Comparing confidential and nonconfidential resources for UC survivors of sexual violence & sexual harassment (SVSH)

Using data from the Survivors + Allies' 2021 survey of the UC community

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Background & Purpose

Sexual violence and sexual harassment (SVSH) are pervasive on college campuses across the United States (US) [1]. While some resources are available to support survivors of SVSH at these institutions, our Survivors + Allies (S+A) study showed many students had low knowledge and awareness of these resources and what they offer [2]. Even in instances where students were aware of a resource, our findings revealed that many students were confused about whether the resource was confidential or non-confidential. Yet students that identified as survivors and utilized resources had much better experiences and perceptions of confidential resources compared to non-confidential resources.

Resources that are specifically designated as "confidential" are critical support services for survivors of SVSH. In a previous study by Loney-Howes et al., researchers showed how confidentiality can encourage survivors to utilize support services [3]. Confidential resources allow for a safe space in which survivors can share their experience and receive support—free of judgment or pressure to report their experiences to authorities. Confidential resources are not mandated to report student experiences of harm, and employees at confidential resources are not mandated reporters or deemed as "responsible employees," unlike that of non-confidential, reporting, and investigative resources. Mandated reporters are employees (e.g., faculty, managers/supervisors, Teaching Assistants (TAs), and staff) that are legally required to report certain types of harm, abuse, and/or neglect to the authorities or other designated officials. They make up a significant portion of employees in the UC system, and include both administrators and teaching staff.

Resources like the Campus Assault Resources & Education (CARE) program, Counseling and Psychological Services (CAPS) or other school counseling centers, and the Office of the Ombuds (which is not available at every UC campus) are the *only* on-campus confidential UC resources that do not require the mandated reporting of instances of SVSH. When seeking support from a confidential resource, a student can receive help whether or not they choose to make an official report with an officer, engage with the justice system by taking legal action, or file a complaint to the University. No further investigation is required by the advocates or counselors that are employed by these organizations as they are not designated mandated reporters. With this in mind, these confidential support resources tend to utilize a survivor-centered and trauma-informed approach to address instances of SVSH [4,5].

Conversely, both the UC Police Department (UCPD) and Title IX offices are non-confidential resources. Compared to confidential resources, when receiving support from a non-confidential resource, employees who are informed by a survivor of their experience are obligated to report the incident, thereby triggering an investigation that is not confidential. When interacting with UC resources like Title IX or UCPD, survivors must usually go through an extensive process to file an official report or open a case in order to receive support or utilize the resource.

It is clear that UCPD and other campus police departments play a role in responding to reports of SVSH when survivors choose to report an incident to law enforcement or Title IX [6], but involving police does not always serve survivors [7]. For example, involving police can cause "revictimization" [7]. Further, research indicates that student survivors are significantly less likely to report incidents of SVSH to campus police compared to Title IX or peers, due to concerns with privacy and

confidentiality, as well as fears of victim-blaming during the reporting or investigative process [8,9]. Despite these findings, both Title IX and UCPD are positioned as frontline resources for survivors of SVSH on college campuses.

College campuses should move toward positioning survivor-centered, trauma-informed, confidential resources as frontline resources for survivors of SVSH. Research suggests that concerns with confidentiality create barriers to seeking help after an incident, underscoring the importance of establishing trust, understanding, privacy, and safety [5]. However, there is variation in student knowledge on confidential resources in the UC system [2]. This can create problems for students seeking support during a difficult time or after a traumatic event [2]. If a student is unaware that a resource is non-confidential and seeks assistance, they may be at risk of experiencing more harm. For instance, if a student did not want to formally report an incident and went on to disclose an incident thinking it was confidential, they may feel forced to continue in the extensive reporting process, which some survivors in our study have stated to be "re-traumatizing" and unhelpful to their healing process. Given the high number of mandated reporters at UC campuses, it is imperative that survivors know where to receive confidential support. Furthermore, it is critical that confidential resources be positioned as frontline resources for survivors on college campuses, as these resources are preferred by survivors and tend to utilize a survivor-centered and trauma-informed approach to care.

Definitions

- **Confidential Resources:** Services that are not required to report incidents to authorities and can offer privacy and support to survivors.
- **Non-Confidential Resources:** Services obligated to report incidents to authorities, which may include Title IX offices and university police departments.
- Mandated Reporters: Employees (e.g., faculty, managers/supervisors, Teaching Assistants (TAs), and staff) that are legally required to report certain types of harm, abuse, and/or neglect to the authorities or other designated officials.

Resources available at all 10 UC campuses	Confidential?	Definition
CARE Center	yes	CARE's name differs slightly across the UC campuses. At UCLA it stands for "Campus Assault Resources and Education," and its stated mission is "providing a safe place for survivors of sexual violence to get confidential support." At UC Berkeley, it is called the "PATH to Care Center", and has a similar mission statement. In short, while the name may differ for each campus, the purpose of the center is similar. CARE is one of only three confidential resources for survivors at most UCs (in addition to CAPS and the Office of the Ombuds Services at certain UCs). CARE provides healing resources for survivors (such as group therapy and trauma-informed yoga) as well as the opportunity for survivors to meet with trained Advocates, who can guide survivors through the Title IX process and help them access additional resources that meet their unique needs. Importantly, CARE serves the
		entire campus community — including students, faculty, and staff.

Resources available at all 10 UC campuses	Confidential?	Definition	
CAPS/ Counseling Center	yes	CAPS's name also differs slightly across the UC campuses. At UCLA, it stands for "Counseling and Psychological Services," and its stated mission is "to support undergraduate, graduate and professional school student development, empowerment and success through connection with dedicated diverse staff who provide mental health services that encourage Health, Healing, and Hope." At UCI, it is called the "Counseling Center" and has a similar mission statement to deliver "quality services that help students achieve optimal mental health for academic success, personal growth, and increased capacity to cope with the stresses of being a university student." While the names are different, the center functions similarly on each campus. CAPS is one of only three confidential resources for survivors at most UCs (in addition to CARE and the Office of the Ombuds Services as certain UCs). They provide counseling (individual, relationship, and group therapy) and other clinical services, as well as referrals and resources to students. CAPS typically provides short-term, timelimited individual therapy for students rather than open-ended or long-term therapy services. After a student completes an initial assessment appointment with the center, the student will receive a treatment recommendation. If the treatment recommendation is long-term therapy, the center will typically give the student a list of	
Title IX Office	no	referrals and resources to look for a therapist outside of CAPS. Title IX is a federal law that prohibits gender discrimination in any federally funded education program or activity. It protects all persons in the U.S., including international and undocumented students. The Systemwide Title IX office states on its website that it provides "direction and support for the Title IX offices at the university's 10 campuses and the Lawrence Berkeley National Laboratory (LBNL), as well as the Office of the President." They also state they "assist in implementing system wide initiatives and best practices in harassment prevention and response" and "provide investigative support and develop and deliver education and training to Title IX offices and other university partners involved in preventing and responding to sexual harassment and sexual violence." The Title IX Office is not confidential. There are Title IX coordinators at each UC campus location who are responsible for coordinating	
		compliance with Title IX and implementing the policies on Sexual Violence and Sexual Harassment on their campus. Currently, there are no feedback forms for individuals who went through the Title IX process to share their perspectives or reflect on their experiences.	
UC Police Department (UCPD)	no	Each UC campus has their own UC Police Department. The mission of UCPD is to "protect life and property". Their website also states that they are "committed to upholding the Constitutional Rights of all persons, abiding by and enforcing State and Federal law and doing so consistent with the values of the University of California community and the principles of community policing." UCPD is not a confidential resource.	

Methods

In 2021, UCLA student organization Survivors + Allies (S+A) conducted a research study surveying students across all 10 UC campuses to evaluate students' awareness, utilization, and evaluation of on-and off-campus resources for survivors of SVSH, including the Title IX office, CARE, CAPS, and UCPD. You can read the resulting report and associated academic publications here.

The resulting sample consisted of:

- 1,223 total students (52% undergraduate and 48% graduate)
- 62% cisgender women, 21% cisgender men, 2% transgender people, 18% nonbinary and people of other gender identities
- 42% of students identified as LGBQA+
- 59% as students of color
- 17% as international students
- 41% identified as survivors of SVSH

Overview of Accessibility to Confidential & Nonconfidential Resources

In 2024, the UC system employed over 245,000 faculty, academic staff, and administrative staff, and had over 295,000 students enrolled [10]. Further, there were at least 79 Title IX employees and 269 UCPD officers employed in 2024 based on their organizational website data. Yet there were only 30 confidential CARE advocates and approximately 266 CAPS mental health providers (excluding post-docs and interns) employed that year, revealing the stark differences in accessibility to confidential advocates and care for survivors on UC campuses.

Using publicly available data, the table below demonstrates the systematic differences in funding for non-confidential and confidential resources in the UC system, by comparing the number of CARE advocates, CAPS mental health providers (excluding post-docs and interns), Title IX employees, UCPD officers, and students enrolled in 2024.

UC Campus	No. CARE Advocates*	No. CAPS mental health providers*	No. Title IX Employees*	No. UCPD Officers*	No. Students Enrolled**
UCSF	2	11	12	46	6,032
UCB	7	56	17	29	45,699
UCSB	3	15	7	22	24,271
UCM	1	9	7	12	9,148
UCSC	2	17	7	11	19,764
UCI	4	31	NA***	30	37,350
UCR	3	12	8	18	26,426
UCD	1	25	NA***	32	40,848
UCSD	3	52	15	34	42,376
UCLA	4	49	6	35	46,678

^{*}Number of CARE Advocates; CAPS mental health providers; UCPD Officers; and Title IX employees as of 2024, as stated on their organizational websites

^{**}Number of students enrolled as of Fall 2023, using UC enrollment data

^{***}Not publicly available

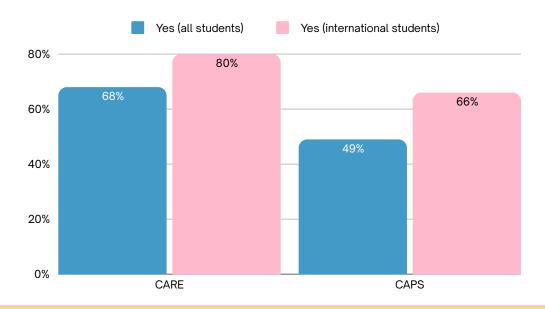
Results from S+A Study

Student Awareness of Resources

Among all students, awareness of confidential resources like CARE and CAPS was not too low.

- 34% had never heard of CARE.
- 20% has never heard of CAPS.

However, for international students, awareness was much lower.



"I was not aware of [these survivor support resources] until grad school. I also attended a UC during college but was unaware of its resources." [on reasons they did not try to seek help from Title IX] - cis-woman, straight, Asian, graduate student

Students lack awareness of basic information about the resources available for survivors at their UC institution:

- 23% of student don't know what the Title IX office does.
- 37% mistakenly believe the Title IX office is confidential.

"I didn't know about [Title IX] & it seemed like there was too much red tape to go through, I didn't know how it might benefit me." - cis-woman, LGBTQIA+, White, undergraduate student

"I was unaware of Title IX at the time. I also don't think I would have sought help even if I had known of Title IX, because I thought at the time that it wasn't that big of a deal (and that I was blowing my feelings about it out of proportion). I'm also not sure if I would have trusted the Title IX office."

- gender nonbinary, LGBTQIA+, White, staff

International students lack awareness of resources available for survivors at their UC institution:

- International students are 32% less likely to know what Title IX does compared to domestic students.
- 22% don't know whether international students are covered under Title IX.
- 53% of international students don't know CARE is confidential.

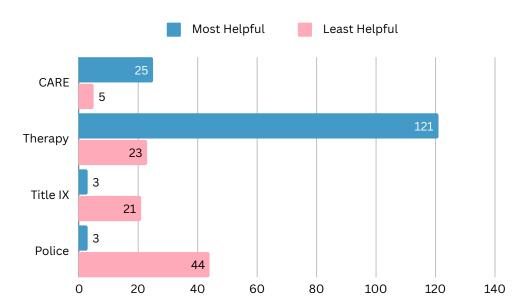
Student Resource Utilization

CARE was the second most utilized resource after CAPS. Survivors reported highly positive experiences with CARE. It was the highest rated resource when compared with Title IX, CAPS, and UCPD:

"CARE center [was most helpful] - having someone that was trained to talk to me when I was in [a] mental crisis in the wake of the incident was really effective, especially since the person I talked to was very affirming of my experience and very supportive with what I wanted to do. All that I really did was talk to the person on the phone (I pursue no action beyond that), but the experience of talking to the CARE center was really all I really needed to get me out of that crisis mindset that I dealt with after the incident." - graduate student

Student Experiences with Resources

Overall, survivors had negative experiences with non-confidential resources, including Title IX and UCPD. However, most survivors reported that confidential resources, such as therapy and CARE, were helpful healing resources.



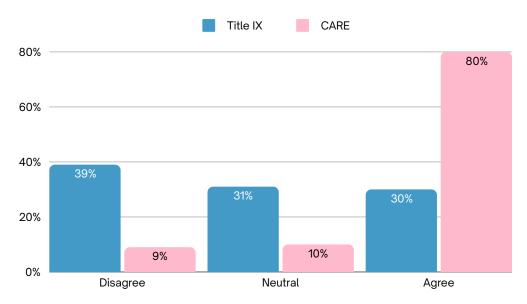
Nearly half of survivors did not feel respected by or safe with Title IX staff:

Percentage of survivors who <u>disagree</u> with the following statements:		
I felt respected by Title IX staff.	43%	
I felt safe interacting with Title IX staff.	42%	

But most survivors felt supported and respected by CARE and CAPS:

Percentage of survivors who <u>agreed</u> with the following statements:				
I felt emotionally supported and respected by CARE staff.	81%			
I felt emotionally supported and respected by CAPS staff.	77%			
I felt emotionally supported and respected by Title IX staff.	36%			

Further, survivors agreed that they felt safer when interacting with CARE staff (80%) in comparison to Title IX staff (30%).



Survivors also overwhelmingly <u>distrust</u> the police:

• Survivors of color and queer survivors specifically shared that they distrusted the police. In fact, LGBTQIA+ students were 64% less likely to trust UCPD compared to their heterosexual peers.

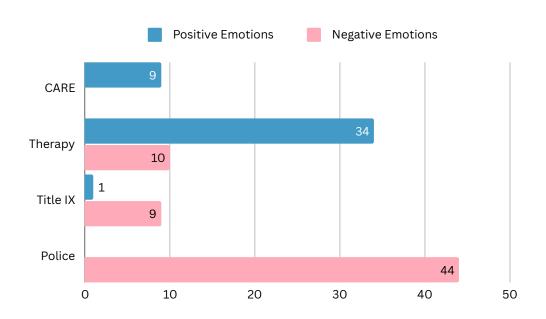
"I've had bad experiences with the UCPD before. I'm sure that the police officers are good people, but I associate them with a mental breakdown I had while on campus and am hesitant to reach out to them for help." - cis-woman, bisexual, Asian

"I reported an incident in which my abusive ex-boyfriend posted intimate photos of me online...[the police] were mostly insensitive and didn't take my case seriously nor treat it with the urgency it deserves. It took so long for the detective to reach back out to me about my case without really acknowledging that I still felt endangered and scared of further retaliation from my abusive ex."

- undergraduate student survivor

Survivor Emotions Associated with Resources

Survivors reported that confidential resources gave them positive emotions, like trust, safety, and respect. Conversely, non-confidential resources gave them negative emotions.



"I don't trust the police: they bring harassment and violence into the community which disproportionately impacts POC students and community members. I especially was not comfortable speaking with men after this incident, which would have been unavoidable when corresponding with UCPD." - cis-woman, bisexual, Asian and Hispanic, undergraduate student

"UCPD has made it known to be very unreliable. A student has gotten sexually assaulted by another student yet they did nothing to prevent the victim from being assaulted again. How can I trust such an entity if they did not even care about a victim of greater assault?" — cis-woman, bisexual, Asian, undergraduate student

• 77% of survivors also agreed that they felt emotionally supported and respected by CAPS staff:

"Counseling services [were the most helpful to me], simply because I found it easier to talk about and process with someone who won't judge." - cis-woman, LGBTQIA+, multiracial, undergraduate student

Policy Recommendations

Standardize UC Title IX websites with more information to avoid confusion.

- Consider adding the following:
 - Distinct pages on the rights of all students (including international and undocumented students), stating in clear language that they are covered and afforded the same rights as domestic students.
 - o Include an FAQ section.
 - Translate all policy documents and key information on Title IX websites into Mandarin, Spanish, and other relevant languages.

Increase awareness of resources among students.

- Consider doing the following:
 - Share S+A syllabi statement with faculty and TAs that outlines available resources and information on mandated reporters.
 - Spotlight CARE in the Title IX training as the primary confidential resource for survivors to receive information and resources.
 - Send out an all-student email at the beginning of each academic year to ensure students are aware of CARE as an important resource

Improve the Title IX process.

- All Title IX investigators should receive adequate training on trauma-informed care, such as how trauma might manifest itself (such as students not remembering things told to them, which is why they need paper/digital resources).
- All students who go to Title IX to report should understand confidentiality and the difference between Title IX and CARE. Title IX could have a checklist to review with each student to ensure they are fully informed.
- All students who meet with a Title IX investigator should be able to have a CARE Advocate or trained equivalent with them at all times (similar to a medical model where students can request a support person for physical exams).

Invest in hiring more confidential advocates and mental health providers.

• Hire more confidential CARE advocates along with mental health providers from diverse backgrounds and identities.

Improve the UCPD investigative and reporting process.

• All UCPD officers should receive adequate training on trauma-informed care.

• UCPD should evaluate and assess their current practices, and create new policies that integrate survivor-center approaches.

Streamline collaboration between confidential and non-confidential resources.

 UCPD, Title IX, CAPS, and CARE should all collaborate in the presence of SVSH in order to provide tailored care to survivors. This means ensuring a survivor has access to a confidential advocate and is connected with a mental health provider as soon as Title IX or UCPD is contacted about an incident, and prior to the start of the reporting and investigative process.

Conclusion

Survivors of SVSH at universities often face a complex landscape when seeking support, where the distinction between confidential and non-confidential resources becomes crucial. This is because confidential resources provide privacy and are not obligated to report incidents, offering a safe space for survivors to seek help without fear of mandatory reporting. In contrast, non-confidential resources, like Title IX offices, are required to report incidents, which can deter some survivors from seeking assistance. This dichotomy in resource confidentiality can significantly impact a survivor's decision to come forward and seek support.

Addressing the disparity between confidential and non-confidential resources is vital for creating a supportive environment for SVSH survivors on college campuses. When survivors understand their options and feel safe using them, it can lead to higher reporting rates and better access to necessary support services. However, if survivors are deterred by the mandatory reporting obligations of non-confidential resources, they may avoid seeking help altogether, exacerbating the negative impacts of SVSH on their mental health, academics, and social connections. Ensuring that survivors have clear information and access to both types of resources is crucial for their recovery and well-being.

Our study revealed that students in the UC system tend to have better experiences with and feel safer using confidential resources compared to non-confidential resources. This is because confidential resources are more likely to have practices that are better aligned with and staff that are trained on providing trauma-informed, survivor-centric care. However, students in our study were often unaware of or confused about which resources were confidential and not. Many students also tended to distrust or have negative emotions associated with non-confidential resources like Title IX and UCPD. Given this finding, it is imperative that: (1) confidential resources be listed as frontline resources for survivors; (2) Title IX and UCPD receive better training on trauma-informed care and align their practices to be more survivor-centric; (3) the UC invests in hiring more confidential advocates and mental health providers with diverse backgrounds and identities; and (4) non-confidential resources collaborate with confidential resources in the presence of SVSH to provide tailored care to survivors.

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