What’s all the fuss? Title IX and high risk student populations

LEILANI KUPO, PH.D.
DIRECTOR, WRRC
(SHE/HER/HERS)

HEATHER C. LOU, M.ED.
ASSISTANT DIRECTOR OF OUTREACH, WRRC
(SHE/HER/HERS)

THOMAS WHITCHER, M.ED.
SORORITY AND FRATERNITY LIFE COORDINATOR
(HE/HIM/HIS)
Outcomes

- Define harm, violence, bystander intervention, risk reduction, and prevention approaches to at-risk populations as it relates to UC policy and practice.
- Identify populations who engage in “risky behavior”.
- Strategize three action items to help students, staff, and faculty engage in harm reduction behavior at UC Davis.
- List 2 programs/resources that support students, staff, and faculty in addressing violence and harm.
WHO ENGAGES IN “HIGH-RISK” BEHAVIOR?

WHAT IS THIS BEHAVIOR?
Connection to Title IX

WHAT IS YOUR ROLE ON CAMPUS?

HOW MIGHT T-IX IMPACT YOUR WORK?

WHO AND WHAT ARE WE MANDATED TO REPORT?
CONTEXT BUILDING
Harm

Physical, mental, or emotional damage to self or others (intentional or unintentional...)

- Berkeley CARES, UC Berkeley, 2014
Violence

“The threatened or actual use of physical force or power against another person, against oneself, or against a group or community that either results or is likely to result in injury, death, or deprivation.”

- Centers for Disease Control and Prevention (CDC)
Bystander Intervention

...safe and positive options that may be carried out by an individual or individuals to prevent harm or intervene when there is a risk of dating violence, domestic violence, sexual assault, or stalking.

Bystander intervention includes recognizing situations of potential harm, understanding institutional structures and cultural conditions that facilitate violence, overcoming barriers to intervening, identifying safe and effective intervention options, and taking action to intervene.
Risk Reduction

...the use of strategies designed to decrease perpetration and bystander inaction, and create an environment where bystanders step in when abuse occurs, rather than remaining silent. These options would ultimately increase victim empowerment by reaching out to individuals and communities to: promote safety, extend help, and address conditions that facilitate violence.
Preventing Violence Happens at Three Levels

**Primary**
Stopping Violence Before It Occurs
Strategies like healthy relationships & environments reduce risks & increase buffers.

**Secondary**
Immediate Responses to Violence
Services like emergency and medical care address short-term consequences.

**Tertiary**
Long-Term Responses to Violence
Approaches in aftermath address trauma & rehabilitate perpetrators.

Our goal is to stop violence before it occurs.

The Public Health Model

1. Define the problem
2. Identify risk and protective factors
3. Develop and test prevention strategies
4. Assure widespread adoption
CASE STUDY

IS TITLE IX APPLICABLE?
WHAT ARE YOUR LIMITS?
Case Study

You are a supervisor for a handful of work-study students. Taylor, who has been working with you for two quarters, has stood out as one of the most enthusiastic and invested students you supervise. Over the past week, you have noticed that Taylor has been coming to work late, spending most of their shift in a corner work station, and sometimes smells like alcohol. Taylor also has started wearing different kinds of clothing than what you’ve noticed before. Taylor has been a lot shorter in conversations than usual, but you also know they are taking summer session classes.
Part of your job is advising student organizations, which is probably your favorite way that you get to interact with students. Students are returning for trainings and organization recruitment... so life is getting busier!

You notice Taylor talking with Dylann, a student you advise but not supervise, when you are getting lunch from the CoHo. You walk over to greet them when the smell of alcohol hits your nose as you walk up and hearing them talk about the party they went to last night. Taylor’s eyes look watery and red, and you notice a bruise on Taylor’s arm. After a little bit of conversation, Taylor leaves in a hurry.

You go back to your office after picking up your lunch.
As you sit down at your desk with your lunch, Taylor walks in soon after. You’d been so busy that you overlooked Taylor was stopping in for the usual supervisory check-in. After talking briefly about the projects Taylor has been working on, you ask Taylor how they have been doing lately. In getting a brief no real answer response, you let Taylor know you’ve noticed some changes and just want to check in to support them any way you can.

Taylor says that they are exploring their gender, and that they recently came out to their family... And that didn’t go too well. Taylor says they’ve been drinking and partying to help “deal with it.” You ask Taylor if they have found any support on campus through friends, staff or departments.

Taylor starts to tell you that they have been starting to hang out with Dylann, and that the two of them have been going to parties together. Taylor says that the other day something happened between the two of them after a party, and isn’t quite sure what to do next. Taylor starts crying and saying “it’s my fault.”
Summary

- What do you know in this case study?
- Are there any assumptions you may have made? If so, what are they?
- What steps might you have taken throughout this case study?
- What resources might you utilize?
- What does it mean to be an active bystander and reduce risk?
- What might you do in your role to prevent violence (primary, secondary, tertiary) with populations moving forward?
Questions to consider moving forward...

- What do you do before an incident happens?
- What do you do as an immediate response to when an incident happens?
- How do you follow up when an incident happens?
- Who can you contact for support when an incident happens?
- What resources might you utilize?
## Resources

<table>
<thead>
<tr>
<th>Confidential</th>
<th>Non-Confidential</th>
</tr>
</thead>
<tbody>
<tr>
<td>Center for Advocacy Resources and Education</td>
<td>Harassment and Discrimination Assistance and Prevention Program</td>
</tr>
<tr>
<td>Student Health and Counseling Services</td>
<td>Student Judicial Affairs</td>
</tr>
<tr>
<td>Academic and Staff Assistance Program</td>
<td>Title IX Officer</td>
</tr>
<tr>
<td>Women’s Resources and Research Center</td>
<td>Services for International Students and Scholars</td>
</tr>
<tr>
<td>Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, and Asexual Resource Center</td>
<td>Family Protection and Legal Assistance Clinic</td>
</tr>
<tr>
<td>Office of the Ombuds</td>
<td></td>
</tr>
</tbody>
</table>