A national conversation has emerged regarding the prevalence of and strategies for addressing sexual assault on college campuses. Sexual assault includes rape, sexual coercion, being forced to penetrate someone else, and unwanted sexual experiences including those without physical contact [1]. We are now familiar with the statistic that one in five women will experience sexual assault in college. These frequently cited findings emerged from a study of more than 5,000 college women from two universities in the Southern and Midwestern United States [2] with similar findings shown in a recent study that assessed sexual victimization during the school year among more than 4,000 college women from eight campuses in the Northeast [3]. Although the prevalence of sexual assault victimization among men in college is poorly understood and likely underestimated, the National Intimate Partner and Sexual Violence Survey indicates that approximately one in 71 men will experience sexual assault in their lifetime [1]. Most sexual assault survivors (80%) experience their first assault before the age of 24 years, making college campuses a particularly important venue for prevention [1,4].

In this issue of the Journal of Adolescent Health, Carey et al. [5] present findings from a longitudinal study of 483 first-year female students attending a college in Northeastern United States. The study surveyed women when they arrived on campus, after fall semester, after spring semester, and at the end of the summer before sophomore year to assess the incidence of rape in their first year of college. This study, with its use of multiple measurements over time, bolsters findings from previous studies which suggest that rape is a common experience among college-aged women. Between 8% and 11% of women experienced rape in each semester during their first year in college, which is hypothesized to be a time of increased vulnerability to sexual violence [2,6]. This study also makes the distinction between incapacitated rape and forced rape, with incapacitated rape (defined by the study authors as rape involving drugs or alcohol) more commonly experienced during the study. Experts emphasize that alcohol does not cause sexual assault, although it may be associated with elevated severity and increased vulnerability to sexual assault [7]. Implications here are clear: efforts to reduce risky alcohol use on college campuses—whether in the form of campus policies and programs or brief interventions in college health centers—would benefit from incorporating universal messages about healthy relationships and healthy sexuality, which are, in fact, strategies for violence prevention.

Carey et al. remind us of a key fact, critical to informing responses to sexual assault on campus: college students are not “blank slates.” Rather, they come to campus with complex histories that include adverse childhood experiences (e.g., physical and sexual child abuse), sexual assault, and adolescent relationship abuse. For example, the 2013 Youth Risk Behavior Surveillance System found that 20.9% of high school females and 10.4% of high school males experienced physical or sexual dating violence in the 12 months before the survey [8]. Why does exposure to abuse before college matter for sexual assault prevention in the college setting? Young people who have experienced physical and sexual abuse once are more likely to experience physical abuse and sexual assault again in adolescence and young adulthood [9,10]. Carey et al. [5] found that students who experienced incapacitated rape before entering college were six times more likely to experience incapacitated rape and more than four times more likely to be forcibly raped during the first year of college compared with women who had not experienced incapacitated rape before entering college. These findings are important not only for sexual assault prevention but for mental health promotion on campus as previous work has illustrated that multiple exposures to violence are strongly associated with poor mental health, including suicidality [11].

The findings of Carey et al. [5] also have implications for campus prevention efforts. At the recommendation of the White House Task Force to Protect Students from Sexual Assault, many campuses across the country have developed campus climate surveys to understand the extent to which

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their students have experienced sexual assault. Surveys assessing precollege exposure to sexual assault could help shape how campuses develop first-year orientation and programs for the larger student body and inform training for faculty, resident assistants, and other staff. Revised training and education for students and staff who are mandated reporters of sexual assault using campus climate survey data allow for institution-specific data to drive prevention rather than those of a standard “one-size fits all” approach that has been the norm on college campuses.

Importantly, such information would facilitate a trauma-informed approach to preventing and working with survivors of campus sexual assault. Trauma-informed prevention promotes empowerment and recognizes that sexual assault may impact everything about survivors moving forward, including peer relationships, academic progress, likelihood of engaging in subsequent risky alcohol use, and poor mental health [12–14]. It also guides us to approach all students as though they have experienced abuse, regardless of whether they have or not, so that we begin each interaction with students prepared to support them where they are. A trauma-informed approach does not necessarily seek disclosure, rather it shifts our frame of reference so that we are mindful of the myriad of experiences that may influence our students. It also equips us with language to normalize conversations about violence, an important step in shifting the culture on campuses from one plagued by silence to one that challenges the misconception that sexual assault is normal or acceptable. As colleges and universities focus resources on student support services and retention, trauma-informed practices would better publicize campus policies related to sexual assault and campus resources to support survivors. A coordinated, trauma-informed approach across disciplines (faculty, staff, administrators, health professionals) would create an environment where survivors feel more comfortable reporting sexual assault and have safe spaces to share their stories and where all members of the campus community feel empowered to challenge social norms, including hypermasculinity and homophobia, which perpetuate sexual violence [15]. Comprehensive prevention efforts must include training to promote positive bystander intervention and incorporate violence prevention messages into health and wellness education to engage the college community on an ongoing and sustained basis about this important issue.

References


