# Annual Title IX / Sexual Misconduct Training

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Executive Director for Equal Opportunity and Access & Title IX Coordinator

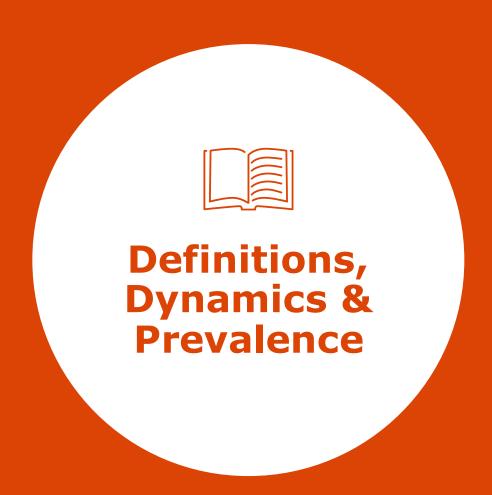






#### Why are we here?

- Federal law requires individuals who are involved in sexual misconduct and Title IX processes to have one-time training to do their specific role (i.e. investigator, adjudicator, appellate, etc.)
- Oregon Law (ORS 350.253) requires annual training related to
  - 1. Definitions and dynamics
  - 2. Prevalence
  - 3. Best practices for addressing bias and increasing accessibility via an anti-oppression framework
  - 4. Trauma-informed best practices
  - 5. For investigators, how to conduct effective interviews & best practices in interviewing sexual assault survivors
- Today we'll covering #'s 1-3 and on June 15<sup>th</sup> we'll cover #4
   Investigators get #5 separately throughout the year





#### **Definitions, Dynamics & Prevalence**

- EOA Website Review & Navigation
- OSU Policy 05-001 Sexual Misconduct and Discrimination <a href="https://policy.oregonstate.edu/UPSM/05-001">https://policy.oregonstate.edu/UPSM/05-001</a> sexual misconduct discrimination
- EOA's Annual Report

https://eoa.oregonstate.edu/sites/eoa.oregonstate.edu/files/2021-2022 annual report - final.pdf

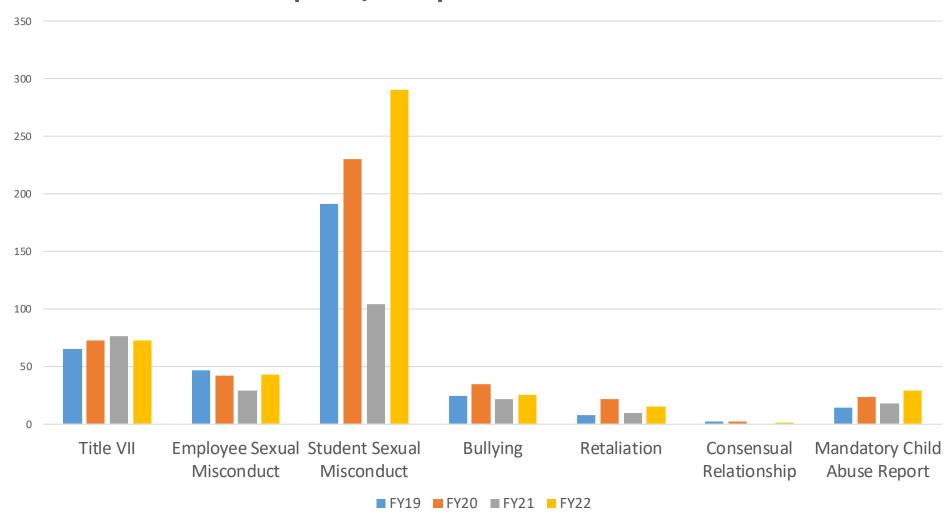


| Year-to-Year Reports / Complaints                  |      |      |      |      |      |      |  |  |
|--|------|------|------|------|------|------|--|--|
|  | FY17 | FY18 | FY19 | FY20 | FY21 | FY22 |  |  |
| Discrimination / Discriminatory Harassment         | 102  | 133  | 65   | 73   | 76   | 73   |  |  |
| Employee Sexual Misconduct                         | *    | *    | 47   | 42   | 29   | 43   |  |  |
| Student Sexual Misconduct                          | 159  | 249  | 191  | 230  | 104  | 290  |  |  |
| Bullying   | 21   | 24   | 24   | 35   | 22   | 25   |  |  |
| Retaliation  | 11   | 3    | 8    | 22   | 10   | 15   |  |  |
| Consensual Relationship (complaints & disclosures) | 1    | 5    | 2    | 2    | 0    | 1    |  |  |
| Mandatory Child Abuse Report                       | 0    | 1    | 14   | 23   | 18   | 29   |  |  |
| Totals   | 294  | 415  | 351  | 427  | 259  | 476  |  |  |



## **Complaints – By the #'s**

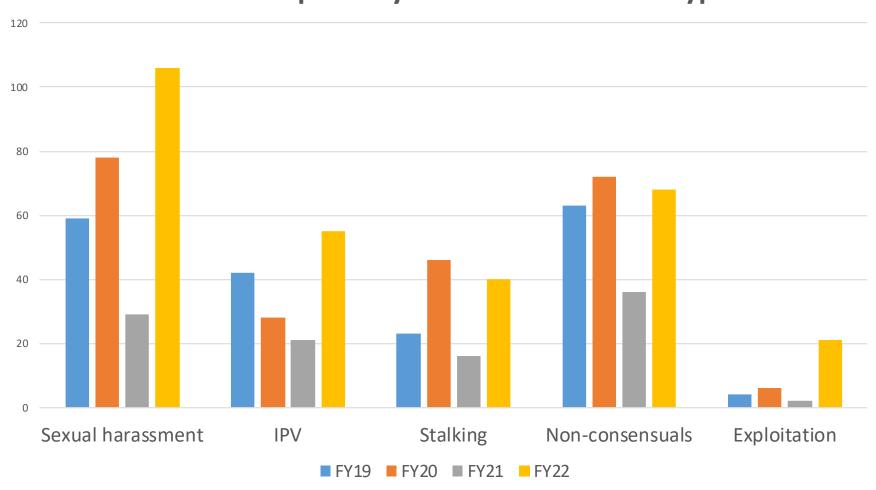
#### **Reports/Complaints FY19 to FY22**





## Complaints – By the #'s

#### **Student Reports by Sexual Misconduct Type**





#### **Current Themes & Focus for the Future**

- Current Themes
  - Increase in folks coming to EOA for lower-level concerns
  - Cases have increased, investigations have overall decreased
  - More male and trans/non-binary complainants
- Focus for the Future
  - New Title IX regulations releasing soon
    - We'll reconvene in the fall to review any changes
    - Likely Title IX = Sexual Misconduct again
    - Campus outreach & education
  - Interpersonal violence steering committee and stakeholder groups better aligning campus efforts
    - Better aligning prevention and outreach efforts
    - Healthy masculinity conversations



## **Questions? Comments?**



## **THANK YOU**





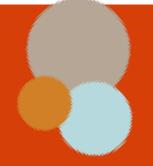
# Utilizing an Anti-Oppression Framework in Prevention Efforts

## Introduction

Prevention is possible when it is rooted in community engagement, situated in the larger context of liberatory praxis, and centers the lived experiences of marginalized survivors

- o 24.6% of cis female students experience sexual assault or rape
- o 6.8% of cis male students experience sexual assault or rape
- o 5.8% of students have experienced stalking since entering college
- o 73% of LGBTQ college students experience sexual harassment or assault

**RAINN** 



## Why We Are Here

# Where We Are Going

- Principles of Prevention
- Video & Activity
- Large Group Discussion

## What is Gender-Based Violence?

Gender-based violence is a general term used to capture any type of violence that is rooted in exploiting unequal power relationships between genders.

This can include gender norms and role expectations specific to a society as well as situational power imbalances and inequities.

Gender-based violence can impact anyone, and can include intimate partner and family violence, elder abuse, sexual violence, stalking and human trafficking.

-NYC Mayor's Office to End Domestic & Gender-Based Violence



# 9 Principles of Effective Prevention Programs

- 1. Comprehensive
- Varied TeachingMethods
- 3. Sufficient Dosage
- 4. Theory Driven
- 5. Positive Relationships

- 6. Appropriately Timed
- 7. Socioculturally Relevant
- 8. Well-trained Staff
- 9. Outcome Evaluation



#### TYPES OF PREVENTION

#### Response (Tertiary Prevention)

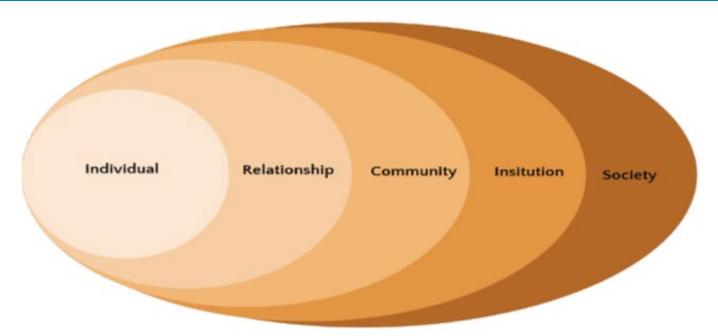
• This is how a community reacts/responds to violence

#### Awareness (Secondary Prevention)

 Strategies that work to increase knowledge that violence in an issue and one that needs to be addressed

#### Root Causes (Primary Prevention)

• Efforts that work to address root causes of violence and seek to stop violence before it occurs

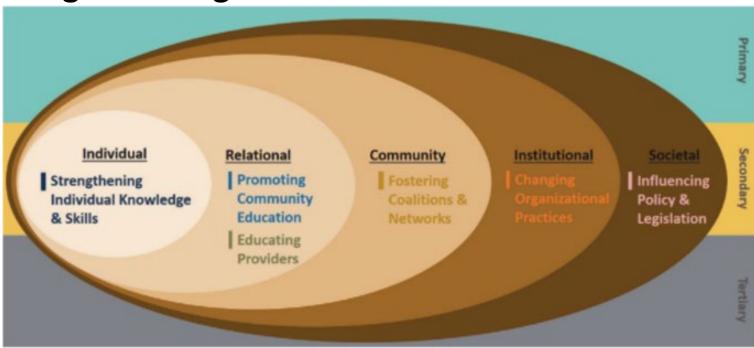


This model recognizes that individuals are influenced by the systems, values, and social norms the surround them



The Spectrum of Prevention helps us to think about specific actions can be used to prevent violer

**Putting them Together** 



| Level of Socioecological<br>Model | The Spectrum of Prevention                         | Primary   | Secondary  | Tertiary  |
|-----------------------------------|--|---|--|---|
| Individual                        | Strengthening individual knowledge & skills        | Comprehensive sexual health education   | Skills on how to utilize sexual health barriers  | Advocacy support services if folks experience gender-based violence     |
| Relationship                      | Promoting community education & Educating provider | Provide faculty & staff training opportunities  | Provide intervention toolkits faculty can use in their classrooms  | Offer confidential support groups for employees                         |
| Community                         | Fostering Coalitions & Networks                    | Promote activities that center the lived experiences of marginalized survivors                    | The Interpersonal & Gender-Based Violence Prevention, Support & Response Stakeholder group working to create a comprehensive support network | Share with the community how they can be involved in prevention efforts |
| Institution                       | Changing Organizational Practices                  | Collectively develop and implement policies that promote safe/violence-free learning environments | Target community at higher risk to provide customized support to change environment  | Community healing circles   |
| Society                           | Influencing Policy &<br>Legislation                | Social norms campaigns  | Challenge historically problematic structure and encourage to develop nonviolent products/programs/content                                   | Informal resources on how<br>to report harm or<br>problematic behaviors |

## **Promoting Healthy Norms**

It's not enough to only work against something like oppression we have to work towards something as well.

Oregon Attorney Genernal's Sexual Assault Task Force





## **Activity Questions**

- 1. What came up for you while watching this video?
- 2. What guides *your* anti-violence work?
- 3. How is anti-violence work also anti-oppression work?
- 4. Vanessa says she sees anti oppression work as primary violence prevention work what do you think she means by this?
- 5. How do you use this information within the scope of your work at OSU?
- 6. How has sexual violence been used within racist systems? Reflect on the history of slavery and colonization that Amita Swadhin shares. Are there other examples of how intimate and gender-based violence have been a part of our nation's history?
- 7. Amita also talks about how systemic oppression shows up in our relationships. Think about how violence, including state violence, contributes to intimate violence. What do you see in your community along these lines?

# Recap & Takeaways

You have to act as if it were possible to radically transform the world. And you have to do it all the time.

-Angela Davis



# Questions?

#### Let's Connect

- 54 1-737-234 7
- Elizabeth.Kennedy@OregonState.edu
- የ 110a Plageman



## **Trauma Informed Best Practices**

Your Role in Building a Connected \_\_\_\_\_
& Trauma Informed Community

#### **Difficult Content & Self Care**

We recognize that the topics we are discussing today may be difficult to navigate and can generate strong emotional responses. We encourage you to care for your safety and well-being as you engage with this content. Take a deep breath, let your eyes move around the room, drink water, stand up & stretch, or step away as needed.

If you are experiencing a need for urgent support, we are here for you.

Please reach out to the below resources for immediate support and care:

**Beyond Benefits: Employee Assistance Program:** Available 24/7: 1-855-327-4722

**CARDV**: 24/7 Crisis Hotline: 541-754-0110 or 1-800-927-0197; cardv.org

Crisis Text Line: text "HOME" to 741741

#### **Welcome & Introductions**









#### **Allison or Ally**

Director of Survivor Advocacy & Confidential Advocate @ CAPE

Working with survivors in Oregon since 2000

Joined the team at OSU in Jan. '21, prior to that spent time building collaborative community response teams in Multnomah County & conducting domestic violence Fatality Reviews

Live in Salem with my 15yo, partner, dog & cat (have a 22yo in MO) Enjoy the beach, the garden & a good book

#### **Welcome & Introductions**







#### **Francis**

Director of the Office of Advocacy

Background in university housing and mental health training

Served as a Rape Crisis Counselor and Emergency Room Companion for Suffolk County

Current crisis counselor for National Suicide Lifeline

Two dogs, two cats, one great kid, and I'm a huge video game nerd

## Let's Take a Minute Together



#### What is Trauma Informed Care?

- An awareness of the prevalence of trauma
- An understanding of the *impact* of trauma on physical, emotional, & mental health - as well as on behaviors & engagement in services
- An understanding that current service systems can retraumatize individuals

<u>Trauma Specific Services</u> - programs, interventions, & therapeutic services aimed at treating the symptoms or conditions resulting from a traumatizing event.

<u>Trauma Informed Care</u> – an approach, based on knowledge of the impact of trauma, aimed at ensuring environments & services are welcoming & engaging for those both *recieving & delivering services* 

\*traumainformedoregon.org

#### The Four R's

A program, organization, or system that is trauma informed:

**Realizes** the widespread impact of trauma and understand potential paths for recover;

**Recognizes** the signs and symptoms of trauma in clients, families, staff, and others involved with the system;

**Responds** by fully integrating knowledge about trauma into policies, procedures, and practices;

and seeks to actively **Resist** re-traumatization"

## **Practice Makes Progress**

#### Establishing Safety

- Basic needs first
- Be mindful of where you are in the room and where THEY are in the room
- Take breaks and offer other supports as well
- Have them identify what safety is for them & create a routine around that for your meetings

#### Building Trust

- o Open ended questions, model CONSENT "Is it ok for me to ask you a few questions?"
- Clearly explain your role and what they can expect from the process
- Invite questions from them
- Let them know what their rights are during the process

#### What can you say?

- o "Thank you for coming in to talk with me"
- o "I am here to help & to connect you with others who can help"
- Acknowledge the difficulty

#### Sharing resources

- Limit to what they are requesting & share in varied formats
- Know that you are likely to have to repeat things take your time and CLARIFY

## **Caring for Our Community**

**Holistic** care means we view our OSU community members as <u>whole persons</u> with mental, emotional, physical, spiritual and relational lives that exist within a social and cultural context. These aspects all interact, intersect and affect one

another.



We can be neutral & unbiased while still being caring, compassionate, and thoughtful.

## **Activity Time**



## **Trauma-informed care for respondents**

## **The Office of Advocacy**

Who we are



Who we aren't



### Factors influencing sexually harmful behaviors

- The individual's history of engaging in sexual misconduct
- Attitudes of sexual entitlement
- Peer norms supportive of sexual aggression
- Intimacy deficits
- Sexual preoccupation
- Hostility toward women or other groups
- General lifestyle instability
- General antisocial or criminal attitudes
- The individual's ability to problem solve and recognize the consequences of one's actions
- o One's level of callousness and proneness to manipulative behavior
- Alcohol use

#### The need for TIC for respondents

- Respondents have different needs from complainants, but still require TIC
  - Preparing their case can be a mental and emotional burden
  - Derails academic progress
  - Ostracized from peer groups (Harper et al. 2014)
  - Relationships with staff members impacted
  - Effects on family relationships
  - Possible implications for future employment
  - Identity crisis
- Perceived unfairness, loss of control
  - Prevalent narrative shaped by national and political discourse regarding Title IX and Non-Title IX SA/Mc
  - Loss of control strongly linked to increased risk of PTSD

#### Retaliation

 Retaliation is any action that adversely affects the employment, education, or access to a university program or activity of an individual due to the individual's engagement in protected activity.

#### **Re-entry**



- The importance of TIC through suspension and re-entry
- Our current process
- How can this process be more trauma-informed?
  - Restorative Justice/Circles of Support and Accountability

#### **Trauma-informed ways to support respondents**

- Be very clear about the process and its implications for their academic and social life
- Have intentional discussions with them about their support network
- Make referrals to CAPS
- Work to build trust and create opportunities for disclosure
- Increase perpetration-focused prevention efforts



### Where are the opportunities to intervene

- The individual's history of engaging in sexual misconduct
- Attitudes of sexual entitlement
- Peer norms supportive of sexual aggression
- Intimacy deficits
- Sexual preoccupation
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## **Questions, Comments, Opportunities to Collaborate?**