address IPV at institutions of higher education is through the implementation of bystander intervention programs. Although IPV can and does occur in private settings, approximately one-third of acts of IPV occur in the presence of individuals external to the couple, and these individuals have the opportunity to intervene (Planty, 2002). Despite the fact that a significant portion of IPV occurs in the presence of others, which presents an opportunity for onlookers to take action, this is also a major challenge. Research has found that often people view IPV as an individual or relational issue, not a social problem tied to feelings of personal responsibility to help others in the community (Savage et al., 2016).

The objective of this dissertation study was to examine college students' attitudes, norms, and perceived behavioral control in the context of intervening in acts of IPV and assess their intentions to intervene using different communication strategies when presented with depictions of IPV (vignettes). The study was conducted in two phases. Phase One entailed pilot-testing the vignettes with a subset of young adult college students using an online, primarily qualitative questionnaire. Phase Two included two steps. First, an online survey data collection was used to assess students' beliefs about IPV and their attitudes, normative beliefs, perceived behavioral control, and intentions to intervene as a bystander in the context of IPV. Second, participants were presented with one of six written vignettes portraying three different types of IPV enacted by either a male or female partner. After exposure to the vignette, participants were asked to identify

how they would respond when presented with the scenario using four different communication strategies to intervene and the option to do nothing to intervene.

The dissertation is organized into six chapters. Chapter One includes the introduction and rationale for the dissertation study. Chapter Two provides a review of the literature on IPV and bystander intervention. More specifically, it homes in on the different communication strategies that can be used to intervene. Chapter Three provides a description of the theoretical framework, the reasoned action approach, which was applied to gather information concerning the target audiences' attitudes, norms, and perceived behavioral control in the context of intervening in acts of IPV. Chapter Four provides an explanation of research design, including the pilot data collection to pilot the vignettes and the elicitation questionnaire, the quasi-experimental design, an overview of the selected measures, and the final analysis plan. Chapter Five presents the results of a series of t-tests, ANOVAs and regressions to test the hypotheses. Chapter Six provides a discussion of results and concludes by addressing the limitation of the study, theoretical and practical implications, and considerations for future research.

This project aligns with the University of Kentucky's campus community goal in working toward building "a culture and environment in which all of our students can feel safe and in which they can be successful" (Capilouto, 2016). The dissertation seeks to make interdisciplinary contributions, spanning the fields of health communication, health promotion, and violence prevention. Broadly, the data gathered and analyzed provide a basis to inform future messages for campaigns, interventions, and educational materials developed to improve young adult college students' awareness and understanding of IPV, as well as the tools to help them be active bystanders. Specifically, the data shed light on

theoretical mechanisms that may increase young adults' intentions to intervene, for what types of IPV young adult college students are most inclined to intervene, and what communication strategies are most accessible to students when confronted with IPV as a bystander.

CHAPTER TWO: REVIEW OF THE LITERATURE

Intimate Partner Violence

Breiding and colleagues (2015) define an intimate partner as a person with whom one has a close relationship and who has one or more of the following characteristics: (a) emotional connectedness, (b) regular contact, (c) ongoing physical contact or sexual behavior, (d) identity as a couple, and (e) familiarity with each other's lives. Therefore, intimate partners can include former or current spouses, boyfriends, girlfriends, dating partners, and sexual partners. Additionally, intimate partners may or may not be cohabitating and can be of the opposite or same sex (Breiding et al., 2015). For the purposes of the dissertation study, the focus is on current or former romantic partners, married or unmarried.

IPV is abuse inflicted by a current or former intimate partner and can be delineated into four different behaviors: physical violence, sexual violence, stalking, and psychological aggression (Breiding et al., 2015). First, physical violence is the intentional use of force with the potential to inflict harm, injury, disability, and even death.

Behaviors classified as physical IPV include pushing, shoving, throwing, grabbing, biting, choking, slapping, punching, hitting, burning, use of a weapon, and the use of restraints or one's strength against another person. Furthermore, physical violence also includes coercing another person to engage in any of the acts listed above (Breiding et al., 2015).

Second, sexual violence is conceptualized as a sexual act that is either attempted or completed by one partner without the freely provided consent of the other partner (Breiding et al., 2015). Acts of sexual violence include advancing with sexual activity

after one partner refuses or is unable to consent or refuse. The inability to provide consent may be due to age, disability, unconsciousness, or incapacitation due to substance use. Furthermore, the inability to refuse can occur if there are threats of physical violence or authority over the other partner. Sexual violence exists in the forms of penetration of the partner, forcing the partner to penetrate, non-physical pressuring, unwanted penetration, unwanted sexual contact, non-contact unwanted sexual experiences such as unwanted exposure to pornography, unwanted sexting, sexual harassment, and other tactics to gain compliance (Breiding et al., 2015).

A third facet of IPV is stalking, conceptualized as a repetitive pattern of unwanted attention and contact that causes fear for one's own safety or the safety of others (Breiding et al., 2015). Stalking includes behaviors such as unwelcomed and excessive contact through calls, texts, emails, social media, or sending gifts; watching or following from a distance; showing up in common places such as work or school; and damaging the partner's property, belongings, or pets. For an act to be considered stalking, a partner must experience a tactic multiple times or experience more than one tactic. In turn, these tactics incite fear in the partner and lead them to believe that either they or someone close to them may be in harm's way (Breiding et al., 2015).

The fourth type of IPV is psychological aggression. Acts of psychological aggression are not physical in nature but rather include the use of verbal and nonverbal communication intended either to harm the partner mentally or emotionally or to gain and exert control over the partner (Breiding et al., 2015). Communicative behaviors that comprise psychological aggression include name-calling, coercive control, threatening physical or sexual violent acts, controlling a partner's sexual health, exploiting a partner's

vulnerability, and gaslighting. Although psychological aggression tends to be more covert in nature than physical violence, research suggests that the impact of psychological aggression inflicted by an intimate partner is just as significant as that of physical violence by an intimate partner and can be just as damaging, if not more harmful in the long term than other forms of violence (Basile, Arias, Desai, & Thompson, 2004; Coker, Williams, Follingstad, & Jordan, 2011).

Awareness that IPV occurs in various forms can help individuals to better identify it in their own and others' intimate relationships and develop strategies to address the violence. Unfortunately, there is a considerable gap in the evidence base as studies tend to focus heavily on physical IPV, excluding a closer examination of the perceptions of psychological and sexual IPV (Yakubovich et al., 2018). In addition to knowing the forms of violence, it is also crucial to understand who is most at risk for IPV.

The age demographic with the highest rate of victimization is young adults between the ages of 16-24 (Rennison & Welchans, 2000). Approximately 70% of females experience physical violence, sexual violence, and/or stalking before the age of 25 (Breiding et al., 2014). A systematic study of longitudinal IPV research found that being older and married were protective factors against experiencing IPV; thus, Yakuovich et al. (2018) recommend efforts should be targeted to protect younger women who are single or separated from their partners. Young adults are a crucial population to focus on, given the heightened risk of experiencing IPV, and this risk is greatly amplified for those attending college (Katz, Carino, & Hilton, 2002; Nabors, Dietz, & Jasinski, 2006; Oswalt et al., 2018). Furthermore, young adults attending institutions of higher education are at an elevated risk for reasons related to developmental processes and the structural nature

of institutions of higher education. Young adults are seeking out sexual and/or romantic partners and developing increased levels of intimacy, while also navigating conflict and turbulence in these relationships (Brady et al., 2017; White & Carmondy, 2018). To this end, approximately one in ten U.S. college students self-identify as having been involved in an abusive romantic relationship in the past year (Oswalt, Wyatt, & Ochoa, 2018).

In regard to our own campus community, the most recent data available from the University of Kentucky's Campus Attitudes Safety (CATS) Survey approximates that 17 percent of students attending the University of Kentucky experienced psychological abuse from an intimate partner. Psychological abuse was assessed by using behavioral questions concerning a partner monitoring their behavior, controlling their decisionmaking, manipulating via threats, or humiliating their partner in public (University of Kentucky, 2016). Additionally, eight percent of students reported experiencing severe physical violence perpetrated by an intimate partner. Stalking and sexual abuse perpetrated by an intimate partner were not presented in the report; however, general statistics about stalking indicated that nine percent of students at the University of Kentucky experienced stalking (University of Kentucky, 2016). Indeed, the national data and community level data from the University of Kentucky exemplify that IPV is everpresent in young adult intimate relationships. Campus communities should genuinely care and act on this health issue that can have long term physical, psychological, and behavioral impacts on survivors.

Impact of Intimate Partner Violence

Survivors of IPV may experience a host of acute and chronic mental health, physical health, and behavioral and relational outcomes (Black, 2011). First, the

psychological effects are grave for survivors of IPV (Coker et al., 2002). When compared to violence perpetrated by a non-intimate partner, violence perpetrated by an intimate partner causes greater psychological distress because the acts of violence are committed by someone with whom the individual has established trust and closeness (Herman, 1992). Depression, post-traumatic stress disorder (PTSD), post-traumatic stress symptoms (PTSS), anxiety, and suicide ideation are mental health concerns consistently linked to experiences with IPV (Coker et al., 2002). Furthermore, depressive disorders are comorbid for IPV survivors, and PTSD tends to be higher for female survivors (Coker et al., 2005).

Second, a survivor' physical health can be compromised due to IPV. Immediate harm from acts of physical violence include injuries such as severe bruises, welts, fractures, lacerations, and abrasions (Spencer et al., 2016). Long term physical health conditions associated with IPV include neurological disorders such as chronic migraines and seizures, cardiovascular conditions such as coronary heart disease and hypertension, and digestive tract issues such as stomach ulcers (Coker et al., 2000). In regard to sexual health, IPV survivors tend to be at an increased risk for urogenital conditions, including infertility, chronic pelvic pain, and sexual dysfunction (Coker et al., 2000; Garcia-Moreno et al., 2005). Yakubovich (2018) discovered across multiple longitudinal studies that unplanned and unwanted pregnancy was a significant consequence for IPV perpetrated against women. Furthermore, studies have found that among college students, sexual coercion among intimate partners is associated with inconsistent condom use, increasing the risk for sexually transmitted infections and pregnancy (Fair & Vanyur, 2011).

Third, behavioral and relational concerns also arise following incidents of IPV. Increased use of alcohol and other drugs has become a primary behavioral health concern (Vives-Cases et al., 2011). Relationally, individuals who experience sexual abuse in their relationships earlier in life, such as young adulthood, were more likely to have greater marital dissatisfaction later in life (Liang, Williams, & Sigel, 2006). With such profound impact on social and behavioral health, it is essential for researchers to examine strategies to mitigate these negative outcomes for IPV survivors.

One viable strategy to address IPV is through primary prevention. The Centers for Disease Control and Prevention (CDC, 2019b) suggests that one contributing factor to the perpetration of IPV is inadequate community sanctions against IPV. This includes the general unwillingness of neighbors or onlookers to intervene in situations where they witness violence, which is particularly alarming because approximately one-third of all IPV acts occur in the presence of a bystander (Planty, 2002). Thus, one strategy endorsed in campus communities and espoused by the CDC as a method of primary prevention among influential peers is the implementation of bystander intervention campaigns and trainings (CDC, 2019a).

Primary Prevention: Bystander Intervention

One promising approach to broadly address concerns of interpersonal violence among the college student population is bystander intervention programs, campaigns, and trainings (Banyard, Moynihan, & Plante, 2007; Banyard, Plante, & Moynihan, 2004; Coker et al., 2011). Indeed, the Violence Against Women Reauthorization Act (VAWA, 2014) requires that institutions of higher education offer incoming students and employees "primary prevention and awareness programs" that promote awareness of

rape, acquaintance rape, domestic violence, dating violence, sexual assault, and stalking. The implementation of preventative education programs must include (a) a statement that the institution prohibits those offenses; (b) the definition of those offenses in the applicable jurisdiction; (c) the definition of consent, with reference to sexual offenses, in the applicable jurisdiction; (d) "safe and positive" options for bystander intervention an individual may take to "prevent harm or intervene" in risky situations; (e) knowledge of signs of abusive behavior and how to avoid potential attacks; and (f) ongoing prevention and awareness campaigns for students and faculty on all of the above (VAMA, 2014). In 2020, the University of Kentucky offered 23 primary prevention and awareness programs for incoming students and new employees that covered topics of sexual violence, dating violence, and domestic violence, including the Green Dot bystander intervention program (University of Kentucky, 2021).

It is essential to understand the origin of bystander intervention as proposed by Latané and Darley (1970). Latané and Darley developed the bystander model following the public, brutal murder of Kitty Genovese, whose perpetrator attacked her for over an hour, with 38 witnesses who did nothing to help stop the violence. This situation went against the belief that there is safety in the presence of large numbers of people, instead presenting the novel concept of the unresponsive bystander – an individual who observes others who witness an incident but who choose not to intervene. In other words, when many people observe a potentially harmful situation, an individual may feel less personal responsibility to intervene because they assume if the situation were truly problematic and severe, someone else would take action to mitigate the situation. In response to this murder, the bystander intervention model to actively prevent acts of violence was

developed. Bystanders are conceptualized as third-party individuals who may witness potentially violent interactions or situations with a high risk of violence or may be the recipient of an IPV disclosure (Taylor et al., 2016). The bystander intervention model identifies five key steps to intervening: (a) noticing a situation; (b) identifying the situation as problematic or as an emergency; (c) taking responsibility to act in response to the situation; (d) deciding what to specifically do or say in the situation; and (e) choosing to act on the decision (Latané & Darley, 1970).

Despite the Kitty Genovese tragedy, one common misperception continues to be prevalent is that IPV strictly occurs in private settings, absent of witnesses (Wright & Benson, 2011). Conversely, the National Crime Victim Survey (NCVS; Planty, 2002) found that approximately one-third of IPV incidents occurred in the presence of third-party onlookers. Therefore, this illuminates the point that third-party onlookers, or bystanders, may be positioned to help potential victims of IPV (Banyard & Moynihan, 2011).

Provided that up to 25% of IPV survivors may not label abusive acts by their partner as violence (see Fass et al., 2008; Miller, 2011), the challenge of identifying and labeling behaviors as IPV may extend to bystanders who could potentially intervene. This is perhaps one reason that in cases of IPV reported to authorities, one-third of bystanders present did not take action (Taylor et al., 2016). Consequently, if a young adult witnesses behavior that may constitute IPV, but they lack the ability to identify and label the behavior as abusive, then bystander intervention is unlikely to occur. It is crucial that young adults are aware of the broad spectrum of behaviors that fall under the umbrella of IPV, focusing beyond physical acts of IPV. When a bystander is present and able to

identify a potentially problematic situation, they then have the ability to be proactive using different communication strategies and ultimately create a critical shift from inaction to action when it comes to IPV.

Although there are a variety of bystander programs that have origins in the bystander model, there are key communication strategies to intervene that cut across many of these programs. Banyard, Plante, and Moynihan (2005) describe different communicative strategies for intervention, referred to as the four Ds: direct, distract, delegate, and delay. First, direct intervention includes stepping into a situation and trying to stop the violence in a straightforward manner. Direct strategies can include asking someone who seems uncomfortable or unsure if they are ok or telling the perpetrator to stop their violent behavior. Second, distraction aims to defuse a potential situation by distracting those involved and interrupting the opportunity to be abusive. The goal is to divert the aggression away from the potential victim and de-escalate the situation. A bystander could use simple tactics such as asking for directions or asking the target of violence to assist with a task. Third, *delegation* can be used if a bystander feels unsafe or uncomfortable stepping in on their own behalf. Instead, they ask a third party who might be better equipped to handle the situation to intervene for them. This can include alerting authorities (i.e., law enforcement), asking the host of a gathering to intervene, or including more than one person in the attempt to disrupt the violence. For example, one individual may directly speak to the perpetrator while the other person will check in with the target. Whereas the first three tactics are more proactive in preventing violence, the final communication strategy, delay, is more reactive nature. In being reactive, the bystander does not intervene in the moment but rather becomes involved in the situation

after an individual has experienced violence. The bystander may check in with the person experiencing the violence afterwards to see if they can do anything to provide social support.

Taken together, bystander intervention programs attempt to involve members of a community who may witness or be made aware of potentially violent situations to take action (Banyard et al., 2005; Coker et al., 2015; McMahon & Banyard, 2012). The bystander approach is theorized to be effective because the participants are not asked to envision themselves as perpetrators or victims but rather as a third-party helper to prevent violence (Banyard et al., 2004). Considering the deleterious impact of IPV on survivors, it is imperative for researchers to examine what factors may contribute to or inhibit an individual's intentions to intervene and strategies used when faced with an IPV situation.

Contextual Factors Related to Bystander Intervention

First and foremost, it is important to understand young adults' perceptions of situational factors relative to bystander intervention. Weitzman, Cowan, and Walsh (2020) examined how personal knowledge of victims, the likelihood of intervening, and intervention strategies differ between sexual assault and IPV situations. The authors found that for both types of gender-based violence, participants were more likely to intervene on behalf close members of their network, such as family members or friends, than to intervene on the behalf of distant network members. In regard to strategies, participants were more likely to request the assistance from authorities to intervene and were less likely to offer support in instances of sexual assault than IPV. The most common barriers to intervention were the fear of being injured as a bystander, the fear of misinterpreting the situation, and the persisting belief that IPV is a private matter, even if

IPV occurs in a public space. Overall, Weitzman and colleagues' findings showcase that the decision to intervene is contingent on the characteristics of the bystander, characteristics of the violence, and the relationship between the bystander and the victim.

Similarly, Branch, Richards, and Dretsch (2013) explored college students' responses and reporting behaviors in regard to IPV victimization and perpetration among friends. Branch and colleagues found that only about half of the students surveyed indicated they would report IPV victimization and even fewer said they would report the perpetration. In other words, it is probable that students are witnessing acts of IPV but are not saying or doing anything to prevent IPV. This study underscores the importance of gauging students' experiences and helping students gain heightened awareness of what behaviors constitute IPV, given approximately one-third of all IPV acts occur in the presence of a bystander (Planty, 2002). Thus, research should be conducted to better inform how to effectively help students understand the importance of and ways to engage in the role as active, rather than unresponsive, bystanders.

Another factor consistently discussed in the bystander intervention literature is the role of gender. Ermer, Roach, Coleman, and Ganong (2017) set out to understand attitudes regarding the perceived importance of intervening in public acts of IPV (addressing steps 1 and 2 of the bystander model). Ermer and colleagues explored how the gender of the IPV perpetrator, and the level of aggression impacted individuals' attitudes toward public acts of IPV and bystander intervention. The authors found that participants generally viewed aggression as unacceptable; however, this sentiment was intensified when the aggression perpetrated was more severe and when the perpetrator was a male. Similarly, Ballman, Leheney, Miller, Simmons, and Wilson (2016) examined

the role of same-gender versus mixed-gender instances of rape, as same-gender aggression can often be overlooked. Participants were exposed to one of four hypothetical scenarios that manipulated the gender of the perpetrator and victim. The results show that onlookers may view same-gender versus mixed-gender violence differently. Ballman et al. found that participants were more inclined to label non-consensual oral sex as rape when it involves someone of the same-gender than of mixed-gender. Additionally, participants perceived that the same-gender perpetrators were more likely to commit acts of sexual violence again in the future.

Researchers have also compared similar, but conceptually distinct, acts of violence in the context of bystander intervention. Palmer, Nicksa, and McMahon (2018) examined how student bystanders on a college campus would intervene in situations involving sexual assault or IPV. Using an experiment, the authors examined the strategy for intervention (delegate, direct, or indirect) and the association this had with relational distance/closeness, the type of violence (sexual assault or IPV), and whether the bystander identified as male or female. Palmer et al. reported three key findings. In regard to relational distance and sexual assault, if participants knew the victim or perpetrator, they were more apt to choose direct intervention strategies; however, for IPV, participants indicated that if they knew the victim or perpetrator, they would choose direct or indirect strategies to intervene. For both sexual assault and IPV, if participants did not know the victim or perpetrator, they would elect to delegate the intervention to someone else. In regard to sex differences, men were more likely to report willingness to intervene directly in instances of sexual assault, whereas women were more willing to intervene, in an indirect manner, in IPV. This study suggests that bystander behaviors are different based on the type of violence (IPV vs sexual assault), and therefore, terms such as sexual assault and IPV should not be conflated. Despite these findings, often bystander intervention trainings, campaigns, and general awareness initiatives cluster sexual assault, IPV, and more broadly gender-based violence, although these types of violence are conceptually and contextually distinct. Based on the literature reviewed, it is important moving forward to consider how factors such as gender of the perpetrator contribute to intentions to intervene as a bystander. To this end, the following relationship is hypothesized:

H1a-d: Participants' intentions to intervene (i.e., [a] direct, [b] distract, [c] delegate, and [d] delay) will differ based on the gender of the perpetrator in the vignette. Specifically, participants will indicate increased intentions to intervene if the act of IPV in the vignette is perpetrated by a male.

H1e: Participants' intentions to do nothing to intervene will differ based on the gender of the perpetrator in the vignette. Specifically, participants will indicate increased intentions to do nothing if the act of IPV in the vignette is perpetrated female.

Next, the effectiveness of bystander intervention efforts are reviewed.

Effectiveness of Bystander Intervention Campaigns and Trainings

A myriad of campaigns and interventions focused on influencing bystander intervention in the contexts of sexual assault, IPV, and interpersonal violence more broadly have emerged over the years. Examples of well-known bystander campaigns and intervention programs include *Know Your Power*, *Bringing in the Bystander*, and *Green Dot* (Coker et al., 2011; Moynihan et al., 2010; Potter, 2012). Evaluations of such

campaigns and interventions have been conducted and typically have found such programs have positive short-term effects on lowering violence victimization, increasing awareness of students' role as a bystander in reducing IPV, and increasing willingness to get involved in reducing the incidences of IPV (Coker et al., 2015; Moynihan et al., 2010; Potter, 2012).

Potter (2012) set out to evaluate a campus-wide bystander-oriented social marketing campaign, *Know Your Power*. Potter assessed undergraduate students' beliefs via a public awareness survey before and after the launch of the six-week campaign to examine whether exposure to the campaign changed students' beliefs and intentions. Potter found that exposure to *the Know Your Power* increased students' awareness of their role as bystanders to help reduce sexual and relationship violence, increased students' willingness to get involved in reducing the incidence of violence, and increased students' likelihood take action to reduce acts of violence.

One popular bystander intervention program implemented on college campuses is *Bringing in the Bystander*. *Bringing in the Bystander* rests on the premise that each community member has a role in ending sexual violence and IPV on college campuses (Moynihan et al., 2010). The program promotes safe and prosocial strategies for students to intervene in situations when they may witness sexual violence or IPV. Furthermore, the program emphasizes preventing violence before it occurs, as well as offering tertiary strategies to support survivors after violence has occurred. Banyard, Moynihan, and Plante (2007) evaluated *Bringing in the Bystander* and found it to be effective at changing attitudes among various college student populations, including intercollegiate athletes and the Greek community (Banyard, Moynihan, et al., 2007; Moynihan &

Banyard, 2008; Moynihan, Banyard, Eckstein, Arnold, & Stapleton, 2011). Additionally, outcomes from Banyard and colleagues' (2007) study suggest that the *Bringing in the Bystander* may increase prosocial bystander intervention.

Another highly regarded by stander intervention training promoted by many colleges and universities is Green Dot. Similar to Bringing in the Bystander, the Green Dot curriculum aims to empower bystanders in both reactive and proactive ways when faced with instances of interpersonal violence). Green Dot includes intensive bystander training conducted by violence prevention staff, and the crux of the program is on equipping students with communication skills to both safely and effectively intervene as a bystander. Coker and colleagues (2015) set out to evaluate the effectiveness of *Green* Dot training on reducing IPV by examining self-reported interpersonal violence behaviors, both in regard to victimization and perpetration. Coker et al. collected data at an intervention campus and two comparison campuses that did not offer equivalent programming. The authors found the campus that implementing the *Green Dot* training had lower rates of IPV victimization and perpetration than the campuses that did not have the training program available for students. Coker et al.'s study suggests that the Green Dot bystander intervention training may lead to more community level effects on student body, as well as the individual effects on students' willingness to intervene after taking the course.

Although these individual programs demonstrate some change in attitudes and objective measures of violence reporting, a systematic review and meta-analysis by Jouriles et al. (2018) provides a more comprehensive picture of bystander program effects. These authors reviewed 24 studies of college sexual violence bystander

bystander behavior. Their review found that college students who engaged in the bystander intervention programming reported more pro-social attitudes and belief structures toward the prevention of sexual violence and reported higher engagement in bystander intervention behaviors than students who did not receive bystander intervention training. These beliefs reflected desirable bystander behaviors (e.g., preventing a friend from trying to get their intoxicated partner to have sex; interrupting a verbally abusive argument between a couple). Although the review found that the effects of these programmatic activities diminish over time, with meaningful changes lasting approximately three months following program completion, the collective data illuminates the value and potential for bystander intervention as a means for violence prevention efforts on college campuses (Jouriles et al., 2018).

Although bystander campaigns and interventions have been established in various forms on college campuses and show signs of effectiveness, there is still room for improvement. One of the leading researchers in the area of bystander intervention, Dr. Ann Coker, discussed in an interview her thoughts on why, despite signs of effectiveness, campuses are not yet obtaining the desired results: "You really don't get action—bystander action—in key settings unless you're aware that this is a setting that you could intervene and that you know how to intervene...so you've got to see (intervening) as relevant, you've got to see (the situation) as dangerous, and you've got to have the skills, the confidence, to do something" (Zettel-Vandenhouten, 2019).

Relatedly, Dardis, Edwards, Kelley, and Gidycz (2017) set out to understand young adults' perceptions of what behaviors constitute IPV and the perceptions of the

different types of IPV. The authors found that young men and women perceived acts of physical, sexual, and psychological IPV as abusive; however, women rated the behaviors as more abusive than men. Nonetheless, psychological IPV was considered less abusive than physical IPV, followed by sexual IPV, and physical abuse was considered the most severe. Similarly, Capezza and Arriaga (2008) conducted an experiment manipulating scenarios that presented a husband and a wife, with the husband perpetrating physical or psychological abuse at varying degrees. Despite the severity of psychological abuse presented, the authors found that overwhelmingly physical violence was rated as more negative and more severe. Given that practitioners and policies focus heavily on physical harm and injuries (Lane & Knowles, 2000), it is no surprise that psychological IPV may overlooked among young adults as well.

The findings was the literature review underscore the need to acknowledge the importance of all types of IPV – not just physical violence – in preventative efforts if we expect young adult college students to take action. Given that there a variety of behaviors that comprise IPV, it is meaningful to understand how portrayals of those different acts (i.e., physical, sexual, and psychological) impact intentions to be an active bystander. Thus, I hypothesize that intentions to intervene will differ based on the type of violence communicated in the vignette:

H2a-d: Participants' intentions to intervene using [a] direct, [b] distract, [c] delegate, [d] delay communication strategy will differ based on the type of violence communicated in the vignette. Specifically, participants will self-report greater intentions to intervene if the violence is physical rather than sexual or psychological.

H2e: Participants' intentions to do nothing to intervene will differ based on the type of violence communicated in the vignette. Specifically, participants will self-report greater intentions to do nothing if the violence is psychological rather physical or sexual.

Campaigns and interventions may need to concentrate on helping students become aware of the types of IPV before being able to shift attitudes, normative beliefs, and ultimately their behavior. Taking this literature into consideration, there is a need for research grounded in health behavior theory. One theory of particular importance for framing and examining IPV bystander intervention among young adult collect students is the reasoned action approach (Fishbein & Ajzen, 2010). The next chapter describes the theory and its main premises.

CHAPTER THREE: THEORETICAL FRAMEWORK

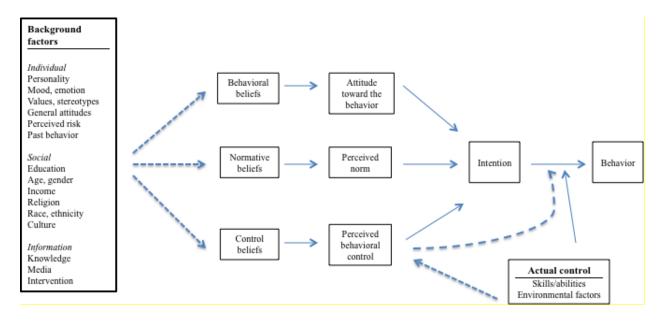
In this chapter, the theoretical framework to guide this dissertation, the reasoned action approach, is described in detail. The reasoned action approach is applied to better comprehend the complexity of bystander intervention in the context of IPV among young adult college students because it provides an integrative framework for explaining how different belief structures impact intentions to intervene using the multiple communication strategies.

The Reasoned Action Approach

The theory applied in this dissertation is the most recent iteration of the theory of planned behavior, referred to the reasoned action approach (RAA; see Fishbein & Ajzen, 2010). The RAA has been adapted over the course of decades from three existing theories: expectancy value theory (EVT; Fishbein, 1967), the theory of reasoned action (TRA; Fishbein & Ajzen, 1975), and the theory of planned behavior (TPB; Ajzen, 1991).

The RAA (Fishbein & Ajzen, 2010; see Figure 1) posits that once a behavior of interest is clearly identified and operationalized, then the determinants can be examined. It is assumed that the uptake of a social behavior follows reasonably from beliefs an individual possesses about the behavior under consideration. These beliefs originate from a variety of sources (e.g., demographics, personal dispositions, knowledge, media exposure). No matter how these beliefs are acquired, they guide the decision to perform or not perform the behavior of interest. Three kinds of beliefs are distinguished: behavioral beliefs, normative beliefs, and control beliefs.

Figure 1
Schematic Presentation of the Reasoned Action Model



Note. This model from Fishbein and Ajzen's (2010, p. 22) book, *Predicting and Changing Behavior: The Reasoned Action Approach*, does not display the bifurcations of attitudes, norms, and perceived behavioral control as they are operationalized.

Attitudes

First, individuals hold beliefs about the positive or negative consequences they may experience if they were to perform the behavior. These outcome expectancies or behavioral beliefs are assumed to determine an individual's attitude toward personally performing the behavior, or their positive or negative evaluation of performing the behavior. Generally speaking, to the extent that their performance is perceived to result in more positive than negative outcomes, the attitude will be favorable. Attitudes can be distinguished along two dimensions: cognitive and affective (Fishbein & Ajzen, 2010). Fishbein and Ajzen (2010) proposed that beliefs about the consequences of performing a behavior have instrumental properties, such that a person thinks about the value of the behavior (e.g., "My intervening as a bystander would be beneficial"), and experiential properties that have an affective tone (e.g., "Engaging in bystander intervention would

make me feel good about myself"). The current investigation seeks to move the literature forward by examining these constructs in the context of intervening in acts of IPV. In the current context, instrumental and experiential attitudes matter insofar that if an individual does not see a behavior holding practical value or emotional benefits, it is unlikely they will view intervening favorably.

Normative beliefs

Second, Fishbein and Ajzen (2010) posit that individuals form beliefs about behaviors based on the perceived behavioral expectation of important referent individuals or groups. The theorists believe that the second set of belief structures, normative beliefs, or the influence of important others, can be understood in a more nuanced fashion. This led to dividing normative beliefs into two components: descriptive and injunctive norms. Descriptive norms are what an individual thinks other are doing (e.g., "People important to me would intervene..."), whereas injunctive norms about a behavior are driven by what the individual thinks others expect they should be doing (e.g., "Others important to me think I should..."). Past research in the context of sexual assault intervention found that among college students, despite descriptive norms having a positive relationship with bystander intentions to intervene in sexual assault, injunctive norms were unrelated to bystander intervention intentions (Lukacena, Reynolds-Tylus, & Quick, 2019). Because this finding is contrary to the RAA and applied in a different context, it will be viewed with caution in the current study. Taken together, attitudes and normative beliefs are the two major determinants of intentions to perform a behavior. In the context intervening among intimate partners, it is crucial to understand how these attitudes and normative

beliefs operate. However, the theorists argue that possessing favorable attitudes and perceived social pressure may not be sufficient to perform a behavior.

Perceived Behavioral Control

Fishbein and Ajzen (2010) purport that individuals also form beliefs about personal and environmental factors that can facilitate or impede their attempts to carry out a behavior. Perceived behavioral control is defined as the extent to which people believe that they are capable of performing a given behavior and they have control over the performance of the behavior. The theorists divided the third belief structure, control beliefs, into two components: capacity and autonomy. Capacity is the belief that an individual has the ability to perform a behavior or how certain they are that they can do a behavior (Fishbein & Ajzen, 2010). Autonomy is the belief that an individual feels the performance of the behavior is under their control or completely up to their discretion. Early iterations of the TPB (Ajzen, 1985) only examined the ease or difficulty of a behavior, which Fishbein and Ajzen (2010) claim was not a sufficient indicator of perceived behavioral control. Perceived behavioral control is hypothesized to moderate the impact of attitudes and norms on intention and to moderate the impact of intention on behavior. In the context of IPV where a bystander needs be equipped with skills to intervene and feel that it is their autonomous decision to so, it seems autonomy and capacity would be key factors influencing intentions to intervene in IPV.

Behavioral Intentions

Once attitudes, perceived norms, and perceived behavioral control have formed, they are directly accessible to guide intentions into becoming behavior (Fishbein & Ajzen, 2010). In combination, attitudes toward behavior, perceived norms, and perceived

behavioral control lead to the formation of behavioral intention. The stronger the intention, the more likely that the behavior will be carried out by the individual. The relative importance of the three determinants of intentions is expected to vary from one behavior to another, as well as from one population to another.

In the context of bystander intervention, it is important to consider there are multiple strategies for intervening. For the current study, the RAA was applied by to assess more general attitudes, norms, and perceived behavioral control when presented with an instance of IPV (referred to in the survey as "relationship abuse"). Furthermore, intentions to intervene were examined on a granular level using the various communication strategies reviewed earlier (i.e., direct, distract, delegate, and delay; Fishbein & Ajzen, 2010, p. 36) and the option to do nothing. To this end, the following hypotheses are advanced:

H3a-f: (a) Instrumental attitudes, (b) experiential attitudes, (c) descriptive norms, (d) injunctive norms, (e) autonomy, and (f) capacity will be positively associated with intentions to intervene using a direct communication strategy when presented with an IPV situation.

H4a-f: (a) Instrumental attitudes, (b) experiential attitudes, (c) descriptive norms, (d) injunctive norms, (e) autonomy, and (f) capacity will be positively associated with intentions to intervene using a distract communication strategy when presented with an IPV situation.

H5a-f: (a) Instrumental attitudes, (b) experiential attitudes, (c) descriptive norms, (d) injunctive norms, (e) autonomy, and (f) capacity will be positively associated

with intentions to intervene using a delegate communication strategy when presented with an IPV situation.

H6a-f: (a) Instrumental attitudes, (b) experiential attitudes, (c) descriptive norms, (d) injunctive norms, (e) autonomy, and (f) capacity will be positively associated with intentions to intervene using a delay communication strategy when presented with an IPV situation.

H7a-f: (a) Instrumental attitudes, (b) experiential attitudes, (c) descriptive norms, (d) injunctive norms, (e) autonomy, and (f) capacity will be negatively associated with intentions to do nothing to intervene when presented with an IPV situation.

This process facilitates access to more general belief structures about intervening in acts of IPV, as well as homing in on situation-specific intentions concerning communication strategies that can be employed as a bystander.

Although the priority is to determine attitudes, norms, perceived behavioral control, and intentions to intervene more generally in the context of intervening to prevent IPV, it is also crucial to consider other background factors that may also contribute to intentions. As Fishbein and Ajzen (2010) note, individual factors, social factors, and access to and obtainment of information help to elucidate how different subgroups with diverse life experiences are likely to develop different beliefs regarding the same behaviors. In the context of bystander intervention among young adults, there are a few key background factors important to examine.

First and foremost, given that as a collective, studies have found that college students who engage in violence prevention and intervention programming report greater pro-social attitudes toward intervening and engagement in bystander behaviors (Jouriles, Krauss, Vu, Banyard, & McDonald, 2018), it is important to know and assess the role of previous training as a background characteristic in this dissertation. Another background characteristic that may amplify young adults' intentions to intervene in IPV is personal experience with sexual violence. Some researchers have found that individuals with a history of sexual violence were more likely to intervene than those who had not been personally victimized (Chabot et al., 2009; Franklin et al., 2017; Lukacena et al., 2019; Woods et al., 2016). Furthermore, Franklin and colleagues (2017) found that intention to engage in more direct forms of intervention was highly correlated with knowing a survivor of IPV. Thus, background characteristics of exposure to education/trainings, knowing someone who has experienced IPV, and personal experience with IPV were included in the regression models as background factors because these could impact participants' intentions to intervene in acts of IPV

Although research applying the TRA, the TPB, and the RAA frameworks has been criticized for producing correlational results that cannot casually explain or predict behavior (Sniehotta, Presseau, & Araújo-Soares, 2014; Weinstein, 2007), published interventions show that adapting efforts based on RAA constructs leads to subsequent change in behavioral intentions and behavior (Huhman, Quick, & Payne, 2016).

Additionally, meta-analytic research by McEachan and colleagues (2016) emphasizes the predictive utility of breaking down attitudes into instrumental and experiential attitudes, perceived norms into descriptive and injunctive norms, and perceived behavioral control into autonomy and capacity, each as independent but significant predictors of behavioral intention.

Savage and colleagues (2016) state that individuals tend to perceive IPV to be an individual/relationship issue, not a social problem. Thus, feelings of personal responsibility to respond to IPV situations are frequently minimal, if any. Therefore, it is important to examine personal responsibility and intentions to take action more closely. The following chapter outlines the methodological approach to data collection and analyses to address the research hypotheses and questions presented.

CHAPTER FOUR: METHODS

In this chapter, the researcher reviews the methods employed in the dissertation study. First, Phase One is described, which includes the pilot testing of the message stimuli (vignettes) and the elicitation questionnaire. Second, Phase Two, the primary study, is described which includes a RAA survey and a quasi-experiment. Detail is provided in regard to the procedures for data collection, measures, and data analysis plan.

Phase One: Pilot Testing of Stimuli

Stimuli Selection and Development

The stimuli chosen for the current study are written vignettes. Vignettes are best defined as hypothetical stories that provide concrete examples of people and their behaviors that can be used to explore participants' perceptions, beliefs, and attitudes. Presenting hypothetical scenarios allows participants to respond to quantitative measures and/or provide open-ended responses as to what they would do, or others would do, if faced with the situation (Barter & Renold, 2000). Furthermore, scenario-based research, such as written vignettes, helps researchers circumvent the use of broad generalizations for sensitive issues, such as IPV, that may be difficult for participants to connect to and interpret (Finch, 1987).

Schoenberg and Ravdal (2000) contend that there are several benefits of using vignettes. First, vignettes allow flexibility for the researcher to construct a unique instrument for the topic of inquiry. Second, vignettes place less burden on participants due to the storytelling nature of vignettes. Lastly, the level of depersonalization of a vignette allows a respondent to think beyond their own experiences to consider sensitive topics that others may experience to consider their future actions. Despite the argument

32

that hypothetical scenarios are less than ideal, it is the best solution taking into consideration the ethical constraints related to violence research (Laner et al., 2001). Furthermore, vignettes have been widely used in social science, especially in sensitive research involving sexual violence and IPV (see Anderson & Doherty, 2008; Schwartz, 2000; Hamby & Jackson, 2010).). Thus, vignettes were selected as the methodological approach for the current study as a safe way to engage young adult college students in a study on the sensitive, yet important topic of IPV victimization and intervention.

Six vignettes were designed for the dissertation study based on vignettes used in previous studies that addressed similar topics involving violence (e.g., IPV, sexual assault). The vignettes portraying acts of physical violence were adapted from Hamby and Jackson (2010). The vignettes portraying sexual violence were adapted from Nicksa (2014). Lastly, the vignettes communicating psychological aggression were adapted from studies conducted by Capezza and Arriaga (2008) and DeHart et al. (2010). All vignettes were adapted for Phase One to the context of IPV/dating violence (See Appendix A).

Pilot-testing Rationale

The purpose of the pilot testing was two-fold. First, given that the written vignettes were adapted from preexisting studies, the investigator wanted to ensure that the vignettes were relevant to the target audience of young adult college students. Thus, direct feedback from members of the target audience was needed to understand how the vignettes could be improved.

Second, as part of the best practices of applying the RAA, Fishbein and Ajzen (2010) recommend using an elicitation questionnaire with a small sample of individuals who represent the population being researched to elicit salient, readily accessible beliefs

with regard to behavioral outcomes, normative referents, and control factors as they relate to the behavior of interest. Fishbein and Ajzen suggest doing the elicitation in a free-response format and analyzing these open-ended responses to compile a list of modal salient outcomes, referents, and control factors. These lists are the used to inform the construction of items to be included in the final survey/questionnaire. Forgoing this part of the process and relying on the researcher's assumptions about outcomes, referents, and control beliefs creates a risky situation for misjudging the target populations' attitudes, perceptions of who their close others are, and perceptions of how much control they have over the recommended behavior (Ajzen, 2020).

Recruitment and Participants

The study was approved by the Institutional Review Board at the University of Kentucky (Protocol #56318). Following approval, participants were recruited through communication courses at the University of Kentucky during the Winter 2020 intersession from December 27, 2020 to January 6, 2021. After receiving approval from professors teaching an intersession course, the student participants were recruited via email invite via their professors. To participate, students were required to (a) be a student at the University of Kentucky; (b) be enrolled in a communication course in which the instructor approved of and offered extra credit for participation; and (c) be between the ages of 18 and 26 years

Participants were asked to complete an online questionnaire which consisted of (a) demographic questions, (b) draft vignettes with corresponding questions to collect their perceptions of the draft vignettes, and (c) elicitation questions with regard to the RAA. Participants (N = 29) ranged in age from 18 to 26 (M = 20.55, SD = 1.90). The

majority of the participants who completed the survey were females (n = 21, 72.01%). With respect to race, most participants identified as White/Caucasian (n = 27, 93.1%), followed by Black/African American (n = 2, 6.9%). All participants reported their sexual orientation as being heterosexual/straight (n = 29, 100%). Participants were majority upperclassmen (Freshman [n = 5, 17.24%], Sophomore [n = 5, 17.24%], Junior [n = 10, 34.48%], and Senior [n = 9, 31.03%]). With respect to knowledge about IPV/dating violence, less than half of participants (n = 12, 41.38%) indicated they had attended an education course. More than half of the participants (n = 20, 68.6%) personally knew a survivor of dating violence, and about one-third of participants (n = 9, 31%) self-reported having experienced dating violence themselves.

Participants completed a series of open-ended questions in reference to the vignettes. This process allowed the primary investigator to obtain feedback to ascertain as to how these vignettes could be adapted to be more realistic from the perspective of the target audience (i.e., young adult college students). Please see Appendix A for the vignettes, Appendix B for the consent form, and Appendix C for the pilot questionnaire data collection instrument.

Data Analysis for Vignettes

A basic thematic analysis was used to efficiently identify issues with the vignettes among the target population. This portion of the open-ended questionnaire yielded 25 single-spaced pages of open format responses from the target population. The open-ended data concerning the design of the vignettes from the questionnaire were analyzed using a thematic open coding analysis methodology (Creswell, 2013; Lindlof & Taylor, 2002). Qualitative data analysis software (QDA) was not used to conduct the analyses. Rather, a

process of identifying initial codes, assigning a color, and then coding the remainder of the responses was used. Open coding is an initial coding process that allows for major themes of information to surface from the data because the coding is unrestricted (categories have not yet been defined; Creswell, 2013; Lindlof & Taylor, 2002). If a code was mentioned by more than 20% of the respondents, this was then established as a theme. These themes were then used to enhance the vignette and address any major issues. Once the vignettes were adapted to reflect the feedback from the pilot study, they were then used in Phase Two for the quasi-experiment.

Results

Adapting Vignettes. Below I review what the participants perceived as effective about the vignettes, how they felt the vignettes could be improved, and how they felt their peers, including other students attending the University of Kentucky, would react to these messages.

Naming practices. One concern identified in past studies is that how IPV is labeled or named may not be consistent across subsets of the population (see Nordin, 2019). Therefore, after being provided the definition of IPV, participants were asked, "What are some other labels or names you would use to describe this behavior in college student relationships?" More than 27% (n = 8) of the participants indicated that they preferred some variation of the terms dating abuse or abusive relationship. Thus, the terminology used in Phase Two was adapted from "dating violence" to "relationship abuse."

Realism. Across the three IPV scenarios, at least 25% of the participants indicated that they liked the vignettes because they were realistic, not overdramatized,

and a situation they have witnessed in that past. In response to the vignette portraying psychological violence, one participant stated, "I like that it's in a party setting, as this is when behavior like this tends to occur, making it more realistic especially from a college student's perspective." Additionally, participants were asked, "How do you think students at the University of Kentucky will react to this narrative?" to ensure that their peers would be receptive to the vignettes. Underscoring what the participants liked about the vignettes, many indicated that they felt fellow students would find the vignettes to be realistic. In response to the vignette portraying sexual violence, one participant expressed, "They will be able to relate because many see this happen every weekend."

Background details. In addition to asking what the participants found to be effective and likeable aspects of the vignettes, they were also asked to report what they felt could improve the vignettes. Although participants appreciated the brevity of the vignettes, more than one-fourth of the participants expressed that more details would be helpful for the vignettes portraying physical violence and psychological violence. For example, in respect to the vignette portraying physical violence, one participant stated the vignette could be improved by providing, "More details about the conversation, and background information that would make sense why John gets upset." The vignette portraying physical violence was adapted to include the language specifying that the third person in the story (i.e., Mike/ Mikayla) is a platonic friend. The vignette portraying psychological violence was adapted to include more background information as to an event that triggered name-calling.

Length of relationship. Although this was not mentioned by the majority of participants, salient throughout the feedback on the vignettes was the idea that length of

the relationship (i.e., noting that the couple have been dating for a year) was not relevant to the scenario and should be removed. One participant even mentioned, "That Julia and John have been dating for two years. This would not be okay whether they were dating for one day or 90 years." Thus, this temporal language was removed from the finalized vignettes and replaced with the phrase "two college students who are in a committed romantic relationship."

Data Analysis for Elicitation Questions

In addition to reviewing the vignettes, participants also provided their salient beliefs concerning intervening in acts of IPV/dating violence. It is necessary to develop the RAA measures to reflect the salient belief structures of representatives from the target audience because these can vary among different populations for the same behavior (Ajzen, 2020). Three sets of questions were presented to participants to elicit their most salient attitudes related to behavioral outcomes, who they identity most closely with as referent groups with respect to behavioral norms, and lastly what factors contribute to their feelings of behavioral control in the context of intervening in acts of IPV. This portion of the open-ended questionnaire yielded 10 single-spaced pages of open format responses from the target population.

Again, a basic thematic analysis was used to quickly and efficiently identify themes within the open responses provided by the target population. The primary investigator thematically analyzed the responses provided by participants without qualitative data analysis software. Rather, once a code was mention once, a color was assigned to that code. If a code was mentioned by more than 20% of the elicitation study

respondents, the belief was selected to be included in the measurement of behavioral beliefs on closed-ended survey for Phase Two.

Results

Outcomes/Attitudes. Four open response questions were posed to participants concerning the outcomes associated with intervening in acts of dating violence/relationship abuse: "What do you see as the advantages of you intervening in acts of dating violence?";"What do you see as the disadvantages of you intervening in acts of dating violence?"; "What positive feelings do you associate with intervening in acts of dating violence?";and "What negative feelings do you associate with intervening in acts of dating violence?" Approximately 62% of participants believed the major advantage participants saw to intervening was helping someone get out of a bad situation and preventing future violence. The disadvantages identified when it comes to instrumental attitudes were experiencing violence themselves for intervening, making the situation worse, and losing a friend. The majority of participants associated positive feelings of being helpful, satisfied, and accomplished if they were to personally intervene in acts of dating violence. On the other hand, the negative feelings associated were the perceptions that intervening would make things worse and that they would be perceived by their friend as overbearing. Thus, the items for assessing instrumental and experiential attitudes were adapted to include the attitudes conveyed most often in free response elicitation (e.g., "My intervening to prevent acts of relationship abuse would be helpful," "My intervening to prevent acts of relationship abuse would make me feel accomplished").

Referents/Norms. With regard to referent groups, participants were asked to respond to the following four open response statements/questions: "Please list the individuals or groups who would approve or think you should intervene in acts of dating violence," "Please list the individuals or groups who would disapprove or think you should not intervene in acts of dating violence," "Sometimes, when we are not sure what to do, we look to see what others are doing. Please list the individuals or groups who are most likely to intervene in acts of dating violence," and "Please list the individuals or groups who are least likely to intervene in acts of dating violence." The groups participants perceived as thinking they should intervene included friends and family members. Participants felt that the perpetrator of the violence and/or the victim involved in the act of dating violence may disapprove of intervention efforts. With regard to whom the participants looked toward to set an example of intervening in dating violence, friends and family members were mentioned by the majority of participants. Lastly, those identified as least likely to intervene included those who do not know the couple or friends of the partner perpetrating the violence. Based on these open responses, the RAA questions concerning descriptive and injunctive norms were adapted to included family members as an additional referent group in addition to friends.

Control Factors. Participants were asked to respond to free response statements concerning control factors: "Please list any factors or circumstances that would make it easy or enable you to intervene in acts of dating violence," and "Please list any factors or circumstances that would make it difficult or prevent you from intervening in acts of dating violence." The factors mentioned most often as enabling participants to intervene included having a close relationship with the victim and there being other witnesses

present. In contrast, the primary factor identified as preventing the participant from intervening in acts of dating violence was the feeling that they, as active bystanders, may be in danger. Thus, the RAA measures for perceived behavioral control were revised to include some of the factors that may make it more challenging to intervene with regard to capacity, their ability to perform the behavior (i.e., "I am certain that I can intervene to prevent an act of relationship abuse even if I don't personally know the person being abused," "I am certain that I can intervene to prevent an act of relationship abuse even if other bystanders are not present," and "I am certain that I can intervene to prevent an act of relationship abuse even if the abuser is aggressive." In summation, the elicitation portion of the pilot study was beneficial to develop items that reflect these prominent beliefs held by the target audience. The final items are presented in Appendix F.

Phase Two: Primary Study

Quasi-Experimental Data Collection

Recruitment and Participants

Participants (N = 508) were recruited through the Communication SONA student research participation pool at a large southern land grant university, the University of Kentucky, during the Spring 2021 semester. The research pool allows students to receive a portion of their class credit for participation in research studies. A total of 1,642 students were included in the research pool during the recruitment period for the study, thus yielding a response rate of 30.9%. To be eligible to participate, individuals had to be (a) a student currently enrolled at the university and (b) between the 18 and 26 years of age. The researcher recruited a total of 508 participants; however, 47 participants were omitted from the analyses. Four participants were excluded due to not meeting the age

inclusion criterion and were filtered out of the online survey. Twenty-nine participants were removed for failing the attention check question, indicating that they did not closely read the vignette presented. An additional 14 participants were removed for missing data because they did not complete all the intention measures following the exposure to the vignette. Therefore, the final sample size for the primary study was 461 participants.

The age of the participants ranged from 18 to 25 years old (M=19.90, SD=1.36). The majority of participants identified as female (n=330,71.6%), 26.9% identified as male (n=124), 3 participants identified as non-binary, and 4 participants preferred not to answer. With regard to year in school, participants reported freshman status (n=141,30.6%), sophomore status (n=123,26.7%), junior status (n=118,25.6%), senior status (n=73,15.8%), and six indicated "other" or did not respond to this item. Participants self-identified their race as White/European American (n=400, 86.9%), Black/African American (n=37,8.0%), Asian (n=20,4.3%), or American Indian/Alaskan Native (n=5,1.1%), seven participants identified as some other race, and five participants preferred not to answer this question. With regard to ethnicity, only 5.4% of the sample (n=25) identified as Hispanic or Latino/a. Participants self-described their political affiliation as very liberal to somewhat liberal (n=173,38.9%), moderate (n=110,23.9%), or somewhat conservative to very conservative (n=168,24.1%); four participants chose not to answer.

Most participants indicated that they have had a romantic relationship (n = 398, 86.4%), with only 13.2% indicating they have never been in a romantic relationship (n = 61). Seventy-seven-point two percent (n = 356) of the participants indicated that they have engaged in sexual activity. Participants reported their relationship status as single (n = 61).

= 231, 50.%), casual romantic relationship (n = 41, 8.9%), committed and exclusive romantic relationship (n = 180, 39.0%), or engaged or married (n = 6, 1.3%); three participants indicated other or did not provide a response. The majority of participants self-identified as heterosexual/straight (n = 412, 89.4%), gay/lesbian (n = 11; 2.4%), or bisexual (n = 26, 5.6%); 12 participants indicated they preferred not to say or chose not to respond to this item.

With regard to IPV/relationship violence education, only about one-fourth of the sample (n = 117, 25.4%) had received this type of education. In terms of experiencing IPV/relationship abuse, 18.9% of participants indicated they had experienced it (n = 87), the majority indicated that they had not (n = 329, 71.4%), and some indicated they were unsure (n = 43, 9.3%). Well over half of the sample knew a survivor of IPV/relationship violence (n = 317, 68.8%).

During recruitment, participants were informed that the study is concerned with young adults' perceptions of the "dynamics of young adult romantic relationships" as a means to avoid any priming effects that may occur if terminology such as domestic violence, IPV, relationship abuse, or dating violence were to be directly used. The consent form presented to the student prior to participation included a trigger warning notifying students that there will some sensitive, perhaps distressing topics presented related to romantic relationships, including discussion of aggression.

The online experiment was administered through Qualtrics. The consent form began by introducing the researcher, the intent of the research, and information on the participants' rights concerning privacy and confidentiality. To proceed, participants were required to read and agree to the consent form. Following the informed consent page (see

Appendix E), participants answered questions assessing attitudes toward IPV in their own relationships using the IPVAS-R and questions measuring the RAA variables (i.e., attitudes, norms, perceived behavioral control, and intentions) in reference to bystander intervention in the context of IPV. For the purposes of this study and target population, IPV originally was denoted as "dating violence" but was adapted in Phase Two as "relationship abuse" per responses from the pilot study; see Appendix D for revised vignettes) because recent research indicates that terminology such as domestic violence and IPV may be less appropriate when referring to violence among young adult, unmarried college students (Nordin, 2019).

Following the consent and RAA questions, participants were presented with the vignettes. The experiment was a between-subjects design in which each participant was randomly assigned to one of six conditions in a 2 (perpetrator gender: male vs. female) x 3 (type of IPV: physical vs. psychological vs. sexual) quasi-experimental design. Participants were prompted to read one of six written vignettes describing an IPV incident based on the two primary hypotheses (perpetrator gender and type of IPV). The vignettes were acquired from previous studies and adapted to fit each condition for the current study. All details including names of the relational partners, the length of the relationship, and the setting of the incident are identical in each vignette. The only details manipulated in the vignettes include the gender of the perpetrator/victim and the type of IPV perpetrated (see Table 1).

After reading the vignette, participants were asked to anticipate how they would react if they were a bystander observing the scenarios portrayed in the vignettes.

Participants completed behavioral intention measures that asked about specific

communication strategies to intervene (i.e., direct, distract, delegate, delay) and the option to do nothing to intervene. Additionally, participants rated the severity of the vignette and had the opportunity to complete open-ended reflections about the scenario presented. Finally, participants answered socio-demographic questions. All recruitment materials and procedures were approved by the Institutional Review Board at the University of Kentucky.

Table 1Manipulation Distribution of Message Variables

Condition	Gender of	Type of Violence	Participants	Percent
	Perpetrator		Per Condition	
1	Male	Physical	75	16.3
2	Male	Sexual	75	16.3
3	Male	Psychological	80	17.4
4	Female	Physical	75	16.3
5	Female	Sexual	78	16.9
6	Female	Psychological	78	16.9
Total			461	100

Attention Check

The researcher elected not to use a manipulation check given that she wanted to ensure participants were able to express if they viewed the depictions of IPV as violence. In lieu of manipulation checks, the selection of vignettes from peer-reviewed literature, careful qualitative pilot testing of the vignettes with members of the target population, and adaption of the vignettes based on the target population's feedback were all important aspects of vignette development to ensure face validity and effectiveness (Riley, Critchlow, Birkenstock, Itzoe, Senter, Holmes, & Buffer, 2021).

To ensure participants fully read and understood the narrative vignettes, an attention check was added to the survey. The attention check consisted of a question

confirming the relationship status of the characters in the vignettes. Participants who failed the attention check (n = 29) were removed from the final data set.

Measures

The Intimate Partner Violence Attitudes Scale – Revised (IPVAS-R). The Intimate Partner Violence Attitudes Scale – Revised (IPVAS; Smith et al., 2005; Fincham, Cui, Braithwaite, & Pasley, 2008) is a 17-item scale used to identify participants' personal tolerance of physical and psychological abuse in dating relationships. The IPVAS–R measures acceptance of IPV in three domains: psychological abuse (Abuse; ten items e.g., "During a heated argument, it is okay for me to bring up something from my partner's past to hurt him or her," M = 1.08, SD = 0.39, $\alpha = .83$), physical violence (Violence; four items e.g., "It would never be appropriate to hit or try to hit one's partner with an object," M = 4.77, SD = 0.66, $\alpha = .90$), and controlling behaviors (Control; six items e.g., "It is okay for me to tell my partner not to talk to someone of the opposite sex," M = 1.67, SD = 0.59, $\alpha = .64$). All items were rated using a 7-point scale (1 = strongly disagree, 2 = strongly agree) and averaged.

Attitude. Attitude was operationalized as both instrumental and experiential attitudes. Instrumental attitude was measured with five items (e.g., "My intervening to prevent acts of relationship abuse would be good," "My intervening to prevent acts of relationship abuse would be beneficial," M = 6.22, SD = 0.94, $\alpha = .96$). Experiential attitude was assessed with six items (e.g. "My intervening to prevent acts of relationship abuse would help me feel good about myself," "My intervening to prevent acts of relationship abuse would be satisfying," M = 5.68, SD = 1.11, $\alpha = .91$).

46

Perceived Norms. Perceived norms were conceptualized as descriptive and injunctive norms. Descriptive norms were measured with four items (e.g., "Most students would intervene to prevent acts of relationship abuse," "Most of my friends at the University of Kentucky would intervene to prevent acts of relationship abuse," M = 5.56, SD = 1.00, $\alpha = .81$). Injunctive norms were measured with eight items (e.g., "Most of my friends think that I should intervene to prevent acts of relationship abuse," M = 5.15, SD = 1.06, $\alpha = .88$)

Perceived Behavioral Control. Perceived behavioral control was conceptualized as autonomy and capacity (Fishbein & Ajzen, 2010). Autonomy was measured using four survey items (e.g., "Intervening to prevent acts of relationship abuse is something that is up to me," M = 5.48, SD = 1.09, $\alpha = .85$). Capacity was measured with seven items (e.g., "Even if it was difficult, I am sure I could intervene to prevent an act of relationship abuse," M = 5.15, SD = 1.23, $\alpha = .96$).

Perceptions of Severity (POS). Participants were asked to judge the severity of the vignette presented. Participants reported on their perceptions of severity by rating how serious, violent, and dangerous the incident was on a 1 to 7 Likert-type scale (1 = *not serious*, 7 = very serious; M = 4.66, SD = 1.40, $\alpha = .85$).

Behavioral Intentions. Behavioral intentions to intervene were measured preand post-exposure to the vignettes. Prior to reading the vignette (pre-test), participants responded to five different sets of questions assessing intention to intervene using four different communication strategies and the option to do nothing to intervene in response to an act of relationship abuse. Intentions were measured with four items for each strategy: direct (M = 5.48, SD = 1.13, $\alpha = .94$), distract (M = 5.54, SD = 1.24, $\alpha = .96$),

47

delegate (M = 5.71, SD = 1.18, $\alpha = .96$), delay (M = 5.71, SD = 1.39, $\alpha = .97$), and do nothing M = 2.26, SD = 1.48, $\alpha = .98$). Following exposure to the vignette (post-test), intention measures for the four different communication strategies to intervene and the option to do nothing to intervene were presented. For each strategy, the participants responded to four items indicating their intentions to use that communication strategy to intervene: direct (M = 5.48, SD = 1.32, $\alpha = .97$), distract (M = 5.15, SD = 1.54, $\alpha = .98$), delegate (M = 5.15, SD = 1.57, $\alpha = .98$), delay (M = 5.14, SD = 1.60, $\alpha = .99$), and do nothing (M = 2.24, SD = 1.48, $\alpha = .99$). See Appendix E for the consent document and Appendix F for the full data collection instrument.

Covariates. Several demographic variables were collected as potential covariates, including gender, age, race/ethnicity, exposure to relationship abuse education/campaign, personally knowing someone who has experienced relationship abuse, having personally experienced relationship abuse, and having previously intervened to prevent relationship abuse.

Summary

This chapter explained the methodological procedures that were used. A pilot study was conducted to pretest the vignettes, receive feedback from representatives of the target population, and conduct a short elicitation study with this group to properly construct the RAA survey items. The primary investigator revised the vignettes and constructed the RAA measures. The primary investigator then recruited undergraduate students from SONA and randomly assigned them to one of six vignettes that varied the gender of the partner perpetrating relationship abuse (i.e., male or female) and the type of violence portrayed in the vignette (i.e., physical, sexual, psychological). The primary

investigator also provided an overview of the participants and instruments that were involved in this dissertation to test the hypotheses.

CHAPTER FIVE: PHASE 2 RESULTS

All analyses were conducted in IBM SPSS Version 27. Table 2 provides the correlation matrix of the variables including the means and standard deviations. For Hypotheses 1a-e, a series of independent samples t-tests were used to examine the direct effect of the gender of the perpetrator (male vs. female) impact intentions to intervene using the four different communication strategies and the option to do nothing to intervene. To address Hypotheses 2a-e, a series of Analyses of Variance (ANOVAs) were used to examine the direct effects of the three types of violence (physical, sexual, and psychological) impact intentions to intervene using the four different communication strategies and the option to do nothing to intervene. To examine possible interactions between gender of the perpetrator and type of violence, a series of ANOVAs were conducted to examine the impact on intentions to intervene using the four different communication strategies and the option to do nothing to intervene. To test Hypotheses 3a-f through Hypotheses 7a-f, a series of hierarchal regressions were used to examine how belief structures including attitudes, norms, and perceived behavioral control predict intentions to intervene using the four different communication strategies and the option to do nothing to intervene while controlling for background factors.

Table 2

Correlation Matrix for Study Variables

Variables	M	SD	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
1. IPVAS: Psychological Violence	1.36	.49										10									- 17	
2. IPVAS: Physical Violence	4.77	.66	.30*																			
3. IPVAS: Control	2.01	.70	.35*	.25*																		
4. Instrumental Attitudes	6.22	.94	.24*	.12*	.12*																	
5. Experiential Attitudes	5.68	1.11	- .16* *	.11*	08	.58*																
6. Descriptive Norms	5.55	1.00	.13*	.05	06	.26*	.32*															
7. Injunctive Norms	5.14	1.06	.01	.00	.02	.23*	.24*	.45*														

8. Capacity	5.15	1.23	09	.09	03	.36*	.32*	.47* *	.40*									
9. Autonomy	5.48	1.09	.12*	.06	.16* *	.30*	.30*	.27*	.32*	.47* *								
10. Direct – Time 1	5.48	1.13	.13*	.09	89	.30*	.30*	.39*	.33*	.62* *	.44* *							
11. Distract – Time 1	5.54	1.24	- .16* *	.07	.13*	.23	.24*	.28*	.27*	.30*	.23*	.34*						
12. Delegate – Time 1	5.71	1.18	.16* *	.05	.11*	.18*	.25*	.25*	.23*	.18*	.24*	.28*	.61* *					
13. Delay – Time 1	5.41	1.39	- .16* *	.00	.13*	.16*	.23*	.21*	.20*	.15*	.22*	.26*	.44*	.54*				
14. Do Nothing – Time 1	2.26	1.48	.33*	- .17* *	.27*	.30*	.20*	.13*	.11*	- .19* *	- .17* *	.25*	.15*	09	05			
15. Severity	4.65	1.40	.10*	.06	09	.40	.04	.04	.14*	.11*	.16*	.10*	.21*	.17*	.22*	03		
16. Direct – Time 2	5.48	1.32	.18*	.11*	09	.22*	.26*	.26*	.26*	.35*	.25*	.45*	.34*	.29*	.26*	- .18* *	.28*	

17. Distract – Time 2	5.15	1.54	.10*	.02	09	.13*	.11*	.16*	.12*	.17*	.17*	.20*	.47* *	.36*	.30*	02	.24*	.19* *				
18. Delegate – Time 2	5.15	1.57	- .11*	.05	09	.40	.19*	.07	.11*	.05	.17*	.15*	.30*	.53*	.39*	.00	.35*	.22*	.39* *			
19. Delay – Time 2	5.14	1.60	- .11*	.02	09	.06	.16*	.12*	.14*	.08	.13*	.17* *	.31*	.42*	.59* *	07	.23*	.27*	.23*	.43*		
20. Do nothing Time 2	2.24	1.48	.28*	- .19* *	09	.24*	.22*	- .14* *	- .15* *	- .18* *	.20*	.21*	.23*	.23*	- .16* *	.64* *	.24*	- .37* *	- .18* *	- .21* *	- .18* *	

Note. *p < .05. **p < .01

Main Effects for Gender of Perpetrator

Hypotheses 1a --- Direct Communication Strategy

Hypothesis 1a predicted that participants' intentions to intervene using a direct communication strategy would differ based on the gender of the perpetrator of IPV in the vignette. Specifically, it was hypothesized that participants would indicate increased intentions to intervene using a direct communication strategy if the IPV in the vignette is perpetrated by a male.

An independent samples t-test was conducted to compare the intention of participants to use a direct communication strategy to intervene based on the gender of the perpetrator in the vignette. Given that the significance value for Levene's test was less than <.05, equal variances were not assumed; therefore, the alternative t-value which compensates for the fact equal variances are not the same was used. There was a significant difference with regard to intentions to intervene using a direct communication strategy when IPV was perpetrated by a male (M = 5.66, SD = 1.20) and female (M = 5.29, SD = 1.40); t = (447.44) = 3.01, p = .003, two-tailed). Therefore, hypothesis 1a was supported. The magnitude of the difference in the means (mean difference = 0.37, 95% CI: 0.13 to 0.61 was very small (eta squared = 0.019).

Hypothesis 1b – Distract Communication Strategy

Hypothesis 1b predicted that participants' intentions to intervene using a distract communication strategy would differ based on the gender of the perpetrator of IPV in the vignette. Specifically, it was hypothesized that participants would indicate increased intentions to intervene using a distract communication strategy if the IPV in the vignette is perpetrated by a male.

An independent samples t-test was conducted to compare the intention of participants to use a distract communication strategy to intervene based on the gender of the perpetrator in the vignette. Given that the significance value for Levene's test was exactly .05, equal variances were not assumed, and the alternative t-value was used. There was not a significant difference with regard to intention to intervene using a distract communication strategy when IPV was perpetrated by a male (M = 5.27, SD = 1.53) and female (M = 5.03, SD = 1.56); t (457.83) = 1.69, p = .092, two-tailed). Therefore, hypothesis 1b was not supported. The magnitude of the difference in the means (mean difference = 0.24, 95% CI: 1.04 to .52) was very small (eta squared = 0.006).

Hypothesis 1c – Delegate Communication Strategy

Hypothesis 1c predicted that participants' intentions to intervene using a delegate communication strategy would differ based on the gender of the perpetrator of IPV in the vignette. Specifically, it was hypothesized that participants would indicate increased intentions to intervene using a delegate communication strategy if the IPV in the vignette is perpetrated by a male.

An independent samples t-test was conducted to compare the intention of participants to use a delegate communication strategy to intervene based on the gender of the perpetrator in the vignette. Given that the value for the Levene's test was significant, equal variances were assumed between the two groups. There was a significant difference with regard to intentions to intervene using a delegate communication strategy when IPV was perpetrated by a male (M = 5.39, SD = 1.50) and female (M = 4.92, SD = 1.61); t = 3.24, t = 0.00, two-tailed). Therefore, hypothesis 1c was supported. The

magnitude of the difference in the means (mean difference = 0.47, 95% CI: 0.18 to 0.75) was small (eta squared = 0.022).

Hypothesis 1d – Delay Communication Strategy

Hypothesis 1d predicted that participants' intentions to intervene using a delay communication strategy would differ based on the gender of the perpetrator of IPV in the vignette. Specifically, the researcher hypothesized that participants would indicate increased intentions to intervene using a delay communication strategy if the IPV in the vignette is perpetrated by a male.

An independent samples t-test was conducted to compare the intention of participants to use a delegate communication strategy to intervene based on the gender of the perpetrator in the vignette. Given that the significant value for the Levene's test was less than 0.05 and significant, equal variances were not assumed. The alternative t-value was used. There was a significant difference with regard to intention to intervene using a delay communication strategy when IPV was perpetrated by a male (M = 5.33, SD = 1.48) and female (M = 4.94, SD = 1.69); t (459) = 2.65, p = 0.008, two-tailed). Therefore, hypothesis 1d was supported. The magnitude of the difference in the means (mean difference = 0.39, 95% CI: .10 to .68) was small (eta squared = 0.015).

Hypothesis 1e – Do Nothing to Intervene

Hypothesis 1e predicted that participants' intentions to do nothing would differ based on the gender of the perpetrator of IPV in the vignette. Specifically, it was hypothesized that participants would indicate increased intentions to do nothing if the IPV in the vignette is perpetrated by a female. An independent samples t-test was conducted to compare the intention of participants to do nothing to intervene based on the

gender of the perpetrator in the vignette. Given that the significant value for the Levene's test was significant at less than 0.05, equal variances were not assumed. The alternative t-value was used. There was a significant difference with regard to intentions to do nothing to intervene when IPV was perpetrated by a male (M = 2.03, SD = 1.32) and female (M = 2.46, SD = 1.60); t (459) = -3.16, p = 0.002, two-tailed). Therefore, hypothesis 1e was supported. The magnitude of the difference in means. (mean difference = -0.43, 95% CI: -.70 to -.16) was small (eta squared = 0.021).

Main Effects for Type of Intimate Partner Violence

Hypothesis 2a – Direct Communication Strategy

Hypothesis 2a predicted that participants' intentions to intervene using a direct communication strategy would differ based on the type of IPV perpetrated in the vignette. Specifically, it was hypothesized that participants would indicate increased intentions to intervene using a direct communication strategy if the IPV perpetrated in the vignette was physical violence.

A one-way between-groups analysis of variance (ANOVA) was conducted to explore the impact of the type of IPV on the intentions to intervene using a direct communication strategy. Participants were divided into three groups according to their random assignment to the type of IPV (Group 1: physical; Group 2: sexual; Group 3: psychological). Levene's test for homogeneity of variances was greater than 0.05, indicating the assumption was not violated. There was a significant difference at the p < 0.01 level for the three types of IPV: F(2, 457) = 5.68, p = 0.004 (see Table 3). Despite reaching statistical significance, the actual difference in mean scores between the groups was quite small. The effect size, calculated using eta squared, was 0.02. Post-hoc

comparisons using the Tukey HSD test indicated that the mean score for physical (M = 5.59, SD = 1.32) was significantly different than sexual (M = 5.19, SD = 1.34), but not psychological (M = 5.65, SD = 1.24). Psychological (M = 5.65, SD = 1.24) was significantly different from sexual (M = 5.19, SD = 1.34). Hypothesis 2a was not supported.

Table 3

One-Way Analysis of Variance Type of Violence – Dependent Variable: Direct Communication Strategy

Condition:	N	Mean Standard		95% Confidence Interval	
Violence type		Deviation			
	n	M	SD	Lower bound	Upper Bound
Physical	150	5.59	1.32	5.37	5.80
Sexual	154	5.19	1.34	4.98	5.40
Psychological	156	5.65	1.24	5.35	5.60

Hypothesis 2b – Distract Communication Strategy

Hypothesis 2b predicted that participants' intentions to intervene using a distract communication strategy would differ based on the type of IPV perpetrated in the vignette. Specifically, it was hypothesized that participants would indicate increased intentions to intervene using a direct communication strategy if the IPV perpetrated in the vignette was physical violence.

A one-way between-groups ANOVA was conducted to explore the impact of the type of IPV on the intentions to intervene using a distract communication strategy. Participants were divided into three groups according to their random assignment to the type of IPV (Group 1: physical; Group 2: sexual; Group 3: psychological). Levene's test for homogeneity of variances was less than .05, indicating the assumption of homogeneity of variances was violated. Thus, robust test of quality of means, specifically Welch, was used as an alternative F statistic. There was a significant difference at the p < 1.001 level, for the three types of IPV: F(2, 457) = 7.64, p = .000 (see Table 4). Despite reaching statistical significance, the actual difference in mean scores between the groups was small. The effect size, calculated using eta squared, was .03. Post-hoc comparisons using the Tukey HSD test indicated that the mean score for physical (M = 4.97, SD =1.64) was significantly different than sexual (M = 5.54, SD = 1.28), but not psychological (M = 4.94, SD = 1.63). Sexual (M = 5.54, SD = 1.28) was also significantly different from psychological (M = 4.94, SD = 1.63). Given that sexual IPV had the highest mean score, hypothesis 2b was not supported.

 Table 4

 One-Way Analysis of Variance Type of Violence – Dependent Variable: Distract Communication Strategy

Condition: Violence type	N	Mean	Standard Deviation	95% Confid	ence Interval
violence type			Deviation		
	n	M	SD	Lower bound	Upper Bound
Physical	150	4.97	1.64	4.70	5.23
Sexual	154	5.54	1.28	5.34	5.75
Psychological	156	5.15	1.54	4.69	5.20

Hypothesis 2c – Delegate Communication Strategy

Hypothesis 2c predicted that participants' intentions to intervene using a delegate communication strategy would differ based on the type of IPV perpetrated in the vignette. Specifically, it was hypothesized that participants would indicate increased intentions to intervene using a delegate communication strategy if the IPV perpetrated in the vignette was physical violence.

A one-way between-groups ANOVA was conducted to explore the impact of the type of IPV on the intentions to intervene using a delegate communication strategy. Participants were divided into three groups according to their random assignment to the type of IPV (Group 1: physical; Group 2: sexual; Group 3: psychological). Levene's test for homogeneity of variances was greater than .05, thus indicating the assumption had not been violated. There was a significant difference at the p < .05 level, for the three types of IPV: F(2, 458) = 3.19, p = .04 (see Table 5). Despite reaching statistical significance, the actual difference in mean scores between the groups was quite small. The effect size, calculated using eta squared, was .01. Post-hoc comparisons using the Tukey HSD test indicated that the mean scores for all three groups, physical (M = 5.27, SD = 1.61), sexual (M = 5.30, SD = 1.41), and psychological (M = 4.90, SD = 1.66), did not differ significantly from one another. Hypothesis 2c was not supported.

 Table 5

 One-Way Analysis of Variance Type of Violence – Dependent Variable: Delegate Communication Strategy

Condition: Violence type	N	Mean Standa Deviat		95% Confidence Interval		
• 1	n	M	SD	Lower bound	Upper Bound	
Physical	150	5.27	1.61	5.01	5.53	
Sexual	154	5.30	1.41	5.07	5.53	
Psychological	157	4.90	1.57	4.64	5.16	

Hypothesis 2d – Delay Communication Strategy

Hypothesis 2d predicted that participants' intentions to intervene using a delay communication strategy would differ based on the type of IPV perpetrated in the vignette. Specifically, the it was hypothesized that participants would indicate increased intentions to intervene using a delay communication strategy if the IPV perpetrated in the vignette was physical violence.

A one-way between-groups ANOVA was conducted to explore the impact of the type of IPV on the intentions to intervene using a delay communication strategy. Participants were divided into three groups according to their random assignment to the type of IPV (Group 1: physical; Group 2: sexual; Group 3: psychological). Levene's test for homogeneity of variances was greater than .05, thus indicating the assumption had not been violated. There was not a significant difference for the three types of IPV: F (2, 458) = 1.35, p = .26 (see Table 6). Post-hoc comparisons using the Tukey HSD test indicated that the mean scores for all three groups, physical (M = 5.01, SD = 1.61), sexual (M = 5.09, SD = 1.52), and psychological (M = 5.30, SD = 1.65), did not differ significantly from one another. Hypothesis 2d was not supported.

 Table 6

 One-Way Analysis of Variance Type of Violence – Dependent Variable: Delay Communication Strategy

Condition:	N	Mean Standard		95% Confidence Interval		
Violence type			Deviation			
	n	M	SD	Lower bound	Upper Bound	
Physical	150	5.01	1.61	4.75	5.27	
Sexual	154	5.09	1.52	4.85	5.33	
Psychological	157	5.14	1.60	5.04	5.56	

Hypothesis 2e – Do Nothing to Intervene

Hypothesis 2e predicted that participants' intentions to do nothing to intervene would differ based on the type of IPV perpetrated in the vignette. Specifically, it was hypothesized that participants would indicate increased intentions to do nothing to intervene if the IPV perpetrated in the vignette was psychological violence.

A one-way between-groups ANOVA was conducted to explore the impact of the type of IPV on the intentions to do nothing to intervene. Participants were divided into three groups according to their random assignment to the type of IPV (Group 1: physical; Group 2: sexual; Group 3: psychological). Levene's test for homogeneity of variances was greater than .05, indicating the assumption had not been violated. There was not a significant difference for the three types of IPV: F(2, 458) = .92, p = .40. Post-hoc comparisons using the Tukey HSD test indicated that the mean scores for all three groups, physical (M = 2.12, SD = 1.50), sexual (M = 2.35, SD = 1.47), and psychological (M = 2.26, SD = 1.48), did not differ significantly from one another. Hypothesis 2e was not supported.

 Table 7

 One-Way Analysis of Variance Type of Violence – Dependent Variable: Do Nothing to Intervene

Condition: Violence type	N	Mean	Standard Deviation	95% Confid	ence Interval
	n	M	SD	Lower bound	Upper Bound
Physical	150	2.12	1.50	1.88	2.36
Sexual	154	2.35	1.47	2.11	2.58
Psychological	156	2.26	1.48	2.03	2.49

Interaction Effects for Perpetrator Gender and Type of Intimate Partner Violence

In addition to the main effects, the researcher was also interested in the joint effect or interaction between the two independent variables, gender of the perpetrator and the type of IPV, portrayed in the vignette on the dependent variables of intentions to intervene using each communication strategy and the option to do nothing to intervene.

Direct Communication Strategy

A two-way between-groups ANOVA was conducted to explore the impact of perpetrator gender and the type of IPV portrayed on intentions to intervene using a direct communication strategy. Levene's test of equality of error variances was less than .05, indicating the assumption had been violated and the variance of the dependent variable across groups is not equal. Thus, a more stringent significance level (.01) was used for evaluating the results of the two-way ANOVA. The interaction between gender of the perpetrator and type of violence was not significant: F(2, 454) = 2.89, p = .06.

Distract Communication Strategy

A two-way between-groups ANOVA was conducted to explore the impact of perpetrator gender and the type of IPV portrayed on intentions to intervene using a distract communication strategy. Levene's test of equality of error variances was less than .05, indicating the assumption had been violated. A more stringent significance level (.01) was used for evaluating the results of the two-way ANOVA. The interaction between gender of the perpetrator and type of violence was not significant: F(2, 454) = 1.40, p = .25.

Delegate Communication Strategy

A two-way between-groups ANOVA was conducted to explore the impact of perpetrator gender and the type of IPV portrayed on intentions to intervene using a delegate communication strategy. Levene's test of equality of error variances was greater than .05, indicating the assumption had not been violated. A more stringent significance level (.01) was used for evaluating the results of the two-way ANOVA. The interaction between gender of the perpetrator and type of violence was not significant: F(2, 455) = 1.64, p = .195

Delay Communication Strategy

A two-way between-groups ANOVA was conducted to explore the impact of perpetrator gender and the type of IPV portrayed on intentions to intervene using a delay communication strategy. Levene's test of equality of error variances was less than .05, indicating the assumption had been violated. A more stringent significance level (.01) was used for evaluating the results of the two-way ANOVA. The interaction between gender of the perpetrator and type of violence was not significant: F(2, 455) = .30, p = .74.

Do Nothing to Intervene

A two-way between-groups ANOVA was conducted to explore the impact of perpetrator gender and the type of IPV portrayed on intentions to do nothing to intervene. Levene's test of equality of error variances was less than .05, indicating the assumption had been violated. Thus, a more stringent significance level (.01) was used for evaluating the results of the two-way ANOVA. The interaction between gender of the perpetrator and type of violence was not significant: F(2, 455) = .29, p = .75. Overall, none of the interaction effects were significant.

Hypothesis Testing – Hierarchical Regressions

The goal was to examine the predictive power of the RAA factors for explaining the behavioral intentions to intervene using different communication strategies and the intentions to do nothing in the context of IPV. To test H3-H7, five hierarchical regressions were employed for each outcome variable (i.e., direct, distract, delegate, delay, and do nothing) with gender, previous exposure to relationship abuse education, personally knowing someone who has experienced relationship abuse, and having personally experienced relationship abuse were all entered into block 1 as covariates. In block 2, attitudes (experiential and instrumental), perceived norms (descriptive and injunctive norms), and perceived behavioral control (autonomy and capacity) were entered. Preliminary analyses were conducted to ensure no violations of the assumptions of normality, linearity, multicollinearity, and homoscedasticity.

Hypotheses H3a-f (Direct)

To test H3a-f, a hierarchical regression was employed to assess the predictive power of the RAA factors for explaining participants' intention to intervene in relationship abuse using a direct communication strategy (outcome variable), while controlling for background factors. Gender of the participant, previous exposure to relationship abuse education, personally knowing someone who has experienced relationship abuse, and having personally experienced relationship abuse were entered in block 1 as covariates, explaining 2.9% of the variance in intentions to intervene using a direct communication strategy. In block 2, attitudes – experiential attitudes and instrumental attitudes, perceived norms – descriptive norms and injunctive norms, and perceived behavioral control – autonomy and capacity were entered. The total variance

explained by the models as a whole was 43.2%, F(10, 442) = 33.67, p < .001. The measures for attitudes, perceived norms, and perceived behavioral control explained an additional 40.4% of the variance in intentions to intervene using a direct communication strategy, after controlling for the background factors, R squared change =.40, F change (6, 442) = 52.40, p < .001.

In the final model, two RAA variables were significant predictors of intentions to intervene using a direct communication strategy, including autonomy (β = 0.15, p < 0.001) and capacity (β = 0.47, p < 0.001). The remaining components were not significant predictors of this outcome variable. Both instrumental (β = 0.03, p > .01) and experiential (β = 0.05, p > 0.05) components of attitude were not statistically significant in relation to intentions to intervene using a direct communication strategy. Furthermore, descriptive norms (β = 0.10, p > 0.05) and injunctive norms (β = 0.04, p > 0.01) were not statistically significant in relation to intentions to intervene using a direct communication strategy (see Table 8).

Table 8

Hierarchical Regression Results for Direct Communication Strategy

Predictor	β	ΔR^2	Total R^2	ΔF
Block 1	·	.029*	.029	3.31*
Constant	6.59***			
Gender	276**			
Education Course	152			
Know a Survivor	240*			
Survivor	025			
Block 2		.404***	.432	52.40***
Constant	1.31**			
Gender	.026			
Education Course	084			
Know a Survivor	071			
Survivor	.017			
Instrumental Attitudes	.028			
Experiential Attitudes	.051			
Descriptive Norms	.096			
Injunctive Norms	.038			
Autonomy	.161***			
Capacity	.439***			

^{*}p<.05 **p<.01 ***p<.001

Hypotheses H4a-f (Distract)

To test H4a-f, a hierarchical regression was employed to assess the predictive power of the RAA factors for explaining participants' intention to intervene in relationship abuse using a distract communication strategy (outcome variable), after to controlling for background factors. Gender of the participant, previous exposure to relationship abuse education, personally knowing someone who has experienced relationship abuse, and having personally experienced relationship abuse were entered in block 1 as covariates, explaining 3.6 % of the variance in intentions to intervene using a direct communication strategy. In block 2, attitudes – experiential attitudes and instrumental attitudes, perceived norms – descriptive norms and injunctive norms, and perceived behavioral control – autonomy and capacity were entered. The total variance explained by the models as a whole was 18.9%, F(10, 442) = 10.32, p < .001. The measures for attitudes, perceived norms, and perceived behavioral control explained an additional 15.3% of the variance in intentions to intervene using a distract communication strategy, after controlling for the background factors, R squared change =.153, F change (6, 442) = 13.92, p < .001.

In the final model, three RAA variables were significant predictors of intentions to intervene using a distract communication strategy, including descriptive norms (β = 0.13, p < 0.05), injunctive norms, (β = 0.15, p < 0.05), and capacity (β = 0.17, p < 0.01). Although this was consistent with the researcher's expectation, the remaining findings for this outcome variable were not. Both instrumental (β = 0.08, p > 0.05) and experiential (β = 0.08, p > 0.05) components of attitudes were not statistically significant in relation to intentions to intervene using a distract communication strategy. Furthermore, autonomy

 $(\beta = 0.04, p > 0.05)$ was not statistically significant in relation to intentions to intervene using a distract communication strategy (see Table 9).

 Table 9

 Hierarchical Regression Results for Distract Communication Strategy

Predictor	β	ΔR^2	Total R^2	ΔF
Block 1		.036	.036	4.19**
Constant	6.06***			
Gender	.193			
Education Course	251			
Know a Survivor	358**			
Survivor	.024			
Block 2		.153	.189	13.92***
Constant	1.90**			
Gender	.380**			
Education Course	185			
Know a Survivor	264*			
Survivor	.053			
Instrumental	.080			
Attitudes				
Experiential	.077			
Attitudes				
Descriptive Norms	.129*			
Injunctive Norms	.149*			
Autonomy	.042			
Capacity	.174**			

^{*}p<.05 **p<.01 ***p<.001

Hypotheses H5a-f (Delegate)

To test H5a-f, a hierarchical regression were employed to assess the predictive power of the RAA factors for explaining participant's intention to intervene in relationship abuse using a delegate communication strategy (outcome variable), after to controlling for background factors. Gender of the participant, previous exposure to relationship abuse education, personally knowing someone who has experienced relationship abuse, and having personally experienced relationship abuse were entered in block 1 as covariates, explaining 3.2 % of the variance in intentions to intervene using a delegate communication strategy. In block 2, attitudes – experiential attitudes and instrumental attitudes, perceived norms – descriptive norms and injunctive norms, and perceived behavioral control – autonomy and capacity were entered. The total variance explained by the models as a whole was 15.5 %, F(10, 442) = 8.11, p < .001. The measures for attitudes, perceived norms, and perceived behavioral control explained an additional 12.3 % of the variance in intentions to intervene using a delegate communication strategy, after controlling for the background factors, R squared change =.123, F change (6, 442) = 10.73, p < .001.

In the final model, four RAA variables were significant predictors of intentions to intervene using a delegate communication strategy, including experiential attitudes (β = 0.14, p < 0.05), descriptive norms (β = 0.15, p < 0.05), injunctive norms, (β = 0.13, p < 0.05), and autonomy (β = 0.12, p < 0.05). Although these relationships were consistent with the researcher's expectation, the remaining findings for this outcome variable were not. Instrumental attitudes (β = 0.02, p > .05) were not statistically significant in relation to intentions to intervene using a delegate communication strategy. Furthermore, capacity

 $(\beta = 0.01, p > 0.05)$ was not statistically significant in relation to intentions to intervene using a delegate communication strategy (see Table 10).

Table 10

Hierarchical Regression Results for Delegate Communication Strategy

Predictor	β	ΔR^2	Total R^2	ΔF
Block 1	•	.032**	.032	3.68**
Constant	5.31***			
Gender	.324**			
Education Course	053			
Know a Survivor	246*			
Survivor	.122			
Block 2		.123***	.155	8.11***
Constant	1.84**			
Gender	.402***			
Education Course	.008			
Know a Survivor	202			
Survivor	.136			
Instrumental	.024			
Attitudes				
Experiential	.141*			
Attitudes				
Descriptive Norms	.148*			
Injunctive Norms	.134*			
Autonomy	.116*			
Capacity	.010			

^{*}p<.05 **p<.01 ***p<.001

Hypotheses H6a-f (Delay)

To test H6a-f, a hierarchical regression were employed to assess the predictive power of the RAA factors for explaining participant's intention to intervene in relationship abuse using a delay communication strategy (outcome variable), after to controlling for background factors. Gender of the participant, previous exposure to relationship abuse education, personally knowing someone who has experienced relationship abuse, and having personally experienced relationship abuse were entered in block 1 as covariates, explaining 5.4% of the variance in intentions to intervene using a delay communication strategy. In block 2, attitudes – experiential attitudes and instrumental attitudes, perceived norms – descriptive norms and injunctive norms, and perceived behavioral control – autonomy and capacity were entered. The total variance explained by the models as a whole was 15.6 %, F(10, 442) = 8.19, p < .001. The measures for attitudes, perceived norms, and perceived behavioral control explained an additional 10.2 % of the variance in intentions to intervene using a delay communication strategy, after controlling for the background factors, R squared change = .102, F change (6, 442) = 8.92, p < .001.

In the final model, three RAA variables were significant predictors of intentions to intervene using a delay communication strategy, including experiential attitudes (β = 0.15, p < 0.05), injunctive norms (β = 0.16, p < 0.05), and autonomy (β = 0.14, p < 0.05). Although these results were consistent with the researcher's expectation, the remaining findings for this outcome variable were not. Instrumental attitudes (β = 0.01, p > .05), descriptive norms (β = 0.11, p > .05), and capacity (β = 0.03, p > .05) were not statistically significant in relation to intentions to intervene using a delegate communication strategy (see Table 11).

Table 11

Hierarchical Regression Results for Delay Communication Strategy

Predictor	β	ΔR^2	Total R ²	ΔF
Block 1	<u>.</u>	.054***	.054	6.41***
Constant	5.11***			
Gender	.533***			
Education Course	328*			
Know a Survivor	072			
Survivor	.011			
Block 2		.102***	.156	8.19***
Constant	1.42*			
Gender	.628***			
Education Course	266			
Know a Survivor	011			
Survivor	.023			
Instrumental	.012			
Attitudes				
Experiential	.155*			
Attitudes				
Descriptive Norms	.111			
Injunctive Norms	.161*			
Autonomy	.140*			
Capacity	.029			

^{*}p<.05 **p<.01 ***p<.001

Hypotheses H7a- (Do nothing)

To test H7a-f, a hierarchical regression were employed to assess the predictive power of the RAA factors for explaining participant's intention to do nothing in response to relationship abuse (outcome variable), after to controlling for background factors. Gender of the participant, previous exposure to relationship abuse education, personally knowing someone who has experienced relationship abuse, and having personally experienced relationship abuse were entered in block 1 as covariates, explaining 1.7% of the variance in intentions to do nothing in response to relationship abuse. In block 2, attitudes – experiential attitudes and instrumental attitudes, perceived norms – descriptive norms and injunctive norms, and perceived behavioral control – autonomy and capacity were entered. The total variance explained by the models as a whole was 12.4%, F(10,442) = 6.26, p < .001. The measures for attitudes, perceived norms, and perceived behavioral control explained an additional 10.7% of the variance in intentions to do nothing to intervene, after controlling for the background factors, R squared change =.107, F change (6, 442) = 8.97, p < .001. In the final model, only one of the RAA variables, instrumental attitudes ($\beta = -.40$, p < 0.001), was statistically significant and negatively associated intentions to do nothing (see Table 12).

Table 12

Hierarchical Regression Results for Do Nothing to Intervene

Predictor	β	ΔR^2	Total R^2	ΔF
Block 1	·	.017	.017	1.98
Constant	2.10***			
Gender	.089			
Education Course	240			
Know a Survivor	.364*			
Survivor	036			
Block 2		.107***	.124	6.26***
Constant	6.10***			
Gender	.002			
Education Course	259			
Know a Survivor	.303*			
Survivor	084			
Instrumental	400***			
Attitudes				
Experiential	013			
Attitudes				
Descriptive Norms	058			
Injunctive Norms	007			
Autonomy	070			
Capacity	065			

^{*}p<.05 **p<.01 ***p<.001

CHAPTER SIX: DISCUSSION

The purpose of this study was to examine young adult college students' beliefs (attitudes, norms, and perceived behavioral control) in the context of intervening in acts of IPV among young adults and understand what factors (gender of perpetrator and type of violence) influence how they would respond when presented with scenarios of IPV. The first section provides a discussion of the results from the independent samples t-tests examining the role of the gender of the perpetrator on intentions. The second section provides a discussion of the results from the series of ANOVAS used to examine the role of the type of violence on intentions. Although interaction effects were examined for each of the six possible conditions participants could have been assigned to, none of these effects were statistically significant. The third section provides a discussion and interpretation of the series of regressions examining the RAA variable in relation to intentions. Lastly, the researcher offers a broader discussion of the study's theoretical implications, practical implications, limitations, and future directions for research.

Impact of Perpetrator Gender on Intentions to Intervene -- Hypothesis 1

Hypothesis 1a predicted that participants' intentions to intervene using a direct communication strategy would differ based on the gender of the perpetrator in the vignette. Specifically, the researcher posited that when the perpetrator is a male, the participants would have greater intentions to intervene in a direct manner. Hypothesis 1a was supported in that participants indicated higher intentions to intervene using a direct communication strategy when presented with a vignette in which a male partner was the perpetrator of IPV. This finding is not unanticipated as past research indicates that when a male engages in violence toward their partner, it is often perceived as more severe and

increases the likelihood of intervening from bystanders observing the situation (Ermer at al., 2017).

Hypothesis 1b predicted that participants' intentions to intervene using a distract communication strategy would differ based on the gender of the perpetrator of IPV in the vignette, and more precisely, the researcher hypothesized that participants would indicate greater intentions if the perpetrator is a male. Hypothesis 1b was not supported in that participants assigned to the vignettes with a male perpetrator did not report significantly greater intentions to intervene using a distract strategy compared to those with a female perpetrator. It is unclear as to why distraction is not as influenced by the gender of the perpetrator. Perhaps because behaviors associated with distractions are quite normal in nature (e.g., asking for help or directions), to more covertly draw attention away from the IPV situation, there is less concern for who is enacting the behavior.

Hypothesis 1c predicted that participants' intentions to intervene using a delegate communication strategy would differ based on the gender of the perpetrator of IPV in the vignette. It was hypothesized that participants would indicate increased intentions to intervene using a delegate communication strategy if the IPV in the vignette is perpetrated by a male. Hypothesis 1c was supported in that participants assigned to a vignette portraying a male as the perpetrator self-reported greater intentions to intervene using a strategy of delegation, or asking a third party to intervene who might more knowledgeable or better equipped to handle the situation. Conversely, the participants assigned to the vignettes with a female perpetrator had a more neutral perspective in regard to their intention to use delegation. This may be due to female perpetrator's actions may not always being viewed as being violent. Based on past literature, if a

bystander may believe they are in harm's way or not the best person to handle the situation, meaning that they do not know enough background on the couple, they may feel that it is better to reach out to someone who has more authority (e.g., a bouncer) or a friend with greater relational closeness to the couple.

Hypothesis 1d predicted that participants' intentions to intervene using a delay communication strategy would differ based on the gender of the perpetrator of IPV in the vignette. It was posited that participants would indicate increased intentions to intervene using a delay communication strategy if the IPV in the vignette is perpetrated by a male. Hypothesis 1d was supported as there was a significant difference in intentions to intervene using a delay strategy when the perpetrator was male. Although the delay communication strategy is more reactive, in that a bystander provides support after the act of IPV is committed rather than proactive in nature to prevent violence, the gender of the perpetrator still may feed into the urgency of attending to the situation in the moment.

Hypothesis 1e predicted that participants' intentions to do nothing to help intervene would differ based on the gender of the perpetrator of IPV in the vignette. The researcher hypothesized that participants would indicate increased intentions to do nothing if the IPV in the vignette is perpetrated by a female partner. Hypothesis 1e was supported as the analyses revealed a significant difference in intentions to do nothing depending on the gender of the perpetrator in the condition. Participants in the male perpetrator condition reported significantly lower intentions to do nothing to compared to the female perpetrator condition. Although participants assigned to both conditions generally disagreed with the statement that they would do nothing in response to the scenarios presented in the vignettes, those exposed to the female perpetrator condition

erred on the side of "disagree" to "somewhat disagree". This finding demonstrates that the view of men as the primary perpetrators of violence is still overwhelmingly pervasive. This could be due to limited portrayals of women engaging in IPV, as past literature which shows female perpetration of IPV is portrayed differently in the media, including that news network's coverage female perpetration rather infrequently and has been largely understudied in comparison to male perpetration (Carlyle, Scarduzio, & Slater, 2014). In sum, the predictions held with regard to gender were mostly supported, with the caveat of the distract communication strategy. The next section will more closely discuss and interpret the results from the ANOVAs focused on the type of violence perpetrated.

Impact of Violence Portrayed on Intentions to Intervene – Hypothesis 2

Hypothesis 2a predicted that participants' intentions to intervene using a direct communication strategy would differ based on the type of IPV perpetrated in the vignette. It was hypothesized that participants would indicate increased intentions to intervene using a direct communication strategy if the IPV perpetrated in the vignette was physical violence. The results revealed that there was a significant difference in intentions to use a direct communication strategy depending on the type of IPV portrayed in the condition; However, hypothesis 2a was not supported because participants in the psychological IPV condition indicated greater intentions to intervene using a direct communication strategy compared to the sexual IPV condition physical IPV condition. This finding is contrary to the expected outcome given that previous studies have shown that psychological IPV has been consistently perceived as less abusive and severe than physical IPV (see Capezza & Arriaga, 2008; Dardis et al., 2017). The heightened awareness of psychological IPV could be tied to the overall impetus for greater dialogue at institutions of higher education

for the promotion of activities that support the mental health and well-being among college students (Sontag-Padilla et al., 2018). Given that psychological violence has the greatest long-term impact on survivors of IPV, this finding, although contrary to past research examining depictions of IPV (Carlyle et al., 2014), gives hope that rising generations of young adults are distinguishing psychological IPV as a form of violence and more aware of the harm it has in romantic relationships.

Hypothesis 2b predicted that participants' intentions to intervene using a distract communication strategy will differ based on the type of IPV perpetrated in the vignette. It was predicted that participants would have greater intentions to intervene using a distract communication strategy if the IPV perpetrated in the vignette was physical violence. The results revealed that there was a significant difference in intentions to use a distract communication depending on the type of IPV portrayed in the condition. In fact, participants in the sexual IPV condition indicated significantly greater intentions to intervene using a distract communication strategy compared to the psychological IPV condition and physical IPV condition. Therefore, hypothesis 2b was not supported. This finding, although contrary to the predicted outcome, aligns with the sexual assault literature. Given that many bystanders fear that they may misinterpret the situation in that the actions taking places are actually consensual, then they would be viewed as a "cock block" among their social circle (Blayney et al., 2020; Casey & Ohler, 2012). This is especially pervasive when bystanders indicate less relational closeness to the couple or have less knowledge of the nature of the romantic relationship between the partners. Thus, attempting to take attention away from the situation and distracting one or both of the individuals may be viewed as more appropriate and less face threatening if the

bystander is fearful an unwanted sexual interaction is about to take place compared to physical violence which may require more immediate, direct action.

Hypothesis 2c predicted that participants' intentions to intervene using a delegate communication strategy would differ based on the type of IPV perpetrated in the vignette. It was predicted that participants would indicate greater intentions to intervene using a delegate communication strategy if the IPV perpetrated in the vignette was physical violence. The results revealed that there was a significant difference in intentions to use a delegate communication depending on the type of IPV portrayed in the condition; however, hypothesis 2c was not supported because participants in the sexual IPV condition indicated greater intentions to intervene using a delegate communication strategy compared to the psychological and physical IPV conditions. Again, although this finding was inconsistent with the hypothesized relationship, this finding can be justified looking at previous literature focused on bystander intervention in a similar context of sexual assault. As previously noted, if an individual is unfamiliar with the couple involved in the interaction, or the individual does not want to be viewed as getting in the way of a romantic interaction as they feel it isn't their place, they may feel more comfortable reaching out to someone who has greater relational closeness with the couple or opt to ask another third party with greater formal authority (e.g., bouncer at club; law enforcement) to intervene if the potential for violence escalates.

Hypothesis 2d predicted that participants' intentions to intervene using a delay communication strategy will differ based on the type of IPV perpetrated in the vignette. It was hypothesized that participants would report greater intentions to intervene using a delay communication strategy if the IPV perpetrated in the vignette was physical

violence. The ANOVA revealed that there was not a significant difference in intentions to use a delay communication depending on the type of IPV portrayed in the condition. Thus, hypothesis 2d was not supported. In this case, it is challenging to discern why reactive supportive behaviors are not substantially different among the three types of violence. Nonetheless, although delay is not a primary prevention technique as it encompasses how a bystander provides social support to a survivor after IPV has occurred, previous research speaks to the value and essentialness of social support from close others to help mitigate negative long-term outcomes for physical and mental health (Coker et al., 2002; Coker et al., 2003).

Hypothesis 2e predicted that participants' intentions to do nothing to intervene would differ based on the type of IPV perpetrated in the vignette. It was hypothesized that participants would indicate greater intentions to do nothing to intervene if the IPV perpetrated in the vignette was psychological violence. The analyses revealed that there was not a significant difference in intentions to do nothing depending on the type of IPV portrayed in the condition. Furthermore, the mean differences between the three types of violence were all quite low. Although these findings might not seem of value, the non-significant findings indicate that participants were unlikely to do nothing in response to physical, sexual, and psychological violence. Rather, participants were more likely to take some type of initiative to be an active bystander and communicate to stop IPV, regardless of the type of violence versus being an unresponsive bystander.

In addition to direct effects, the primary investigator also explored the potential for interaction effects between gender of the perpetrator and the type of IPV perpetrated.

Among the five interactions tested for each of the respective outcome variables, there

were no significant interactions. This indicates that the joint effect of the gender of the perpetrator and the type of IPV is not statistically higher than the effect of each individual variable. Perhaps if the quasi-experiment portion of the study has a stronger theoretical base, we may have observed a different outcome.

Hierarchical Regressions

The RAA is a theoretical framework of behavioral prediction that provides an account for why individuals perform or not perform a specific behavior, using behavioral intention as the most proximal antecedent to behavior (Fishbein & Ajzen, 2010). That is, the greater an individual's intent to enact a behavior, the more likely it is that they will actually engage in the behavior in the future. The RAA proposes that behavioral intention is predicted by three primary antecedents: (a) attitudes (experiential and instrumental), (b) perceived norms (descriptive and injunctive), and (c) perceived behavioral control (autonomy and capacity).

Five different regression models were performed to examine the predictive power of the six RAA variables for explaining the behavioral intentions to intervene using four different communication strategies (direct, distract, delegate, and delay) and the intentions to do nothing to intervene the context of IPV (referred to as relationship violence in the study). The overall assumption for each of the regressions including a communication strategy to intervene as the outcome variable was that attitudes, perceived norms, and perceived behavioral control would be positively associated with intentions to intervene in response to an act of IPV. Conversely, attitudes, perceived norms, and perceived behavioral control would be negatively associated with intentions to do nothing to intervene.

RAA and Intentions to Intervene Using a Direct Strategy – Regression Model 1

Hypothesis 3a-f predicted that each of the RAA variables would all influence intentions to intervene using a direct communication strategy. Despite this expectation, the only construct that significantly impacted intentions to intervene using a direct communication strategy was perceived behavioral control, including both factors of autonomy and capacity. Given that intervening using a direct communication strategy is inherently the most face threatening of all the strategies in that bystanders directly confront the potential victim or the perpetrator of violence, this reasonably would require a person to (a) feel confident in the ability to carry out this conversation; and (b) in control of the situation before doing something that could be risky for their own safety. This is underscored by a more recent study with a nationally representative sample aiming to better understand knowledge of sexual assault and IPV within one's social network, who intervenes and how they intervene, and the perceived barriers to intervening in IPV (Weitzman, Cowan, & Walsh, 2020). Two of the three major barriers identified Weitzman et al.'s (2020) study for intervening were fear of being injured as an active bystander and fear of misinterpreting the situation. With these findings it mind, it is no surprise that intervening in such a direct manner to deflect a potentially violent situation requires a great deal of perceived behavioral control considering the stakes for their own well-being.

RAA and Intentions to Intervene Using a Distract Strategy – Regression Model 2

Hypothesis 4a-f predicted that each of the RAA variables would positively influence intentions to intervene using a distract communication strategy. The second regression model violated the hypothesized expectation that each of the RAA variables

would meaningfully impact intentions to intervene using a distract communication strategy. Collectively, attitudes did not have a significant impact on intentions to intervene via distraction. Both descriptive and injunctive norms proved to significantly impact intentions to intervene using a distract communication strategy. This finding can be rationalized because tactfully distracting the potential victim or the perpetrator may require the modeling of peers who effectively use this strategy to navigate a challenging situation. Similarly, the social pressure from others to diffuse the situation in a non-face threatening way may come from friends given that there tends to be concerns related to the bystander's perception of their role in the conversation (Weitzman et al., 2020). Lastly, capacity, or having perceived control over the situation meaningfully impacts intentions to intervene via distraction. This finding is also reasonable as distraction is still a more forthright strategy to detract from acts that may be escalating to violence.

RAA and Intentions to Intervene Using a Delegate Strategy – Regression Model 3

The third regression model focused on delegation as a communication strategy to intervene as the outcome variable. Specifically, hypothesis 5a-f predicted that each of the RAA variables would all influence intentions to intervene using a delegate communication strategy. This model was the most consistent with the hypothesized relationships proposed by the RAA. Four factors including experiential attitudes, descriptive norms, injunctive norms, and autonomy significantly impacted intentions to intervene via delegating to others. When interpreting these findings, it appears when young adults intended to use a delegate communication strategy it is important for them feel as though by intervening that it would make them feel good about them self, they

perceive close others would do the same and expect them to act in this way, and that engaging in delegation is up to their discretion.

RAA and Intentions to Intervene Using a Delay Strategy – Regression Model 4

Hypothesis 6a-f predicted that each of the RAA variables would influence intentions to intervene using a delay communication strategy. The results of the fourth regression model show support for three of the six RAA variables. Similar to the delegate strategy, delay is heavily influenced by experiential attitudes, meaning that participants are likely to engage in that type of communication strategy as they perceive that it will make them feel good about themselves. Given that delay is a more reactive intervention strategy, meaning that it is initiated by a bystander after the violent act, it may be easier for young adults to feel heroic when they can support a survivor by providing emotional support, informational support (e.g., by helping connect with resources), or even tangible support in the aftermath rather than the potential negative consequences for themselves engaging in a proactive form of intervention. Interestingly, despite the reactive nature, injunctive norms carried the most weight with regard to impacting intentions, indicating that there is social pressure to engage in supportive interactions post-violence. Lastly, feeling like the support provision is up to an individual's after the violence has occurred (autonomy) are equally is also important.

RAA and Intentions to Do Nothing to Intervene – Regression Model 5

The final regression model examined the impact of the RAA variables on intentions to do nothing in response to acts of relationship violence. Hypothesis 7a-f predicted that each of the RAA variables would be negatively associated with intentions to do nothing in response to relationship violence. The only significant relationship

between intentions to do nothing was with instrumental attitudes. Specifically, instrumental attitudes had a negative association with intentions to do nothing. This finding indicates that participants felt as though doing nothing was not a viable option if they witnessed acts of relationship violence as instrumental attitudes refers to the beliefs regarding the utility of the recommended behavior. This model is quite promising for those working in violence prevention as it demonstrates that doing nothing to intervene is overwhelmingly unacceptable among the target audience when presented with concerns of violence among romantic partners. In other words, not only do the participants believe doing nothing would make them experience negative affect as a bystander (experiential attitudes), they also felt as though their close others would be active bystanders (descriptive norms), close others could expect them to be active bystanders (injunctive norms), and that they should have the capability and the decision is up to them (autonomy) to do something rather than be non-responsive entirely.

It is clear from the results of the five regression models that there is great variability as to which components of the RAA have the most substantial impact on young adult college students' intentions to intervene using the various communication strategies at their disposal. Although no broad sweeping claims can be made about the which components of RAA to guide messages and programmatic materials uniformly across the four communication strategies, the findings lend to some guidance. The findings from the regression models indicate, for this particular target population, the best value or pay off when investing time and resources in programmatic changes would be to focus on enhancing young adults' beliefs with regard to perceived behavioral control. Across the four regression models focused on communication strategies to intervene,

autonomy **or** capacity significantly contributed to intentions; whereas the other belief structures (attitudes and norms) were less consistent. Thus, when working with limited resources and needing to make judicious decisions, there is an advantage for messages and programmatic materials to emphasize the capacity and autonomy.

Theoretical and Practical Implications

The dissertation seeks to make interdisciplinary contributions, spanning the fields of health communication, health promotion, and violence prevention both theoretically and practically. Theoretically, the current investigation supports empirical (McEachan et al. 2016) and conceptual (Fishbein & Ajzen, 2010; Yzer, 2012) work differentiating the various components of the RAA. Specifically, the results were consistent with McEachan and colleagues' (2016) meta-analysis, which emphasized the importance of separating attitudes into instrumental and experiential attitudes, perceived norms into descriptive and injunctive norms, and perceived behavioral control into autonomy and capacity. As demonstrated in the varied results of the five regression models, some behaviors, such as intervening in acts of IPV, are quite contextual in nature, and require a more nuanced examination of these variables based on the type of behavior presented as an option. For example, with regard to the outcome of intention to intervene using a delegate communication strategy, there were significant effects for experiential attitudes, or the affect that participants perceived they would feel, but not for instrumental attitudes, or how effective participants thought the strategy would be at stopping violence. If the belief structures had not been differentiated on such a level, we would not have such nuanced results for each dimension.

The current study makes contributions to the literature for pragmatic purposes for those working to reduce violence at institutions of higher education. First, to the researcher's knowledge, this is the first study to examine the more granular communication strategies (direct, distract, delegate, and delay) that can be used to intervene in acts of sexual assault and/or IPV, rather than asking participants to report more broadly on intentions to intervene (see Lukacena, Reynolds-Tylus, & Quick, 2019). This careful examination of various communication strategies that are commonly promoted in violence prevention and bystander intervention programming is crucial. It is important to assess students' comfort with each strategy and either (a) encourage them to use the strategies they have the greatest comfort with carrying out and/or (b) help students become better equipped to use the strategies they may have less comfort or familiarity, as some strategies may be better for certain addressing scenarios in which IPV is involved. In other words, depending on who is involved in acts of IPV (man or woman) and what type of violence is being enacted, young adults may respond differently with regard to their intentions to intervene.

The current study also incorporates the option for participants to respond on the behavioral intention to do nothing in response to these types of situations, something else that is rarely incorporated as a response option in self-report studies focused on assessing intentions to intervene. Although, as history shows us (Latané & Darley, 1970), the act of doing nothing as a bystander is all too common and can be grave for the targets of such violence.

The dissertation also provides evidence to support policy change with regard to IPV. The findings of this study bring light to the importance of psychological violence to

support policy level changes. Currently, coercive control, or behaviors in which one partner might be deprived, threatened, intimidated, controlled, or monitored in their communications, behaviors, resources, or access to services, do not count as evidence of domestic violence in the court of law for the majority of states. California is one of the only states to consider coercive control as evidence (Ryzik & Benner, 2021). Given that these behaviors are destructive but not treated by law enforcement on their own as serious unless paired with physical abuse, research that supports the recognition of psychological IPV as problematic can help to support legislature aiming to broaden the legal definition of abuse could help address this issue. Tangibly, social and behavioral science researchers studying violence can serve as advocates by building relationships with state representatives who rely on their research to support bills they want to introduce in the area of IPV and gender-based violence.

The current study is valuable as it underscores that intervening is conditional, based on contextual factors and the behavioral beliefs of the target audience. Indeed, not only can the gender of the perpetrator and the type of violence important, but so are the options for strategies to address the violence. Taken together, the results of the quasi-experiment provide valuable information that relates to several background factors that can impact beliefs structures impacting attitudes, norms, and perceived behavioral control which, in turn, can impact intentions. For example, the exposure to programmatic materials exemplifying the different types of violence are a form of education, which is a background factor often accounted for when applying the RAA. The particularities from the quasi-experiment and the RAA survey are important for programs to consider and assess with their respective target student population as these factors can influence the

overall impact on students and effectiveness of the bystander intervention training as a violence prevention tool.

Limitations and Future Directions

Although the current study sheds light on the young adult college students' intentions to intervene using different communication strategies, it is not without limitations. First, for the experimental portion of this dissertation, it is important to note that the study did not include a true control condition. The goal of the present study was to compare vignettes portraying acts of IPV, manipulated by the type of violence and the gender of the perpetrator. With that goal in mind, and also due to the scope of the study resources, the study design did not include a true control condition that featured messages with no violence. The inclusion of a control condition could have provided additional clarity throughout the analyses that would further illuminate the role played by the type of violence portrayed impacting a participant's intention to intervene using the communication strategies. Although a control group was not feasible for the current study, it would have improved the overall design.

Second, the researcher recognizes that the selection of heterosexual couples for the vignettes does not capture the full range of relationships that can experience IPV.

Moving forward, it is important to make sure that this research is replicated and expanded to include partnerships that vary in sexual orientation, race, etc.

Third, one aspect of researcher grappled with was the timing of the phase-one study. Given the data collection took place during December winter intercession courses, the sample of students enrolled in the accelerated courses who participated in the study were predominately white, conservative, and upperclassmen heavy. A more diverse and

representative sample to test the vignettes and gather modal beliefs via the elicitation questionnaire would have been ideal. However, given the timing of IRB approval and ability to gather pilot data, the ability and resources to postpone data collection were not feasible. Fourth, and relatedly, concerns the target population of interest comprising young adult college students. As the current study's data were collected at a single large public university in the south, these findings may not necessarily generalize to all college students in the United States, or to young adults more broadly.

Fifth, as with most interventions to change behavior, organizations focused on bystander intervention adapt over time. For example, Hollaback bystander training includes an additional strategy to intervene. The fifth "D" to intervention strategies is document, which encourages bystanders of violence and harassment to physically document by recording or filming an incident as it happens to someone. Although this form of intervention is passive, this strategy is touted as being helpful by collecting evidence as a witness that can later be used to serve as evidence in the court of law. Unfortunately, the current study did not include "document" as one of the communication strategies to intervene. This is something that should be included in future research given that one-third of IPV incidents occur in the presence of bystanders (Planty, 2002), and this type of intervention could benefit survivors post-incident.

Sixth, it is important to recognize there are alternative viewpoints concerning the appropriateness of using the traditional four "D's" of intervention. For example, restorative justice movements focused on Black and indigenous activism against racialized and gendered sexual harassment explicitly speak out against anti-carceral approaches to achieving justice (Rentschler, 2017). In other words, bystander tactics such

delegating the intervention to law enforcement are highly discouraged. The researcher had the privilege to see Feminista Jones, the creator of #YouOKSis?, a bystander intervention approach to intervening that focuses on the needs of Black women who experience sexual violence and street harassment, present at "The Courage to be Part of the Change Summit". #YouOKSis focuses on distracting attention away from the situation, making sure the victim is safe, and receives necessary connections without getting police involved as law enforcement has not historically served as a source of safety or protection within Black communities. With this approach in mind, the results from the current study should be read with caution, as strategies such as direct intervention and delegation which may be perceived by college students to be viable options, may not be the best choice in other contexts or communities.

Seventh, the researcher recognizes the limitations that come selecting written vignettes as the stimuli for the quasi-experiment. Although these hypothetical scenarios in a written format can help circumvent the broad use of generalizations for sensitive topics that may normally be difficult for students to connect with if they have never experienced IPV (Barter & Renold, 2000; Finch, 1987), the lack of visual or audio may make it challenging for students to feel engaged and invested while participating. Future research could replicate and expand this study to compare the use of a (a) written vignette, (b) audio-visual vignette, and (c) a more immersive virtual reality experience. Such a study could shed light on which medium is best at increasing students' intentions to intervene post-exposure to the stimuli.

Eighth, the researcher also had every intention to use the IPVAS as a background variable in block 1 of the regression models as a less overt measurement of accepting IPV

in one's own relationship; however, the reliability for the Control subscale was quite poor (<.70) and, thus, after consulting with her advisor, the researcher opted to not use the scale in the analyses. Future research should consider revisiting the construction of this scale and adapt to the measures to better capture the intended construct.

Finally, the current study was limited by the use of the RAA as our guiding theoretical framework. Though the RAA/TPB is one of the most widely utilized theories in the field of health promotion and behavior change (Yzer, 2012), it is possible that another theoretical framework for model would help illuminate key determinants of young adult college students' intentions to intervene.

Summary

The overall objective of this dissertation study was to examine college students' perceived attitudes, perceived norms, and perceived behavioral control in the context of intervening in acts of IPV, as well as assessing their intentions to intervene using different communicative strategies when presented with depictions of IPV manipulated by gender and type of violence. The study was conducted in two phases: Phase One entailed pilot-testing the vignettes with a small subset of young adults attending a university using an online, primarily qualitative questionnaire; Phase Two included online survey data collection. First, participants completed measures assessing their beliefs about IPV and their attitudes, normative beliefs, perceived behavioral control, and intentions to intervene as a bystander in the context of IPV. Second, participants were presented with one of six written vignettes portraying three different types of IPV enacted by either a male or female partner and asked to identify how they would respond when

presented with the scenario using four different communication strategies to intervene and doing nothing to intervene.

The findings from the study provide a basis to inform future messages for campaigns, interventions, and educational tools developed to improve young adult college students' awareness and understanding of IPV, as well as the tools to help them be active bystanders. For example, with the data collected from the current study, materials used to promote bystander intervention among the student body at the University of Kentucky could be adapted to emphasize the variety of scenarios that constitute IPV, specifically female perpetration. Furthermore, the programmatic activities could better focus on the perceived behavioral control of students, aiming to increase participants' feelings of capability to engage in the different types of communication strategies to intervene, as well as the endorsing the feeling of autonomy that it is their decision to do so.

In conclusion, the data shed light on theoretical mechanisms that may increase young adults' intentions to intervene, what types of IPV young adult college students are most inclined to intervene, and what communication strategies find to be most accessible to students when confronted with an IPV as a bystander. This information is crucial as bystander intervention efforts should be continually adapted over time to more effectively reach and impact the behavior of their target audiences.

APPENDIX A. PHASE ONE – ORIGINAL VIGNETTES

Vignette #1 [Physical Violence, Male Perpetrator; adapted from Hamby and Jackson,

20101

Imagine you just arrived at a friend's party. You see your friends John and Julia, two college students who have been dating for a year. While at the party, Julia talks to her friend Mike, which makes John upset. John pulls Julia aside to let her know how he was feeling. The more John talks, the angrier he gets, and as Julia turns to leave the conversation, he grabs Julia's arm tightly. When Julia says he is overreacting and she and Mike are just friends, John pushes Julia, and she falls to the ground.

Vignette #2 [Sexual Violence, Male Perpetrator; adapted from Nicksa, 2014]

Imagine you just arrived at a friend's party. You see your friends John and Julia, two college students who have been dating for a year. While at the party, John forcibly kisses Julia and tells her they should find a room. Julia tells John she doesn't want to have sex, but John argues that they just had sex the other night. Julia says no multiple times until she just stops resisting. Eventually, John leads Julia upstairs to a bedroom and has sex with her.

Vignette #3 [Psychological Aggression, Male Perpetrator; adapted from Capezza & Arriaga, 2008; DeHart et al., 2010]

Imagine you just arrived at a friend's party. You see your friends John and Julia, two college students who have been dating for a year. Early into the evening John becomes angry at Julia. He begins telling other people at the party about some of Julia's personal flaws, directly calling her derogatory names, threatening to break up with her, and saying "no one would ever put up with you." Julia is so embarrassed and distressed by John's behavior, she goes to another room and cries.

Vignette #4 [Physical Violence; Female Perpetrator; adapted from Hamby and Jackson, 2010]

Imagine you just arrived at a friend's party. You see your friends Julia and John, two college students who have been dating for a year. While at the party, John talks to his friend Jessica, which makes Julia upset. Julia pulls John aside to let John know how she was feeling. The more Julia talks, the angrier she gets, and as John turns to leave the conversation, she grabs John's arm tightly. When John says she is overreacting and he and Jessica are just friends, Julia pushes John, and he falls to the ground.

Vignette #5 [Sexual Violence; Female Perpetrator; adapted from Nicksa, 2014]

Imagine you just arrived at a friend's party. You see your friends Julia and John, two college students who have been dating for a year. While at the party, Julia forcibly kisses

John and tells him they should find a room. John tells Julia he doesn't want to have sex, but Julia argues that they just had sex the other night. John says no multiple times until he just stops resisting. Eventually, Julia leads John upstairs to a bedroom and has sex with him

Vignette #6 [Psychological Aggression, Female Perpetrator; adapted from Capezza & Arriaga, 2008; DeHart et al., 2010]

Imagine you just arrived at a friend's party. You see your friends Julia and John, two college students who have been dating for a year. Early into the evening Julia becomes angry at John. She begins telling other people at the party about some of John's personal flaws, directly calling him derogatory names, threatening to break up with him, and saying "no one would ever put up with you." John is so embarrassed and distressed by Julia's behavior, he goes to another room and cries.

APPENDIX B. PHASE ONE – INFORMED CONSENT/COVER LETTER

Consent to Participate in a Research Study

Understanding the Dynamics of Young Adult Romantic Relationships in College

Researchers at the University of Kentucky are inviting you to take part in online questionnaire to better understand college students' perceptions of romantic relationship dynamics among young adult college couples, and how friends and campus community members would respond as bystanders to these relationship dynamics. You will be asked to:

- a. Answer a series of open-ended and closed-ended questions regarding your perceptions about the romantic relationship dynamics among college couples (note includes questions about acts of aggression);
- b. Read short scenarios about college couples; and
- c. Answer questions in response to these scenarios.

To participate, you must meet the following inclusion criteria:

- a. Enrolled as a student at the University of Kentucky;
- b. Between the ages of 18 and 26;
- c. Enrolled in a communication course

Although you may not get personal benefit from taking part in this research study, your responses may help us understand more about healthy and unhealthy relationship dynamics of young adult college couples. Some volunteers experience satisfaction from knowing they have contributed to research that may possibly benefit others in the future.

You will receive class extra credit (1% of the total grade for the course upon approval from your Communication professor) for completing the online questionnaire. If you do not want to participate, an alternative assignment that is equitable in time and effort will be offered by the instructors of your course.

The online questionnaire will take about 20 minutes to complete.

There are no known risks to participating in this study. You may skip any question, for any reason. If any questions make you upset or feel uncomfortable, you may choose not to answer them. If some questions do upset you, we can tell you about some people and resources who may be able to help you with these feelings.

Your response to the survey is anonymous which means no names, IP addresses, email addresses, or any other identifiable information will be collected with the survey responses. We will not know which responses are yours if you choose to participate. At the end of the survey, you will be asked to enter your name to claim your extra credit. You will be directed to a separate page to enter your name and this information will not be connected to your survey responses.

We hope to receive completed online questionnaires from about 30 people, so your answers are important to us. Of course, you have a choice about whether or not to complete the online questionnaire, but if you do participate, you are free to skip any questions or discontinue at any time. You will not be penalized in any way for skipping or discontinuing the survey. Please be aware, while we make every effort to safeguard your data once received from the online survey/data gathering company, given the nature of online surveys, as with anything involving the Internet, we can never guarantee the confidentiality of the data while still on the survey/data gathering company's servers, or while en route to either them or us. It is also possible the raw data collected for research purposes may be used for marketing or reporting purposes by the survey/data gathering company after the research is concluded, depending on the company's Terms of Service and Privacy policies.

If you have questions about the study, please feel free to ask; my contact information and my academic advisor's information is provided below.

If you are interested in participating, please provide your consent and begin the study. Thank you in advance for your assistance with this important project.

Sincerely,

*Kaylee M. Lukacena, M.A. Ph.D. Candidate*College of Communication and Information, University of Kentucky

email: kaylee.lukacena@uky.edu

Dr. Don Helme, Ph.D.

Department of Communication, University of Kentucky

email: don.helme@uky.edu

Phone: 859-257-8886

If you have complaints, suggestions, or questions about your rights as a research volunteer, contact the staff in the University of Kentucky Office of Research Integrity at 859-257-9428 or toll-free at 1-866-400-9428.

- I have read the consent form and AGREE to participate in the study
- I have read the consent form and DO NOT AGREE to participate in the study

APPENDIX C. PHASE ONE – DATA COLLECTION INSTRUMENT

Understanding the Relationship Dynamics of Young Adult College Couples

Instructions: Thank you for agreeing to participate in this research study. The following questionnaire has 3 parts:

- (a) Answering general questions about romantic relationships among young adult college couples and some issues they may face;
- (b) Providing feedback and answering behavioral questions based on scenarios involving young adult college couples; and
- (c) Providing personal demographic information.

Please answer each of the following questions openly and honestly. Some of the questions may appear to be similar, but they do address somewhat different issues. Please read each question carefully.

Definitions

- 1. How would you define a healthy romantic relationship?
- 2. What are some aspects of romantic relationships that may make them less healthy?
- 3. One issue that may arise in relationships is violence. How would you define the term intimate partner violence?
- 4. Here is a formal definition of intimate partner violence: Intimate partner violence is defined as physical violence, sexual violence, stalking, and psychological aggression by a current or former intimate partner, with intimate partners ranging from spouses, boyfriends, girlfriends, dating partners, or sexual partners. Intimate partners can be of the same or opposite sex.
 - a. What do you think of this definition?
 - b. What are some other labels or names you would use to describe this behavior in college student relationships? (e.g., dating violence)

Messages

Instructions: Research shows bystander intervention programs can help train students to prevent acts of violence including intimate partner violence. Studies also indicate that to be capable of preventing intimate partner violence, people need to be aware of the different behaviors that are violent and harmful to the health and well-being of young adults in relationships.

To understand students' perceptions intimate partner violence, short narratives have been developed as examples of intimate partner violence. I would like to hear your honest opinions and feedback for each one and how to make these scenarios more realistic to college students like you.

Vignette #1 - #6 [present each vignette and allow the participant to answer a series of open-ended questions]

1. Do you consider this to be an act of violence in a relationship? Please explain you why you do or do not believe so.

- 2. What is it that you don't like about the short narrative? (e.g., content, setting)
- 3. What could be done to improve this short narrative?
- 4. What is it that you like about the narrative?
- 5. How do you think students at the University of Kentucky will react to this narrative?
- 6. What is the least effective part of this narrative?
- 7. What could make this a more effective narrative?

Intention Questions (Response Scale 1-7 [unless stated otherwise] 1 = Strongly disagree, 2 = disagree, 3 = Somewhat disagree, 4= Neutral, 5= Somewhat agree, 6 = Agree, 7= Strongly Agree)

- 1. If I see a similar situation, I intend to intervene.
- 2. In the near future, I will intervene if I see a similar situation.
- 3. If I see a similar situation, I would intervene to prevent it from happening.
- 4. I would be willing to intervene to prevent what happened to in the scenario.

Severity Questions (Response Scale:1= not serious to 7 very serious)

- 1. In your opinion how serious is this incident?
- 2. In your opinions how violent is this incident?
- 3. In your opinion, how dangerous is this incident?

Open-ended questions

- 1. As a friend, what would you do if you witnessed this scenario?
- 2. When, or under what conditions, would you help someone in a similar situation?
- 3. What kinds of things might make it hard to help someone in this type of situation?

Instructions: Please take a few minutes to tell us what you think about intervening to prevent acts of relationship violence among young adult college couples. There are no right or wrong responses; we are merely interested in your personal opinion. In response to the questions below, please list the thoughts that come immediately to mind. Write each thought on a separate line.

Behavioral outcomes and experiences (Attitudes)

- 1. What do you see as the advantages of you intervening in acts of dating violence?
- 2. What do you see as the disadvantages of you intervening in acts of dating violence?
- 3. What positive feelings do you associate with intervening in acts of dating violence?
- 4. What negative feelings do you associate with intervening in acts of dating violence?

Normative referents (Norms)

When it comes to your intervening in acts of intimate partner violence, there might be individuals or groups who would think you should or should not perform this behavior.

- 1. Please list the individuals or groups who would approve or think you should intervene in acts of dating violence.
- 2. Please list the individuals or groups who would disapprove or think you should not intervene in acts of dating violence.
- 3. Sometimes, when we are not sure what to do, we look to see what others are doing. Please list the individuals or groups who are most likely to intervene in acts of dating violence.
- 4. Please list the individuals or groups who are least likely to intervene in acts of dating violence.

Control factors (Perceived behavioral control)

- 1. Please list any factors or circumstances that would make it easy or enable you to intervene in acts of dating violence.
- you

Demographic Question	uestions	emographic	D
-----------------------------	----------	------------	---

2.	Please list any factors or circumstances that would make it difficult or prevent
	from intervening in acts of dating violence.
)emo	ographic Questions
	What is your age (in years)?
2.	What gender do you most identify with?
2.	1. Male/Man
	2. Female/Woman
	3. Nonbinary
	4. Prefer to self-describe
	5. Prefer not to answer
3.	How would you describe your ethnicity?
٥.	Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race
	2. Not of Hispanic, Latino or Spanish Origin
	3. Prefer not to answer
4.	Please describe which racial group(s) you identify (check all that apply):

- 1. White/European American
- 2. Black/African American
- 3. Asian
- 4. Pacific Islander/Native Hawaiian
- 5. American Indian or Alaskan Native
- 6. Some other race (Please specify)
- 7. Prefer not to answer
- 5. What is your year in school?
 - 1. Freshman

	2.	Sophomore
	3.	Junior
	4.	Senior
	5.	Other
_	Ъ	:1 ('6
6.	•	u identify as:
		Heterosexual/Straight
		Gay/Lesbian
		Bisexual
		Other
	5.	Prefer not to say
7.	What i	is your current relationship status?
		Single
		Casual romantic relationship
		Committed, exclusive romantic relationship
		Engaged
		Married
		Other
	0.	Other
8.		nany romantic relationships have you been in?
		I have never been in a relationship.
		Only one relationship
	3.	2-4 relationships
	4.	4-8 relationships
	5.	More than 8 relationships
9.	relatio	•
	1.	
	2.	
	3.	3
	4.	4
	5.	5
	6.	6
	7.	7
10	Have y	you ever engaged in sexual intercourse (i.e., vaginal, anal, or oral sex)?
10.	-	Yes
		No
	۷.	110
11.	Have v	you attended a dating violence education course?
	-	Yes
		No
12.	Have	you ever known someone who was a survivor of dating violence?

- 1. Yes
- 2. No
- 13. Have you ever experienced dating violence?
 - 1. Yes
 - 2. No
 - 3. Unsure
- 14. Are you aware of any programs or campaigns addressing dating violence at the University of Kentucky?
- 15. How would you describe yourself politically?
 - 1. Very liberal
 - 2. Liberal
 - 3. Somewhat liberal
 - 4. Moderate
 - 5. Somewhat conservative
 - 6. Conservative
 - 7. Very Conservative

Thank you for taking the time to complete the survey. If you or someone you know has experienced dating violence, here are some helpful local and national resources:

University of Kentucky VIP (Violence Intervention and Prevention) Center

Location: 406 Administration Drive Frazee Hall, Lower Level

Phone: 859-257-3574 Email: vipcenter@uky.edu

Greenhouse17 (Local shelter and advocacy agency)

Phone: 1-800-544-2022

Email: contact@greenhouse17.org

National Domestic Violence Hotline

Phone: 1-800-799-7233

APPENDIX D. PHASE TWO – REVISED VIGNETTES

Vignette #1 [Physical Violence, Male Perpetrator; adapted from Hamby and Jackson,

2010]

Imagine you just arrived at a friend's party. You see your good friends John and Julia, two college students who are in a committed romantic relationship. While at the party, Julia talks to her platonic friend Mike, which makes John upset. John pulls Julia aside to let her know he was feeling jealous. The more John talks, the angrier he gets, and as Julia turns to leave the conversation, he grabs Julia's arm tightly. When Julia says he is overreacting and tries to reassure John that she and Mike are just friends, John pushes Julia, and she falls to the ground.

Vignette #2 [Sexual Violence, Male Perpetrator; adapted from Nicksa, 2014]

Imagine you just arrived at a friend's party. You see your good friends John and Julia, two college students who are in a committed romantic relationship. While at the party, you notice John forcibly kisses Julia and tells her they should find a room. Julia tells John she doesn't want to have sex with him; however, John argues that they just had sex the other night. Julia says no multiple times, but John keeps persisting. Eventually, John leads Julia upstairs to a bedroom and has sex with her.

Vignette #3 [Psychological Aggression, Male Perpetrator; adapted from Capezza & Arriaga, 2008; DeHart et al., 2010]

Imagine you just arrived at a friend's party. You see your good friends John and Julia, two college students who are in a committed romantic relationship. While at the party, you notice John becomes angry at Julia after she accidentally spills a cup. He begins telling other people at the party about some of Julia's personal flaws, directly calling her derogatory names, threatening to break up with her, and saying "no one would ever put up with you." Julia is so embarrassed and distressed by John's behavior, she goes to another room and cries.

Vignette #4 [Physical Violence; Female Perpetrator; adapted from Hamby and Jackson, 2010]

Imagine you just arrived at a friend's party. You see your good friends Julia and John, two college students who are in a committed romantic relationship While at the party, you notice John talks to his platonic friend Mikayla, which makes Julia upset. Julia pulls John aside to let John know she was feeling jealous. The more Julia talks, the angrier she gets, and as John turns to leave the conversation, she grabs John's arm tightly. When John says she is overreacting and he tries to reassure Julia that he and Jessica are just friends, Julia pushes John, and he falls to the ground.

Vignette #5 [Sexual Violence; Female Perpetrator; adapted from Nicksa, 2014]

Imagine you just arrived at a friend's party. You see your good friends Julia and John, two college students who are in a committed romantic relationship. While at the party, you notice Julia forcibly kisses John and tells him they should find a room. John tells Julia he doesn't want to have sex with her; however, Julia argues that they just had sex the other night. John says no multiple times, but Julia keeps persisting. Eventually, Julia leads John upstairs to a bedroom and has sex with him.

Vignette #6 [Psychological Aggression, Female Perpetrator; adapted from Capezza & Arriaga, 2008; DeHart et al., 2010]

Imagine you just arrived at a friend's party. You see your good friends Julia and John, two college students who are in a committed romantic relationship. While at the party, you notice Julia becomes angry at John after he accidentally spills a cup. She begins telling other people at the party about some of John's personal flaws, directly calling him derogatory names, threatening to break up with him, and saying "no one would ever put up with you." John is so embarrassed and distressed by Julia's behavior, he goes to another room and cries.

APPENDIX E. PHASE TWO – CONSENT FORM/COVER LETTER

Understanding the Dynamics of Young Adult Romantic Relationships in College

Researchers at the University of Kentucky are inviting you to take part in online questionnaire to better understand college students' perceptions of romantic relationship dynamics among young adult college couples, and how friends and campus community members would respond as bystanders to these relationship dynamics. You will be asked to:

- a. Answer a series of open-ended and closed-ended questions regarding your perceptions about the romantic relationship dynamics among college couples (note: includes questions about acts of aggression);
- b. Read a short scenario about a college couple; and
- c. Answer questions in response to the scenario.

To participate, you must meet the following inclusion criteria:

- a. Enrolled as a student at the University of Kentucky;
- b. Between the ages of 18 and 26;
- c. Enrolled in a COM-ISC course that requires SONA research credit

Although you may not get personal benefit from taking part in this research study, your responses may help us understand more about healthy and unhealthy relationship dynamics of young adult college couples. Some volunteers experience satisfaction from knowing they have contributed to research that may possibly benefit others in the future.

You will receive 1 SONA research credit for completing the online questionnaire. If you do not want to participate, there are other SONA study opportunities available. See your course syllabus and/or instructor for more information.

The online questionnaire will take about 20 minutes to complete.

There are no known risks to participating in this study. If any make you upset or feel uncomfortable and you may choose not to answer them. If some questions do upset you, we can tell you about some people who may be able to help you with these feelings.

Your response to the survey is anonymous which means no names, IP addresses, email addresses, or any other identifiable information will be collected with the survey responses. We will not know which responses are yours if you choose to participate. At the end of the survey, you will be asked to enter your name to claim your SONA research credit. You will be directed to a separate page to enter your name and this information will not be connected to your survey responses.

We hope to receive completed online questionnaires from about 800 people, so your answers are important to us. Of course, you have a choice about whether or not to complete the online questionnaire, but if you do participate, you are free to skip any questions or discontinue at any time. You will not be penalized in any way for skipping or discontinuing the survey. Please be aware, while we make every effort to safeguard your data once received from the online survey/data gathering company, given the nature of online surveys, as with anything involving the Internet, we can never guarantee the confidentiality of the data while still on the survey/data gathering company's servers, or while en route to either them or us. It is also possible the raw data collected for research purposes may be used for marketing or reporting purposes by the survey/data gathering company after the research is concluded, depending on the company's Terms of Service and Privacy policies.

If you have questions about the study, please feel free to ask; my contact information and my academic advisor's information is provided below.

If you are interested in participating, please provide your consent and begin the study. Thank you in advance for your assistance with this important project.

Sincerely,

Kaylee M. Lukacena, M.A. Ph.D. Candidate College of Communication and Information, University of Kentucky email: kaylee.lukacena@uky.edu

Dr. Don Helme, Ph.D.

Department of Communication, University of Kentucky email: don.helme@uky.edu

Phone: 859-257-8886

If you have complaints, suggestions, or questions about your rights as a research volunteer, contact the staff in the University of Kentucky Office of Research Integrity at 859-257-9428 or toll-free at 1-866-400-9428.

- I have read the consent form and AGREE to participate in the study
- I have read the consent form and DO NOT AGREE to participate in the study

Please be aware, while we make every effort to safeguard your data once received from the online survey/data gathering company, given the nature of online surveys, as with anything involving the Internet, we can never guarantee the confidentiality of the data while still on the survey/data gathering company's servers, or while en route to either them or us. It is also possible the raw data collected for research purposes may be used for marketing or reporting purposes by the survey/data gathering company after the research is concluded, depending on the company's Terms of Service and Privacy policies.

If you have questions about the study, please feel free to ask; my contact information and my academic advisor's information is provided below.

If you are interested in participating, please provide your consent and begin the study. Thank you in advance for your assistance with this important project.

Sincerely,

Kaylee M. Lukacena, M.A. Ph.D. Candidate College of Communication and Information, University of Kentucky email: kaylee.lukacena@uky.edu

Dr. Don Helme, Ph.D.

Department of Communication, University of Kentucky email: don.helme@uky.edu

Phone: 859-257-8886

If you have complaints, suggestions, or questions about your rights as a research volunteer, contact the staff in the University of Kentucky Office of Research Integrity at 859-257-9428 or toll-free at 1-866-400-9428.

- I have read the consent form and AGREE to participate in the study
- I have read the consent form and DO NOT AGREE to participate in the study

APPENDIX F. PHASE TWO –DATA COLLECTION INSTRUMENT

Thank you for your willingness to participate in the study. Please answer each of the following questions by clicking the number that best describes your opinion. Some of the questions may appear to be similar, but they do address somewhat different issues. Please read each question carefully.

IPV Attitude Scale–Revised (<u>IPVAS–R; Fincham et al., 2008</u>) (Psychological) Abuse Subscale

- 1. As long as my partner doesn't hurt me, "threats" are excused.
- 2. During a heated argument, it is okay for me to bring up something from my partner's past to hurt him or her.
- 3. I think it helps our relationship for me to make my partner jealous.
- 4. I don't mind my partner doing something just to make me jealous.
- 5. During a heated argument, it is okay for me to say something just to hurt my partner on purpose.
- 6. It is no big deal if my partner insults me in front of others.
- 7. It is okay for me to accept blame for my partner doing bad things
- 8. It is okay for me to blame my partner when I do bad things.
- 9. It is not appropriate to insult my partner in front of others.
- 10. It is not acceptable for my partner to bring up something from the past to hurt me. (Physical) Violence Subscale
 - 1. It would never be appropriate to hit or try to hit one's partner with an object.
 - 2. It would not be appropriate to ever kick, bite, or hit a partner with one's fist.
 - 3. Threatening a partner with a knife or gun is never appropriate.
 - 4. I think it is wrong to ever damage anything that belongs to a partner.

Control Subscale

- 1. I would never try to keep my partner from doing things with other people.
- 2. I would be flattered if my partner told me not to talk to someone of the other sex.
- 3. I would not stay with a partner who tried to keep me from doing things with other people.
- 4. It is okay for me to tell my partner not to talk to someone of the opposite sex.
- 5. I would not like for my partner to ask me what I did every minute of the day.
- 6. I think my partner should give me a detailed account of what he or she did during the day.

Personality Assessment

Here are a number of characteristics that may or may not apply to you. For example, do you agree that you are someone who *likes to spend time with others?* Please type a number next to each statement to indicate the extent to which you agree or disagree with that statement. (1 = strongly disagree, 5 = strongly agree).

I am someone who...

1.	Is outgoing, sociable.
2.	Is compassionate, has a soft heart.
3.	Tends to be disorganized.

4.	Is relaxed, handles stress well.
5.	Has few artistic interests.
6.	Has an assertive personality.
7.	Is respectful, treats others with respect.
8.	Tends to be lazy.
9.	Stays optimistic after experiencing a setback.
10.	Is curious about many different things.
11.	Rarely feels excited or eager.
12.	Tends to find fault with others.
13.	Is dependable, steady.
14.	Is moody, has up and down mood swings.
15.	Is inventive, finds clever ways to do things.
16.	Tends to be quiet.
17.	Feels little sympathy for others.
18.	Is systematic, likes to keep things in order.
19.	Can be tense.
20.	Is fascinated by art, music, or literature.
21.	Is dominant, acts as a leader.
22.	Starts arguments with others.
23.	Has difficulty getting started on tasks.
24.	Feels secure, comfortable with self.
25.	Avoids intellectual, philosophical discussions.
26.	Is less active than other people.
27.	Has a forgiving nature.
28.	Can be somewhat careless.
29.	Is emotionally stable, not easily upset.
30.	Has little creativity.
31.	Is sometimes shy, introverted.
32.	Is helpful and unselfish with others.
33.	Keeps things neat and tidy.
34.	Worries a lot.
35.	Values art and beauty.
36.	Finds it hard to influence people.
37.	Is sometimes rude to others.
38.	Is efficient, gets things done.
39.	Often feels sad.
40.	Is complex, a deep thinker.
41.	Is full of energy.
42.	Is suspicious of others' intentions.
43.	Is reliable, can always be counted on.
44.	Keeps their emotions under control.
45.	Has difficulty imagining things.
46.	Is talkative.
47.	Can be cold and uncaring.
48.	Leaves a mess, doesn't clean up.
49.	Rarely feels anxious or afraid.

50. <u> </u>	Thinks poetry and plays are boring.
51.	Prefers to have others take charge.
52.	Is polite, courteous to others.
53.	Is persistent, works until the task is finished.
54.	Tends to feel depressed, blue.
55.	Has little interest in abstract ideas.
56.	Shows a lot of enthusiasm.
57.	Assumes the best about people.
58.	Sometimes behaves irresponsibly.
59.	Is temperamental, gets emotional easily.
60.	Is original, comes up with new ideas.

The Reasoned Action Approach (Fishbein & Ajzen, 2010)

[Scale 1= Strongly disagree, 2 = disagree, 3 = Somewhat disagree, 4= Neutral, 5= Somewhat agree, 6 = Agree, 7= Strongly Agree]

Attitudes

[Instrumental Attitudes]

- 1. My intervening to prevent acts of relationship abuse would:
 - a. be good.
 - b. be important.
 - c. be useful.
 - d. be helpful
 - e. be beneficial.

[Experiential Attitudes]

- 2. My intervening to prevent acts of relationship abuse would:
 - a. be satisfying.
 - b. make me feel like I did the right thing.
 - c. make me feel accomplished.
 - d. make me feel like I made a difference.
 - e. help me feel good about myself.
 - f. help me feel like I am a good person.

Perceived Norms

[Descriptive Norms]

- 1. Most of my friends at my university would intervene to prevent acts of relationship abuse.
- 2. Most students at my university would intervene to prevent acts of relationship abuse.
- 3. Most members my university's community would intervene to prevent acts of relationship abuse.
- 4. Most of my family members would intervene to prevent acts of relationship abuse.

[Injunctive Norms]

- 1. Most of my friends at my university think that I should intervene to prevent acts of relationship abuse.
- 2. Most students at my university think that I should intervene to prevent acts of relationship abuse.
- 3. Most members my university's community think that I should intervene to prevent acts of relationship abuse.
- 4. My family members think that I should intervene to prevent acts of relationship abuse.
- 5. Most of my friends at my university may judge me based on whether or not I intervened to prevent acts of relationship abuse.
- 6. Most students at my university would judge me based on whether or not I interned to prevent relationship abuse.
- 7. Most members of my university's community may judge me based on whether or not I intervened to prevent acts of relationship abuse.
- 8. Most of my family members would think less of me if I didn't intervene to prevent relationship abuse.

Perceived Behavioral Control

[Capacity]

- 1. I am certain that I can intervene to prevent acts of relationship abuse.
- 2. I am confident that I can intervene if I see an act of relationship abuse.
- 3. I am certain that I can intervene to prevent an act of relationship abuse even if I don't personally know the person being abused.
- 4. I am certain that I can intervene to prevent an act of relationship abuse even if it is an uncomfortable situation
- 5. I am certain that I can intervene to prevent an act of relationship abuse even if other bystanders are not present.
- 6. I am certain that I can intervene to prevent an act of relationship abuse even if the abuser is aggressive.
- 7. Even if it was difficult, I am sure I could intervene to prevent an act of relationship abuse.

[Autonomy]

- 1. Intervening to prevent acts of relationship abuse is something that is up to me.
- 2. My intervening to prevent acts of relationship abuse is under my control.
- 3. It is my choice whether or not to intervene to prevent acts of relationship abuse.
- 4. It is my decision whether or not to intervene to prevent acts of relationship abuse.

Behavioral Intention

There are a few communication strategies you can use when intervening in acts of relationship abuse. Please indicate your intentions to use each of these communication strategies on a scale of 1-7 [Scale 1= Strongly disagree, 2 = disagree, 3 = Somewhat disagree, 4= Neutral, 5= Somewhat agree, 6 = Agree, 7= Strongly Agree]

- 1. **Direct communication strategy**: You can either confront the potential victim or the person you believe is engaging in acts of violence or about to become violent. Directly inserting yourself into a potential situation and stopping it by addressing those who are involved.
 - Ask someone who seems uncomfortable or unsure if they are ok
 - Tell the perpetrator to stop their violent behavior
 - 1. If I see an act of relationship abuse, I intend to intervene using a direct communication strategy.
 - 2. In the near future, I will intervene using a direct communication strategy if I see an act of relationship abuse.
 - 3. If I see an act of relationship abuse, I would intervene using a direct communication strategy to prevent it from happening.
 - 4. I would be willing to intervene using a direct communication strategy to prevent an act of relationship abuse.
- 2. **Distracting communication strategy**: You can defuse a potential situation by distracting those involved and interrupting the choice to be abusive. The goal is to divert the aggression away from the potential victim and de-escalate the situation.
 - Ask for directions
 - Ask the victim to assist you with a task
 - 1. If I see an act of relationship abuse, I intend to intervene using a distracting communication strategy.
 - 2. In the near future, I will intervene using a distracting communication strategy if I see an act of relationship abuse.
 - 3. If I see an act of relationship abuse, I would intervene using a distracting communication strategy to prevent it from happening.
 - 4. I would be willing to intervene using a distracting communication strategy to prevent an act of relationship abuse.
- 3. **Delegation communication strategy:** If you feel unsafe or uncomfortable stepping in yourself, asking a third party to intervene for you who might be more equipped or better able to handle the situation.
 - Let a bouncer know about the abuse
 - Ask the host of the party to intervene
 - 1. If I see an act of relationship abuse, I intend to intervene using a delegation communication strategy.
 - 2. In the near future, I will intervene using a delegation communication strategy if I see an act of relationship abuse.
 - 3. If I see an act of relationship abuse, I would intervene using a delegation communication strategy to prevent it from happening.
 - 4. I would be willing to intervene using a delegation communication strategy to prevent an act of relationship abuse.

- 4. **Delay communication strategy**: If you don't intervene in the moment, you can check in with the person experiencing the violence afterwards to see if you can do anything to support them.
 - Ask, "Is there anything I can do?"
 - "Is there someone we can call?"
 - 1. If I see an act of relationship abuse, I intend to use a delay communication strategy.
 - 2. In the near future, I will use a delay communication strategy if I see an act of relationship abuse.
 - 3. If I see an act of relationship abuse, I would intervene using a delay communication strategy.
 - 4. I would be willing to intervene using a delay communication strategy in response to an act of relationship abuse.
- 5. **Do nothing**: You may choose not to act or say anything in a situation.
 - 1. If I see an act of relationship abuse, I do not intend to intervene.
 - 2. In the near future, I will not intervene if I see an act of relationship abuse.
 - 3. If I see an act of relationship abuse, I would not intervene to prevent it from happening.
 - 4. I would not be willing to intervene to prevent an act of relationship abuse.

You will now be presented with one short story about two college students involved in a romantic relationship. The people in the stories are not real people, but you may find their situations to be familiar. After you read each story, you will answer some questions.

[Present one of six vignettes]

Post-Vignette Questions

Directions: Please answer the following questions with the story you just read in mind.

[Attention check]

- 1. The couple in the story is married.
 - a. Yes
 - b. No

Close-ended questions

Severity (1 = not serious to 7 = very serious)

- 1. In your opinion how serious is this incident?
- 2. In your opinion, how violent is this incident?
- 3. In your opinion, how dangerous is this incident?

There are a few communication strategies you can use when intervening in acts of relationship abuse. In response to the story you just read, please indicate your intentions to use these communication strategies on a scale of 1-7 [Scale 1= Strongly disagree, 2 =

disagree, 3 = Somewhat disagree, 4= Neutral, 5= Somewhat agree, 6 = Agree, 7= Strongly Agree]

Direct communication strategy: You can either confront the potential victim or the person you believe is engaging in acts of violence or about to become violent. Directly inserting yourself into a potential situation and stopping it by addressing those who are involved.

- Ask someone who seems uncomfortable or unsure if they are ok
- Tell the perpetrator to stop their violent behavior
- 1. If I see a similar situation, I intend to intervene using a direct communication strategy
- 2. In the near future, I will intervene using a direct communication strategy if I see something similar happen.
- 3. If I see a similar situation, I would intervene using a direct communication strategy to prevent it from happening.
- 4. I would be willing to intervene using a direct communication strategy to prevent a similar situation.

Distracting communication strategy: You can defuse a potential situation by distracting those involved and interrupting the choice to be abusive. The goal is to divert the aggression away from the potential victim and de-escalate the situation.

- Ask for directions
- Ask the victim to assist you with a task
- 1. If I see a similar situation, I intend to intervene using a distracting communication strategy.
- 2. In the near future, I will intervene using a distracting communication strategy if I see something similar happen.
- 3. If I see a similar situation, I would intervene using a distracting communication strategy to prevent it from happening.
- 4. I would be willing to intervene using a distracting communication strategy to prevent a similar situation.

Delegation communication strategy: If you feel unsafe or uncomfortable stepping in yourself, asking a third party to intervene for you who might be more equipped or better able to handle the situation.

- Let a bouncer know about the abuse
- Ask the host of the party to intervene
- 1. If I see a similar situation, I intend to intervene using a delegation communication strategy.
- 2. In the near future, I will intervene using a delegation communication strategy if I see something similar happen.
- 3. If I see a similar situation, I would intervene using a delegation communication strategy to prevent it from happening.

4. I would be willing to intervene using a delegation communication strategy to prevent a similar situation

Delay communication strategy: If you don't intervene in the moment, you can check in with the person experiencing the violence afterwards to see if you can do anything to support them.

- Ask, "Is there anything I can do?"
- "Is there someone we can call?"
- 1. If I see a similar situation, I intend use a delay communication strategy.
- 2. In the near future, I will use a delay communication strategy if I see something similar happen.
- 3. If I see a similar situation, I would intervene using a delay communication strategy.
- 4. I would be willing to intervene I would intervene using a delay communication strategy in response to a similar situation.

Do nothing: You may choose not to act or say anything in a situation.

- 1. If I see a similar situation, I do not intend to intervene.
- 2. In the near future, I will not intervene if I see something similar happen.
- 3. If I see a similar situation, I would not intervene to prevent it from happening.
- 4. I would not be willing to intervene to prevent a similar situation.

Now that you have indicated your intentions to use each different communication
strategy, please rank which strategy you think would be most effective in addressing the
situation presented in the vignette. [1 - the most effective to 5 - least effective]
1

1	
2	
3	
4	
5	

[Open-ended questions]

- 1. As a friend, what would you do if you witnessed this scenario?
- 2. When, or under what conditions, would you help someone like [insert character's name]?
- 3. What kinds of things might make it hard to help someone like [insert character's name] in this type of situation?

Demographic Questions

- 1. What is your age (in years)? _____
- 2. What gender do you most identify with?
 - 1. Male/Man
 - 2. Female/Woman

	3. Nonbinary
	4. Prefer to self-describe
	5. Prefer not to answer
3.	How would you describe your ethnicity?
	1. Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or
	Central American, or other Spanish culture or origin, regardless of race
	2. Not of Hispanic, Latino or Spanish Origin
	3. Prefer not to answer
4.	Please describe which racial group(s) you identify (check all that apply):
	1. White/European American
	2. Black/African American
	3. Asian
	4. Pacific Islander/Native Hawaiian
	5. American Indian or Alaskan Native
	6. Some other race (Please specify)
	7. Prefer not to answer
5.	What is your year in school?
	1. Freshman
	2. Sophomore
	3. Junior
	4. Senior
	5. Other
6.	Do you identify as:
	1. Heterosexual/Straight
	2. Gay/Lesbian
	3. Bisexual
	4. Other
	5. Prefer not to say
7.	What is your current relationship status?
	1. Single
	2. Casual romantic relationship
	3. Committed, exclusive romantic relationship
	4. Engaged
	5. Married
	6. Other
8.	How many romantic relationships have you been in?
	1. I have never been in a relationship.
	2. Only one relationship
	3. 2-4 relationships

4. 4-8 relationships

- 5. More than 8 relationships
- 9. On a scale of 1 to 7 (7 being most serious) how serious was your current or last relationship?
 - 1. 1
 - 2. 2
 - 3. 3
 - 4. 4
 - 5. 5
 - 6. 6
 - 7. 7
- 10. Have you ever engaged in sexual intercourse (i.e., vaginal, anal, or oral sex)?
 - 1. Yes
 - 2. No.
- 11. Have you attended a relationship abuse education course?
 - 1. Yes
 - 2. No
- 12. Do you know someone who is a survivor of relationship abuse?
 - 1. Yes
 - 2. No.
- 13. Have you ever experienced relationship abuse?
 - 1. Yes
 - 2. No
 - 3. Unsure
- 14. Are you aware of any programs or campaigns addressing relationship abuse at the University of Kentucky?
- 15. How would you describe yourself politically?
 - 1. Very liberal
 - 2. Liberal
 - 3. Somewhat liberal
 - 4. Moderate
 - 5. Somewhat conservative
 - 6. Conservative
 - 7. Very Conservative

Thank you for taking the time to complete the survey. If you or someone you know has experienced relationship abuse, here are some helpful local and national resources:

University of Kentucky VIP (Violence Intervention and Prevention) Center

Location: 406 Administration Drive Frazee Hall, Lower Level

Phone: 859-257-3574 Email: <u>vipcenter@uky.edu</u>

Greenhouse17 (Local shelter and advocacy agency)

Phone: 1-800-544-2022

Email: contact@greenhouse17.org

National Domestic Violence Hotline

Phone: 1-800-799-7233

References

- Ajzen, I. (1985). From intentions to actions: A theory of planned behavior. In J. Kuhl & J. Beckmann (Eds.), *Action-control: From cognition to behavior* (pp. 11-39). Heidelberg: Springer.
- Ajzen, I. (1988). Attitudes, personality, and behavior. Chicago: Dorsey Press.
- Ajzen, I. (1991). The theory of planned behavior. *Organizational Behavior and Human Decision Processes*, 50(2), 179-211.
- Ajzen, I. (2020). The theory of planned behavior: Frequently asked questions. *Human Behavior and Emerging Technologies*, 2(4), 314-324.
- Anderson, I., & Doherty, K. (2008). Accounting for rape: Psychology, feminism, and discourse analysis in the study of sexual violence. New York, NY: Routledge.
- Bagwell-Gray, M. E., Messing, J. T., & Baldwin-White, A. (2015). Intimate partner sexual violence: A review of terms, definitions, and prevalence. *Trauma*, *Violence*, & *Abuse*, *16*(3), 316-335.
- Ballman, A. D., Leheney, E. K., Miller, K. E., Simmons, B. L., & Wilson, L. C. (2016).
 Bystander perceptions of same-gender versus mixed-gender rape: A pilot
 study. *Journal of Aggression, Maltreatment & Trauma*, 25(10), 1079-1096.
- Banyard, V. L., Moynihan, M. M., & Plante, E. G. (2007). Sexual violence prevention through bystander education: An experimental evaluation. *Journal of Community Psychology*, 35, 463-481.
- Banyard, V., & Moynihan, M. M. (2011). Variation in bystander behavior related to sexual and intimate partner violence prevention: Correlates in a sample of college students. *Psychology of Violence*, *1*(4), 287-301.

- Banyard, V., Plante, G. E., & Moynihan, M. M. (2004). How do we know if it works?

 Measuring outcomes in bystander-focused abuse prevention on campuses. *Journal of Community Psychology*, 32, 61-79.
- Barter, C., & Renold, E. (2000). 'I wanna tell you a story': Exploring the application of vignettes in qualitative research with children and young people. *International Journal of Social Research Methodology*, *3*(4), 307-323.
- Basile, K. C., Arias, I., Desai, S., & Thompson, M. P. (2004). The differential association of intimate partner physical, sexual, psychological, and stalking violence and posttraumatic stress symptoms in a nationally representative sample of women. *Journal of Traumatic Stress*, 17, 413-421.
- Berger, C. R. (2004). Communication: A goal-directed, plan-guided process. In D. R. Roskos-Ewoldsen & J. L. Monahan (Eds.), *Communication and social cognition:*Theories and methods (pp. 47–70). Mahwah, NJ: Erlbaum.
- Black, M. C. (2011). Intimate partner violence and adverse health consequences:

 Implications for clinicians. *American Journal of Lifestyle Medicine*, 5, 428–439.
- Black, B. M., Tolman, R. M., Callahan, M., Saunders, D. G., & Weisz, A. N. (2008).

 When will adolescents tell someone about dating violence victimization? *Violence Against Women*, *14*, 741–758.
- Blayney, J. A., Jenzer, T., Read, J. P., Livingston, J., Testa, M., & Carroll, Q. (2020). A qualitative study on friends and the social context of sexual victimization: implications for campus-based interventions. *Violence Against Women*.

- Brady, P. Q., Nobles, M. R., & Bouffard, L. A. (2017). Are college students really at a higher risk for stalking?: Exploring the generalizability of student samples in victimization research. *Journal of Criminal Justice*, 52, 12–21.
- Branch, K. A., Richards, T. N., & Dretsch, E. C. (2013). An exploratory analysis of college students' response and reporting behavior regarding intimate partner violence victimization and perpetration among their friends. *Journal of Interpersonal Violence*, 28(18), 3386-3399.
- Breiding, M., Basile, K. C., Smith, S. G., Black, M. C., & Mahendra, R. R. (2015).

 Intimate partner violence surveillance: Uniform definitions and recommended data elements. Version 2.0.
- Breiding, M. J., Smith, S. G., Basile, K. C., Walters, M. L., Chen, J., & Merrick, M. T. (2014). Prevalence and characteristics of sexual violence, stalking, and intimate partner violence victimization—National Intimate Partner and Sexual Violence Survey, United States, 2011. MMWR Surveillance Summaries, 63(8), 1-18.
- Buhi, E.R., Clayton, H., Surrency, H.H. (2008). Stalking victimization among college women and subsequent help-seeking behaviors. *Journal of American College Health*, 57(4), 419-425.
- Capezza, N. M., & Arriaga, X. B. (2008). You can degrade but you can't hit: Differences in perceptions of psychological versus physical aggression. *Journal of Social and Personal Relationships*, 25, 225-245.
- Capilouto, E. (2016). Cats see safety. Retrieved from http://www.uky.edu/CATSseesafety/

- Carlyle, K. E., Scarduzio, J. A., & Slater, M. D. (2014). Media portrayals of female perpetrators of intimate partner violence. *Journal of Interpersonal Violence*, 29(13), 2394-2417.
- Casey, E. A., & Ohler, K. (2012). Being a positive bystander: Male antiviolence allies' experiences of "stepping up". *Journal of Interpersonal Violence*, 27(1), 62-83.
- Centers for Disease Control and Prevention (2019a). Intimate partner violence prevention strategies. Retrieved from https://www.cdc.gov/violenceprevention/intimatepartnerviolence/prevention.html
- Centers for Disease Control and Prevention. (2019b). Risk and protective factors for perpetration. Retrieved from https://www.cdc.gov/violenceprevention/intimatepartnerviolence/riskprotectivefactors.html
- Chabot, H. F., Tracy, T. L., Manning, C. A., & Poisson, C. A. (2009). Sex, attribution, and severity influence intervention decisions of informal helpers in domestic violence. *Journal of Interpersonal Violence*, 24, 1696–1713.
- Coker, A. L., Smith, P. H., Bethea, L., King, M. R., & McKeown, R. E. (2000). Physical health consequences of physical and psychological intimate partner violence.

 *Archives of Family Medicine, 9, 451-457.
- Coker, A. L., Smith, P. H., Thompson, M. P., McKeown, R. E., Bethea, L., & Davis, K. E. (2002). Social support protects against the negative effects of partner violence on mental health. *Journal of Women's Health & Gender-Based Medicine*, 11, 465-476. doi:10.1089/15246090260137644

- Coker, A. L., Watkins, K. W., Smith, P. H., & Brandt, H. M. (2003). Social support reduces the impact of partner violence on health: Application of structural equation models. *Preventive Medicine*, *37*, 259–267. doi:10.1016/S0091-7435(03)00122-1
- Coker, A. L., Weston, R., Creson, D. L., Justice, B., & Blakeney, P. (2005). PTSD symptoms among men and women survivors of intimate partner violence: The role of risk and protective factors. *Violence and Victims*, 20(6), 625. doi:10.1891/088667005780927421
- Coker, A. L., Williams, C. M., Follingstad, D. R., & Jordan, C. E. (2011). *Psychological, reproductive and maternal health, behavioral, and economic impact of intimate partner violence*. In J. W. White, M. P. Koss, & A. E. Kazdin (Eds.), Violence against women and children, Vol. 1. Mapping the terrain (pp. 265-284).

 Washington, DC, US: American Psychological Association.
- Coker, A., Fisher, B., Bush, H., Swan, S., Williams, C., Clear, E., & Degue, S. (2015). Evaluation of the Green Dot bystander intervention to reduce interpersonal violence among college students across three campuses. *Violence Against Women*, 21(12), 1507-1527.
- Cupp, P. K., Savage, M. W., Atwood, K., & Abadi, M. H. (2015). Risky health behaviors among adolescents and young adults. In N.G. Harrington (Ed), *Health communication: An introduction to theory, method, and application* (pp. 23-50). New York, NY: Routledge.

- Dardis, C. M., Edwards, K. M., Kelley, E. L., & Gidycz, C. A. (2017). Perceptions of dating violence and associated correlates: A study of college young adults. *Journal of Interpersonal Violence*, 32(21), 3245-3271.
- DeHart, D. D., Follingstad, D. R., & Fields, A. M. (2010). Does context matter in determining psychological abuse? Effects of pattern, harm, relationship, and norms. *Journal of Family Violence*, 25(5), 461-474.
- Dillard, J. P., Segrin, C., & Harden, J. M. (1989). Primary and secondary goals in the production of interpersonal influence messages. *Communication Monographs*, *56*, 19-38.
- Ermer, A. E., Roach, A. L., Coleman, M., & Ganong, L. (2017). Deconstructing Attitudes

 About Intimate Partner Violence and Bystander Intervention: The Roles of

 Perpetrator Gender and Severity of Aggression. *Journal of Interpersonal*Violence.
- Fair, C. D., & Vanyur, J. (2011). Sexual coercion, verbal aggression, and condom use consistency among college students. *Journal of American College Health*, 59(4), 273-280.
- Fass, D. F., Benson, R. I., & Leggett, D. G. (2008). Assessing prevalence and awareness of violent behaviors in the intimate partner relationships of college students using internet sampling. *Journal of College Student Psychotherapy*, 22(4), 66-75.
- Finch, J. (1987). The vignette technique in survey research. Sociology, 21(1), 105-114.
- Fincham, F. D., Cui, M., Braithwaite, S., & Pasley, K. (2008). Attitudes toward intimate partner violence in dating relationships. *Psychological Assessment*, 20, 260–269.

- Fishbein, M. (1967). Readings in attitude theory and measurement. New York, NY: Wiley.
- Fishbein, M., & Ajzen, I. (1975). *Belief, attitude, intention, and behavior: An introduction to theory and research.* Reading, MA: Addison-Wesley.
- Fishbein, M., & Ajzen, I. (2010). *Predicting and changing behavior: The reasoned action approach*. New York, NY: Psychology Press.
- Franklin, C. A., Brady, P. Q., & Jurek, A. L. (2017). Responding to gendered violence among college students: The impact of participant characteristics on direct bystander intervention behavior. *Journal of School Violence*, *16*(2), 189-206.
- García-Moreno, C., Jansen, H. A. F. M., Ellsberg, M., Heise, L., & Watts, C. (2005). WHO multi-country study on women's health and domestic violence against women. *Geneva: World Health Organization*, 204, 1-18.
- Giordano, P. C., Soto, D. A., Manning, W. D., & Longmore, M. A. (2010). The characteristics of romantic relationships associated with teen dating violence. *Social Science Research*, 39, 863–874.
- Hamby, S., & Jackson, A. (2010). Size does matter: The effects of gender on perceptions of dating violence. *Sex Roles*, *63*, 324-331.
- Herman, J. L. (1992). Complex PTSD: A syndrome in survivors of prolonged and repeated trauma. *Journal of Traumatic Stress*, *5*(3), 377-391.
- Huhman, M., Quick, B. L., & Payne, L. (2016). Community college students' health insurance enrollment, maintenance, and talking with parents' intentions: An application of the reasoned action approach. *Journal of Health Communication*, 21(5), 487-495.

- Jouriles, E., Krauss, A., Vu, N., Banyard, V., & Mcdonald, R. (2018). Bystander programs addressing sexual violence on college campuses: A systematic review and meta-analysis of program outcomes and delivery methods. *Journal of American College Health*, 66(6), 457-466.
- Katz, J., Carino, A., & Hilton, A. (2002). Perceived verbal conflict behaviors associated with physical aggression and sexual coercion in dating relationships: A gendersensitive analysis. *Violence and Victims*, 17(1), 93.
- Lane, B., & Knowles, A. (2000). Community attitudes to domestic violence: Attributions of responsibility, and suggested punishments related to alcohol consumption and level of violence. *Psychiatry, Psychology and Law, 7*, 51-58.
- Latané, B., & Darley, J. M. (1970). The unresponsive behavior: Why doesn't he help?

 New York, NY: Appleton-Century-Crofts.
- Liang, B., Williams, L. M., & Siegel, J. A. (2006). Relational outcomes of childhood sexual trauma in female survivors: A longitudinal study. *Journal of Interpersonal Violence*, 21(1), 42-57.
- Littlejohn, S. W., & Foss, K. A. (2009). Privacy management theory. In *Encyclopedia* communication theory, (pp. 797). Thousand Oaks, CA: SAGE.
- Lukacena, K. M., Reynolds-Tylus, T., & Quick, B. L. (2019). An application of the reasoned action approach to bystander intervention for sexual assault. *Health Communication*, *34*(1), 46-53.
- McEachan, R., Taylor, N., Harrison, R., Lawton, R., Gardner, P., & Conner, M. (2016).

 Meta-analysis of the reasoned action approach (RAA) to understanding health behaviors. *Annals of Behavioral Medicine*, *50*, 1-21.

- McMahon, S., & Banyard, V. L. (2012). When can I help? A conceptual framework for the prevention of sexual violence through bystander intervention. *Trauma*, *Violence*, & *Abuse*, *13*(1), 3-14.
- Miller, L. M. (2011). Physical abuse in a college setting: A study of perceptions and participation in abusive dating relationships. *Journal of Family Violence*, 26, 71-80.
- Montaño, D. E., & Kasprzyk, D. (2008). Theory of reasoned action, theory of planned behavior, and the integrated behavioral model. In K. Glanz, B. K. Rimer, & K. Viswanath (Eds.), *Health behavior and health education: Theory research and practice* (4th Ed., pp. 67-96). San Francisco, CA: Wiley
- Moynihan, M. M., & Banyard, V. L. (2008). Community responsibility for preventing sexual violence: A pilot study with campus Greeks and intercollegiate athletes.

 *Journal of Prevention & Intervention in the Community, 36(1-2), 23-38.
- Moynihan, M. M., Banyard, V. L., Arnold, J. S., Eckstein, R. P., & Stapleton, J. G. (2011). Sisterhood may be powerful for reducing sexual and intimate partner violence: An evaluation of the bringing in the bystander in-person program with sorority members. *Violence Against Women*, *17*(6), 703-719.
- Moynihan, M. M., Eckstein, R. P., Banyard, V. L., & Plante, E. G. (2010). Facilitator's guide for bringing in the bystander: A prevention workshop for establishing a community of responsibility (Revised Version). Durham, NH: University of New Hampshire, Prevention Innovations
- Nabors, E. L., Dietz, T. L., & Jasinski, J. L. (2006). Domestic violence beliefs and perceptions among college students. *Violence and Victims*, *21*(6), 779.

- Nordin, K. (2019). A bruise without a name: investigating college student perceptions of intimate partner violence terminology. *Journal of Interpersonal Violence*, doi:10886260519876723.
- Oswalt, S. B., Wyatt, T. J., & Ochoa, Y. (2018). Sexual assault is just the tip of the iceberg: Relationship and sexual violence prevalence in college students. *Journal of College Student Psychotherapy*, 32, 93-109.
- Palmer, J. E., Nicksa, S. C., & McMahon, S. (2018). Does who you know affect how you act? The impact of relationships on bystander intervention in interpersonal violence situations. *Journal of Interpersonal Violence*, *33*(17), 2623-2642.
- Paúl, M. L. (2021, October 2). Police mishandled 'red flag' of domestic violence in Gabby Petito confrontation, experts say. *The Washington Post*. https://www.washingtonpost.com/nation/2021/10/02/gabby-petito-new-video/
- Planty, M. (2002). Third-party involvement in violent crime, 1993–1999. Washington,

 DC: Bureau of Justice Statistics. Retrieved from http://www.bjs.gov/content/pub/
 pdf/tpivc99.pdf
- Potter, S. J. (2012). Using a multimedia social marketing campaign to increase active bystanders on the college campus. *Journal of American College Health*, 60(4), 282-295.
- Rennison, C. M., & Welchans, S. (2000). Intimate partner violence (Special report). US

 Department of Justice, Bureau of Justice Statistics, Office of Justice Programs.
- Rentschler, C. A. (2017). Bystander intervention, feminist hashtag activism, and the anticarceral politics of care. *Feminist Media Studies*, 17(4), 565-584.

- Riley, A. H., Critchlow, E., Birkenstock, L., Itzoe, M., Senter, K., Holmes, N. M., & Buffer, S. W. (2021). Vignettes as research tools in global health communication: a systematic review of the literature from 2000 to 2020. *Journal of Communication in Healthcare*, 14(4), 1-10.
- Ryzik, M., & Benner, K. (2021, August 4). What defines domestic abuse? Survivors say it's more than assault. *The New York Times*.

 https://www.nytimes.com/2021/01/22/us/cori-bush-fka-twigs-coercive-control.html
- Savage, M. W., Scarduzio, J. A., Lockwood Harris, K., Carlyle, K. E., & Sheff, S. E. (2017). News stories of intimate partner violence: An experimental examination of participant sex, perpetrator sex, and violence severity on seriousness, sympathy, and punishment preferences. *Health Communication*, 32(6), 768-776.
- Scheffer Lindgren, M. and Renck, B. (2008), 'It is still so deep-seated, the fear':

 Psychological stress reactions as consequences of intimate partner violence.

 Journal of Psychiatric and Mental Health Nursing, 15, 219–228.
- Schoenberg, N. E. and Ravdal. H. (2000) Using vignettes in awareness and attitudinal research. *International Journal of Social Research Methodology, Theory and Practice*, *3*, 63–75.
- Schwartz, M. D. (2000). Methodological issues in the use of survey data for measuring and characterizing violence against women. *Violence Against Women*, *6*, 815-838.
- Smith, B. A., Thompson, S., Tomaka, J., & Buchanan, A. C. (2005). Development of the Intimate Partner Violence Attitude Scales (IPVAS) with a predominantly

- Mexican American college sample. *Hispanic Journal of Behavioral Sciences*, 27, 442–454.
- Smith, S. G., Zhang, X., Basile, K. C., Merrick, M. T., Wang, J., Kresnow, M., & Chen, J. (2018). The national intimate partner and sexual violence survey. *National Center for Injury Prevention and Control, Centers for Disease Control and Prevention*. https://www.cdc.gov/violenceprevention/pdf/2015data-brief508pdf
- Sniehotta, F. F., Presseau, J., & Araújo-Soares, V. (2014). Time to retire the theory of planned behaviour. *Health Psychology Review*, 8(1), 1–7.
- Spencer, K., Haffejee, M., Candy, G., & Kaseke, E. (2016). Intimate partner violence at a tertiary institution. *South African Medical Journal*, *106*(11), 1129-1133.
- Taylor, E., Banyard, V., Grych, J., & Hamby, S. (2016). Not all behind closed doors: Examining bystander involvement in intimate partner violence. *Journal of Interpersonal Violence*, 34(18), 3915-3935.
- Truman, J., & Morgan, R. E. (2014). Special report: Nonfatal domestic violence, 2003-2012 (Publication No. NCJ24469). Washington, DC: Bureau of Justice Statistics, US Department of Justice.
- University of Kentucky. (2016). *Campus attitudes toward safety executive report 2016*. https://issuu.com/universityofkentucky/docs/cats_web
- University of Kentucky. (2021). 2021 Annual Campus Safety and Security Report:

 Covering statistics from 2018-2020.
 - https://www.uky.edu/cmp/sites/www.uky.edu.cmp/files/ASR2021FINAL.pdf?j=4 00833&sfmc_sub=127479249&l=21689_HTML&u=11839483&mid=10966798 &jb=0

- Vives-Cases, C., Ruiz-Cantero, M. T., Escribà-Agüir, V., & Miralles, J. J. (2011). The effect of intimate partner violence and other forms of violence against women on health. *Journal of Public Health*, *33*, 15-21.
- Weinstein, N. D. (2007). Misleading tests of health behavior theories. *Annals of Behavioral Medicine*, 33(1), 1–10.
- Weitzman, A., Cowan, S., & Walsh, K. (2020). Bystander interventions on behalf of sexual assault and intimate partner violence victims. *Journal of Interpersonal Violence*, 35(7-8), 1694-1718.
- White, W. E., & Carmody, D. (2018). Preventing Online victimization: college students' views on intervention and prevention. *Journal of Interpersonal Violence*, 33(14), 2291–2307.
- Wilson, S. R. (2002). Seeking and resisting compliance: Why people say what they do when trying to influence others. Thousand Oaks, CA: Sage.
- Witte, T. H., Schroeder, D. A., & Lohr, J. M. (2006). Blame for intimate partner violence: An attributional analysis. *Journal of Social and Clinical Psychology*, 25, 647–667.
- Wood, L., Sulley, C., Kammer-Kerwick, M., Follingstad, D., & Busch-Armendariz, N. (2017). Climate surveys: An inventory of understanding sexual assault and other crimes of interpersonal violence at institutions of higher education. *Violence Against Women*, 23(10), 1249-1267.
- Woods, W. C., Shorey, R. C., Strauss, C. V., Cornelius, T. L., & Rowland, T. (2016). The relationship between dating violence and bystander behavior: An initial investigation. *Partner Abuse*, 7(1), 55-69.

- Wright, E. M., & Benson, M. L. (2011). Clarifying the effects of neighborhood context on violence "behind closed doors." *Justice Quarterly*, 28, 775-798.
- Yakubovich, A. R., Stöckl, H., Murray, J., Melendez-Torres, G. J., Steinert, J. I., Glavin, C. E., & Humphreys, D. K. (2018). Risk and protective factors for intimate partner violence against women: Systematic review and meta-analyses of prospective–longitudinal studies. *American Journal of Public Health*, 108(7), 1-11.
- Yzer, M. (2012). Reasoned action theory: Persuasion as belief-based behavior change. In
 J. Dillard & L. Shen (Eds.), *The SAGE handbook of persuasion: Developments in theory and practice* (2nd ed., pp. 120–137). Thousand Oaks, CA: Sage.
- Zettel-Vandenhouten, J. (2019, September 3). Bystander intervention training may reduce violence at Wisconsin colleges, but it isn't enough on its own. *Milwaukee Journal Sentinel*. Retrieved from
 - https://www.jsonline.com/story/news/solutions/2019/09/03/campus-violence-bystander-intervention-programs-not-enough-their-own/2029094001/

VITA

Kaylee Marie Lukacena College of Communication and Information University of Kentucky

EDUCATION

M.A. in Communication May 2016

University of Illinois Urbana-Champaign, Urbana, IL

• Emphasis: Health Communication

Advisor: Marian Huhman

B.A. in Communication May 2014

Muskingum University, New Concord, OH

Minors: Gender Studies and Political Science

Honors: Summa Cum LaudeAdvisor: Gene Alesandrini

ACADEMIC APPOINTMENTS

University of Illinois Urbana-Champaign

Research Development Manager Jan 2020 – present Center for Social and Behavioral Science (CSBS)

Office of the Vice Chancellor for Research & Innovation

University of Kentucky

Instructor of Record/Teaching Assistant Aug 2016 – Dec 2019

Department of Communication

College of Communication and Information

University of Illinois Urbana-Champaign

Instructor of Record/Teaching Assistant Aug 2014 – May 2016

Department of Communication

College of Liberal Arts and Sciences

HONORS, AWARDS, & ACCOMPLISHMENTS

Palmgreen Fellowship Fund Spring 2019

College of Communication and Information

University of Kentucky

R. Lewis Donohew Graduate Fellowship Spring 2017

College of Communication and Information

University of Kentucky

List of Teachers Ranked as Excellent Fall 2014 – Spr 2016

Center for Teaching Excellence

PROFESSIONAL PUBLICATIONS

Peer Reviewed Articles

- 7. **Lukacena, K. M.** & Mark, K. P. (2021). Communicating a history of sexual trauma: Partner responses to women's disclosure. *Violence Against Women*, 1-19.
- 6. Huffmyer, M. J., Keck, J. W., Harrington, N. G., Freeman, P. R. Westling, M., Lukacena, K. M., Moga, D. C. (2021). Primary care clinician and community pharmacist perceptions of deprescribing. *Journal of the American Geriatrics Society*, 69(6), 1686-1689.
- 5. Reynolds-Tylus, T., **Lukacena, K. M.**, & Truban, O. (2020). Message fatigue to bystander intervention messages: Examining pathways of resistance among college men. (2020). *Health Communication*. https://doi.org/10.1080/10410236.2020.1794551
- 4. Egan, K. L., Wolfson, M. S., **Lukacena, K. M.**, Zelaya, C. M., McLeary, M. S., Helme, D. W. (2020). Developing a health communication campaign for disposal of unused opioid medications *Addictive Behaviors Reports*. https://doi.org/10.1016/j.abrep.2020.100291
- 3. Helme, D. W., Egan, K. L., **Lukacena, K. M.**, Roberson, L., Mazariegos Zelaya, C., McCleary, M. S., & Wolfson, M. (2020). Encouraging disposal of unused opioid analgesics in Appalachia. *Drugs: Education, Prevention, & Policy*. https://doi.org/10.1080/09687637.2020.1711871
- 2. **Lukacena, K. M.**, Reynolds-Tylus, T., & Quick, B. L. (2019). An application of the reasoned action approach to bystander intervention for sexual assault. *Health Communication*, *34*(1), 46-53. https://doi.org/10.1080/10410236.2017.1384356
- 1. Reynolds-Tylus, T., **Lukacena, K. M.**, & Quick, B. L. (2019). An application of the theory of normative social behavior to bystander intervention for sexual assault. *Journal of American College Health*, *67*, 551-559. https://doi.org/10.1080/07448481.2018.1499648

Invited Articles

Lukacena, K. M., Harrington, N. G., Huffmyer, M. J., Keck, J. W., & Moga, D. C. (forthcoming). Polypharmacy, Deprescribing. In E. Ho, C. Bylund, & J. van Weert (Eds.), *The international encyclopedia of health communication*. Hoboken, NJ: John Wiley & Sons, Inc.

Manuscripts Under Review

- Reynolds-Tylus, T., **Lukacena, K. M.**, Wehrman, E. C., & Moore, M. E. Factors influencing COVID-19 exposure notification: An application of the disclosure decision-making model.
- **Lukacena, K. M.**, Keck, J. W., Freeman, P.R., Harrington, N. G., Huffmyer, M. J., Moga, D. C. Patients' attitudes toward deprescribing and experiences communicating with clinicians and pharmacists.

Kaylee Marie Lukacena
(Name of Student)