RECOMMENDED GUIDELINES FOR COMPREHENSIVE
SEXUAL ASSAULT RESPONSE AND PREVENTION ON CAMPUS

As approved by the Attorney General’s Sexual Assault Task Force
January 2006

The Campus Response Committee of the Attorney General’s Sexual Assault Task Force
developed the following guidelines to provide college and university campuses with an
outline of recommendations and strategies for developing a multidisciplinary sexual assault
response policy and protocol. The Committee strongly recommends using the Guidelines,
but recognizes that campuses vary in size, population, and resources and will therefore
vary in their ability to apply the Guidelines.

I DEFINITION AND EXPLANATION OF SEXUAL ASSAULT

1. The Task Force defines Sexual Assault as any nonconsensual sexual act. A sexual act is
nonconsensual if it is:
   A. inflicted upon someone who cannot grant consent (due to cognitive disability, age,
      incapacitation due to drug/alcohol use, etc.); or
   B. compelled through the use of coercion, intimidation, threats, or physical force.
2. Sexual assault crosses race, class, religion, gender, sexual orientation, age and ability. Sexual
assault survivors are most often individuals who are perceived by perpetrators as vulnerable
and/or accessible and lacking in credibility.
3. People who survive sexual assault are identified as victims and/or survivors. Victims or
survivors are not at fault.
4. Perpetrators of sexual assault can be anyone, regardless of race, class, religion, gender,
sexual orientation, age and ability. Perpetrators are responsible for committing sexual
assault and should be held accountable for their actions.

II DEFINITION AND EXPLANATION OF PREVENTION

1. To define Prevention, this document describes WHEN in the context of sexual assault do
prevention efforts occur, WHO are the targets for prevention efforts, and WHAT is the
focus of chosen strategies.
   A. WHEN an intervention occurs:
      i. Primary Prevention is defined as focusing efforts on the roots causes of
         sexual violence in order to stop sexual violence before it occurs. Primary efforts
address the attitudes, behaviors, and conditions that support, condone, and lead to sexual violence.

ii. **Secondary Prevention** is defined as focusing efforts on specific groups known to be at-risk for perpetration or victimization in order to decrease the occurrence of sexual violence. Secondary efforts include risk reduction strategies such as recognition and avoidance.

iii. **Tertiary Prevention** is defined as focusing efforts on decreasing the impact of sexual violence on victims and increasing the accountability of offenders after sexual violence has occurred and working to prevent the reoccurrence of sexual violence (revictimization and recidivism of offenders). Tertiary efforts include treatment and service provision.

B. **WHO** is the intended audience:

i. **Universal Interventions** are aimed at groups or the general population regardless of each individual’s risk for sexual violence victimization or perpetration. Groups can be defined geographically (e.g., entire school or community) or by characteristics (e.g., ethnicity, age, gender).

ii. **Selected Interventions** are aimed at individuals who are thought to have a heightened risk for sexual violence victimization or perpetration.

iii. **Indicated Interventions** are aimed at individuals who have already been victimized or have already perpetrated sexual violence.

C. **WHAT** is the focus:

i. **Individual** factors (biological and personal history) that may influence how an individual behaves and may increase or decrease his/her likelihood of becoming a victim or perpetrator of sexual violence.

ii. **Relationship** factors (family, friends, intimate partners, mentors, peers, other significant relationships) which may increase or decrease an individual’s risk of becoming a victim or perpetrator of sexual violence.

iii. **Community** factors or contexts (e.g., student housing, clubs, student groups, Greek system, athletics) in which social relationships occur and the characteristics of these settings which may increase or decrease the risk for sexual violence.

iv. **Institutional** factors, processes and contexts (e.g., sexual assault/harassment policies and protocols, staff training) which support or challenge norms that may lead to or prevent sexual violence.

v. **Societal** factors which foster a climate in which violence may be encouraged or inhibited (e.g., norms regarding violence, norms regarding gender roles).

2. Prevention and Outreach/Education are different.

   A. **Prevention** strategies focus on changing the underlying conditions that allow sexual violence to occur. Prevention falls into the categories of primary and secondary prevention. Prevention efforts are:

   i. **comprehensive**: focused at multiples levels (individual, relationship, community, institutional, and societal);
ii. aimed at changing knowledge, attitudes, and behaviors which support sexual violence; and
iii. sustainable: work to create lasting change.

B. Outreach/Education activities raise awareness of the scope and impact of sexual violence. Outreach/education often falls into the categories of secondary and tertiary prevention. Examples of outreach/education activities include:
   i. defining sexual violence
   ii. discussing statistics
   iii. discussing the impact of sexual violence (usually on victims)
   iv. discussing risk factors (e.g., alcohol and drug use) and risk reduction strategies
   v. providing information about how to support a survivor and where to go for help

C. Prevention does not preclude outreach/education, however it is important to remember that outreach on its own is not preventative.

III Definition and Explanation of Cultural Competency

1. The Task Force defines Cultural Competency as the individual and institutional effort to become familiar with and aware of the diversity of shared values, norms, traditions, customs, art, history, folklore, language, music and institutions of groups of people and to honor and respect differences.

2. Cultural Competency includes the development and publication of policies and protocols on sexual assault that include consideration for the specific needs and diversity of all victims/survivors.

3. Cultural Competency includes training and resources for staff in an effort to develop multicultural attitudes, knowledge, and skills on issues such as race, ethnicity, class, religion, gender, sexual orientation, age, and abilities.

4. Cultural competency includes the promotion of an environment where group members may both challenge and support individuals and systems in identifying oppression.

5. Cultural competency includes demonstrating and modeling a willingness to examine and challenge our own biases, values and assumptions for the purpose of developing an effective and caring institutional intervention and response.

IV Administrative Support

1. In order to demonstrate their commitment, Campuses need to make sexual assault response and prevention a top priority. Ways of demonstrating leadership and commitment are to:
   A. hire, assign or identify permanent staff with demonstrated training or comprehension of sexual assault response and prevention;
   B. require criminal history checks on all university employees job duties include access to students;
C. support the development, implementation and maintenance of a campus Sexual Assault Response Team (SART) or participate on the local community/county SART for the purposes of:
   i. facilitating a collaborative response, and
   ii. continuing improvement in the response to victims/survivors;
D. identify and designate staff to regularly meet with community agencies and attend related community meetings for the purpose of facilitating a collaborative multidisciplinary response;
E. identify sustainable funding to support sexual assault education, prevention, and response services on campus; and
F. designate funds to support regular and on-going campus and off-site training and continuing education related to sexual assault response and prevention.

2. Publish information about sexual assault to its students, staff, faculty and local community. Minimally, published information would include:
   A. a definition of sexual assault;
   B. a policy and/or protocol for sexual assault prevention and response;
   C. the support services available for victims/survivors;
   D. the range of sanctions for a student, faculty or staff person found responsible for committing a sexual assault; and
   E. how students, faculty and staff can assist a victim/survivor, including how to refer the victim/survivor to services both on and off the campus.
       i. Publish protocols for departments that respond to sexual assault as a part of their services/duties (see Article XII, Section 1 for specific departments).

3. Encourage and facilitate student involvement in sexual assault response and prevention by:
   A. presenting campus sexual assault policies, protocols and student conduct codes at first-year orientation and residence hall meetings;
   B. appointing students to the campus SART and/or related committees and workgroups in order to gain student input and experience as it relates to campus sexual assault response and prevention;
   C. designating opportunities for students to participate in sexual assault education and prevention programming; and
   D. developing and publishing an on-going student survey/questionnaire to obtain student input on the campus sexual assault policy, protocols and student conduct codes.

V Advocacy

1. Support victims and survivors of sexual assault by:
   A. providing 24-hour sexual assault advocacy and crisis intervention or collaborate with a local community provider for 24-hour advocacy and crisis intervention services on campus;
   B. designating professionally trained campus advocates, volunteer or staff, or collaborate with a local community provider for on-going advocacy services on
campus which address immediate and long-term needs (e.g., medical, law enforcement, judicial and counseling);

C. designating at least one campus advocate (volunteer or staff) to participate on the campus and/or community SART or designate at least one community advocate (staff) to participate on behalf of the campus on the campus or community SART;

D. publishing campus sexual assault policies and protocols to include the roles and responsibilities of advocates; and

E. publishing a brochure, flyer or adhesive that can be widely distributed on campus and identifies the 24-hour crisis intervention and advocacy services available for sexual assault victims/survivors.

2. Train advocates to be reporters of sexual assault on behalf of victims/survivors who wish to disclose to campus officials.

VI Awareness/Education

A critical component in any sexual assault response and prevention program is the education of the campus community by:

1. Publishing and distributing sexual assault response and prevention information (including risk reduction) for the purpose of reaching incoming and continuing students.

2. Implementing required educational presentations for all incoming students focused on addressing the attitudes, beliefs and behaviors that contribute to the occurrence of sexual assault and dynamics (see sexual assault dynamics in Article XII, Section 4(a)) and appropriate interventions, responses and referrals to victims/survivors.

3. Implementing ongoing staff and student educational programs that address sexual assault dynamics.

4. Implementing annual Sexual Assault Awareness Month activities (April).

5. Publishing sexual assault information on student information websites and directories.

6. Requiring and/or encouraging and facilitating sexual assault awareness programming for campus sub-populations such as athletics, residence life, Greek organizations and other campus based student organizations.

7. Evaluating educational presentations and programs on an annual basis for accuracy, effectiveness and up-to-date information.

VII Data Collection, Records & Needs Assessment

In addition to federally mandated reporting (Clery Act), campuses need to actively collect data on sexual assault and share that information with its community by:

1. Publishing and posting reporting options (anonymous and known) for victims of sexual assault.

2. Designating a staff person to coordinate and compile data and maintain records for federal reporting requirements (Clery Act) and internal campus purposes, including:
   A. ensuring published policies and protocols regarding reporting are in compliance with the Clery Act; and
   B. ensuring published policies and protocols regarding confidential and de-identified information on the rates of sexual assault are in compliance with the Clery Act.

3. Developing and publishing a policy and protocol for maintaining copies of protection orders (Restraining Order and Stalking Order).
4. Collecting and evaluating student surveys/questionnaires for continued improvements in campus policies and protocols.

5. Conducting biennial needs assessments for services, programming, reporting and training, including:
   A. reporting needs assessment results to the campus SART and/or campuses officials responsible for updating campus policies and protocols; and
   B. providing student, staff and faculty access to biennial needs assessment results.

VIII JUDICIAL RESPONSE

To ensure an appropriate and adequate judicial response to sexual assault by:

1. Designating permanent staff to investigate and adjudicate reported incidents of sexual assault.

2. Requiring sexual assault specific training for permanent staff and hearing board officials.

3. Investigating and resolving reports of sexual assault in a timely manner, keeping in mind that survivors always suffer consequences and that a goal of resolution is to mitigate the consequences and harm to the survivor.

4. Publishing policies and protocols to maintain the confidentiality of the accuser and the accused.

5. Publishing policies and protocols on investigative procedures, notification for accusers and accused (regarding hearing of cases) and students’ rights to due process.

6. Publishing policies and protocols to address pending cases where the accused student and the victim/survivor are living in the same residence hall, part of the same department or attending the same class(es).

7. Publishing policies and protocols that grant victims/survivors the right to advocacy/support services throughout the judicial response process.

8. Designating at least one campus judicial response official to participate on the campus and/or community SART.

IX MEDIA

Work with the media while protecting the privacy of the victim/survivor by:

1. Requiring public relations representatives to attend sexual assault specific training.

2. Collaborating with local and campus media representatives to plan and promote sexual assault awareness and educational events.

3. Developing regular and ongoing multi-media contact for the purpose of information and education on sexual assault response, risk reduction and prevention.

4. Publishing policies and protocols for media coverage of sexual assault cases on campus.

X MEDICAL AND COUNSELING RESPONSE

Provide a quality, accessible and professional medical and mental health response to sexual assault on campus or collaborate with local community providers for the medical and mental health response to sexual assault by:
1. Publishing the location, hours and available medical services, including counseling, in response to sexual assault.
2. Providing access to 24-hour medical or emergency mental health services in response to sexual assault, or contract with local community providers for a 24-hour (or after-hours) response.
3. Providing victims/survivors with access to the full range of sexual assault medical services, including forensic evidence collection conducted by a Sexual Assault Nurse Examiner (SANE), or collaborate with local community providers for the full range of services.
4. Providing access to female and male medical/counseling providers so that victims/survivors may select a specific gender if desired.
5. Developing and publish policies and protocols for dispensing STI prophylaxis and emergency contraception to victims/survivors of sexual assault, or collaborate with a local community provider to provide these services.
6. Providing free or affordable, quality, and professional medical and counseling services in the aftermath of sexual assault and low-cost follow-up care, and/or collaborate with a local community provider for these services.
7. Designating at least one campus medical and counseling professional to participate on the campus and/or community SART.
8. Requiring and facilitating sexual assault specific training for all medical and counseling professionals.
9. Identifying appropriate on- and off-campus training, to ensure that medical professionals who conduct sexual assault forensic examinations have completed an approved SANE training, and/or that medical professionals who provide a medical response to sexual assault have received training and information on sexual-assault-specific health services (STI and EC prophylaxis, etc) and information and referral resources for victims/survivors.
10. Providing training to medical professionals and health services staff on drug facilitated sexual assault so that the signs and symptoms can be readily identified and an appropriate response, such as testing on or off-site, can be provided.
11. Establishing medical professionals and health services staff as reporters for anonymous reporting to insure that records and documentation of sexual assault are captured, even when the victim/survivor does not wish to disclose to campus or criminal justice system officials.
12. Providing mental health professionals on campus who specialize in counseling sexual assault survivors, or collaborate with local community providers for counseling services.
13. Providing information on Crime Victim’s Compensation to all patients and victim/survivors seeking medical or mental health services.

XI Campus and Community Collaboration

Create an on-campus sexual assault response and education network and work with community groups by:

1. Implementing a campus Sexual Assault Response Team (SART), or other on-going workgroup or committee, or participate on the community/county SART that addresses sexual assault response and prevention on campus. The campus SART membership would include students, staff and faculty and individuals who provide response services, as well as those
who develop and publish policies and protocols related to sexual assault response and prevention on campus.

2. Designating a campus staff or faculty to network and collaborate with community agencies, including: local rape crisis center, emergency rooms, law enforcement, District Attorney’s Office (victim/survivor assistance program), culturally specific providers, etc.

3. Designating a campus staff or faculty to participate on the Attorney General’s Sexual Assault Task Force, Campus Response Committee.

**XII Public Safety and Law Enforcement**

Ensure an appropriate and adequate Public Safety response to sexual assault by:

1. Publishing policies and protocols for on-campus public safety response and local law enforcement response.

2. Establishing how Public Safety and local law enforcement will interface, including:
   A. establishing the roles and responsibilities of campus public safety in sexual assault response; and
   B. establishing the roles and responsibilities of community law enforcement in campus sexual assault cases.

3. Publishing policies and protocols that clarify how offices of public safety interface with campus departments (residence life, judicial affairs, student organizations, etc.).

4. Clarifying jurisdictional issues between all community and campus law enforcement and public safety responders and by ensuring that all involved in campus and community response understand the specific jurisdictional issues involved.

5. Developing collaborative relationships between public safety, law enforcement and campus departments (e.g., residence life, judicial affairs, women’s center, etc.).

6. Requiring sexual assault training for campus public safety officers and staff, which should include campus response options, criminal justice system response options and how to help a victim/survivor make a report (anonymous or otherwise).

7. Publishing policies and protocols regarding confidentiality for victim/survivors as they relate to disclosures to campus public safety officials.

8. Publishing policies and protocols to address victims/survivors transportation needs (to advocacy services, medical services, housing services, etc.).

9. Requiring criminal history checks on all campus public safety officers/security.

10. Designating at least one campus public safety officer to participate on the campus and/or community SART.

11. Publishing policies and protocols to maintain copies of and enforce Orders of Protection (Restraining Order/Stalking Order).

**XIII Training**

Campus leadership ensures that sexual assault response and prevention training is a priority by:

1. Providing regular, accessible and quality sexual assault specific training for campus staff, faculty and students who respond to campus sexual assault or address policies and protocols related to campus sexual assault. These groups include (but are not limited to):
   A. Live-on-campus staff such as Resident Assistants and Resident Directors
   B. Peer advocates
   C. Women’s Center staff
   D. Campus safety accompaniment or transportation services
2. Accessing off-campus training programs, such as:
   A. Attorney General's Sexual Assault Task Force, Sexual Assault Training Institute
   B. Crime Victims Assistance Network
   C. Local Advocacy Agency Training Program
   D. Community/County Sexual and Domestic Violence Councils and Task Forces

3. Prioritizing the development and implementation of a sexual assault prevention and education training program for staff, faculty and students, including:
   A. requiring adequate training and background for student and staff educators; and
   B. providing support for continuing education and collaboration with colleagues.

4. Publishing sexual assault training policies and protocols to ensure that training includes (but is not limited to):
   A. Sexual assault dynamics
      i. Historical, cultural, religious, and social influences
      ii. Identification of victims
      iii. Identification of perpetrators
      iv. Sexual assault demographics data (age, gender, location, time, sexual orientation, ability, race, class, etc.)
      v. Incidence and prevalence
      vi. Prevention (including risk reduction)
   B. Campus and community options for response and justice
   C. Campus and community referrals and resources
   D. Confidentiality practices
   E. Options for anonymous and known reporting
   F. Clery Act reporting requirements
   G. Risk reductions factors (drug and alcohol use, etc.)