Counseling With HEART: A Relationship Violence Prevention Program for College Students

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Relationship violence is a salient concern on college campuses today, and psychoeducational groups may be an appropriate prevention format. This article describes a study measuring the impact of college student participation in the HEART (Help End Abusive Relationships Today) program, a series of group sessions designed to increase knowledge and awareness of relationship violence. Findings indicated significant changes for group participants postintervention. Implications and recommendations for college counselors are discussed.

Keywords: relationship violence, college, group counseling

ecause of their accessibility to students and ability to conduct outreach on campus, college counselors may be well positioned to prevent, identify, and remediate instances of dating violence among college students (Murray & Kardatzke, 2007). Dating violence, one form of intimate partner violence (IPV), is the infliction or threat of infliction of emotional, physical, or sexual abuse in a dating relationship to establish control over a romantic partner (McLeod, Muldoon, & Hays, 2014). For many students, IPV can begin in early dating experiences and continue into young adulthood, with the greatest risk of IPV occurring between the ages of 18 and 25 years. Indeed, approximately 25% of college couples report experiencing relationship violence (Black et al., 2011; Miller, 2011). Estimates of dating violence victimization vary depending on the type of abuse experienced by college students (Fincham, Cui, Braithwaite, & Pasley, 2008; Luthra & Gidycz, 2006), with psychological abuse having the highest incidence rate (White & Koss, 1991), followed by physical abuse (Straus, 2004) and sexual abuse (Fisher, Cullen, & Turner, 2000; Gross, Winslett, Roberts, & Gohm, 2006). Unfortunately, despite the prevalence and significant mental health consequences of dating violence, there are few empirically supported relationship violence prevention programs specifically designed for college students. In this article, we outline findings from a theoretically driven relationship violence prevention program designed specifically for college students: HEART (Help End Abusive Relationships Today). First, we briefly discuss the risk factors and consequences of relationship violence and describe existing programs.

A primary risk factor for relationship violence victimization and perpetration among traditional college-age students (18 to 24 years) is a misunderstand-

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ing of what constitutes healthy romantic relationships. These perceptions are reinforced by individuals who witness or experience violence among their peers (Sears, Byers, & Price, 2007). Individuals with attitudes that support or tolerate relationship violence are more likely to engage in abusive relationships and perpetrate violence against others (Bryant & Spencer, 2003; Carr & VanDeusen, 2002; Miller, 2011). College students who respond to relationship conflict by expressing anger, withdrawing, or attempting to change their partners are more likely to engage in violent relationships (Bird, Stith, & Schladale, 1991; Gormley & Lopez, 2010).

There are significant mental and physical consequences of relationship violence, including higher rates of eating disorders, substance abuse, depression, anxiety, self-injury, somatization, suicidal thoughts and attempts, and chronic mental illness (Ackard & Neumark-Sztainer, 2002; Amar & Gennaro, 2005; Carlson, McNutt, & Choi, 2003; Kaura & Lohman, 2007; Logan, Walker, Jordan, & Leukefeld, 2006; Murray, Wester, & Paladino, 2008). Many survivors of relationship violence experience poor academic performance, decreased self-esteem, and risky behaviors (Hanson, 2002; Simonelli & Ingram, 1998), all of which can negatively affect their college experience. In addition, the majority of college couples who experience violence while dating report that they plan to continue their relationships (Miller, 2011). Often, violence that begins during dating relationships continues into long-term partnerships (Miller, 2011). Without physical and psychological treatment, relationship violence survivors may experience residual effects of abuse, making them more vulnerable to subsequent perpetration and a cycle of negative physical and mental health consequences. Yet, despite these consequences and the efforts of college counselors to make resources available, most college sexual assault survivors do not seek medical treatment or counseling (Guerette & Caron, 2007).

It is clear that relationship violence is both pervasive and a serious concern for college-age students, and it is vital to create prevention and treatment interventions for the college student population (Baker & Stith, 2008). College counselors, with their training in mental health and ability to collaborate with student groups and campus departments, may be uniquely poised to educate students on relationship violence, prevent serious mental and physical health consequences, and break the cycle of abuse. Individuals currently engaged in unsafe relationships may require education and support to safely end abusive relationships (Murray et al., 2008). Prevention education can also teach friends how to support one another in the case of relationship violence, given that many students will likely first seek support from a friend or family member (Guerette & Caron, 2007). Although friends may have good intentions for how to support survivors, many are uneducated on how to appropriately respond to a disclosure (Guerette & Caron, 2007). Research indicates that the general college student population may benefit from educational programs promoting healthy relationship behaviors (Murray et al., 2008). Furthermore, because college students may hold inaccurate beliefs about what is considered a violent act and what is typical dating behavior, prevention education can target the severity of relationship violence, coping strategies, conflict resolution, and what behaviors are considered violent (Bird et al., 1991; Gormley & Lopez, 2010).

Although programs exist to reduce sexual assault victimization (Gray, Lesser, Quinn, & Bounds, 1990; Rothman & Silverman, 2007), there are few intervention programs for college students that specifically target dating violence (Bradley, 2008; Murray & Kardatzke, 2007). Most intervention programs aimed at preventing relationship violence have targeted middle or high school students (Cornelius & Resseguie, 2007; Whitaker, Baker, & Arias, 2007). Dating violence prevention programs have successfully reduced stereotypical gender role attitudes among college fraternity and sorority members (Schwartz, Griffin, Russell, & Frontaura-Duck, 2006) and decreased risky dating behaviors, improved communication and conflict management skills, increased sexual assertiveness, and increased knowledge about dating violence among adolescents (Foshee et al., 2004; Foshee & Langwick, 2004; Lavoie, Vézina, Piché, & Boivin, 1995). Although these programs show promising results, no comprehensive program was specifically designed for the college population or provided longitudinal, college-specific data.

Because there are few programs available for college students, more research is needed to understand the dynamics, risk factors, treatment, health outcomes, and prevention of dating violence for young adults (Murray & Kardatzke, 2007). It is therefore necessary to conduct process- and outcome-based research to develop and identify effective relationship violence prevention programming for college students. Previous research indicates that the following may be beneficial in programming: discussion of types of abuse, rape myths, strategies related to self-protection, and responses to peer sexual assault (Fisher, Daigle, & Cullen, 2008); information about establishing positive relationships to reduce incidents of physical and emotional abuse and distress symptoms for self-identified IPV survivors (Wolfe et al., 2001); and consciousness-raising workshops focused on supporting peers, sharing personal relationship stories, evaluating one's relationship, and developing strategies for healthy conflict resolution (Fisher et al., 2008).

The purpose of this study was to evaluate the impact of HEART, a relationship violence prevention program specifically designed for college students. The following research questions guided this evaluation: (a) Do participants experience increased knowledge of unhealthy dating violence consequences? (b) Do participants experience increased knowledge of strategies to assist a friend experiencing relationship violence? (c) Do participants experience increased knowledge of communication skills? (d) Do participants experience increased knowledge of sexual assault risk minimization strategies? and (e) Do participants experience increased knowledge of conflict resolution skills? We hypothesized that there would be significant positive increases in knowledge for each of these five areas.

HEART Program Description

The purpose of the HEART program was to increase knowledge and awareness of relationship violence through psychoeducational groups designed

for implementation in a college setting. The program offered independent group sessions, each of which included experiential learning, skill building, discussion, and instruction on a variety of health topics related to relationship violence and healthy relationships. Each group session was self-contained and independent, allowing participants to attend any meeting without needing knowledge from previous group sessions. We posited that as participants gained knowledge about relationship violence, the incidence of relationship violence on campus would decrease, along with the resulting physical and mental health concerns. This view is consistent with the social-norms approach, which asserts that beliefs and attitudes dictate behaviors. Therefore, providing students with accurate information can alter misconceptions and bring about desired change in behaviors (Fincham et al., 2008).

Feminist therapy serves as the foundation for the HEART program. Feminist group counseling is recognized as an appropriate modality among IPV survivors (Singh & Hays, 2008). The four principles of empowerment feminist therapy are (a) personal and social identities are interdependent, (b) the person is political, (c) relationships are egalitarian, and (d) women's perspectives are valued (Worell & Remer, 2003). The HEART program infused these principles into culturally appropriate group activities to encourage discussion, enhance participants' sense of empowerment, and create societal change. With regard to the first principle, participants were invited to consider how their beliefs about relationships were influenced by the intersection of their gender, culture, and previous relationships. The second principle was addressed by educating participants about how the cycle of violence was rooted in sociopolitical systems. To honor the third and fourth principles, group leaders maintained egalitarian relationships with participants and empowered women, in particular, to share their experiences during the group discussions.

Within a feminist framework, specific topics were introduced to increase knowledge and awareness of relationship violence. Previous relationship violence prevention programs included the following information: evaluating one's relationship, establishing positive relationships, differentiating between types of abuse, increasing self-protection strategies, learning techniques to support peers, and learning strategies for healthy conflict resolution (Fisher et al., 2008; Wolfe et al., 2001). These topics were incorporated into the HEART program to meet the unique needs of college-age participants.

During the 1st year of program implementation, four 90-minute psychoeducational group sessions were each offered three times on a college campus in the southeastern United States. Program revisions were made following a comprehensive program evaluation after the 1st year. During the 2nd year of the HEART program, five 60-minute psychoeducational group sessions were each offered three times. Sessions were held in community rooms of similar size within a university student center and residence halls. Students did not demonstrate a preference for one location over the other, given that the number of participants in each session was nearly the same regardless of room location. The HEART groups were open to both male and female members of the college community, because both genders are equally likely to be

involved in relationship violence (Miller, 2011; Simonelli & Ingram, 1998). Although gender-specific interventions are common for adult interventions, most relationship violence interventions for adolescents include both male and female participants (Whitaker et al., 2006). The HEART groups were designed to educate men and women together as members of the college community to collectively work to decrease relationship violence on campus.

Although there were no preselection criteria to allow for maximum participation, group integrity was maximized by a strong emphasis on group norms, consistent facilitation of content and process, and professional and ethical attention to participants' disclosures. When preparing for group sessions, feminist group leaders considered their own personal biases so that they were able to respect participants' culturally embedded stories. During each group session, facilitators used the feminist principle of egalitarian relationships to intentionally create nonhierarchical relationships with participants (Singh & Hays, 2008; Worell & Remer, 2003). Group leaders minimized power struggles through appropriate self-disclosure. Leaders also used active listening, empathy, linking, and summarizing to encourage participant self-disclosure, empowerment, and connections between group members.

Trust-building activities were used at the beginning of each session to build rapport among members. Feminist group leaders encouraged therapeutic factors, including universality, instillation of hope, interpersonal learning, group cohesiveness, and catharsis throughout the group experience (Yalom, 2005). For example, interpersonal learning and catharsis often occurred as participants shared personal experiences in unhealthy relationships with individuals outside of their immediate social networks. Group members were provided with handouts that included community resources and referral information. When participants disclosed personal previous or current relationship violence, they were connected with appropriate resources, such as counseling services, student health services, and the women's center, because it is vital for feminist group leaders to establish safety for female survivors of trauma (Singh & Hays, 2008; Worell & Remer, 2003). The following sections describe in detail the content and objectives of each session in the HEART program.

HEART Session I

Research suggests that college women often inaccurately label unhealthy dating behaviors, such as jealousy and control, as loving and affectionate behaviors (McLeod et al., 2014; Pezza & Bellotti, 1995). College men are more likely than college women to believe that relationship abuse is effective, acceptable, appropriate, and necessary (Miller, 2011). The first session in the series, Listen to Your Heart: Engaging in Healthy Relationships, was designed to facilitate participants' understanding of healthy and unhealthy relationships. Activities and discussion topics were purposefully arranged to facilitate participants' comfort level and disclosure. The initial icebreaker was designed to begin a dialogue about the supportive people in the participants' lives. Participants were reminded that these individuals might be available

if they ever needed help in a challenging situation. Group members then explored what they wanted in a relationship during an interactive energizer activity and using a follow-up work sheet. Facilitators highlighted relationships in the popular media to evaluate healthy and unhealthy behaviors. Such case studies provided a safe venue for participants to discuss their opinions about relationship violence. Similar vignettes have been shown to be beneficial in other dating violence prevention programming (Schwartz et al., 2006). Participants then assessed their current relationships for potential problem areas and processed reactions with the group. The group members discussed health consequences of abuse, including higher rates of depression, anxiety, and suicidal thoughts. At the conclusion of the session, participants were provided with information about campus and community resources and encouraged to follow up with the group leaders with additional questions or comments or for support.

HEART Session 2

When abuse occurs, survivors typically disclose their experiences to a friend. In fact, research suggests that approximately one in three female students and one in five male students are likely to have had a friend disclose sexual abuse (Banyard, Moynihan, Walsh, Cohn, & Ward, 2010). Furthermore, individuals often hold views about relationship violence similar to those of their peers, and it is therefore imperative for outreach programs to address shared perceptions of violence and empathic strategies for social support (Bird et al., 1991). The primary objectives of the second group session, A Heart-to-Heart: Talking With Friends About Relationship Trouble, were to educate participants about relationship abuse and provide information about available resources for survivors of abuse. As college students are educated about the negative physical and mental health effects of relationship violence, they may encourage their peer abuse survivors to connect with medical and wellness resources. Participants began by identifying qualities of important friends in their lives. To introduce the topic of relationship violence, facilitators encouraged members to brainstorm examples of physical, verbal, academic, and sexual abuse. Then, group members were asked to empathically place themselves in the position of a survivor to understand the factors that may make it difficult to seek help after experiencing such an abuse. Participants were discouraged from engaging in victim blaming during these discussions. Group members discussed feelings (e.g., anxiety, depression, shame, guilt) that might prevent their peers from leaving an abusive relationship. The group explored physical reactions to sexual assault, such as nausea, headaches, sweating, increased heart rate, change in sleep and eating patterns, increased alcohol and drug use, and greater susceptibility to colds or illnesses. Facilitators and group members shared techniques to support a friend who may be in an unhealthy relationship. Group members were encouraged to connect friends in need with campus resources, such as the college counseling center, women's center, and health center.

HEART Session 3

College students who are ineffective communicators are at greater risk for relationship violence compared with their peers (Follette & Alexander, 1992). These individuals are also less likely to seek support or connect with resources. Many college students do not possess the communication skills to appropriately resolve relationship challenges. The third session in the series, Pour Your Heart Out: Effective Communication Strategies for Healthy Relationships, was designed to reinforce healthy communication skills between dating partners. After a brief icebreaker and introduction to effective communication, participants reflected on their expectations for relationships. The cycle of violence, including the tension, violence, and honeymoon stages (Walker, 1979), was introduced, with facilitators clarifying the difference between single events of violence and habitual violence. Participants assessed their own communication styles and how they respond to conflict. At the conclusion of the session, facilitators offered communication skills to enhance and build healthy relationships.

HEART Session 4

The fourth session in the series, Lessons You Know by Heart: Safely Navigating College Culture, was designed to assess and decrease participants' risk of sexual violence and educate participants about the impact of abuse. Participants explored the culture of college and responded to various myths about sexual assault, including victim blaming. The group participated in an interactive skit that explored the issue of sexual consent. Following the skit, participants discussed numerous strategies for staying safe on and off campus. Each participant was empowered to complete a personal safety plan with assistance from the group leaders. The safety plan included actions to protect oneself on campus, while alone with a friend or date or out with friends. Participants were also encouraged to determine what they could do or say if they were pressured to engage in sexual behavior. Finally, group members listed people they could go to for help and what they would want to remember if they were ever hurt. Participants received information about medical and emergency resources should they or their friends need to seek help for sexual assault.

HEART Session 5

Participants from the 1st year of programming reported a desire to learn additional strategies to solve problems in relationships before a situation escalated to violence. Therefore, a fifth session, A Change of Heart: Techniques to Resolve Relationship Conflict, was added during the 2nd year of programming on the basis of these suggestions. The session began by exploring different types of feelings people experience, and participants identified their own physical cues to anger and established strategies to calm down when they felt themselves becoming angry. The group then listened to and

engaged in a dialogue about a song that addressed the cycle of violence. Participants completed a conflict style questionnaire to determine how they naturally respond to disagreements. Next, the group explored various productive strategies to resolve conflict. This exercise promoted the development of assertiveness skills, which are important within the feminist counseling framework. The session ended with group members making a commitment to take steps toward healthier relationships.

Method

Participants

College student participants were recruited through various media efforts (e.g., flyers, websites of student organizations and university offices) to ensure widespread awareness of the program. Additional specific recruiting efforts targeted sororities and fraternities. Because group sessions were independent, students could attend the sessions in any sequence. During the 1st year of data collection, 124 college students participated in the HEART program. Of these students, 42 participated in the first group, 45 in the second group, 34 in the third group, and three in the fourth group. The participants' ages ranged from 18 to 24 years. Of the participants, 113 (91.1%) were female and 11 (8.9%) were male. There was also participation from special student groups, with a large number of sorority participants at most sessions and a group of students with intellectual disabilities who attended one group.

Additional demographic information was collected during the 2nd year. A total of 272 college students participated in Year 2 of the HEART program. Of those who reported gender (n = 143), 130 (90.9%) were women and 13 (9.1%) were men. Fifty-two students participated in the first group, 29 in the second group, 87 in the third group, 67 in the fourth group, and 31 in the fifth group (six participants did not provide data). One hundred twenty-one participants attended one workshop, 127 attended two workshops, 21 attended three workshops, and three attended four workshops. Of those who reported education level (n = 250), 38 were freshmen, 42 were sophomores, 89 were juniors, 77 were seniors, and four reported other. The racial/ethnic composition of the sample was as follows: White/Caucasian (52.6%, n = 143), Black/African American (23.9%, n = 65), Asian American/Pacific Islander (7.0%, n = 19), Hispanic/Latino (4.0%, n = 11), and American Indian/Alaska Native (1.5%, n = 4). Thirty (11.0%) participants did not indicate their race/ethnicity. The participants' ages ranged from 18 to 37 years (M = 20.89). With respect to relationship status, 47.8% (n= 130) reported that they were currently in a dating relationship, 38.6% (n = 105) reported that they were currently not in a dating relationship, and 6.3% (n = 17) reported that they were unsure of their relationship status; 20 (7.4%) participants did not report this information. (Percentages may not total 100 because of rounding.)

Data Sources

Data were obtained through session rating forms, which were developed for use with the HEART program to coincide with program objectives. Participants reported on their knowledge of specific session content both before and after the group using a Likert scale ranging from 1 (strongly disagree) to 6 (strongly agree); higher ratings indicated greater knowledge. Session rating forms showed moderate to strong internal consistency per group topic for Year 1 and Year 2 (see Table 1). Participants were also asked to indicate whether they had been to any other HEART groups or similar sessions (e.g., conflict resolution, communication skills). In the final section of the form, participants responded to open-ended questions regarding the content of the presentation, other topics they would like to see presented, and any additional information they wanted to provide about themselves or their relationships.

Data Analysis

Means and standard deviations were analyzed from the session rating forms to describe relationship violence knowledge before and after group participation. For each group, we conducted a paired-samples t test to determine significant mean differences. We also computed descriptive statistics to identify demographic characteristics of the samples and collected open-ended question responses to provide information related to participants' relationship violence knowledge. Participants responded to the following questions: (a) "What was most surprising to you about today's presentation?" (b) "What was most important in this workshop?" and (c) "Anything else you would like for us to know?" The responses were coded for themes, and frequency counts were tabulated, with six themes emerging from the data.

TABLE 1
Internal Consistency per Year by Psychoeducational Group

		Ye	ar 1	Year 2	
Group Topic		Pre	Post	Pre	Post
1.	Listen to Your Heart: Engaging in Healthy				
	Relationships	.93	.84	.94	.92
2.	A Heart-to-Heart: Talking With Friends				
	About Relationship Trouble	.85	.79	.70	.80
3.	Pour Your Heart Out: Effective Communi-				
	cation Strategies for Healthy Relationships	.80	.81	.91	.78
4.	Lessons You Know by Heart: Safely				
	Navigating College Culture	.91	.90	.62	.91
5.	A Change of Heart: Techniques to Resolve				
	Relationship Conflict			.85	.83

Note. Pre = preintervention; post = postintervention.

Results

Table 2 presents the pre- and postintervention means and standard deviations for the groups during Years 1 and 2. In general, Year 1 results indicated that, at preintervention, participants had moderate levels of knowledge of a particular group topic, with mean ranges across groups from 3.60 to 4.90 (range of SDs = 0.87 to 1.00). Postintervention scores indicated increased knowledge across groups, with mean ranges from 5.39 to 5.95 (range of SDs = 0.08 to 0.67). The increased means and decreased range of standard deviations associated with these descriptive data suggest that participants' knowledge of particular topics was increased as a result of participation in the HEART program. Paired-samples t tests indicated that there was a significant mean difference in perceived knowledge, with a small effect size for all psychoeducational groups in Year 1 except for Group 4: Group 1, t(41) =8.86, p < .001, r = .27; Group 2, t(44) = 18.14, p < .001, r = .22; Group 3, t(33) = 9.37, p < .001, r = .28; and Group 4, t(2) = 2.00, p = .18, r = .58. For Year 2, at preintervention, the means ranged from 4.03 to 4.70 (range of SDs = 0.81 to 1.04) across the five groups. The means at postintervention

TABLE 2

Means and Standard Deviations by Psychoeducational Group

		Year 1				Year 2			
		Pre		Post		Pre		Post	
Group Topic		М	SD	М	SD	М	SD	М	SD
1.	Listen to Your Heart: Engaging in Healthy Relationships ^a	4.64	0.88	5.69	0.42	4.70	0.91	5.51	0.66
2.	A Heart-to-Heart: Talking With Friends About Relationship		0.00	0.00	V	0	0.0.	0.0.	0.00
3.	Trouble ^b Pour Your Heart Out: Effective Communication Strategies for Healthy	3.60	0.87	5.39	0.48	4.03	0.81	5.70	0.35
4.	Relationships ^c Lessons You Know by Heart: Safely Navigating College	3.88	1.00	5.39	0.67	4.05	0.91	5.33	0.59
5.	Culture ^d A Change of Heart: Techniques to Resolve Relationship Conflict ^e	4.90	0.95	5.95	0.08	4.55	1.01	5.45 5.25	0.78

Note. Significant changes occurred postintervention at the .001 level for Groups 1, 2, and 3 at Year 1 and for Groups 1, 2, 3, 4, and 5 at Year 2. Pre = preintervention; post = postintervention. ^aYear 1, n = 42 for pre- and postintervention; Year 2, n = 52 for pre- and postintervention. ^bYear 1, n = 45 for pre- and postintervention; Year 2, n = 28 for preintervention and n = 29 for postintervention. ^cYear 1, n = 34 for pre- and postintervention; Year 2, n = 87 for pre- and postintervention. ^dYear 1, n = 3 for pre- and postintervention; Year 2, n = 68 for preintervention and n = 67 for postintervention. ^eYear 2, n = 31 for pre- and postintervention.

ranged from 5.25 to 5.70 (range of SDs = 0.35 to 0.78), showing a repeated increase in knowledge related to the specific group topics. Results indicated significant mean differences in perceived knowledge for all of the groups: Group 1, t(51) = 8.19, p < .001, r = .75; Group 2, t(27) = 10.59, p < .001, r = .90; Group 3, t(86) = 14.63, p < .001, r = .85; Group 4, t(66) = 9.63, p < .001, r = .76; and Group 5, t(30) = 8.27, p < .001, r = .83. Therefore, there was a moderate effect size for Groups 1 and 4 and a large effect size for Groups 2, 3, and 5.

The three most frequently reported responses to Questions 1 ("What was most surprising to you about today's presentation?"), 2 ("What was most important in this workshop?"), and 3 ("Anything else you would like for us to know?") were session curriculum (n = 296), internal process/reflection (n = 131), and group process (n = 39), respectively. The session curriculum theme included any responses that related directly to the content of the sessions (e.g., "the possible red flags"; "identification of possible abuse"; "the cycle of violence was very true, and it was highlighted in the session"). The internal process/reflection theme described any reference to the internal experience or application of material in a personal way (e.g., "I didn't feel so alone"; "I related it to other relationships, not just with a spouse or boyfriend"; "how eye-opening it was for me personally"). The group process theme described the participants' responses related to their experience in the group (e.g., "how loud people are," "everyone had so many different views on particular topics," "group sharing"). The four most frequently requested additional workshop topics were relationship stressors (n = 19), abuse intervention (n = 18), communication skills (n = 13), and self-awareness (n = 13).

The session rating form included an option to add additional comments. Many participants used this space to reflect on how the information presented in the session informed their views of relationships. These responses were analyzed and coded for themes, of which the most salient were realization of abuse, discontinuation of harmful relationships, and preventing the cycle of abuse. Participants noted that the sessions helped them to realize that they had been or were currently involved in an abusive relationship. For example, at the bottom of her evaluation, one female participant wrote, "At first I was surprised at how many girls talked about being involved in abusive relationships—I now realize I am one of those girls and I need to find a way out."

Armed with knowledge about the consequences of relationship violence, participants indicated that they would no longer accept repetitive unhealthy behaviors within relationships. The college students wrote that they would be more likely to discontinue potentially harmful relationships before abusive behavior escalated. A male participant wrote the following on his session rating form:

Before [the session] I thought it was normal to fight all the time when you were dating someone, it wasn't really a big deal. I guess I didn't realize how harmful it could be. Now I don't think that is healthy and it would be better if we weren't together.

In addition, because of increased awareness of the consequences of relationship violence, students indicated that they may be more comfortable intervening to end the cycle of abuse within their peer groups. A female participant noted,

A lot of people my age [20s] don't realize they are in unhealthy relationships, because it is all around us. We have to stand up for ourselves and for our friends, so we expect to be treated better in relationships. It is up to us to stop this cycle.

Discussion

The HEART program was designed to educate college-age participants about unhealthy relationships and encourage abuse survivors to connect with supportive resources. The results of implementing this program over a 2-year period offer significant contributions to the literature on prevention and best practices when dealing with IPV in college student populations. Although one study explored the impact of date rape for a specific college population (Holcomb, Savage, Seehafer, & Waalkes, 2002), our study focused on the impact of a psychoeducational group format on the knowledge of relationship violence among college students overall.

Group participants engaged in meaningful reflection and dialogue and remained consistently active during each session. The specific content covered during the sessions was designed to be developmentally and culturally appropriate for college-age students. From a feminist perspective, activities during sessions encouraged participants to consider what they wanted in relationships and become empowered to change things over which they have control. Participants assessed past and current relationships, created achievable goals to enhance the quality of their relationships, practiced communication techniques, and created safety plans. Participants reported having gained important knowledge and skills, even if they attended only one session.

According to ratings and statements on session rating forms, group members experienced a number of benefits from participating in the program. As a result of the sessions, individuals reported greater knowledge regarding the characteristics of relationship violence, risk factors, consequences, and available resources. Participants noted on the session rating forms that they learned both important and surprising information during the sessions. In particular, participants appreciated information on the cycle of violence and how to identify negative behaviors within relationships. Many individuals mentioned that the content opened their eyes about the prevalence and consequences of abuse among college-age students. Individuals in harmful relationships realized that they were not alone and could rely on friends for support. The group format, in particular, was an appropriate modality for this age group. Individuals enjoyed engaging in reflection activities and sharing with group members who had differing opinions regarding healthy and unhealthy relationships. The sessions started a dialogue that participants hoped to continue through future groups. Specifically, participants requested that

future sessions focus on self-awareness, relationship stressors, intervening in abusive relationships, and communication skills.

The sessions enhanced participants' knowledge and awareness regarding healthy relationships, but, for several participants, the takeaway was much more personal. A number of college students realized that they had been engaged in an unhealthy relationship. This information was both alarming and empowering to participants, who often saw it as a call to action. Individuals indicated that they planned to end negative relationships before they became more harmful. In addition, some college students wrote on the session rating forms that they would do their part to decrease the cycle of abuse within their peer groups.

It is possible that the knowledge and self-awareness regarding relationship violence may encourage individual and systemic changes in the future. Participants reported leaving group sessions with healthier standards for dating partners and themselves. Participants may have developed the tools to identify relationship violence and intervene appropriately. This program may even help to prevent relationship violence before it begins.

Limitations

There were limitations for this particular study, including the type of data collected, instrumentation, statistical analysis issues, and selection bias. These limitations collectively limit the generalizability of the findings to other samples. During the 1st year, specific demographic information was not collected for all sessions; therefore, we were unable to report racial/ethnic group membership, academic year, and relationship status, which were demographics that were included in the 2nd year of the program. Another limitation involved the use of an objectives-based evaluation model, wherein participants endorsed the extent to which they agreed that particular objectives were met (Patton, 2008). Because the session rating forms were used to assess specific session objectives, and we assumed that the objectives were addressed adequately within a session, there may be instances in which other informal objectives were not assessed or the session activities did not align with objectives (Patton, 2008). Although descriptive statistics and t-test data are presented, addressing some of the limitations of this evaluation method may allow for more complex statistics to be used.

Selection bias is another possible limitation in this evaluation. The sessions required a 60- to 90-minute commitment from participants at specific times, limiting participation from some individuals who were not available at that time or for that length of time. Therefore, individuals with a more flexible schedule may have been more likely to participate. Limited participation from male students indicates possible selection bias. In the future, the sessions will need to be advertised and facilitated differently to attract diverse participants and to capture their attention throughout the sessions. Partnerships within the campus and surrounding community may increase the number of people exposed to advertising about the HEART groups. Other strategies for attracting diverse

participants, particularly men, include the following: involving potentially visible male students (e.g., athletes, student association officers, fraternity members) to speak in a campus campaign against dating violence, communicating through campus newsletters and social networks statistics and other facts about dating violence and its impact on men, and recruiting more male facilitators to model that men can educate themselves and speak out about dating violence.

Although the material for each group session was uniformly presented to the group facilitators during a training session, there was no guarantee that it was uniformly presented to participants during each group session. Additional training for facilitators on group facilitation, including a forum to exchange strategies and suggestions, could result in a more consistent, measurable, and impactful effect on session participation from the perspective of the attendees.

College Counseling Implications

There are often many demands placed on college counseling staff for the remediation and prevention of student mental health concerns. Counselors can utilize outreach programming and psychoeducational groups as a time-effective means of reaching a larger number of students than would be possible in a strictly individual counseling format. The early results of the HEART program further illuminate the potential success of providing college-age students the education and tools for reducing or minimizing the risk of relationship violence.

Results from this study indicate that many college students may have limited awareness of whether a relationship is healthy or unhealthy, a misunderstanding of what actually constitutes abuse, and a lack of insight into whether they or their peers are currently in an abusive relationship. The HEART program offers a format targeted at increasing awareness and knowledge of resources. Students are encouraged to develop personal safety plans and to consider ways to ensure that they are seeking healthy relationships. This preventive focus, aimed at both genders, may decrease instances of relationship violence on college campuses and increase awareness of where to seek help. Group sessions led by campus counselors could also result in developing familiarity and trust between facilitators and participants, which could potentially increase the likelihood that students will seek counseling services should violence occur.

In addition to general group sessions, counselors can target the HEART program for specific populations of students, such as athletes, 1st-year students, international students, and members of the Greek community. HEART groups can be offered in a variety of university settings, including residence halls, fraternity and sorority houses, and women's centers. In addition, although counselors have the knowledge and training necessary to lead and implement these groups, they do not have sole responsibility for preventing relationship violence on campus. Counseling center staff can collaborate with other campus offices, such as student affairs, residence life, student health, and the women's center, to address this pervasive issue. Counselors can consult with staff from

different campus offices to target awareness of relationship violence, advertise the HEART groups, and develop response plans should violence occur. Distributing information about counseling services, sexual assault hotlines, and crisis resources can help college staff to refer students who are experiencing relationship violence or who are seeking help for a friend.

The HEART program provides a framework for college counselors to address relationship violence. Beyond the HEART group sessions, counselors can enhance prevention efforts in other ways, such as coordinating a relationship violence screening on campus to increase awareness of unhealthy relationship behaviors and available resources. Flyers offering tips for risk reduction, health promotion, and resources for survivors of relationship violence could also be developed and distributed throughout campuses. The future success of the HEART program, or similar violence prevention programs, may depend on developing a culture of prevention that is supported by not only the counseling center but also the campus at large. Therefore, this program can establish an effective foundation to be enhanced by additional campus-wide efforts.

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