Summary of Findings

Throughout 2009-2010, University Health Services (UHS) violence prevention staff set out to critically examine access to campus and community victim services through a needs assessment, specifically focusing on the barriers that victims of sexual assault, dating violence, domestic violence, and stalking face when trying to access these services.

This needs assessment is designed to do three things: increase the number of student victims who utilize services, improve the experiences of students who do seek services, and provide a community-informed process for developing services where there are currently gaps.

Participating EVOC partners include: University Housing, University Health Services, Student Assistance Judicial Affairs at the Division of Student Life, Promoting Awareness, Victim Empowerment (PAVE), the University Police Department, Dane County District Attorney's Office Victim Witness Unit, Domestic Abuse Intervention Services, Inc., Madison Police Department, Rape Crisis Center, and the Sexual Assault Nurse Examiner (SANE) Program at Meriter.

Student Victim Identified Barriers
Common themes that emerged from the student victim self-identified barriers to accessing services:

1. **Academic**: Barriers involving students’ academic careers
   - Examples include: Lack of academic support; difficulty rescheduling classes

2. **Alcohol**: Barriers involving drinking and/or the use of drugs
   - Examples include: Fear of getting ticket for underage drinking if they report to police; at the time of the assault, the victim was using alcohol or drugs and cannot remember what happened

3. **Knowledge/Misconceptions**: Barriers involving lack of information or misinformation
   - Examples include: Unsure if they have been assaulted/what is sexual assault; idea that going to the police is the only option

4. **Privacy**: Barriers involving confidentiality and privacy concerns
   - Examples include: Fear parents will be notified if they seek help from campus services; not wanting others to know what happened to them

5. **Safety**: Barriers involving concern for personal safety
   - Examples include: General safety concerns; fear of retaliation by the perpetrator

6. **Services Available**: Barriers involving services provided (both on and off campus)
   - Examples include: Don’t know where to go/who to contact for help; campus and community services lack of cultural competency

7. **Social Norms**: Barriers involving how society/culture, peers and family treats and views victims
   - Examples include: Self-blame and being told it is their fault; cultural/familial repercussions

8. **Systemic**: Barriers involving how the institution/system is organized
   - Examples include: Reporting their story numerous times; might have to face the perpetrator in court

End Violence on Campus (EVOC) Partners Prioritized

On October 28, 2010, EVOC partners met and reviewed this needs assessment in order to prioritize which barriers had the greatest potential for change in the next 2-4 years. Together, we are working to create the social change needed to eradicate violence against women at UW-Madison.

EVOC initiative partners pledge to work to address these key barriers in the next 2-4 years:

1. **Social Norms**: Address victim blaming attitudes and behaviors that make violence legitimate
2. **Alcohol**: Address the role alcohol plays in preventing people from getting help
3. **Navigating the University**: Make the matrix of services available more accessible
4. **Education**: Make prevention education more accessible, link to available victim services
**PERCEIVED BARRIERS**

Partners were asked if any of the following create a barrier to accessing services:

1. **Race/ethnicity:** Only four EVOC partners identified race or ethnicity as a potential barrier for students seeking services. Only one EVOC partner reported hearing directly from students that race or ethnicity was a barrier to accessing services.
2. **Sexual orientation:** Most EVOC partners did not indicate that sexual orientation would be a barrier to accessing services. The few partners that did indicate sexual orientation as a potential barrier did not report hearing this directly from students.
3. **Location/transportation:** Many EVOC partners indicated that lack of awareness/knowledge of services and location could be barriers to students accessing services. Referral to off campus services could also pose barriers.
4. **Alcohol:** Overwhelmingly, EVOC partners perceived fear of getting in trouble for underage drinking (getting a ticket or parents finding out) to be a significant barrier to reporting, primarily to law enforcement. Other possible barriers around alcohol include embarrassment over loss of memory when drinking and not being believed when alcohol was involved at the time of the assault.
5. **Minor status:** Only one EVOC partner considered minor status a potential barrier to accessing services.

**Other barriers identified by EVOC partners:** Partners dealing with family dynamics have different needs/perceived barriers; reluctance to label or identify their experience as sexual assault, domestic violence or stalking, could prevent victim from seeking services; financial - the impact of intervention on student status could jeopardize family’s livelihood; victim might not want help

**STUDENT NEEDS**

EVOC partners consistently identified four areas of crucial needs for student victims:

1. **Academic & Institutional Support:** Academic accommodations; physical and emotional safe space; campus as a safe non-victim blaming environment where victims are believed, their interests are protected, their privacy respected, and perpetrators are held accountable; large-scale prevention efforts - at societal and community level; coordinated response
2. **Access to Services:** Location/transportation; confidence in services; immediate safety (e.g. emergency housing); access to counseling services; access to culturally/linguistically competent services; confidential, free service
3. **Education:** Education for students, faculty and staff on the issues of sexual assault, domestic violence and stalking, predatory behavior, consent, medical needs for victims, and alcohol; information more readily available; specific information on how to access services
4. **Training:** Training on appropriate referrals, victim response, services available, and on how to deal with liability, legal issues and subpoenas

**SOURCES OF CONFUSION IN INTERACTION WITH CAMPUS**

Three main themes were identified:

1. **Knowledge of Services:** Students are unaware of the services available on campus and in the community; staff confused about the campus resources and/or forget which resources are available and what they offer to students
2. **Confidentiality:** Staff from different campus units sometimes become confused or frustrated if confidentiality restricts information sharing; concern that student victims are forced to tell his/her story over and over again; confusion over what type of assault must be reported to University (recent sexual assault; on campus sexual assault; life-time sexual assault); tension between community organization’s role as advocate for individual students vs. a resource for the institution
3. **University process & bureaucracy:** Confusion/difficulty understanding the bureaucracy of the university, difficulty identifying decision-makers

**Other sources of confusion for partners were:** How to handle sensitive case situations when it involves a group (i.e., student organization, fraternity or sorority) vs. an identifiable individual; tracking sexual assault, domestic violence and stalking student victims/clients; student immigration issues when dealing with criminal justice system