

ACHA Guidelines

Position Statement on Preventing Sexual Violence on College and University Campuses

The American College Health Association (ACHA) recognizes sexual violence as a serious campus and public health issue. The *ACHA Campus Violence White Paper* documents research that reveals high rates of sexual violence on college and university campuses and low levels of reporting of these incidents by students.¹ In addition, the ACHA-National College Health Assessment (ACHA-NCHA) conducted in spring 2011 reveals 5.9% of students (7.4% female and 3.1% male) reported within the last 12 months they were sexually touched without their consent. *Healthy People 2020* identifies “injury and violence prevention” as a leading public health indicator. In recognition of this campus health concern, ACHA’s *Healthy Campus 2020* developed health objectives that serve as a basis for developing plans and programs to reduce sexual violence as well as injury prevention.

High levels of victimization, coupled with cultural acceptance of rape myths, create an environment where victimized students are disempowered and alienated from their college experiences. This environment has resulted in impediments to academic success, lower graduation rates, health problems, and persistent mental health issues. Students cannot learn in an atmosphere where they do not feel safe. ACHA members are uniquely positioned to play a leading role in sexual violence prevention and to create a culture of caring. College campuses contain rich venues for educating students about healthy sexuality and communication skills.

¹ Carr, J.L., & Ward, R.L. (2006). ACHA campus violence white paper. *NASPA Journal*, 43(2), 380-409.

Reframing the Issue

All levels of prevention are necessary to stop the occurrence of sexual violence and to significantly improve the health status of campus communities. True primary prevention is population-based using environmental and system-level strategies, policies, and actions that prevent sexual violence from initially occurring. The U.S. Centers for Disease Control and Prevention suggests that sexual violence is conceptualized by risk and protective factors on individual, relationship, community, and society levels. Sexual violence prevention activities include those that are aimed at addressing the domains of influence of potential victims, perpetrators, and bystanders. College health professionals can facilitate conversations about sex that focus on individual choices along the continuum of sexual activity. These conversations identify and popularize healthy sexuality that respects gender, sexual orientation, and gender identity.

The creation of a living and learning environment free of sexual violence is the ultimate goal. This vision requires a cultural shift that moves beyond the mere prevention of violence towards a community that adopts healthy and caring sexual attitudes and practices. Faculty, staff, administrators, and students must play key roles in the creation of a campus culture that reflects civility, honor, respect, and nonviolence. This campus/community culture shift conceptualizes sexual activity as a choice and as consensual. Consensual sexual activity involves the presence of the word “yes” without incapacitation of alcohol or other drugs, pressure, force, threat, or intimidation. As this conversation moves from the shadows into the public arena, individuals can learn skills necessary for consent and intimate communication.

Engaging the Campus Community

Successful primary prevention of sexual violence requires recognition of the problem at the highest levels of campus leadership. Likewise, policy development and accountability for all policies that reflect intolerance for sexual violence across its continuum — from sexist statements to sexual harassment to sexual assault — should be enforced. Further, it is the responsibility of faculty, staff, and administrators to serve as mentors and role models for students as well as to provide educative opportunities for the primary prevention of sexual violence.

Efforts to prevent sexual violence should be multifaceted and include but not be limited to such strategies as classroom discussions, health promotion programs, media campaigns, peer education, and discussions during student health and counseling services visits. It is also critical to infuse messages about healthy sexuality and sexual violence prevention into the curriculum at all levels. Faculty in women's studies, biology, health sciences, religious studies, sociology, psychology, criminal justice, ethics, and other areas can be mobilized to share research and establish critical thinking skills to assist students in making healthy decisions that will decrease sexual violence.

A critical component of successful primary prevention of sexual violence is its recognition as a public health issue that involves both men and women. Encouraging the commitment of men to serve as positive role models for other men to be intolerant of sexual violence is as fundamental to prevention of sexual violence as are programs that provide continuous opportunities that empower women to develop self-respect, self-esteem, and assertiveness. Further, student groups that research has identified as high-risk for actions of sexual violence and vulnerable populations at-risk for victimization should be addressed with specific outreach efforts.

Alcohol use/abuse is implicated in the majority of incidents of campus sexual assaults. Therefore, awareness initiatives related to alcohol use/abuse and its relationship to sexual violence need to be

consistent and comprehensive across policy, education, and role modeling.

In addition, campus communities need to develop programs on bystander intervention techniques. Bystander techniques are skills that allow students, faculty, and staff to recognize the continuum of violence and empower them to intervene, prevent, or stop inappropriate comments and actions. The goal is to create a culture shift from bystander apathy to bystander intervention, thus creating a culture in which violence cannot occur.

Recommended Actions*

ACHA recommends the following actions be taken to address policy, prevention, and intervention as it pertains to sexual violence:

1. Develop a policy statement and directive from the president/chancellor of the institution that demonstrates recognition of sexual violence as a problem, a commitment to reduce its occurrence, and action steps for the campus community.
2. Develop a multidisciplinary taskforce on campus to address sexual violence prevention and response services that includes high-level campus administration, academic leaders, student leaders, and community partnerships.
3. Create policies that reflect an expectation of civility, honor, respect, and nonviolence for all members of the community and encourage behaviors that build a sense of community.
4. Revise, enforce, and widely distribute disciplinary regulations in the student code that demonstrate an intolerance of all forms of sexual violence and implement sanctions for violations by faculty, staff, and students.
5. Educate disciplinary boards on perpetrator patterns and possible victim responses and patterns.

* These recommended actions serve only as a guide to building a comprehensive program. They should not be construed as compliance actions related to state or federal statutes, such as the Clery Act, Title IX, or any other applicable statutes for your institution.

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6. Provide comprehensive training on all aspects of sexual violence for campus administrators; campus law enforcement; health and counseling services staff; faculty; staff; and student leaders that includes the dynamics of sexual violence, access to care, victim response, and federal/state statutes.
7. Develop a coordinated, seamless, victim-centered response service between campus and community resources that offers the options of:
 - anonymous reporting
 - law enforcement involvement
 - judicial/disciplinary board actions
 - forensic/medical care
 - emergency contraception
 - academic/housing accommodations
 - follow-up counseling, support, and advocacy
8. Integrate screening for sexual violence into patient history protocols.
9. Adhere to federal, state, and local statutes and reporting requirements.
10. Integrate sexual violence prevention education into curricular and non-curricular activities.
11. Offer residence hall and extra-curricular activities that are alcohol free.
12. Develop educational/outreach programming that:
 - recognizes that sexual violence is a learned behavior
 - teaches bystander intervention techniques
 - addresses the role of consent in sexual relationships
 - encourages the involvement of men in preventing sexual violence
 - addresses alcohol and other drugs issues and the connection with sexual violence
 - provides concepts that encourage healthy, consensual sexual relationships
 - addresses non-stranger sexual violence and dispels traditional beliefs
13. Create and codify amnesty policies for underage drinking for victims who report sexual assault.
14. Publish and announce the availability of protocols on campus websites for all campus members to access resources, referrals, and helping strategies for victims of sexual violence.