Sexual Health Initiative to Foster Transformation (SHIFT)

FINAL REPORT
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Co-Principal Investigators:
Jennifer S. Hirsch & Claude A. Mellins
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In February of 2015, President Bollinger announced the launch of a comprehensive research project, co-directed by Columbia University faculty members Jennifer S. Hirsch, PhD (Department of Sociomedical Sciences) and Claude Ann Mellins, PhD, (Departments of Psychiatry & Sociomedical Sciences) and funded by Columbia University. Over the past four years, SHIFT’s multi-disciplinary faculty team has used a community-based participatory research approach to examine the individual, interpersonal, and structural (cultural, community, and institutional) factors that shape sexual assault and sexual health among undergraduates at Columbia University (CU) and Barnard College (BC).

SHIFT’s broad goals were to advance the science of sexual assault prevention and to contribute to building a healthier and safer undergraduate community, using mixed methods, including ethnography, a daily diary, and a large scale population-based survey. Data collection was completed in January of 2017. The data analysis, scientific publication, and policy translation work are ongoing. This report summarizes key findings as of March 2019 and provides recommendations regarding university policies and programs.
‘Sexual assault’ encompasses a broad range of experiences, circumstances, vulnerabilities, and survivor outcomes. Recognizing and understanding that diversity is a vital first step to developing sufficiently comprehensive and varied approaches to prevention.

**SHIFT** found that nearly 1 in 4 (22%) CU/BC students had experienced sexual assault (defined as unwanted/non-consensual sexual contact) since matriculation. These rates are similar to those found at other universities. Higher rates of assault victimization were found among women, students outside the gender binary (hence referred to as gender nonconforming), and lesbian, gay, bisexual, or queer students.

Although a majority of students reported no incidents of sexual assault, among those who did report experiencing assault there were high rates of repeat victimization, with an average of 3 incidents per person.

Many students arrive at CU/BC with vulnerabilities related to pre-college experiences. This includes youth who have experienced sexual assault prior to college (20%) and those who have experienced adverse family experiences such as the death of a parent. Pre-college experiences such as prior assault were associated with elevated risk of experiencing or perpetrating sexual assault on campus.

**Pre-college sex education is a particular area of opportunity.** Many students have had steady romantic relationships before college (46%), or initiated oral, anal, or vaginal sex (44%). Having received formal education about how to say no to sex (i.e., refusal skills training) before age 18 was one of several pre-college factors associated with a reduced likelihood of experiencing penetrative sexual assault in college. However, many students arrive at CU/BC having received only limited education about sexual consent, sexual health, or how to protect themselves from sexual assault. This suggests that the educational interventions that the university provides should attend to gaps in students’ prior sexual health education.

Negative sexual experiences, including sexual assault, were linked to alcohol use, including incapacitation. It is vital, however, to bring nuance to the alcohol-sexual assault nexus. Without question, it is important to recognize how intoxication may produce vulnerability without blaming victims/survivors (herein referred to as survivors). It is equally important to note that students frequently have consensual and positive sexual experiences in the context of alcohol use, and that a third of assaults occur under conditions in which neither student is drinking or using drugs, including in the context of intimate partner relationships.
• Sexual assault was also associated with increased depression and anxiety symptoms, as well as hazardous alcohol use, suggesting a need for integrated prevention addressing mental health, alcohol use and sexual assault.

• Students knew about affirmative consent, but didn’t necessarily say they practiced it. The ethnographic research suggests that CU is effectively conveying information about the expected standard of behavior, and yet students’ actual consent practices of consent varied widely. One key social dimension identified was the idea of ‘sexual citizenship’—people’s understanding of their own right to determine if, when, and how sexual encounters occur, and others’ equivalent right.

• Many men expressed fears about ‘doing consent wrong’, and men of color raised particular fears about racialized vulnerability to accusations.

• Only 2% of students in the survey who had experienced sexual assault said a formal complaint was filed with CU or BC. The ethnography shed light on the perceived ‘social risks’ of reporting in terms of students’ identities, social relationships, and broader goals for college.

• Sexual assaults occur as a result of features of the social and community environment, interpersonal interactions, and individual perceptions and understandings; prevention efforts thus must operate at all three of these levels. Comprehensive prevention requires initiatives at multiple levels, including institutional policy changes and interventions targeted at both group dynamics and individual attitudes and behaviors.

• While SHIFT was not designed to test interventions, our findings speak to the value of existing prevention work in the area of refusal skills, bystander training, and alcohol harm reduction. SHIFT data also underline the potential for a broader and more comprehensive approach. Because sexual assaults occur as a result of individual perceptions and understandings, interpersonal interactions, and features of the social and community environment, prevention must also operate at all three of these levels.

RECOMMENDATIONS

SHIFT’s findings point to key features of next-generation sexual assault prevention. We describe this as a sex-positive, comprehensive, life-course approach that fosters sexual citizenship and healthy relationships, and integrates mental health and wellbeing, substance use, and sexual assault prevention efforts.

• SEX-POSITIVE: Educational initiatives on campus should consider a broad range of topics, going beyond consent to include positive and healthy social and sexual relationships, sex education, valuing one’s own and other’s sexual citizenship, sexual refusal skills, and bystander training;
- COMPREHENSIVE denotes a prevention strategy that addresses four dimensions of complexity:
  1. working with **multiple populations**, including those with specific vulnerabilities, as well as the overall student body;
  2. addressing **multiple outcomes**, taking an integrated approach to prevention, and acknowledging the interrelationships between sexual assault, substance use (particularly alcohol), and mental health;
  3. partnering with **multiple administrative divisions** that shape campus life, and,
  4. working on **multiple levels** of the ecological model.

- LIFE COURSE: The substantial proportion of students who experienced sexual assault prior to matriculation underlines the need for a life course approach to prevention. Sexual assault prevention programming for incoming freshman is many students’ first encounter with a conversation about sexual self-determination. As stakeholders in the K-12 education system, institutions of higher education could play a leadership role in supporting policies to ensure equitable access to comprehensive, age-appropriate, K-12 sexuality education as one component of campus sexual assault prevention.
In the US and elsewhere, sexual assault is recognized as a significant problem on college campuses. The increased attention to this problem in recent years has not translated into substantial gains in prevention.

Specific prevention interventions (such as refusal skills and bystander training) have been shown to be effective. Overall, however, research on campus sexual assault has been overly focused on individual attitudes and behaviors. Public health has a long history of addressing challenges as diverse as HIV, tobacco, and obesity through multi-level or “ecological” approaches to prevention, including attention to interpersonal, community, and societal factors. Taking an ecological approach means asking, as many researchers have before, what are the characteristics of people who commit assault and are assaulted. But it also means asking about their social interactions—what kinds of groups they are part of and what kinds of relationships they tend to enter into. Finally, it means thinking about the built environment, community, and institutional policy: the furniture in rooms, businesses around campus, and university alcohol and sexual assault policies and how they are enforced. These factors are interrelated to create what scholars think of as an “ecology.”

Unfortunately, this ecological approach has not been systematically applied to sexual assault research, despite calls for its use, leaving a big gap in evidence for prevention programming. SHIFT set out to understand individual attitudes and behaviors in the context of social dynamics and community and institutional factors that might create vulnerability or be protective against sexual assault.

SHIFT also drew on a key lesson from public health, which is that a focus on positive behaviors—on what people want to do, or enjoy, as opposed to what is bad or dangerous or harmful—can be effective for prevention. Our commitment to advancing sexual assault prevention, consequently, led us to examine sexual health and positive sexual experiences in addition to sexual assault.
SHIFT had three overarching specific objectives:

1) To measure accurately the prevalence of sexual assault/non-consensual sexual contact on campus among undergraduates;

2) To understand the ecology of sexual assault by examining key individual, interpersonal/social, and contextual and institutional risk and protective factors associated with sexual violence and sexual health, and

3) To use a community-based participatory research (CBPR) approach to work with key stakeholders to design the study and examine the implications of findings for interventions and policy.

SHIFT’s interdisciplinary team includes investigators from across CU’s campus (e.g. public health, social work, psychiatry, biostatistics, sociology, etc.), as well as outside consultants. SHIFT’s mixed methods research strategy combined ethnography, a population-based survey, and a daily diary study. Data collection at CU and BC began in the fall of 2015 and ran through January 2017. Data analysis, scientific publication, and policy translation work are ongoing. For an overview of SHIFT’s development, see Figure 1.

SHIFT’s examination of sexual assault focused on unwanted, non-consensual sexual contact, including sexualized touching without oral, anal or vaginal penetration; completed oral, anal or vaginal penetrative sex; and attempted penetrative sex. SHIFT did not look at other forms of gender-based misconduct such as harassment and stalking. For an overview of SHIFT’s data collection strategy, see Figure 2.

- SHIFT included two kinds of quantitative research methods: a daily diary study conducted with Columbia undergraduate students only and a population-based
survey administered to a randomly-selected representative sample of undergraduates from CU and BC.

- Participants in the daily diary study (n=427) were asked to complete a brief (5-10 minutes) web-based questionnaire every day for 60 days, reporting daily experiences of mood, stress, substance use, sleep, sexual behavior, sexual assault, and self-esteem.

- Using an ecological model, the online population-based survey included behaviorally-specific measures of different types of sexual assault and methods of perpetration; measures of key sociodemographic, social and sexual relationship factors, mental health, substance use, childhood experiences, and family factors, and questions about many aspects of university/college life. The survey, which took students 30-40 minutes to complete and which was emailed via a link to a random sample of 2,500 students, garnered an excellent response rate (67%; 1,671 participants), particularly in relation to typical higher education response rates (the most recent AAU and ACHA surveys at CU, for example, had 26% and 27% response rates for undergraduates, respectively).

- The diary, survey, and ethnography were complementary study components, capturing different dimensions of campus life. The diary’s volunteer sample provided a temporal perspective on students’ experiences over two months in the fall semester. The ethnography provided a deep dive into students’ everyday lives, with a sample that reflected the diversity of the undergraduate student body and included students who volunteered because they had stories to tell. The survey provided
vital context for both, with a highly-representative sample that closely matched the demographic profile of the full undergraduate student body.

- The ethnography provided a nuanced and rich look at the lives of undergraduate students (CU and BC) through 151 in-depth individual interviews with students, 19 interviews with administrators and student leaders, 17 focus groups with students, and more than 500 hours of participant observation.

Using a **community-based participatory research (CBPR) approach**—a framework for researchers to work with the communities for whom the research findings are most directly relevant—SHIFT has engaged students (Undergraduate Advisory Board), administrative stakeholders (Institutional Advisory Board), and faculty (Faculty Advisers) in multiple study components. Our advisory boards provided vital input on procedures for outreach and engagement of participants and the implications of our findings for institutionally-appropriate, evidence-based strategies to reduce sexual violence and other forms of gender-based misconduct at CU. CBPR approaches have been critical in assuring that studies are focused on the most relevant questions for a community and that study findings will result in policies or interventions that are likely to be implemented and/or scaled up for maximum effectiveness. (See Wolferman, et al. 2019 for more on SHIFT’s work with student advisors.)
Some Key Findings About Sexual Assault

• **Between 1 in 4 and 1 in 5 undergraduates experienced assault since arriving at CU** with 22% of undergraduates experiencing sexual assault since enrolling (28% of women, 13% of men, and 38% of GNC reported at least one incident) (Figure 3).

![Figure 3](image)

**Type of Sexual Assault Experienced, Since Enrollment**

- **There were high rates of repeat victimization.** 1007 incidents were reported by 350 students. On average, students who experienced any assault were assaulted 3 times. In addition, as previously noted, many students had also been assaulted before coming to college (26% of women, 9% of men, 50% of GNC students).
  - For students who reported at least 1 assault, 38% experienced sexualized touching only and greater than 50% experienced more than 1 type of assault.

• **Incapacitation was the method of perpetration reported most frequently (> 50%)** for all genders. Physical force was reported by one-third of women, a rate 3 times greater than for men (34% vs 13%). For both men and women, a sizeable number of respondents reported verbal coercion. Due to very small sample size, Figure 4 (next page) does not show data for GNC students.
• Rates of sexual assault at Columbia are consistent with those found at other institutions. While comparisons across studies with varying methodologies can be problematic, the prevalence of sexual assault found among CU undergraduates is similar to that found by large studies using representative samples across multiple institutions\textsuperscript{1–3}.

• Demographic, psychosocial and situational contexts and risk factors for incapacitated sexual assault are distinct from non-incapacitated sexual assault\textsuperscript{10}.
  
  o Incapacitated assaults were associated with higher rates of a survivor being at a party immediately prior to and during the event, the perpetrator being an acquaintance or friend, and others being around prior to incident.
  
  o Non-incapacitated assaults were associated with higher rates of the survivor meeting the perpetrator through an internet-dating app or indicating the perpetrator was an intimate partner. Non-Incapacitated sexual assault incidents were also significantly associated with methods of coercion other than incapacitation, including use of physical force, lying or threatening, and criticizing, as well as higher depression in the survivor.

• Sexual assaults fell into three distinct categories based on individual, relational, and contextual factors\textsuperscript{11}.
  
  o Students who reported a sexual assault were asked specific follow up questions on the characteristics of up to three of the most significant incidents (most students reported on one).
  
  o Using latent class analysis to understand characteristics of assault, we identified three categories of sexual assault: a) “Simultaneous substance use, incapacitated assault” (SSUI); b) “Known assailant, verbal coercion” (KAVC); and c) “Unknown assailant, unwanted touching” (UAUT). These
categories differed by demographic, sexual, and psychosocial correlates and in terms of the aftermath for the survivor.

- The finding that “sexual assault” constitutes different classes of phenomenon, with different aftermaths, and experienced by different kinds of people has important implications for both measuring and preventing sexual assault. In particular, the differing demographic correlates of the three classes underline the importance of disaggregating sexual assault. For example, the types more commonly experienced by racial and ethnic minorities (KAVC) may be less well addressed by prevention approaches such as bystander interventions, which focus on the type of assault more common among white students (SSUI).

- SHIFT data showed diversity in students’ precollege exposure to alcohol, sex, and sex education. See Figure 5 for more on pre-college sex education.
  - Nearly half of students (44%) reported never drinking alcohol in high school.
  - Experience with relationships before college was also somewhat limited, with less than half (46%) having had a steady or serious relationship. Fewer than half of students initiated sexual behaviors before age 18, including oral sex (42%), vaginal sex (30%), and anal sex (6%).
  - We found multiple historical factors significantly associated with penetrative sexual assault in college, including adverse childhood experiences (e.g., loss of a parent, experience of child abuse, parental mental illness), initiation of alcohol, marijuana, and sexual behaviors before age 18, female gender, hooking up in high school, and having experienced unwanted sexual contact before college (for women).
  - Receipt of school-based sex education promoting refusal skills before age 18 was an independent protective factor; abstinence-only instruction was not.

Figure 5.

DOES SEX EDUCATION BEFORE COLLEGE PROTECT STUDENTS FROM SEXUAL ASSAULT IN COLLEGE?

SHIFT survey data found that women who’d received pre-college sex education that included refusal skills training were half as likely to experience penetrative assault.

ETHNOGRAPHIC DATA

That same paper drew on ethnographic data to highlight the heterogeneity of students’ pre-college sex education experiences.

A woman who went to public school described sex education as focused on abstinence and mixed with incomplete information about STIs and condom use:

“So in our health class we had some sex ed. It was poorly delivered. We’re supposed to have like your talk about birth control options and that never happened. We had an abstinence educator come in… and tell us all that if we have sex, we’ll be like soiled forever and no one will love us.”

Santelli et al. 2018:13
• **Formal reporting to the University of sexual assault experiences among those who experienced sexual assault was low.**
  
  - In the SHIFT survey, among those who experienced a sexual assault, the majority (81%) told someone, particularly peers or close friends.
  
  - Few told faculty and other professionals; 13% talked to a mental health counselor, 3% to a campus sexual assault advocate.
  
  - Only 2.2% of students said that a formal complaint about the incident was filed with the University.

• A majority of alleged perpetrators were men (83%), students (63%) and known to the person who experienced the sexual assault (75%). However, similar to victimization, these numbers mask some significant survivor gender differences, with almost all women reporting a male perpetrator (97%), but 2/3rds of men reported a female perpetrator, something often not discussed in the literature. Moreover, 10% of survivors knew the perpetrators as an intimate partner, 60% as a friend or acquaintance, and 25% as a current or former hook up partner (perpetrators could fit multiple categories). Women were much more likely to experience assault by a stranger (26%) than men (15%).

• As others have found, students are reluctant to report perpetration, even on an anonymous survey. Approximately 2% of students self-reported any sexual assault perpetration (3% of men, 1.4% of women, and 0 GNC students). The SHIFT survey used two innovative questions related to ambiguous consent experiences, developed in conversation with the UAB: ‘Since you enrolled at Columbia/Barnard, have you ever had sex in which you are not sure if consent was given?’ and ‘Since you enrolled at Columbia/Barnard, have you ever had sex and later realized that the person may not have given consent?’ More students endorsed these items with 9% of respondents reporting any ambiguous consent experiences since starting college. SHIFT found multiple factors associated with perpetration and ambiguous consent (see Figure 6 for more information).
SELECTED FINDINGS FROM THE DAILY DIARY STUDY

- Approximately half of the participants in the daily diary reported being sexually active during the 60-day diary period: 213 participants reported 1,664 sexual encounters\textsuperscript{12,13}.
- The majority (73\%) of sexual experiences reported were considered very pleasurable, compared to 27.5\% considered somewhat or not at all pleasurable.
- Almost all encounters (91\%) were described as experiences in which the participant felt as in control as they wanted to be, and in 73\% of sexual encounters participants reported verbally communicating a desire for sex.
- In addition, the diary study found (as did the ethnography and survey) that sex and substance use frequently occur in tandem.
- Alcohol, rather than other drugs, appears to increase the likelihood of negative sex for students. Both the number of alcoholic drinks and binge drinking increased the likelihood of a negative sexual encounter (defined as a sexual encounter that was coerced and/or in which the participant did not feel as in control as they wanted to be); other substance use did not show this effect.

SELECTED FINDINGS FROM THE ETHNOGRAPHY

Consent

- Students know about affirmative consent, but don’t necessarily practice it. The ethnographic research suggested that Columbia is effectively conveying information about consent to undergraduates. However, students’ actual practices of consent very widely. Some students demonstrate concern not just about consent, but also about their partner’s pleasure and well-being. Other students (even when they can articulate the idea of affirmative consent) say that in practice, if a partner doesn’t resist an advance, they take that as consent. One recent SHIFT paper\textsuperscript{14}, which looked at consensual sex among cisgender, heterosexual students, highlighted social factors that shape how students “do” consent, including:

1. The intentionality of (some) drunk sex: Students typically get drunk on purpose (to feel comfortable having sex, to connect with prospective partners, or due to stress). Drunk sex is an intentional social activity and often seen as mutually consensual;
2. **Sexual citizenship**: An internal sense of one’s own right to sexual self-determination, and other’s equivalent right to decide if, how, and when to have sex. There was great variability among students (and particularly women) in terms of feeling that one has a right to sexual self-determination. This sense of oneself as a sexual agent lays the foundation for meaningfully being able to consent. Yet many women do not feel they have this right. As one woman said: “It would have been rude to say no…”;

3. **Gendered sexual scripts**: Heterosexual students’ accounts of sex frequently framed women as sexual gatekeepers and men as aggressors. This gendered approach to consent-seeking (and granting) encourages men’s sexual aggression, suggests women do not need to seek consent in heterosexual encounters, and obscures men’s experiences of being assaulted; and

4. **Men expressed deep fears of ‘doing consent wrong’**, noting a gap between the ‘rules’ of consent and their own actual practices. While these fears were widespread, men of color raised particular fears about racialized vulnerability to accusations, particularly in context of inter-racial relationships. For more on students’ sexual consent practices, see Figure 7.

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**Labeling and reporting sexual assault**

- **As at other institutions of higher education, the survey found very low rates of survivors making a formal report about assault to the university.** Another paper from the ethnographic research examined students’ reasons for being reluctant to label an experience of unwanted nonconsensual sex as assault and to report it. Although labeling and reporting can help students access supportive services, students’ hesitation to do so makes sense in terms of social risks they perceive in relation to labeling and reporting. For more, see Figure 8.
1. **At the individual level**, students see ‘identity risks’, with labeling and reporting potentially affecting how they think of themselves; as one woman said, “I did not want to be that girl”;

2. **At the interpersonal level**, students fear that labeling or reporting will jeopardize social relationships and group affiliations, particularly if the perpetrator is also a member of their social circle or activity group; and

3. **At the broader level**, students fear that identifying or discussing an experience as assault will derail them from deeply-held priorities for their time in college. Reporting an incident would be another competing priority for students’ already limited time and emotional resources; some decided that the costs in time, stress, and affective labor outweighed whatever social support they might secure through telling others.

1) ‘Sexual assault’ encompasses a broad range of experiences, circumstances, vulnerabilities, and survivor outcomes. That diversity points to an urgent need for more comprehensive & varied approaches to prevention.

- **Overall, 1 in 4 CU/BC students have experienced sexual assault at Columbia**. This rate is similar to those reported at other institutions of higher education\(^1\). However, this finding obscures significant differences in levels and types of vulnerability based on sexual orientation, economic precarity, and a number of other social factors, suggesting a need to target interventions based on some of these factors and vulnerabilities.

- **The very diverse set of behaviors and experiences encompassed by the term “sexual assault” underscores the need for a multi-pronged approach to prevention**. Unwanted sexual touching by an intoxicated student in a dark, crowded party during orientation week, for example, requires different prevention strategies than physically forced penetrative sex (often defined as rape) in the context of an ongoing relationship.

- **Even within relationships, context matters**. Drunken ‘hookup’ (more casual, uncommitted) sex is very distinct from sex in the context of a more committed relationship, particularly in which there is no alcohol use. Our research reproduced what others have found about the variability of the context of sexual assault experiences. Although many assaults happen after parties or social events with others present, not all assaults occur when others are around to potentially intervene, including, but not limited to, in the context of intimate relationships.

- **The data have intervention implications in terms of the need for a breadth of prevention work**. Bystander interventions, in which students are taught to intervene on behalf of each other (e.g. when a drunk student is being coerced into a sexual encounter) are one of the mostly frequently-used interventions on college campuses and there is evidence that they are effective\(^16\). Assaults that occur in the context of others, typically with alcohol involved, do represent a large percentage of assaults found in this study. However, given that this does not characterize all assaults, it should be just one tool in a larger package of programming. We identified a particular need for interventions to address non-intoxicated sexual assault among undergraduates\(^10\); interpersonal violence among students has received much less attention than intoxicated assault experiences.
2) Many students arrive at CU/BC with vulnerabilities related to pre-college experiences\textsuperscript{4}. This includes youth who have experienced sexual assault prior to college and those who have experienced adverse family experiences such as the death of a parent. Consistent with prior research\textsuperscript{17–19}, SHIFT found that pre-college experiences such as prior assault are associated with risk of experiencing or perpetrating sexual assault on campus. SHIFT research points to pre-college sex education as a particular area of opportunity for prevention.

- Many students described the sex education they’d received before college as awkward, incomplete, or poorly delivered.

- Having received formal education about how to say no to sex (i.e., refusal skills training) before age 18 was one of several pre-college factors associated with a reduced likelihood of experiencing penetrative sexual assault in college. This suggests that the educational interventions that the university provides may need to attend to gaps in students’ prior sexual health education.

- Many students arrive on campus with a strong desire to develop active and pleasurable sex lives, but not all of them feel prepared to do so. The diary study found that sexually active students described the majority of sexual encounters as pleasurable experiences in which they felt sufficiently in control and in which verbal consent for sex was obtained\textsuperscript{12}. However, at least one-quarter of experiences did not meet these criteria, and the ethnographic research pointed to areas of opportunity, such as helping students clarify their sexual goals and values, build skills in sexual communication, and develop a sense of sexual citizenship—i.e., valuing their own right to determine if, when and how to have sex and to value those same rights in others. Drawing on lessons learned from other public health domains, such as HIV, programs that promote positive behaviors, such as understanding and communicating about sexual health and pleasure, as well as focusing on the reduction of negative behaviors (e.g. don’t commit sexual assault), are often more effective than focusing on reduction of negative behaviors alone.

3) Sexual assaults occur as a result of features of the social and community environment interpersonal interactions, and individual perceptions and understandings; prevention efforts thus must operate at all three of these levels.

- Comprehensive prevention requires initiatives at multiple levels, including institutional policy changes and interventions targeted at both group dynamics and individual attitudes.

- As noted above, our data pointed to multiple pathways to sexual assault, suggesting that no one policy or prevention program on its own is likely to significantly move the needle on levels of sexual assault.

- Providing a range of context-specific interventions—those that reflect the diversity of relationship contexts, methods of assault perpetration (e.g.
incapacitation vs physical force or verbal coercion), gender of the person who experienced sexual assault and the perpetrator, and other sociodemographic and social factors is key, as is addressing shared campus norms and policies that may create vulnerability.

4) While SHIFT was not designed to test interventions, our research lends support to bystander and refusal skills training interventions. It also underlines that those approaches should be part of a broader strategy.

- **The many intersections between mental health, sexual assault, and problematic drinking behaviors underscore the potential power of an integrated approach to prevention.** We found, as others also have, that a substantial proportion of sexual assaults occurred under conditions of intoxication for both those who experienced sexual assault and the alleged perpetrators, and that mental health problems and hazardous drinking were significantly higher in those who had experienced sexual assault while at college compared to those who had not. This connection of alcohol or substance use to sexual assault suggests the need to integrate sexual assault prevention with other efforts to ensure community well-being. Institutions of higher education frequently have siloed systems dedicated towards prevention and treatment of mental health problems, substance abuse, and sexual assault. Bringing together multiple student-facing administrative units may inform more holistic approaches to prevention, leading to policy changes including more integrated efforts to address mental health, reduce problem drinking, and prevent sexual assault.

- **Sexual assault places a substantial caregiving burden on the whole student community.** It is increasingly recognized that peers often bear the burden of supporting each other’s mental health and that a student’s suicide has a ripple effect on community well-being. Our data suggest there is a similar community impact of sexual assault. In the SHIFT survey, among those who experienced a sexual assault, the majority told someone, particularly peers or close friends – but overall relatively few told faculty and other professionals, and only about 2% made a formal report to the university. Data from the ethnography point to the substantial community-level burden for students in helping their peers understand, process, and cope with the consequences of sexual assault. Similar findings have been made in other studies about mental health, with students turning to peers more often than professionals; this is another finding that points to the power of integrated approaches to supporting students.
Overarching themes

- **Accentuate the positive**: many programs focus on reduction of negative behaviors, but we know from other areas (e.g. HIV research) that there is great potential in the promotion of positive behaviors, such as a focus on sexual health, pleasure, and satisfying intimate relationships in preventing negative sexual behaviors.

- **“Comprehensive prevention”** requires engaging with four dimensions of complexity: 1) working with multiple populations; 2) addressing multiple outcomes; 3) partnering with multiple administrative divisions of campus life, and 4) working at multiple levels of the ecological model.

- **A life course approach to prevention is key.** As previously noted, many undergraduates have experienced assault before arriving at college. SHIFT’s data (see Santelli, et al. 2018; Hirsch et al. 2019) point to a vital need to promote sexual literacy and foster sexual citizenship before college, as well as a need for comprehensive age-appropriate sex education, including refusal skills training. Once students arrive at college, universities could expand discussions of consent to include topics such as sexual literacy, sexual pleasure, and sexual citizenship, including the importance of valuing others’ rights to sexual self-determination.

SHIFT’s vision of comprehensive prevention

1. Prevention strategies should involve **multiple targets** in terms of student populations, both collective and population specific.
   - Collective prevention involves clear institutional messages that members of the campus community are expected to treat each other with respect, both sexually and socially. This recommendation reinforces the importance of the Office of University Life’s ongoing work with the Sexual Respect Initiative.
   - Population-specific programming requires addressing the specific vulnerabilities experienced by diverse populations, including women, GNC students, and men, as well as the specific risks of perpetrating sexual assault that each group may face.

2. Prevention should recognize the interrelationship among **multiple adverse outcomes**, leveraging the inter-relations between sexual assault, substance
use, and mental health by coordinating efforts, setting shared metrics of success, addressing the burdens experienced by co-survivors, taking a harm reduction approach to substance use, and other evidence-based approaches.

- Prevention efforts on mental health, substance use and sexual assault intersect. The University recognizes the importance of each of these issues, as evidenced by robust service offerings. Coordinating efforts to address all three may be more effective than siloed interventions.

- Use of faculty and peers to support these efforts may be one important strategy for integrating efforts and supporting students who are co-survivors of sexual assault and mental health problems (e.g., those who are friends with and support survivors).

3. Multi-sectoral prevention involves partnerships with diverse campus administrative units, including new-student orientation planning (NSOP) development team, Facilities, and the Office of the General Counsel.

- A multi-sectoral approach to promoting consensual sex includes planning to provide spaces that create opportunities for students to socialize without alcohol, as well as providing lounges and other social spaces open late at night to provide an option for students (drunk or not) who want to continue an interaction with a prospective partner but in a less sexually-charged location.

- Columbia has already made progress here including work by Alice! Health, recent changes to JJ Place’s hours, and reconfigurations of Lerner hall and dorm lounges.

4. Prevention should encompass multiple levels of the ecological model, including:

- Providing small group sessions with role-playing and skills-building to address interpersonal factors. This includes bystander programs, which have been shown to be effective, but should be considered as part of a suite of tools to prevent sexual assault. Small group prevention work should take into account that not all assault happens with others present immediately beforehand and many assaults happen in the context of intimate partner relationships or off campus hook up situations. Some of this work is already being done by the Sexual Violence Response program at CU.

- Setting shared norms for the campus community around consent and sexual citizenship as is being done with SRI.

- Modifying social interaction by shaping spatial dimensions of student life.

- At Columbia, recent changes implemented by the Office of University Life, the Undergraduate Student Life, facilities, Columbia Health (including Medical Services and Counseling and Psychological Services), exemplify this idea that every facet of the University that shapes students’ experiences can contribute to building a safer and healthier campus environment.
APPENDICES

- SHIFT Team and Advisers
- Acknowledgments
- Papers & public presentations
- Media coverage
- References

SHIFT Team
Principal Investigators
- Jennifer S. Hirsch, PhD, Sociomedical Sciences
- Claude Ann Mellins, PhD, Psychiatry and Sociomedical Sciences

Columbia University faculty investigators
- Louisa Gilbert, PhD, Social Work
- Shamus Khan, PhD, Sociology
- Constance A. Nathanson, PhD, Sociomedical Sciences
- John Santelli, MD, MPH, Population and Family Health, Pediatrics
- Melanie Wall, PhD, Biostatistics
- Patrick Wilson, PhD, Sociomedical Sciences

Additional members of investigator team
- Kate Walsh, PhD, Yeshiva University, Psychology
- Martie Thompson, PhD, Clemson University, Youth, Family, and Community Studies

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- Karimata Bah
- Stephanie Benson
- Amelia Bucek
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- Chen Chen
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SHIFT Publications and Public Presentations

Published Papers (by publication date)
factors associated with risk. PLOS ONE, 12(11), e0186471. https://doi.org/10.1371/journal.pone.0186471


Papers Under Review (as of March 19, 2019)


3. Hirsch, J. S., Wamboldt, A., Khan, S., Wall, M., Chen, C., Reardon, L., Mellins, C. A. There was nowhere to cry: Power, precarity, and the ecology of student well-being.


Papers in Development (as of March 2019)


5. Sexual health among college undergraduates at risk for gender based violence.

6. "Sex, love and getting all my tasks done on a tight timeline": An examination of the self-reported good experiences of college students at an elite, private American university.
7. Using a daily diary approach to examine quality of sex and the temporal ordering of stressful events, substance use, and sleep patterns among college students.


11. Adverse childhood experiences, sexual assault, and substance use among college students.

SHIFT Presentations


8. Hirsh, Jennifer S. “Not as simple as a cup of tea: the lived experience of consent among students at an elite urban university in the United States”. Invited talk in Women’s and Gender Studies, Vanderbilt University, Nashville, TN, January 31, 2017.


10. Population Association of America, Psychosocial Workshop
   
a. Hirsh, Jennifer S. “The Social Dynamics of Consent: Findings from Columbia’s Sexual Health Initiative to Foster Transformation (SHIFT)”. Population Association of America, Psychosocial Workshop, Chicago, IL. April 25, 2017

b. Santelli, John S. “Pre-Matriculation Determinants of Sexual Assault Victimization among College Undergraduates”. Population Association of America, Psychosocial Workshop, Chicago, IL. April 25, 2017


14. Khan, Shamus. “Understanding Sexual Violence,” Department of Sociology, University of Massachusetts-Amherst, Amherst, MA, October 11, 2017


16. Hirsh, Jennifer, Mellins, Claude A. & Reardon, Leigh, presentation on SHIFT overview, methods and formulation to the University of California Office of the President, Oakland, CA, December 8, 2017.

17. Satellite Session Panel: Sexual Assault among High School and College Students: A Comparative Perspective on New Findings and Unanswered Questions at the
ninth Annual Asia Pacific Conference on Reproductive and Sexual Health and Rights (APCRSHR), Ha Long Bay, Vietnam, November 30, 2017.

a. Jennifer S. Hirsch - SHIFT overview, methods

b. John Santelli - Quantitative Research


34. Khan, Shamus. "Understanding Sexual Violence," Department of Sociology, Yale University, New Haven, CT, November 5, 2018.


Media Coverage

- December 6, 2018: An opinion piece published in *The Hill* by SHIFT co-PI Jennifer S. Hirsch discusses why better sex education is needed to help prevent sexual assault: *The next step for #MeToo is better sex education*.

- November 14, 2018: A press release from the Mailman School of Public Health highlights findings from SHIFT's recent paper *Does sex education before college protect students from sexual assault in college?* Read more about SHIFT and the paper's results: *High School Sex Ed May Prevent Sexual Assault in College*.

- October 18, 2018: An article by Lea Winerman in the American Psychological Association Monitor titled *Making Campuses Safer* discusses SHIFT based on interview with Claude Mellins as an example of research influenced by psychology seeking to prevent sexual assault on college campuses.


- February 12, 2018: Article profiling SHIFT in *The New Yorker*, "Is There a Smarter Way to Think About Sexual Assault on Campus?" by Jia Tolentino.


- February 6, 2018: WNYC's Brian Lehrer interviews Jia Tolentino, author of *The New Yorker* article about SHIFT.

- June 9, 2017: Article on the Mailman School of Public Health website, "Columbia Researchers Present Findings from Landmark Sexual Assault Study During Mailman School Symposium".
References


