NONRELATIONSHIP SEX AND THE COLLEGE STUDENT POPULATION

by

MALLARY L WHITE

B.S., Missouri University of Science and Technology, 2008

A REPORT

submitted in partial fulfillment of the requirements for the degree

MASTER OF SCIENCE

School of Family Studies and Human Services
College of Human Ecology

KANSAS STATE UNIVERSITY
Manhattan, Kansas

2013

Approved by:

Major Professor
Karen Myers-Bowman
Abstract

Nonrelationship sex is quite common on college campuses despite the number of risks involved. This report provides a review of the nonrelationship sex research literature and focuses on definitions, prevalence, predictive factors and influences, potential negative outcomes, and gender differences surrounding nonrelationship sex. The Nonrelationship Sex Emphasis Checklist (NSEC) was created for college sex educators in response to this review. This report provides an evaluation of the Sexual Health Awareness Peer Educators program at Kansas State University using the NSEC and a general curriculum assessment. Based on this evaluation, recommendations are given for SHAPE. Recommendations for future programming and research also are given.
# Table of Contents

List of Figures ........................................................................................................................................ vi  
List of Tables ........................................................................................................................................ vii  
Acknowledgements .................................................................................................................................. viii  
Chapter 1 - Introduction ....................................................................................................................... 1  
Chapter 2 - Literature Review .............................................................................................................. 4  
  - Definition and Measurement Issues ................................................................................................. 4  
  - Overview of Nonrelationship Sex ..................................................................................................... 6  
    - Hook Up Defined .......................................................................................................................... 6  
    - Friends with Benefits Defined ................................................................................................... 7  
    - Prevalence of Hooking Up .......................................................................................................... 8  
    - Motivations ................................................................................................................................. 9  
  - Predictive Factors and Influences ................................................................................................. 9  
    - Values ......................................................................................................................................... 10  
      - Psychosocial Stages of Development ....................................................................................... 11  
    - Love Styles ............................................................................................................................... 13  
    - Peers ......................................................................................................................................... 14  
    - Family of Origin ......................................................................................................................... 16  
    - Alcohol Use ............................................................................................................................... 19  
    - Predictive Factors and Influences Summary .............................................................................. 20  
  - Potential Negative Outcomes ........................................................................................................ 20  
    - Unintended Pregnancy .............................................................................................................. 21  
    - Sexually Transmitted Infections ............................................................................................... 22  
    - Negative Relationship Outcomes ............................................................................................. 26  
    - Unwanted Sex and Rape ........................................................................................................... 28  
  - Gender Differences ....................................................................................................................... 30  
  - Literature Review Conclusion ....................................................................................................... 37  
Chapter 3 - Application ....................................................................................................................... 39  
  - Creating the NSEC ....................................................................................................................... 39
List of Figures

Figure B.1 BDI Logic Model........................................................................................................ 76
List of Tables

Table 3.1 Program Development Scores ................................................................. 45
Table 3.2 Program Contents Scores ................................................................... 47
Table 3.3 Program Implementation Scores .......................................................... 48
Table 3.4 Program Evaluation Scores .................................................................. 49
Acknowledgements

First, I would like to express my sincere gratitude to my major professor, Karen Myers-Bowman, for her continued support and guidance through the course of writing this report. I also would like to express my appreciation to Melinda S. Markham and Rudabeh Nazarinia-Roy for their time and efforts while serving on my master’s committee. Lastly, I would like to thank my family and friends for their steadfast love and encouragement through the duration of my studies. I could not have accomplished what I have without their continued support. From the bottom of my heart, I thank you all.
Chapter 1 - Introduction

In a literary piece featured in *The Atlantic*, writer Emily Esfahani Smith (2012) told a story about a friend’s experience with hooking up in college. Smith described her friend, “Nicole,” as a lively college freshman, much like other freshman girls Smith knew, who had graduated from an elite high school at the top of her class. However, by the spring of her first year at college, Nicole had changed, and not for the better. Smith noticed that Nicole looked down when she walked, talked less, and had given up exercise. Nicole was also placed on suicide watch by the university health clinic. How did this happen? Smith explained:

Not long after she arrived on campus in September, Nicole had started hooking up with a guy who belonged to one of the more popular fraternities on campus. . . . One night in the fall, she got drunk and ended up having sex with this guy in his dingy frat room, which was littered with empty cans of Keystone Light and pizza boxes. She woke up the next morning to find a used condom tangled up in the sheets. She couldn't remember exactly what had happened that night, but she put the pieces together. She smiled, looked at the frat brother, and lay back down. Eventually, she put her clothes on and walked back to her dorm. Mission accomplished: She was no longer a virgin.

This was a routine she repeated for months. Every weekend night, and on some weekday nights, she would drink so heavily that she could remember only patches of what happened the night before and then would have sex with the same fraternity brother. One night, she was talking with someone else at the frat when the brother interrupted her and led her upstairs to have sex. On another occasion, they had sex at the frat, but Nicole was too drunk to find her
clothes afterward, so she started walking around the house naked, to the amusement of all of the other brothers. She was too drunk to care. Eventually, everything went dark. Next weekend, she returned to the frat. (para. 3-4)

When Smith sat down to talk with Nicole in the spring, Nicole indicated she was no longer hooking up with the frat brother. Nicole explained that not once while they were having a sexual relationship did the frat brother acknowledge her outside of his fraternity. In fact, Nicole even tried greeting him once in the food court and he blatantly ignored her.

Smith later recounted Nicole’s story to a guy friend. “‘What a jerk, right?’ My friend, also a frat brother, objected: ‘After the first time, it starts becoming the girl's fault, too.’ Nicole and the frat brother were just hooking up, after all—what didn't I get?” (2012, para. 10).

Nicole’s situation leads one to ask many questions. How common is hooking up? Is it common for hook ups to play out like Nicole’s experience did? Does hooking up tend to affect women negatively like it did Nicole? Are men the only ones to benefit from hooking up? Are women the only ones to suffer consequences? These questions will be examined in this report.

Hooking up, a type of nonrelationship sex, has become quite common on college campuses. Depending on how this ambiguous term is defined, anywhere from 30% to 82% of college students have hooked up (Fielder & Carey, 2010; Fielder, Carey, & Carey, 2012; Flack et al., 2007; Garcia & Reiber, 2008; Grello, Welsh, & Harper, 2006; Lambert, Kahn, & Apple, 2003; Littleton, Tabernik, Canales, & Backstrom, 2009; Paul & Hayes, 2002; Paul, McManus, & Hayes, 2000; Reiber & Garcia, 2010). This is a concern because there are a host of potential negative consequences that can result from nonrelationship sex including pregnancy, contracting STIs, negative relationship outcomes, and unwanted sex and rape. Furthermore, women may be particularly vulnerable to the negative consequences of nonrelationship sex, with some suffering
from negative psychological and social outcomes in addition to the aforementioned outcomes. It seems that Nicole was one of these women.

The purpose of this report is to provide a review of nonrelationship sex (i.e. hooking up and friends with benefits) as it relates to college students. More specifically, this report explores definitions and prevalence, motivations and influential factors, potential negative outcomes, and gender differences as they relate to nonrelationship sex. Based on the literature review the Nonrelationship Sex Emphasis Checklist (NSEC) was created and is presented in this report for sex educators working with college students. Facilitators can use this checklist to review college sex education curricula and determine whether they adequately cover all of the important components of nonrelationship sex. The NSEC and a more general curriculum assessment are then applied to Kansas State University’s Sexual Health Awareness Peer Educators (SHAPE) program. Lastly, recommendations for future programming and research are given.
Chapter 2 - Literature Review

This chapter provides a review of the nonrelationship sex literature and, because the majority of research on nonrelationship sex looks at college students, they are the focus of this report. While researching nonrelationship sex I encountered many definition and measurement issues that made it difficult to report some of the research findings. Thus, I begin this chapter with an overview of these issues. Next, I provide a description of definitions, prevalence, and motivations for nonrelationship sex. Then, I describe predictive factors that influence nonrelationship sex and the potential negative outcomes. Lastly, I discuss the differences in how college men and women experience nonrelationship sex.

Definition and Measurement Issues

When examining nonrelationship sex issues, it is important to note that there are a number of definitional and measurement issues that have made it difficult to report comparative statistics and other findings regarding nonrelationship sex. For instance, I could not report something as seemingly simple as the prevalence rates for college students that engage in intercourse during a hook up because of definitional nuances and omissions, not only among various studies, but also at times within the same study. For example, Gute and Eshbaugh (2008) reported that 24% of female college students and 36% of male college students had engaged in intercourse with someone they had known less than 24 hours. However, when the students were asked if they had sex with someone once and only once, 53% of females answered affirmatively as did 60% of males. Gute and Eshbaugh’s first measure (i.e., had intercourse with someone known less than 24 hours) potentially left out a number of students who had intercourse during a
hook up but knew their partner for longer than 24 hours. At the same time, Gute and Eshbaugh’s second measure (i.e., had intercourse with someone once and only once) had the potential to include additional sexual relations other than hook ups (e.g., romantic couples who decided to end a relationship after having sex only once). Consequently, these researchers present a confusing representation of the prevalence of hook ups within their sample.

Not only are there issues with definitions in the hook up literature, but also with measurements. For instance, there are studies that do not differentiate what sexual behaviors occur in a hook up. When this happens, the researchers cannot identify what kinds of sexual risks their participants are taking because a hook up can include anything from heavy kissing to sexual intercourse if not otherwise specified (Garcia & Reiber, 2008; Paul & Hayes, 2002). Additionally, studies vary on what hook up experience or experiences their participants recall (e.g., most recent hook up, first hook up, hook ups within the last month, hook ups within the last year, all hook ups, etc.). One study had participants not only recall their own hook up experiences but also those of their friends (Paul & Hayes, 2002). What is more, the researchers in this study did not have participants differentiate between whose experiences they were recalling (i.e., their own or their friends).

I also could not compare statistics due to differences in samples. Just among college samples, there were studies that included only females while others included both sexes. Some studies included only students with hook up experience and others included students with all types of sexual experiences. There were also variations among studies in regard to class year, race, sexual orientation, and representativeness of the sample as a whole. As a result of the degree of variation among definitions, measures, and samples, the data described in this report
can be confusing and contradictory at times. Thus, I have tried to clarify these instances as I summarize the research literature.

**Overview of Nonrelationship Sex**

Many terms are used to refer to nonrelationship sex such as *one-night stand, hook up, booty call,* and *friends with benefits.* Differences between these terms are subtle, which may be why there is ambiguity among students about what each of these terms means (Epstein, Calzo, Smiler, & Ward, 2009). The following sections will specifically look at hook ups and friends with benefits relationships (FWBR) and provide definitions, descriptions, and the prevalence of these relationship types.

**Hook Up Defined**

Paul and colleagues (2000) defined a hook up as, “a sexual encounter, which may or may not include sexual intercourse, usually occurring on only one occasion between two people who are strangers or brief acquaintances” (p. 76). A hook up has three components (Garcia & Reiber, 2008). First, the hook up partners are not in a romantic relationship. Second, there is no establishment of what sexual behaviors will take place, though they can include anything from heavy kissing to sexual intercourse (Garcia & Reiber, 2008; Paul & Hayes, 2002). Third, there is no expectation of, or commitment to, further sexual relations or a romantic relationship.

Typical behaviors that precede hook ups include flirting, drinking alcohol, socializing, partying, and dancing (Paul & Hayes, 2002). Thus hook ups tend to take place where these activities occur (e.g., parties, dorms, fraternities, bars, clubs), with over half of hook ups occurring at fraternities or sororities (Paul & Hayes, 2002). Furthermore, hook ups tend to follow a normative sequence of behaviors known as a sexual script (Simon & Gagnon, 1987). In this
script, two strangers or brief acquaintances meet at one of the aforementioned places where they
drink alcohol. They get each other’s attention, flirt, maybe dance, and then they hook up. The
hook up usually ends when one of the partners leaves, and no future plans are made (Paul &
Hayes, 2002).

**Friends with Benefits Defined**

Another type of nonrelationship sex is known as friends with benefits. FWBRs are
defined as “relationships between friends who engage in sexual activity without defining the
relationship as romantic” (Hughes, Morrison, & Asada, 2005, p. 49). The biggest difference
between FWBRs and hook ups is that FWBRs are sexual liaisons between friends as opposed to
strangers or acquaintances (Garcia & Reiber, 2008; Grello et al., 2006; Manning, Giordano, &
Longmore, 2006). Researchers have found a few more differences as well. FWBRs are more
likely than hook ups to involve more than one sexual encounter (Manning et al., 2006), with the
average length of the sexual relationship being six months (Bisson & Levine, 2009). They also
are more likely than hook ups to include genital sexual behaviors like intimate touching, oral sex,
and intercourse (Bay-Cheng, Robinson, & Zucker, 2009; Bisson & Levine, 2009; Grello et al.,
2006). However, affectionate behaviors (e.g., kissing, hugging, hand holding, and cuddling) are
typically discouraged in FWBRs because it may lead one partner to develop romantic feelings
for the other (Weaver, MacKeigan, & MacDonald, 2011). To discourage this from happening,
some couples develop rules to keep the relationship from getting romantic (e.g., no hand holding,
no kissing, no staying the night, etc.) (Jonason, Li, & Cason, 2011).
Prevalence of Hooking Up

Even though nonrelationship sex is not necessarily a new phenomenon, researchers have only started to make it the topic of their research within the last decade or two (Weaver et al., 2011). This newfound research interest in nonrelationship sex may be a result of what Bogle (2007) observed to be a shift from the 20th century dating script to the hook up script, which includes many types of casual dating and sexual relationships. However, this is not to say that more college students are having sex in the context of a casual relationship than they are in the context of a dating relationship because there is research to refute that claim (Fielder et al., 2012). Instead, what researchers can attest is that hooking up has become quite common on college campuses (Gute & Eshbaugh, 2008; Lambert et al., 2003; Paul & Hayes, 2002; Paul et al., 2000).

When a hook up is broadly defined as any sexual experience with a nonromantic partner, it is reported that anywhere from 64% to 82% of college students have hooked up (Flack et al., 2007; Garcia & Reiber, 2008; Lambert et al., 2003; Littleton et al., 2009; Paul & Hayes, 2002; Paul et al., 2000; Reiber & Garcia, 2010). However, when a hook up is more narrowly defined as oral, anal, or vaginal intercourse with a nonromantic partner, then only 40% to 53% of college students have reported hooking up (Fielder et al., 2012; Grello et al., 2006). Lastly, when a hook up is most narrowly defined as having just vaginal intercourse or just oral sex with a nonromantic partner, then only 30% to 33% of college students have reported hooking up (Fielder & Carey, 2010; Paul et al., 2000).

Not only does the definition of a hook up used in a study create a lot of variation in the hook up prevalence data, but sampling factors like gender distribution and school year also lead to confusion (e.g., Fielder et al., 2012 used a sample of freshmen college students). Thus, it can
be difficult to gain a clear understanding of the prevalence. Given the prevalence of nonrelationship sex, one has to wonder what makes it so appealing to college students.

**Motivations**

College students report many motivations for engaging in nonrelationship sex. These include relationship avoidance, easy access to sex, relationship simplicity, appropriateness for one’s life situation, freedom and control, and a gain in confidence and experience (Bisson & Levine, 2009; Hughes et al., 2005; Weaver et al., 2011). FWBRs are particularly appealing because they are seen as offering the “best of both worlds” by allowing partners to combine the advantages of a romantic relationship (e.g., sex, trust, safety, companionship, stability, comfort, familiarity) with those of a casual relationship (e.g., fun, independence, freedom from commitment and exclusivity) all while avoiding the disadvantages of a romantic relationship (e.g., drama, complications, worry, hurt, volatility, power differential, monogamy) (Bay-Cheng et al., 2009; Bisson & Levine, 2009; Bradshaw, Kahn, & Saville, 2010; Hughes et al., 2005; Weaver et al., 2011). Motivations are not the only factor influencing college students’ participation in nonrelationship sex, though. Researchers have identified several factors that are predictive of who engages in nonrelationship sex. The following sections describe these factors and their influence on engaging in nonrelationship sex.

**Predictive Factors and Influences**

College students can have several motivations for engaging in nonrelationship sex, but several factors may predispose them to this risky behavior. The Theory of Reasoned Action (Fishbein & Ajzen, 1975, 1981) suggests that behavior is determined by two factors: personal attitudes (e.g., values, love styles) and subjective norms, which are perceived beliefs held by an
important reference group (e.g., peers, family). The theory also proposes that the amount of influence each of these factors holds is usually not the same. Thus, when an individual’s personal attitudes and subjective norms contradict each other, that person will choose her behavior based on which of those two factors holds more weight to her. The following sections discuss each of these factors as well as one of the most influential factors on nonrelationship sex - alcohol use.

**Values**

Values have been shown to be predictive of who does or does not engage in nonrelationship sex. When Richey, Knox, and Zusman (2009) looked at three sexual values (i.e., absolutism: abstinence until marriage; relativism: sexual decisions made in reference to the nature of the relationship; and hedonism: "if it feels good, do it") among college students, they found that those with hedonistic values were more likely to have engaged in nonrelationship sex than those with absolute or relative sexual values. Furthermore, hedonism was the second most prominent value (24.6%) reported. Relativism was the most reported value and absolutism was the least reported value.

Absolutism is a common value taught by churches, which could explain why those who attend church regularly are significantly less likely than those who do not attend regularly to have had a FWBR or hook up (Brimeyer & Smith, 2012; McGinty, Knox, & Zusman, 2007). Likewise, number of hook ups and frequency of intercourse in hook ups also are related to attendance at religious services and religious feelings (Penhollow, Young, & Bailey, 2007). Ideally, those who identify with a church would adopt the church’s value of abstinence until marriage, which contradicts the premise of nonrelationship sex, and thus be less likely to engage in these relationships. For these reasons, the value of absolutism can serve as a possible protective factor against engaging in nonrelationship sex.
The value of absolutism, however, may not be the most popular value among college students because, for many of them, marriage is not their first priority. When college students were asked to rate their top value in life, financial security and having a career they love ranked above having a happy marriage (Puentes, Knox, & Zusman, 2008). These values (i.e., financial security, fulfilling career) seem to reflect the “self-development imperative” (Hamilton & Armstrong, 2009), which describes a trend among privileged young adults, particularly females, where relationship formation is delayed so that time, energy, and attention can be devoted to individual achievements such as finishing college and developing a career as opposed to maintaining a romantic relationship. One female college student explained, “I’ve always looked at college as the only time in your life when you should be a hundred percent selfish . . . . I have the rest of my life to devote to a husband or kids or my job . . . . but right now, it’s my time” (Hamilton & Armstrong, 2009, p. 602). One of her peers corroborated, “I don’t want to think about that [marriage]. I want to get secure in a city and in a job . . . . I’m not in any hurry at all. As long as I’m married by 30, I’m good” (Hamilton & Armstrong, 2009, p. 602). Thus, for many college students nonrelationship sex is tempting because it is appropriate for their stage in life and allows them to uphold what they value.

Some college students expect the appeal of nonrelationship sex will decrease after they finish college and as they get older (Stepp, 2007; Weaver et al., 2011), presumably because what they value will change. This change in focus from self-development to the development of romantic relationships is described in Erikson’s theory of psychosocial stages of development.

**Psychosocial Stages of Development**

According to Erikson’s theory, the self-development imperative is part of the *identity vs. role confusion* stage of development. In this stage young people are pre-occupied with who they
are and what they will become. They are not focused on making commitments and moving on to
the next psychosocial stage of intimacy (Crain, 2011). Erikson proposed that in order to have a
successful committed relationship and attain true intimacy with another person, one must
establish a reasonable sense of identity (Crain, 2011). Thus, the self-development imperative
may be beneficial to forming successful future relationships because young people are taking the
time to focus on themselves and resolutely establish their identity so that they can attain true
intimacy with a partner later in their life.

Aside from supporting the self-development imperative by allowing people to fulfill their
sexual needs while still maintaining a focus on themselves, it is difficult to determine exactly
what role nonrelationship sex plays in the identity vs. role confusion stage of development. On
one level, it can be argued that nonrelationship sex helps a person develop his sexual identity by
allowing him to explore his sexual desires and discover his likes and dislikes through multiple
sex partners and liaisons. However, people can explore their sexual identity through romantic
relationships as well. Thus I would argue that nonrelationship sex is not necessary for the
development of one’s sexual identity. I would further argue that it is not necessary to the
development of one’s overall identity either. However, I do think it has the potential to influence
one’s identity based on that person’s experience, and thus reaction, with nonrelationship sex. For
example, some people feel that nonrelationship sex boosts their confidence (Weaver et al., 2011),
which in turn may make them more confident people. Yet, some people experience shame and
regret after a hook up (Paul & Hayes, 2002). So if these people feel shame because they
associate hooking up with being “slutty” then they may in turn think that is who they are.

I would further speculate that nonrelationship sex could potentially have a negative
impact on people’s relationships as they enter the intimacy stage of development. Firstly, people
trying to attain intimacy must learn to adapt to new rules for relationships, which are the same things they were avoiding in past relationships (e.g., monogamy, commitment, effort, emotional connection). Secondly, they have to deal with any unresolved emotional issues that may have accidentally seeped into their past sexual relationships. Thirdly, people may have to deal with feelings of jealousy over their partner’s past relationships and confusion over how they should feel about their own sexual pasts. However, these may only be issues for people whose natural love styles are not congruent with nonrelationship sex. The next section discusses the differences in love styles and explains why nonrelationship sex may be natural for some people.

**Love Styles**

Drawing from the Greeks, researcher John Alan Lee (1973) identified three primary love styles: ludus (game-playing love), eros (passionate love), and storge (friendship love). Ludics approach love like it is a game; they avoid commitment as well as emotion and prefer to have many partners (Hendrick & Hendrick, 1986). Erotics are characterized by strong physical preferences, passion, early attraction, and commitment to a lover (Hendrick & Hendrick, 1986). In contrast, storgics combine love and friendship and this love tends to be solid and enduring (Hendrick & Hendrick, 1986).

Compared to erotics and storgics, ludics are more likely to have coital hook ups, are more likely to report a desire to engage in a hook up in the future if given the opportunity, and sex tends to be their hook up motivation (Grello et al., 2006; Hughes et al., 2005; Paul et al., 2000). In contrast, erotics and storgics are prone to thinking that hook ups are not just about the sex, but rather they are the beginning of a romance (Grello et al., 2006). Likewise, storgics (friendship love) are motivated to have FWBRs by the hope that a romantic relationship will evolve out of it. They are more likely than erotics and ludics to be in FWBRs (Hughes et al., 2005).
This perspective suggests that a number of college students are participating in nonrelationship sex for motivations other than the sex itself. They may be trying to initiate a romantic relationship through having nonrelationship sex. This is startling because the purpose of nonrelationship sex is to have sex without the commitment and emotional strings of a relationship. Thus it would seem that there are times when each partner in a nonrelationship sex arrangement has a different vision for the relationship, and given that only about 10% of FWBRs actually turn into romantic relationships (Bisson & Levine, 2009), the partner with visions of romance is likely to be disappointed and possibly heartbroken.

This makes one wonder why those with erotic and storgic love styles choose to engage in nonrelationship sex at all when they could pursue a romantic relationship instead. Do they not know how to initiate a romantic relationship? Maybe they perceive that their peers, or at least those in their social group, are only interested in nonrelationship sex; thus, they think they must sacrifice their desire for romance if they want to have any kind of relationship at all and remain hopeful that their partner will eventually develop romantic feelings for them. These are only speculations, of course, but research does show that college students misperceive their peers’ sexual behavior and this may impact their own behavior.

Peers

Researchers have looked at perceived sexual norms and actual norms among college student populations. They did this by asking students to report their perceptions of their peers’ sexual behaviors, and comfort with those behaviors, as well as their own sexual behaviors and comfort with those behaviors. The data showed that when considering their peers, college students tended to overestimate the number of them with hook up experience, the prevalence and frequency of sexual behaviors (i.e., oral and vaginal sex), number of sex partners, rates of STIs
and pregnancy, and their comfort with engaging in certain sexual behaviors while hooking up (i.e., sexual touching, oral sex, and intercourse) (Lambert et al., 2003; Martens, Page, Mowry, Damann, & Cimini, 2006; Paul & Hayes, 2002; Reiber & Garcia, 2010; Scholly, Katz, Gascoigne, & Holck, 2005). Students also underestimate their peers’ condom use and rate themselves as being more sexually responsible than their peers (Scholly et al., 2005).

These results suggest that college students have many negative misperceptions about their peers’ risky sexual behaviors. This is concerning because perceptions of peers’ sexual behavior can influence one’s own behavior (Page, Hammermeister, & Scanlan, 2000; Manning, Longmore, & Giordano, 2005), especially when the perceptions involve same-sex peers (Hughes et al., 2005; Lewis, Lee, & Patrick, 2007). In fact, 8% of the college students admitted to hooking up because their peers do it, with men doing so more than women (Garcia & Reiber, 2008).

The idea that perceptions influence behavior is consistent with the Theory of Reasoned Action (Fishbein & Ajzen, 1975, 1981), which states that subjective norms (i.e., perceived beliefs held by an important reference group) are one of two factors (the other being personal attitudes) that determine behavior. In fact, for college students in the *identity vs. role confusion* stage of psychosocial development, subjective norms may hold more weight than personal attitudes because, according to Erikson’s (1959) theory, college students are still trying to figure out who they are and what they think. Thus they may place more emphasis on what their peers think than what they think themselves.

Furthermore, when the thoughts and behaviors of peers hold more emphasis than an individual’s, pluralistic ignorance can become an issue. Pluralistic ignorance (Allport, 1924, 1933) occurs when the majority of individuals within a group think that they are alone in holding
the attitudes that they do. As a result, they will behave in a way that contradicts their own attitudes in order to fit in with the group. As a result, the perceived norm becomes the actual norm, even if it is not the predominant attitude held by the majority of individuals in the group.

College students’ misperceptions about, not only their peers’ hook up behaviors, but also their comfort with engaging in those behaviors suggests that pluralistic ignorance may be at play. Once again, this likely means that there are college students who are engaging in nonrelationship sex, or at least going further sexually in these relationships than they are comfortable with, even though they would rather not. Reiber and Garcia (2010) found just this in their study. The college women they surveyed rated themselves as being uncomfortable with oral sex and intercourse during a hook up even though a third of these women had participated in these behaviors. Furthermore, men rated women as being more comfortable with engaging in oral sex and intercourse during a hook up than they actually were (Reiber & Garcia). This suggests that women are either not vocalizing their boundaries to men during a hook up or they are being sexually coerced. While the first assumption may be the result of normative influence, the second assumption is not and is further discussed later in this report.

Peers are not the only source of normative influence, however. Families also can influence one’s sexual and romantic choices, even if the person does not realize it.

**Family of Origin**

A college student’s parents, whether they intend to or not, influence hook up behavior through their past experiences with and attitudes toward romantic relationships. Social-cognitive theory suggests that modeling and vicarious learning shape behavior (Bandura, 1977). For most people, their parents’ relationship with each other is the first and probably most significant intimate relationship they have observed and, as a result, the most influential. From a social
learning perspective, young peoples’ attitudes toward intimate relationships derive from how they saw their parents relate to each other and whether their relationship was successful.

The influential role of parental relationships can be seen from the data on children of divorce. Experiencing parental divorce has been linked to involvement in early sexual activity and sexual promiscuity (D’Onofrio et al., 2006). Similarly, children of divorce are more likely to engage in nonrelationship sex and to do so more often than their peers with non-divorced parents (Glenn & Marquardt, 2001; Manning, Longmore, & Giordano, 2005); presumably because their peers with two married biological parents have had a stable, monogamous relationship modeled for them (Manning, Longmore, & Giordano, 2000). Parental divorce also can impact future relationships and marital quality (Amato & Booth, 2001). Perhaps this is because young adults who have experienced their parents’ divorce are skeptical of a lasting commitment to marriage (Amato & DeBoer, 2001; Glenn & Marquardt, 2001). However, despite their skepticism toward commitment to marriage, college women with divorced parents appear to be more eager than their peers from intact families to marry and to marry sooner (Glenn & Marquardt, 2001). Attachment theory offers some insight into this seemingly contradictory desire.

Attachment theory is built on Bowlby’s (1969, 1973, 1980) work and suggests that when caregivers provide nurturance and attend to a child’s basic needs in early childhood an attachment bond forms between the caregiver and child. As a result, the child develops a sense of trust and security in his relationships and the world in which he lives. While building on Bowlby’s work Ainsworth, Blehar, Waters, and Wall (1978) observed three categories of attachment styles in infants (i.e., secure, insecure-avoidant, and insecure-ambivalent). Caregivers of securely attached infants appeared to be consistent and responsive to their infants’ needs. Insecure-avoidant infants had unresponsive and overly rejecting caregivers. Finally, insecure-
ambivalent infants had caregivers that were inconsistent with their availability and responsiveness to needs.

Additionally, Hazan and Shaver (1987) applied attachment theory to adult relationships. What they found was that adults with a secure attachment style were comfortable seeking and maintaining intimacy and had trusting, warm relationships. Adults with an avoidant attachment style were uncomfortable with intimacy and found it difficult to allow themselves to rely on others. The adults with anxious-ambivalent attachment styles were insecure and plagued with constant worry about their partners not really loving them and eventually leaving them. Consequently, those with this attachment type appeared to be clingy in relationships and resultantly pushed their partners away. Perhaps this explains why the young women in Glenn and Marquardt’s (2001) study wanted to get married but did not think it would last. They could have been exhibiting anxious-ambivalent attachment. Their strong desire for relationships, mixed with the fear that their relationships will end, could result in a tendency to be clingy, which can actually lead to a premature end to their romantic relationships.

Furthermore, data suggest that parental divorce is linked to insecure attachment and fearful avoidance patterns (Kilmann, Carranza, & Vendemia, 2006). Young adults with insecure attachment are more likely to have hooked up (Gentzler & Kerns, 2004; Paul et al., 2000), where as their securely attached peers are less likely to have hooked up, more likely to participate in romantic relationships, and to have more long-term relationships (Paul et al., 2000; Tracy, Shaver, Albino, & Cooper, 2003).

Finally, parental discouragement of romantic relationships has been linked to engaging in nonrelationship sex (Fielder & Carey, 2010; Glenn & Marquardt, 2001; Stepp, 2007). Some parents discourage their college-age children from forming romantic relationships because these
relationships can distract college students from individual pursuits (e.g., attaining a college education, developing a career) and interfere with opportunities (Glenn & Marquardt, 2001), much like the self-development imperative suggests. However, college students often do not want to forgo sexual intimacy, in which case nonrelationship sex provides a practical alternative (Fielder & Carey, 2010). But nonrelationship sex is an alternative that can take some boldness to actually engage in, which is why alcohol use often is involved.

**Alcohol Use**

Alcohol use is consistently identified as a predictive factor of nonrelationship sex (Kaly, Heesacker, & Frost, 2002). Many studies have shown that there is a significant link between hook ups and alcohol and/or substance use (Bailey, Fleming, Henson, Catalano, & Haggerty, 2008; Bradshaw et al., 2010; Fielder & Carey, 2010; Fortunato, Young, Boyd, & Fons, 2010; Garcia & Reiber, 2008; Grello, Welsh, Harper, & Dickson, 2003; Owen & Fincham, 2011a; Paul & Hayes, 2002; Paul et al., 2000; Weaver et al., 2011). Alcohol consumption is so strongly linked to nonrelationship sex that it is part of the hook up script (Paul & Hayes, 2002). In fact, as many as 65%-80% of college students reported having had alcohol prior to or during their most recent hook up (Downing-Matibag & Geisinger, 2009; Grello et al., 2006).

Ven and Beck (2009) suggested that college students drink alcohol to dampen their inhibitions, thus making it easier for them to approach potential partners and engage in risky behaviors like hooking up. Drinking also can make students more susceptible to the social pressures to hook up (Fielder & Carey, 2010). Conveniently though, alcohol serves as a scapegoat after a hook up because college students can blame their poor decisions on their alcohol consumption (Ven & Beck). What is interesting is that even though students drink to gain the courage to hook up, they often find an alcohol-induced hook up to be a negative
experience and sometimes even regrettable (Lewis, Granato, Blayney, Lostutter, & Kilmer, 2012; Paul & Hayes, 2002; Ven & Beck). Perhaps this is because alcohol is linked to unintentional and unwanted hook ups (Flack et al., 2007; Garcia & Reiber, 2008; Paul & Hayes, 2002). I will further discuss the link between alcohol use and unwanted sex and rape as well as other negative outcomes of nonrelationship sex in the following sections.

**Predictive Factors and Influences Summary**

The previous sections have presented a number of factors that both influence and predict who engages in nonrelationship sex. First, college students’ values influence whether they choose to have nonrelationship sex. What is more, a lack of traditional values can make a person susceptible to peer influence, and if one perceives nonrelationship sex to be the norm among peers then that person is going to be more inclined to engage in the behavior as well. Parents’ romantic relationships as well as their attitudes toward love can influence how college students view romantic relationships and whether they choose to avoid them by engaging in nonrelationship sex. College students’ love styles also can influence their decision and their motivation to have nonrelationship sex. Lastly, because of its power to dampen inhibitions, alcohol use greatly influences one’s decision to have nonrelationship sex, but it can also be the source of regret after a hook up. Feelings of regret, however, are just one of many potential negative outcomes experienced by those who have nonrelationship sex. The next section highlights the more common negative outcomes experienced after nonrelationship sex.

**Potential Negative Outcomes**

Because the study of nonrelationship sex is relatively new, research on long-term consequences of participating in these types of relationships is not available and the research on
the short-term consequences is somewhat mixed. Even still, one must consider the potential risks involved with nonrelationship sex. Unplanned pregnancy and abortion, sexually transmitted infections (STIs), negative relationship outcomes, and unwanted sex and rape are possible consequences one is exposed to when engaging in non-relationship sex. Each of these potential outcomes is discussed in the following sections.

**Unintended Pregnancy**

The statistics are not clear on how many women become pregnant as a result of nonrelationship sex, but given the number of overlapping factors (i.e., age, alcohol use, and condom use) between nonrelationship sex and unintended pregnancy, unintended pregnancy should at least be considered as a possible negative outcome of nonrelationship sex.

In 2006, unintended pregnancy rates for women ages 15-44 were found to be highest among women ages 20-24 (Finer & Zolna, 2011). Furthermore, in 2008 women in their 20s made up more than half (58%) of all abortions and 33% of those were women ages 20-24 (Jones, Finer, & Singh, 2010). Yet, it is unknown how many of these unintended pregnancies were a result of nonrelationship sex. What is known, however, is that women of prime childbearing age are at particular risk for unintended pregnancy because they are most fertile. This age group also coincides with the most researched hook up demographic, which is the college student population. It is also known that the majority of college students engage in hook ups (Bisson & Levine, 2009; Grello et al., 2006; Lambert et al., 2003; Paul & Hayes, 2002) and up to half of them do not always use condoms (Paul & Hayes, 2002; VanderDrift, Lehmiller, & Kelly, 2010; Weaver et al., 2011), especially when alcohol is involved (Downing-Matibag & Geisinger, 2009).
Thus, risk factors for unintended pregnancy such as age, inconsistent condom use, and alcohol use all overlap with factors associated with nonrelationship sex. For this reason it can be presumed that women who engage in nonrelationship sex are at some risk for unintended pregnancy. This is not to say, however, that nonrelationship sex accounts for the majority of unintended pregnancies because it does not. In fact, Finer and Zolna (2011) reported that among all subgroups of women, cohabiting women had the highest pregnancy rate. Still, this should not detract from the need to promote pregnancy prevention among those who engage in nonrelationship sex. Unintended pregnancy is not the only physical concern of nonrelationship sex, however; college students also must consider the risk of contracting STIs.

**Sexually Transmitted Infections**

One of the foremost concerns with engaging in nonrelationship sex is contracting an STI (Bradshaw et al., 2010). Hook ups typically involve concurrent sex partners (Manning et al., 2006), whereas FWBRs are more likely than hook ups to be monogamous even though it is generally acceptable in FWBRs to have concurrent partners (Lehmiller, VanderDrift, & Kelly, 2011; McGinty et al., 2007; Weaver et al., 2011). In fact, 44% of college students reported having additional sex partners during their most recent FWBR, but fewer than half of them told their primary sex partner about their additional sex partner(s) (Weaver et al., 2011). This is alarming because those engaging in FWBRs are less likely to use condoms than those who participate in hook ups because there is little to no perceived risk of contracting an STI from a FWBR since the partners know each other (Lewis et al., 2012; Paul & Hayes, 2002; VanderDrift et al., 2010; Weaver et al., 2011). Yet, if someone in a FWBR has unprotected sex with an additional partner that the primary partner does not know about, then the primary partner may continue to have unprotected sex with the friend and think that the friend does not have an STI.
while not knowing whether or not the friend contracted an STI from the additional partner. What else is worrisome is that with hook ups, which involve partners that are strangers or brief acquaintances, only half of college students were concerned about getting an STI when having sexual intercourse and were even less concerned if the hook up involved other sexual activities (i.e., fellatio or cunnilingus) (Downing-Matibag & Geisinger, 2009).

According to the Health Belief Model (HBM), whether a person practices a health behavior (e.g., condom use) is dependent on two factors. The first factor is whether a person perceives a health threat, which is determined by general health values, beliefs about personal vulnerability to a health problem, and beliefs about the consequences of the health problem (Rosenstock, 1974). Based on their data, Downing-Matibag and Geisinger (2009) proposed three reasons why college students tend to perceive little risk of developing STIs. First, since the majority of the students’ hook ups involved an acquaintance or friend, the students trusted their hook up partners’ sexual health more than they would if their partners were strangers. However, as was already discussed, a person’s partner may be having sex with other people at the same time, which can make the partner more susceptible to contracting an STI and passing it on. Second, because the study took place in a Midwestern state, the students believed they did not live in a community where STIs and HIV/AIDS were prevalent. It may be important to note, however, that reported rates of gonorrhea and chlamydia were highest in the South and Midwest in 2010 according to the Centers for Disease Control and Prevention (2011), suggesting that the students are operating on false assumptions. Third, the students were not aware of the risk of contracting STIs, particularly with sexual activities other than intercourse such as oral sex.

The second factor determining the practice of a health behavior is the belief that practicing that behavior will effectively reduce the threat and that the benefits of undertaking that
behavior will outweigh the inherent costs (Rosenstock, 1974). For instance, even when college students perceive the risk of developing STIs and see the need to use protection during sex they still may not for fear that insisting on using protection or asking about sexual history could interfere with their chances of having sex, either by ruining the mood or lessening the pleasure of the experience (Downing-Matibag & Geisinger, 2009). Thus, the perceived costs of using protection (i.e., feeling uncomfortable, ruining the mood, lessening pleasure) outweigh the benefits (i.e., protecting oneself against STIs). College students may try to compensate for not using protection or finding out sexual history by using clues about their partners and their backgrounds (e.g., number of dating partners, drinking and party habits, reputation, etc.) to try to assess the sexual risks. They also operate under the assumption that their partners will tell them if they have an STI. I am not aware of any studies that look at the efficacy of these practices, but I can assume that a person’s sex partners are not always going to be forthcoming or truthful about their sexual histories; given the possible consequences of not using protection, it seems that college students are taking foolish risks by not being direct in their communication about sexual histories or demanding the use of protection.

Self-efficacy also plays a role in the implementation of health behaviors (Rosenstock, Strecher, & Becker, 1988) such as condom use and communication about sexual history. Self-efficacy is the belief one has about his or her ability to practice a particular behavior (Bandura, 1977a). So the more self-efficacy college students have in regard to using condoms and communicating about protection and sexual history, the more likely they are to perform these behaviors (Downing-Matibag & Geisinger, 2009; Gebhardt, Kuyper, & Greunsven, 2003). However, certain factors can interfere with one’s sense of self-efficacy, and resolutely condom use, with alcohol use being at the forefront (Downing-Matibag & Geisinger, 2009; Gebhardt et
al., 2003). This is a concern because alcohol use is a common predictor of hooking up, a behavior that is already risky (Bradshaw et al., 2010; Fielder & Carey, 2010; Garcia & Reiber, 2008; Grello et al., 2003; Owen & Fincham, 2011a). The disinhibiting effect of alcohol that makes young people more likely to hook up (Ven & Beck, 2009) is the same factor that impairs their ability to make good decisions about using protection, putting them at even more risk for contracting an STI.

Because nonrelationship sex is a newly studied phenomenon (Scholly et al., 2005), there is little to no information on the prevalence of STIs that result from these relationships and little information on condom use during nonrelationship sex. Lewis and colleagues (2012) did find that .9% of their sample reported contracting an STI from their most recent hook up and only 46.6% of their sample reported using condoms during their most recent anal, oral, or vaginal hook up. This is the only study I found, however, reporting any STIs contracted during a hook up. But, it can be assumed that because of the strong positive correlation between alcohol use and hooking up and the negative correlation between alcohol use and condom use, sexual health should be considered when working with young people. Something else disquieting about this group is that even though those ages 15-24 only represented 25% of the sexually experienced population in 2010, they had four times the reported rate of chlamydia and gonorrhea of the total population (i.e., ages 10-65+). Furthermore, 20-24 year olds had the highest reports of chlamydia, gonorrhea, and syphilis (CDCP, 2011). STIs and unintended pregnancy are the physical risks one must consider when engaging in nonrelationship sex. However, there also are emotional risks involved, particularly when these relationships do not turn out as planned.
Negative Relationship Outcomes

Negative relationship outcomes also should be considered when engaging in nonrelationship sex, especially FWBRs. Two of the biggest fears college students have in a FWBR are about damaging the existing friendship and developing unreciprocated feelings for a partner thus causing negative emotions like jealousy and hurt feelings (Bisson & Levine, 2009; Weaver et al., 2011). These are valid fears considering as few as 10% of FWBRs actually evolve into romantic relationships, with the rest either ending completely or reverting back to a traditional friendship (Bisson & Levine, 2009), and the FWBRs that do evolve into romantic relationships are more likely to be fraught with lower relationship satisfaction than relationships that begin through traditional dating (Owen & Fincham, 2012).

Because FWBRs involve friendships, they can be particularly tricky. A FWBR can bring about feelings of awkwardness and uncertainty about a friendship (Bisson & Levine, 2009; Weaver et al., 2011). Fifty percent of college students feared that adding sex to a friendship would result in the loss of that friendship, and half of those who had engaged in a FWBR reported that their friendship changed once they had sex (Weaver et al., 2011). Similarly, 26% of college students reported no longer being friends with their FWBR partner (Bisson & Levine, 2009). Men were more likely than women to believe that two people can remain friends after a sexual encounter, as were people who had been in a FWBR (Bisson & Levine, 2009). Perhaps this is because women seem to be more susceptible than men to developing romantic feelings toward their nonrelationship sex partners and wanting the sexual relationship to evolve into a romantic relationship (Bradshaw et al., 2010; Manning et al., 2006; McGinty et al., 2007).

The research is divided, however, on gender differences in motivations behind nonrelationship sex. Several studies have found that women are more likely than men to be
motivated to have nonrelationship sex because they want an emotional connection or see it as a stepping-stone towards a romantic relationship (Grello et al., 2006; Impett & Peplau, 2003; Lehmiller et al., 2011; Owen & Fincham, 2011a). In contrast, Garcia and Reiber (2008) reported no significant gender differences in relationship and emotional motivations for hooking up, with just over half of both male and female college students reporting these motivations. But, despite no significant differences in motivations, only 29% of men compared to 43% of women thought that having a hook up turn into a traditional romantic relationship would be ideal. Even though these results seem contradictory, they may not be because participants were able to choose multiple motivations for a hook up. Thus, less interest by men in a romantic relationship following a hook up may be reflective of their greatest hook up motivation (i.e., physical reasons) that was reported by 90% of them (Garcia & Reiber, 2008).

Furthermore, despite 37% of the college students thinking that it would be ideal for a hook up to evolve into a romantic relationship, only 6% of the college students expected it to happen (Garcia & Reiber, 2008). Instead, college students’ greatest expectation for a hook up was that it would lead to more hook ups (Garcia & Reiber, 2008). Jonason and colleagues (2009) suggested that hook ups do not necessarily lead to long-term relationships because one or both partners are only looking for sex and do not want a long-term relationship. It is possible, however, that despite the desire for a romantic relationship by both partners, the relationship does not develop because it began as a hook up and hook ups are not expected to become something more.

In addition to potentially ruining or changing a friendship and leaving one or both people involved unsatisfied with the outcome of the sexual relationship, nonrelationship sex also has the potential to lead to unwanted sex or rape.
Unwanted Sex and Rape

Unwanted sex and rape are yet two other potential negative outcomes of nonrelationship sex. Seventy-eight percent of college students reported that unwanted vaginal, anal, and oral sex experiences took place while hooking up (Flack et al., 2007). Of those students who experienced unwanted sexual intercourse during a hook up (i.e., 23% of females and 7% of males), 47% reported having unwanted memories as well as avoidance and numbing responses (Flack et al., 2007). Similarly, 22% of women who reported being sexually assaulted and 13% of women who reported being raped claimed that the assault and rape began as a hook up (Littleton et al., 2009). What is more, 45% of assault victims and 65% of rape victims admitted to binge drinking (i.e., four or more standard drinks) prior to their attacks, and 72% of rape victims reported being intoxicated prior to their rape (Littleton et al., 2009; Mohler-Kuo, Dowdall, Koss, and Wechsler, 2004). Additionally, in her review of field studies looking at the link between alcohol and women’s sexual assaults, Ullman (2003) found that between one-half and two-thirds of those who committed a sexual assault reported drinking prior to the assault. Because alcohol dampens inhibitions (Ven & Beck, 2009), it can make it difficult to recognize risky sexual situations (Norris, George, Stoner, Masters, Zawacki, & Davis, 2006), effectively resist unwanted sexual advances (Littleton et al., 2009), or get out of unwanted sexual situations (Paul & Hayes, 2002). This is a concern because many college students drink (Cooper, 2002); and when intoxication is paired with the hook up culture on college campuses (Gute & Eshbaugh, 2008; Lambert et al., 2003; Paul & Hayes, 2002; Paul et al., 2000) “poor judgment” and “miscommunication” happen and unwanted sexual situations occur (Stepp, 2007, p. 234). Thus, one has to wonder how many hook ups actually occur or go further than one or both partners would like due to impaired judgment because of alcohol.
Furthermore, data suggest that women are more likely than men to feel pressured to go further sexually than they want to during a hook up (Downing-Matibag & Geisinger, 2009; Garcia & Reiber, 2008; Lambert et al., 2003; Paul & Hayes, 2002). However, none of the women in Downing-Matibag and Geisinger’s (2009) study identified their experiences as rape or sexual assault and only a few of them recognized that it was their partner’s coercion that led them to go further sexually than they intended. Lambert and colleagues explained that, “In this context [of hooking up] it is possible for a woman to experience sexual assault but not interpret the behavior as such, believing it to be normative behavior with which her peers are comfortable” (p. 132). As a result, many unwanted sexual encounters go unreported (Downing-Matibag & Geisinger; Reiber & Garcia, 2010).

Sexual assaults that happen during hook ups can fall into a gray area termed gray rape (Stepp, 2007). In a gray rape, a female may blame herself for the incident thinking that if only she had not drunk so much, dressed a certain way, flirted with the guy, etc. then maybe the assault would not have happened (Stepp, 2007). Stepp (2007) recorded a discussion she had with a group of mostly female college students about the issue of gray rape. Surprisingly, most of the students felt that women were partially to blame in cases of gray rape and, though unfortunate, such incidences were expected when combining alcohol and risky sexual behavior. One of the female students explained:

I feel that it is a woman’s responsibility to look after herself and not get into a position where she in uncomfortable or loses control. You can’t operate on the assumption that if you want things to stop, the person you are with will respect that. In an ideal world, that would be the case. But we don’t live in an ideal world. There are a lot of assholes out there - people who aren’t going to care if you change your mind once the clothes have come off. If you make the
choice to leave the bar with the guy, then you are also creating the opportunity for something to go wrong - I think that is the point that needs to be driven home to everyone who participates in the hook up culture. Yes, you can practice safe sex. Yes, you can have sex without strings. But this isn’t a behavior that doesn’t carry risk. (p. 234)

This student brings up a very important point. College women do need to step up and take responsibility for their own well-being because it cannot be guaranteed that others have their best interest in mind. Nonrelationship sex is already a risky behavior and combining it with drinking makes one even more susceptible to the negative consequences of nonrelationship sex (e.g., unintended pregnancy, STIs, negative relationship outcomes, and unwanted sex and rape).

The previous sections have emphasized that when considering the negative outcomes of hooking up, women seem to fare worse than men in almost every way. Compared to men, women are more susceptible to contracting STIs (Landry & Turnbull, 1998), they have to worry about unplanned pregnancy, they are more likely to develop unrequited feelings for their sexual partner, and they are more likely to be coerced into hooking up or going further sexually than they wanted to. This is ironic considering that some women engage in nonrelationship sex to feel empowered (Stepp, 2007), when it actually may be oppressing them. The following section further explores the differences in college men’s and women’s experiences with nonrelationship sex and explores the question of whether nonrelationship sex really benefits women and gives them control over their sexuality or if it is just a way to appease men’s desires.

**Gender Differences**

Data looking at the differences in the prevalence of nonrelationship sex between males and females is somewhat mixed. Some studies report no significant gender differences regarding nonrelationship sex experience (Flack et al., 2007; Garcia & Reiber, 2008; Gute & Eshbaugh,
while others have reported that compared to females, males have had more recent hook up experiences, engaged in a greater number of hook ups, are more likely to have had oral sex and coital hook ups, and are more likely to initiate a hook up and have hook ups with friends, acquaintances, and strangers (Eisenberg, Ackard, Resnick, & Neumark-Sxtainer, 2009; Fortunato et al., 2010; Garcia & Reiber, 2008; Grello et al., 2006; Gute & Eshbaugh; Manning et al., 2006; Owen & Fincham, 2011a; Paul et al., 2000; Puentes et al., 2008). In contrast, women are more likely to engage in sexual behaviors with a traditional romantic partner (Garcia & Reiber, 2008) and prefer traditional dating to hooking up (Bradshaw et al., 2010).

Some of the discrepancy in the data on gender differences may be a result of the definition and context of a hook up. Gute and Eshbaugh (2008) found no significant gender differences in the prevalence of hook ups when a hook up was more broadly defined as a sexual encounter with a stranger or brief acquaintance that may or may not include intercourse. But when a hook up was more specifically defined as coitus or oral sex, males reported engaging in these behaviors more than females. Context also may explain the differences in hook ups. For instance, the majority of women prefer hooking up to traditional dating when they are drinking alcohol with an attractive person (Bradshaw et al., 2010).

The fact that women are engaging in the hook up culture can be explained from an ecological perspective, which proposes that cultural and historical changes are responsible for the shift in women’s mating strategies. The feminist movement of the 1960s and 1970s began a change in traditional gender roles. Women wanted more out of life than just getting married and rearing children. Instead, or additionally, they wanted to attain a higher education and have a career. Around the same time, birth control became more reliable and available, which gave
women the freedom to have sex without the fear of pregnancy. These changes have led to the current trend among privileged young college women to delay romantic relationships in order to focus on personal goals and development but not at the expense of sex (Hamilton & Armstrong, 2009; Stepp, 2007). In an article posted in *The Atlantic*, writer Hanna Rosin (2012) argued:

> Zoom out, and you see that for most women, the hookup culture is like an island they visit, mostly during their college years and even then only when they are bored or experimenting or don’t know any better. But it is not a place where they drown. The sexual culture may be more coarse these days, but young women are more than adequately equipped to handle it, because unlike the women in earlier ages, they have more-important things on their minds, such as good grades and internships and job interviews and a financial future of their own.

(para. 15)

Nonrelationship sex may be appealing to women because, compared to traditional dating where men are the initiators, hook ups are more egalitarian (Paul & Hayes, 2002). However, Bogle (2007) suggested that with women outnumbering men on college campuses, men hold more power in the hook up culture and they also seem to benefit more from it. Unlike traditional dating, hook ups shield men from rejection (Paul & Hayes, 2002) and, because men tend to have sexual goals when dating anyway (Mongeau, Jacobsen, & Donnerstein, 2007; Mongeau, Morr Serewicz, & Therrien, 2004), hook ups help men achieve their sexual goals more conveniently than with traditional dating. Thus, men seem to benefit from hook ups because they achieve their goal of sex, whereas women do not benefit as often because many of them are motivated to hook up by the hope of the start of a romantic relationship, which would more likely be achieved through traditional dating (Bradshaw et al., 2010; Garcia & Reiber, 2008; Impett & Peplau, 2003; Jonason et al., 2009; Lehmiller et al., 2011; Li & Kenrick, 2006; McGinty et al., 2007;
Mongeau et al., 2007; Owen & Fincham, 2011a). These motivational differences also may explain why men are more likely than women to have or to desire concurrent FWBR partners and have more hook up partners as well (Hill, 2002; Lehmiller et al., 2011; McGinty et al., 2007). Not only are there gender differences in the prevalence and motivations for nonrelationship sex, but men and women also report differing experiences with it.

When college students hook up they usually do so to derive physical and, sometimes, emotional pleasure from the experience (Garcia & Reiber, 2008). However many hook up experiences are found to be unpleasurable or coercive, particularly for women (Flack et al., 2007; Littleton et al., 2009; Paul, 2006), with their pleasure taking less priority than men’s (Armstrong, England, & Fogarty, 2012; Heldman & Wade, 2010). Of college women who had hooked up, 47% reported that their hook ups were a bad experience between 5% and 50% of the time, and 31% of the women reported that over half of their hook up experiences were bad (Littleton et al., 2009). Similarly, of college students who had hooked up in the past year, only 26% of women reported having a positive emotional reaction to hooking up compared to 50% of men who reported a positive reaction (Owen et al., 2010). Likewise, 49% of women reported having a negative emotional reaction to hooking up, compared to 26% of men who reported a negative experience (Owen et al., 2010). The other 25% of women and 26% of men reported having ambivalent emotional reactions to hooking up (Owen et al., 2010). Thus, twice as many women than men are having negative emotional reactions to hook ups, with nearly three-fourths of women having a negative or ambivalent reaction to their hook ups.

There are a number of factors that can contribute to a woman’s negative hook up experience including unsatisfying or unpleasant sex (e.g., not achieving orgasm, lack of genital stimulation), not feeling entitled to pleasure, health related issues (e.g., contracting an STI or
unwanted pregnancy), negative psychological consequences (e.g., shame and regret), sexual manipulation or coercion, and negative social consequences (e.g., damage to reputation) (Armstrong et al., 2012; Littleton et al., 2009).

Following a hook up, women often feel a host of negative reactions such as shame, regret, awkwardness, disappointment, and depression whereas men are likely to experience positive reactions such as pride and satisfaction (Eshbaugh & Gute, 2008; Glenn & Marquardt, 2001; Grello et al., 2006; Manning et al., 2006; Owen & Fincham, 2011b; Owen et al., 2010; Paul & Hayes, 2002). In fact, women are likely to feel distress after a penetrative hook up while men are likely to feel distress if they are inexperienced with hook ups, maybe because having more sexual partners boosts men’s self-esteem (Fielder & Carey, 2010).

Along with having more negative reactions to hook ups, women are also more vulnerable to sexual coercion than men and are more likely than men to experience unwanted sexual intercourse during a hook up (Downing-Matibag & Geisinger, 2009; Flack et al., 2007; Paul & Hayes, 2002). And while Kahn and colleagues (2000) found no apparent difference in the types of sexual acts men and women engage in during a hook up, aside from men engaging in intercourse more often (Kahn et al.; Owen & Fincham, 2011b), there is a significant difference between the sexes in regard to comfort level with engaging in sexual acts (Lambert et al., 2003; Mongeau et al., 2007; Petersen & Hyde, 2007; Reiber & Garcia, 2010). Men report higher levels of comfort with engaging in sexual touching above and below the waist, giving and receiving oral sex, and intercourse during a hook up (Reiber & Garcia, 2010). In contrast, women seem to engage in sexual behaviors during hook ups they neither desire nor find pleasurable. For instance, women reported finding cunnilingus to be most favorable and fellatio to be least favorable, however cunnilingus occurred less often than fellatio during their hook ups (Bay-
Men, on the other hand, are much more comfortable receiving oral sex (i.e., fellatio) than giving it (i.e., cunnilingus), which may suggest that women are either being coerced into sexual behaviors they do not want to engage in or are sacrificing their desires for men’s desires. This seems to contradict those who argue that hooking up is egalitarian or better yet, empowering to women (Hamilton & Armstrong, 2009; Paul & Hayes, 2002; Stepp, 2007, p. 105). One college woman wrote:

The bra-burning feminist in me hates to admit this, but more often than not, after a hook up I woke up realizing that I didn’t get what I wanted. Forget emotional satisfaction; the sex itself wasn’t good. After a night of taking my sexuality and running with it, I didn’t feel as sexually satisfied as I should have. . . . There exists a very fine line between being sexually liberated and being sexually used. (Stepp, 2007, p. 166)

One factor that may be interfering with women’s expected pleasure and empowerment during a hook up is the sexual double standard that exists in U.S. culture (Fielder & Carey, 2010). Essentially, men are praised and rewarded for their sexual promiscuity whereas women are shamed and belittled for the same behavior (Hamilton & Armstrong, 2009; Kreager & Staff, 2009; Weaver et al., 2011). One undergraduate woman explained, “Guys can have sex with all the girls and it makes them more of a man, but if a girl does then all of a sudden she’s a ho, and she’s not as quality of a person” (Hamilton & Armstrong, 2009, p. 598). Because society sees women as being emotionally driven, they are expected to reserve sex for committed relationships; however men are seen as being sexually driven so it is socially acceptable for them to have sex inside or outside of a relationship context (Crawford & Popp, 2003; Hamilton & Armstrong, 2009; Reid, Elliott, & Webber, 2011; Weaver et al., 2011). The biases present in the sexual double bind can be seen in a male college student’s comment about his hook up
experience with a coed. After receiving oral sex, an experience he enjoyed, he stated that he was glad he was not dating “a girl who is slutty like that” (Paul & Hayes, 2002, p. 653). So, even though they both engaged in the hook up, the male considered the female to be morally reprehensible, but not himself. Furthermore, his comment implied that even though he engaged in nonrelationship sex, he still deserved to date a woman who does not. With the sexual double standard, men’s disrespect and negative treatment of women is seen as justifiable (Hamilton & Armstrong, 2009). This biased depreciation of women who hook up could be one explanation as to why women are more likely to suffer negative outcomes post hook up, and men seem to be benefiting from the experience. Thus, one has to wonder if women are really liberating themselves through having nonrelationship sex or if they are confining themselves to men’s desires at the expense of their own. The data seem to suggest the later.

This is not to say that all men find nonrelationship sex to be beneficial or preferable. In fact, 52% of men reported having negative or ambivalent emotional reactions to their past year’s hook ups (Owen et al., 2010). Likewise, Epstein and colleagues (2009) reported that only 4 out of 13 men in their sample who had hooked up said they enjoyed their hook up experience. It is also important to note, however, that the factors that can contribute to a negative hook up experience for men may differ from those of women. For men, factors contributing to a negative hook up experience include having a friend instigate it, context (i.e., occurring at a club or bar), less desirable sexual activities (i.e., manual stimulation or petting), alcohol use, and ending during sexual climax (Littleton et al., 2009; Paul & Hayes, 2002). Thus, it seems as though women report negative experiences with hooking up because of the negative consequences of hooking up whereas for men, a bad hook up experience may be dependent on what happens during the experience.
Epstein and colleagues (2009) did find, though, that 5 out of 19 men in their sample were not even willing to engage in nonrelationship sex. However, the sample size for this study was small (n= 20), participants were hand selected to create a subsample, and many participants were chosen because of their lack of hook up experience prior to the study. As a result, the men used in this subsample may differ from the larger sample of men that was originally selected. Even still, these results suggest that there are some men who reject the hook up culture, and there is further evidence to suggest that many college men (i.e., 76%) actually find dating preferable to hooking up when there is the potential for a romantic relationship (Bradshaw et al., 2010). Thus, one has to wonder how many men and women are engaging in nonrelationship sex when they would rather be dating.

**Literature Review Conclusion**

There are a number of things college students find appealing about nonrelationship sex, from relationship avoidance to a boost in self-esteem. However, given all of the potential negative outcomes of nonrelationship sex, one has to question if the temporary pleasure received, if one even finds the experience pleasurable, is really worth the potential costs. Nonrelationship sex is a risky behavior, which is why the next chapter focuses on helping professionals working with college students create better sex education curricula to address the issue of nonrelationship sex.
Chapter 3 - Application

There are a number of sex education programs available for school age children and adolescents, but sex education for college students is limited. Sex education at the college level is often limited to human sexuality courses that are not always required courses or a seminar during orientation. However, colleges have the potential to bridge the sex education gap left by public schools (Franklin & Dotger, 2011), and provide a more enriching, comprehensive sex education that goes beyond pregnancy and disease prevention to address attitudes, values, and insights surrounding human sexuality as well as the development of interpersonal skills and healthy relationships (National Guidelines Task Force, 2004). With the high incidences of nonrelationship sex on college campuses, the provision of comprehensive sex education is especially important.

Creating the NSEC

Given the number of programs and the abundance of information available on sex and sex education, it can be difficult for sex educators at the college level to determine what information should be shared with their students, especially when many programs are designed with primary and secondary school students in mind. To help aid in this process, I created the Nonrelationship Sex Emphasis Checklist (NSEC) (see Appendix A). The NSEC is an evidence-based tool designed for sex educators working with college students. Facilitators can use this checklist to review curricula they already use with their students and determine what is missing that would address the important issues related to nonrelationship sex. It is important to note, however, that this checklist is based on research with a primarily heterosexual population due to
the lack of research on experiences of nonrelationship sex with gay and lesbian college students. Thus, facilitators should be aware that the curriculum suggestions might not meet the needs of gay and lesbian students.

To create the NSEC, I developed a behavior-determinant-intervention (BDI) logic model (see Appendix B) using the research literature on nonrelationship sex that is presented in this report. A BDI logic model includes “1) the health goal to be achieved, 2) the behaviors that need to be changed to achieve a health goal, 3) the determinants (i.e., the risk or protective factors) of each of those behaviors, and 4) the intervention components or activities designed to change each selected determinant” (Kirby, 2004). After creating the BDI logic model I was able to determine what goals, behaviors, determinants, and interventions needed to be addressed in a sex education program that covers nonrelationship sex.

The NSEC is divided into two sections: 1) Suggested Program Goals and 2) Curriculum Contents. Curriculum Contents is further divided into Information and Activities. Program Goals represent potential negative outcomes of nonrelationship sex and Curriculum Contents target risk factors for nonrelationship sex. The facilitator using the NSEC would evaluate the program she/he selected by first comparing program goals to the NSEC suggested goals. If suggested goals are not covered in the program then the facilitator can add them to her/his curriculum. Next the facilitator will go through each item in the Curriculum Contents and check whether or not it is addressed in the program. The items in the Curriculum Contents are broad, but there are more specific bulleted items for each broad item. The educator can use the Comments section to make notes of what more specifically is missing in the program for each item. The educator can also write “Y” (yes) or “N” (no) by each specific item when determining whether or not the contents
are in the selected program. When the educator is finished she/he can add the missing information to the program.

Educators can add new information to their programs through a PowerPoint presentation or by creating an activity that addresses the missing information. If educators are unsure about where to get the information that is missing from their programs I would suggest using the evidence-based information provided in the literature review of this report or referring to the sources and authors cited in this report for more information. For educators that do not have access to professional journals I would suggest that they visit the Guttmacher Institute website (see http://www.guttmacher.org/), which contains evidence-based sexual health information. I also would suggest that educators contact their local cooperative extension agent who may be able to provide them with information that is missing from their programs. Educators can find contact information for their local cooperative extension office through the National Institute of Food and Agriculture (see http://www.csrees.usda.gov/Extension/).

Lastly in Curriculum Contents is the Activities section. While it is important to specifically address the items in the Information section in a program, the Activities section is more flexible. The activities listed are merely suggestions, so facilitators can determine what activities they would like to use. However, when choosing an activity, it is important to keep in mind that it should serve the purpose of meeting a goal. The NSEC has facilitators identify the goal of each activity they use. These activity goals should then be compared with the program goals listed at the top of the NSEC to make sure there is an intervention addressing each program goal. It is also strongly suggested that each program has at least one reflective, personalizing activity such as small group discussions or personal reflection that allows the participants to
think deeply about their own values surrounding sex and important topics like gender and sex. The NSEC provides some reflective questions that can be used.

**Piloting the NSEC**

I chose to evaluate Kansas State University’s Sexual Health Awareness Peer Educators (SHAPE) program using the NSEC in order to pilot the tool. I also decided to use a general curriculum assessment (see Appendix C) to evaluate SHAPE because the NSEC does not address the general, overall quality of a program (i.e. development, content, implementation, and evaluation). The general curriculum assessment I used is comprised of a combination of items from the *Family Life Education Materials Quality Assessment Tool* (Myers-Walls, 2008-2010), *Guidelines for Comprehensive Sex Education* (National Guidelines Task Force, 2004), and *Tool to Assess the Characteristics of Effective Sex and STD/ HIV Education Programs* (Kirby, Rolleri, & Wilson, 2007).

To create the general curriculum assessment, I charted and compared items from the three aforementioned assessments. Many of the items on the assessments were similar, but some assessments would include items that the others did not. After comparing these assessments I made a master list of all of the relevant items from the assessments and only included items once that had a similar theme across assessments. Although I think any one of these assessments would be satisfactory to use independently, I thought it would be useful to include items from each of these assessments in my assessment of SHAPE because they offered differing perspectives (i.e. a family life education perspective and a sex education perspective).
About SHAPE

SHAPE is offered through the student health center at Kansas State University. Essentially, SHAPE spends a semester educating a group of undergraduate students about HIV/AIDS, STIs, alcohol and drugs, contraception, sexual orientation, and cultural sensitivity and training them to be American Red Cross HIV/AIDS instructors. After they are trained, the students educate their peers on how to make informed, healthy sexual decisions. SHAPE’s mission is:

- Assisting peers in need of information on emotional, physical and social issues regarding Sexually Transmitted Diseases (STDs), including HIV/AIDS, so as to reduce fears and diffuse prejudices.
- Disseminating factual information by providing programs and literature on STDs and HIV/AIDS while relating it to sexual health and alcohol/drug issues.
- Providing students with an understanding of health-related services offered by Kansas State University and surrounding communities.
- Motivating students by promoting positive attitudes about health and total wellness.
- Striving to meet diverse students’ needs by encouraging discussions surrounding issues of sexuality as they may pertain to diverse student interests, cultural backgrounds, and beliefs. (SHAPE, n.d.)

SHAPE provides services to both on-campus and off-campus groups by request and will tailor its program to the groups’ needs. Typical groups SHAPE addresses include fraternities, sororities, university athletic teams, and general education classes. Presentations are single events that include information on STIs, HIV/AIDS, prevention methods, condom use, and
discussion of risky behaviors. A presentation on healthy relationships also can be given by request.

**General Curriculum Assessment**

Before doing the NSEC evaluation, I wanted to do a more general evaluation of SHAPE’s curriculum. While the NSEC looks at specific curriculum contents, the general assessment looks at factors such as curriculum development, contents, implementation, and evaluations. The general assessment is important because it determines the overall quality of the program, from the program’s design to its evaluation. It also looks at whether or not a program is research-based and if it is effective. I would recommend that facilitators use a general curriculum assessment in conjunction with the NSEC because each of these looks at different, but important, parts of curricula.

I evaluated SHAPE’s program development, contents, implementation, and evaluations using a general curriculum assessment. I gave each item on the assessment a rating from 0 to 3 (i.e., 0= not addressed, 1=weak, 2=moderate, 3=strong) then tallied the total score for each section (i.e. development, contents, implementation, and evaluations). It is important to remember that SHAPE is unique to Kansas State University and is not distributed to the public for use. Therefore, unlike curricula that can be purchased, there is no facilitator’s guide, so my assessment of the curriculum is based on my access to the program’s PowerPoint presentations, activities, website, and an interview with the SHAPE director.

**Program Development**

Out of a possible score of 21 points for program development, I gave SHAPE a score of nine points. Table 3.1 displays each item’s score for program development.
Table 3.1 Program Development Scores

<table>
<thead>
<tr>
<th>Development</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>D1. Curriculum was developed by multiple authors with education and training in theory, research, and sex education.</td>
<td>2</td>
</tr>
<tr>
<td>D2. Curriculum lists professional references that were consulted when the material was created and most references are current (within 5 years).</td>
<td>1</td>
</tr>
<tr>
<td>D3. It is clear how the program is related to the research findings. Curriculum applies to the finding effectively.</td>
<td>1</td>
</tr>
<tr>
<td>D4. Curriculum is based on theoretical approaches that have been demonstrated to influence health related behavior.</td>
<td>1</td>
</tr>
<tr>
<td>D5. Curriculum is updated and altered when necessary to meet changes in trends, information, and research or when goals are not being met.</td>
<td>1</td>
</tr>
<tr>
<td>D6. Needs of target audience were assessed and are consistent with curriculum.</td>
<td>0</td>
</tr>
<tr>
<td>D7. Curriculum is based on specific health goals, the behaviors affecting those health goals, the risk and protective factors affecting those behaviors, and the activities addressing those risk and protective factors.</td>
<td>2</td>
</tr>
</tbody>
</table>

There are two program development characteristics on which SHAPE scores moderately well. One is providing program goals (see About SHAPE section) and activities that address some of its stated goals. These activities include a Jeopardy game that helps familiarize the audience with terms and information related to anatomy, HIV/AIDS, STIs, and contraception; a story called “Nick and Carrie” which emphasizes the importance and benefits of communicating with one’s sexual partner about sexual histories; and a risky behaviors activity that informs participants on the varied degrees of risk involved with different sexual activities. The second thing that is strong about SHAPE is that it is housed in the student health center and its peer educators are certified American Red Cross HIV/AIDS instructors.
However, SHAPE has some weaknesses in program development. One of these weaknesses is that SHAPE does not assess the needs of its target audience, so it is unknown whether or not the audience is getting information that is relevant to them. Also, the author of the curriculum is not specified so it is unclear whether or not the author(s) has training in research, theory, and sex education; although the current director does have a Masters in Public Health.

Another concern with the curriculum is that it has very few professional sources listed and most of the sources that are listed are websites. As a result, it is lacking in original sources. The use of original sources is important because it ensures that the information one uses is sound, whereas when secondary sources are used there is a chance that the secondary source misinterpreted or misreported the information. SHAPE also does not report where and when the information was taken from the cited websites so it is unclear if the information used is current or even valid. In addition to this, one of the sources providing information on contraception is a book that is over 20 years old. This is a problem because research is always changing and being updated. Thus, if old sources are being used, the information is likely to be outdated and possibly invalid. As a result, newer important information may be missing from the curriculum. SHAPE’s curriculum is supposedly updated when new information is available, but when and what information has been updated is not clear.

Lastly, it is not evident whether theoretical approaches proven to change health related behaviors are being used. Peer educators are used on the premise that they are effective sexual health educators. However Kim and Free (2008) conducted a systematic review of 13 peer-led sexual health education programs and found that there is little evidence to suggest that peer-led sex education improves sexual health outcomes in adolescents. Whether or not this research extends to college students is uncertain.
Program Contents

SHAPE’s program contents scored 14 points out of a possible 21 points. Table 3.2 displays each item’s score for program contents.

Table 3.2 Program Contents Scores

<table>
<thead>
<tr>
<th>Contents</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>C1. Values underlying program values are evident and consistent with those of the community and target group.</td>
<td>3</td>
</tr>
<tr>
<td>C2. Curriculum focuses on clear health goals.</td>
<td>2</td>
</tr>
<tr>
<td>C3. Curriculum focuses narrowly on specific behaviors leading to these health goals, gave clear messages about these behaviors, and addressed situations that might lead to them and how to avoid them.</td>
<td>2</td>
</tr>
<tr>
<td>C4. Curriculum includes a variety of activities/ interventions to change risk factors (one of which is an experiential activity such as a group discussion).</td>
<td>2</td>
</tr>
<tr>
<td>C5. Curriculum provides opportunities to learn and practice important skills.</td>
<td>1</td>
</tr>
<tr>
<td>C6. Curriculum provides clear, accurate, nonbiased, and complete information.</td>
<td>2</td>
</tr>
<tr>
<td>C7. Curriculum provides information for other services and resources that are available to students that can complement curriculum (e.g., health center, counseling).</td>
<td>2</td>
</tr>
</tbody>
</table>

Overall SHAPE scored rather well on program contents, but there are some things that can be done to enhance the program. For instance, program goals are somewhat vague and, as a result, hard to measure; it would be beneficial for SHAPE to formulate clear, measurable health goals. SHAPE also could benefit from going into more detail about certain risky behaviors. For example, the program addresses risky sexual behaviors (e.g., having sex while under the influence of alcohol, sex with multiple partners, sex without condoms, etc.) in an activity that has participants try to rank a variety of sexual activities from least to most risky, but it does not appear that very much time is spent discussing each behavior.
SHAPE does do a good job of providing a variety of interactive activities (e.g., Risky Behaviors activity, “Nick and Carrie,” and Jeopardy), however, no activities are designed to allow participants the chance to practice important skills (e.g., communicating about sex and one’s sexual history), though some of the activities (e.g., Jeopardy and Risky Behaviors) do allow participants the chance to demonstrate their knowledge about sexual health information. For example, a Jeopardy answer and question read: “The three things that need to be checked before using a condom. [Correct response] What are expiration date, latex, and air bubbles?”

It is important to note that SHAPE does have limited time with audiences. Presentations are typically single events that last 50 minutes to a couple hours maximum. Thus, facilitators are limited in how much they can present and what activities they can do. For instance, SHAPE has a healthy relationships presentation (e.g., defines a healthy relationship, includes tips for healthy relationships, shows signs of abusive relationships, etc.), but often does not get to give this presentation due to time constraints.

Program implementation

In regard to program implementation, SHAPE scored eight points out of a possible 12 points. Table 3.3 displays each item’s score for program implementation.

Table 3.3 Program Implementation Scores

<table>
<thead>
<tr>
<th>Implementation</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>I1. Curriculum is given over an adequate period of time to allow for attending, comprehending, yielding, and retaining of the information and message.</td>
<td>1</td>
</tr>
<tr>
<td>I2. Curriculum employs instructionally sound teaching methods that actively involve the participants and helps participants personalize the information.</td>
<td>2</td>
</tr>
<tr>
<td>I3. Curriculum provides a safe social environment for participation.</td>
<td>2</td>
</tr>
<tr>
<td>I4. Curriculum instructors or peer leaders believe in the program, are adequately trained, and are committed to the program.</td>
<td>3</td>
</tr>
</tbody>
</table>
One thing at which SHAPE seems to excel is having peer educators who are excited about the program and believe in it. The peer educators are certified in American Red Cross HIV/AIDS instruction, trained over a semester, and elect to be in SHAPE. Thus, their excitement about what they do is bound to influence their audience. Also important, SHAPE provides a safe social environment for participation in the program. There was one instance where a number of program participants wrote on program evaluations that they found a particular activity somewhat uncomfortable to do and SHAPE made sure to omit or change that activity to correct the issue.

Given its time allotment, SHAPE utilizes an adequate variety of teaching methods (e.g., PowerPoint, activities) and does a lot of activities so that the audience has the chance to get involved. However, I am not sure if the activities and instruction are designed in a way that allows the audience to personalize and internalize the information. This may be due in part to the limited time SHAPE has with its audience. SHAPE educators can only cover so much information and do so many activities in the confines of an hour or two.

**Program Evaluation**

SHAPE scored only one point out of a possible six points for program evaluation. Table 3.4 displays the items and scores for program evaluation.

**Table 3.4 Program Evaluation Scores**

<table>
<thead>
<tr>
<th>Evaluation</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>E1. Formative evaluation was conducted and shows program to be effective. When necessary, changes were made to weaknesses in the program to improve program effectiveness.</td>
<td>0</td>
</tr>
</tbody>
</table>
In my opinion, one of SHAPE’s greatest weaknesses is its limited emphasis on evaluation. The general curriculum assessment that I used considers two types of evaluations that are conducted at different points in a program’s evolution: formative and outcome evaluations. A formative evaluation is important to a program’s development and success. It is conducted when a program is piloted and it essentially shows whether the program is going to work, if it will effectively accomplish what it intends to, and what its strengths and weaknesses are (Thompson & McClintock, 2000). After one of these evaluations the curriculum’s creator can determine what changes need to be made to the program to make it more effective, thus increasing a program’s chances for success (Thompson & McClintock, 2000). These evaluations also can be conducted when there is a change in a program’s curriculum, audience, or setting (Thompson & McClintock, 2000). SHAPE did not utilize a formative assessment during program development that I am aware of, but it does conduct an outcome evaluation.

An outcome evaluation essentially measures whether a program meets its goals. Even though SHAPE has one of these evaluations, it does not appear to be a valid measure of its program goals. In the evaluation, program participants are asked to rate the effectiveness (i.e., “very,” “effective,” “somewhat,” “not”) of a) presenters, b) materials, c) confidence in personal ability to provide friends with sexual health information before SHAPE’s presentation, and d) confidence in personal ability to provide friends with sexual health information after SHAPE’s presentation. What is unhelpful about these questions is that they are vague. In order to get a true sense of whether or not participants learned anything, the evaluations should ask specific
questions (e.g., open ended, fill-in-the-blank, true/ false) about the information the participants were given during the presentation (e.g., T/F Condoms are only available for men; What is the riskiest sexual behavior?). What would make the evaluation method even more effective would be to have the participants complete a pre, post, and follow-up evaluation so that what participants learned, as well as what they remembered after time, can be measured against what they knew previously to SHAPE’s presentation. Additionally, if SHAPE would change their program goals to be more specific and measurable, then questions can be asked in the evaluations to measure whether each goal was met. A program evaluation is so important to the success of a program because it measures the program’s effectiveness. But as it is, SHAPE’s evaluation does not seem to measure program effectiveness at all.

**NSEC Evaluation**

In order to assess how well SHAPE addresses issues of nonrelationship sex I used the NSEC (See Appendix C). With the NSEC I evaluated SHAPE’s program goals, information, and activities as they relate to nonrelationship sex. SHAPE’s program goals are similar to NSEC’s suggested goals, but SHAPE’s goals are very vague and unmeasurable. Two suggested goals SHAPE does not appear to address are 1) reduce unwanted sex and rape and 2) reduce negative relationship outcomes (that result from nonrelationship sex). SHAPE’s director said that SHAPE does not really address rape because another group on campus addresses that.

**Program Information**

Overall, SHAPE addresses four out of nine of the information topics. Topics SHAPE addresses include the dangers of having sex under the influence of alcohol or drugs, the physical risks of hooking up, and safe sex practices. Conversely, although nonrelationship sex is a topic
that is touched on in various parts of SHAPE’s presentation, SHAPE does not seem to get very
detailed about when and where it takes place as well as who does it and why. Other topics not
addressed include perceived vs. actual norms of the prevalence of nonrelationship sex on college
campuses, gender as it relates to nonrelationship sex, unwanted sex and rape, and the mental and
emotional risks of hooking up. SHAPE does have a presentation on healthy relationships but it is
given only by request and it does not cover topics like how to initiate and maintain relationships
nor does it compare sex in committed relationships to sex outside of relationships.

Program Activities

As I mentioned previously, while it is important to specifically address the items in the
information section in a program, the activities section is flexible. SHAPE does not have any
activities similar to those suggested on the NSEC. Instead they have three activities that each
serves a different purpose: 1) create awareness about risky sexual behaviors, 2) highlight the
importance of talking about sexual histories with one’s partner, and 3) familiarize participants
with sexual terms and information. Although the activities provided offer variety and meet
program goals, I think SHAPE could benefit from offering an activity that allows participants to
think more deeply about sexual health issues and personalize the information they get.

SHAPE Summary

Using a general curriculum evaluation and the NSEC, I was able to assess SHAPE’s
overall program quality and its curriculum’s emphasis on nonrelationship sex. Concerning
program quality, I found a number of strengths. First, SHAPE has program goals and uses a
variety of activities to address these goals. Second, the peer educators that SHAPE uses are
trained for an entire semester and they become certified in American Red Cross HIV/AIDS
instruction. The peer educators also appear to be excited about and believe in what they do.

Third, SHAPE is supported by a number of professionals because it is based in the student health center and its director has a Masters in Public Health. Also, because of its connection to the student health center and the university in general, SHAPE is able to connect participants to a large number of resources. Fourth, SHAPE respects the values of participants and offers a safe social environment for its program.

Despite these strengths, SHAPE also has a number of weaknesses. First, there are a number of issues with SHAPE’s information and resources. For instance, it is unclear who authored SHAPE’s curriculum and when, or if, it has been updated. Also, there are few sources cited and the sources that are cited are older than five years and most are not original sources. Second, SHAPE is a rather short program, which leads one to question whether there is an adequate amount of time to promote behavior change and retention. Furthermore, a needs assessment was never conducted so SHAPE’s curriculum may not even be giving its participants information they find helpful or relevant. SHAPE’s third weakness is its lack of proper program evaluation. No formative evaluation was ever conducted so the efficacy and validity of the program is somewhat questionable. Outcome evaluations are given but they are poorly constructed and do not appear to be reliable or valid measures of the program’s outcomes.

In respect to its curriculum content, SHAPE emphasized some important information related to nonrelationship sex. SHAPE seemed to have a strong emphasis on risky sexual behaviors (e.g., using alcohol before or during sex), safe sex practices, and risks of hooking up. When time allows, they also address healthy relationships. SHAPE, however, did not address specifics about nonrelationship sex (e.g., what it is, where it happens, why it happens) or the prevalence of it among the participants’ peers. Risks of nonrelationship sex such as unwanted
sex and rape, sexual coercion, and negative mental and emotional effects also are not discussed. Additionally, the issue of gender as it relates to nonrelationship sex is absent from the curriculum. Although SHAPE does include many activities in its program, there are no activities that allow participants to explore their personal values and beliefs surrounding sex. Given these weaknesses, I have made some recommendations for SHAPE, which are included in the following section. Also included are my recommendations for family life educators, sex educators, and researchers.

**Recommendations**

This section includes my recommendations for SHAPE, family life educators, and other professionals working with college students in the area of sex education. I also propose next steps for research in the area of nonrelationship sex. These suggestions are based on my literature review of nonrelationship sex with the college student population.

*Recommendations for SHAPE*

Based on my evaluation of SHAPE, I have a few recommendations. First, SHAPE should update its information with newer and original sources. This will help ensure that the program is giving its audience up-to-date and valid information. Also, if SHAPE wants to further emphasize nonrelationship sex in its curriculum, then it should include information on specifics of nonrelationship sex such as prevalence rates (to correct misperceptions about peer norms), gender issues surrounding nonrelationship sex, and negative outcomes of nonrelationship sex that are not already covered in SHAPE’s curriculum. Furthermore, I would recommend that SHAPE include an activity that allows participants a chance to personalize the information in the
curriculum. This can include small group discussions surrounding relevant topics (see Appendix B) or another reflective activity.

After these updates and revisions, SHAPE could benefit from performing a formative evaluation to see if the program works and is effective. SHAPE also should revise its outcome evaluation. One thing that would help with this would be to rewrite the goals so that they are measurable. These goals should help form the questions in the evaluation. Furthermore, the use of pre-evaluations and follow-up evaluations could be useful at determining changes in participant knowledge and behavior, and as a result give SHAPE a better idea of its program’s effectiveness. After all, if a program is not going to do what it intends to do then what is the point of it? The next section includes further recommendations for professionals working with college students on the issue of nonrelationship sex.

**Recommendations for Professionals**

There are a number of things that professionals need to consider when working with college students on the topic of nonrelationship sex. First of all, given its prevalence, college sex education programs need to address the issue of nonrelationship sex. However, I would caution professionals not to leave college students with the impression that only nonrelationship sex carries risks and that relational (e.g., dating, marriage) sex is completely safe, because it is not. All sex carries some degree of risk and students need to be reminded of this, but they also need to be educated on why nonrelationship sex can be particularly risky. If a facilitator needs ideas on how to incorporate information surrounding nonrelationship sex into a sex education program then I suggest referring to the NSEC (see Appendix A). This section will elaborate on some of the topics in the NSEC and add some additional recommendations as well.
Alcohol use is consistently significant in the nonrelationship sex literature. Not only does alcohol use often play a role in the initiation of nonrelationship sex, it also is linked to negative hook up experiences (Bailey et al., 2008; Bradshaw et al., 2010; Fielder & Carey, 2010; Fortunato et al., 2010; Garcia & Reiber, 2008; Grello et al., 2003; Owen & Fincham, 2011a; Paul & Hayes, 2002; Paul et al., 2000; Weaver et al., 2011). Because of this, professionals should emphasize the role and risks of alcohol use in their programs as it relates to nonrelationship sex. Perhaps if college students were made aware of just how risky mixing alcohol use with nonrelationship sex is and how little there is to gain from it, then maybe some of them will reconsider what sexual choices they are willing to make under the influence of alcohol. At the same time, alcohol use lowers inhibitions (Ven & Beck, 2009), which makes it difficult to make good decisions. For this reason, I think college students should be encouraged to look out for their friends who are drinking and discourage them from engaging in nonrelationship sex while intoxicated. This may be especially important for females because alcohol use is also linked to unwanted sex and rape (Flack et al., 2007; Garcia & Reiber, 2008; Paul & Hayes, 2002). Of course this will not completely eradicate the problem because friends often go drinking together, which may leave no one in a group of friends in the position to make good judgments. Thus, initiatives to help reduce college students’ alcohol use would likely be the most effective means of decreasing the occurrence of nonrelationship sex while under the influence of alcohol.

Gray rape is very relevant to nonrelationship sex and so professionals should talk about this with the college students they work with. Often unwanted sex goes unreported (Downing-Matibag & Geisinger, 2009; Reiber & Garcia, 2010), so college students need to be made aware of what sexual assault looks like, particularly when it comes to gray rape, and be empowered to
report it. These students also should be made aware of places they can go for help following a sexual assault or rape.

My next recommendation is that professionals should incorporate activities and questions into their sex education curricula that allow students to personalize the information. College students need to be encouraged to be mindful about sex. I think it would be very beneficial for college students to think about their personal attitudes and values about sex and explore where these ideas came from and whether they agree with them. College students also need to think about what type of relationship they really want and whether nonrelationship sex is the way to get it because nonrelationship sex is not the most effective way to begin a romantic relationship (Bisson & Levine, 2009). Furthermore, they need to think about if and how their casual sexual relationships now will affect their future romantic relationships (e.g., jealousy, sexual dissatisfaction, trust issues, STIs, etc.). For these reasons, college students may benefit from relationship education in addition to sex education.

Another topic that college students should explore is the role of gender in nonrelationship sex. The nonrelationship sex literature suggests there is a double standard when it comes to nonrelationship sex; women are not benefiting at the same rate as men from these casual sexual relationships. Exploring this topic may be especially beneficial for college females because some of them think that nonrelationship sex is empowering and liberating to women (Stepp, 2007), even though the data often suggest otherwise.

Additionally, college students often perceive that their peers are hooking up more than they actually are and that these perceptions can thus influence behavior (Page et al., 2000; Manning et al., 2005). Because of this, it may be beneficial on many college campuses to make students aware of how many of their peers are actually hooking up in the strictest sense of the
term (i.e., oral, anal, or vaginal intercourse). I think many college students would be relieved to find that having oral, anal, or vaginal intercourse during a hook up is not as common as they might think.

Although the focus of this report has been on college students, I would recommend that professionals do not wait until college to start talking to youth about nonrelationship sex. I think these conversations, as with other conversations about sex, should begin early and should be talked about often through middle school and high school because, for some, hooking up begins before college (Fielder & Carey, 2010). At the middle school and high school levels, parents should be encouraged to talk with their kids about nonrelationship sex. The media can be a great tool for this.

Parents and professionals can use nonrelationship sex that appears in television shows, movies, and music as teachable moments and prompts for discussions that get their kids to think more deeply about nonrelationship sex (e.g., What do you think about what happened? How realistic do you think the situation or outcome was? How could things have gone differently?). Referring to sexual choices made by characters in a television show or movie may make it easier and less awkward for a parent and child to talk about sex. Parents can get their child’s thoughts on sex without being too intrusive or coming off as aggressive. Additionally, having an event or situation from a show to talk about makes the topic of sex more concrete, which can help guide a conversation about sex. By having these conversations, adults can open up the lines of communication about sex and correct any misperceptions or faulty information the adolescent may have.

This section has covered my recommendations for professionals working with college students, as well as professionals and parents of younger students. The next section includes the
last of my suggestions and these are for those conducting research in the area of nonrelationship
sex.

**Recommendations for Research**

There are several limitations in the hook up research. Foremost, definitions of
nonrelationship sex vary from one study to another. Not only are a variety of terms used to refer
to nonrelationship sex (e.g., hook up, casual sex, FWBR, booty call, etc.), the same term, such as
a “hook up,” seems to mean different things across studies. In some studies a hook up is defined
as having intercourse with a casual partner while in other studies it is defined as engaging in any
sexual activity from kissing to intercourse with a casual partner. What is more, some studies
differentiate hooking up from other types of sexual relationships by the motivation for the
relationship (e.g., sex), while other studies do not look at that at all. Then there are studies that
do not even provide an operational definition for a hook up so in those studies a hook up is
whatever the study participants think it is. Thus, it is difficult to get a cohesive representation of
nonrelationship sex through the research because of the definitional inconsistencies.

To address this problem, researchers should use the same definition of a hook up in their
studies. Furthermore, I would recommend the use of Lewis and colleagues’ (2012) definition of a
hook up. They defined a hook up as an “event where you were physically intimate (any of the
following: kissing, touching, oral sex, vaginal sex, anal sex) with someone whom you were not
dating or in a romantic relationship with at the time and in which you understood there was no
mutual expectation of a romantic commitment” (p. 1222). This definition is useful because it
states specific behaviors, thus making it more measurable and less ambiguous. Lewis and
colleagues’ definition also is written in a way that includes both hook ups and FWBRs. I think
that combining these terms for a general study of nonrelationship sex is a good idea because it
gets rid of another nuance that is often present when comparing information. Though, a distinction should be made between the two terms when wanting to look specifically at one of these events.

Furthermore, due to the convenience of using college students, most of the studies on hooking up and FWBRs utilize college student, convenience samples. So, not only are there possible selection biases in the samples, but the majority of the general public is not represented in the nonrelationship sex research. There are very few studies done with adolescents and only one that I am aware of was conducted with post high school students that include young adults that did not go to college in addition to those who did. Thus, what is known about nonrelationship sex is based on a very small population of people. Furthermore, the majority of college samples include White, heterosexual, upper and middle class individuals in their late teens and early 20s. Women largely outnumber men in these samples as well. Researchers need to broaden their samples by looking at different age groups, sexual orientations, races, social classes, and educational backgrounds; men need to be represented more in the samples as well. Researchers need to broaden their samples so that professionals working with these different populations have a better understanding of who is engaging in nonrelationship sex and how it is impacting different populations. If professionals know this, then they can implement prevention and intervention efforts when needed.

Additionally, I have not come across any nonrelationship sex studies in which both sex partners were included, which leads to a one-sided account of these students’ experiences. Studies that look at the nonrelationship sex experience from both partners’ perspectives could give researchers a more accurate account of what actually happens for each person and what factors contribute to outcomes.
Lastly, the nonrelationship sex literature also could benefit from more qualitative and longitudinal studies. To date there are very few qualitative studies and these are valuable because they add an experiential component and give a broader account of what goes on within these relationships. Longitudinal studies are needed to determine what the long-term physical, mental, emotional, and relational ramifications are of nonrelationship sex.
Chapter 4 - Conclusion

At the beginning of this report I told a story about a college freshmen’s, Nicole, experience with hooking up. What is interesting about Nicole’s story is that it elicited more than one reaction. Smith, the article’s author and Nicole’s female friend, was disgusted by the frat brother’s behavior and felt sympathy for Nicole. In contrast, Smith’s male friend did not feel sympathy for Nicole and defended the frat brother by stating that Nicole was just as much to blame for her behavior and resulting outcomes as he was. However, these reactions are not necessarily gender specific. One just has to read the numerous comments left by readers of Smith’s article to see that members of each sex hold differing views on nonrelationship sex.

As was discussed in this report, there are some aspects of nonrelationship sex that are appealing to a number of college students. In fact, some college students really enjoy their nonrelationship sex experiences and have no regrets afterward. Given this, one might ask why professionals should care about college students engaging in nonrelationship sex. The fact is, however, that there are a number of serious consequences to which college students are vulnerable when they have nonrelationship sex. Furthermore, because this is a relatively new area of research, it is unknown what the long-term consequences of nonrelationship sex are, such as how it affects future relationships. Additionally, there is evidence to suggest that there are college students needlessly engaging in the risky behavior of nonrelationship sex when they would rather have a traditional dating relationship; this is especially true for women (Bradshaw et al., 2010).

When it comes to the hook up culture on college campuses, women seem to fare worse than men. Yet, in some cases, women are hooking up just as much as men (Gute & Eshbaugh,
What is unfortunate is that there are women who believe that having nonrelationship sex liberates them and that using men for sex somehow makes them equal with men (Paul & Hayes, 2002; Rosin, 2012; Stepp, 2007). However, the nonrelationship literature does not seem to support these notions. Women are more vulnerable than men to the negative outcomes of nonrelationship sex, including unwanted sex and rape, and less likely than men to receive pleasure from the experience (Flack et al., 2007; Littleton et al., 2009; Paul, 2006). So, despite what many college students might think, it is not “just hooking up”.

My hope is that professionals working with college students will see the need to address the issue of nonrelationship sex with their students. It is a risky behavior in which the scope of the risks is not yet known and, in the end, it cheapens sex and it devalues all of those involved. And for those who disagree, I ask them to think about their own children or future children. What if they experienced what Nicole experienced? I would speculate that most parents would be horrified at the thought of their child being used for sex because that would mean that their child is not being valued for who he or she is, but rather what he or she can offer sexually.
References


### Appendix A - Nonrelationship Sex Emphasis Checklist

<table>
<thead>
<tr>
<th>Program Goals</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reduce STIs and unintended pregnancy</td>
<td></td>
</tr>
<tr>
<td>Reduce unwanted sex and rape</td>
<td></td>
</tr>
<tr>
<td>Reduce feelings of depression, shame, guilt, and low self-worth</td>
<td></td>
</tr>
<tr>
<td>Reduce negative relationship outcomes</td>
<td></td>
</tr>
<tr>
<td>Make sexuality positive and fulfilling</td>
<td></td>
</tr>
<tr>
<td>Additional Goal:</td>
<td></td>
</tr>
<tr>
<td>Additional Goal:</td>
<td></td>
</tr>
<tr>
<td>Additional Goal:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Curriculum Contents</th>
<th>Yes</th>
<th>No</th>
<th>Comments/Improvements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provides information about (risk factors, potential outcomes):</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nonrelationship sex</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- What is it? (Terminology and definitions)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- When and where does it take place?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Who does it and why? (e.g., avoid relationships, easy access to sex, relationship simplicity,</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
emotional connection, appropriateness for life situation, confidence booster, gain experience, maintain freedom and control

<table>
<thead>
<tr>
<th>Risks of alcohol use</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Impaired judgment</td>
</tr>
<tr>
<td>- Less likely to use condoms during sex</td>
</tr>
<tr>
<td>- Risk of unwanted sex and rape</td>
</tr>
<tr>
<td>- More likely to hook up</td>
</tr>
<tr>
<td>- More likely to have a bad hook up experience</td>
</tr>
<tr>
<td>- Tips on safe drinking</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Perceived vs. actual peer norms</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Prevalence of nonrelationship sex on college campuses</td>
</tr>
<tr>
<td>- Not always enjoyable</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Relationship Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>- What does a healthy relationship look like?</td>
</tr>
<tr>
<td>- How to initiate relationships</td>
</tr>
<tr>
<td>- How to maintain relationships (skills)</td>
</tr>
<tr>
<td>- How to end an unhealthy relationship</td>
</tr>
<tr>
<td>- Sex in committed relationships vs. hook up sex</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gender differences in nonrelationship sex experiences</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Benefits</td>
</tr>
<tr>
<td>- Outcomes</td>
</tr>
<tr>
<td>- Sexual double standard</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Physical risks of hooking up</th>
</tr>
</thead>
<tbody>
<tr>
<td>- STIs, HIV/ AIDS</td>
</tr>
<tr>
<td>- Unintended pregnancy/ Abortion</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Safe sex practices</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Importance of condom use to prevent STIs</td>
</tr>
<tr>
<td>- Contraception options</td>
</tr>
<tr>
<td>- STI testing and where to get tested</td>
</tr>
<tr>
<td>Sexual coercion, unwanted sex, and rape</td>
</tr>
<tr>
<td>----------------------------------------</td>
</tr>
<tr>
<td>- Increased risk when hooking up and drinking alcohol</td>
</tr>
<tr>
<td>- What is rape/sexual assault (e.g., gray rape is rape)</td>
</tr>
<tr>
<td>- How to avoid or get out of a situation (Assertiveness)</td>
</tr>
<tr>
<td>- Resources if raped or assaulted (e.g., student health, counseling services, campus advocate group)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Mental and emotional risks of hook ups</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Depression</td>
</tr>
<tr>
<td>- Feelings of shame, guilt, and low self-worth</td>
</tr>
<tr>
<td>- Unrequited feelings, loss of friendship</td>
</tr>
<tr>
<td>- Information for counseling services</td>
</tr>
</tbody>
</table>

**Activities (Use a variety and have at least one for each goal):**

<table>
<thead>
<tr>
<th>Small group discussions (<em>Facilitator must create a safe social environment for disclosure (emphasize respect and confidentiality)</em>)</th>
</tr>
</thead>
<tbody>
<tr>
<td>- <em>Gender differences with nonrelationship sex experience (e.g., motivations, outcomes, double standard)</em></td>
</tr>
<tr>
<td>- Is meaningless, no-strings-attached sex possible?</td>
</tr>
<tr>
<td>- <em>Personal experience with nonrelationship sex (expectations vs. reality)</em></td>
</tr>
<tr>
<td>- How nonrelationship sex will affect future romantic relationships.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Personal exploration</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Goal(s):</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Goal(s):</th>
</tr>
</thead>
</table>
- Where do personal beliefs and values about sex derive from and how do they influence your sexual decisions (e.g., parental divorce, religion, experience)?
- Motivations behind hooking up (e.g., pleasure, romantic relationship) and whether hooking up is the best way to attain those desires
- What do you want from sexual relationships?

**Practice important skill sets**

<table>
<thead>
<tr>
<th>Goal(s):</th>
</tr>
</thead>
</table>

- Communication with sex partner about sexual history
- Assertiveness

**Alternative activity:**

<table>
<thead>
<tr>
<th>Goal(s):</th>
</tr>
</thead>
</table>

- 

**Alternative activity:**

<table>
<thead>
<tr>
<th>Goal(s):</th>
</tr>
</thead>
</table>

- 

**Alternative activity:**

<table>
<thead>
<tr>
<th>Goal(s):</th>
</tr>
</thead>
</table>

- 

**Alternative activity:**

<table>
<thead>
<tr>
<th>Goal(s):</th>
</tr>
</thead>
</table>

- 

**Alternative activity:**

<table>
<thead>
<tr>
<th>Goal(s):</th>
</tr>
</thead>
</table>

- 

**Alternative activity:**

<table>
<thead>
<tr>
<th>Goal(s):</th>
</tr>
</thead>
</table>

- 

**Alternative activity:**

<table>
<thead>
<tr>
<th>Goal(s):</th>
</tr>
</thead>
</table>

- 

**Alternative activity:**

<table>
<thead>
<tr>
<th>Goal(s):</th>
</tr>
</thead>
</table>

- 

**Alternative activity:**

<table>
<thead>
<tr>
<th>Goal(s):</th>
</tr>
</thead>
</table>

- 

**Alternative activity:**

<table>
<thead>
<tr>
<th>Goal(s):</th>
</tr>
</thead>
</table>

- 

**Alternative activity:**

<table>
<thead>
<tr>
<th>Goal(s):</th>
</tr>
</thead>
</table>

- 

**Alternative activity:**

<table>
<thead>
<tr>
<th>Goal(s):</th>
</tr>
</thead>
</table>

-
## Appendix C - General Curriculum Assessment

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Score (0-3)</th>
<th>Ideas for Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Development</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>D1. Curriculum was developed by multiple authors with education and training in theory, research, and sex education.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D2. Curriculum lists professional references that were consulted when the material was created and most references are current (within 5 years).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D3. It is clear how the program is related to the research findings. Curriculum applies to the finding effectively.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D4. Curriculum is based on theoretical approaches that have been demonstrated to influence health related behavior.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D5. Curriculum is updated and altered when necessary to meet changes in trends, information, and research or when goals are not being met.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D6. Needs of target audience were assessed and are consistent with curriculum.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D7. Curriculum is based on specified the health goals, the behaviors affecting those health goals, the risk and protective factors affecting those behaviors, and the activities addressing those risk and protective factors.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Contents</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C1. Values underlying program are evident and</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
consistent with those of the community and target group.

C2. Curriculum focuses on clear health goals.

C3. Curriculum focuses narrowly on specific behaviors leading to these health goals, gave clear messages about these behaviors, and addressed situations that might lead to them and how to avoid them.

C4. Curriculum includes a variety of activities/interventions to change risk factors (one of which is an experiential activity such as a group discussion).

C5. Curriculum provides opportunities to learn and practice important skills.

C6. Curriculum provides clear, accurate, nonbiased, and complete information.

C7. Curriculum provides information for other services and resources that are available to students that can complement curriculum (e.g. student health, counseling center).

Implementation

I1. Curriculum is given over an adequate period of time to allow for attending, comprehending, yielding, and retaining of the information and message.

I2. Curriculum employs instructionally sound teaching methods that actively involve the participants and helps participants personalize the information.

I3. Curriculum provides a safe social environment
I4. Curriculum instructors or peer leaders believe in the program, are adequately trained, and supervised.

<table>
<thead>
<tr>
<th>Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>E1. Formative evaluation was conducted and shows program to be effective. When necessary, changes were made to weaknesses in the program to improve program effectiveness.</td>
</tr>
<tr>
<td>E2. Outcome evaluations provide a valid measure of program goals, show that the curriculum effectively meets program goals, and a variety of measures are used (qualitative &amp; quantitative measures; pre, post, and follow-up evaluations).</td>
</tr>
</tbody>
</table>

*Note.* Scoring: 0= Not addressed, 1=weak, 2= moderate, 3= strong.