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

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ADDRESSING ALCOHOL’S ROLE IN CAMPUS SEXUAL ASSAULT

A Toolkit by and for Prevention Specialists

CAPP A
Campus Advocacy & Prevention Professionals Association

Prevention Innovations
Ending Sexual and Relationship Violence and Stalking
ACKNOWLEDGMENTS

Addressing Alcohol’s Role in Campus Sexual Assault: A Toolkit by and for Prevention Specialists was developed through a participatory action research project conducted alongside the Campus Advocacy and Prevention Professionals Association (CAPPA) and funded by an Innovative Research Award from the Prevention Innovations Research Center (PIRC) at the University of New Hampshire.

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SUGGESTED CITATION


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How to Use This Toolkit

This toolkit is organized into sections based on key areas identified by prevention specialists. While it is ideal to
first review the toolkit from start to finish, each section can also be read individually. Each section of the toolkit
also ends with NEXT STEPS, which present questions, activities, and reflections based on the
material in that section. These prompts can be useful for engaging key stakeholders in collaborative efforts on
addressing alcohol’s role in campus sexual assault.
Purpose, Methods, and Notes

Partners

The Campus Advocacy and Prevention Professionals Association (CAPPAP) is a national organization that provides space for campus-based advocates and prevention specialists to come together to share their expertise, develop best practices, and support each other. CAPPAP’s work is rooted in social justice, supporting survivors, and fostering communities that value evidence-based practice, practice-based research, and self-care. A partnership between CAPPAP and Prevention Innovations Research Center (PIRC) at the University of New Hampshire, which is internationally recognized for its work toward ending sexual and relationship violence and stalking through the power of effective practitioner and research partnerships sparked the ideal synergy to create this toolkit.

Origin of This Toolkit

Alcohol use plays a role in 50 to 70% of campus sexual assaults, which has generated heightened consideration of the intersections of sexual assault and alcohol use on campus.1-3 Existing research1,3 and guidance from organizations including ACHA4, CDC5, and CALCASA6 stress the importance of consistency between alcohol use/abuse prevention efforts and sexual assault prevention efforts that use individual, relationship, community, and policy-level strategies. However, there is limited guidance for sexual assault prevention specialists on how to do so. Addressing Alcohol’s Role in Campus Sexual Assault: A Toolkit by and for Prevention Specialists integrates research and practice evidence to help prevention specialists begin to answer the frequently asked question: How should our campus address alcohol in our sexual assault prevention efforts?

Process to Create This Toolkit

To develop this toolkit, we (the authors) synthesized the best available evidence through reviewing the best available research and practice literature and engaging in a participatory action research project alongside CAPPAP. The participatory action research alongside CAPPAP consisted of:

A) 23 in-depth interviews with campus-based prevention specialists (hereafter referred to as prevention specialists);

B) A series of email inquiries and small group discussions to refine key topic areas;

C) Solicitations of innovative/promising practices.

We then created a draft of our findings and consulted with interview participants for feedback. Lastly, eleven expert reviewers provided feedback that was incorporated to create this final version. For a thorough description of the methods used for this project, see Appendix A.

Notes & Terminology

We use the term “campus sexual assault (CSA)” as an umbrella term to describe rape, attempted rape, sexual assault, and other forms of nonconsensual sexual contact. This definition is intended to reflect the diversity of researchers and practitioners who use a variety of terms to describe CSA and other forms of violence.

While students may use a variety of terms to describe themselves, this toolkit uses the terms “victim” and “survivor” interchangeably for anyone who has experienced CSA.

We use the term “perpetrator” to describe someone who commits CSA.

These were the terms most frequently used by prevention specialists to refer to those directly involved in CSA situations. However, it is important to recognize that individuals can have both experienced and perpetrated CSA or other forms of harm.
This toolkit provides specific guidance on addressing alcohol’s role in campus sexual assault, centering Sexual Assault Prevention Specialists as the intended audience. If you are new to sexual assault prevention or are looking for additional general information, the following companion resources may be helpful to consult in conjunction with this toolkit.

**COMPREHENSIVE SEXUAL VIOLENCE PREVENTION GUIDANCE**

<table>
<thead>
<tr>
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<th>Title</th>
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<tbody>
<tr>
<td>Centers for Disease Control and Prevention (CDC)</td>
<td>Stop SV: A Technical Package to Prevent Sexual Violence</td>
</tr>
<tr>
<td>National Sexual Violence Resource Center (NSVRC)</td>
<td>Sexual Violence and the Spectrum of Prevention: Towards a Community Solution</td>
</tr>
<tr>
<td>Futures Without Violence</td>
<td>Beyond Title IX: Guidelines for Preventing and Responding to Gender-Based Violence in Higher Education</td>
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<tr>
<td>American College Health Association (ACHA)</td>
<td>Addressing Sexual and Relationship Violence: A Trauma-Informed Approach</td>
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<td>Texas Association Against Sexual Assault (TAASA)</td>
<td>Engaging Communities in Sexual Violence Prevention</td>
</tr>
<tr>
<td>White House Task Force to Protect Students from Sexual Assault</td>
<td>First Report (April 2014) and Second Report (January 2017)</td>
</tr>
</tbody>
</table>

**SELECTING PREVENTION PRODUCTS**

<table>
<thead>
<tr>
<th>Resource</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>PreventConnect</td>
<td>Selecting the Right Online Module for Interpersonal Violence Prevention</td>
</tr>
<tr>
<td>Prevention Innovations Research Center (PIRC)</td>
<td>Questions to Ask When Considering Sexual and Relationship Violence and Stalking Prevention Products</td>
</tr>
</tbody>
</table>
COMPANION RESOURCES

ASSESSING READINESS FOR PREVENTION

Pennsylvania Coalition Against Rape (PCAR)
Assessing Campus Readiness for Prevention: Supporting Campuses in Creating Safe and Respectful Communities

COMMUNICATIONS

Centers for Disease Control and Prevention (CDC)
Stop SV: A Technical Package to Prevent Sexual Violence

Oregon Attorney General’s Sexual Assault Task Force
A Guiding Document for Media Response and Community Conversations on SV and Substance Use

SYSTEMATIC REVIEWS & META-ANALYSES

Fedina, Holmes, and Backes (2018) in Trauma, Violence, and Abuse
Campus sexual assault: A systematic review of prevalence research from 2000 to 2015

A systematic review of primary prevention strategies for sexual violence prevention

Katz and Moore (2013) in Violence and Victims
Bystander education training for campus sexual assault prevention: An initial meta-analysis

Tharp, DeGue, Valle, Brookmeyer, Massetti, and Matjasko (2012) in Trauma, Violence, and Abuse
A systematic qualitative review of risk and protective factors for sexual violence perpetration

ATHLETICS

National Collegiate Athletic Association (NCAA)
Addressing Sexual Assault and Interpersonal Violence: Athletics’ Role in Support of Healthy and Safe Campuses

ATHLETICS

National Collegiate Athletic Association (NCAA)
Addressing Sexual Assault and Interpersonal Violence: Athletics’ Role in Support of Healthy and Safe Campuses
**Alcohol’s Role in Campus Sexual Assault: A Brief Overview**

Studies published between 2002 and 2009 have demonstrated that approximately 50-70% of CSA involves alcohol.\(^1\)\(^-\)\(^3\) While this does not mean that alcohol causes CSA, it does mean that alcohol is present in these situations. It is important to understand the nuances of the role that alcohol may play in CSA; this co-occurrence is far from simple and has important for crafting prevention messages and interventions. *Incapacitated sexual assault* is a term used to describe when victims are unable to consent to sexual acts because they are incapacitated by alcohol or other drugs.\(^2\)

**Perpetration**

In her oft-cited work, Antonia Abbey\(^1\) describes a conceptual model for the effects of alcohol in sexual assault. Abbey explains that rather than alcohol causing sexual assault, perpetrators may consciously or unconsciously drink alcohol to have a justification for sexually assaulting someone. Alcohol can provide a catalyst for perpetrators who hold toxic attitudes and beliefs to act upon those beliefs. Perpetrators may also act out more severely than they would without the cover of intoxication. While perpetrators who have been drinking use the “excuse-giving function” of alcohol, victims who have been drinking report feeling more intense guilt and self-blame for the sexual assault.\(^1\)

Further, certain person-specific traits may lead to both increased alcohol use and a greater likelihood to commit sexual assault, such as personal characteristics, attitudes, and prior life experiences.\(^7\),\(^8\) Specific attributes include:

- Antisocial behavior
- Low empathy
- Belief in traditional gender roles
- Acceptance of rape myths
- Stereotypes about women who drink
- Having peers with norms approving of delinquency and objectification of women
- Childhood sexual abuse.

Conversely, neither personal characteristics nor attitudes are linked to a greater likelihood of sexual assault victimization.\(^7\)

Alcohol use may also interact with perpetrators’ person-specific traits. During an assault, alcohol can impact perpetrator likelihood of aggression: “Intoxicated men may have more difficulty generating non-aggressive solutions to gaining sexual satisfaction.”\(^7\) While intoxicated, perpetrators will focus more on their own sexual arousal or feelings of entitlement and focus less on internalized morality or future potential consequences of their behavior. Other studies have shown that hostile masculinity, distrustful feelings toward women coupled with misogynist attitudes, predicts sexual assault perpetration and that heavy drinking can escalate men’s harmful attitudes into harmful actions.\(^1\),\(^8\) A limitation of the current research in the area alcohol’s role in sexual assault is that almost all of it focuses on men as perpetrators and women as victims. In addition, further research is needed on how faculty and staff use alcohol to perpetrate CSA against students.

One prevention specialist described how alcohol serves as both camouflage and a weapon:

1. Alcohol is **camouflage** for an assault to occur. “If most of the people around me are intoxicated, it’s far easier for me to engage in any problematic behavior without getting caught. If I rob someone, graffiti their walls, or harm another partygoer, it’s far less likely that anyone will notice or that they will remember significant details of what happened.”

2. Alcohol is a **weapon** to incapacitate a victim. “It’s the most accessible, easy-to-use weapon that someone has at their disposal. They can pick targets who are barely able to stand at 2am to make it easier for them to perpetrate.”
Almost all the prevention specialists we interviewed agreed that focusing on victims’ use of alcohol is neither efficient nor effective as a prevention message. CSA victimization can lead to increased alcohol use by the victim, compounding their risk of revictimization given that a potential victims’ ability and degree of resistance is often lower when they have been drinking. In addition, victims who were drinking prior to being assaulted may experience greater psychological distress and self-blame, which can be exacerbated by prevention efforts that even tacitly hold the survivor responsible. Alcohol can also impair memory retention, which can lead to survivor self-blame, prevent them from seeking services for fear of not being believed, or victim-blaming.

CONSENT

Prevention specialists also spoke to the need for more nuanced conversations about consensual sex under the influence of alcohol. Participants were challenged to talk about CSA with students authentically. They struggled with policy terminology that was hard for students to translate into their lived experiences with sex and relationships. For example, prevention specialists were uncertain how to describe when someone moves from intoxicated to incapacitated, particularly as every person is different. This uncertainty often leads campuses to cultivate a stance that any sexual activity under the influence of alcohol could be CSA. Prevention specialists expressed frustration with this idea, “We tell them that any sexual activity involving alcohol could be sexual assault, but they’ve had consensual sex while drinking or even drunk. Survivors also get insulted by this, as they know the difference too between drunk sex and rape. Students tune us out because they think we don’t get it.” Participants also expressed the importance of discussing the, often gendered, double standard that excuses perpetration behavior due to alcohol use but blames victims because they used alcohol.

Recent research presents a more nuanced picture of alcohol, sex, CSA, and the situations in which they all co-occur. Student focus group studies demonstrate that there may be different types of hookups that involve alcohol, as well as a variety of ways that students refuse sex.

Bystanders

There is currently limited research available on how bystanders’ decisions and intervention actions may be affected by either their own alcohol consumption or that of the perpetrator or victim. One study asked students to imagine various scenarios in which they were intoxicated or sober, and then asked them what they would do if they saw someone about to leave a party for a “drunken hookup.” Those who imagined being sober were much more likely to intervene and more positive about how intervening would go compared to those who imagined themselves intoxicated in the scenario. Student respondents in another study blamed a victim who was drinking more than one who was sober; and blamed the perpetrator less when the victim was drinking.

In another study, bystander intoxication was only important in conjunction with other situational factors: women were less likely to intervene to stop physical violence when they had been drinking and knew the perpetrator; but intoxication did not influence male bystanders’ reported decisions to intervene. In one of the few studies examining both male and female victimization, respondents, after reading a description of a college party situation in which many individuals were drinking, rarely identified men as needing help or as a potential victim of CSA.
While there are many studies that situate CSA within party scenarios, no current research directly compares sober and intoxicated bystanders’ actual behaviors. Prevention specialists mentioned, in the absence of such evidence, that it is important to engage students in the creation of scenarios for bystander intervention training so that the situations students practice for are like ones they may actually encounter. Participants also stressed the importance of centering the roles of identity and power in bystander intervention, as there is no one-size-fits-all approach, and it is critical for students to hear from students with similar backgrounds, lived experiences, or personalities. How a student might choose to intervene in situations involving both alcohol and sexual assault will vary based on the intersections of their identities. This advice mirrors social self-identification research by Potter and colleagues that suggests students are more likely to develop intervention skills and helping intentions if they see themselves and their peer groups mirrored in prevention programming.

**Policy**

There is also limited research on the impact of policy on alcohol’s role in sexual assault. One study that examined institutions’ alcohol policies found that campuses with less restrictive alcohol possession policies had more reported incidents of CSA. However, a limitation to this study and others that rely on reporting data is that more permissive policies may also lead to increased reporting. In a national review of CSA policies, researchers found that over half of policy websites listed alcohol intoxication as a reason a student would not be able to give consent, while about one tenth of the policy websites asserted that victim alcohol use or lack of clear communication could lead to CSA.

Many of the prevention specialists we interviewed also spoke to the importance of medical amnesty policies, policies that exempt students from facing sanctions for underaged drinking if they are seeking help for a student experiencing harm, including CSA. Participants supported these policies because they: a) keep the focus of CSA investigations on the assault and not on underage drinking, b) ensure students could access help and support, and c) enable bystanders to intervene without fear of consequences or prioritizing self-preservation.

Lippy and DeGue conducted a review to determine the impact of alcohol policies on sexual assault prevention efforts in a range of communities, including on college campuses. Their review summarizes current evidence of the effectiveness of practices such as increasing alcohol taxes, restricting happy hour discounts, limiting the days or times of alcohol sales, banning the sale of alcohol in certain areas, increasing enforcement of laws prohibiting over-service, and limiting alcohol marketing. On college campuses specifically, they found that banning alcohol in specific residence halls, banning alcohol on campus, and using social norm campaigns showed promise to decrease high risk drinking and nonconsensual sexual advances. Participants also expressed concerns that alcohol or party bans on campus could simply move the partying off campus away from campus supports. However, they also found that studies indicate that if there is high availability of alcohol in the surrounding community, restricting use on campus has a limited effect. This research suggests that it may be beneficial for campuses to partner with their local communities to enact policies that will reduce high risk drinking.

**Prevention Efforts**

Prevention efforts that address alcohol’s role in CSA will continue to benefit from research that avoids a one-size-fits-all approach to the idea that there is one prevailing “hookup culture.” As our prevention specialist interviews frequently elucidated, the timing of the intervention in students’ academic careers plays a significant factor. One participant emphasized that some “students come to campus
without much sex education or alcohol education let alone sexual assault prevention education. Talking about how sex and alcohol intersect seems like a varsity level conversation, and our students are still often very much at 101.” Prevention specialists want to urgently discuss the nuances of sex and alcohol’s intersection with students as soon as they arrive on campus, but many students lack a basic understanding of either sex or alcohol use, let alone their combination. Comprehensive sex education, alcohol abuse prevention education, and sexual and dating violence education in elementary, middle, and high schools would help mitigate this pressure on IHEs. Another participant expanded on this theme by stating, “we have too much to do in too little time. Alcohol’s role can feel like a footnote and maybe it has to be if I only have 15 minutes to talk about sexual assault.”

To quote one prevention specialist, “Alcohol does not cause sexual assault. Period. But if we don’t talk about it in our sexual assault prevention work we’re missing a critical factor. We’re often so worried about getting [alcohol] wrong that we’re afraid to have these conversations.” Given that a small percentage of students commit most CSA, prevention efforts should focus on making sexual assault unacceptable in the community and promoting accountability for those who commit sexual assault. The rest of this toolkit will discuss prevention efforts through a trauma-informed and community-engaged lens.

Alcohol does not cause sexual assault. Period.

But if we don’t talk about it in our sexual assault prevention work we’re missing a critical factor.

We’re often so worried about getting [alcohol] wrong that we’re afraid to have these conversations.

**NEXT STEPS**

1. Are there ways to further integrate research into your prevention efforts?

2. Are there researchers/faculty at your institution that focus on CSA or a related topic?
SOCIAL NORMS

“Social norms” are what most people on a campus think most other people on a campus usually do or think. These are the typical behaviors and attitudes believed to exist within a community. One of the most consistent findings from social norms research is that most individuals (campus staff, students, professors, and others in the campus community) routinely misperceive social norms. Individuals get norms wrong a lot, and often in predictable ways.12-27

MISPERCEPTIONS

Misperceived social norms about alcohol use by college students (how much students drink, how many students are heavy drinkers, what behavior is acceptable while drinking, whether students approve of binge drinking, etc.) exist on nearly every campus. Research consistently finds that students tend to think other students drink more and approve more of binge drinking; however, actual rates of drinking and excessive drinking on campus are much lower.25, 29-30 Studies have also shown that high-risk alcohol use explains the relationship between fraternity or athletic team membership and sexual aggression.31,32 When students participate in groups whose members hold rape-supportive attitudes, they may be less likely to intervene as bystanders or to report incidents of CSA.33 For example, research suggests that men who have more rape-supportive attitudes and adhere to stricter gender roles are drawn to fraternity membership, but the norms of the fraternity itself can either exacerbate or diminish those tendencies.32

Misperceptions of social norms also occur when alcohol is present in a potential sexual assault situation, and these misperceptions can influence whether a potential helper steps in or remains a passive bystander.34 Many students view drunken hookups as an inseparable part of the college party atmosphere, a perception that might lead them to be less wary of someone using alcohol to incapacitate a victim.35 Two studies have found inconsistent relationships between social norms and bystanders’ helping behaviors, but are limited in how generalized those findings should be to different kinds of communities.36 While social norms around alcohol use and the effects of alcohol on potential victims undoubtedly play a role, current research is inconclusive.

Many students in the U.S. believe alcohol lowers their inhibitions and is an acceptable excuse for their choices. Studies show this belief holds true, even when students are not actually drinking alcohol, but only think they are.1,37 In one study of college students, 62% of participants responded that the male perpetrator in a sexual assault scenario against a female student had committed the assault because of his alcohol consumption.17 When prevention efforts frame alcohol as causing CSA, these excuses are further amplified. U.S. culture no longer accepts “I was drunk,” as an excuse for harming someone while drinking and driving. As prevention efforts across the social ecology have shifted these norms, we have seen a reduction in drunk driving prevalence.38 Hopefully, this same shift in norms can take place for CSA.

NEXT STEPS

1. Using this section’s information and any data you have on actual and perceived social norms on your campus regarding sexual assault and/or alcohol use, try to brainstorm opportunities to shift or clarify social norms on your campus.

2. Then bring together staff or experts on campus in the community who work in both sexual assault and alcohol abuse prevention and brainstorm again to see what was missing.
SOCIAL JUSTICE

Prevention specialists we talked to frequently pointed to alcohol as a proxy for broader systemic issues on campus. Many felt that alcohol is considered “an untouchable issue,” particularly on campuses with reputations for raucous party cultures deeply influenced by alumni and donors, including those campuses with heavy sorority and fraternity presence or well-recognized athletic teams. One participant summarized this sentiment succinctly, “I see alcohol consumption as a symptom of broader cultural and community issues on our campus. If we work on addressing root cause of sexual violence, oppression, there will be larger implications for equity and accessibility, including sexual violence prevention. I’d like to see us integrate public health and equity frameworks.”

Another prevention specialist stated that “It’s mostly white women doing this work, but primary prevention will involve crafting messages that aren’t just about preventing sexual violence against white women. We need to do better.” One recent study found that white women students were more likely to intervene in a sexual assault scenario if the potential victim was white than if she were black. This study provides just one example of how CSA is perpetuated by oppression. Indeed, several participants echoed that an emphasis on white, straight, able-bodied, U.S. citizen, and wealthy students has led to further marginalization of students of color; transgender, queer, bisexual, lesbian, and gay students; students without class privilege; and students with disabilities. This structural inequity is mirrored in the research, which often focuses on the most privileged students.

In addition, prevention specialists expressed the importance of not making assumptions about student drinking behaviors, especially as there are students who choose not to drink, including for religious or cultural reasons. Even those participants who highlighted the connection between CSA prevention and social justice movements, however, pointed to alcohol’s role as something campus administration often separated from addressing root causes of CSA. One participant summed this up by stating that efforts to address alcohol’s role in CSA tend to be “extremely policy-driven, extremely conduct driven.” Several participants pointed to the importance, therefore, of connecting alcohol’s role in CSA to broader work toward ending oppression.

Participants also described how destabilizing historical campus power structures should involve centering the experiences of those students, faculty, and staff who are the most marginalized. In addition, participants spoke to the need for campus administration and student leadership to take direct guidance from survivors and marginalized people on campus and in the community. They also stressed that those with privileged identities engaging in the labor necessary to create change without co-opting social movements or telling marginalized students what they should want to see on their campuses. Culture change and power change also does not happen immediately and requires significant relationship-building, establishment of trust, and motivated leadership. The below suggestions and ideas are intended to be tools to help you assess your institution and identify: critical inequities that contribute to CSA, readiness to confront intersecting oppressions, where there could be quick solutions, and where more sustained movement is needed. Following are some suggestions prevention specialists provided for starting these conversations.

“IT’S MOSTLY WHITE WOMEN DOING THIS WORK, BUT PRIMARY PREVENTION WILL INVOLVE CRAFTING MESSAGES THAT AREN’T JUST ABOUT PREVENTING SEXUAL VIOLENCE AGAINST WHITE WOMEN. WE NEED TO DO BETTER.”
**Social Justice Conversation Starters**

1. Who controls dissemination of alcohol (informally and formally)?

2. Who controls party spaces on and near campus (informally and formally)?

3. How might different cultural beliefs or community norms around substance use affect disclosure of CSA?

4. Do the students, faculty, and staff working on CSA prevention efforts mirror the diversity of your campus community?
   - When they talk about alcohol’s role in CSA or describe scenarios at parties, are diverse experiences of socializing represented?
   - Does “partying” look the same for all students on campus?
   - When we display scenes of campus parties, whose images are presented?

5. What does bystander intervention look like across groups?
   - Are there some groups that are already experiencing more intervention or policing than other groups?
   - What barriers exist that keep marginalized groups from intervening, and how can your campus work to mitigate those barriers?

**Next Steps**

1. Bringing together campus experts on sexual assault and alcohol abuse prevention to brainstorm answers to the questions above.

2. Ask a colleague in another department (or a faculty member) who does not specialize in sexual assault or alcohol abuse prevention to answer these same questions and then compare your answers with their answers.

3. Ask students (both student leaders and students not in leadership positions) to answer these questions.

4. Identify key areas where numerous stakeholders agree and unpack where folks came up with different responses.

5. Consider thinking through case scenarios in which students hold a variety of intersecting identities.
**KEY CONNECTIONS: ALCOHOL’S ROLE IN CSA ACROSS THE SOCIAL ECOLOGY**

**ALCOHOL’S ROLE IN CSA ACROSS THE SOCIAL ECOLOGY**

Many of the prevention specialists that we interviewed stressed the importance of addressing alcohol’s role in CSA across the social ecology. The following figure summarizes a social-ecological model for CSA prevention based on Dahlberg and Krug’s adaptation of Bronfenbrenner and Evans.

**INDIVIDUAL**

Prevention specialists frequently mentioned that most current strategies to address alcohol’s role in CSA target individual level attitudes, behavior, and beliefs. These efforts seek to change individual behavior through online or in-person education or to identify students at risk for high-risk drinking through screening. They emphasized the need for efforts at the individual level to be trauma-informed and to not insinuate that alcohol causes sexual assault or that survivors are to blame for being sexually assaulted because of their alcohol use.

**RELATIONSHIP**

Relationship level strategies focus on classrooms, families, peers, or intimate partners to shift those who surround potential survivors or perpetrators. Prevention specialists consistently reference that bystander intervention programming could have a powerful role to play in addressing alcohol’s role in CSA if it meaningfully addresses the intersection. They also described the importance of social marketing or norms campaigns; cultivating faculty, staff, and peers as mentors; ensuring consistency of messaging on alcohol in sexual communication and consent programming; and training servers for on-campus parties and bartenders and bouncers at establishments near campus, particularly using a bystander approach. Prevention specialists also pointed to the importance of cross-training peer educators so that peers teaching about CSA prevention would be well-trained on alcohol abuse prevention and vice versa. They also expressed that while parents and families were often overlooked in prevention programming, they are a critical audience. A study of a parent-based intervention showed promising results in reducing the amount of alcohol-involved CSA for first-year college students. One prevention specialist pointed out that she had not known what messages were going to parents and families, if any, but when they sought it out they were alarmed. By shifting the messaging, this prevention specialist found that parents and families were also able to share campus resources and messages with their students.

**COMMUNITY**

Prevention specialists often referenced the importance of using an environmental scan approach alongside students to inventory how the community does or does not support addressing alcohol’s role in sexual assault. Environmental scans involve collecting data to design programming uniquely tailored to a particular campus or community. They described that alumni and donors are key but often overlooked constituents who can either bolster or hinder attempts to address alcohol’s role in sexual assault. Alumni affairs, alcohol abuse prevention staff, and CSA prevention staff could work together to communicate about campus prevention efforts. Prevention specialists mentioned the importance of focusing on campus organization policies, party spaces, physical signage, social media and website
KEY CONNECTIONS: ALCOHOL’S ROLE IN CSA ACROSS THE SOCIAL ECOLOGY

Messaging, conduct and sanctions related to use of alcohol to perpetrate, and campus-wide messaging. They also stressed the key role that neighborhood coalitions and partnerships with local bars and restaurants could have in addressing alcohol’s role in CSA.

SOCIETY & POLICY
As referenced earlier, prevention specialists often bemoaned the emphasis on prevention through a policy lens. They also suggested viewing policy through a prevention lens. Several prevention specialists suggested conducting policy audits on the campus organization, campus, and local level to determine how policy bolsters prevention efforts as well as key areas for improvement. They also described the need to not only establish but widely market medical amnesty policies, consider pricing and timing restrictions on campus and in the community, and establish bar policies related to over-service. In addition, they pointed to sexism in advertising for alcohol as yet another factor in how alcohol and sexual assault intersect. One prevention specialist in particular mentioned the boycott of a local drinking establishment for sexist drink names and party themes.

SUMMARY OF STRATEGIES

**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

**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

**POLICIES & 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 in sexism in advertising of alcohol

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?
TRÁUMA-INFORMED MESSAGING

Addressing alcohol's role in campus sexual assault requires consistent trauma-informed messaging. Trauma-informed messaging centers the role that violence plays in survivors' lives and emphasizes resilience and the unique experiences of the diverse survivors at the IHE.44 As one prevention specialist mentioned, “I think we’ve figured out what NOT to do—don’t victim blame, don’t’ say sexual assault is caused by alcohol—but we’re not really sure what TO do... We really need to move beyond don’ts to give educators direction on what to do.”

**THINGS NOT TO DO IN MESSAGING ABOUT ALCOHOL’S ROLE IN CSA**

- Focus on a survivor’s use of alcohol as a reason to blame them for their experience.
- Avoid the role of alcohol as part of the conversation about sexual assault.
- Allow alcohol to be used as a scapegoat for perpetrator responsibility.
- Use language related to a fictitious ‘gray area.’
- Focus only on extremes of alcohol consumption: not drinking or binge drinking, as most students fall somewhere in the middle.
- Only frame the issues of alcohol and sexual assault as policy/conduct or legal issues.
- Focus on the number of drinks that would get someone to the point of impairment or incapacitation.
- Say that alcohol causes sexual assault.
- Think that teaching people to drink less will eliminate sexual assault from campus.
- Focus on alcohol, parties, hookup culture, etc. as the cause of sexual assault.
- Imply that a person’s choice to drink alcohol makes a subsequent sexual assault their fault.

**CULTIVATING CAMPUS-SPECIFIC MESSAGING ON ALCOHOL’S ROLE IN CSA**

Investing effort to develop a frame that is intentional, incremental, and appropriately timed and projected across a timeline is critical for starting to address alcohol’s role in CSA. Finding partners within your institution’s communications or marketing divisions or within related academic departments can enhance the expertise and perspectives that inform CSA prevention messaging. Messaging that is blaming, shaming, or uses scare tactics to grab attention will be tuned out by students. In addition, overly complicated legal jargon, such as referring to CSA as a “Title IX issue,” does not make for a good soundbite. The topic of violence also has its own unique pitfalls; only discussing instances of CSA involving physical force can act to erase the experiences of less visible but higher frequency forms of violence such as incapacitated CSA, harassment, or groping.

On the other hand, framing violence as a global and community health issue can help contextualize students’ experiences with what they see on the news or learn about in their coursework. Spending time to create examples and train peer educators who both look like and identify with different student populations on campus will help your message resonate throughout campus.21 Lastly, even though we are talking about CSA prevention, our current reality is one where many students come to campus already having experienced sexual violence and prevention efforts need to constantly remind the community to support and believe survivors. Below are three tables that connect research and practice-informed guidance on cultivating campus-specific messaging to relevant insight from prevention specialists we talked to. The companion resource from the Oregon Attorney General’s Sexual Assault Task Force is helpful in this area as well.
The guidance and insights we then grouped into three separate yet overlapping areas: Think About Effects of Alcohol Consumption, Connect Alcohol to Other Issues, and Consider Alcohol & Perpetration.

**THINK ABOUT EFFECTS OF ALCOHOL CONSUMPTION**

1. **Address the reasons that some people choose to use alcohol in social situations.**

   “College groups use alcohol to bond, to bring their group together, if you go against that you’re up against tradition and a lot of peer pressure. When we’re talking about alcohol, we’re really talking about social bonding.”

2. **Focus on the behaviors someone who is impaired or incapacitated may be exhibiting.**

   “I try to have my students focus not only on what might be present (slurred speech, falling over) but also what is NOT present (enthusiasm, strong communication).”

3. **Discuss ways in which alcohol may impact a survivor’s memory and understanding of a sexual assault.**

   “We see survivors all the time who are traumatized by what they remember, but more often we see survivors who are traumatized by what they DON’T remember. This is especially challenging when friends are blaming them, or administrators are asking a lot of detailed questions. Having to say ‘I don’t know’ about something so intimate can be heart wrenching.”

**CONNECT ALCOHOL TO OTHER ISSUES**

4. **Incorporate public health and equity frameworks into efforts to address the role of alcohol in CSA.**

   “If sexual assault’s root cause is oppression, we cannot separate ‘health messaging’ from ‘social justice.’ They’re the same thing.”

5. **Address the role of bystanders in intervening in potentially harmful situations.**

   “Students want scripts, but we really need to help them gain critical thinking skills. On our campus, we met them halfway by working with them to develop scenarios that are relevant to them as bystanders in the campus drinking scene. Then, we switch it up, so they have to keep their minds sharp. There isn’t a one-size-fits-all to bystander intervention.”

6. **Discuss how alcohol plays into stereotypical ideas about gender roles/sex/dating and challenge them.**

   “Hypermasculinity is a barrier for us, the idea that being aggressive in terms of sexual acts and then using alcohol to help facilitate that to prove their own masculinity, it’s highly problematic.”
KEY CONNECTIONS: TRAUMA-INFORMED MESSAGING

Consider Alcohol & Perpetration

7. Help students examine bias related to the behaviors of people who use alcohol to commit CSA.

“I use a spectrum activity, this side of the room if you’re most angry when this person is drunk or most angry when the person is sober. I use examples including when someone close to you: damages something that’s valuable to you, says something that is incredibly personally offensive, physically injures you. People are usually angrier when the person is drunk and damages property but as soon as it moves to interpersonal they move to angrier when they are sober. I ask them: Do you notice what just happened here? We then process through how we ignore people’s aggression when they are drunk.”

8. Discuss the ways in which alcohol is used as a tool to gain power and control.

“Alcohol is a tool that is used as a weapon to commit sexual assault, as an agent to perpetrate and take advantage of victims and communities. It is also used as a tool to minimize the impact of violence or to minimize how survivors are believed, so they’re seen as less reliable or to blame, so more universally I’d say it’s a part of a larger social impact in how we view rape culture.”

9. Focus on perpetrator accountability.

“Sexual assault is not an immediate consequence of students having a good time. There are people who are choosing to cause harm on our campus, and we need to put the focus back on disrupting their behavior, not messaging sexual assault as a consequence of alcohol use or going to parties. We need to work with students to envision parties without sexual assault and social groups that hold perpetrators accountable for ruining the fun by harming people.”

10. Share data regarding the presence of alcohol in cases of CSA.

“I’ve been in the role of educating on sexual assault or adjudicating cases on my campus for over 15 years. And I can probably count on one hand how many cases I’ve had that did not involve alcohol. This leads administrators to blame alcohol, but these cases demonstrate how perpetrators use alcohol and party culture, not that sexual assault is caused by alcohol and party culture.”

Next Steps

Inventory your current messaging regarding both alcohol and sexual assault on campus as well as alcohol’s role in sexual assault.

1. Is it trauma-informed?

2. What are some key messages that you would like to send moving forward?

3. How could these messages be tailored for different stakeholders?
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.

<table>
<thead>
<tr>
<th>KEY PARTNERS CHECKLIST</th>
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<tbody>
<tr>
<td>✓ Survivor advocates</td>
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<td>✓ Survivors</td>
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<tr>
<td>✓ Student staff and volunteers</td>
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<tr>
<td>✓ Local rape crisis centers &amp; alcohol abuse treatment centers/providers</td>
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<tr>
<td>✓ Alcohol abuse prevention educators</td>
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<tr>
<td>✓ Health promotion staff</td>
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<tr>
<td>✓ Researchers and faculty</td>
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<tr>
<td>✓ Fraternity and sorority life</td>
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<tr>
<td>✓ Academic program coordinators</td>
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<tr>
<td>✓ Student organizations</td>
</tr>
<tr>
<td>✓ Athletics department</td>
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<tr>
<td>✓ Local and university media</td>
</tr>
<tr>
<td>✓ New student orientation</td>
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<tr>
<td>✓ New faculty/staff orientation</td>
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<tr>
<td>✓ Parents &amp; alumni associations</td>
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<tr>
<td>✓ Website administrators</td>
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<tr>
<td>✓ Graphic designers</td>
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<tr>
<td>✓ University branding</td>
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<tr>
<td>✓ Experts in neurodiversity, learning styles, and multimodal communication</td>
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<tr>
<td>✓ Conduct officers</td>
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<td>✓ Title IX coordinators</td>
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<td>✓ Title IX investigators</td>
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<tr>
<td>✓ Academic deans</td>
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<tr>
<td>✓ Campus safety/police</td>
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<td>✓ Local law enforcement</td>
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**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.
COMMON CHALLENGES

In our interviews we also noticed several common challenges; we present the most frequent below with reflections from prevention specialists.

REFLECTIONS ON COMMON CHALLENGES

1. ** Victim-blaming.**
   “It makes it hard to have conversations about accountability when we’re both saying ‘kids don’t know better’ and then switch over to ‘kids should have known better’ after they’re sexually assaulted. We can treat our students like adults without victim-blaming.”

2. **Oversimplification of alcohols’ role in CSA.**
   “I think the idea of drunk sex can make people think that any sex while drunk is consensual, or they will take the polar opposite approach that alcohol use always leads to rape. There’s little middle ground for dialogue.”

3. **Focus on education over structural change**
   “Going to the root causes of alcohol and sexual violence issues are more than what a lot of administrators are wanting to take on...it would require major changes to where they allocate funding, how offices are structured, and to campus life overall. Instead, we have 30-minute programs.”

4. **Influence of alumni/donors who are invested in current party, tailgating, fraternity/sorority culture.**
   “Any proposed change or even major conversation around alcohol on our campus is tied to feelings of how alumni will react and will that make them want to continue to come to these events and continue to donate to the institution.”

5. **Hypermasculinity culture, sexism, cissexism, classism, racism, ableism, power, and heteronormativity.**
   “A lot of people who are in leadership positions are high status white men, and this is a culture that benefits high socioeconomic status white men.”

6. **Fear of being the “alcohol police”**
   “A lot of my colleagues don’t want to talk about alcohol because any time we crack down on alcohol, whoever does it loses favor with students. No one wants to be seen as the ‘alcohol police.’

7. **Inconsistent, mixed, and poor messaging.**
   “We can put talking points together all day and be really intentional, but we can’t stop a high-level administrator from reinforcing the things they’ve been believing for 50 years.”

8. **Not enough time in programming to address complexities/inability to move beyond 101.**
   “I feel like what we’re doing is just a drop in the bucket, and I wish I had more drops to give.”

NEXT STEPS

1. Who can help support your work to overcome these challenges on your campus?
2. What are some steps you can take now to help reduce these challenges later?
3. What are challenges with which you can support your colleagues? How can you work together?
In our conversations with prevention specialists, several reoccurring questions came up regarding alcohol’s role in sexual assault. Following are three of those questions and succinct responses synthesized from how prevention specialists mentioned responding to them in their programming.

**Q1 What if both/all parties involved are drinking? (Sometimes followed by: did they rape each other?)**

- It is not someone’s fault if another person sexually assaulted them.
- However, drinking isn’t an excuse to sexually assault someone, just as it isn’t an excuse to vandalize property or physically assault another person.
- It is the responsibility of the person who is initiating a sexual act to ensure they have consent, regardless of whether both people are drunk if someone is too drunk to check in, they should stop.
- If you’re a bystander who notices that two people are drunk and seem to be going somewhere to have sex, that’s an opportunity to intervene.

**Q2 How much alcohol does someone need to drink to be considered incapacitated?**

- Incapacitation can be a tricky term, as it is used in both law and policy but is rarely defined in ways that students can apply to their sexual encounters.
- Everyone’s body reacts to alcohol differently depending on body size, food eaten that day, other drugs ingested, and other factors.
- Alcohol impairs our ability to communicate effectively and can impede decision making.
- If you’re hooking up with someone who is incoherent or doesn’t seem to know what’s going on, assume they’re too drunk to consent and follow up on another day.

**Q3 Is all sexual contact considered sexual assault if alcohol is involved?**

- No. It is possible for people to have positive, consensual sexual experiences after drinking.
- However, alcohol use adds another layer of risk to a sexual encounter, particularly if you don’t know the person well.
- If you don’t know how someone communicates while sober, it will be even more difficult to tell while they’re drunk when communication is inhibited.

**Next Steps**

1. What do you, your staff, or your student educators consider difficult questions?
2. Brainstorm responses to those questions and keep a record for future educators in your program.
# Advice from the Field

We also asked participants for their advice and recommendations for prevention specialists who are new to their role or are new to addressing alcohol’s role in CSA. The following is a list of the most frequently provided advice (along with several anecdotes) from by prevention specialists, grouped into four topics/actions.

## Establish a Clear Mission for Your Program Overall, & Specifically for Addressing Alcohol’s Role in CSA

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<td><strong>1</strong></td>
<td>Know the research and have sources to back up your prevention efforts.</td>
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<td><strong>2</strong></td>
<td>Seek out mentoring from professionals at other schools that are similar in type, size, etc.</td>
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<td>“Try to connect with prevention educators at institutions similar to yours. We’re all trying to figure this out, and you can find mentors who have been doing this work for a long time.”</td>
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<tr>
<td><strong>3</strong></td>
<td>Develop and deliver training on alcohol’s role in sexual assault for all staff members involved with survivor support, emergency response, adjudication, and prevention.</td>
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## Build Strong Relationships with Faculty, Staff, & Student Partners

“I know the times I’ve switched institutions, I took a lot of people to coffee in the first year trying to get a feel for the community and trying to gain an understanding of what the mission statement looks like in real life.”

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<td><strong>4</strong></td>
<td>Seek out conversations with administration to learn how they feel about this issue and why.</td>
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<td></td>
<td>“If you’re a lone person, your administration is giving you some direction, I would say start with that direction and make sure it lines up with best practices.”</td>
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<td><strong>5</strong></td>
<td>Show up and be approachable in spaces that aren’t about CSA.</td>
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<td>“I volunteered a lot to do things like judge talent shows, help with basketball games, or lend a hand at large campus events. When people knew me as a person and not the ‘sexual assault lady,’ it was a lot easier to connect on topics like partying and sexual assault.”</td>
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<td><strong>6</strong></td>
<td>Learn about campus traditions (and their benefits and drawbacks).</td>
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<td>“We have [traditional event] on our campus. When I got to campus, I really didn’t get it because it seems both silly and harmful, but it’s important to people. You have to know what people gain from tradition before you can propose changing it.”</td>
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<td><strong>7</strong></td>
<td>Learn the language that students are using to talk about partying and hooking up by talking directly with students and watching/reading relevant media.</td>
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<td><strong>8</strong></td>
<td>Draft a one-page document that summarizes the campus stance on alcohol’s role in CSA. Use it as an opportunity to seek buy-in and to get feedback and edits from diverse stakeholders.</td>
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“The first thing I would tell them would be to look at all the programs and messaging that already exist on campus. If they think there’s nothing, there’s something. You don’t know. There’s information everywhere, and all sorts of things are happening and no one tells us.”

9 Brainstorm in advance how to answer difficult questions so you won’t be caught off guard.

“I’ve seen new staff or peer educators who have a warm and accessible presentation style suddenly get scientific and cold in response to challenging questions. Students are going to try to zing us, and prevention educators need to be able to roll with that and maintain their rapport with the audience.”

10 Connect with survivors and the survivor advocate/local rape crisis center to make sure that your work is trauma-informed to create a supportive culture for survivors. Consider creating clear feedback loops with campus and community advocacy organizations and/or establishing a survivor advisory board.

11 Look beyond the most dominant student organizations to learn about all student groups on campus, particularly the most marginalized.

“Brainstorm in advance how to answer difficult questions so you won’t be caught off guard.

“I’ve seen new staff or peer educators who have a warm and accessible presentation style suddenly get scientific and cold in response to challenging questions. Students are going to try to zing us, and prevention educators need to be able to roll with that and maintain their rapport with the audience.”

12 Educate yourself on primary prevention strategies, especially at the community and policy level.

13 Pilot new prevention programs without becoming too invested in them and then reconfigure based on feedback.

14 Look beyond the most dominant student organizations to learn about all student groups on campus, particularly the most marginalized.

NEXT STEPS

1. If you are a new professional, write down a few key goals for the next year that are in your power to accomplish.

2. Regardless of your level of experience, brainstorm how you can increase your connection with other prevention specialists on the local, state, or national level.

3. If you are a more experienced professional, in what ways can you share your knowledge or serve as a mentor?
VISION FOR THE FUTURE

We asked prevention specialists for their vision for the future: How would they ideally like to see campuses address alcohol’s role in CSA? Below is a table summarizing these themes along with a quotation that represents each theme.

**THOUGHTFUL APPROACH**

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<td><strong>1</strong></td>
<td>Establish goals/vision for the work.</td>
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<td>“I see a lot of people saying that we need to talk about alcohol and sexual assault. I’m not seeing a lot of people say what our goal is after we start the conversation. What’s our goal?”</td>
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<tr>
<td><strong>2</strong></td>
<td>Have more authentic conversations.</td>
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<td></td>
<td>“There’s a lot of fear from both students and administrators when we start talking about alcohol and sex. To really move forward, I think we’ll need to create safer spaces to really talk about what students are facing, not what students think we want to hear.”</td>
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<td><strong>3</strong></td>
<td>Social justice/equity focus/addressing role of privilege and tradition in perpetration.</td>
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<td>“There is a subset of folks who frame perpetrators as facing equal trauma to victims because the perpetrator made a mistake while drinking. It gets tricky when you talk about students, and they have a lot of privilege, our students come from a lot of money. We want to think the best of them but it’s just not true, and I’m tired of the frame that these wealthy white students can’t rape people and, if they do, it was just a minor drunken mistake.”</td>
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**NUANCED CONTENT**

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<tr>
<td><strong>4</strong></td>
<td>More discussion about what students gain from drinking.</td>
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<td>“I think there’s some resistance to change and I think there needs to be more widespread look at why is that. Why does a particular kind of party culture, drinking culture exist here? What are people gaining from it? I would say a lot of social bonding. A lot. Building social networks happens. Is there a way we can replace that so we aren’t putting people in positions where they’re harmed? We want to end violence but not these parties; they kind of go hand in hand you know.”</td>
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<td><strong>5</strong></td>
<td>Deepen bystander intervention training to address complexities of party situations.</td>
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<td></td>
<td>“Our students are nervous about social consequences, particularly in party situations. We need to really dig in to help them navigate these situations and, hopefully, advocate for structural changes to party culture to make the roles of bystanders easier.”</td>
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<tr>
<td><strong>6</strong></td>
<td>More evidence-informed innovation and interventions until there are interventions that have been found to be effective through research.</td>
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<td>“I am a total nerd about research, but when there aren’t interventions I know work, I need to do something. I’d like to be able to have a menu from which I could select interventions with clear guidance on how I could adapt them to fit my campus.”</td>
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### SUPPORT

7. Coalitions charged by the highest levels of administration.

“We need to be talking about this with the Board of Trustees. We need the President to say that people need to come together to talk about this. Without that, there’s a lot of incentive to avoid these topics.”

8. Willingness to innovate when we don’t have the answer.

“There’s resistance to try out new programs when we don’t know what works, but the only way we’ll know what works is if we try out new possibilities. If practitioners and researchers can team up, we can create programs that really fit into campus cultures and that are feasible to implement.”

9. More staff/funding to address these complex issues.

“I’d like to see staffing levels consistent with my job of reaching thousands of students. Even if all the barriers were to fall away, I’m still one person, and my job is not feasible.”

### PARTNERS

10. Establish thoughtful partnerships between alcohol abuse prevention and CSA prevention staff.

“My colleagues and I sat down and realized that we were sharing very different messages. By sharing our expertise with each other, we were able to better establish messaging we could both champion. By recognizing each other’s expertise, we were able to be more consistent and have a greater impact.”

11. Enhance partnership with party-related policies.

“I’d like a movement toward addressing party planners. They can set the tone and can help shape the interactions, they can help set the values for the space. When we don’t have time with upperclassmen, we end up losing that.”

### TIMING

12. More small-group education across a student’s time on campus.

“We need to be reaching more people, across more timepoints, and in smaller groups, but I’m one person, and sexual assault prevention is only part of my job.”

13. Sexual assault prevention education needs to start before college.

“The most important win for campus sexual assault prevention would be age-appropriate comprehensive sex education for all. I shouldn’t be the first person to talk to them about this at age 18 or even, unfortunately, age 45.”

### NEXT STEPS

1. Consider convening focus groups of key stakeholders on your campus to ask for their vision.

2. Share the results of those focus groups and discussions back with your community.

3. Use your data to inform the development of strategic and program plans.

What is YOUR vision for addressing alcohol’s role in sexual assault on your campus?
REFERENCES


References


This project’s methods are rooted in critical feminist participatory action. From the conceptualization stage through product creation (including this toolkit and peer-reviewed publications), Campus Advocacy and Prevention Professionals Association (CAPPA) members were actively engaged in the research development, implementation, synthesis, analysis, writing, editing, and dissemination of results.

### Conceptualization

Initially, Klein worked with a small group of CAPPA members to brainstorm and prioritize research questions, study design, and both research and practice products. They determined that an extensive review of the peer-reviewed and practice literature coupled with in-depth semi-structured interviews of CAPPA members would constitute a suitable method for this project. Klein, Rizzo, and Woofter conducted literature reviews and synthesis throughout the project.

### Recruitment

Participants were recruited through an email sent to the CAPPA listserv. CAPPA had approximately 550 members at time of recruitment and is a no-cost organization specifically by and for the population of interest for this study. Given that CAPPA has members from across the United States that meet the inclusion criteria, this method of purposive sampling allowed for participants to be easily and quickly identified through a source that they trusted. Additional recruitment resulted from word-of-mouth through listserv members’ identification of other professionals they believe are engaging in innovative or promising practices.

### Screening

We then screened participants to ensure that they met the following inclusion criteria:

A) Currently work as an administrator or prevention educator on or with an institution of higher education in the United States or affiliated territories.

B) At least 50% of their professional role included providing sexual assault prevention education.

C) They had been in their current role for at least one year.

After we screened each participant for inclusion, they were asked to arrange a phone interview of up to one hour’s duration with the researcher. The interviews were based on a short list of questions but were semi-structured to allow for exploration with each participant. The interview guide was developed in partnership with CAPPA members who served as advisors to the project, review of relevant literature, and consultation with a qualitative workgroup. We conducted five pilot interviews to beta test the guide and recruitment and made changes based on participant feedback.

### Procedures

A purposive sample of 23 individuals participated in the phone interviews for the final study. Interviews were conducted by the first author (Klein). Data was collected until rich data saturation occurred, when no new themes were being identified in interview coding. Interviews lasted between 20 and 78 minutes. Before we began recording each interview, we reminded participants of the specific aims of the study as well as how we would be reporting the findings. We especially let participants know that we would only report demographic or institution type and size information in descriptions of the aggregate sample. After ensuring participants’ verbal consent and explaining potential risks and benefits of participating in the study, we recorded each interview using the iPhone app Tape-A-Call which saves both sides of a telephone recording in a password-protected voicemail. Participants were reminded throughout the interview that they could share as much or as little as they would like and that they were welcome to provide additional thoughts or guidance on the topic if the questions were not enough prompts for them to describe their experiences.

### Interview Questions

The questions we asked throughout the interviews concerned the following themes: (a) participants’ role in campus sexual assault prevention, (b) participants’ beliefs about alcohol’s role in sexual assault on campus, (c) current campus prevention efforts addressing alcohol’s role in sexual assault, (d) ideal campus prevention efforts addressing alcohol’s role in sexual assault, (e) opportunities and challenges to address alcohol’s role in sexual assault, (f) discussion of alcohol’s role during bystander intervention programming, (g) advice for new professionals seeking to address alcohol’s role in sexual assault on their campuses, (h) names and descriptions of promising or innovative practices at other institutions to address this issue.
**ANALYSIS**

Wooster transcribed the interviews verbatim. Klein and Wooster then developed an initial codebook through open coding the five pilot interviews. The interviews were then reviewed again to ensure that nothing was missed upon initial review and transcript-checking was utilized if any pieces of the interview were unclear.

Klein and Wooster then coded the interviews using an iterative process facilitated by qualitative data analysis software, Atlas.ti. They then independently coded each interview and discussed the results and merged themes and subcodes. To establish interrater reliability, we checked the coding for one in every five interviews and met frequently to discuss codes and emerging findings. Subthemes were identified through weekly meetings between the two researchers and new ones were added as they emerged. Klein and Wooster then met to map out the themes and subthemes into a coherent picture of the results using Atlas.ti.

The code book from the pilot interviews was also discussed with the project advisory board to ensure that the interview questions and emerging themes reflected their goals for the project. We also shared key quotations and themes from each interview back with each interview participant for an additional layer of member checking. Interview coding and analysis continued as a reflexive and iterative process with regular check-ins with participants and the advisory board and between coders. Any disagreements about codes, themes, or inclusion of quotations were discussed between the first and fourth author until they reached consensus.

**TRIANGULATION**

In addition to triangulating the data with participants and key stakeholders, we also consulted peer-reviewed and grey literature gathered through a systematic review and, after consulting with a social science reference librarian, read relevant pieces of journalism from publications such as the Chronicle of Higher Education and Inside Higher Education.

**SAMPLE**

Given the small sample size, we did not collect information on participant identities. All interviews took place by phone between March and August 2017. Interviews lasted between 20 and 79 minutes. We interviewed 23 campus-based prevention professionals working in 21 states who had between one and 23 years of experience ($M = 9, SD = 6$). All participants reported that they devoted at least half of their FTE to sexual assault prevention, but they worked in prevention and advocacy hybrid roles ($n = 12$), health promotion generalist roles ($n = 4$), prevention and Title IX hybrid roles ($n = 4$), and prevention only roles ($n = 3$). Twelve participants worked at public institutions of higher education (IHEs), while 11 worked at private IHEs. Four of the IHEs were religiously affiliated. Participant IHEs had between 1,000 and 34,000 students ($M = 12,600, SD = 11,851$). All campuses had at least some on-campus housing.

**FUNDING, COMPENSATION, AND IRB**

Klein and Rizzo applied for and received funding from the Prevention Innovations Research Center, as CAPPA members indicated the importance of compensating participants for their time. This study was exempted from further review by the University of North Carolina at Chapel Hill Institutional Review Board. After each interview, the participant was sent a $15USD gift card to Amazon via email for their participation.

**TOOLKIT CREATION METHODS**

Throughout the project, the authors sought feedback from CAPPA members, including about how to disseminate results. CAPPA members asserted that a free and publicly available toolkit would be of value to the field. Klein, Rizzo, Cherry, and Wooster met frequently to discuss findings from the review of the literature and semi-structured interviews. The authors then worked with CAPPA members to generate a toolkit outline, prioritize findings, and suggest organization and dissemination approaches. After creating a first draft, Klein sought feedback from the interview participants. Then, Klein and Rizzo created a second draft by incorporating interview participant feedback. Klein then sought feedback from eleven expert reviewers with extensive experiences as prevention specialists and advocates, student activists and peer educators, researchers, state and national sexual assault coalition staff, substance abuse counselors and alcohol abuse prevention educators, health promotion office directors, Title IX administrators, and women’s center staff in a variety of settings across the U.S. Expert reviewers were provided $50USD for their time. All authors then met to discuss and incorporate expert reviewer feedback. Klein and Rizzo then created the final version of the toolkit with edits from Cherry and Wooster.