



## 2015–2016 HEDS Sexual Assault Campus Climate Survey

Thank you for agreeing to participate in the **Sexual Assault Campus Climate Survey**. In this survey, we will ask you about your perceptions of [Institution Name]’s climate on unwanted sexual contact and sexual assault, your perceptions of how [Institution Name] addresses and responds to sexual assault, and the extent to which you have experienced unwanted sexual contact or sexual assault.

We would like to hear from all students at [Institution name], both those who have experienced unwanted sexual contact or sexual assault and those who have not. The survey usually takes less than 15 minutes to complete.

Your participation is **completely voluntary**. We deeply appreciate your cooperation and willingness to provide information that will help us better understand a critical aspect of student life at [Institution Name]. We are committed to ensuring a safe and healthy environment for our students, and your participation in this survey will help us in our work to keep all students safe.

Your responses are **completely anonymous**, and we will only report them after they are grouped together with the responses of many other individuals. Your name will not be connected in any way with your responses to this survey, and any identifying information from the computer on which you take the survey will be removed before we receive the data. Please note, if other people have access to your computer, they might be able to view your web browsing history, including a link to this survey. For information on how to delete your web browsing history, visit <http://www.computerhope.com/issues/ch000510.htm>.

You may stop taking the survey at any time or choose not to answer particular questions. You may also go back and change your responses. If you wish to stop taking the survey, simply leave the survey without hitting the “Submit” button at the end. We will not record your responses until you hit the “Submit” button.

Some of the questions will ask you about sexual, personal, and potentially troubling information. It may be emotionally difficult to answer these questions. Should you wish to talk with someone further, you may access information about campus, local, and national resources for unwanted sexual contact, sexual assault, and relationship violence at any point in the survey by clicking on the link in the footer of the survey page. This information will also be provided at the end of the survey.

The information you provide will be used to inform and improve support, policies, and practices at [Institution Name] and **will not** be used to investigate specific individuals. Disclosing an incident here does not constitute reporting the incident to your campus and will not result in any action, disciplinary or otherwise. Please do not identify anyone by name in your survey responses. If you identify anyone by name, the name will be removed before [Institution Name] receives the data. Please use [Institution Name]’s reporting procedures if you wish to report an incident of sexual assault.

The [Institution Name] leader(s) of this survey effort [is/are] [name(s)], and [he/she/they] can be reached at [email address(es) and/or phone number(s)].

**By clicking on the “Continue” button below, you indicate that you have read and considered the above information about the survey and agree to participate in the survey.**

*[Respondents see a “Continue” button.]*



**SECTION ONE: GENERAL CLIMATE**

**1. Below are statements about your views on the general climate at [Institution Name]. Please indicate the extent to which you agree or disagree with each.**

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Faculty, staff, and administrators respect what students at [Institution Name] think.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Faculty, staff, and administrators at [Institution Name] are genuinely concerned about students' welfare.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Faculty, staff, and administrators on this campus treat students fairly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students at [Institution Name] are genuinely concerned about the welfare of other students.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel valued in the classroom/learning environment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel close to people on this campus.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel like I am a part of the [Institution Name] community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel safe on this campus.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**2. Below are statements about your views on the extent to which different groups contribute to the general climate at [Institution Name]. Please indicate the extent to which you agree or disagree with each.**

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
The faculty contributes to a positive and supportive campus climate at [Institution name].	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The staff contributes to a positive and supportive campus climate at [Institution name].	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The administration contributes to a positive and supportive campus climate at [Institution name].	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The students contribute to a positive and supportive campus climate at [Institution name].	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



3. Below are statements about your views on [Institution Name]’s response to difficult or dangerous situations. Please indicate the extent to which you agree or disagree with each.

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Campus officials do a good job protecting students from harm.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If a crisis happened here, I am confident campus officials would handle it well.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Campus officials respond quickly in difficult situations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Campus officials handle incidents in a fair and responsible manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There is a good support system at [Institution Name] for students going through difficult times.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Below are statements about your views on sexual assault at [Institution Name]. Please indicate the extent to which you agree or disagree with each.

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
I believe that the number of sexual assaults that occur on campus, off campus at an event or program connected with [Institution name], or at a social activity or party near campus is low.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I do not believe that I or one of my friends is at risk for being sexually assaulted on campus, off campus at an event or program connected with [Institution name], or at a social activity or party near campus.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I believe that students at [Institution Name] would intervene if they witnessed a sexual assault.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



5. Below are statements about your views on what might happen if someone were to report a sexual assault to an official at [Institution Name]. Please indicate the extent to which you agree or disagree with each.

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Campus officials would take the report seriously.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Campus officials would support and protect the person making the report.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Campus officials would conduct a careful investigation in order to determine what happened.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Campus officials would take action against the offender(s).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students would support the person making the report.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Have you received information or education from [Institution Name] about:

	Yes	No	Unsure
What sexual assault is and how to recognize it?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How to report an incident of sexual assault?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
[Institution Name]'s confidential resources for sexual assault and how to locate them on campus?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The procedures for investigating a sexual assault?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The actions you can take to help prevent sexual assault, such as bystander intervention, clear communication with a potential partner, or some other action?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. [Respondents who selected "Yes" to one or more of the questions in Q6 receive Q7.]

**Overall, how much do you remember about the information or education from [Institution Name] about sexual assault?**

- Almost all or all of it
- Most of it
- Some of it
- Very little or none of it



8. *[Respondents who selected “Yes” to one or more of the questions in Q6 receive Q8.]*

**Overall, how helpful did you think the information or education from [Institution Name] about sexual assault was?**

- Very helpful
- Helpful
- Slightly helpful
- Not at all helpful

## **SECTION TWO: ASSESSING UNWANTED SEXUAL CONTACT AND SEXUAL ASSAULT**

The questions in this section of the survey will ask you about sexual, personal, and potentially troubling information. It may be emotionally difficult to answer some of these questions. You may access information about campus, local, and national resources for unwanted sexual contact, sexual assault, and relationship violence at any point in the survey by clicking on the link in the footer of the survey page. This information will also be provided at the end of the survey.

In the following questions we ask about unwanted sexual contact and sexual assault, focusing on experiences you may have had while you were:

- on the [Institution Name] campus;
- off campus at an event or program connected with [Institution name], including study abroad and internships; or
- at a social activity or party near campus such as at an apartment, restaurant, or bar.

We have the following definitions in mind when we ask about unwanted sexual contact and sexual assault. You do not need to remember these definitions. We will provide the definitions again with the questions that ask about these particular experiences.

Unwanted sexual contact includes the following:

- Unwanted verbal behaviors – such as someone making sexual comments about your body; making unwelcome sexual advances, propositions, or suggestions to you; or telling you sexually offensive jokes or kidding about your sex or gender-specific traits
- Unwanted nonverbal behaviors – such as someone sending you sexual emails, texts, or pictures; posting sexual comments about you on blogs or social media; showing you sexually offensive pictures or objects; leering at you or making lewd gestures towards you; or touching him/herself sexually in front of you
- Unwanted brief physical contact – such as someone briefly groping you, rubbing sexually against you, pinching you, or engaging in any other brief inappropriate or unwelcome touching of your body

Sexual assault includes the following types of sexual contact, which you **did not want** or for which you **did not give consent**:

- Touching of a sexual nature (kissing you, touching of private parts, grabbing, fondling, rubbing up against you in a sexual way, even if it was over your clothes)

*[Definition of sexual assault continues on next page]*



- Oral sex (someone’s mouth or tongue making contact with your genitals, or your mouth or tongue making contact with someone else’s genitals)
- Vaginal sex (someone’s penis being put in your vagina, or your penis being put into someone else’s vagina)
- Anal sex (someone’s penis being put in your anus, or your penis being put into someone else’s anus)
- Anal or vaginal penetration with a body part other than a penis or tongue, or by an object, like a bottle or candle

9. Since starting at [Institution Name], how often have you experienced the following forms of unwanted sexual contact while you were (a) on campus; (b) off campus at an event or program connected with [Institution name], including study abroad and internships; or (c) at a social activity or party near campus such as at an apartment, restaurant, or bar?

	Never	Rarely	Sometimes	Often	Very often
Unwanted verbal behaviors – such as someone making sexual comments about your body; making unwelcome sexual advances, propositions, or suggestions to you; or telling you sexually offensive jokes or kidding about your sex or gender-specific traits	<input type="checkbox"/>				
Unwanted nonverbal behaviors – such as someone sending you sexual emails, texts, or pictures; posting sexual comments about you on blogs or social media; showing you sexually offensive pictures or objects; leering at you or making lewd gestures towards you; or touching him/herself sexually in front of you	<input type="checkbox"/>				
Unwanted brief physical contact – such as someone briefly groping you, rubbing sexually against you, pinching you, or engaging in any other brief inappropriate or unwelcome touching of your body	<input type="checkbox"/>				

10. [Respondents who selected an option other than “Never” for at least one item in Q9 receive Q10.]

**Who was responsible for this behavior? (Check all that apply)**

- Student(s) from this institution
- Student(s) from another institution
- Faculty member(s), staff member(s), or administrator(s) from this institution
- Faculty member(s), staff member(s), or administrator(s) from another institution
- Employer(s)/supervisor(s) at this institution
- Person or people from the local community
- Other: \_\_\_\_\_



In the next set of questions when we ask about sexual assault, we are referring to five specific types of sexual contact, which you **did not want** or for which you **did not give consent**.

- Touching of a sexual nature (kissing you, touching of private parts, grabbing, fondling, rubbing up against you in a sexual way, even if it was over your clothes)
- Oral sex (someone's mouth or tongue making contact with your genitals, or your mouth or tongue making contact with someone else's genitals)
- Vaginal sex (someone's penis being put in your vagina, or your penis being put into someone else's vagina)
- Anal sex (someone's penis being put in your anus, or your penis being put into someone else's anus)
- Anal or vaginal penetration with a body part other than a penis or tongue, or by an object, like a bottle or candle

**11. Since starting at [Institution Name], has anyone attempted, but not succeeded in, sexually assaulting you while you were (a) on campus; (b) off campus at an event or program connected with [Institution name], including study abroad and internships; or (c) at a social activity or party near campus such as at an apartment, restaurant, or bar?**

- Yes
- No
- I suspect that someone attempted to sexually assault me, but I am not certain.

**12. [Respondents who selected "Yes" to Q11 receive Q12.]**

**Who attempted to sexually assault you? (Check all that apply)**

- Student(s) from this institution
- Student(s) from another institution
- Faculty member(s), staff member(s), or administrator(s) from this institution
- Faculty member(s), staff member(s), or administrator(s) from another institution
- Employer(s)/supervisor(s) at this institution
- Person or people from the local community
- Other: \_\_\_\_\_

**13. Since starting at [Institution Name], have you been sexually assaulted while you were (a) on campus; (b) off campus at an event or program connected with [Institution name], including study abroad and internships; or (c) at a social activity or party near campus such as at an apartment, restaurant, or bar?**

- Yes
- No
- I suspect that I was sexually assaulted, but I am not certain.



14. *[Respondents who selected “Yes” to Q13 receive Q14. All other respondents skip to [Section Three: Bystander Behaviors](#) (Branch 1 or Branch 2: Versions 1, 2, or 3). For Q14, respondents answer by selecting a number from a drop-down menu listing the following from top to bottom: 1, 2, 3, 4, more than 4.]*

**Since starting at [Institution Name], how many incidents of sexual assault have you experienced while you were (a) on campus; (b) off campus at an event or program connected with [Institution name], including study abroad and internships; or (c) at a social activity or party near campus such as at an apartment, restaurant, or bar?**

15. *[Respondents who selected “1” to Q14 receive Q15.]*

**Where did the sexual assault occur?**

- On the [Institution Name] campus, in a dormitory or other campus housing (not a fraternity or sorority house)
- On the [Institution Name] campus, in a nonresidential building or some other location on campus
- In a fraternity or sorority house, on or off campus, including college-owned housing
- Off campus, at another college or university (not study abroad)
- Study abroad, study away, or other off-campus study program
- Off-campus internship
- Off campus, at an apartment, restaurant, bar, or another location nearby

16. *[Respondents who selected more than one incident to Q14, or who saw Q14 and did not respond, receive Q16. Respondents will see the following list of locations with a drop-down menu listing 1, 2, 3, 4, more than 4 next to each location. They will select their answer from this list.]*

**Please mark how many incidents of sexual assault you have experienced at each of the following locations.**

On the [Institution Name] campus, in a dormitory or other campus housing (not a fraternity or sorority house)

On the [Institution Name] campus, in a nonresidential building or some other location on campus

In a fraternity or sorority house, on or off campus, including college-owned housing

Off campus, at another college or university (not study abroad)

Study abroad, study away, or other off-campus study program

Off-campus internship

Off campus, at an apartment, restaurant, bar, or another location nearby



*[Respondents who selected more than one incident to Q14, or who skipped Q14 and selected more than one incident to Q16, see the following comment above Q17.]*

**Thinking about one of these incidents of sexual assault, please answer the following questions. You will have an opportunity to provide more information about additional incidents later in the survey.**

**17. How many people sexually assaulted you?**

- One person
- More than one person
- I am not sure.

*[At this point in Section Two, respondents will see a different set of questions depending on their answers to Q17. Respondents who answered "One person" in Q17 will see Branch A. Respondents who answered "More than one person" or "I am not sure" in Q17, or who saw Q17 but did not respond, will see Branch B. Questions in Branch A and B are identical, but sometimes Branch B employs the plural form. Each branch will contain the remaining questions in Section Two as well as the questions in Section Three.]*

**Branches A & B** (questions for respondents who indicated that they had experienced sexual assault(s) on their campus)

**18. [Q18a and Q18b are identical.]**

**When you were sexually assaulted, which of the following happened? (Check all that apply)**

- Touching of a sexual nature (kissing you, touching of private parts, grabbing, fondling, rubbing up against you in a sexual way, even if it was over your clothes)
- Oral sex (someone's mouth or tongue making contact with your genitals, or your mouth or tongue making contact with someone else's genitals)
- Vaginal sex (someone's penis being put in your vagina, or your penis being put into someone else's vagina)
- Anal sex (someone's penis being put in your anus, or your penis being put into someone else's anus)
- Anal or vaginal penetration with a body part other than a penis or tongue, or by an object, like a bottle or candle



As you answer the following questions, please keep in mind that drinking alcohol and/or using drugs does not mean you are in any way responsible for being sexually assaulted.

19. [The first four questions are different in Q19a and Q19b. Response options are the same.]

19a	19b			
Did this incident of sexual assault involve:	Did this incident of sexual assault involve:	Yes	No	Unsure
The other person threatening to use physical force against you, or using coercion or intimidation?	The other people threatening to use physical force against you, or using coercion or intimidation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The other person using physical force against you?	The other people using physical force against you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The other person drinking alcohol?	The other people drinking alcohol?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The other person using drugs?	The other people using drugs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your drinking alcohol?	Your drinking alcohol?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your voluntarily taking or using any drugs other than alcohol?	Your voluntarily taking or using any drugs other than alcohol?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your being given a drug without your knowledge or consent?	Your being given a drug without your knowledge or consent?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. [Q20a and Q20b are identical.]

Were you unable to provide consent or stop what was happening because you were incapacitated in some way (e.g., passed out, drugged, drunk, asleep)?

- Yes
- No
- Unsure



**SECTION THREE: CONTEXT AND DISCLOSURE** *(for respondents answering questions in Branch A or B)*

In the next set of questions, we ask for more detail about the sexual assault you reported in this survey so that campus officials might better understand how and when sexual assault occurs in order to combat it. As a reminder, your participation in this survey is voluntary, and you may choose not to answer any question. All your responses are anonymous and will only be reported after they are grouped together with the responses of many other individuals. We deeply appreciate your cooperation and willingness to provide information to help [Institution Name] ensure a safe, healthy environment for students.

21. *[Q21a and Q21b are identical.]*

**When in your academic career did the sexual assault occur?**

- During the summer before I officially enrolled (summer bridge program, pre-orientation, etc.)
- During new student orientation
- In my first year
- Summer between my first and second years
- In my second year
- Summer between my second and third years
- In my third year
- Summer between my third and fourth years
- In my fourth year
- Other: \_\_\_\_\_

22. *[Q22a and Q22b are different.]*

22a	22b
<b>Was the person who sexually assaulted you affiliated with [Institution Name] or another college or university?</b>	<b>Were the people who sexually assaulted you affiliated with [Institution Name] or another college or university? (Check all that apply)</b>
<input type="checkbox"/> Yes, the person was a student at [Institution Name].	<input type="checkbox"/> At least one person was a student at [Institution Name].
<input type="checkbox"/> Yes, the person was a student at another institution.	<input type="checkbox"/> At least one person was a student at another institution.
<input type="checkbox"/> Yes, the person was a faculty member, staff member, or administrator from [Institution Name].	<input type="checkbox"/> At least one person was a faculty member, staff member, or administrator from [Institution Name].
<input type="checkbox"/> Yes, the person was a faculty member, staff member, or administrator from another institution.	<input type="checkbox"/> At least one person was a faculty member, staff member, or administrator from another institution.
<input type="checkbox"/> No, the person was not affiliated with [Institution Name] or another institution.	<input type="checkbox"/> To my knowledge, no one was affiliated with [Institution Name] or another institution.
<input type="checkbox"/> I do not know.	<input type="checkbox"/> I do not know.



23. [Q23a and Q23b questions are different. Response options are the same.]

23a	23b
<b>Which of the following describes your relationship with the person who sexually assaulted you at the time of the assault? (Check all that apply)</b>	<b>Which of the following describes your relationship with the people who sexually assaulted you at the time of the assault? (Check all that apply)</b>
<input type="checkbox"/> Stranger <input type="checkbox"/> Nonromantic friend or acquaintance <input type="checkbox"/> Casual date or hookup <input type="checkbox"/> Current romantic partner <input type="checkbox"/> Ex-romantic partner <input type="checkbox"/> College professor/instructor <input type="checkbox"/> College staff member <input type="checkbox"/> College administrator <input type="checkbox"/> Employer/supervisor <input type="checkbox"/> Coworker <input type="checkbox"/> Family member <input type="checkbox"/> Other: _____	

24. [Q24a and Q24b are different.]

24a	24b
<b>What was the sex of the person who sexually assaulted you?</b>	<b>What were the sexes of the people who sexually assaulted you?</b>
<input type="checkbox"/> Female	<input type="checkbox"/> Female
<input type="checkbox"/> Male	<input type="checkbox"/> Male
<input type="checkbox"/> I do not know.	<input type="checkbox"/> Both males and females
	<input type="checkbox"/> I do not know.



**25.** *[The following respondents receive Q25: (a) those who selected more than one incident in Q14; (b) those who said they were sexually assaulted in Q13 and skipped Q14 and Q16; or (c) those who said they were sexually assaulted in Q13, skipped Q14, and selected more than one incident across locations in Q16. Respondents who saw Q15 do not see Q25. Q25 asks respondents where the one assault that they chose to describe in Branch A or B occurred. Q25a and Q25b are identical.]*

**Where did the sexual assault occur?**

- On the [Institution Name] campus, in a dormitory or other campus housing (not a fraternity or sorority house)
- On the [Institution Name] campus, in a nonresidential building or some other location on campus
- In a fraternity or sorority house, on or off campus, including college-owned housing
- Off campus, at another college or university (not study abroad)
- Study abroad, study away, or other off-campus study program
- Off-campus internship
- Off campus, at an apartment, restaurant, bar, or another location nearby

**26.** *[Q26a and Q26b are identical.]*

**Please tell us more about the location, being as specific as possible.**

**27.** *[Q27a and Q27b are identical.]*

**Were there any bystanders when you were sexually assaulted?**

- Yes
- No
- I am not sure.

**28.** *[Respondents who selected "Yes" to Q27 receive Q28. Q28a and Q28b are identical.]*

**Did they intervene?**

- Yes
- No



29. [Respondents who selected “Yes” to Q28 receive Q29. Q29a and Q29b are the same except for the third response option.]

29a	29b
<b>How did they intervene? (Check all that apply)</b>	<b>How did they intervene? (Check all that apply)</b>
<input type="checkbox"/> They stepped in and tried to separate us.	<input type="checkbox"/> They stepped in and tried to separate us.
<input type="checkbox"/> They asked me if I needed help.	<input type="checkbox"/> They asked me if I needed help.
<input type="checkbox"/> They confronted the person who was assaulting me.	<input type="checkbox"/> They confronted the people who were assaulting me.
<input type="checkbox"/> They tried to create a distraction.	<input type="checkbox"/> They tried to create a distraction.
<input type="checkbox"/> They asked others to step in with them and try to diffuse the situation.	<input type="checkbox"/> They asked others to step in with them and try to diffuse the situation.
<input type="checkbox"/> They told someone in a position of authority about the situation.	<input type="checkbox"/> They told someone in a position of authority about the situation.
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____

30. [Q30a and Q30b are identical.]

**Whom did you tell about the sexual assault? (Check all that apply)**

- No one
- Close friend
- Romantic partner
- Parent or guardian
- Other family member
- Roommate
- Resident advisor/assistant or other peer advisor
- Campus counselor
- Private counselor
- Faculty, staff, or administrator from [Institution Name]
- Faculty, staff, or administrator from another institution
- Campus security/safety/police
- Local police
- Local or national sexual assault hotline
- Campus pastor, minister, rabbi, or other clergy
- Campus sexual assault advocate
- Campus Title IX Coordinator or Deputy Coordinator
- Campus health services
- Other: \_\_\_\_\_



31. [Respondents who selected “No one” to Q30 receive Q31. After they answer Q31, they will then move to [Section Four: Demographics \(Q35\)](#). Q31a and Q31b are identical.]

**What stopped you from telling anyone about the sexual assault? (Check all that apply)**

- I did not think I would be believed.
- I thought I would be blamed for what happened.
- I wanted to deal with it on my own.
- I was ashamed/embarrassed.
- I was concerned others would find out.
- I did not recognize it as sexual assault at the time.
- I did not want the people who did it to get in trouble.
- I was afraid of retaliation.
- I did not think others would think it was serious.
- I thought people would try to tell me what to do.
- It would feel like I was admitting failure.
- I did not think others would think it was important.
- I did not think others would understand.
- I did not have time to deal with it due to academics, work, etc.
- I did not know the reporting procedure on campus.
- I feared I would be punished for infractions or violations (e.g., underage drinking).
- I did not think campus officials could help.
- I did not think campus officials would do anything about my report.
- I feared others would harass me or react negatively to me.
- I thought nothing would be done.
- I didn't want others to worry about me.
- I wanted to forget it happened.
- Other: \_\_\_\_\_

32. [Respondents who DID NOT select “No one” to Q30 receive Q32. Q32a and Q32b are identical.]

**Did you use [Institution Name]’s procedures for making a formal report about the sexual assault?**

- Yes
- No



33. *[Respondents who selected “Yes” to Q32 receive Q33. Respondents who answered “No” to Q32 will move to [Section Four: Demographics \(Q35\)](#). Q33a and Q33b are identical.]*

**How satisfied were you with [Institution Name]’s process for making a formal report about sexual assault?**

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied
- Unsure at this time

34. *[Respondents who selected “Yes” to Q32 receive Q34. Q34a and Q34b are identical.]*

**How satisfied were you with [Institution Name]’s response to your report?**

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied
- Unsure at this time

*[End of Branches A & B – Branch A & B respondents next see [Section Four: Demographics \(Q35\)](#).]*



*[Respondents who have not seen Branch A or B will see Bystander Branch 1 or Bystander Branch 2 (Versions 1, 2, or 3). Branches A and B have bystander questions that parallel Bystander Branch 2 questions.]*

### **SECTION THREE: BYSTANDER BEHAVIORS**

*[If respondents selected “No” to or skipped Q11 and selected “No” to or skipped Q13 (in other words, they did not indicate that they experienced a sexual assault or an attempted sexual assault), they see Branch 1.]*

*[If respondents selected “I suspect . . .” to Q13, indicating that they suspected they were sexually assaulted, they see Branch 2, Version 1.]*

*[If respondents selected “Yes” to Q11 and “No” to or skipped Q13, indicating that they experienced an attempted sexual assault, they see Branch 2, Version 2.]*

*[If respondents selected “I suspect . . .” to Q11 and “No” to or skipped Q13, indicating that they suspected they experienced an attempted sexual assault, they see Branch 2, Version 3.]*



**Bystander Branch One**

**I. Since starting at [Institution Name], have you observed a situation that you believe was sexual assault?**

- Yes
- No
- I suspect I observed a situation that was sexual assault, but I am not certain.

**II. [Respondents who selected “No,” “I suspect . . .,” or skipped QI receive QII.]**

**Since starting at [Institution Name], have you observed a situation that you believe could have led to a sexual assault?**

- Yes
- No
- I suspect I observed a situation that could have led to a sexual assault, but I am not certain.

**III. [Respondents who selected “Yes” to QI or QII receive QIII. Respondents who answered “No,” “I suspect . . .,” or skipped QII will move to [Section Four: Demographics \(Q35\)](#).]**

**Did you intervene?**

- Yes
- I considered intervening but did not feel safe doing so.
- I considered intervening but did not feel comfortable doing so.
- I considered intervening but did not know how to do so.
- I did not intervene.

**IV. [Respondents who selected “Yes” to QIII receive QIV. Respondents who selected anything else or who saw QIII and did not respond move to [Section Four: Demographics \(Q35\)](#).]**

**How did you intervene? (Check all that apply)**

- I stepped in and separated the people involved in the situation.
- I asked the person who appeared to be at risk if they needed help.
- I confronted the person who appeared to be causing the situation.
- I created a distraction to cause one or more of the people to disengage from the situation.
- I asked others to step in with me and diffuse the situation.
- I told someone in a position of authority about the situation.
- Other: \_\_\_\_\_



**Bystander Branch Two**

I. *[Questions are different for Q1, Versions 1, 2, and 3. Response options are the same.]*

Version 1	Version 2	Version 3
<b>Were there any bystanders when you suspect you were sexually assaulted?</b>	<b>Were there any bystanders when you experienced the attempted sexual assault?</b>	<b>Were there any bystanders when you suspect you experienced an attempted sexual assault?</b>
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> I am not sure.		

II. *[Respondents who selected “Yes” to QI, Version 1, 2, or 3 receive QII. Respondents who answered “No,” “I am not sure,” or skipped Q1 move to [Section Four: Demographics](#) (Q35). QII, Versions 1, 2, and 3 are identical.]*

**Did they intervene?**

- Yes
- No

III. *[Respondents who selected “Yes” to QII receive QIII. Respondents who answered “No” to or skipped QII move to [Section Four: Demographics](#) (Q35). Questions are identical for QIII, Versions 1, 2, and 3. Response options are the same except for the third response option.]*

Version 1	Version 2	Version 3
<b>How did they intervene? (Check all that apply)</b>		
<input type="checkbox"/> They stepped in and separated us.	<input type="checkbox"/> They stepped in and separated us.	<input type="checkbox"/> They stepped in and separated us.
<input type="checkbox"/> They asked me if I needed help.	<input type="checkbox"/> They asked me if I needed help.	<input type="checkbox"/> They asked me if I needed help.
<input type="checkbox"/> They confronted the person who was assaulting me.	<input type="checkbox"/> They confronted the person who was attempting to assault me.	<input type="checkbox"/> They confronted the person who I suspect was attempting to assault me.
<input type="checkbox"/> They created a distraction.	<input type="checkbox"/> They created a distraction.	<input type="checkbox"/> They created a distraction.
<input type="checkbox"/> They asked others to step in with them and diffuse the situation.	<input type="checkbox"/> They asked others to step in with them and diffuse the situation.	<input type="checkbox"/> They asked others to step in with them and diffuse the situation.
<input type="checkbox"/> They told someone in a position of authority about the situation.	<input type="checkbox"/> They told someone in a position of authority about the situation.	<input type="checkbox"/> They told someone in a position of authority about the situation.
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____



## SECTION FOUR: DEMOGRAPHICS

**35. What is your college classification for the 2015–2016 Academic Year?**

- Freshman/First Year
- Sophomore
- Junior
- Senior
- Graduate Student
- Other: \_\_\_\_\_

**36. Thinking about this current academic term, are you a full-time student?**

- Yes
- No

**37. What is your gender?**

- Man
- Woman
- Fill in: \_\_\_\_\_

**38. What is your citizenship status?**

- U.S. citizen
- U.S. permanent resident but not a U.S. citizen
- Not a U.S. citizen or permanent resident

**39. Are you Hispanic or Latino/a?**

- Yes
- No

**40. Please indicate the race or races with which you identify. (Choose one or more)**

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or other Pacific Islander
- White



**41. Which of the following best describes where you are currently living?**

- Dormitory or other campus housing (not a fraternity or sorority house)
- Fraternity or sorority house (including college-owned housing)
- Residence (house, apartment, etc.) *within* walking distance to the institution
- Residence (house, apartment, etc.) *farther than* walking distance to the institution
- None of the above

**42. [Respondents who selected “Dormitory or other campus housing” or “Fraternity or sorority house” to Q41 receive Q42.]**

**Is your housing single gender?**

- Yes
- No

**43. Which term best describes your sexual orientation?**

- Asexual
- Bisexual
- Gay
- Heterosexual
- Lesbian
- Pansexual
- Queer
- Questioning
- Fill in: \_\_\_\_\_

**44. [Respondents who indicated that they experienced one incident of sexual assault in Q14 or did not respond to Q14 receive Q44.]**

**If there is any additional information you would like to provide about [Institution Name]’s climate for unwanted sexual contact and sexual assault, please use the box below. Like the rest of your responses to this survey, any information you provide is anonymous and will only be reported grouped with other comments. The information you provide will be used to inform and improve support, policies, and practices at [Institution Name] and will not be used to investigate specific individuals. Disclosing an incident here does not constitute reporting the incident to [Institution Name] and will not result in any action, disciplinary or otherwise. Please do not identify anyone by name in your survey responses. If you identify anyone by name, the names will be removed before [Institution Name] receives the data.**



45. *[Respondents who indicated in Q14 that they experienced more than one incident of sexual assault receive Q45.]*  
Earlier in the survey you indicated that you have experienced more than one incident of sexual assault since starting at [Institution Name]. If you would like to provide information about incidents other than the one you described in the survey so far, please use the box below. Like the rest of your responses to this survey, any information you provide is anonymous and will only be reported grouped with other comments. The information you provide will be used to inform and improve support, policies, and practices at [Institution Name] and will not be used to investigate specific individuals. Disclosing an incident here does not constitute reporting the incident to [Institution Name] and will not result in any action, disciplinary or otherwise. Please do not identify anyone by name in your survey responses. If you identify anyone by name, the names will be removed before [Institution Name] receives the data.

46. *[Respondents who indicated in Q14 that they experienced more than one incident of sexual assault receive Q46.]*  
If there is any additional information you would like to provide about [Institution Name]'s climate for unwanted sexual contact and sexual assault, please use the box below.

**\*\*Thank you for participating in this survey. To submit your answers, please click on the "Submit" button below. We will not record your responses until you hit this button. Your name will not be connected in any way with your survey responses.\*\***

*[The following language appears after respondents click the "Submit" button.]*

Thank you for participating in the Sexual Assault Campus Climate Survey.

The information you have given us is anonymous. Your name is not connected in any way with your responses to this survey, and any identifying information from the computer on which you took the survey was removed before we received the data.

Please note, if other individuals (e.g., partner, roommate) have access to your computer, they might be able to view your web browsing history, including a link to this survey. For information on how to delete your web browsing history, you can visit <http://www.computerhope.com/issues/ch000510.htm>.

If you would like information or would like to talk with someone about unwanted sexual contact, sexual assault, or relationship violence, please do not hesitate to contact any of the following campus, local, and national resources. You can take this list of resources with you by printing this page.

We deeply appreciate your cooperation and willingness to provide information that will help us improve the policies and tools we use to reduce the occurrence of sexual assault and unwanted sexual contact at [Institution Name].



### ***Resources for Sexual Assault and Relationship Violence***

**Campus crisis center or contact person:** [Each institution provides the name, title, email address, and phone number of their campus crisis center or the person that someone would contact for support if she/he has been sexually assaulted or is in a violent relationship. Institutions should also provide a brief description of the services or support that this person or center provides. Institutions may provide information about multiple campus resources here, including information about how students can report incidents of sexual assault that they have not previously reported.]

**Local and/or state hotline numbers and resources:** [Institutions provide phone numbers and URLs to local and/or state sexual assault hotlines and resources, as well as resources for domestic violence and relationship violence.]

#### **National Sexual Assault Hotline**

<https://www.rainn.org/get-help/national-sexual-assault-hotline>

800-656-HOPE (4673)

The Rape, Abuse & Incest National Network (RAINN) operates the National Sexual Assault Hotline and the Online Hotline. The Online Hotline provides live, secure, anonymous crisis support for victims of sexual violence, their friends, and families. Both hotlines are free of charge and are available 24 hours per day, 7 days per week.

#### **National Domestic Violence Hotline**

<http://www.thehotline.org>

800-799-SAFE (7233)

TTY 800-787-3224

Provides 24/7 confidential, one-on-one support to each caller and person on live chat, offering crisis intervention, options for next steps and direct connection to sources for immediate safety for women, men, children, and families affected by domestic violence.

#### **Love is Respect**

<http://www.loveisrespect.org>

866-331-9474

TTY 866-331-8453

Text "loveis" to 22522

Designed specifically for teens and young adults, Love is Respect provides 24/7 phone, text, and chat services and offers real-time, one-on-one confidential support from peer advocates. Message and data rates apply on text for help services.

The [Institution Name] leader(s) of this survey effort [is/are] [name(s)] and [he/she/they] can be reached at [email address(es) and/or phone number(s)].

He/She/They can answer additional questions you may have about the survey.

THANK YOU AGAIN FOR YOUR PARTICIPATION IN THIS SURVEY.