RSA 188-H Campus Climate Survey Task Force

Base Survey for New Hampshire Institutions of Higher Education (2023-2024)

Contents

[DEMOGRAPHICS 3](#_Toc136521836)

[PERCEPTIONS OF CAMPUS CLIMATE REGARDING SEXUAL MISCONDUCT 5](#_Toc136521837)

[A. Institutional Response 5](#_Toc136521838)

[B. Student Awareness Of Institutional Policies And Procedures 6](#_Toc136521839)

[C. Exposure To Sexual Misconduct Information/Education 6](#_Toc136521840)

[SEXUAL HARASSMENT BY STUDENTS: 7](#_Toc136521841)

[A. Sexual Harassment Victimization Prevalence 7](#_Toc136521842)

[B. Sexual Harassment Victimization Follow-Up Questions 9](#_Toc136521843)

[STALKING VICTIMIZATION 11](#_Toc136521844)

[A. Stalking Victimization Prevalence 11](#_Toc136521845)

[B. Stalking Victimization Follow-Up Questions 13](#_Toc136521846)

[DATING VIOLENCE VICTIMIZATION 15](#_Toc136521847)

[A. Dating Violence Victimization Prevalence 15](#_Toc136521848)

[B. Dating Violence Victimization Follow-Up Questions 17](#_Toc136521849)

[SEXUAL VIOLENCE VICTIMIZATION 20](#_Toc136521850)

[A. Sexual Violence Victimization Prevalence 20](#_Toc136521851)

[B. Sexual Violence Victimization Follow-Up Questions 24](#_Toc136521852)

[SEXUAL HARASSMENT BY FACULTY/STAFF: 27](#_Toc136521853)

[A. Sexual Harassment Victimization Prevalence 27](#_Toc136521854)

[B. Sexual Harassment Victimization Follow Up Questions 29](#_Toc136521855)

[INSTITUTIONAL RESPONSES 31](#_Toc136521856)

[A. Reporting Experiences 31](#_Toc136521857)

[B. Responses to Survivors 35](#_Toc136521858)

[CAMPUS SAFETY 36](#_Toc136521859)

[A. Sense of Safety 36](#_Toc136521860)

[B. Perception Of Sexual Misconduct As Part Of Campus Life 37](#_Toc136521861)

# DEMOGRAPHICS [Online IHE students complete this section]

Instructions: Please answer the following questions about yourself. [IHEs can customize these questions to align with their campus demographics.]

What is your age? [Enter number and have “Prefer to not answer” option]

Which of the following best describes your gender?

\_\_\_Woman

\_\_\_Man

\_\_\_Nonbinary or gender expansive

\_\_\_Prefer not to say

Do you identify as trans?

\_\_\_Yes

\_\_\_No

\_\_\_Not sure

\_\_\_Prefer not to say

Which of the following best describes your race or ethnicity? (Select all that apply.)

\_\_\_Black or African American or African

\_\_\_Latinx/o/a or Hispanic

\_\_\_Afro-Latino or Afro-Caribbean

\_\_\_Middle Eastern or North African

\_\_\_Asian or Asian American

\_\_\_Native Hawaiian or Pacific Islander

\_\_\_Native American or Alaskan native or Indigenous

\_\_\_White

\_\_\_A race or ethnicity not listed here [write-in]

\_\_\_Prefer not to say

Are you an international student?

\_\_\_Yes

\_\_\_No

\_\_\_Prefer not to say

What is your sexual orientation?

\_\_\_Gay

\_\_\_Heterosexual/straight

\_\_\_Lesbian

\_\_\_Queer

\_\_\_Bisexual

\_\_\_Asexual

\_\_\_A sexual orientation not listed here [write-in]

\_\_\_Prefer to not say

Do you take courses 100% online?

\_\_\_Yes

\_\_\_No

What year of school are you in?

\_\_\_First year undergraduate

\_\_\_Second year undergraduate

\_\_\_Third year undergraduate

\_\_\_Fourth year undergraduate

\_\_\_Fifth or more year undergraduate

\_\_\_Graduate

\_\_\_Professional (e.g. law, medicine, veterinary, dentistry)

Since you’ve been a student at [INSTITUTION], have you been a member of or participated in any of the following? (Select all that apply.)

\_\_\_Honor society or professional group related to your major/field of study

\_\_\_Fraternity or sorority (Potential New Member, current member, or former member)

\_\_\_Intercollegiate/varsity athletic team

\_\_\_Intramural or club athletic team

\_\_\_Political or social action group

\_\_\_Student government

\_\_\_Media organization (e.g., newspaper, radio, magazine)

\_\_\_Other student organization or group

Which of the following best describes your living situation?

\_\_\_On Campus

\_\_\_Off Campus

\_\_\_Housing Insecure

I generally feel safe on campus at [INSTITUTION].

\_\_\_Strongly Disagree \_\_\_Disagree \_\_\_Agree \_\_\_Strongly Agree \_\_\_I don’t know

# 

# PERCEPTIONS OF CAMPUS CLIMATE REGARDING SEXUAL MISCONDUCT [Online IHE students complete this section]

## Institutional Response

Sexual Misconduct refers to physical contact or non-physical conduct of a sexual nature in the absence of clear, knowing and voluntary consent. Examples include sexual or gender-based harassment, stalking, dating/relationship violence, and sexual violence.

Instructions: The following statements describe how [INSTITUTION] might handle it if a student reported a sexual misconduct incident. Using the scale provided, please indicate the likelihood of each statement.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Very Unlikely | Unlikely | Likely | Very Likely | I don’t know |
| The institution would take the report seriously. |  |  |  |  |  |
| The institution would maintain the privacy of the person making the report. |  |  |  |  |  |
| The institution would do its best to honor the request of the person about how to go forward with the case. |  |  |  |  |  |
| The institution would take steps to protect the safety of the person making the report. |  |  |  |  |  |
| The institution would provide supportive measures to the person who made the report (e.g. academic, housing). |  |  |  |  |  |
| The institution would take action to address factors that may have led to the sexual misconduct. |  |  |  |  |  |
| The institution would punish the person who made the report. |  |  |  |  |  |
| The institution would take action to address factors that may have led to the sexual misconduct. |  |  |  |  |  |
| The institution would handle the report fairly. |  |  |  |  |  |

## Student Awareness Of Institutional Policies And Procedures

Instructions: Using the scale provided, please indicate your level of agreement with the following statements.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly Disagree | Disagree | Agree | Strongly Agree | I don’t know |
| I would know how to make a report of sexual misconduct. |  |  |  |  |  |
| I understand what happens when a student makes a sexual misconduct report at [INSTITUTION]. |  |  |  |  |  |

## Exposure To Sexual Misconduct Information/Education

Instructions: Using the scales provided, please respond to the following questions.

Since coming to [INSTITUTION], have you received written (e.g., brochures, emails, on-line module) or verbal information (e.g., presentations, trainings) from anyone at [INSTITUTION] about the following? (Select all that apply.)

\_\_\_The definitions of types of sexual misconduct

\_\_\_How to report a sexual misconduct incident

\_\_\_Where to go to get help if someone you know experiences sexual misconduct

\_\_\_Title IX protections against sexual misconduct

\_\_\_How to help prevent sexual misconduct

\_\_\_Student code of conduct or honor code

\_\_\_Other resources to help you or someone you know deal with a sexual misconduct incident (i.e., community-based crisis center)

Instructions: Using the scales provided, indicate how aware you are of the function of the campus and community resources specifically related to sexual misconduct response at [INSTITUTION].

[IHEs can replace these generic titles with specific office/dept names if applicable.]

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not at all aware | Slightly Aware | Somewhat Aware | Very Aware | Extremely Aware |
| Office for Violence Prevention and Victim Assistance |  |  |  |  |  |
| Office of Student Conduct |  |  |  |  |  |
| Title IX Compliance |  |  |  |  |  |
| Student Legal Services |  |  |  |  |  |
| Counseling Services |  |  |  |  |  |
| The Office of Employment Equity |  |  |  |  |  |
| Health Services |  |  |  |  |  |
| [ADD/SUBSTITUTE RESOURCES SPECIFIC TO INSTITUTION] |  |  |  |  |  |

# 

# SEXUAL HARASSMENT BY STUDENTS [Online IHE students complete this section]

## Sexual Harassment Victimization Prevalence

The following section asks you about behaviors initiated by another student(s) at [INSTITUTION], as well as a visitor(s) and guest(s) of a student. In a later section, you will be asked about behaviors initiated by a faculty/staff member of [INSTITUTION].

Instructions: How many times have you been in a situation in which **a student, visitor, and/or guest** has done the following things to you, since you enrolled at [INSTITUTION]?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Never | Once | Twice | More than two times |
| Cat-called, followed, honked or whistled at you, flashed you, or directed other sexually aggressive actions towards you in public |  |  |  |  |
| Was condescending to you, or treated you negatively because of your sex or gender identity |  |  |  |  |
| Made sexual remarks, jokes or stories that were insulting or offensive to you |  |  |  |  |
| Displayed, used, or distributed sexually graphic or suggestive materials |  |  |  |  |
| Made offensive sexist remarks |  |  |  |  |
| Publicly shamed/humiliated you regarding your sexual activity or experiences |  |  |  |  |
| Repeatedly told sexual stories or jokes that were offensive to you |  |  |  |  |
| Made unwelcome attempts to draw you into a discussion of sexual matters |  |  |  |  |
| Made gestures or used body language of a sexual nature which embarrassed or offended you |  |  |  |  |
| Made unwanted attempts to establish a romantic or sexual relationship with you (i.e., ask you for dates, drinks, dinner, etc.) |  |  |  |  |
| Sent or posted unwelcome sexual comments, jokes, or pictures by text, email, Instagram, Snapchat, Twitter, TikTok, or other electronic means |  |  |  |  |
| Spread unwelcome sexual rumors about you through spoken comments or by text, email, or social media (i.e., Instagram, Snapchat, TikTok) |  |  |  |  |

## Sexual Harassment Victimization Follow-Up Questions

[DISPLAY THESE QUESTIONS IF Any Sexual Harassment Victimization Question is Greater Than “Never”.]

Instructions: Are you willing to answer some additional questions about this topic, or would you like to skip to the next section of the survey? The additional questions are intended to better inform support and prevention and response efforts at [INSTITUTION].

(Survey should be programmed with skip logic that will advance people to the next set of questions if they say yes or advances them to the next module if they say no.)

\_\_\_Yes, answer additional questions

\_\_\_No, skip to the next section

Think about the situations that have happened to you involving the behaviors you marked on the last screens. Now, think about ONE SITUATION and please answer the following questions.

Please describe the **person(s) who committed the behavior**:

Gender (Select all that apply.)

\_\_\_Woman

\_\_\_Man

\_\_\_Nonbinary or gender expansive

\_\_\_Prefer not to say

\_\_\_Unknown

Role at [INSTITUTION]:

\_\_\_Student

\_\_\_Visitor/guest

\_\_\_Other [write-in]

Where did the situation happen?

\_\_\_Online/virtual (Select all that apply.) [If selected, drop-down menu below]

\_\_\_Virtual Classroom [IHEs can replace this generic term with specific platforms/LMS if applicable]

\_\_\_Virtual Class Forum [IHEs can replace this generic term with specific platforms/LMS if applicable]

\_\_\_Private communications (i.e., texting, social media)

\_\_\_Other

\_\_\_In person (Select all that apply.) [If selected, drop-down menu below]

\_\_\_On-campus residence

\_\_\_On-campus public place/building

\_\_\_Off-campus residence

\_\_\_Off-campus public place/building

\_\_\_At another college/university

\_\_\_Studying abroad

\_\_\_I do not know

\_\_\_Prefer not to say

During what academic year did the situation occur? (Select all that apply.) [IHEs can customize these choices to align with their academic year schedule.]

\_\_\_2023-2024 (Fall 2023 through present)

\_\_\_2022-2023 (Fall 2022 through Summer 2023)

\_\_\_2021-2022 (Fall 2021 through Summer 2022)

\_\_\_2020-2021 (Fall 2020 through Summer 2021)

\_\_\_2019-2020 (Fall 2019 through Summer 2020)

During what semester or term did the situation occur? (Select all that apply.)

\_\_\_Fall

\_\_\_Winter

\_\_\_Spring

\_\_\_Summer

Did the situation impact your academic progress in any of the following ways? (Select all that apply.)

\_\_\_Reduced grade point average (GPA)

\_\_\_Caused you to take an incomplete in a class(es)

\_\_\_Caused you to drop a class(es)

\_\_\_Needed to take a leave of absence from your education

\_\_\_Caused you to change your major

\_\_\_Caused you to transfer to another institution

\_\_\_Did not impact academic performance

\_\_\_Other [write-in]

Did the situation have negative financial impacts on your academic career in any of the following ways? (Select all that apply.)

\_\_\_Loss in tuition as a result of dropping a class(es)

\_\_\_Loss in tuition as a result of an unplanned leave of absence

\_\_\_Loss in scholarship award due to diminished grades as a result of the situation

\_\_\_Costs associated with unexpected need to change housing

\_\_\_Costs incurred for physical and mental health services as a result of the situation

\_\_\_Did not have a negative financial impact on academic career

\_\_\_Other [write-in]

# 

# STALKING VICTIMIZATION [ONLINE IHE STUDENTS COMPLETE THIS SECTION]

## Stalking Victimization Prevalence

Instructions: How many times have one or more people done the following things to you since you enrolled at [INSTITUTION]?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Never | Once | Twice | More than two times |
| Sent you unwanted emails, text messages, or social media comments/direct messages? |  |  |  |  |
| Watched or followed you from a distance, or spied on you with a location tracking app, camera, or other device (i.e., AirTags, Find My…, Snap Map, etc.)? |  |  |  |  |
| Approached you or showed up in places, such as your home, workplace, or school when you didn’t want them to be there? |  |  |  |  |
| Left strange or potentially threatening items for you to find? |  |  |  |  |
| Snuck into your home or car and did things to scare you by letting you know they had been there? |  |  |  |  |
| Left you unwanted messages (including text or voice messages)? |  |  |  |  |
| Made unwanted phone calls to you (including hang up calls)? |  |  |  |  |
| Left you cards, letters, flowers, or presents when they knew you didn’t want them to? |  |  |  |  |
| Made threats to your physical or emotional safety online? |  |  |  |  |
| Spread rumors about you online, whether they were true or not? |  |  |  |  |
| Used coercion, threats, or intimidation to gain access to your phone, email, or other accounts? |  |  |  |  |

## Stalking Victimization Follow-Up Questions

[DISPLAY THESE QUESTIONS IF Any Stalking Victimization Question is Greater Than “Never”.]

Instructions: Are you willing to answer some additional questions about this topic, or would you like to skip to the next section of the survey? The additional questions are intended to better inform support and prevention and response efforts at [INSTITUTION].

(Survey should be programmed with skip logic that will advance people to the next set of questions if they say yes or advances them to the next module if they say no.)

\_\_\_Yes, answer additional questions

\_\_\_No, skip to the next section

Think about the situations that have happened to you involving the behaviors you marked on the last screens. Now, think about ONE SITUATION and please answer the following questions.

Please describe the **person(s) who committed the behavior**:

Gender (Select all that apply.)

\_\_\_Woman

\_\_\_Man

\_\_\_Nonbinary or gender expansive

\_\_\_Prefer not to say

\_\_\_Unknown

Role at [INSTITUTION]:

\_\_\_Student

\_\_\_Visitor/guest

\_\_\_Faculty member [Option to provide examples of who fits into this category]

\_\_\_Staff member [Option to provide examples of who fits into this category]

\_\_\_Graduate student instructor

\_\_\_Not affiliated with [INSTITUTION]

\_\_\_Other [write-in]

Where did the situation happen?

\_\_\_Online/virtual (Select all that apply.) [If selected, drop-down menu below]

\_\_\_Virtual Classroom [IHEs can replace this generic term with specific platforms/LMS if applicable]

\_\_\_Virtual Class Forum [IHEs can replace this generic term with specific platforms/LMS if applicable]

\_\_\_Private communications (i.e., texting, social media)

\_\_\_Other

\_\_\_In person (Select all that apply.) [If selected, drop-down menu below]

\_\_\_On-campus residence

\_\_\_On-campus public place/building

\_\_\_Off-campus residence

\_\_\_Off-campus public place/building

\_\_\_At another college/university

\_\_\_Studying abroad

\_\_\_I do not know

\_\_\_Prefer not to say

During what academic year did the situation occur? (Select all that apply.) [IHEs can customize these choices to align with their academic year schedule.]

\_\_\_2023-2024 (Fall 2023 through present)

\_\_\_2022-2023 (Fall 2022 through Summer 2023)

\_\_\_2021-2022 (Fall 2021 through Summer 2022)

\_\_\_2020-2021 (Fall 2020 through Summer 2021)

\_\_\_2019-2020 (Fall 2019 through Summer 2020)

During what semester or term did the situation occur? (Select all that apply.)

\_\_\_Fall

\_\_\_Winter

\_\_\_Spring

\_\_\_Summer

Did the situation impact your academic progress in any of the following ways? (Select all that apply.)

\_\_\_Reduced grade point average (GPA)

\_\_\_Caused you to take an incomplete in a class(es)

\_\_\_Caused you to drop classes

\_\_\_Needed to take a leave of absence from your education

\_\_\_Caused you to change your major

\_\_\_Caused you to transfer to another institution

\_\_\_Did not impact academic performance

\_\_\_Other [write-in]

Did the situation have negative financial impacts on your academic career in any of the following ways? (Select all that apply.)

\_\_\_Loss in tuition as a result of dropping classes

\_\_\_Loss in tuition as a result of an unplanned leave of absence

\_\_\_Loss in scholarship award due to diminished grades as a result of the situation

\_\_\_Costs associated with unexpected need to change housing

\_\_\_Costs incurred for physical and mental health services as a result of the situation

\_\_\_Did not have a negative financial impact on academic career

\_\_\_Other [write-in]

# 

# DATING VIOLENCE VICTIMIZATION

## Dating Violence Victimization Prevalence

Instructions: How many times has a current or former hookup, boyfriend, girlfriend, partner, and/or spouse done the following things to you, regardless of the length of the relationship, since you enrolled at [INSTITUTION]?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Never | Once | Twice | More than two times |
| The person threatened me and I was concerned for my safety or wellbeing |  |  |  |  |
| The person threatened to harm people close to me |  |  |  |  |
| The person pushed, grabbed, hit, or shook me |  |  |  |  |
| The person choked me or applied pressure to my throat or neck in a way that was not OK with me |  |  |  |  |
| The person punched a wall or other object near me |  |  |  |  |
| The person stole or destroyed my property |  |  |  |  |
| The person said they would disclose my personal or private information to others |  |  |  |  |
| The person attempted to or did control my personal life, such as where I went, what I wore, who I saw, or how I spent my money |  |  |  |  |
| The person repeatedly humiliated me or put me down |  |  |  |  |
| The person kept tabs on me by following me in person, monitoring my location, or gaining access to my accounts/devices |  |  |  |  |

## Dating Violence Victimization Follow-Up Questions

[DISPLAY THESE QUESTIONS IF Any Dating Violence Victimization Question is Greater Than “Never”.]

Instructions: Are you willing to answer some additional questions about this topic, or would you like to skip to the next section of the survey? The additional questions are intended to better inform support and prevention and response efforts at [INSTITUTION].

(Survey should be programmed with skip logic that will advance people to the next set of questions if they say yes or advances them to the next module if they say no.)

\_\_\_Yes, answer additional questions

\_\_\_No, skip to the next section

Think about the situations that have happened to you involving the behaviors you marked on the last screens. Now, think about ONE SITUATION and please answer the following questions.

Please describe the **person(s) who committed the behavior**:

Gender (Select all that apply.)

\_\_\_Woman

\_\_\_Man

\_\_\_Nonbinary or gender expansive

\_\_\_Prefer not to say

\_\_\_Unknown

Role at [INSTITUTION]:

\_\_\_Student

\_\_\_Visitor/guest

\_\_\_Faculty member [Option to provide examples of who fits into this category]

\_\_\_Staff member [Option to provide examples of who fits into this category]

\_\_\_Graduate student instructor

\_\_\_Not affiliated with [INSTITUTION]

\_\_\_Other [write-in]

Where did the situation happen?

\_\_\_Online/virtual (Select all that apply.) [If selected, drop-down menu below]

\_\_\_Virtual Classroom [IHEs can replace this generic term with specific platforms/LMS if applicable]

\_\_\_Virtual Class Forum [IHEs can replace this generic term with specific platforms/LMS if applicable]

\_\_\_Private communications (i.e., texting, social media)

\_\_\_Other

\_\_\_In person (Select all that apply.) [If selected, drop-down menu below]

\_\_\_On-campus residence

\_\_\_On-campus public place/building

\_\_\_Off-campus residence

\_\_\_Off-campus public place/building

\_\_\_At another college/university

\_\_\_Studying abroad

\_\_\_I do not know

\_\_\_Prefer not to say

During what academic year did the situation occur? (Select all that apply.) [IHEs can customize these choices to align with their academic year calendar.]

\_\_\_2023-2024 (Fall 2023 through present)

\_\_\_2022-2023 (Fall 2022 through Summer 2023)

\_\_\_2021-2022 (Fall 2021 through Summer 2022)

\_\_\_2020-2021 (Fall 2020 through Summer 2021)

\_\_\_2019-2020 (Fall 2019 through Summer 2020)

During what semester or term did the situation occur? (Select all that apply.)

\_\_\_Fall

\_\_\_Winter

\_\_\_Spring

\_\_\_Summer

Did the situation impact your academic progress in any of the following ways? (Select all that apply.)

\_\_\_Reduced grade point average (GPA)

\_\_\_Caused you to take an incomplete in a class(es)

\_\_\_Caused you to drop a class(es)

\_\_\_Needed to take a leave of absence from your education

\_\_\_Caused you to change your major

\_\_\_Caused you to transfer to another institution

\_\_\_Did not impact academic performance

\_\_\_Other [write-in]

Did the situation have negative financial impacts on your academic career in any of the following ways? (Select all that apply.)

\_\_\_Loss in tuition as a result of dropping a class(es)

\_\_\_Loss in tuition as a result of an unplanned leave of absence

\_\_\_Loss in scholarship award due to diminished grades as a result of the situation

\_\_\_Costs associated with unexpected need to change housing

\_\_\_Costs incurred for physical and mental health services as a result of the situation

\_\_\_Did not have a negative financial impact on academic career

\_\_\_Other [write-in]

Part of the goal of this survey is to understand how alcohol and drugs shape campus culture related to sexual misconduct. If you are willing, please respond to the following question. If you do not want to answer this question, you can skip to the next section of the survey. (Survey should be programmed with skip logic that will advance people to the next set of questions if they say yes or advances them to the next module if they say no.)

\_\_\_Yes, answer question about the role(s) of alcohol and drugs

\_\_\_No, skip to the next section

[Display if answer to above question is “yes.”] Alcohol and drugs can play many roles in how situations play out. In your experience, did any of these apply? Keep in mind that you are in no way responsible for the situation that occurred, even if you had been using alcohol and/or drugs. (Select all that apply.)

\_\_\_\_The other person had been using alcohol and/or drugs

\_\_\_\_The other person took advantage of my incapacitation from using alcohol and/or drugs [Include definition of incapacitation through hover or pop-up: Incapacitation is when a person cannot consent because they are unable to understand what is happening or are disoriented, helpless, asleep, or unconscious for any reason, including by alcohol or other drugs. Incapacitation is a state beyond intoxication.]

\_\_\_\_The other person was encouraging me to drink or use drugs or supplying me with alcohol and/or drugs

\_\_\_\_I was given alcohol and/or drugs to consume without my knowledge (ex: drink was spiked, substances were added to my drink or food, etc.)

\_\_\_\_The other person used alcohol and/or drugs as an excuse for their behavior(s)

\_\_\_\_I was drinking or using drugs voluntarily and wasn’t incapacitated

\_\_\_\_People around us were drinking or using drugs

\_\_\_\_Alcohol and/or drugs were present, but I don’t think they played a role

\_\_\_\_Alcohol and drugs weren’t involved at all

# 

# SEXUAL VIOLENCE VICTIMIZATION

## Sexual Violence Victimization Prevalence

The following questions concern sexual experiences that you may have had that were unwanted. We know that these are personal questions, so we did not ask your name or other identifying information. Your information is completely confidential. We hope that this helps you to feel comfortable answering each question honestly.

Instructions: Please indicate whether you have ever experienced any of the following types of unwanted sexual conduct **since you enrolled at** [INSTITUTION], **whether on-campus, off-campus, during a break, or when school was in session**. If multiple types of unwanted conduct occurred on the same occasion, please indicate all that apply. For the purposes of the following questions, “incapacitation” is defined as: when a person cannot consent because they are unable to understand what is happening or are disoriented, helpless, asleep, or unconscious for any reason, including by alcohol or other drugs. Incapacitation is a state beyond intoxication.

Someone touched, kissed, or rubbed up against the private areas of my body, removed some of my clothes, or made me touch them sexually, without my consent (but did not attempt sexual penetration)

\_\_\_Never

\_\_\_Once

\_\_\_Twice

\_\_\_More Than Two Times

[If once/twice/more than two times, skip to table below]

[If never, skip to next item]

[If once/twice/more than two times to the above item] Did this happen by someone:

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Lying, making false promises, continually verbally pressuring me, threatening to end the relationship, or using other pressure that made me feel like I couldn’t say no. |  |  |
| Using verbal threats, physical forms of intimidation, trying until they wore down my resistance, or threatening to share intimate or explicit photos or videos of me. |  |  |
| Taking advantage of the fact that I was unable to give consent due to incapacitation. |  |  |
| Using force, for example holding me down with their body weight, pinning my arms, or having a weapon. |  |  |

Someone had oral sex with me or made me have oral sex with them without my consent.

\_\_\_Never

\_\_\_Once

\_\_\_Twice

\_\_\_More Than Two Times

[If once/twice/more than two times, skip to table below]

[If never, skip to next item]

[If once/twice/more than two times to the above item] Did this happen by someone:

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Lying, making false promises, continually verbally pressuring me, threatening to end the relationship, or using other pressure that made me feel like I couldn’t say no. |  |  |
| Using verbal threats, physical forms of intimidation, trying until they wore down my resistance, or threatening to share intimate or explicit photos or videos of me. |  |  |
| Taking advantage of the fact that I was unable to give consent due to incapacitation. |  |  |
| Using force, for example holding me down with their body weight, pinning my arms, or having a weapon. |  |  |

Someone penetrated my vagina or anus with their body part or an object, or made me penetrate their vagina or anus, without my consent

\_\_\_Never

\_\_\_Once

\_\_\_Twice

\_\_\_More Than Two Times

[If once/twice/more than two times, skip to table below]

[If never, skip to next item]

[If once/twice/more than two times to the above item] Did this happen by someone:

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Lying, making false promises, continually verbally pressuring me, threatening to end the relationship, or using other pressure that made me feel like I couldn’t say no. |  |  |
| Using verbal threats, physical forms of intimidation, trying until they wore down my resistance, or threatening to share intimate or explicit photos or videos of me. |  |  |
| Taking advantage of the fact that I was unable to give consent due to incapacitation. |  |  |
| Using force, for example holding me down with their body weight, pinning my arms, or having a weapon. |  |  |

Someone ATTEMPTED to have oral, anal, or vaginal penetration with me without my consent

\_\_\_Never

\_\_\_Once

\_\_\_Twice

\_\_\_More Than Two Times

[If once/twice/more than two times, skip to table below]

[If never, skip to next item]

[If once/twice/more than two times to the above item] Did this happen by someone:

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Lying, making false promises, continually verbally pressuring me, threatening to end the relationship, or using other pressure that made me feel like I couldn’t say no. |  |  |
| Using verbal threats, physical forms of intimidation, trying until they wore down my resistance, or threatening to share intimate or explicit photos or videos of me. |  |  |
| Taking advantage of the fact that I was unable to give consent due to incapacitation. |  |  |
| Using force, for example holding me down with their body weight, pinning my arms, or having a weapon. |  |  |

## Sexual Violence Victimization Follow-Up Questions

[DISPLAY THESE QUESTIONS IF Any Sexual Violence Victimization Question is Yes.]

Instructions: Are you willing to answer some additional questions about this topic, or would you like to skip to the next section of the survey? The additional questions are intended to better inform support and prevention and response efforts at [INSTITUTION].

(Survey should be programmed with skip logic that will advance people to the next set of questions if they say yes or advances them to the next module if they say no.)

\_\_\_Yes, answer additional questions

\_\_\_No, skip to the next section

Think about the situations that have happened to you involving the behaviors you marked on the last screens. Now, think about ONE INCIDENT and please answer the following questions.

Please describe the **person(s) who committed the behavior**:

Gender (Select all that apply.)

\_\_\_Woman

\_\_\_Man

\_\_\_Nonbinary or gender expansive

\_\_\_Prefer not to say

\_\_\_Unknown

Role at [INSTITUTION]:

\_\_\_Student

\_\_\_Visitor/guest

\_\_\_Faculty member [Option to provide examples of who fits into this category]

\_\_\_Staff member [Option to provide examples of who fits into this category]

\_\_\_Graduate student instructor

\_\_\_Not affiliated with [INSTITUTION]

\_\_\_Other [write-in]

Where did the incident happen?

\_\_\_On-campus residence

\_\_\_On-campus public place/building

\_\_\_Off-campus residence

\_\_\_Off-campus public place/building

\_\_\_At another college/university

\_\_\_Studying abroad

\_\_\_I do not know

\_\_\_Prefer not to say

During what academic year did the incident occur? [IHEs can customize these choices to align with their academic year schedule.]

\_\_\_2023-2024 (Fall 2023 through present)

\_\_\_2022-2023 (Fall 2022 through Summer 2023)

\_\_\_2021-2022 (Fall 2021 through Summer 2022)

\_\_\_2020-2021 (Fall 2020 through Summer 2021)

\_\_\_2019-2020 (Fall 2019 through Summer 2020)

During what semester or term did the incident occur? (Select all that apply.)

\_\_\_Fall

\_\_\_Winter

\_\_\_Spring

\_\_\_Summer

Did the incident impact your academic progress in any of the following ways? (Select all that apply.)

\_\_\_Reduced grade point average (GPA)

\_\_\_Caused you to take an incomplete in a class(es)

\_\_\_Caused you to drop a class(es)

\_\_\_Needed to take a leave of absence from your education

\_\_\_Caused you to change your major

\_\_\_Caused you to transfer to another institution

\_\_\_Did not impact academic performance

\_\_\_Other [write-in]

Did the incident have negative financial impacts on your academic career in any of the following ways? (Select all that apply.)

\_\_\_Loss in tuition as a result of dropping a class(es)

\_\_\_Loss in tuition as a result of an unplanned leave of absence

\_\_\_Loss in scholarship award due to diminished grades as a result of the incident

\_\_\_Costs associated with unexpected need to change housing

\_\_\_Costs incurred for physical and mental health services as a result of the incident

\_\_\_Did not have a negative financial impact on academic career

\_\_\_Other [write-in]

Part of the goal of this survey is to understand how alcohol and drugs shape campus culture related to sexual misconduct. If you are willing, please respond to the following question. If you do not want to answer this question, you can skip to the next section of the survey. (Survey should be programmed with skip logic that will advance people to the next set of questions if they say yes or advances them to the next module if they say no.)

\_\_\_Yes, answer question about the role(s) of alcohol and drugs

\_\_\_No, skip to the next section

[Display if answer to above question is “yes.”] Alcohol and drugs can play many roles in how incidents play out. In your experience, did any of these apply? Keep in mind that you are in no way responsible for the incident that occurred, even if you had been using alcohol and/or drugs. (Select all that apply.)

\_\_\_\_The other person had been using alcohol and/or drugs

\_\_\_\_The other person took advantage of my incapacitation from using alcohol and/or drugs [Include definition of incapacitation through hover or pop-up: Incapacitation is when a person cannot consent because they are unable to understand what is happening or are disoriented, helpless, asleep, or unconscious for any reason, including by alcohol or other drugs. Incapacitation is a state beyond intoxication.]

\_\_\_\_The other person was encouraging me to drink or use drugs or supplying me with alcohol and/or drugs

\_\_\_\_I was given alcohol and/or drugs to consume without my knowledge (ex: drink was spiked, substances were added to my drink or food, etc.)

\_\_\_\_The other person used alcohol and/or drugs as an excuse for their behavior(s)

\_\_\_\_I was drinking or using drugs voluntarily and wasn’t incapacitated

\_\_\_\_People around us were drinking or using drugs

\_\_\_\_Alcohol and/or drugs were present, but I don’t think they played a role

\_\_\_\_Alcohol and drugs weren’t involved at all

# SEXUAL HARASSMENT BY FACULTY/STAFF [online ihe STUDENTS COMPLETE THIS SECTION]

This section asks about behaviors you may have experienced that were specifically conducted by a faculty and/or staff member at [INSTITUTION].

## Sexual Harassment Victimization Prevalence

Instructions: Since you enrolled at [INSTITUTION], have you been in a situation in which **a faculty member, instructor, or staff member** (i.e., coach, advisor, hall director, etc.) has done the following to you?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Never | Once | Twice | More than two times |
| A faculty or staff member put you down, was condescending to you, or treated you negatively because of your sex or gender identity. |  |  |  |  |
| A faculty or staff member made sexual remarks, jokes, or stories that were insulting or offensive to you. |  |  |  |  |
| A faculty or staff member displayed, used, or distributed sexually graphic or suggestive materials outside of course materials. |  |  |  |  |
| A faculty or staff member made offensive sexist remarks. |  |  |  |  |
| A faculty or staff member repeatedly told sexual stories or jokes that were offensive to you. |  |  |  |  |
| A faculty or staff member made unwelcome attempts to draw you into a discussion of sexual matters. |  |  |  |  |
| A faculty or staff member made gestures or used body language of a sexual nature which embarrassed or offended you. |  |  |  |  |
| A faculty or staff member made unwanted attempts to establish a romantic or sexual relationship with you (i.e., ask you for dates, drinks, dinner, etc.). |  |  |  |  |
| A faculty or staff member touched you in a way that made you feel uncomfortable. |  |  |  |  |
| A faculty or staff member made unwanted attempts to touch or kiss you. |  |  |  |  |
| A faculty or staff member attempted to bribe you or implied better treatment to engage in sexual behavior. |  |  |  |  |
| A faculty or staff member mistreated you or threatened you with some sort of retaliation for not being sexually cooperative. |  |  |  |  |

## Sexual Harassment Victimization Follow Up Questions

[DISPLAY THESE QUESTIONS IF Any Sexual Harassment Victimization Question is Greater Than 1.]

Instructions: Are you willing to answer some additional questions about this topic, or would you like to skip to the next section of the survey? The additional questions are intended to better inform support and prevention and response efforts at [INSTITUTION].

(Survey should be programmed with skip logic that will advance people to the next set of questions if they say yes or advances them to the next module if they say no.)

\_\_\_Yes, answer additional questions

\_\_\_No, skip to the next section

Think about the situations that have happened to you involving the behaviors you marked on the last screens. Now, think about ONE SITUATION and please answer the following questions.

Please describe the **person(s) who committed the behavior**:

Gender (Select all that apply.)

\_\_\_Woman

\_\_\_Man

\_\_\_Nonbinary or gender expansive

\_\_\_Prefer not to say

\_\_\_Unknown

Role at [INSTITUTION]:

\_\_\_Faculty member [Option to provide examples of who fits into this category]

\_\_\_Staff member [Option to provide examples of who fits into this category]

\_\_\_Graduate student instructor

\_\_\_Other [write-in]

Where did the situation happen?

\_\_\_Online/virtual (Select all that apply.) [If selected, drop-down menu below]

\_\_\_Virtual Classroom [IHEs can replace this generic term with specific platforms/LMS if applicable]

\_\_\_Virtual Class Forum [IHEs can replace this generic term with specific platforms/LMS if applicable]

\_\_\_Private communications (i.e., texting, social media)

\_\_\_Other

\_\_\_In person (Select all that apply.) [If selected, drop-down menu below]

\_\_\_On-campus residence

\_\_\_On-campus public place/building

\_\_\_Off-campus residence

\_\_\_Off-campus public place/building

\_\_\_At another college/university

\_\_\_Studying abroad

\_\_\_I do not know

\_\_\_Prefer not to say

During what academic year did the situation occur? (Select all that apply.) [IHEs can customize these choices to align with their academic year schedule.]

\_\_\_2023-2024 (Fall 2023 through present)

\_\_\_2022-2023 (Fall 2022 through Summer 2023)

\_\_\_2021-2022 (Fall 2021 through Summer 2022)

\_\_\_2020-2021 (Fall 2020 through Summer 2021)

\_\_\_2019-2020 (Fall 2019 through Summer 2020)

During what semester or term did the situation occur? (Select all that apply.)

\_\_\_Fall

\_\_\_Winter

\_\_\_Spring

\_\_\_Summer

Did the situation impact your academic progress in any of the following ways? (Select all that apply.)

\_\_\_Reduced grade point average (GPA)

\_\_\_Caused you to take an incomplete in a class(es)

\_\_\_Caused you to drop a class(es)

\_\_\_Needed to take a leave of absence from your education

\_\_\_Caused you to change your major

\_\_\_Caused you to transfer to another institution

\_\_\_Did not impact academic performance

\_\_\_Other [write-in]

Did the situation have negative financial impacts on your academic career in any of the following ways? (Select all that apply.)

\_\_\_Loss in tuition as a result of dropping a class(es)

\_\_\_Loss in tuition as a result of an unplanned leave of absence

\_\_\_Loss in scholarship award due to diminished grades as a result of the situation

\_\_\_Costs associated with unexpected need to change housing

\_\_\_Costs incurred for physical and mental health services as a result of the situation

\_\_\_Did not have a negative financial impact on academic career

\_\_\_Other [write-in]

# 

# INSTITUTIONAL RESPONSES [Online IHE students complete this section]

## Reporting Experiences

[ONLY DISPLAY IF ANY SEXUAL MISCONDUCT EXPERIENCE FROM THE ABOVE MODULES IS INDICATED.]

Did you tell anyone about any of these experiences?

\_\_\_Yes [if yes, display question 1 below]

\_\_\_No [if no, display question 3 below]

1. Whom did you tell? (Select all that apply.) [DISPLAY THIS QUESTION IF the answer to the above question is “yes”.] [IHEs can customize these generic terms to reflect specific office/dept/role names if applicable.]

\_\_\_Roommate

\_\_\_Close friend other than roommate

\_\_\_Off-campus counselor/therapist

\_\_\_On-campus counselor/therapist

\_\_\_Confidential Resource Advisor

\_\_\_Title IX Coordinator

\_\_\_Romantic partner

\_\_\_Institution health services

\_\_\_Parent or guardian

\_\_\_Campus security or police department

\_\_\_Other family member

\_\_\_Local police

\_\_\_Doctor/nurse

\_\_\_Office of Student Conduct (not same as Title IX Office)

\_\_\_Religious of congregational leader, including Clergy, Pastor, Rabbi, Imam or

another religious leader

\_\_\_Resident Advisor or Residence Life staff

\_\_\_On-campus rape crisis center staff

\_\_\_Off-campus rape crisis center staff

\_\_\_Institution faculty or staff

\_\_\_Other [write-in]

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Very Useful | Moderately Useful | Some- what Useful | Slightly Useful | Not at all Useful |
| 1a. How useful was the on-campus counselor/therapist in helping you deal with the incident? [DISPLAY THIS QUESTION IF Who did you tell? On-campus counselor/therapist is selected.] |  |  |  |  |  |
| 1b. How useful was the Confidential Resource Advisor in helping you deal with the incident? [DISPLAY THIS QUESTION IF Who did you tell? Confidential Resource Advisor is selected.] |  |  |  |  |  |
| 1c. How useful was the Title IX Coordinator in helping you deal with the incident? [DISPLAY THIS QUESTION IF Who did you tell? Title IX Coordinator is selected.] |  |  |  |  |  |
| 1d. How useful were the institution health services in helping you deal with the incident? [DISPLAY THIS QUESTION IF Who did you tell? Institution health services is selected.] |  |  |  |  |  |
| 1e. How useful was the campus security or police department in helping you deal with the incident? [DISPLAY THIS QUESTION IF Who did you tell? Campus security or police department is selected.] |  |  |  |  |  |
| 1f. How useful was the Office of Student Conduct in helping you deal with the incident? [DISPLAY THIS QUESTION IF Who did you tell? Office of Student Conduct is selected.] |  |  |  |  |  |
| 1g. How useful was the Resident Advisor or Residence Life staff in helping you deal with the incident? [DISPLAY THIS QUESTION IF Who did you tell? Resident Advisor or Residence Life Staff is selected.] |  |  |  |  |  |
| 1h. How useful was the institution faculty or staff in helping you deal with the incident? [DISPLAY THIS QUESTION IF Who did you tell? Institution faculty or staff is selected.] |  |  |  |  |  |

1. What motivated you to tell someone about the incident? [Write-in/open text]
2. What factors contributed to your decision not to tell anyone about the situation or incident? (Select all that apply.) DISPLAY THIS QUESTION IF Did you tell anyone about the incident before this questionnaire? No is selected.]

\_\_\_\_Ashamed/embarrassed

\_\_\_\_It’s a private matter – wanted to deal with it on my own

\_\_\_\_Concerned others would find out

\_\_\_\_Didn’t want the person who did it to get in trouble

\_\_\_\_Fear of retribution from the person who did it

\_\_\_\_Fear of not being believed

\_\_\_\_Thought I would be blamed for what happened

\_\_\_\_Didn’t think what happened was serious enough to talk about

\_\_\_\_Didn’t think others would think it was serious

\_\_\_\_Thought people would try to tell me what to do

\_\_\_\_Would feel like an admission of failure

\_\_\_\_Didn’t think others would understand

\_\_\_\_Didn’t have time to deal with it due to academics, work, etc.

\_\_\_\_Didn’t know reporting procedure on campus

\_\_\_\_Feared I or another would be punished for infractions or violations (such as underage drinking)

\_\_\_\_Did not feel the campus leadership would solve my problems

\_\_\_\_Feared others would harass me or react negatively toward me

\_\_\_\_Thought nothing would be done

\_\_\_\_Other [write-in; optional for respondents]

## Responses to Survivors

[DISPLAY IF RESPONSE TO A1 (“WHOM DID YOU TELL?”) INCLUDES ANY OF THE FOLLOWING: TITLE IX COORDINATOR, CAMPUS SECURITY OR POLICE DEPT, OFFICE OF STUDENT CONDUCT, RESIDENT ADVISOR OR RESIDENCE LIFE STAFF, INSTITUTION FACULTY OR STAFF]

Instructions: In thinking about the events related to sexual misconduct described in the previous sections, did [INSTITUTION]:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes | No | NA |
| Take the report seriously? |  |  |  |
| Maintain my privacy when I made the report? |  |  |  |
| Give me an opportunity to voice my preferences for moving forward? |  |  |  |
| Support me when I made the report? |  |  |  |
| Take action to address factors that may have led to the sexual misconduct? |  |  |  |
| Handle the report fairly? |  |  |  |
| Offer to connect me with either formal or informal resources (e.g., counseling, academic services, or meetings)? |  |  |  |
| Allow me to have a say in how my report was handled? |  |  |  |
| Meet my needs for support and accommodations? |  |  |  |
| Have someone reach out to me to discuss my needs related to: medical care, mental health, academics, housing, safety planning, no-contact orders, etc.? |  |  |  |
| Inform me about reporting and resolution options (formal and informal) available through [INSTITUTION]? |  |  |  |
| Inform me about reporting and resolution options available through local law enforcement? |  |  |  |

# 

# CAMPUS SAFETY

## Sense of Safety

Instructions: Using the scales provided, please indicate the degree to which you agree or disagree with the following statements.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly Disagree | Disagree | Agree | Strongly  Agree | I don’t know |
| On or around this campus, I feel safe from sexual harassment. |  |  |  |  |  |
| On or around this campus, I feel safe from dating violence. |  |  |  |  |  |
| On or around this campus, I feel safe from sexual violence. |  |  |  |  |  |
| On or around this campus, I feel safe from stalking. |  |  |  |  |  |

## 

## Perception Of Sexual Misconduct As Part Of Campus Life

Instructions: Using the scales provided, please indicate the degree to which you agree or disagree with the following statements.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly Disagree | Disagree | Agree | Strongly  Agree | I don’t know |
| I don’t think sexual misconduct is a problem at [INSTITUTION]. |  |  |  |  |  |
| I don’t think there is much I can do about sexual misconduct at [INSTITUTION]. |  |  |  |  |  |
| There isn’t much need for me to think about sexual misconduct while at college. |  |  |  |  |  |