Starting the Conversation: Are Campus Sexual Assault Policies Related to the Prevalence of Campus Sexual Assault?

Stephanie M. DeLong, MPH,[1]
Laurie M. Graham, MSW,[1] iD
Erin P. Magee, MPH, MSW,[1]
Sarah Treves-Kagan, MPH,[1]
Christine L. Gray, MPH,[1] iD
Alison M. McClay, BS,[1]
Samantha M. Zarnick,[1]
Lawrence L. Kupper, PhD,[1]
Rebecca J. Macy, PhD,[1]
Olivia S. Ashley, DrPH,[2]
Audrey Pettifor, PhD,[1]
Kathryn E. Moracco, PhD,[1]
and Sandra L. Martin, PhD[1]

Abstract

One goal of university campus sexual assault (CSA) policies is to help prevent CSA. Federal guidance in the 2014 White House Task Force to Protect

[1]The University of North Carolina at Chapel Hill, NC, USA
[2]RTI International, NC, USA

Corresponding Author:
Stephanie M. DeLong, Department of Epidemiology, Gillings School of Global Public Health, The University of North Carolina at Chapel Hill, 135 Dauer Drive, 2101 McGavran-Greenberg Hall, CB #7435, Chapel Hill, NC 27599, USA.
Email: smdelong@ad.unc.edu

Students From Sexual Assault *Checklist for Campus Sexual Misconduct Policies* suggests 10 elements for inclusion in CSA policies (e.g., Policy Introduction, Grievance/Adjudication), and outlines policy topics to be included within each element (Policy Introduction includes two topics: statement of prohibition against sex discrimination including sexual misconduct and statement of commitment to address sexual misconduct). However, no research has examined whether CSA policies impact CSA prevalence. To begin addressing this gap, we studied 24 universities participating in the 2015 Association of American Universities Campus Climate Survey on Sexual Assault and Sexual Misconduct. We linked 2014-2015 data from these universities' CSA policies and their CSA prevalence findings from the 2015 Association of American Universities (AAU) survey. To test whether the comprehensiveness of schools' CSA policies was related to schools' CSA prevalence, we examined the degree to which the CSA policies included recommended policy content from the aforementioned *Checklist*. Policies were characterized as more comprehensive if they included greater numbers of *Checklist* topics. We then correlated the number of topics within the policies with school-level CSA prevalence. We also explored whether there was lower CSA prevalence among schools with policies containing particular topics. Results suggested that greater comprehensiveness of schools' entire CSA policies was negatively correlated with CSA prevalence; however, these findings did not approach statistical significance. The number of negative correlations observed between schools' CSA policy elements and CSA prevalence among undergraduate women was greater than expected by chance alone, suggesting a possible connection between comprehensive CSA policies and CSA prevalence. Schools with policies that included a topic on their sexual assault response team had the lowest CSA prevalence for both women and men, and schools that included topics describing grievance/adjudication procedures had lower CSA prevalence. This study provides a novel examination of CSA and could inform needed research related to the impact of CSA policies on CSA.

Introduction

Campus sexual assault (CSA) is a common problem in the United States, and it has been linked to immense suffering. The Association of American Universities (AAU) Campus Climate Survey on Sexual Assault and Sexual Misconduct (hereafter, the AAU Survey) found that, by their senior year of college, 6.3% of

undergraduate men and 26.1% of undergraduate women experience CSA victimization (i.e., nonconsensual penetration or sexual touching perpetrated by incapacitation or force; Cantor et al., 2015). Moreover, CSA is linked to decreased academic performance and college graduation rates, poor employment and economic outcomes, increased mental health problems and substance use, sexually transmitted infections, and unwanted pregnancy (Banyard et al., 2017; Basile & Smith, 2011; Chang et al., 2017; Jordan, Combs, & Smith, 2014; Lévesque et al., 2016; Loya, 2015; Martin, Ashley, & Hill, 2017; Mengo & Black, 2016; Peterson, DeGue, Florence, & Lokey, 2017; Rhew, Stappenbeck, Bedard-Gilligan, Kaysen, & Hughes, 2017).

Policies Addressing CSA

Almost 95% of U.S. colleges and universities (Graham et al., 2017) have policies that address CSA. Such policies not only outline the campus response to CSA when it occurs, but also are intended to prevent CSA. Social cognitive theory and social norms theory may help explain the potential for these policies to prevent CSA.

As posited by social cognitive theory, which, in part, focuses on how known rewards and punishments can influence individuals' behaviors (i.e., incentive motivation; McAlister, Perry, & Parcel, 2008), the content of CSA policies may help prevent CSA by enhancing potential perpetrators' awareness of the consequences of policy violation. In turn, this awareness of potential negative repercussions for policy violators may deter potential perpetrators from committing CSA.

In addition, policies may help shape campus social norms. Social norms theory highlights the importance of social norms in shaping individuals' behavior (Paul & Gray, 2011); therefore, a policy that demonstrates that the campus community is unsupportive of CSA and considers CSA a violation of community norms may help shape individuals' behavior, preventing CSA perpetration. Relatedly, CSA policies may help prevent CSA by demonstrating to students, faculty, and staff that the school administration and campus community take the issue of CSA seriously. Such evidence of support for CSA survivors, in turn, may lead to increased reporting of CSA to campus authorities, resulting in increased service delivery to survivors, adjudication of CSA cases, and CSA prevention efforts on campus, as well as decreased CSA perpetration.

Federal Guidance on CSA Policy Content

The White House Task Force to Protect Students From Sexual Assault (hereafter, referred to as the Task Force) was formed in response to the U.S.

federal government's desire to prevent CSA and to address variations in CSA policies across U.S. campuses (Office of the Press Secretary, 2014). In 2014, the Task Force authored a *Checklist for Campus Sexual Misconduct Policies* (hereafter, referred to as the *Checklist*), providing guidance and recommendations on how schools can make their CSA policies more comprehensive. The *Checklist* suggests schools consider including 10 elements in their policies:

1. introduction (hereafter, Policy Introduction),
2. scope of the policy (hereafter, Policy Scope),
3. options for assistance following an incident of sexual misconduct (hereafter, Assistance Options),
4. Title IX Coordinator,
5. Definitions,
6. reporting policies and protocols (hereafter, Reporting),
7. investigation procedures and protocols (hereafter, Investigation),
8. grievance/adjudication procedures (hereafter, Grievance/Adjudication),
9. prevention and education (hereafter, Prevention), and
10. Training.

The document also describes suggested policy topics to be included in each element. For example, the Policy Introduction element should include two topics: a "clear statement of the school's prohibition of sex discrimination which includes sexual misconduct" and a "statement of the school's commitment to address sexual misconduct" (White House Task Force to Protect Students From Sexual Assault, 2014, p. 3). Each of the 10 elements includes two to 21 topics. *Checklist* elements and topics can be found in an appendix accessible by contacting the corresponding author.

Lack of Information Linking CSA Policy and CSA Prevalence

Although most schools have CSA policies aimed at responding to and preventing CSA, and federal guidance has been issued concerning the types of information (i.e., elements and topics) that should be included in CSA policies, our team could not locate any research that has examined associations between CSA policy content and CSA prevalence. Given the potential for policies to prevent CSA and the lack of research on this topic, this article examines possible relationships between CSA policy content and CSA prevalence. In particular, we test the hypothesis that more comprehensive CSA policies (defined as a CSA policy including a greater number of topics) are negatively correlated with CSA prevalence. In addition, we explore whether

lower CSA prevalence is seen among schools with CSA policies containing particular topics.

Method

Study Overview and Sample

To address our research aims, we used university data from the 2014-2015 academic year, including data on school characteristics from the National Center for Education Statistics (2015) Integrated Postsecondary Education Data System (IPEDS), CSA current year prevalence data from the 2015 AAU Survey (Cantor et al., 2015), and CSA policy information from school websites and/or school administrators. Using CSA policy information that was in place just prior to or during 2014, or right at the beginning of the 2014-2015 academic year, and the current year prevalence data collected at the end of the 2015 academic year (April/May 2015) assured that the predictor variable (the CSA policy) preceded the outcome variable (CSA victimizations).

Our study sample included 24 of the 27 schools that participated in the 2015 AAU Survey; 26 of these original 27 schools are members of the AAU (Westat, 2015). Three schools were excluded because we were unable to obtain their prevalence data or policy information.

Data on School Characteristics

To characterize the schools included in the sample, we downloaded publicly available data from IPEDS, which receives annual school-related information on more than 7,500 postsecondary schools. We obtained data for the 2014-2015 academic year, given that this year is the academic year of interest for our study. Data were selected concerning each school's size (small, with less than 5,000 students enrolled vs. large, with 5,000 or more students enrolled), percent of students enrolled who were women, sector (public or private), and geographic region (Far West, Great Lakes, Mideast, New England, Plains, Rocky Mountains, Southeast, and Southwest).

Data on CSA Prevalence

To determine CSA prevalence for each of the 24 schools in our study during the 2014-2015 academic year, we used information from the AAU Survey administered in April/May 2015 (Cantor et al., 2015). AAU employed a common methodology across schools to assess students' experiences of CSA victimization. The survey was administered online, with 150,072 students completing

the survey (a survey response rate of 19%). Data were weighted to provide current year CSA prevalence estimates representative of each school (Cantor et al., 2015). Several reports document this survey's findings aggregated across all 27 schools (Cantor et al., 2015; Cantor, Townsend, & Sun, 2016; Fisher, Peterson, & Cantor, 2016; Kaasa, Fisher, Cantor, & Townsend, 2016), and each school was sent a report documenting its own findings. When AAU released the aggregated findings, many of the participating schools posted their specific campus reports and/or data tables online.

The school-level CSA prevalence data for our study were obtained from the school-specific AAU survey data tables/reports, which our team found online or through university staff (if the information was not found online). For each of the 24 schools, our research team abstracted relevant information on the prevalence of CSA among undergraduate women and men defined as nonconsensual penetration or sexual touching involving physical force or incapacitation experienced during the current school year (i.e., academic year 2014-2015). The data we extracted from these reports were already grouped and stratified by gender and educational degree status (undergraduate or graduate/professional student; Cantor et al., 2015). We performed a quality assurance check of our data abstraction and entry among a randomly selected 25% of the schools; the error rate was less than 0.1%.

Data on CSA Policies

Data for 2014-2015 academic year CSA policies were obtained by triangulating information from three school sources: (a) the CSA policy, (b) the Annual Safety and Security Report, and (c) the Undergraduate Student Handbook/Catalog. This information was found by contacting Title IX coordinators and/or through online searches, a process consistent with prior studies examining CSA policy information (Graham et al., 2017; Lund & Thomas, 2015; Richards, Branch, Fleury-Steiner, & Kafonek, 2017). We acquired information from three sources for two schools, two sources for thirteen schools, and one source for nine schools.

We used the *Checklist*, referenced earlier, to examine each school's policy documents. The *Checklist* includes 10 policy elements, with each of the 10 elements including a varying number of specific topics, for a total of 98 topics (refer to the appendix). A team of five data coders then recorded into a standard form whether each school's policy information contained material on each of the 98 topics. Prior to coding, the data coders piloted the form against the school policies and discussed questions that arose to reach an interpretive consensus. To ensure consistency, the coders double-coded five school policies (~21%).

Statistical Analyses

Descriptive analysis of school characteristics. Counts and percentages were computed from IPEDS data to describe the schools' characteristics (i.e., school size, percent of students enrolled who were women, sector [public/private], and geographic region). In addition, we calculated mean current year CSA prevalence for undergraduate women and men using data from the AAU Survey.

Correlational analysis of CSA policy comprehensiveness related to CSA prevalence. Each school's CSA policy data were linked with its CSA prevalence data. We first counted the number of topics (out of a possible 98 topics) identified in the entire CSA policy for each of the 24 schools, reporting the minimum, maximum, and median. In addition, we calculated the minimum, maximum, and median number of topics identified within each of the 10 policy elements. We considered the presence of a greater number of topics, overall in a school's policy and within each of the 10 elements, as indicators of greater comprehensiveness.

We then assessed whether the comprehensiveness of the policy information was related to school-level CSA prevalence among undergraduate women and men. We employed Kendall's tau-b to correlate the number of topics within the overall policy, and within each of the 10 elements, with CSA prevalence. Kendall's tau-b, a nonparametric correlation coefficient, was chosen for these analyses because it does not rely on parametric assumptions necessary for other types of correlation analyses, and it appropriately accounts for tied ranks (Agresti, 2010).

We hypothesized that policies or elements that included a greater number of topics would be related to lower CSA prevalence, resulting in negative correlations. Because of our relatively small sample size of 24 schools, we did not expect to identify statistically significant correlations. Given this expectation, we also considered the number of negative correlations observed for the 10 policy elements and whether that number was greater than expected by chance. A statistically significant finding would potentially suggest that, although sample sizes were not large enough to result in significant correlations between the overall policy or policy elements and CSA prevalence, there is some reasonable evidence that greater policy comprehensiveness is related to lower CSA prevalence.

Exploratory analysis of CSA prevalence by each of the 98 policy topics. We calculated the mean current year CSA prevalence for undergraduate women among the schools with policies that contained each of the specific 98 policy topics.

Table 1. Sample Characteristics (*n* = 24 Schools).

Characteristic	*n*	%
University size		
Large[a]	23	95.8
Small	1	4.2
Percent of students enrolled who are women		
Less than 33%	1	4.2
33%-66%	23	95.8
More than 66%	0	0
Sector		
Public	15	62.5
Private	9	37.5
Region[b]		
Far West	3	12.5
Great Lakes	4	16.7
Mideast	3	12.5
New England	4	16.7
Plains	4	16.7
Rocky Mountains	0	0
Southeast	3	12.5
Southwest	3	12.5

Note. Data are for the 2014-2015 academic year. IPEDS = Integrated Postsecondary Education Data System.
[a]Five thousand students or more.
[b]Regions as defined by IPEDS: Far West (AK, CA, HI, NV, OR, WA), Great Lakes (IL, IN, MI, OH, WI), Mideast (DE, DC, MD, NJ, NY, PA), New England (CT, ME, MA, NH, RI, VT), Plains (IA, KS, MN, MO, NE, ND, SD), Rocky Mountains (CO, ID, MT, UT, WY), Southeast (AL, AR, FL, GA, KY, LA, MS, NC, SC, TN, VA, WV), and Southwest (AZ, NM, OK, TX).

Then, we rank ordered the 98 topics by the CSA prevalence observed, assigning Rank 1 to the topic with the lowest CSA prevalence, Rank 2 to the topic with the next lowest prevalence, and so forth. We used the same process for undergraduate men. For both women and men, we identified which of the 98 topics had the 10 lowest CSA prevalence estimates (the "top 10" topics). We further examined how many of the top 10 topics were the same for both women and men.

Results

School Characteristics

Table 1 shows that, among the 24 schools in our study, nearly all (*n* = 23, 95.8%) were large (with 5,000 students or more) and enrolled between 33%

and 66% women. Fifteen (62.5%) of the schools were public, whereas the remainder were private, and most geographic regions were represented. Among the 24 schools, the mean prevalence of CSA experienced during the current school year was 12.9% (range = 4.7%-17.3%) among undergraduate women and 3.3% (range = 1.4%-5.1%) among undergraduate men.

Comprehensiveness of CSA Policies Related to CSA Prevalence

Table 2 shows that the schools' entire CSA policies included between 23 and 92 of the 98 possible policy topics (median = 59.5). The correlations between the number of topics in entire policies and CSA prevalence were similar for undergraduate women (tau-b = −.15, p = .31) and undergraduate men (tau-b = −.17, p = .25), with both correlations being negative, but neither reaching statistical significance, likely because of the relatively small sample of schools.

Table 2 also presents information on the number of topics present among each of the 10 policy elements. The median number of topics was 2 for Policy Introduction (out of 2 possible), 5.5 for Policy Scope (out of 8 possible), 10.5 for Assistance Options (out of 13 possible), 2 for Title IX Coordinator (out of 3 possible), 12 for Definitions (out of 18 possible), 9.5 for Reporting (out of 15 possible), 7 for Investigation (out of 12 possible), 9 for Grievance/Adjudication (out of 21 possible), 2 for Prevention (out of 3 possible), and 1.5 for Training (out of 3 possible).

We identified small correlations between the number of topics present in each of the 10 policy elements and school-level CSA prevalence for undergraduate women. None of these correlations reached statistical significance, as expected, likely due to the small sample of 24 schools. However, nine of these 10 correlations were negative in sign (p = .01), a pattern that strongly suggests that greater comprehensiveness of policy elements is likely linked to lower CSA prevalence.

We also identified small correlations between the number of topics present in each of the 10 policy elements and CSA prevalence for undergraduate men, again with none of these correlations reaching statistical significance. However, unlike the pattern demonstrated in the women's data in which nine of the 10 correlations were negative, only six of the 10 correlations for men were negative (p = .38).

CSA Prevalence Among the 98 Policy Topics

Table 3 presents each of the policy topics, rank ordered by the mean CSA prevalence. For both women and men, the policy topic with the lowest mean current year CSA prevalence is listed first, followed by the topic with the next lowest mean current year CSA prevalence, and so forth.

Table 2. Distributions of CSA Policy Topics[a] Within the Schools' Entire CSA Policies and Within the Schools' CSA Policy Elements, and Correlations Between the Number of Topics Present in CSA Policies and School-Level Current-Year CSA[b] Prevalence Among Undergraduate Women and Men (n = 24 Schools).

	Number of Topics Possible in the CSA Policies	Minimum Number of Topics Identified Among the CSA Policies	Maximum Number of Topics Identified Among the CSA Policies	Median Number of Topics Identified Among the CSA Policies	Correlations[c,d] Between the Number of Topics Present in CSA Policies and School-Level CSA Prevalence Among Undergraduate Women	Correlations[c,d] Between the Number of Topics Present in CSA Policies and School-Level CSA Prevalence Among Undergraduate Men
Entire policy	98	23	92	59.5	-.15	-.17
Policy elements						
Policy Introduction	2	0	2	2	-.17	.02
Policy Scope	8	1	8	5.5	-.20	-.03
Assistance Options	13	0	13	10.5	-.09	.01
Title IX Coordinator	3	0	3	2	-.05	.06
Definitions	18	0	18	12	-.09	-.18
Reporting	15	2	15	9.5	-.16	-.16
Investigation	12	1	12	7	-.07	-.15
Grievance/Adjudication	21	1	18	9	-.11	-.14
Prevention	3	0	3	2	.00	.03
Training	3	0	3	1.5	-.12	-.24
p-value[e]					.01	.38

Note. CSA = campus sexual assault.
[a]An explanation of the topics is in the appendix. Topics are from the White House Task Force to Protect Students From Sexual Assault Checklist for Campus Sexual Misconduct Policies (White House Task Force to Protect Students From Sexual Assault, 2014), and elements are also directly from that *Checklist*.
[b]Defined as nonconsensual penetration or sexual touching involving physical force or incapacitation.
[c]Kendall's tau-b correlations.
[d]All p-values lacked statistical significance, likely due to small sample size.
[e]One-sided p-value for observed number of negative correlations.

Table 3. The 98 Policy Topics,[a] Ranked From Lowest to Highest Current Year Mean CSA Prevalence,[b] Among Undergraduate Women and Men.

Rank	Topic	Element Containing the Topic
Women		
1	Describe sexual assault response team	Assistance Options
2	Prohibit prior consent as sole evidence	Grievance/Adjudication
3	Mediation not appropriate	Grievance/Adjudication
4	Process for appeal	Grievance/Adjudication
5	Allowable evidence	Grievance/Adjudication
6	Sexual exploitation	Definitions
7	Prohibit prior sexual conduct	Grievance/Adjudication
8	Anonymous reporting process	Reporting
9	Hostile environment	Definitions
10	Relationships covered	Policy Scope
11	Intimidation	Definitions
12	Programs/activities covered	Policy Scope
13	Applies to third parties	Policy Scope
14	Minimum training responders/advocates	Training
15	Grounds for appeal	Grievance/Adjudication
16	When will anonymous disclosure not be honored	Reporting
17	Explain reporting options	Reporting
18	Third-party reporting process	Reporting
19	Sharing information	Investigation
20	Locations on/off campus covered	Policy Scope
21	Clery reporting timeliness	Reporting
22	Sexual harassment	Definitions
23	Identify sanctioners	Grievance/Adjudication
24	Student understanding of procedures	Reporting
25	Retaliation policy	Reporting
26	Recourse for retaliation	Reporting
27	Nonconsensual sexual intercourse	Definitions
28	Standard of review	Grievance/Adjudication
29	Identify the Title IX coordinator(s)	Investigation
30	Applies regardless sexual orientation	Policy Scope
31	Timeline	Investigation
32	Contact info on/off campus advocates/counselors	Assistance Options
33	Identify the Title IX coordinator	Title IX Coordinator

Table 3. (continued)

Rank	Topic	Element Containing the Topic
34	Commitment to address sexual assault	Policy Introduction
35	Persons covered	Policy Scope
36	Identify adjudicators	Grievance/Adjudication
37	Appeals decision maker	Grievance/Adjudication
38	Preponderance of evidence	Grievance/Adjudication
39	Past consent	Definitions
40	Dating violence	Definitions
41	Consent from other party	Definitions
42	Contact for reporting	Reporting
43	Victim treatment options	Assistance Options
44	Limitations of confidential report	Investigation
45	Coercion or force	Definitions
46	Title IX coordinator role	Title IX Coordinator
47	Rape kit	Assistance Options
48	Cross-examination	Grievance/Adjudication
49	Nonconsensual sexual contact	Definitions
50	Clery reporting obligation	Reporting
51	Frequency of prevention programs	Prevention
52.5	Immediate academic accommodations	Investigation
52.5	Immediate steps—beyond academic accommodations	Investigation
54	Define incapacitation	Definitions
55	Immediate safety steps	Assistance Options
56	Faculty /staff training—how	Training
57	Voluntary	Definitions
58	Preserving evidence	Investigation
59	Evidence preservation	Assistance Options
60	Stalking	Definitions
61	Domestic violence	Definitions
62.5	Statement including misconduct	Policy Introduction
62.5	Conduct covered	Policy Scope
64	Describe confidentiality procedures	Reporting
65	Withdraw consent any time	Definitions
66	Confidential disclosing on/off campus	Assistance Options
67	Emergency numbers on/off campus	Assistance Options
68	Sanctions	Grievance/Adjudication
69	Counseling regardless of reporting	Assistance Options

Table 3. (continued)

Rank	Topic	Element Containing the Topic
70	Investigation components	Investigation
71	Confidentiality explained	Policy Scope
72	Conflict of interest process	Grievance/Adjudication
73	Interim safety steps—victim	Assistance Options
74	Persons allowed to be present	Grievance/Adjudication
75	Identify reporting options	Reporting
76	Extending timeline	Investigation
77	Remedies—community	Grievance/Adjudication
78.5	Interim safety steps—accused	Assistance Options
78.5	Notice of hearings	Grievance/Adjudication
80	Specifics of disclosing confidential reports	Reporting
81	Prevention programming	Prevention
82	Retaliation	Definitions
83	Support for disciplinary process	Assistance Options
84	Notice of outcome	Grievance/Adjudication
85	Incapacitation	Definitions
86	Silence	Definitions
87	Equitable rights—complainant/respondent	Investigation
88	Faculty/staff training—topics	Training
89	Confidential reporting alternatives	Reporting
90	Health appointment advocate	Assistance Options
91	Bystander programs	Prevention
92	Title IX coordinator roles	Investigation
93	Who conducts investigation	Investigation
94	Other rights of accused	Grievance/Adjudication
95	Amnesty for alcohol/drugs	Reporting
96	Title IX coordinator duties	Title IX Coordinator
97	Remedies—victim	Grievance/Adjudication
98	No nondisclosure requirement	Grievance/Adjudication
Men		
1	Describe sexual assault response team	Assistance Options
2	Mediation not appropriate	Grievance/Adjudication
3	Intimidation	Definitions
4	Third-party reporting process	Reporting
5	Conflict of interest process	Grievance/Adjudication
6	Process for appeal	Grievance/Adjudication
7	Hostile environment	Definitions

Table 3. (continued)

Rank	Topic	Element Containing the Topic
8	Retaliation	Definitions
9	Identify sanctioners	Grievance/Adjudication
10	Prohibit prior sexual conduct	Grievance/Adjudication
11	Equitable rights—complainant/respondent	Investigation
12	Persons allowed to be present	Grievance/Adjudication
13	No nondisclosure requirement	Grievance/Adjudication
14	Minimum training responders/advocates	Training
15	Identify adjudicators	Grievance/Adjudication
16	Grounds for appeal	Grievance/Adjudication
17	Sharing information	Investigation
18	Sexual exploitation	Definitions
19	Faculty/staff training—how	Training
20	Faculty/staff training—topics	Training
21	When will anonymous disclosure not be honored	Reporting
22	Standard of review	Grievance/Adjudication
23	Bystander programs	Prevention
24	Dating violence	Definitions
25	Anonymous reporting process	Reporting
26	Retaliation policy	Reporting
28	Immediate academic accommodations	Investigation
28	Immediate steps—beyond academic accommodations	Investigation
28	Appeals decision maker	Grievance/Adjudication
30	Specifics of disclosing confidential reports	Reporting
31	Explain reporting options	Reporting
32	Domestic violence	Definitions
33	Frequency of prevention programs	Prevention
34	Timeline	Investigation
35.5	Nonconsensual sexual contact	Definitions
35.5	Nonconsensual sexual intercourse	Definitions
37	Stalking	Definitions
38	Clery reporting timeliness	Reporting
39	Contact for reporting	Reporting
40.5	Immediate safety steps	Assistance Options
40.5	Interim safety steps—victim	Assistance Options
42.5	Confidential disclosing on/off campus	Assistance Options

Table 3. (continued)

Rank	Topic	Element Containing the Topic
42.5	Consent from other party	Definitions
44	Identify the Title IX coordinator(s)	Investigation
45	Prohibit prior consent as sole evidence	Grievance/Adjudication
46	Withdraw consent any time	Definitions
47	Programs/activities covered	Policy Scope
48	Voluntary	Definitions
49	Clery reporting obligation	Reporting
50	Sexual harassment	Definitions
51	Notice of outcome	Grievance/Adjudication
52	Identify the Title IX coordinator	Title IX Coordinator
53	Recourse for retaliation	Reporting
54	Define incapacitation	Definitions
55	Amnesty for alcohol/drugs	Reporting
56	Past consent	Definitions
57	Contact info on/off campus advocates/ counselors	Assistance Options
58	Preserving evidence	Investigation
59	Prevention programming	Prevention
60	Evidence preservation	Assistance Options
61	Persons covered	Policy Scope
62	Title IX coordinator roles	Investigation
63	Preponderance of evidence	Grievance/Adjudication
64	Identify reporting options	Reporting
65	Confidential reporting alternatives	Reporting
66	Silence	Definitions
67	Commitment to address sexual assault	Policy Introduction
68.5	Interim safety steps—accused	Assistance Options
68.5	Notice of hearings	Grievance/Adjudication
70	Support for disciplinary process	Assistance Options
71	Rape kit	Assistance Options
72	Incapacitation	Definitions
73	Emergency numbers on/off campus	Assistance Options
74	Limitations of confidential report	Investigation
75	Extending timeline	Investigation
76	Confidentiality explained	Policy Scope
77.5	Statement including misconduct	Policy Introduction

Table 3. (continued)

Rank	Topic	Element Containing the Topic
77.5	Conduct covered	Policy Scope
79	Counseling regardless of reporting	Assistance Options
80	Who conducts investigation	Investigation
81	Coercion or force	Definitions
82	Describe confidentiality procedures	Reporting
83	Applies to third parties	Policy Scope
84	Investigation components	Investigation
85	Other rights of accused	Grievance/Adjudication
86	Sanctions	Grievance/Adjudication
87	Title IX coordinator duties	Title IX Coordinator
88	Victim treatment options	Assistance Options
89	Remedies—victim	Grievance/Adjudication
90	Relationships covered	Policy Scope
91	Title IX coordinator role	Title IX Coordinator
92	Locations on/off campus covered	Policy Scope
93	Remedies—community	Grievance/Adjudication
94	Cross-examination	Grievance/Adjudication
95	Applies regardless sexual orientation	Policy Scope
96	Health appointment advocate	Assistance Options
97	Student understanding of procedures	Reporting
98	Allowable evidence	Grievance/Adjudication

Note. CSA = campus sexual assault.
[a]Policy topics and elements are from the White House Task Force to Protect Students From Sexual Assault Checklist for Campus Sexual Misconduct Policies (White House Task Force to Protect Students From Sexual Assault, 2014; refer to the appendix for details).
[b]Each mean prevalence was calculated among the schools with that topic present in their policies, weighted to account for school sample size; CSA was defined as nonconsensual penetration or sexual touching involving physical force or incapacitation.

For women, five of the top 10 policy topics with lower CSA prevalence were included in the Grievance/Adjudication element. The 10 topics with the lowest CSA prevalence for women included describing the sexual assault response team from the Assistance Options element, the prohibition of prior consent as sole evidence from the Grievance/Adjudication element, mediation not appropriate from the Grievance/Adjudication element, the process for appeal from the Grievance/Adjudication element, allowable evidence from the Grievance/Adjudication element, sexual exploitation from the Definitions element, the prohibition of prior sexual conduct (as evidence) from the Grievance/Adjudication element, the anonymous reporting process from the Reporting element, a hostile

environment from the Definitions element, and the relationships covered by the policy from the Policy Scope element.

For men, five of the top 10 policy topics were also from the Grievance/ Adjudication element, three were from the Definitions element, and two were from other elements. The 10 policy topics with the lowest mean current year CSA prevalence for men included describing the sexual assault response team from the Assistance Options element, that mediation is not appropriate from the Grievance/Adjudication element, intimidation from the Definitions element, the third-party reporting process from the Reporting element, the conflict of interest process from the Grievance/Adjudication element, the process for appeal from the Grievance/Adjudication element, a hostile environment from the Definitions element, retaliation from the Definitions element, identification of sanctioners from the Grievance/Adjudication element, and the prohibition of prior sexual conduct (as evidence) from the Grievance/ Adjudication element.

Comparison of the topics with the 10 lowest CSA prevalences for women and men showed considerable overlap. Specifically, five of these 10 topics were the same, with these topics including describing the sexual assault response team, the prohibition of prior sexual conduct (as evidence), mediation not being appropriate, the process for appeal, and a hostile environment. Also, for women and men, five of the top 10 topics were found within the Grievance/Adjudication element.

Discussion

This is the first research, of which we are aware, that has found some evidence linking greater comprehensiveness of CSA policies with lower CSA prevalence. For both women and men, correlating the number of topics within an entire CSA policy with CSA prevalence resulted in negative correlations, suggesting that greater comprehensiveness of such policies may be linked to somewhat lower CSA prevalence. However, it should be noted that neither of these negative correlations reached statistical significance. This is likely due to the relatively small sample of schools studied, though it could also reflect the varying degrees of policy implementation, awareness, and enforcement on each campus or the potentially small role that a policy may play relative to other comprehensive prevention programming on campuses. More research is needed with larger samples to confirm our findings.

Examining the comprehensiveness of the 10 CSA policy elements related to CSA prevalence by correlating the number of topics in each of the elements with CSA prevalence also resulted in small-sized correlations, with none of these correlations reaching statistical significance. However, examining the

pattern of findings across the 10 elements, in particular, examining the direction of the resulting correlations, uncovered interesting differences between women and men. For women, nine of the 10 correlations were negative, a statistically significant finding, with this pattern strongly suggesting that greater comprehensiveness across policy elements is linked to lower CSA prevalence among women. In contrast, only six of the 10 correlations for men were negative, a nonstatistically significant finding. The women's data as compared with the men's showed a stronger pattern linking greater policy comprehensiveness to lower CSA prevalence.

These findings raise the question of why the comprehensiveness of schools' CSA policies may be more strongly related to CSA prevalence among women than men. It is possible that because more is known about CSA victimization among female students as compared with male students that the policies are informed by this gendered information (Turchik, 2012). In other words, some CSA policies may have been written viewing women as survivors and men as perpetrators. From the perspectives of social cognitive and social norms theories (McAlister et al., 2008; Paul & Gray, 2011), this situation might mean that CSA policy content more directly speaks to potential perpetrators who would commit sexual assault against women, and as such, more effectively deter the perpetration of CSA against women.

When reviewing a subset of policies in our study to explore this idea of gendered language further, we noticed that these policies were missing a focus on issues/resources which might specifically speak to male survivors of CSA. For example, schools should consider naming a point of contact on campus in their policies who can specifically help male survivors. This information might help men feel more comfortable in taking a step toward disclosing, as male survivors of unwanted sexual contact have been shown to disclose less frequently than female survivors to anyone (Banyard et al., 2007). We encourage future research to examine the potentially gendered nature of CSA policies in greater depth. Such research could be part of a broader assessment of male student CSA victimization to help schools further refine their CSA policies to better incorporate male survivors' experiences and needs.

It is noteworthy that we found substantial variation in the comprehensiveness of schools' CSA policies. Comprehensiveness is likely influenced by each school's resources and its capacity to develop, review, and update its CSA policy. Some schools may not have the staff, support, or funds needed to conduct regular updates, whereas other schools may have this capacity.

In addition, it is important to note that the comprehensiveness of CSA policies and the topics included in these policies have been, and may continue to be, influenced by changing federal and state guidance and mandates, an additional reason why CSA policy content may vary. Federal guidance, such

as the *Checklist* used in this study (White House Task Force to Protect Students From Sexual Assault, 2014), encouraged schools to bolster their CSA policies in particular ways. The 2017 rescinding of federal guidance on addressing CSA provided under the Obama Administration, and issuance of a new "Dear Colleague Letter" and "Q & A on Campus Sexual Misconduct" by the U.S. Department of Education (2017a, 2017b), may affect future CSA policy content. Furthermore, evolving state law can affect CSA policy content, as has been seen in recent years when California passed statewide legislation mandating that all colleges and universities adopt affirmative consent definitions in their CSA policies (Student Safety: Sexual Assault Act, 2014). Other states (e.g., New York and Illinois) have also passed statewide legislation regarding CSA, and additional states are considering such action (Affirmative Consent and Respect, 2017).

Our exploration of whether particular policy topics had lower CSA prevalence found that five policy topics (specifically, describing the sexual assault response team, the prohibition of prior sexual conduct [as evidence], mediation not being appropriate, the process for appeal, and a hostile environment) had the lowest CSA prevalences for both women and men. The lowest CSA prevalence for both women and men was among schools with policies that described the sexual assault response team contained within the Assistance Options element. This topic focuses on the processes/resources this team can offer survivors (refer to the appendix; White House Task Force to Protect Students From Sexual Assault, 2014). It may be that this policy topic serves as a marker for a school's overall focus on addressing CSA, which is why it has the lowest CSA prevalence for both women and men. Prohibition of prior sexual conduct (as evidence) prevents both the survivor's and the accused's previous sexual history from being brought into the adjudication process. Mediation not being appropriate is a statement indicating that mediation should never be used in CSA cases. The process for appeal topic details the process that should be followed for appealing a CSA case decision (refer to the appendix; White House Task Force to Protect Students From Sexual Assault, 2014). It may be that lower CSA prevalence occurs among schools that include these policy topics because, like the description of a sexual assault response team, they reinforce a university's stance to protect the survivor. This stance may then serve to deter CSA perpetration against both women and men by helping to highlight and/or support social norms unaccepting of CSA. In this same manner, providing a definition of what constitutes a hostile environment (refer to the appendix; White House Task Force to Protect Students From Sexual Assault, 2014) may also help deter CSA perpetration, leading to lower CSA prevalence.

It is noteworthy that, for women and men, five of the top 10 topics that had lower CSA prevalence were found within the Grievance/Adjudication element. This finding suggests that Grievance/Adjudication may be an important element for schools to consider including in their policies. As posited by social cognitive theory and the embedded construct of incentive motivation (McAlister et al., 2008), heightening potential perpetrators' awareness of the process by which CSA is adjudicated and possible penalties for violating a CSA policy may deter perpetration and result in lower CSA.

Strengths and Limitations

This study has multiple strengths. This research is the first attempt of which we are aware to examine potential relationships between schools' CSA policies and the prevalence of CSA. A second strength is that we used a 2014 federal CSA policy guidance document outlining best practices regarding CSA policies to examine the comprehensiveness of schools' CSA policies. Finally, the study predictors preceded the outcomes, in that the CSA policies (the predictor variables) were in place prior to the CSA events (the outcomes), which were documented in the AAU survey conducted at the end of the academic year.

This study also has limitations. First, this study included only 24 schools, limiting the statistical power of our analyses, as well as the types of analyses that could be conducted (e.g., subgroup analyses, control of potentially important confounders). In addition, the generalizability of our findings is limited because all these schools are prestigious research universities, most being large, and all being relatively well resourced, which allowed them to support the cost of participating in the AAU Survey. Our findings are also limited by the 19% response rate of the AAU Survey, although the AAU analyses were weighted to take into account nonresponse (Cantor et al., 2015). Finally, our process for identifying the content of CSA policies could have potentially allowed for some misclassification of topics. Although we attempted to obtain as much CSA policy information as possible for every school (through review of policy documents, security reports, student handbooks/catalogs), we were not able to obtain all three sources of information for every school.

Research, Policy, and Practice Implications

Given that this is the first study to examine links between CSA policy and CSA prevalence, and given the limitations of this study, it is premature to derive definitive research, policy, and practice implications from these research findings. However, with appropriate caution, we will offer some ideas on possible implications that may deserve consideration.

Research. Given that most colleges have CSA policies in place, in part, to help prevent CSA, we encourage other researchers to examine potential relationships between CSA policies and CSA prevalence. Our analyses were limited by sample size, an issue that could be addressed in future research. Ideally, more schools would participate in a commonly administered CSA survey, enabling more statistically robust results, increased power to detect differences, and use of more rigorous statistical methods, including those that account for potential confounders and clustering effects (e.g., multilevel modeling; Finch, Bolin, & Kelley, 2014). Potential confounders of the relationship between CSA policy content and CSA prevalence might include the schools' distributions of students with various characteristics, such as first-year students (Cranney, 2015), female students (Mellins et al., 2017), students who identify as transgender (Griner et al., 2017), students of different races/ethnicities such as African American students (Krebs et al., 2011), or the geographic region where the college resides. Participation of additional schools with diverse characteristics could also help enhance generalizability of results.

Studies designed to greatly oversample small groups who may be at higher risk of experiencing CSA, such as those individuals with disabilities or those who identify as lesbian, gay, bisexual, transgender, queer, intersex, or who identify with additional marginalized identity groups (LGBTQI+) are also needed in the future. For example, the AAU Survey of 27 universities found that students who reported having a disability reported a higher percent of nonconsensual sexual contact involving physical force or incapacitation (21.4%) compared with students who reported that they did not have a disability (11.4%; Cantor et al., 2015). Transgender college students have also been found to experience approximately 2 to 3 times more sexual violence (i.e., sexual touching without consent, attempted sexual penetration, sexual penetration) than their counterparts who identify as female (Griner et al., 2017), and research has demonstrated female students who identify as lesbian or bisexual experience a higher prevalence of sexual assault during college than heterosexual women (Martin, Fisher, Warner, Krebs, & Lindquist, 2011). We were unable to explore the potential relationships between CSA policy content and CSA prevalence for people with disabilities, transgender students, or sexual minority students and call for this important work to be undertaken.

We also encourage longitudinal research examining the impact of changes in CSA policies on changes in CSA. For example, prospective studies could be conducted over a multiyear period assessing whether changing specific policy components result in changes in student knowledge about the CSA policies, as well as changes in student experiences and behaviors (including CSA victimization and perpetration).

Also, CSA policy content could be explored in much greater depth using qualitative analyses. For example, analyses exploring how language and norms from CSA policies are received by students may be important. Understanding whether certain groups (e.g., potential male survivors, potential female perpetrators) would benefit from having information presented in different ways or having different concepts emphasized could be fruitful to further prevention efforts.

Policy. Although more research is needed to clarify the impact of CSA policies on CSA prevalence, our research suggests that comprehensive CSA policies may help to deter CSA. Therefore, using suggested best practices concerning policy review in general (White House Task Force to Protect Students From Sexual Assault, 2014), campus practitioners may wish to routinely review and update their CSA policies in light of not only this research, but also other CSA research. Although this study suggests that CSA policy reviewers should focus special attention on five CSA topics that were linked to lower CSA prevalence (including describing the sexual assault response team, the prohibition of prior sexual conduct [as evidence], mediation not being appropriate, the process for appeal, and a hostile environment), future research may also provide helpful information to inform policy review and revision. Tools such as the *Checklist* (White House Task Force to Protect Students From Sexual Assault, 2014) may be useful to schools in such an undertaking.

Practice. Although the nonsignificant results we saw in our study were likely due to small sample size, they could also reflect the smaller role that policy plays as compared with other CSA prevention programming on campuses. CSA policy should be just one component of a much more comprehensive CSA prevention strategy used on campuses to inform CSA-related practices. As recommended by the Centers for Disease Control and Prevention (CDC), a multilevel approach based on the social ecological model should be used for violence prevention (CDC, n.d.). CDC's *Sexual Violence on Campus: Strategies for Prevention* (Dills, Fowler, & Payne, 2016) provides a useful framework for such activities. Furthermore, CDC suggests implementing effective and promising campus sexual violence prevention programs, such as Green Dot and Bringing in the Bystander (CDC, 2018).

Conclusion

Our study indicates a need to empirically assess the impact of CSA policy on CSA. Our analyses suggest that more comprehensive CSA policies may be linked with somewhat lower CSA prevalence. However, because this is the

first study of its kind, and given the limitations of this study, additional research is needed to confirm these findings.

ORCID iDs

Laurie M. Graham [iD] https://orcid.org/0000-0003-3318-8591
Christine L. Gray [iD] https://orcid.org/0000-0002-0751-1626

References

Affirmative Consent and Respect. (2017). *Affirmative consent laws (yes means yes) by state*. Retrieved from http://affirmativeconsent.com/affirmative-consent-laws-state-by-state/

Agresti, A. (2010). *Analysis of ordinal categorical data* (2nd ed.). New York, NY: John Wiley.

Banyard, V. L., Demers, J. M., Cohn, E. S., Edwards, K. M., Moynihan, M. M., Walsh, W. A., & Ward, S. K. (2017). Academic correlates of unwanted sexual contact, intercourse, stalking, and intimate partner violence: An understudied but important consequence for college students. *Journal of Interpersonal Violence*. Advance online publication. doi:10.1177/0886260517715022

Banyard, V. L., Ward, S., Cohn, E. S., Plante, E. G., Moorhead, C., & Walsh, W. (2007). Unwanted sexual contact on campus: A comparison of women's and men's experiences. *Violence and Victims*, *22*, 52-70. doi:10.1891/vv-v22i1a004

Basile, K. C., & Smith, S. G. (2011). Sexual violence victimization of women: Prevalence, characteristics, and the role of public health and prevention. *American Journal of Lifestyle Medicine*, *5*, 407-417. doi:10.1177/1559827611409512

Cantor, D., Fisher, W. B., Chibnall, S., Townsend, R., Lee, H., Bruce, C., & Thomas, G. (2015). *Report on the AAU campus climate survey on sexual assault and sexual misconduct*. Rockville, MD: Westat. Retrieved from https://www.aau.edu/ sites/default/files/%40%20Files/Climate%20Survey/AAU_Campus_Climate_ Survey_12_14_15.pdf

Cantor, D., Townsend, R., & Sun, H. (2016). *Methodology report for the AAU campus climate survey on sexual assault and sexual misconduct*. Rockville, MD: Westat.

Centers for Disease Control and Prevention. (2018). *Strategies for sexual violence prevention*. Retrieved from https://www.cdc.gov/violenceprevention/sexualvio- lence/prevention.html

Centers for Disease Control and Prevention. (n.d.). *The social-ecological model: A framework for violence prevention*. Retrieved from https://www.cdc.gov/violen- ceprevention/pdf/sem_framewrk-a.pdf

Chang, E. C., Jilani, Z., Yu, T., Lin, J., Muyan, M., & Hirsch, J. K. (2017). Relation between sexual assault and negative affective conditions in female college stu- dents: Does loss of hope account for the association? *Journal of Interpersonal Violence*, *32*, 1249-1266. doi:10.1177/0886260515588534

Cranney, S. (2015). The relationship between sexual victimization and year in school in US colleges: Investigating the parameters of the "red zone." *Journal of Interpersonal Violence*, *30*, 3133-3145. doi:10.1177/0886260514554425

Dills, J., Fowler, D., & Payne, G. (2016). *Sexual violence on campus: Strategies for prevention*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. Retrieved from https://stacks.cdc. gov/view/cdc/43899

Finch, W. H., Bolin, J. E., & Kelley, K. (2014). *Multilevel modeling using R*. New York, NY: CRC Press.

Fisher, B. S., Peterson, S., & Cantor, D. (2016). *Victims' use of resources, evaluation of resources, and reasons for not using resources*. Rockville, MD: Westat. Retrieved from https://www.aau.edu/sites/default/files/%40%20Files/Climate%20Survey/ Victims%E2%80%99%20Use%20of%20Resources%2C%20Evaluation%20 of%20Resources%2C%20and%20Reasons%20for%20Not%20Using%20 Resources.pdf

Graham, L. M., Treves-Kagan, S., Magee, E. P., DeLong, S. M., Ashley, O. S., Macy, R. J., . . . Bowling, J. M. (2017). Sexual assault policies and consent definitions: A nationally representative investigation of United States colleges and universi- ties. *Journal of School Violence*, *16*, 243-258. doi:10.1080/15388220.2017.131 8572

Griner, S. B., Vamos, C. A., Thompson, E. L., Logan, R., Vazquez-Otero, C., & Daley, E. M. (2017). The intersection of gender identity and violence: Victimization

experienced by transgender college students. *Journal of Interpersonal Violence*. Advance online publication. doi:10.1177/0886260517723743

Jordan, C. E., Combs, J. L., & Smith, G. T. (2014). An exploration of sexual victimization and academic performance among college women. *Trauma, Violence, & Abuse*, *15*, 191-200. doi:10.1177/1524838014520637

Kaasa, S., Fisher, B., Cantor, D., & Townsend, R. (2016). *Recurring victimization in the AAU climate survey on sexual assault and sexual misconduct*. Rockville, MD: Westat.

Krebs, C. P., Barrick, K., Lindquist, C. H., Crosby, C. M., Boyd, C., & Bogan, Y. (2011). The sexual assault of undergraduate women at Historically Black Colleges and Universities (HBCUs). *Journal of Interpersonal Violence*, *26*, 3640-3666. doi:10.1177/0886260511403759

Lévesque, S., Rodrigue, C., Beaulieu-Prévost, D., Blais, M., Boislard, M. A., & Lévy, J. J. (2016). Intimate partner violence, sexual assault, and reproductive health among university women. *Canadian Journal of Human Sexuality*, *25*, 1-12. doi:10.3138/cjhs.251-A5

Loya, R. M. (2015). Rape as an economic crime: The impact of sexual violence on survivors' employment and economic well-being. *Journal of Interpersonal Violence*, *30*, 2793-2813. doi:10.1177/0886260514554291

Lund, E. M., & Thomas, K. B. (2015). Necessary but not sufficient: Sexual assault information on college and university websites. *Psychology of Women Quarterly*, *39*, 530-538. doi:10.1177/0361684315598286

Martin, S. L., Ashley, O. S., & Hill, J. (2017). Sexual violence among college students: Prevalence, risk factors, consequences, and promising practices for prevention. In A. P. Giardino, S. P. Starling, S. L. Rotolo, M. L. Weaver, P. K. Speck, & D. K. Faugno (Eds.), *Sexual assault across the life span: Special settings and survivor populations* (2nd ed., Vol. 3, pp. 63-90). St. Louis, MO: STM Learning.

Martin, S. L., Fisher, B. S., Warner, T. D., Krebs, C. P., & Lindquist, C. H. (2011). Women's sexual orientations and their experiences of sexual assault before and during university. *Women's Health Issues*, *21*, 199-205. doi:10.1016/j.whi.2010.12.002

McAlister, A. L., Perry, C. L., & Parcel, G. S. (2008). How individuals, environments, and health behaviors interact: Social cognitive theory. In K. Glanz, B. K. Rimer, & K. Viswanath (Eds.), *Health behavior and health education: Theory, research, and practice* (4th ed., pp. 169-174). San Francisco, CA: Jossey-Bass.

Mellins, C. A., Walsh, K., Sarvet, A. L., Wall, M., Gilbert, L., Santelli, J. S., . . . Bah, K. (2017). Sexual assault incidents among college undergraduates: Prevalence and factors associated with risk. *PLoS ONE*, *12*(11). doi:10.1371/journal.pone.0186471

Mengo, C., & Black, B. M. (2016). Violence victimization on a college campus. *Journal of College Student Retention: Research, Theory & Practice*, *18*, 234-248. doi:10.1177/1521025115584750

National Center for Education Statistics. (2015). *Integrated postsecondary education data system* [Data set]. Retrieved from https://nces.ed.gov/ipeds/Home/UseTheData

Office of the Press Secretary. (2014). *Memorandum: Establishing a White House Task Force to Protect Students from Sexual Assault*. Retrieved from https://obamawhitehouse.archives.gov/the-press-office/2014/01/22/memorandum-establishing-white-house-task-force-protect-students-sexual-a

Paul, L. A., & Gray, M. J. (2011). Sexual assault programming on college campuses: Using social psychological belief and behavior change principles to improve outcomes. *Trauma, Violence, & Abuse*, *12*, 99-109. doi:10.1177/1524838010390710

Peterson, C., DeGue, S., Florence, C., & Lokey, C. N. (2017). Lifetime economic burden of rape among U.S. adults. *American Journal of Preventive Medicine*, *52*, 691-701. doi:10.1016/j.amepre.2016.11.014

Rhew, I. C., Stappenbeck, C. A., Bedard-Gilligan, M., Kaysen, D., & Hughes, T. (2017). Effects of sexual assault on alcohol use and consequences among young adult sexual minority women. *Journal of Consulting and Clinical Psychology*, *85*, 424-433. doi:10.1037/ccp0000202

Richards, T. N., Branch, K. A., Fleury-Steiner, R. E., & Kafonek, K. (2017). A feminist analysis of campus sexual assault policies: Results from a national sample. *Family Relations*, *66*, 104-115. doi:10.1111/fare.12236

Student Safety: Sexual Assault Act, Cal. SB-967 (2013-2014). Chapter 748. (Cal. Stat. 2014).

Turchik, J. A. (2012). Sexual victimization among male college students: Assault severity, sexual functioning, and health risk behaviors. *Psychology of Men & Masculinity*, *13*, 243. doi:10.1037/a0024605

U.S. Department of Education. (2017a). *Dear colleague letter* [Significant guidance document]. Retrieved from https://www2.ed.gov/about/offices/list/ocr/letters/colleague-title-ix-201709.pdf

U.S. Department of Education. (2017b). *Q&A on campus sexual misconduct*. Retrieved from https://www2.ed.gov/about/offices/list/ocr/docs/qa-title-ix201709.pdf

Westat. (2015). *Executive Summary: Report on the AAU Climate Survey on Sexual Assault and Sexual Misconduct*. Retrieved from https://www.aau.edu/sites/default/files/%40%20Files/Climate%20Survey/Executive%20Summary%2012-14-15.pdf

White House Task Force to Protect Students From Sexual Assault. (2014). *Checklist for campus sexual misconduct policies*. Retrieved from https://www.justice.gov/ovw/page/file/910271/download

Author Biographies

Stephanie M. DeLong, MPH, is a doctoral candidate in the Department of Epidemiology at the University of North Carolina at Chapel Hill, also minoring in the Department of Health Behavior. Her research focuses on gender-based violence (GBV) experienced among adolescents and young adults internationally and domestically, with an emphasis on intimate partner violence and campus sexual assault. Other research interests include intervention design, conducting randomized controlled trials, and the translation of research into practice.

Laurie M. Graham, MSW, is a Caroline H. and Thomas S. Royster Fellow and doctoral student in the University of North Carolina at Chapel Hill School of Social Work. As a practitioner, she has worked with various agencies to provide support services for survivors of GBV and violence prevention programming. Her research and practice focus on GBV-related intervention and prevention and bridging the gap between research and practice. She has particular research interests in sexual violence perpetration prevention and human trafficking, as well as developing and evaluating prevention strategies that simultaneously prevent multiple forms of violent behavior.

Erin P. Magee, MSW, MPH, is a graduate of the Department of Maternal and Child Health at the Gillings School of Global Public Health and of the School of Social Work at the University of North Carolina at Chapel Hill. Her primary areas of research interest include GBV/campus sexual assault and healthy teen dating behaviors. Other research interests include measurement of gender and sexual orientation in surveys and routine health data collection.

Sarah Treves-Kagan, MPH, is a William R. Kenan Fellow and doctoral student in health behavior at the University of North Carolina at Chapel Hill focusing on social justice, health disparities, and violence prevention. She has conducted research, advocacy, service delivery and government programming on sexual assault, GBV, and youth homicide in domestic and international settings. Her work particularly focuses on structural approaches to reducing violence among vulnerable populations. Her work has included research projects, and interventions and programming for at-risk youth, adolescents, lesbian, gay, bisexual, transgender (LGBT) populations, rural communities, and low-income settings.

Christine L. Gray, MPH, is a doctoral candidate of epidemiology at the University of North Carolina at Chapel Hill interested in how social and environmental structures affect health in vulnerable populations. Her current research includes examining traumatic experiences and well-being among orphans in different care settings in low- and middle-income countries and local sustainability of trauma-informed interventions. She previously worked with the Center for the Study of Traumatic Stress on trauma-informed interventions for active duty service members and developed programs in local and tribal health agencies as part of the CDC's Public Health Prevention Service.

Alison M. McClay is a master of public health candidate in the Department of Maternal and Child Health in Gillings School of Global Public Health at the University of North Carolina at Chapel Hill. Her research interests focus on sexual and reproductive health among adolescents and young adults, with an emphasis on contraceptive uptake, education, and disparities in the American South. Other interests include advocacy, policy development, preconception health, and reproductive justice.

Samantha M. Zarnick is an undergraduate student at the University of North Carolina at Chapel Hill pursuing degrees in women's and gender studies and biochemistry. She has an interest in GBV research and is an advocate for survivors at the local rape crisis center.

Lawrence L. Kupper, PhD, is an emeritus alumni distinguished professor and former associate chair, Department of Biostatistics, Gillings School of Global Public Health, University of North Carolina at Chapel Hill. His primary research efforts concern the development of novel statistical methods for the design and analysis of public health research studies. His areas of research collaboration include environmental and occupational health, epidemiology, toxicology and teratology, medicine and dentistry, genetics, and women's and children's health. He is an elected fellow of the American Statistical Association.

Rebecca J. Macy, MSW, PhD, is the L. Richardson Preyer Distinguished Chair for Strengthening Families at UNC Chapel Hill's School of Social Work. She is the editor-in-chief for the *Journal of Family Violence*. She has 15 years of experience conducting community-based studies focusing on intimate partner violence, sexual violence, and human trafficking. She has received funding for research from foundations, federal agencies, and state government. She has published more than 70 articles, chapters, and commentaries. Her research has been recognized with awards from the Office of the University of North Carolina Provost and the Orange County Rape Crisis Center.

Olivia S. Ashley, DrPH, is a senior public health scientist in RTI International's Military and Family Risk Behavior Research Program. She has 30 years of professional experience providing direct services, conducting research, and evaluating prevention programs. She leads a project to develop, produce videos for, and program tablet- and Web-based interventions to prevent sexual assault for Air Force Basic Military Training for a randomized trial. She previously led a randomized evaluation of teen dating violence prevention programming and served as a senior advisor on a National Institute of Child Health and Human Development grant to adapt evidence-based dating violence prevention for pregnant or parenting teens.

Audrey Pettifor, PhD, is a professor in the Department of Epidemiology at UNC Chapel Hill and faculty fellow of the Carolina Population Center. She is an epidemiologist whose research focuses on structural determinants of HIV/sexually transmitted infections in sub-Saharan Africa among adolescents and young women. She has expertise in sexual behavior, HIV prevention, HIV testing, and structural interventions among adolescents and young adults, and has published extensively in the area of HIV and sexual behavior among youth in sub-Saharan Africa. She is co-chair of the HIV Prevention Trials Network adolescent science committee and has published more than 100 articles in peer reviewed journals.

Kathryn E. Moracco, PhD, MPH, is a research associate professor and MPH program director in the Department of Health Behavior at UNC Chapel Hill. She is also the associate director of the UNC Injury Prevention Research Center. Her current research includes federally funded evaluations of a community-based sexual violence prevention program, domestic violence protective orders (DVPOs), and a primary care-based IPV screening and brief intervention, as well as studies of e-filing of

DVPOs, and firearm confiscation and surrender policies in criminal and civil domestic violence cases. She has published more than 70 peer-reviewed articles, book chapters, and invited commentaries.

Sandra L. Martin, PhD, is a professor in the Department of Maternal and Child Health, and associate dean for research, in the Gillings School of Global Public Health at the University of North Carolina at Chapel Hill. Her research includes campus climate surveys of sexual misconduct, sexual assault prevention programs for the military, high school–based programs to educate students about sex trafficking and refer high-risk/trafficked students to appropriate resources, evaluation of sexual assault prevention programs for high-risk adolescents and young men, and works to better understand differential responses/sequela after sexual assault, including the development of posttraumatic stress disorder.