



# **ADDRESSING ALCOHOL'S ROLE IN CAMPUS SEXUAL ASSAULT**

Monday, March 25th, 2019  
12PM PST/ 1PM MST/ 2PM CST/ 3PM EST

This webinar will be recorded and features closed captioning.

This webinar is being co-sponsored by Futures Without Violence's National Health Resource Center on Domestic Violence, the Family Violence Prevention & Services Program, Family & Youth Services Bureau, Administration for Children and Families, U.S. DHHS, and is also part of the technical assistance FUTURES provides for the US Department of Health and Human Services Office on Women's Health College Sexual Assault Policy and Prevention Initiative.



# About Adobe Connect Technology

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- All participants are muted.
- For comments and Q/A, please use the chat box window on the right.
- We've received the questions submitted during registration and will be addressing those topics throughout the webinar and during Q/A at the end of our presentation.
- Tech challenges?  
Call Adobe Connect Support: 800-422-3623
- Slides and a link to the webinar recording will be emailed to all participants and uploaded to our webpage.



# Learning objectives

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As a result of attending this webinar, participants will be better able to:

- Describe student with disabilities' experiences of campus sexual violence and alcohol prevention programming
- Implement an evidence-based clinical intervention to prevent and respond to sexual violence in their campus health center
- Identify at least two prevention strategies to address alcohol's role in sexual assault
- Identify next steps for their prevention work on their campus



# Participant Polls

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- Who is in the room?
- Does your campus health center talk to students about sexual violence?
- Does your campus health center have an MOU or other formal partnership with the campus or community rape crisis center and domestic violence program to facilitate warm referrals when a disclosure is made?



# Speakers

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- **Elizabeth Miller, MD, PHD, FSAHM**, University of Pittsburgh School of Medicine
- **Carla D. Chugani, PhD, LPC**, University of Pittsburgh School of Medicine
- **LB Klein MSW, MPA**, University of North Carolina at Chapel Hill School of Social Work, Campus Advocacy and Prevention Professionals Association (CAPPA).



# sex, relationships, and respect on campus



Giving Information for Trauma Support and Safety (GIFTSS):  
A Brief Student Health Center Sexual Violence Prevention  
Intervention





**“I talk to all students about this...”**

Clinical interventions to prevent and respond to intimate partner and sexual violence on campus

# Addressing the Barriers

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Simple process to provide universal education and direct assessment

- Connect IPV/SV and health risks to visit type
- Educational card intervention
- Harm reduction strategies
- Referral & support





# **GIFTSS: Giving Information for Trauma Support & Safety**

- 1. Discuss confidentiality**
- 2. Provide universal education on consensual sex, healthy relationships, harm reduction**
- 3. Direct assessment for IPV/SV**

## **If IPV/SV is disclosed:**

- Harm reduction strategies**
- Warm referral to advocacy services**

## **If IPV/SV is not disclosed:**

- Information on resources**



# Provider and patient tool

Confidential hotlines can connect you to local resources and provide support via phone, text, and chat:

National Sexual Assault Hotline  
24/7 | 1-800-656-4673 | [rainn.org](http://rainn.org)

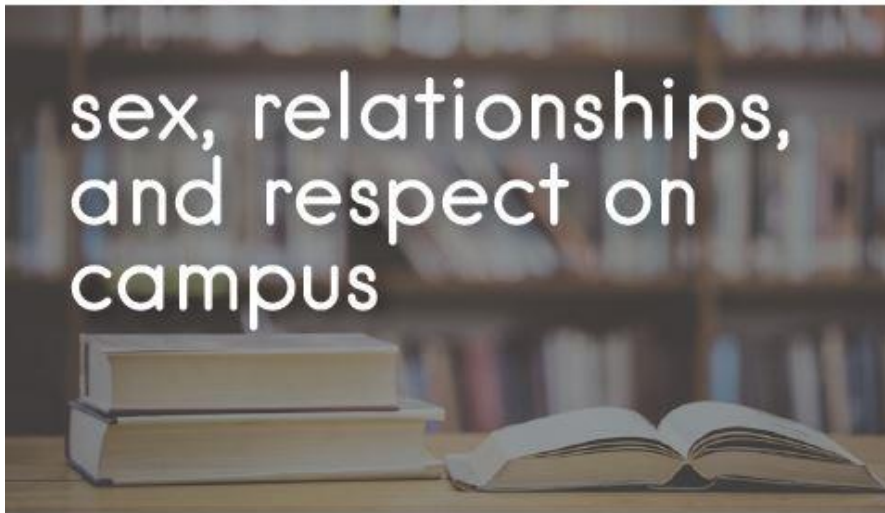
National Domestic Violence Hotline  
24/7 | 1-800-799-7233 | [thehotline.org](http://thehotline.org)

LGBT National Talkline  
M-F 1-9pm PT, Sat 9am-2pm PT  
1-800-246-7743 | [glbthotline.org](http://glbthotline.org)

To find out where to get emergency contraception:  
[bedsider.org/clinics/ec](http://bedsider.org/clinics/ec)

Info on HIV prevention:  
[pleaseprepme.org](http://pleaseprepme.org)

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Formerly Family Violence Prevention Fund

# Introduce the Card as an Upstander Intervention



“You have probably heard a lot about the role fellow students can play in helping to prevent sexual violence. This card offers some more information.”

**ENCOURAGE** helping friends  
**UNIVERSAL** intervention

# Framing the Card for Friends and Family

## What we have learned about our intervention:

- Always give two cards
- Using a framework about helping others helps normalize the situation and allows patients to learn about risk and support without disclosure
- Patients do use cards to help their friends and family
- Having the information on the card is empowering for them – and for others they connect with





A night-time photograph of the Pittsburgh skyline reflected in the water. The central focus is the yellow-lit suspension bridge, which spans the river. The city's skyscrapers, including the PPG Place with its distinctive pointed top, are illuminated and their lights reflect in the calm water below. The sky is a deep blue, and the overall scene conveys a sense of urban connectivity and reflection.

# **Building Bridges Between Health and IPV/SV Advocacy**

# **Providing a “Warm” Referral**

**When you can connect to a local program it makes all the difference!**

**“If you are comfortable with this idea, I would like to call my colleague at the local program (fill in person's name), she is really an expert in what to do next and she can talk with you about a plan to be safer.”**





# Hotline Referral

**Offer  
patients  
the use of  
office  
phone to  
make the  
call**

Confidential hotlines can connect you to local resources and provide support via phone, text, and chat:

National Sexual Assault Hotline  
24/7 | 1-800-656-4673 | [rainn.org](https://rainn.org)

National Domestic Violence Hotline  
24/7 | 1-800-799-7233 | [thehotline.org](https://thehotline.org)

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To find out where  
to get emergency  
contraception:  
[bedsider.org/clinics/ec](https://bedsider.org/clinics/ec)

Info on HIV prevention:  
[pleaseprepme.org](https://pleaseprepme.org)



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# College Health Study

**funded by National Institute on Alcohol Abuse and Alcoholism  
(R01 AA023260)**



*Formerly Family Violence Prevention Fund*

# College Health Study Overview

- Cluster randomized control trial
- **28 campus health and/or counseling centers** in Western Pennsylvania and West Virginia
- Two different approaches
  - Trauma-focused intervention to prevent sexual violence (GIFTSS)
  - Alcohol-focused screening and brief intervention



# Intervention Components

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- An educational card was distributed with every clinic visit
- Providers made direct assessments for sexual and behavioral health related visits
- Students were provided with:
  - Harm reduction strategies
  - Positive bystander (**upstander**) behaviors
  - Connection to victim service advocates (**warm referral**)

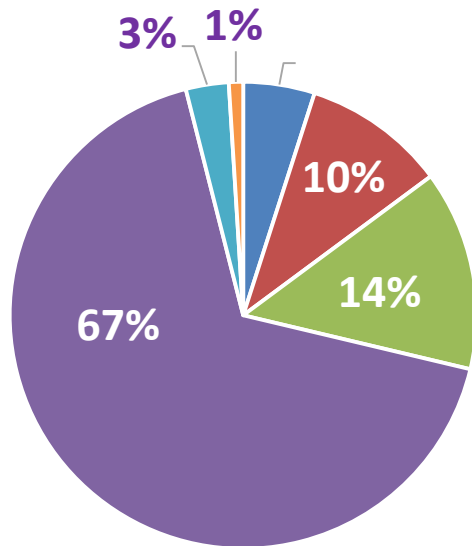
# Methods

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- Students complete surveys prior to clinical visit, after visit, & 4- and 12-months later
- Surveys include measures of IPV/SV, alcohol use, as well as knowledge and use of alcohol and SV services/harm reduction strategies
- **320 providers and office staff** were trained
- **2291 students** enrolled in the study

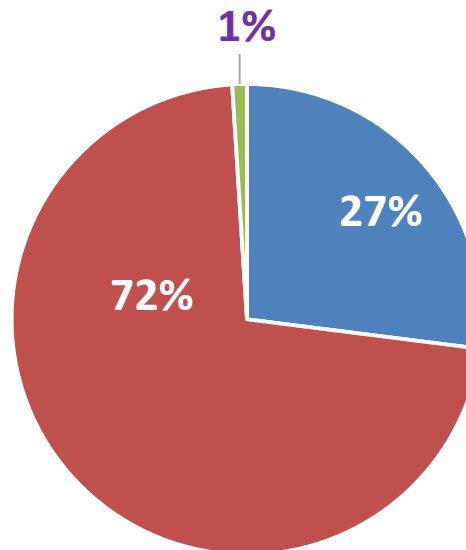
# Demographics

## Race/ethnicity



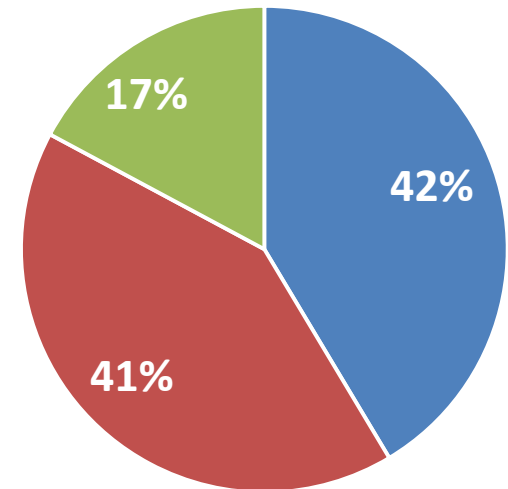
- Asian
- Black/African American
- Hispanic/Latino
- Non-Hispanic White
- Multiracial
- Other

## Gender



- Male
- Female

## Age

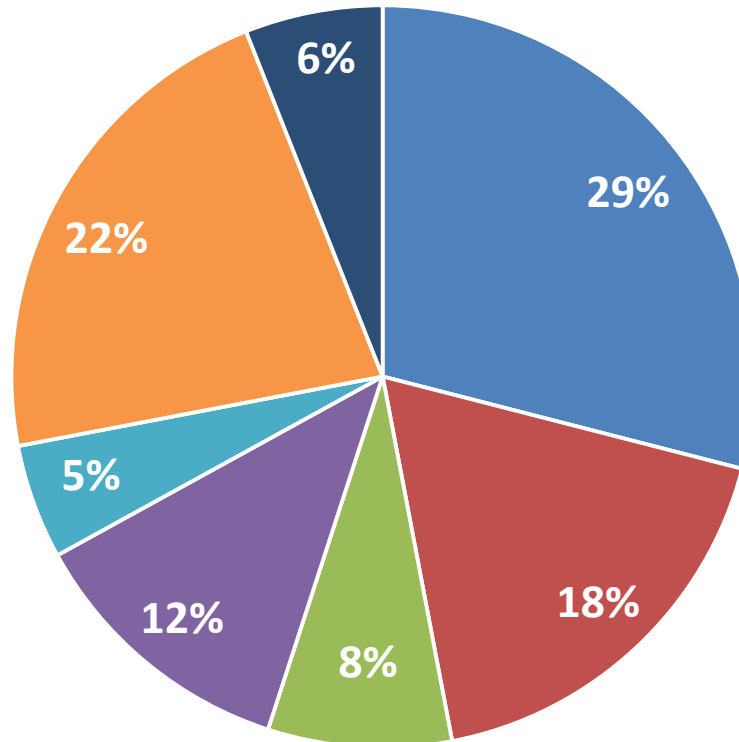


- 18-19 years
- 20-21 years
- 22-24 years



# Demographics

Reason for Visit



- Acute medical visit
- Routine care
- Counseling
- Sexual and reproductive health care
- Injury
- Other
- Multiple care types

# Basic Findings

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- Implementation varied across sites (intervention and control).
- ~50% of students in student experienced any SV
  - Similar rates for before and since college victimization
- Binge drinking higher among those with SV history
- Participants reported feeling comfortable with their college health centers and providers

# Outcomes for Ongoing Analysis

- Recognition of alcohol-related sexual violence and sexual risk
- Self-efficacy to use harm reduction strategies
- Knowledge of sexual violence related services
- Self-efficacy to use sexual violence related services
- Intentions to intervene
- Positive bystander behaviors
- Recognition of sexual coercion
- Self-efficacy to obtain sexual consent
- Sexual violence victimization
- Sexual violence disclosure to health center provider
- Use sexual violence related services

# Summary

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- First large-scale study on alcohol misuse and SV exposure among college students seeking care in college health centers
- Campus health centers are seeing a group of students at high risk for SV
  - Need to provide universal prevention and response messaging

# Participant Polls

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- Does your campus sexual violence prevention and response consider the unique experiences of students with disabilities? (For example—a representative for the disability resource center on the coordinated response team? Part of planning prevention education programs)



# College Students with Disabilities: A Complex and Vulnerable Population

Carla D. Chugani, Ph.D., LPC  
University of Pittsburgh





# Funding Sources

R03 AA025780 (PI: Miller)

Fine Foundation

COI: No conflicts to disclose

# Objectives

1. Who are college students with disabilities?
2. What are the challenges in doing research with this group?
3. Preliminary findings
4. Recommendations for future research

# Defining Disability

- “Someone with an impairment that substantially limits one or more major life activities, has a record of such impairment, or is regarded as having such impairment.”
- 11.5% of college students have a disability (DOE)
- Up to 1/3 of students report a condition that *may qualify* as a disability (ACHA)

# Challenges

- Heterogeneity and Co-morbidity
- Needs as a broad group are not well characterized
- Programs developed for general campus may not account for their needs.
- Not all students disclose disability
- Many do not have “disability identity”

# High-Risk Sub-Group

- Students with Disability (psychiatric, neuropsychiatric, and physical/sensory)
- Sexual Violence (SV): 66% of the Disability group from the College Health Study
- Disability + SV: Nearly 2 fold increased odds of having 4+ past month binge drinking episodes compared with students who had neither Disability nor SV

# Mental Health in SWDs



Children's | of  
Hospital of Pittsburgh UPMC  
*Adolescent Medicine*

- Surveyed a sub-sample of 1,191 students from 27 campuses from College Health
- 508 SWDs in the sample
- SWD lifetime suicide ideation rate = 74% (non-SWD = 39%)
- Current risk of suicide rate = 44% (non-SWD = 13%)



# Suicidality by Disability Type

Group	% Suicide Risk
Psychiatric Disorder	50%
Neuropsych. Disorder	39%
Physical/Sensory	44%

# Qualitative Research

- In-depth, semi structured interviews with 51 SWDs related to alcohol, SV, and programming
- Students often felt that programming was neither relevant to nor representative of their SV experiences
- Students wanted engaging, in-depth, and inclusive programming to reflect the diversity and complexity of their experiences

## Lack of Harm-Reduction

- Students describe training in alcohol and SV prevention with a black/white approach
- Lack of harm reduction causes confusion for students about how dichotomous definitions applied to their lived experiences (e.g., if we were both drunk, did we assault each other?)
- Lack of harm reduction leads to students' belief that programming isn't realistic

## **Lack of Integration of Other Information**

- Students with disabilities noted that they didn't always have information about how their medications or conditions would be affected by alcohol
- They noted that mental health topics should be integrated with programming on alcohol and SV
- They noted that important information (e.g., where to go for help) needs to be repeated as it often is only presented at the beginning of freshman year, when students are bombarded with information on many topics

## **Materials are often not representative of real-life experiences of violence**

- Educational presentations and materials focus on extreme violence with a perpetrator unknown to the victim – this does not mirror many violence experiences on campus
- Without materials representative of real world experiences, some students doubt whether their experience and feelings are valid
- This interferes with help-seeking behavior

## **Emphasis on taking alcohol use and SV seriously**

- Avoid gimmicky names and jargon
- Don't try to make the program fun – if it is meant to be serious, take it seriously and punish those who are joking around, etc.
- Humor only effective in certain contexts (e.g., the Tea video)
- Make students put serious time and effort into learning objectives (e.g., required course)

# Quotes from Students

## More ways to ask for help

- Text lines and safe lines without pressure of making an appointment or risking losing control over what happens next
- Barriers to help seeking through traditional campus services include shame, stigma, doubts about validity of assault, location of service on campus, long wait lists, and limited appointment availability in the moment when the student is ready and willing to talk about what happened

# Future Research

- Focus on integrated interventions targeting drinking, SV, and mental health – allow for in-depth conversations and inclusion of student lived experiences in prevention programs
- Incorporate disability specific topics, accommodations to increase accessibility, and trauma-informed strategies.
- Campus multidisciplinary approach



# Participant Poll

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- How well do you think your campus prevention programming addresses alcohol's role in campus sexual assault?





# Addressing Alcohol's Role in Sexual Assault: A Toolkit by and for Prevention Specialists

LB Klein, MSW, MPA

On behalf of Rebecca C. Woofert, BA;  
Andrew J. Rizzo, MS; & Lee Helmken Cherry, MPH, CHES  
Futures Without Violence  
March 25, 2019

# Background: Who? – Participatory Action Research



- Critical feminist participatory action approach alongside CAPPA
- National, volunteer-led membership organization founded in 2015
- Over 650 members from all states and U.S territories
- Advocates and prevention specialists working on or closely with college and university campuses
- To join CAPPA or learn more: <http://nationalcappa.org>

# Background: Why?

Alcohol use is involved in **50-70% of campus sexual assaults**, so...

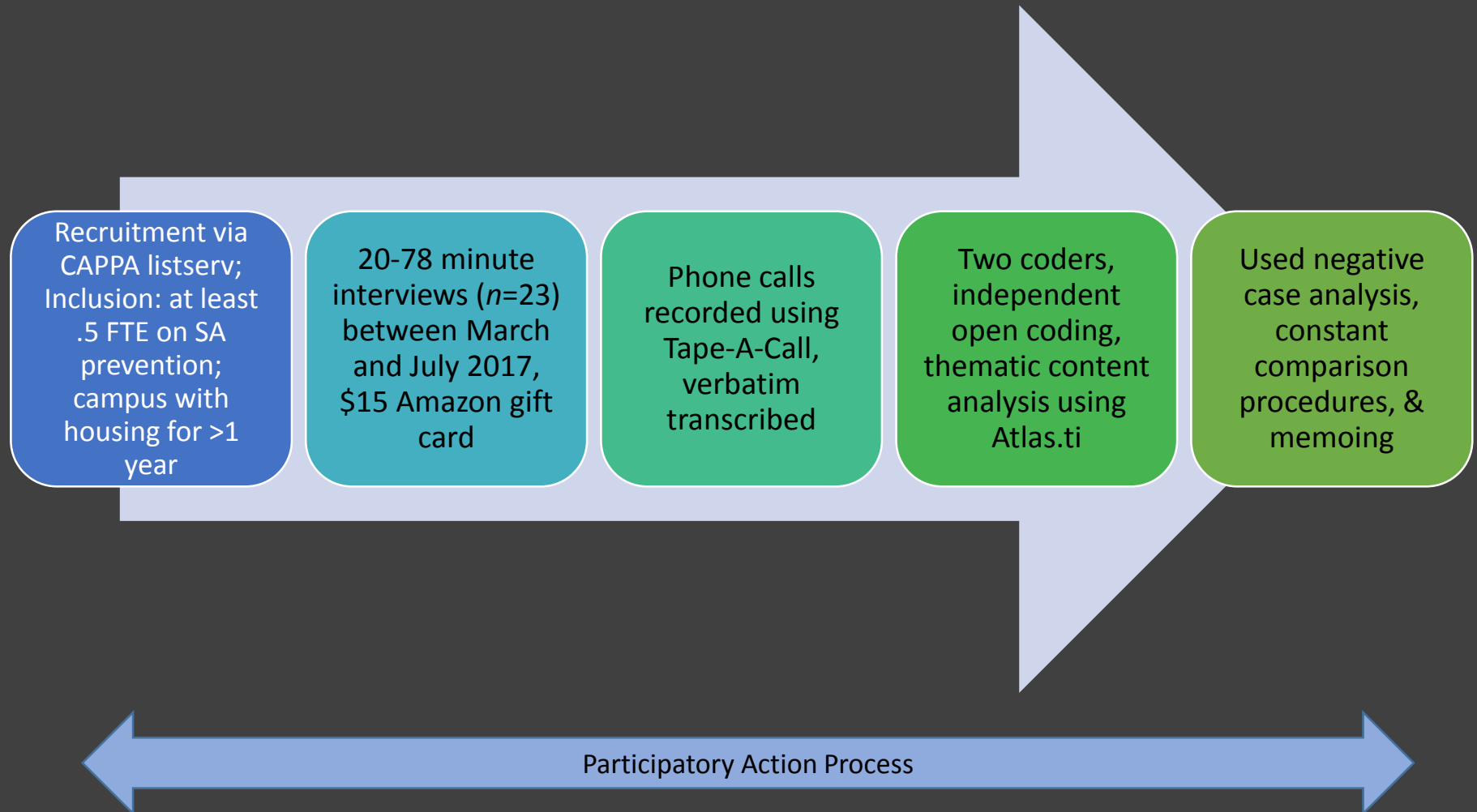
(Abbey, 2002; Carr & VanDeusen, 2004; Krebs, Lindquist, Warner, Fisher, & Martin, 2009)

campus prevention specialists are frequently urged to **"address alcohol's role in sexual assault,"** but there is

(American College Health Association, 2008; Basile, DeGue, Jones, Freire, Dills, Smith, & Raiford, 2016; California Coalition Against Sexual Assault, n.d.)

**limited evidence** on *how* to address alcohol's role in sexual assault.

# Methods – How?



# ADDRESSING ALCOHOL'S ROLE

— IN —

# CAMPUS SEXUAL ASSAULT



**CAPPA**

Campus Advocacy & Prevention  
Professionals Association




**PREVENTION  
INNOVATIONS™**

Research Center

[Download](https://cola.unh.edu/sites/default/files/media/2018/11/saalctoolkit.pdf)

<https://cola.unh.edu/sites/default/files/media/2018/11/saalctoolkit.pdf>



The diagram features a central dark grey circle with a white border containing the text 'Toolkit Overview'. To the right of this circle is a grid of orange rectangular boxes. The boxes are arranged in four rows: the first three rows have three boxes each, and the fourth row has two boxes. The text inside the boxes is white and centered. The background is split vertically, with a dark grey left half and a white right half.

## Toolkit Overview

Companion  
Resources

Research  
Overview

Social Norms

Social Justice

Strategies  
Across Social  
Ecology

Trauma-  
Informed  
Messaging

Partnership is  
Essential

Common  
Challenges

Answering  
Difficult  
Questions

Advice from  
the Field

Vision for the  
Future



## PARTNERSHIP IS ESSENTIAL

Partnership is crucial to addressing alcohol's role in campus sexual assault. No prevention specialist can do prevention work alone, and effective prevention efforts should become an integral part of your college or university's mission, given CSA's high prevalence and significant academic, mental, physical, social, economic, and spiritual consequences. Below is some guidance for identifying partners and leveraging them to successfully address alcohol's role in sexual assault on your campus.

### IDENTIFYING POTENTIAL PARTNERS

When you are considering a partnership and trying to locate the other stakeholders in your community working in some way on the issues of alcohol, CSA, or their intersection, you can begin by asking the following questions:

#### HOW TO IDENTIFY STAKEHOLDERS

- A** What are the goals of the partnership? What does the partner need? What do you need?
- B** What skills do both partners have to achieve these goals?
- C** Who has been involved in preventing or responding to alcohol abuse/misuse or sexual assault in the past?
- D** Who will be impacted by your partnership?
- E** Who will be responsible or accountable for what parts of the work?
- F** Who will have decision-making authority?
- G** Who can support your efforts?
- H** Who might obstruct your efforts if they're not on board?

### KEY PARTNERS

Based on our conversations with prevention specialists, we created a list of the key partners grouped into four categories based on their roles: Substantive Experts, Program Admins, Message Development & Dissemination, and Policy & Enforcement.

#### KEY PARTNERS CHECKLIST

##### SUBSTANTIVE EXPERTS

- ✓ Survivor advocates
- ✓ Survivors
- ✓ Student staff and volunteers
- ✓ Local rape crisis centers & alcohol abuse treatment centers/providers
- ✓ Alcohol abuse prevention educators
- ✓ Health promotion staff
- ✓ Researchers and faculty

##### PROGRAM ADMINS

- ✓ Fraternity and sorority life
- ✓ Academic program coordinators
- ✓ Student organizations
- ✓ Athletics department

##### MESSAGE DEVELOPMENT & DISSEMINATION

- ✓ Local and university media
- ✓ New student orientation
- ✓ New faculty/staff orientation
- ✓ Parents & alumni associations
- ✓ Website administrators
- ✓ Graphic designers
- ✓ University branding
- ✓ Experts in neurodiversity, learning styles, and multimodal communication

##### POLICY & ENFORCEMENT

- ✓ Conduct officers
- ✓ Title IX coordinators
- ✓ Title IX investigators
- ✓ Academic deans
- ✓ Campus safety/police
- ✓ Local law enforcement

### NEXT STEPS

How will you ask potential partners to get involved in your efforts?

1. Craft a three-minute elevator pitch for your work to address alcohol's role in sexual assault.
2. Customize it for different audiences on your campus so they know why this work aligns with their personal goals or organization's mission.

# **NEXT STEPS**

- 1.** Map out your current campus efforts to address alcohol's role in CSA at each level of the social ecology.
- 2.** What levels would you like to strengthen?
- 3.** Are there practices described in this toolkit about which you would like to learn more?
- 4.** Are there practices that present an opportunity for collaboration?

## POLL

If any, what are current efforts on your campus to address alcohol's role in sexual assault?

Policy

Consent  
Education

Messaging


Lack of EBP

Debunking  
Myths

Bystander  
Intervention  
Scenarios

Greek  
Life/Orientation

Not Much



“I try to tell [administrators on my campus] that no one else has this figured out either, like we’re not the only conference room full of people sighing in frustration.”

“It’s extremely policy-driven. It’s extremely conduct-driven.”

Current Efforts

“I try to make sure that the materials going out on campus aren’t conflating sexual assault, sexual health, and alcohol. I spend a lot of time vetting.”

## POLL

What do you wish campuses would do to address alcohol's role in sexual assault?

Research to  
Practice  
Translation

Social  
Justice/Equity  
Focus

Beyond the  
Campus Bubble

Challenge  
Institutional  
Norms

Consistent,  
Trauma-  
Informed  
Messaging

Tools and Skills  
for Party  
Settings

# Strategies Across the Social Ecology

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## INDIVIDUAL

- ✓ Trauma-informed alcohol risk reduction
- ✓ Services to reduce high risk drinking
- ✓ Curricula on the intersection of alcohol and sexual assault
- ✓ Online modules that address alcohol's role in sexual assault
- ✓ Screening for high risk drinking

## RELATIONSHIP

- ✓ Bystander intervention programming
- ✓ Social norm/ marketing campaigns
- ✓ Sexual health, SV prevention, and alcohol peer education
- ✓ Faculty and staff/key opinion leaders as mentors to students
- ✓ Sexual communication/ consent programming
- ✓ Server/bouncer training
- ✓ Education and resources for parents and family



# Strategies Across the Social Ecology

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## COMMUNITY

- ✓ Buy-in from alumni/donors
- ✓ Event training for campus organizations
- ✓ Collaboration with party spaces
- ✓ Physical signage
- ✓ Social media and website messaging
- ✓ Conduct and sanctions related to use of alcohol to perpetrate
- ✓ Consistent messaging

## POLICY & SOCIETY

- ✓ Campus policy audit
- ✓ Housing policy audit
- ✓ Campus organization policy audit
- ✓ Local policy audit
- ✓ Establish and/or market a medical amnesty for students
- ✓ Consider pricing and timing restrictions
- ✓ Establish bar policies especially related to over-service
- ✓ Reduce sexism in advertising of alcohol



Thank you!

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Download the toolkit here:

<https://cola.unh.edu/sites/default/files/media/2018/11/saalctoolkit.pdf>

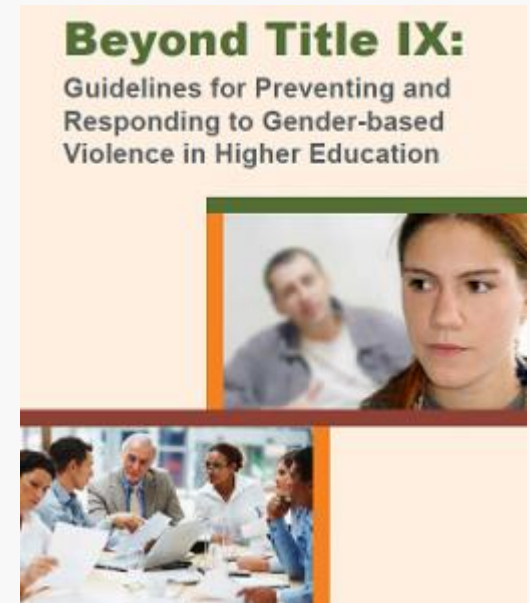
Join CAPPA:

<http://nationalcappa.org>

# FUTURES Campus resources

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- Beyond Title IX: Guidelines for Preventing and Responding to Gender-Based Violence in Higher Education
- Sex, Relationships and Respect on Campus– safety card and guidelines
- Archived webinars, online tools, technical assistance and training
- <http://www.futureswithoutviolence.org/colleges-universities/>



# National Conference on Health and Domestic Violence 2020

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Pre-Conference Institutes: Tuesday, April 28<sup>th</sup>, 2020

Two Day Conference: Wednesday-Thursday, April 29<sup>th</sup>-  
30<sup>th</sup>, 2020

*Hilton Chicago, Chicago Illinois*



# Thank you!

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- The recording of this webinar will be posted on the FUTURES website in the next few days, please visit: [www.futureswithoutviolence.org/events-resources/webinars](http://www.futureswithoutviolence.org/events-resources/webinars)
- For questions or additional information, please contact Graciela Olguin, Program Assistant: [golguin@futureswithoutviolence.org](mailto:golguin@futureswithoutviolence.org)

