

Self-Assessment Guide for University Prevention Programs Focused on Sexual Assault and Sexual Harassment

Appendixes

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About This Document

As part of an initiative to reduce rates of unwanted sexual contact at military service academies (MSAs), the U.S. Department of Defense (DoD) Sexual Assault Prevention and Response Office funded the RAND Corporation to create an assessment targeting organizational best practices for comprehensive sexual assault prevention. This assessment aimed to support MSAs in their continued efforts to eliminate sexual assault and harassment at their institutions.

A RAND team used the structured RAND/UCLA Appropriateness Method to develop the assessment and conducted a literature review and solicited expert feedback about what a comprehensive organizational approach to sexual assault prevention should entail. Expert feedback was solicited from 15 individuals with experience in program evaluation and implementation, sexual assault prevention, and military culture. The assessment was then pilot tested with four military service academies. The final assessment consisted of 63 criteria that represent what right looks like in sexual assault and harassment prevention (Acosta et al., forthcoming). Thirty-one of these criteria addressed prevention at the academy level—i.e., system issues—and 32 criteria addressed the quality of specific prevention activities being implemented at MSAs. The academy-level criteria dovetail with DoD’s comprehensive Prevention Plan of Action, released in 2019, and the activity-level criteria closely follow the ten implementation best practices supported by the Getting To Outcomes[®] approach to program planning and evaluation.

These criteria formed the basis of the self-assessment guide, which provides detailed, step-by-step instructions for determining how an institution’s efforts align with best practices in sexual assault and harassment prevention and what can be done to improve areas for growth. This volume contains the appendixes to the guide. The guide itself, as well as a set of electronically fillable Word forms, can be found here: www.rand.org/pubs/tools/TLA746-3

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A. Technical Appendix

Development of the Self-Assessment Guide and Criteria

The self-assessment guide and best-practice criteria for university-based sexual assault and sexual harassment prevention is an adaptation of a similar assessment designed for use in a military context. The original assessment was developed using the structured RAND/UCLA Appropriateness Method, which consisted of a literature review and expert panel, to identify what a comprehensive organizational approach to sexual assault prevention should entail. To develop the assessment, Acosta et al., forthcoming, reviewed the U.S. Department of Defense's (DoD's) Prevention Plan of Action (PPoA; Office of the Under Secretary of Defense for Personnel and Readiness [OUSD P&R], 2019), the Readiness framework (Scaccia et al., 2015), the Getting To Outcomes[®] framework (Chinman, Imm, and Wandersman, 2004), and the Centers for Disease Control and Prevention's (CDC's) comprehensive campus dating violence prevention guidelines (Dills, Fowler, and Payne, 2016). Using the results of a literature review, we drafted a set of 62 criteria, which a 15-person expert review panel, chosen to provide a broad range of expertise, then vetted. Individuals on the panel provided significant expertise in prevention science (three panelists), risk behavior and behavioral science (three panelists), and implementation science (two panelists). In addition, four panelists provided expertise in military context and culture, and three were experts in program development for the prevention of sexual assault.

The panel members reviewed 62 criteria; based on their input, an additional criterion was added, for a total of 63 final criteria. Thirty-one of the criteria were designed to assess institutional-level issues related to a military service academy's (MSA's) ability to implement sexual assault prevention activities; 32 were designed to assess the quality of specific prevention programs. The institutional-level criteria were organized into domains using the PPoA framework (OUSD P&R, 2019); the activity-level criteria were organized by the steps of the Getting To Outcomes[®] framework (Chinman, Imm, and Wandersman, 2004). The criteria were then used during a pilot assessment designed to review the sexual assault and harassment prevention initiatives at three MSAs. The expert panel reviewed data collected during this pilot assessment and rated each academy's adherence to the academy- and activity-level criteria. These ratings provided the basis for several recommendations from the panel for improving sexual assault and harassment prevention at the MSAs in question.

After the expert panel used the criteria to evaluate the sexual assault and harassment prevention efforts at the three MSAs, Acosta et al., forthcoming, created a self-assessment guide to allow MSAs to review and rate their own prevention programs and efforts that the DoD Sexual Assault Prevention and Response Office then edited and released for use across DoD.

The guide takes users through a six-step process for assessing their prevention initiatives. The steps provide guidance on reviewing documentation from past prevention assessments, gathering information on current programs and policies, summarizing information, applying criteria ratings, and presenting findings to leadership.

Adaptation for Civilian Universities

Following the pilot assessment of the self-assessment guide at the MSAs, we adapted the self-assessment guide and criteria for the use of civilian institutions of higher education, which face similar issues related to sexual assault and harassment. We made the initial round of adaptations. Changes at this stage included updating language to be relevant and appropriate to civilian university settings; adding an initial assessment step (forming a working group and determining the scope of the assessment); and including more context, examples, and resources.

After making these initial adaptations, we sought feedback on the guide from individuals working in sexual assault and harassment prevention at civilian universities and colleges. This feedback further informed revisions to the university self-assessment guide and associated criteria.

Methods

We reviewed agendas from conferences on sexual violence prevention (e.g., the 2019 National Discussions on Sexual Assault and Sexual Harassment at America's Colleges, Universities, and Service Academies and several regional versions of this event from 2019 and 2020) to identify university-affiliated individuals working in sexual assault and harassment prevention. The individuals identified were then emailed to provide information about the project and assess interest. Of the 20 individuals contacted to provide feedback, ten individuals involved in sexual assault and harassment prevention at their universities responded. The ten participants represented nine institutions of higher education with diverse characteristics (size, public or private, research focus, etc.) and played various roles at their institutions: vice president of student life, assistant and associate directors of violence prevention centers, sexual misconduct officer, Title IX coordinator, health coordinator, prevention educator, and health educator.

The goals of the feedback process were to assess participants' opinions of the guide's general relevance and usability, how specific aspects of the guide might be improved (e.g., rating scales, timeline), the relevance of the university-level criteria, and which stakeholders might be useful to include in the assessment process. Because the activity-level criteria were developed using frameworks that are not military specific, receiving feedback on these criteria was not a main goal of the feedback process. Individuals were asked to review the self-assessment guide and university-level criteria. To offer additional context, participants were also provided with the prevention inventory form (Appendix B), university-level interview guide, activity-level interview guide, an example of using the university self-assessment guide, and recommended

resources for improving adherence to the criteria for sexual assault prevention. Participants provided written feedback on the guide and university-level criteria and then participated in an interview with the evaluation team. During the interview, participants were asked to provide more detail on their written feedback and to identify potential barriers to implementing the assessment, how it might relate to existing university processes, and how results might inform university decisionmaking.

After all participants completed the feedback process, we used a six-step, deductive, theory-driven qualitative approach to analyze the data (Braun and Clarke, 2006). Two of us reviewed all transcripts and then applied an initial set of codes to the data (Saldaña, 2009). These initial codes related to constructive feedback for improving the guide. The two team members then compared codes, discussed differences, and reached a mutual decision on which to apply. The resulting codes were organized into overarching themes, which were then refined by reviewing transcripts and determining how well the themes appeared to summarize the original data. Themes were then named and given descriptions, and participant quotes that best summarized each theme were selected. The analysis concluded with the selection of themes that best related to the original research goals and aims. Examples from the original data, in the form of participant quotes, were extracted to illustrate each theme.

Results and Recommendations

Overall, the results indicated that the self-assessment guide was a relevant, easy-to-use tool that could be used to help improve sexual assault and harassment prevention at civilian universities. Participants appreciated the concise and comprehensive nature of the guide and its emphasis on collaboration across institutional areas and organizational levels. Feedback on the university-level criteria suggested that each criterion had relevance to a university setting.

In addition to providing positive feedback, participants identified several potential barriers to adopting the assessment and provided recommendations for improving the guide and criteria. Recommendations that more than one participant made were considered to be primary. Staff time and capacity limitations and potential lack of buy-in from university administration were identified as possible barriers to adoption of the self-assessment. Primary recommendations for increasing the likelihood of adoption included extending the suggested timeline for completion, including guidance about how the assessment process might be modified to be applicable to institutions with varying characteristics (e.g., smaller institutions), and describing how the assessment might be related to university compliance requirements. Another primary recommendation was to include additional guidance about how to write the final report and communicate results to university administrators and the broader university community because this might increase adoption. Several primary recommendations were broader, including adding guidance about how to include issues of diversity, equity, and inclusion in the assessment and creating a system that would allow universities to benchmark their assessment results against the

results of other institutions. Finally, participants provided recommendations for improving specific steps of the guide. Primary recommendations in this area included giving clearer guidance about how often to conduct the assessment and about how to interpret criteria ratings, prioritize areas for improvement, and generate and implement action steps. Participants also suggested that the guide provide information about alternative formats for disseminating assessment results, such as infographics.

Participants also recommended ways to improve existing criteria and offered ideas for new criteria and included all dimensions of the criteria. In the leadership domain, participants suggested adding criteria assessing whether university leadership has a vision or written statement regarding sexual assault and harassment prevention, its knowledge of public health issues, and its openness to learning about issues related to sexual assault and harassment. With regard to existing criteria, participants expressed some concern about the extent to which prevention staff could be held accountable for the success of their campuses' sexual assault and harassment prevention efforts; participants encouraged revising the accountability criteria to balance accountability with realistic expectations about what can be achieved. Additionally, participant feedback indicated that enforcement of policies related to sexual assault and harassment is typically outside the role of university prevention staff. One participant also indicated that the criteria for rewards seemed inappropriate to a university setting.

Participant suggestions for the collaborative relationship domain included adding criteria that would assess the level of collaboration with students, collaboration with local law enforcement, and faculty and staff knowledge of local community services related to sexual assault and harassment prevention and response. In the comprehensive approach domain, participants suggested adding criteria assessing protective factors, awareness education (separately from prevention education), and the sociocultural relevance of programming for students from marginalized communities (e.g., Black or LGBTQ-community students). In the data domain, participants suggested adding criteria assessing the level to which campus climate surveys and student feedback are collected and considered and whether both protective and risk factors are measured. One participant suggested that the existing policies criterion be revised to account for policies that are neutral in nature and neither further nor inhibit prevention efforts.

Other suggestions included adding criteria assessing whether evaluation data were used to improve programming (continuous evaluation domain) and whether leadership and staff act as positive role models to send consistent messaging about sexual assault and harassment prevention (workforce domain). One participant expressed concern about two of the criteria in the workforce domain, indicating that prevention staff are typically removed from policies or conversations about workforce retention. A participant also suggested clarifying whether the policy criteria referred only to professional development policies or whether the criteria were broader in scope. Additionally, participants suggested defining several terms used in the criteria (e.g., collaboration, rapid results) to increase clarity and encourage shared understanding among working groups.

Revisions to the Guide and Criteria

The participant feedback and recommendations led to a number of revisions to the guide and criteria that were intended to increase its relevance in university settings, encourage adoption, and provide clarity. Prior to making revisions, we discussed each participant suggestion with experts involved in the creation of the original guide and criteria. This group discussed the relevance of each recommendation, how it might improve the guide, and in what settings it might be relevant. Recommendations were discussed until a consensus was reached; revisions were then based on the recommendations that were deemed to be relevant across a variety of institutions and within the scope of the current project. Revisions to the guide are listed in the box.

Revisions to the University Guide

To increase the likelihood of guide adoption

- The suggested timeline was extended.
- Guidance about how the assessment might be modified for different institutions was added.
- Language was added encouraging working groups to consider how the assessment might relate to their existing compliance requirements.

Broad or conceptual improvements

- Information was added about how working groups might wish to consider issues of diversity, equity, and inclusion within the assessment.

Improvements of specific assessment steps

- A suggested interval for assessment was included.
- Additional detail was provided about which stakeholders might be useful to include in various steps of the assessment.
- A guidance document was created to provide examples of how the final report might be structured and written.
- Greater detail was provided on how to prioritize recommendations for improvement and how to plan for and implement recommendations resulting from the self-assessment.
- A suggestion was added that working groups share the assessment results with the broader university community, as appropriate.

Other revisions and edits

- A definition sheet was added to clarify terms used in the guide and criteria (e.g., *administrator*, *prevention staff*, *rapid results*, *socioecological model*, *risk*, and *protective factors*).

We and experts also addressed recommendations for adding or revising criteria, discussing and evaluating each in terms of its applicability across institutions, measurability, and how similar to or different from existing criteria it was. Recommendations were discussed until consensus was reached, then the group decided which criteria to add or revise. The next box lists the revisions and additions to the criteria that the group made.

Revisions and Additions to University-Level Criteria

Leadership

A criterion was added to assess the existence of a mission or vision statement related to prevention of sexual assault and harassment.

Workforce

The policy criterion was renamed to specify that it specifically targets policies related to staff professional development.

Data

The student feedback criterion was revised to refer to gathering student feedback on program content and program delivery.

Comprehensive approach

A criterion was added to evaluate the university's distinction between awareness education and prevention education and how the university supports both areas.

Quality implementation

The activity discontinuation criterion was revised to specify that prevention staff should have a systematic method for making decisions about program discontinuation.

While most recommendations gathered through participant feedback were implemented, especially those from more than one participant, several were not. One recommendation that several participants suggested but that was not implemented was to create a way for universities to compare their assessment results with those of other institutions, as a form of benchmarking. While this idea has potential to be useful for universities, it was beyond the scope of the current efforts.

Limitations

The process used to adapt the self-assessment guide and criteria for the use of civilian universities has several limitations. Although the participants who provided feedback represented institutions of various sizes and types and came from different roles in sexual assault and harassment prevention, a different participant sample may have provided different feedback, resulting in different recommendations and revisions. Additionally, not all participant recommendations were chosen for implementation. A different group of authors may have made different decisions about which recommendations provided the most value for guide users.

B. Prevention Inventory

A prevention inventory should be completed for each activity that is being reported. You can identify each data form by entering your university name and the name of the program or activity. For example, if your university was named “State University” and if the program you were reporting on was called “Green Dot,” you would enter “StateUniversity_GreenDot” into the first data field.

A Microsoft Word version of the form, which can be filled in electronically, can be found at www.rand.org/pubs/tools/TLA746-3

Prevention Inventory Form

Please complete this form for each activity that is being reported. Identify the form for each activity by entering your university name and the name of the program or activity. For example, if your university were named “State University” and if the program you were reporting on was called “Green Dot,” you would enter “StateUniversity_GreenDot” into the first data field.

Activity name:	Enter text here
Briefly describe the prevention activity:	Enter text here
Attention area:	<input type="checkbox"/> Promote responsible alcohol choices <input type="checkbox"/> Reinvigorate the prevention of sexual assault <input type="checkbox"/> Enhance a culture of respect <input type="checkbox"/> Improve reporting of sexual assault and sexual harassment <input type="checkbox"/> Other, please specify: _____
Activity type:	<input type="checkbox"/> Social norms <input type="checkbox"/> Alcohol misuse <input type="checkbox"/> Women empowerment <input type="checkbox"/> Bystander intervention <input type="checkbox"/> Male prevention perpetration <input type="checkbox"/> Healthy relationships <input type="checkbox"/> Character development <input type="checkbox"/> Other, please specify: _____
Describe your needs assessment—how did you determine that the risk/protective factor(s) were associated with sexual assault for your target audience?	Enter text here
Describe the activity’s goals. Goals are broad statements about what the activity will accomplish and are less specific or precise than concrete benchmarks (e.g., this activity will increase students’ awareness of sexual assault prevention).	Enter text here
Describe the activity’s target population (i.e., who and how many will receive the activity each time it is completed in its entirety).	Who is the target population? How many will receive the activity?
What risk or protective factor(s) does the activity address? These factors can help identify the activity’s measurable benchmarks but may also be considered separate factors (e.g., participation in Greek life may be considered a risk factor but not a benchmark).	Risk factors: Enter text here. Protective factors: Enter text here.
Describe the activity’s concrete benchmarks (i.e., the changes that are expected in the target population). Benchmarks are more specific than an activity’s goals and are directly measurable (e.g., this activity will increase students’ knowledge of rates of sexual assault on campus and definitions of consent).	Enter text here.

Describe the level of evidence rating using the CDC's levels of evidence.	<input type="checkbox"/> Well-supported <input type="checkbox"/> Supported <input type="checkbox"/> Promising <input type="checkbox"/> Undetermined <input type="checkbox"/> Unsupported <input type="checkbox"/> Harmful <input type="checkbox"/> Don't know
What level of the social-ecological model does the activity address?	<input type="checkbox"/> Individual <input type="checkbox"/> Relationship <input type="checkbox"/> Community <input type="checkbox"/> Societal
When did implementation of the activity begin?	Enter text here.
How many times has the activity been done in its entirety throughout its history of implementation on your campus? This amount includes each time the activity was completed with a different group of students, even if the groups completed the activity at the same time (e.g., a bystander intervention training completed with two separate groups of students concurrently would be considered as two instances of the activity).	Enter text here.
Is the activity slated to continue for the foreseeable future?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Describe the dosage (i.e., duration, frequency, and amount) of the activity for the target population. Note that continuous activities, such as a media campaign, would have a constant and ongoing dosage.	Duration, frequency, amount
How many people did the activity reach? How do you know?	Number of people reached
Have you done a process evaluation? That would involve measuring implementation, including demographics of target population, satisfaction, and fidelity. If yes, what have you measured?	<input type="checkbox"/> No <input type="checkbox"/> Yes: What have you measured? Enter text here.
Have you done any outcome evaluations? If yes, what have you done to measure changes in the risk(s), protective factor(s), and outcomes the activity was intended to address?	<input type="checkbox"/> No <input type="checkbox"/> Yes: What have you done? Enter text here.
Have you engaged in quality improvement (i.e., used data to improve the activity)? If yes, what have you done?	<input type="checkbox"/> No <input type="checkbox"/> Yes: What have you done? Enter text here.

C. University-Level Interview Guide

This interview is about university prevention efforts: A facilitator should ask the questions, and a notetaker should record the responses, as well as identity, date, and location information. A Microsoft Word version of the form that can be completed online is available here: www.rand.org/pubs/tools/TLA746-3

Person Interviewed

Date/Time

Location

Interviewed by

Notetaker

Human Resources: Administration

1. How, if at all, do administrators (or you) support evidence-based prevention efforts at [university]? How, if at all, is evidence used to inform decisions?
2. How, if at all, do administrators (or you) set and enforce expectations for the prevention workforce and subordinate leaders at [university]?
3. How, if at all, do administrators work together among and across all levels and departments to prevent sexual assault and harassment? [organizational structure]

Human Resources: Prevention Staff

4. In your view, are prevention staff and those who implement prevention activities able to devote sufficient time to the prevention of sexual assault and harassment at the university? What kind of training are they given, and how often?
5. What, if any, policies related to prevention staff are in place?
6. What, if any, kinds of supports and resources are available to prevention staff? How are available supports and resources accessed?
7. What, if any, policies or practices are in place to address such prevention staff issues as turnover and morale?
8. What, if any, measures are in place to monitor prevention staff morale?

Collaborative Relationships

9. How, if at all, do you coordinate across prevention staff, administrators, other staff, and students at [university]?
10. How, if at all, do you work with other internal and external partners on sexual assault and harassment prevention?

Infrastructure: Data

11. How, if at all, do you identify contributing factors for university sexual assault and harassment, and what is done with that information?
12. How, if at all, do you bring together data related to sexual assault and harassment prevention from across the multiple systems that collect this data?
13. How, if at all, are student opinions incorporated into [university's] sexual assault and harassment prevention strategy?

Infrastructure: Resources

14. How, if at all, are sexual assault and harassment prevention activities, staffing, evaluation, etc., funded?
15. How, if at all, is professional development supported?
16. In your opinion, are there sufficient resources for sexual assault and harassment prevention implementation, evaluation, adaptation, and staffing? Why or why not?
17. What, if any, plans are in place to guide the distribution or sustainability of resources?

Comprehensive Approach

18. What risk and protective factors or other contributing factors does your sexual assault and harassment prevention strategy target? Are different approaches needed for different audiences based on contributing factors? Why or why not?
19. What kinds of outcomes will the prevention activities in your strategy produce (e.g., changes in efficacy, skills, attitudes, behaviors)?
20. Can you describe who implements your prevention activities, how often, and for which populations?
21. How, if at all, do your prevention activities help build interpersonal effectiveness?
22. How, if at all, do you maintain consistent prevention messaging across [university]?
23. How, if at all, do you monitor messages and/or training to determine whether message fatigue is occurring?

Continuous Evaluation

24. How, if at all, is activity implementation monitored? If implementation is monitored, who is responsible for this?

Quality Implementation

25. How, if at all, are new prevention activities approached and evaluated?
26. How, if at all, are decisions made to stop implementing prevention activities?
27. How, if at all, do administrators set expectations related to progress of prevention activities? If this occurs, how often?

D. Activity-Level Interview Guide

This interview is about activity-level prevention efforts: A facilitator should ask the questions, and a notetaker should record the responses, as well as identity, date, location information and the name of the activity. A Microsoft Word version of the form that can be completed online is available here: www.rand.org/pubs/tools/TLA746-3

Person Interviewed

Date/Time

Location

Interviewed by

Notetaker

Specific Prevention Activity

Factors That Contribute to Sexual Assault

Understanding the Problem: Needs and Resources Assessment

1. How was this prevention activity selected? Which specific need does your prevention activity address?
2. What sources of information were used to determine the needs (that led to selection of the activity)? For example, what data were used? What informal sources were used?

Comprehensive Approach to Prevention

Setting Goals and Desired Outcomes

3. What are the goals for the activity?
4. For each of the goals, what are the desired outcomes? [what will change (e.g., certain risk factors, attitudes); for whom (e.g., first-year students); by how much (e.g., decreased approval of peer drinking by 10 percent); by when (e.g., by the end of your program, at a six-month follow-up)]

Choosing Evidence-Informed Activities

5. What information was used to select the activity? What, if any, outreach was conducted in activity selection (for example, to assess unique needs of target populations)?
6. Which, if any, of the [stakeholders] at your university were involved when making the decision to implement the activity? Why were these specific stakeholders included in this decision?

Ensuring Activity Fit

7. How does the activity fit with the population? Consider such characteristics as age and gender; any special needs; and such specifics of your university as mission, space, and available time.
8. What, if any, changes were made to improve the fit of the activity?

Ensuring Capacity to Carry Out Activity

9. *Before* implementing the activity, what, if anything, was done to evaluate the capacity that would be needed? What capacity was available to carry out the activity (e.g., human capacities, administrator support, resources, partnerships)?
10. What, if any, actions were taken based on the assessment of capacity? If gaps in capacities were filled, how was this achieved?

Quality Implementation

Ensuring Adequate Motivation for the Activity

11. *Before* implementing the activity, what, if any, assessment was done to determine whether there was sufficient motivation to conduct it (e.g., is there a champion; is the activity a priority)? How, if at all, did you assess the motivation or supportive climate?

Planning Implementation

12. Was a work plan developed to guide the implementation of this activity? How did the university approach planning? What types of activities were included in the planning process (e.g., administrative tasks, policies and procedures, implementation, evaluation)?
13. Is there anything else you want to share about planning or the way the activity was selected (or the activity itself)?

Continuous Evaluation

Conducting a Process Evaluation

14. Tell me about how, if at all, implementation is or was monitored (e.g., dosage, reach, quality).

Conducting an Outcome Evaluation

15. What type of outcome data did you collect or do you plan to collect to see whether the activity was or is effective? Examples of outcome data could include assessment of skills facilitating bystander intervention, information on culture and norms from campus climate surveys, and number of reported incidents of sexual assault.

Carrying Out Quality Improvement

16. How often are data reviewed for improvement purposes? Who was or is involved in this type of review? For example, are other staff members involved? If yes, what personnel at the university are involved?
17. Do you decide, or give input into, whether the university will keep doing the activity?

Ensuring Sustainability

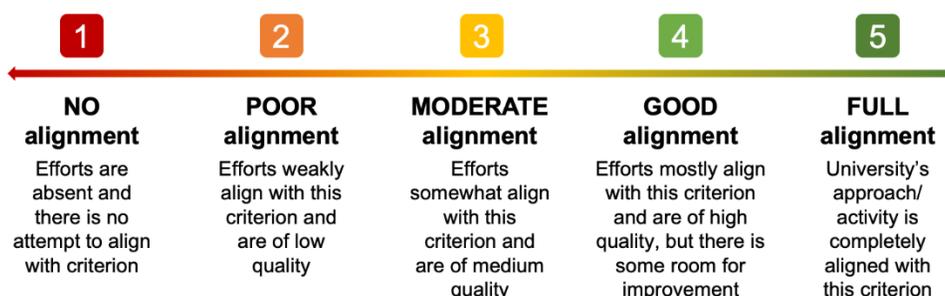
18. Are there plans for continuing the activity? If so, what are the plans? How will you be involved?

E. University Criteria

The 33 criteria described in this appendix address various aspects of a university’s organizational capacity as it relates to prevention of sexual assault and harassment. High levels of organizational capacity—in this context, university-level capacity—increase the likelihood that a university provides a supportive environment for the planning, implementation, and evaluation of evidence-based programming dedicated to reducing sexual assault and harassment. Appendix C provides stakeholder questions designed to assess for these areas of organizational- or university-level capacity.

When applying these criteria, the university working group should use the 1–5 scale shown in Figure E.1 to rate its institution’s level of alignment with each criterion based on the summary documents compiled describing the institution’s capacity, policies, and practices related to sexual assault and harassment prevention.

Figure E.1. Likert Scale for Rating University Criteria



An institution’s approach to sexual assault and harassment prevention might differ significantly by activity (e.g., differential application and enforcement of policies, differential funding). In this case, raters should select the rating that best “averages” the two approaches (e.g., if the university’s approach to one program reflects full alignment [5] and to another reflects only poor alignment [2], raters would assign a rating of 3.5).

Table E.1 presents and describes the criteria, grouped by dimension. In each table, the first column names the criteria, and the other three columns describe three degrees of alignment with each criterion. If the university’s approach is completely aligned with a given criterion, the rating would be 5 for *full alignment* (Highest Alignment column). If the university’s efforts align with the criterion and are of medium quality, the rating would be 3 for *moderate alignment* (next column). Finally, if efforts are absent in the area and the university has made no attempt to align with the criterion, the rating would be 1 for *no alignment* (Lowest Alignment column).

Table E.1. University Criteria, by Prevention Plan of Action Dimension

Dimension, Criterion	Description of Alignment with Criterion		
	Highest Alignment	Moderate Alignment	Lowest Alignment
Leadership			
Evidence-informed decisions	1. University administrators consistently use available research evidence to inform decisions. Administrators rely on available evidence when discussing prevention topics with staff and approving initiatives.	University administrators somewhat consistently use research evidence to inform decisions, discussions, and approval of initiatives.	University administrators inconsistently use research evidence to inform decisions or when discussing or approving prevention initiatives.
Collaboration	2. University administrators at all levels consistently work together when planning prevention.	University administrators at all levels somewhat consistently work together when planning prevention.	University administrators at all levels work together inconsistently or not at all when planning prevention.
Documentation	3. University administrators routinely ask for documentation that shows how prevention staff are implementing and evaluating prevention practices (e.g., process and outcome evaluation results, implementation plans, logic models, etc.), and administrators consistently use that documentation to hold prevention staff accountable for using and evaluating evidence-informed prevention practices.	University administrators sometimes ask for documentation and somewhat consistently use that documentation to hold prevention staff accountable for implementation and evaluation of prevention practices.	University administrators do not ask for documentation to hold prevention staff accountable for implementation and evaluation of prevention practices.
Accountability	4. University administrators hold prevention staff accountable for implementing best practices in sexual assault and harassment prevention.	University administrators occasionally hold prevention staff accountable for implementing best practices in sexual assault and harassment prevention.	University administrators do not hold prevention staff accountable for implementing best practices in sexual assault and harassment prevention.
Rewards	5. University administrators reward healthy climates and prosocial behaviors among students and the university community.	University administrators occasionally reward healthy climates and prosocial behaviors among students and the university community.	University administrators do not reward healthy climates and prosocial behaviors among students and the university community.
Mission or vision statement	6. University administrators have an intentional vision for sexual assault and harassment prevention, as illustrated by a written and/or published mission and vision statement, and revisit this statement regularly.	University administrators have an intentional vision for sexual assault and harassment prevention, as illustrated by a written and/or published mission and vision statement, but this statement may be outdated or not regularly updated.	University administrators do not have a written and/or published mission and vision statement for sexual assault and harassment prevention.

Dimension, Criterion	Description of Alignment with Criterion		
	Highest Alignment	Moderate Alignment	Lowest Alignment
Workforce			
Staff training	7. Enough trained and dedicated prevention staff are available to maintain progress toward the major goals of the comprehensive prevention plan. Sufficient training means that staff have attended training or conferences on the state of prevention and sexual assault and harassment in the past one to two years. Trainings are conducted by qualified experts, and trainings are reviewed for quality.	There are some, but not enough, recently trained prevention staff (i.e., attended an expert-led training in the past one to two years) who can maintain progress toward the major goals of the comprehensive prevention plan.	There are no recently trained prevention staff (i.e., never attended a training, or the training occurred more than two years ago) who can maintain progress toward the major goals of the comprehensive prevention plan.
Professional development policies	8. Administrative policies exist and are consistently enforced to provide annual support for professional development.	Administrative policies supporting professional development exist but are only somewhat consistently enforced.	Administrative policies supporting professional development do not exist or are rarely enforced.
Communication	9. Formal mechanisms exist to allow routine bidirectional exchange of feedback and information between prevention staff and university administration (community of practice group, conference calls among staff and administrators, etc.).	Formal mechanisms are only sometimes used for communication between prevention staff and administrators.	Formal mechanisms do not exist to connect staff and administrators.
Resources	10. Prevention staff consistently receive the support necessary to facilitate comprehensive prevention (time, staff, training, and other relevant resources).	Prevention staff somewhat consistently receive the support necessary to facilitate comprehensive prevention.	Prevention staff inconsistently receive the support necessary to facilitate comprehensive prevention or receive no support.
Retention	11. University administrators have a comprehensive plan to combat prevention staff turnover that includes sustaining existing staff and training new staff.	There is a moderately comprehensive plan to combat prevention staff turnover (e.g., some efforts to sustain existing staff and some training for new staff).	There is no comprehensive plan to combat prevention staff turnover.
Cohesion and reliability	12. Prevention staff have a sense of common purpose related to their sexual assault and harassment prevention efforts, and administration, students, and the university community have confidence in the staff's work.	Prevention staff have a modest sense of common purpose related to their sexual assault and harassment efforts, but administration, students, and the university community are only somewhat confident in the staff's work.	Prevention staff have a mixed sense of purpose related to their sexual assault and harassment efforts, and administration, students, and the university community are not confident in the staff's work.

Dimension, Criterion	Description of Alignment with Criterion		
	Highest Alignment	Moderate Alignment	Lowest Alignment
Collaboration			
Prevention team	13. A team devoted to the prevention of sexual assault and harassment exists, and the team consists of stakeholders (leaders, staff, and students from multiple levels and departments, including sexual assault and sexual harassment and other related prevention efforts), and there is some mechanism to ensure that meetings are productive and useful for prevention efforts (e.g., an agreement outlining the group's responsibilities).	There is a team devoted to the prevention of sexual assault and harassment, but the team is made up of similar stakeholders from the same level or departments and few mechanisms are in place to ensure meetings are productive and useful.	There is no prevention team devoted to the prevention of sexual assault and harassment.
Partnerships	14. Prevention staff have consistent working partnerships internal to the university (i.e., with response and referral staff) and external to the university (i.e., with experts from other institutions).	Prevention staff have some necessary partnerships to improve practice.	Prevention staff do not have any partnerships to improve practice.
Data			
Risk factors	15. The university has identified key factors contributing to campus sexual assault and harassment across the full population, and program evaluations regularly assess for the aforementioned factors.	The university has identified some key factors contributing to campus sexual assault and harassment across the population, and these are only occasionally evaluated.	The university has not identified factors contributing to campus sexual assault and harassment in the population.
Policies	16. The university has no policies that impede comprehensive evaluation of sexual assault and harassment prevention efforts, including assessing perpetration and victimization. The university has at least one policy that encourages evaluation.	The university has an equal mix of policies that impede or encourage evaluation of sexual assault and harassment prevention efforts.	The university has only policies that impede evaluation of sexual assault and harassment prevention efforts.
Synthesis and presentation	17. Prevention-related data, from across the multiple collection systems, are regularly synthesized and presented in a clear way for administrators to use to inform appropriate action.	Prevention-related data are occasionally synthesized for presentation to administrators.	Prevention-related data are not synthesized for presentation to administrators.
Student feedback	18. Students are regularly asked to provide input about prevention programming and program content that accords with their level of	Students are occasionally asked to provide input about prevention programming and program content, which is sometimes used	Students are never asked to provide input about prevention programming and content.

Dimension, Criterion	Description of Alignment with Criterion		
	Highest Alignment	Moderate Alignment	Lowest Alignment
	expertise (e.g., preferred timing of classes, mode of instruction), and administrators and prevention staff often take student opinions into account when making decisions.	by administrators and staff for making decisions.	
Resources			
Budget	19. Sexual assault and harassment prevention efforts have a dedicated budget for staffing, adaptation, implementation, evaluation, and sustainability planning.	There is a budget for sexual assault and harassment prevention, but it covers only some of the necessary resources (i.e., three of the following: staffing, adaptation, implementation, evaluation, and sustainability planning).	There is no dedicated budget for sexual assault and harassment prevention.
Training	20. There are dedicated resources to regularly (at least once a year) fund prevention staffs' professional development (e.g., conferences, courses) and training (or booster training) on all prevention activities being implemented.	There are resources to fund occasional prevention staff professional development and training on prevention activities being implemented.	There are no dedicated resources for prevention staff professional development or training on the prevention activities being implemented.
Sustainability and prioritization	21. The university has clear plans for sustaining the funding and resources of its activities and for how it prioritizes and distributes resources, and the plans are regularly followed.	The university has a somewhat clear plan for sustaining the funding and resources of its activities and for prioritizing and distributing resources, and the plans are occasionally followed.	The university does not have clear plans for sustaining or prioritizing funding and resources for its activities.
Approach			
Prevention strategy	22. The university's prevention strategy has been systematically chosen to target mutable risk factors (e.g., attitudes about sexual assault and harassment) and protective factors (e.g., self-defense skills) and means to engage in sexual assault and harassment (e.g., alcohol use).The university should prioritize the factors that the prevention strategy targets (by using existing data, interviews with students, etc.) to ensure that the approach is cohesive (e.g., efforts selected are complementary, not duplicative).	The university's prevention strategy targets only some of the factors that contribute to sexual assault and harassment (at least two of the following: mutable risk factors, protective factors, and means to engage in sexual assault and harassment), and the university somewhat prioritizes the factors.	The university's prevention strategy does not target any of the factors that contribute to sexual assault and harassment.
Capacities	23. The university's approach targets a variety of capacities: efficacy (confidence and skills necessary to intervene) and skills (sexual	The university's approach targets only half of the capacities of interest (any two of the	The university's approach does not target any of the capacities of interest.

Dimension, Criterion	Description of Alignment with Criterion		
	Highest Alignment	Moderate Alignment	Lowest Alignment
	negotiation, sexual assertiveness) and attitudes (sexist comments, victim blaming) and behaviors (binge drinking, sexual harassment).	following: efficacy, skills, attitudes, and behaviors).	
Socioecological model	24. The university's approach targets all levels of the social-ecological model: individual (knowledge, attitudes, skills), relationship (social networks, unit), community (installation, environment), and society or campus (culture, norms, values).	The university's approach targets only some of the levels of the social-ecological model (any two of the following: individual, relationship, community, and society or campus levels).	The university's approach targets only a single level of the social-ecological model.
Quality implementation	25. All effective sexual assault and harassment prevention approaches are implemented with quality by using a format appropriate for the target audience (e.g., age, gender) and being professionally facilitated and by occurring over the long term, with repeated interventions (i.e., booster sessions), and using interactive techniques, such as peer discussion groups and role playing, to allow active involvement in learning about prevention and practicing prevention skills.	Effective sexual assault and harassment prevention approaches are implemented with some quality (any two of the following: uses an appropriate format for the target audience, is professionally facilitated, occurs over the long term, and uses interactive techniques).	Effective sexual assault and harassment prevention approaches are not implemented with quality.
Messaging	26. The university's sexual assault and harassment prevention approaches always present consistent messages in each setting.	The university's sexual assault and harassment prevention approaches present somewhat consistent messages across settings.	The university's sexual assault and harassment prevention approaches present inconsistent messages across settings.
Evidence-based activities	27. All activities are based on the best available evidence.	Some activities are based on the best available evidence.	No activity is based on the best available evidence.
Prevention and awareness education	28. The institution has clearly distinguished prevention education from awareness education and incorporates both into its comprehensive prevention approach. The institution funds and implements several prevention education programs designed to increase students' sexual assault and harassment prevention knowledge, attitudes, and skills, as well as awareness-raising events and programs.	The institution funds and implements at least one prevention education program designed to increase students' sexual assault and harassment prevention knowledge, attitudes, and skills, as well as awareness-raising events and programs.	The institution funds and implements only awareness raising events or does not fund these efforts.

Dimension, Criterion	Description of Alignment with Criterion		
	Highest Alignment	Moderate Alignment	Lowest Alignment
Implementation			
Message monitoring	29. The university's comprehensive prevention approach includes a plan to regularly monitor messages (at least twice a year) for oversaturation that can lead to students' negative perceptions.	The university's comprehensive prevention approach includes a plan to occasionally monitor messages for oversaturation.	The university's comprehensive prevention approach does not include a plan to monitor messages for oversaturation.
Activity fidelity	30. University administrators and prevention staff have an established, regular process for meeting (at least quarterly) to evaluate the extent to which delivery of programs and interventions adheres to the original program protocol.	University administrators and prevention staff have a process for meeting occasionally to evaluate the extent to which delivery of programs and interventions adheres to the original program protocol.	University administrators and prevention staff do not have a process for meeting occasionally to evaluate the extent to which delivery of programs and interventions adheres to the original program protocol.
Effectiveness	31. Every time a new prevention activity is implemented, a systematic evaluation is carried out to determine the activity's effectiveness.	Occasionally when a new prevention activity is implemented, a systematic evaluation is carried out to determine the activity's effectiveness.	New prevention activities that are implemented are not evaluated for effectiveness.
Discontinuation	32. Prevention staff have a systematic way to decide when to discontinue activities. Prevention activities have an established threshold of effectiveness that, when not met, helps determine whether to pause or stop an activity. Prevention activities are always paused or stopped when they are found to drive negative perceptions or be ineffective.	Prevention activities are occasionally paused or stopped when they are found to drive negative perceptions or to be ineffective.	Prevention activities found to drive negative perceptions or to be ineffective are allowed to continue.
Evaluation			
Results expectations	33. University administrators regularly set appropriate and manageable expectations for rapid results.	University administrators occasionally set appropriate and manageable expectations for rapid results.	University administrators do not set expectations for producing results.

F. Activity Criteria

The 32 criteria described in this appendix address aspects of prevention activities that should be considered when designing, implementing, and evaluating a comprehensive approach to sexual assault and harassment prevention. Attending to such activity features as programmatic goals, staff motivation to implement the activity, and outcome evaluation increase the likelihood that prevention programming will be evidence based, implemented with fidelity, and improved over time. Assessing these activity-level features should occur alongside the use of the prevention inventory form (Appendix B) and the activity-level interview guide (Appendix D).

When applying these criteria, the university working group should use the 1 to 5 scale shown in Figure F.1 to rate each activity’s level of alignment with each criterion, based on the summary documents compiled describing the institution’s specific prevention activities.

Figure F.1. Likert Scale for Activity Criteria

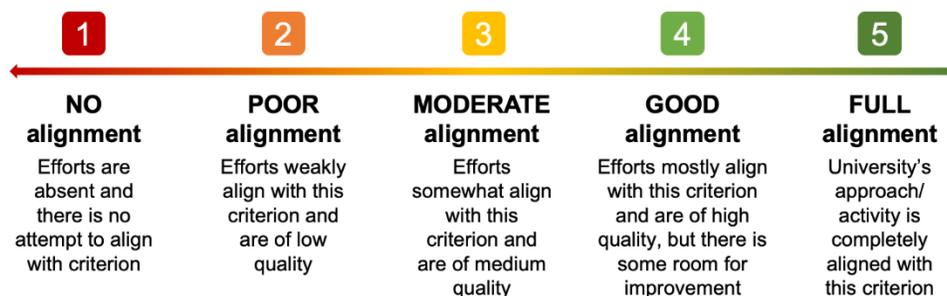


Table F.1 presents and describes the criteria, grouped by dimension. In each table, the first column names the criteria, and the other three columns describe three degrees of alignment with each criterion. If the university’s approach is completely aligned with a given criterion, the rating would be 5 for *full alignment* (Highest Alignment column). If the university’s efforts align with the criterion and are of medium quality, the rating would be 3 for *moderate alignment* (next column). Finally, if efforts are absent in the area and the university has made no attempt to align with the criterion, the rating would be 1 for *no alignment* (Lowest Alignment column).

Table F.1. Prevention Plan of Action Dimension: Understanding the Problem

Topic, Criterion	Description of Alignment with Criterion		
	Highest Alignment	Moderate Alignment	Lowest Alignment
Needs and resources assessment			
Data-driven approach	1. Data, supplemented by informal sources, were used to determine the specific needs or problems when selecting the activity.	Some data and informal sources were used to determine the specific needs or problems when selecting the activity.	Neither data nor informal sources were used to determine the specific needs or problems when selecting the activity.
Priorities	2. The activity addresses high-priority or substantial prevention needs at the university.	Activity addresses moderate-priority prevention needs at the university.	Activity addresses low-priority prevention needs at the university or is unrelated to needs.

Table F.2. Prevention Plan of Action Dimension: Comprehensive Approach to Prevention

Topic, Criterion	Description of Alignment with Criterion		
	Highest Alignment	Moderate Alignment	Lowest Alignment
Goals and desired outcomes			
Documentation	3. Activity goals and specific, measurable, attainable, relevant, timebound (SMART) desired outcomes (i.e., answering the questions of what, when, who, and how much) are clearly written.	Written activity goals and desired outcomes are only somewhat clear.	Written activity goals and desired outcomes are not clear.
Evidence-informed link	4. There is a logical link between activity goals and desired outcomes, and that link is evidence-informed.	Link between activity goals and desired outcomes is somewhat logical and partly informed by evidence.	Link between activity goals and desired outcomes is neither logical nor informed by evidence.
Activity outcome	5. Each activity has at least one desired outcome.	Half of activities have at least one desired outcome.	No activity has a desired outcome.
Choosing evidence-informed activities			
Evidence-informed approach	6. The activity was chosen after systematically considering the available research evidence; the needs of the target populations, with a consideration of population diversity and the unique needs of individuals with cross-cutting	Activity was chosen after considering only some relevant information (any two of the following: research evidence, population needs, university goals and outcomes, stakeholder opinions).	Activity selection did not consider any relevant information (i.e., none of the following: research evidence, population needs, university goals and outcomes, stakeholder opinions).

Topic, Criterion	Description of Alignment with Criterion		
	Highest Alignment	Moderate Alignment	Lowest Alignment
	identities (e.g., racial minorities who are also sexual minorities); university goals and desired outcomes; and the opinions of all key stakeholders involved.		
Fit			
Activity and university	7. The activity was chosen after <ol style="list-style-type: none"> a. assessing the fit between the activity and the population at the university, including consideration of population diversity and cross-cutting identities (e.g., racial minorities who are also sexual minorities), the university culture, and the surrounding community b. identifying evidence that demonstrates the activity is well suited to this environment c. if needed, addressing problem areas identified in assessing fit (prior to activity initiation and after evaluation). 	Activity was chosen based on partial evidence of fit with the university (i.e., incomplete fit assessment and limited evidence of environmental suitability). Incomplete actions were taken to address problem fit areas.	Activity selection was not based on any evidence of fit with the university.
Adaptations	8. Adaptations made to the activity did not change the active ingredients that made it effective.	Adaptations made to the activity changed some of the active ingredients that made it effective.	Adaptations made to the activity changed all the active ingredients that made it effective.
Capacity			
Assessment	9. The activity was chosen after thoroughly assessing capacity in four areas: prevention workforce, leadership, collaboration, and infrastructure.	Activity was chosen after assessing only half of the capacity areas (any two of the following: prevention workforce, leadership, collaboration, and infrastructure).	Activity selection was not based on any capacity assessment.
Limitations	10. Actions were taken to address any capacity limitations or shortcomings identified during the activity capacity assessment.	Actions were taken to address only some capacity limitations or shortcomings identified during the activity capacity assessment.	No actions were taken to address the capacity limitations or shortcomings identified in the activity capacity assessment.

Table F.3. Prevention Plan of Action Dimension: Quality Implementation

Topic, Criterion	Description of Alignment with Criterion		
	Highest Alignment	Moderate Alignment	Lowest Alignment
Planning			
Work plan development	11. A work plan for the activity is complete. This means that the plan addresses specific actions to be taken, who will do them, and when in seven key areas: administration, policies and procedures, facilitation, location and materials, recruitment and retention, implementation, and evaluation.	A work plan for the activity addresses specific actions for only some (i.e., 3–4) of the seven key areas.	There is no work plan for the activity.
Work plan use	12. Staff responsible for the activity very often refer back to the work plan.	Staff responsible for the activity occasionally refer back to the work plan.	Staff responsible for the activity never refer back to the work plan.
Work plan updates	13. The work plan for the activity is updated with any changes, if needed.	The work plan for the activity is occasionally updated with any changes.	The work plan is never updated.
Motivation			
Relative advantage	14. There is evidence that the staff responsible for the activity value it over other activities or that the university took steps to demonstrate the relative advantage.	There is moderate evidence that the activity has a relative advantage over other activities.	There is no evidence that the activity has a relative advantage over other activities.
Compatibility	15. There is evidence that the university considered issues related to compatibility, such as reassigning job responsibilities to help those responsible for the activity and ensuring the people with influence are involved in planning.	There is moderate evidence that the university considered issues of compatibility.	There is no evidence that the university considered issues of compatibility.
Complexity	16. There is evidence that staff perceived the activity as not too difficult to implement and that steps were taken to reduce the complexity associated with implementing the activity.	There is moderate evidence that staff perceived the activity as not too difficult to implement and that the university took some steps to reduce the complexity associated with implementing the activity.	There is evidence that the staff perceived the activity as too difficult to implement and that the university did not attempt to reduce the complexity associated with implementing the activity.
Trialability	17. Staff responsible for the activity are able to practice the activity without repercussions and to learn from implementation.	Staff responsible for the activity are occasionally able to practice the activity without repercussions and to learn from implementation.	Staff responsible for the activity are unable to practice the activity without repercussions and cannot learn from implementation.

Topic, Criterion	Description of Alignment with Criterion		
	Highest Alignment	Moderate Alignment	Lowest Alignment
Observability	18. Relevant data about the effectiveness of the activity are available to all staff responsible for the activity (this may be in the form of data from previous years at the university or from other places that have implemented the activity).	Relevant data about the effectiveness of the activity are available to only some staff responsible for the activity.	Data about the effectiveness of the activity are not available to any staff responsible for the activity.
Priority	19. University leadership prioritizes and expresses the priority of the activity over other activities.	University leadership occasionally prioritizes the activity over other activities.	University leadership never prioritizes the activity over other activities.
Gaps	20. Actions were taken to address any gaps in motivation.	Actions were occasionally taken to address gaps in motivation.	Actions were never taken to address gaps in motivation.

Table F.4. Prevention Plan of Action Dimension: Continuous Evaluation

Topic, Criterion	Description of Alignment with Criterion		
	Highest Alignment	Moderate Alignment	Lowest Alignment
Process evaluation			
Monitoring	21. A process evaluation exists to monitor the activity's progress on key tasks, participant characteristics, participant satisfaction, and fidelity.	The activity's process evaluation monitors only half of the key elements (any two of the following: progress on key tasks, participant characteristics, participant satisfaction, and fidelity).	The activity does not have a process evaluation.
Alignment	22. The process evaluation is aligned with the implementation plans for the activity (i.e., captures key tasks, has appropriate fidelity tools).	The process evaluation is moderately aligned with the implementation plan for the activity.	The process evaluation and implementation plan for the activity are completely misaligned.
Data synthesis	23. Activity process evaluation data are synthesized for review by key staff.	Activity process evaluation data are occasionally synthesized for review.	Activity process evaluation data are never synthesized for review.
Improvements	24. Staff responsible for the activity are taking all necessary actions to improve implementation of the activity using the results of the process evaluation.	Staff responsible for the activity are taking some actions to improve implementation of the activity using the process evaluation results.	Staff responsible for the activity never take actions to improve implementation of the activity using the process evaluation results.

Topic, Criterion	Description of Alignment with Criterion		
	Highest Alignment	Moderate Alignment	Lowest Alignment
Outcome evaluation			
Data collection and analysis	25. Outcome data that reflect short- and long-term outcomes of the activity are being gathered and/or analyzed. Analyzing outcome data means determining whether the activity has achieved the desired outcomes. If relying on a surveillance system, the data need to be specific to the university and for the appropriate target population.	Some outcome data (short- or long-term) for the activity are being gathered and/or analyzed.	No outcome data for the activity are being gathered and/or analyzed.
Mutable outcomes	26. The outcome evaluation captures all the mutable desired outcomes associated with the activity.	The outcome evaluation captures some of the mutable desired outcomes associated with the activity.	The outcome evaluation does not capture any of the mutable desired outcomes associated with the activity.
Continuous quality improvement			
Systematic review	27. Staff responsible for the activity conduct a systematic review of its performance: reviewing whether goals and desired outcomes are appropriate, whether the activity is a good fit, whether staff have the capacity needed, and the process and outcome evaluation plans and results.	Staff responsible for the activity conduct a partial review of the activity's performance that addresses only two of the following: whether goals and desired outcomes are appropriate, whether the activity is a good fit, whether staff have the capacity needed, and the process and outcome evaluation plans and results.	Staff responsible for the activity do not conduct a systematic review of the activity's performance.
Performance review	28. Reviews of activity performance take place frequently (e.g., each time the activity is conducted).	Reviews of activity performance take place occasionally.	Reviews of activity performance do not occur.
Improvement strategies	29. Staff responsible for the activity identify areas and carry out strategies for improving areas of poor performance.	Staff responsible for the activity occasionally identify areas and carry out strategies for improving areas of poor performance.	Staff responsible for the activity do not identify or attempt to improve areas of poor performance.
Monitoring poor performance	30. Areas of poor performance are monitored by internal staff or outside investigators without a conflict of interest to determine whether predetermined measures of performance improve.	Areas of poor performance are occasionally monitored.	Areas of poor performance are not monitored.

Topic, Criterion	Description of Alignment with Criterion		
	Highest Alignment	Moderate Alignment	Lowest Alignment
Sustainability			
Action plan	31. A plan, with action steps detailed, is in place to sustain the activity as long as it keeps working.	There is a plan, with some action steps detailed, to sustain the activity.	There is no detailed plan to sustain the activity.
Efforts	32. Staff at the university are conducting multiple efforts to ensure the sustainability of the activity (e.g., funding, champions, leadership support), including using evaluation data to demonstrate activity effectiveness.	Staff at the university are conducting only a handful of efforts to ensure the sustainability of the activity.	Staff at the university are not conducting any efforts to ensure sustainability of the activity.

G. Example of Using the University Self-Assessment Guide

To demonstrate how this self-assessment could work in practice, this appendix presents an example from a hypothetical university (“State University”) using the relevant steps.

Step 1. Determine the scope of the assessment and form a working group. State University wanted to follow a campus team approach, which various federal agencies’ funding grants recommend for postsecondary institutions (e.g., U.S. Department of Justice, Office of Violence Against Women, 2017; U.S. Department of Health and Human Services, Office on Women’s Health, 2018). Such an approach involves forming a campus-based collaborative and multidisciplinary group focused on sexual assault and harassment that can include community partners. Following this guidance, State University included representatives of its Title IX office, campus law enforcement, student services, campus mental health and health services, student conduct, ombudsman’s office, Panhellenic organizations, students, faculty with gender-based violence expertise, campus religious ministries, community survivor advocacy agencies, and community health center representatives (Carlson et al., 2020), as well as representatives from the office of the university president.

Step 2. Review the most recent sexual assault and harassment prevention assessment documents (if applicable; see Appendix A). This assessment was the first for State University, so there were no previous assessment documents to review.

Step 3. Complete prevention inventory forms (Appendix B) for all new prevention activities, and update forms for previously assessed activities as needed. State University completed inventory forms for two prevention programs: A purchased, existing program called AlcoholEdu from EverFi and a program the university itself developed, the Bystander program. The university also has a number of small efforts, including pamphlets that are sent to each student and a website with information about prevention. In the following descriptions for each program, elements of the prevention inventory appear *in italics*:

- *AlcoholEdu* is a one- to three-hour online *alcohol* prevention training that employs decentralized, interactive, and scenario-based training sessions intended for *all students* to take *individually*. There is *research evidence supporting* that the program is effective in reducing alcohol misuse. The curriculum has pre- and postassessments built into the course, with the preassessment serving as a *needs assessment* of alcohol risk factors and behaviors. As shown in the prevention inventory, the program was implemented in the *2019 academic year*, the university expecting that *all students would complete the training*. The *process evaluation of the program* showed that most students (75 percent) completed one module, but fewer than half (45 percent) completed all the sessions. The *results of the outcome evaluation* were disappointing

because the students did not exhibit the desired amount of change. However, the data on usage suggest an area for improvement: increasing the amount of communication from the university to increase attendance.

- The *Bystander* program consists of three one-hour lectures describing the benefits of *positively intervening in instances of sexual assault or harassment*. The program was created by local faculty after reviewing other bystander programs, but *no research evidence* documents the program's positive impacts. State University *requires all incoming freshmen* to attend the lectures. *Attendance is taken*, and the University will not allow students to graduate without attending all three lectures. As a result, all students wind up participating in the program. (Freshmen who miss can attend in subsequent years.) *No other tracking or evaluation* is conducted for the program.

Step 4. Conduct separate interviews with stakeholders at the administration and activity levels (see Appendixes C and D). State University decided to conduct several interviews with the president of the university, along with representatives from the Title IX office, campus law enforcement, student services, and campus mental health and health services. The box summarizes the results of these interviews.

Summary Across All Interviews

- 1. Comprehensive approach to prevention**
 - There appeared to be no overarching prevention plan guiding prevention efforts in a manner that ensured coverage across key protective and risk factors, levels of the socioecological model, or target audiences.
- 2. Human resources**
 - a. Leadership**
 - Addressing sexual assault and harassment is seen as important; leadership empowers staff to tackle the issue, but there is little collaboration.
 - b. Prevention Workforce**
 - There is a general lack of time and person-power to address the prevention needs of the university.
- 3. Collaborative relationships**
 - While the recent team convened by the president is multidisciplinary, the university's prevention efforts have traditionally been siloed.
- 4. Infrastructure**
 - a. Data**
 - The university occasionally collects data beyond the number of reported assaults (risk and protective factors via the AlcoholEdu program), but data sources are not coordinated, regularly reviewed, or well synthesized.
 - b. Resources**
 - Not enough resources are devoted to sexual assault and harassment prevention to cover programming, training for staff, or staffing.
- 5. Quality Implementation**
 - The university recently started to regularly and systematically review data on the implementation of its programs (e.g., the AlcoholEdu data).
- 6. Continuous Evaluation**
 - Recently, the university began to evaluate its programming (AlcoholEdu program surveys).

Step 5. Compile information into summary documents and supplement with additional documents, as needed. In addition to the interviews and the prevention inventories for the two programs, the team reviewed documents from EverFi’s program.

Step 6. Use the information to rate (or rerate) each university- and activity-level criterion using a five-point Likert scale (from *no alignment* to *full alignment*; see Appendixes E and F for criteria descriptions). After considering multiple options (e.g., discussing as a team, a smaller group making the ratings), it was decided that all team members would individually rate the criteria. Mostly, ratings from team members were similar, so they averaged their responses together (see example ratings in Tables G.1 and G.2). In a few cases, multiple raters were more than two points apart. In those cases, the team discussed the discrepancy and rerated the criteria. In one instance, even after discussion, the discrepancy between two raters was more than two points. The group decided that since the discrepancy was only between two raters, they would use the scores in calculating the average. Tables G.1 and G.2 present the results.

Table G.1. University-Level Example Ratings and Explanation

PPoA Dimension	Criterion Description	Mean	Interpretation
Leadership	Leaders consistently use available research evidence to inform decisions. Leaders rely on available evidence when briefing and approving initiatives.	3.5	Leaders only use evidence sometimes. For example, EverFi’s program has some evidence, but the Bystander program does not (although it is based on sound theory).
	Leaders at all levels consistently work together when planning prevention.	2.0	No organized, systematic body, pulled from multiples parts of the university, addresses sexual assault and harassment prevention. There are a few examples of time-limited and ad hoc working groups addressing this issue.
Resources	Sexual assault and harassment prevention efforts have a dedicated budget for staffing, adaptation, implementation, evaluation, and sustainability planning.	2.0	Aside from the cost of purchasing EverFi’s program, few resources have been spent on sexual assault or harassment prevention.
Quality implementation	Every time a new prevention activity is implemented, a proper evaluation is carried out to determine its effectiveness.	3.0	The AlcoholEdu program is being evaluated over time, but the Bystander program is not.

Table G.2. Activity-Level Example Ratings and Explanation

PPoA Dimension	Criterion Description	EverFi	Bystander	Interpretation
Goals and desired outcomes	Activity goals and SMART desired outcomes (i.e., answering the questions of what, when, who, how much) are clearly written.	1.0	1.0	No specific outcomes were specified in either program.
	There is a logical link between activity goals and desired outcomes, and that link is evidence informed.	1.0	1.0	
	Each activity has at least one desired outcome.	1.0	1.0	
Choosing evidence-informed activities	<p>The activity was chosen after systematic consideration of</p> <ul style="list-style-type: none"> the available research evidence the needs of the target populations, with consideration of population diversity and the unique needs of individuals with cross-cutting identities (e.g., racial minorities who are also sexual minorities) academy goals and desired outcomes the opinions of all key stakeholders involved. 	4.5	1.0	EverFi was chosen after the university researched its evidence and saw that it had online delivery (which was a good fit for the population). No process was undertaken involving the Bystander program. Few stakeholders were involved in either decision.
Process evaluation	<p>A process evaluation exists to monitor the activity's</p> <ul style="list-style-type: none"> progress on key tasks participant characteristics participant satisfaction fidelity. 	4.5	1.0	EverFi provides process evaluation data. No process evaluation data are collected on the Bystander program.
Outcome evaluation	Outcome data that reflect short- and long-term outcomes of the activity are being gathered and/or analyzed. Analyzing outcome data means determining whether the activity has achieved the desired outcomes. If relying on a surveillance system, the data need to be specific to the academy and for the appropriate target population.	4.5	1.0	Outcomes are collected through EverFi's online system. Outcome data are not collected on the Bystander program.
Continuous quality improvement	Staff responsible for the activity conduct a systematic review of its performance (includes reviewing whether goals and desired outcomes are appropriate, whether the activity is a good fit, whether staff have the capacity needed, and the process and outcome evaluation plans and results).	5.0	1.0	The university now reviews the EverFi AlcoholEdu program survey data. No data about the Bystander program are collected or reviewed.

Step 7. Synthesize the ratings and provide university administrators and other stakeholders with a report of the findings. The team presented the findings in a report and presentation to university administrators, who decided that an interdepartmental work group should be formed to improve performance on the criteria.

H. Recommended Resources for Improving Adherence to the Criteria for Sexual Assault Prevention in Institutions of Higher Education

This appendix suggests resources that can guide the efforts of institutions of higher education to improve their scores on the criteria for sexual assault prevention. We selected these resources because of their relevance to the PPoA dimensions, applicability to staff working in prevention, and basis in research. However, the identified resources are not exhaustive, and institutions are encouraged to seek the additional resources that may best serve institutional needs.

Table H.1 lists a few resources relevant to each PPoA dimension: human resources (leadership and prevention workforce), collaborative relationships, infrastructure (data and resources), comprehensive approach to prevention, quality implementation, and continuous evaluation.

Table H.1. Resources for Improving University’s Alignment with the Criteria, by PPoA Dimension

PPoA Dimension	Resource	Description
Human resources		
Leadership	<i>Understanding Evidence, Part 1: Best Available Research Evidence—A Guide to the Continuum of Evidence of Effectiveness</i> (Puddy and Wilkins, 2011)	The CDC’s Division of Violence Prevention’s Evidence Project provides a framework for understanding evidence and evidence-based decisionmaking. Specifically, the project reviews three types of evidence deemed critical for developing effective prevention programs, practices, and policies for several public health issues, including sexual violence: the best available research evidence, experiential evidence, and contextual evidence.
	<i>Improving Campus Sexual Assault Prevention: A Best Practice Guide for Administrative Leadership</i> (Buelow, undated)	EverFi, an international technology company focused on higher education, developed this guide to provide college and university administrators with key strategies and best practices for preventing sexual assault. The guide focuses on three pillars of prevention: programming, critical processes, and institutionalization (i.e., making wellness and prevention an organizational priority).
	<i>Sexual Harassment of Women: Climate, Culture, and Consequences in Academic Sciences, Engineering, and Medicine</i> (Johnson, Widnall, and Benya, 2018)	This report from the National Academies of Sciences, Engineering, and Medicine examines the prevalence of sexual harassment on college and university campuses and its impacts on the recruitment, retention, and advancement of women and reviews policies and practices for preventing sexual harassment in these settings. In Chapter 6, “Changing the Culture and Climate in Higher Education,” the authors describe six approaches to improving the organizational climate for preventing sexual harassment in academia. The chapter discusses the value of measuring progress and incentivizing institutions to make changes and implement the proposed approaches.
	“Harnessing this Moment in Sexual Assault Education: Getting	This free webinar, hosted by SafeColleges, provides administrators and educators with information on strategic prevention planning best practices, the importance of prevention programming, and

PPoA Dimension	Resource	Description
	Strategic with Our Prevention Efforts” (Issadore and Williams, 2019)	strategies to make the most of limited budgets, collaborations, and time.
Prevention workforce	“Sexual Assault Response Team Toolkit” (National Sexual Violence Resource Center, 2018)	The National Sexual Violence Resource Center developed this toolkit to provide protocols and guidelines for creating a sexual assault response team (SART) or any other prevention team that focuses on improving the system or community response to reports of sexual assault. SARTs are tasked with supporting victims, holding offenders accountable, and increasing community safety. The toolkit also provides practical tips to help SARTs work effectively, ideas for expansion, tools for identifying community needs, best practices, and connections to technical assistance providers.
	“What Can Campuses Learn from Community Sexual Assault Response Teams? Literature Review of Teams’ Purpose, Activities, Membership, and Challenges” (Carlson et al., 2020)	This literature review summarizes published articles examining the role of community SARTs and campus team approaches. The authors identify differences between the two teams’ goals and activities and present challenges for defining the role of campus response teams.
	“Developing an Effective Campus Sexual Assault Prevention Task Force: Lessons Learned from Multiple Midwestern Universities” (Mabachi et al., 2020)	This multisite qualitative study investigates stakeholder perceptions of facilitators, barriers, and lessons learned from creating a sexual assault prevention task force in seven Midwestern postsecondary institutions. The authors distinguish task forces from SARTs in that the task force focuses more on planning, developing, and implementing a comprehensive prevention and sustainability plan. That is, while a SART focuses on response efforts, a task force focuses on institutional prevention. Task forces can include various stakeholders, such as administrators, professors, coaches, campus police, students, and community advocates.
Collaborative relationships	<i>Engaging Communities in Sexual Violence Prevention: A Guidebook for Individuals and Organizations Engaging in Collaborative Prevention Work</i> (Curtis, undated)	This guidebook from the Texas Association Against Sexual Assault is a tool to help communities and individuals collaborate on community-based primary prevention of sexual violence. The guidebook focuses on building partnerships with community members, which broadly encompasses any group of individuals who are representative of the population that will be the focus of the prevention initiatives. It presents an ecological framework for primary prevention, ways to identify potential partners, steps for conducting community work groups, and approaches for identifying community needs and risk factors.
	“List of Sexual Assault Coalitions” (DC Rape Crisis Center, 2019)	Several states have statewide coalitions involving multiple stakeholders, such as colleges, rape crisis centers, organizations, and individuals, who work in collaboration to end sexual violence. Some areas of focus include education, advocacy, and legislation. This webpage presents information, by state, on events (e.g., conferences, trainings), programs, and resources.
Infrastructure		
Data	“Survey Questionnaire” (Association of American Universities [AAU], undated)	AAU’s Campus Climate Survey on Sexual Assault and Sexual Misconduct is a publicly available survey. The survey allows institutions to collect data on the incidence, prevalence, and risk factors for sexual assault and misconduct. The survey also assesses the overall climate on campuses with respect to perceptions of risk, knowledge about resources available to victims, and perceived reactions to an incidence of sexual assault or

PPoA Dimension	Resource	Description
		misconduct. Data from this survey can help college and university administrators develop practices and policies to make their campuses safer. Aggregated data across institutions can also help inform policymakers as they work on possible legislative and administrative initiatives.
	<i>#WeSpeak: Student Experiences, Attitudes, and Beliefs About Sexual Violence—Results of the Rutgers University–Newark Campus Climate Assessment</i> (McMahon et al., 2016)	The Rutgers University Campus Climate Assessment is another example of a climate survey. This report provides details of the methodology and the findings from a quantitative survey and qualitative focus groups with students. The survey instrument was adapted from one developed by the White House Task Force to Protect Students from Sexual Assault. Findings from this type of assessment can help identify gaps and strengths in an institutions' response to sexual violence on campus.
	<i>Problem Analysis: The First Step in Prevention Planning</i> (DeJong, 2009)	This short report from the Higher Education Center for Alcohol and Other Drug Abuse and Violence Prevention discusses how data collected through a problem analysis (i.e., needs assessment) can be used for strategic planning of prevention programs on college and university campuses. This is the first step in a multistep process for strategic planning. Conducting a problem analysis involves gathering objective data on the nature and scope of the problem, examining available resources and assets on campus, and analyzing and summarizing information to clarify needs and opportunities.
Resources	<i>Combating Sexual Assault and Misconduct</i> (AAU, 2017)	This report from AAU highlights activities universities have undertaken to prevent and respond to campus sexual assault and misconduct. The report was informed by a survey of AAU members (Campus Activities Survey), which asked administrators to report on activities their institutions are engaged in, collaborations and partnerships, and resources devoted to these efforts. In section 5, "Resources," the report describes the different ways in which universities are supporting their sexual assault and misconduct prevention efforts, such as interoffice data-sharing as well as funding and staff for specific resources (e.g., victim support, trainings, data collection, administrative functions, and law enforcement).
	"Campus Program" (U.S. Department of Justice, Office on Violence Against Women, undated)	The Grants to Reduce Sexual Assault, Domestic Violence, Dating Violence, and Stalking on Campus Program was created by Congress and is designed to fund institutions of higher education to develop comprehensive plans to prevent sexual assault, domestic violence, dating violence, and stalking on campuses. These plans can include victim services, campus law enforcement, health services, trainings, and links to local resources. In 2018, the program gave out 57 awards, totaling over \$18 million.
Comprehensive approach to prevention	<i>STOP SV: A Technical Package to Prevent Sexual Violence</i> (Basile et al., 2016)	The CDC developed this material, which is a compilation of strategies to help communities enhance their prevention efforts to reduce sexual violence and its consequences. These strategies include setting social norms that protect against violence, teaching skills to prevent sexual violence, offering opportunities to empower and support victims, creating protective environments, and supporting victims or survivors of sexual violence. The package has three components: the STOP SV strategies for achieving the goal of preventing sexual violence, the approach for advancing the strategies (programs, policies, or practices), and the evidence for each approach.
	<i>Preventing and Addressing Campus Sexual Misconduct: A</i>	This guide was developed by the White House Task Force to Protect Students from Sexual Assault. It provides recommendations to help university leaders think about how to develop a

PPoA Dimension	Resource	Description
	<p><i>Guide for University and College Presidents, Chancellors, and Senior Administrators</i> (White House Task Force to Protect Students from Sexual Assault, 2017)</p>	<p>comprehensive plan of prevention for sexual misconduct. Specifically, it focuses on six elements: a coordinated campus and community response; prevention and education; policy development and implementation; reporting options, advocacy, and support services; climate surveys, performance measurement, and evaluation; and transparency.</p>
	<p><i>The Culture of Respect CORE Blueprint Program</i> (National Association of Student Personnel Administrators [NASPA], 2017)</p>	<p>The Culture of Respect is a NASPA (a professional organization focused on student affairs) initiative focusing on building capacity at institutions to end sexual violence through ongoing, expansive organizational change. The CORE blueprint is a reference guide to evidence-based and expert-recommended practices to address sexual violence on college and university campuses. It focuses on six pillars that engage multiple stakeholders: survivor support, clear policies, multitiered education, public disclosure, schoolwide mobilization, and self-assessment.</p>
	<p><i>Sexual Violence Prevention: An Athletics Tool Kit for a Healthy and Safe Culture</i> (National Collegiate Athletic Association Sport Science Institute, 2019)</p>	<p>The National Collegiate Athletic Association developed this sexual violence prevention toolkit, gearing it toward those who educate, coach, and support student athletes. The toolkit focuses on five areas of commitment: leadership, collaboration, compliance and accountability, education, and student-athlete engagement. It also includes such resources as protocols for athletics departments and campus collaboration tools.</p>
Quality Implementation	<p>“Adoption, Adaptation, and Fidelity of Implementation of Sexual Violence Prevention Programs” (Noonan et al., 2009)</p>	<p>This article examines the multilevel factors associated with adoption and fidelity of two evidence-based sexual violence prevention programs in new settings. The authors present findings from quantitative and qualitative interviews with key stakeholders at various organizations involved in the adoption or implementation of the programs.</p>
	<p>“Successful Program Implementation: Lessons from Blueprints” (Mihalic et al., 2004)</p>	<p>This article examines the implementation processes of the Blueprints for Violence Prevention initiative. The authors present findings from process evaluations at each of the program’s replication sites. The evaluations focused on the implementation processes (e.g., barriers to implementation) and factors that may have affected the quality and fidelity of implementation.</p>
Continuous evaluation	<p>“Evaluation Toolkit” (National Sexual Violence Resource Center, undated)</p>	<p>The National Sexual Violence Resource Center developed this toolkit to guide the program evaluation process for sexual violence prevention programs. It covers 17 specific topics (including introduction to evaluation, measures, data collection methods, and outcomes and indicators) and provides self-study guides, worksheets, and tools to support planning and implementation of program evaluations and training activities, as well as examples and case studies.</p>
	<p><i>Culture of Respect CORE Evaluation</i> (NASPA, 2021)</p>	<p>The NASPA Culture of Respect initiative developed an evaluation tool to enable institutions to self-assess their sexual violence prevention efforts. Questions are organized around the CORE Blueprint pillars (see NASPA, 2017). The evaluation process helps institutions identify strengths and opportunities for improving institutions’ strategies for addressing sexual violence on campus.</p>
	<p><i>Measures of Performance and Effectiveness for the Marine Corps’ Sexual Assault Prevention Programs</i> (Farris et al., 2019)</p>	<p>This RAND Corporation report describes the development of measures of effectiveness and measures of performance. The report contains logic models for prevention activities and identifies measures for each component of the logic model. It also reviews other common measures used in the evaluation of sexual assault prevention training in the military and civilian settings.</p>

PPoA Dimension	Resource	Description
	<p>“Getting To Outcomes® Improving Community- Based Prevention: A Toolkit to Help Communities Implement and Evaluate Their Prevention Programs” (RAND Corporation, undated)</p>	<p>Getting To Outcomes® is a results-oriented approach from the RAND Corporation to help communities implement and evaluate their prevention programs targeting negative health behaviors. The toolkit describes ten steps involved in the process, from identifying the problem to sustaining successful programs. The approach has been applied to guide implementation and evaluation of sexual assault prevention programs in the military.</p>
	<p><i>Combating Sexual Assault and Misconduct</i> (AAU, 2017)</p>	<p>This AAU report describes sexual assault and misconduct policies and programs implemented across AAU member universities. Section 6, “Measuring Change,” presents how (methods) universities are measuring change, across various indicators, in response to prevention efforts. Example indicators include prevalence data, behaviors and risk factors, campus climate, and knowledge of campus policies and resources.</p>
	<p>“Incorporating Evaluation into Media Campaign Design” (Potter, 2008)</p>	<p>This article describes how evaluation can be part of an ongoing quality improvement effort—from the planning, design, and implementation stages—of media campaigns for sexual violence prevention. The author discusses how campaign teams can facilitate the inclusion of evaluation throughout the development stage so that the final campaign is based on constant feedback. Campaign creators can help ensure the campaign reaches the target audience. Finally, pretest and posttest evaluations can help assess the campaigns’ effects on changing knowledge, attitudes, and behaviors.</p>

I. Guidance for Creating the Final Self-Assessment Report

This appendix provides further detail on what information should be included in the final self-assessment report and how the report should be structured.

While the structure and content of the report can vary, it is important to communicate the *purpose* of the assessment, the *methods* used to conduct the assessment, the *strengths* of the university's sexual assault and harassment prevention efforts, *areas for growth* in prevention, and *recommended actions* for growth in the targeted areas. Note that some sections will be longer and more detailed, while others will be brief. The report should make clear which areas for growth are the most critical and important to prioritize. Recommendations should be specific and actionable.

Using This Appendix

What follows is an extended version of the report outline included in the self-assessment guide. Instructions and questions to consider appear in the blue boxes. In addition to general guidance, this outline includes examples of how the information in the report can be presented. These examples draw on the fictional example of using the guide in Appendix G.

Users can refer to this detailed outline as a starting point for developing their own reports but should customize each section for the particular context in which the assessment was conducted. In some cases, the structure presented here may not be the most appropriate way to describe the assessment results. In such cases, working groups can devise a format that best works for them, making sure to include the elements listed in italics above.

1. Executive Summary

This section should include a one- to two-page overview of purpose of the report and the methods used to complete the self-assessment. The strengths and gaps in the university's prevention efforts should be briefly summarized at both the institution and program levels. Finally, include an overview of the working group's recommendations. While the language used in the sample can be adapted, this section should be modified based on the scope of the assessment as determined by the working group.

Sample Text

This report serves to communicate the results of the prevention assessment team's evaluation of State University's sexual assault and harassment prevention efforts. This assessment included evaluation of university-level prevention efforts (e.g., policies, resources, collaboration) and specific programs designed to prevent sexual assault and harassment. Information for this assessment was gathered by reviewing available policies and program-related documents and by interviewing administrators and prevention staff. The information gathered was used to rate university-level efforts and individual prevention programs using a set of best-practice criteria. The ratings were then used to inform recommendations for improving State University's sexual assault and harassment prevention programming.

The self-assessment process identified strengths and areas for growth within State University's sexual assault and harassment prevention efforts. One of the strengths of the university's prevention efforts is the value and importance that university leaders place on sexual assault and harassment prevention. Additionally, there have been recent efforts to systematically review program implementation and outcomes data to facilitate continuous quality improvement. This assessment also identified several key areas for growth, including a lack of resources devoted to prevention efforts and a lack of coordination of effort among departments

The team evaluated the AlcoholEdu program by EverFi and the university-created Bystander program. Detailed strengths and recommendations at the program level can be found in the body of this report.

The results of this assessment suggest that State University should form an interdisciplinary working group, representing stakeholders from a variety of institutional levels. Forming this working group would allow State University to more effectively

- coordinate the efforts of various groups working toward preventing sexual assault and harassment to ensure that efforts are aligned, that they are not duplicative, and that messaging is consistent
- facilitate outcome evaluations by ensuring that all prevention programs have clearly stated goals and objectives.

2. Brief Description of the Information Collected as Part of the Self-Assessment

If documents from previous assessments were reviewed, describe them here. What was reviewed? This may include needs and resources assessments, program goals and outcomes, notes on program implementation, program feedback, policies, professional development records, etc. What was deemed to be unchanged from prior assessments? What was deemed to be changed and warranting re-review?

Sample

In conducting this assessment, the working group gathered and reviewed information on all sexual assault and harassment prevention programs as well as university-level policies and procedures affecting prevention efforts. Examples of policies reviewed include those related to professional development for prevention staff and retention of these staff. The prevention assessment team also conducted interviews with the president of the university, Title IX staff, campus law enforcement officers, student services staff, and staff from campus health and mental health offices. These interviews helped provide a comprehensive view of policies and efforts related to prevention across the university.

The programs reviewed for this assessment were Everfi's AlcoholEdu and the university-created Bystander program. Because this is the first comprehensive assessment of State University's prevention efforts, no prior assessment documents existed. Prevention inventory forms were completed to gather data on AlcoholEdu and the Bystander program. The working group also reviewed the curriculum, pre- and postassessments, and outcome and process evaluation information that was available for AlcoholEdu.

3. Brief Summary of Each University-Level Criterion Rating

For each domain, describe key strengths and gaps, as well as specific, actionable recommendations. Also describe any changes that warranted rerating criteria.

Sample: Leadership

Using the information collected in the box, leadership at State University values sexual assault and harassment prevention and aims to empower prevention staff to address these issues. Several working groups exist across various areas of the university but typically on an as-needed basis, focusing on specific initiatives. There is a lack of coordination of efforts across departments and levels of the university, which may impede progress toward the reduction of sexual assault and harassment.

Supporting Information Collected During the Assessment: Leadership			
Interview summary: Addressing sexual assault and harassment is seen as important, and leadership empower staff to tackle the issue, but there is little collaboration.			
Criteria ratings and interpretation:			
PPoA Dimension	Criterion Description	Mean	Interpretation
Leadership	Leaders consistently use available research evidence to inform decisions. Leaders rely on available evidence when briefing and approving initiatives.	3.5	Leaders only use evidence sometimes. For example, EverFi's program has some evidence, but the Bystander program does not (although it is based on sound theory).
	Leaders at all levels consistently work together when planning prevention.	2.0	There is no organized, systematic body, pulled from multiple parts of the university, that addresses sexual assault prevention. There are a few examples of time-limited and ad hoc working groups addressing this issue.

Recommendations: Form an interdepartmental working group focused on coordinated sexual assault and harassment prevention. While the existing project-based working groups have assisted with implementation and evaluation of sexual assault and harassment prevention programming, coordinating these efforts throughout all levels of leadership will promote more-comprehensive and more-cohesive prevention efforts.

4. Brief Summary of Each Activity-Level Criterion Rating

For each domain, describe key strengths and gaps, as well as specific, actionable recommendations. Also describe any changes that warranted rerating of criteria.

Sample: Goals and Desired Outcomes, Evidence-Informed Activities

Goals and Desired Outcomes

Review of program documentation for the EverFi and Bystander intervention programs revealed that neither program had identified specific goals or outcomes. While the programs had other strengths, the lack of goals and outcomes precludes assessment of whether the aims of the program are being achieved.

Recommendations: Prevention staff and program facilitators working with the EverFi and Bystander intervention programs should identify clear goals (e.g., SMART goals) for each program activity and clearly define desired outcomes for each program. When defining these goals and outcomes, staff should aim to have a clear link between activity goals and desired outcomes, demonstrating the proposed mechanism for change.

Choosing Evidence-Informed Activities

EverFi's program was chosen for implementation following a thorough review of evidence supporting the program's efficacy and consideration of how well it fit university needs. However, the decision to adopt the program involved only a few stakeholders. No systematic review process was conducted when developing the Bystander intervention program, and few stakeholders were involved in the process.

Recommendations: Teams responsible for choosing prevention programs for implementation should develop a systematic method for evaluating potential programs. This process should include reviewing empirical evidence, considering the needs of and appropriateness for the target student population, and considering how the program may support the goals and outcomes.

**Supporting Information Collected During the Assessment:
Goals and Outcomes and Evidence-Informed Activities**

State University has two prevention programs for which it completed inventory forms: an existing program, AlcoholEdu, which it had purchased from EverFi, and a program the university had developed, the Bystander program. In addition, the university has a number of small efforts, including pamphlets that are sent to each student and a website with information about prevention (each program is described below following the elements of the prevention inventory *in italics*).

AlcoholEdu is a one- to three-hour online *alcohol* prevention training that employs decentralized, interactive, and scenario-based training sessions intended for *all students* to take *individually*. There is *research evidence supporting* that the program is effective in reducing alcohol misuse. The curriculum has pre- and postassessments built into the course, with the preassessment serving as a *needs assessment* of alcohol risk factors and behaviors. As shown in the prevention inventory, the program was implemented in the *2019 academic year*, the university expecting that *all students would complete the training*. The *process evaluation of the program* showed that, while most students (75 percent) completed one module, fewer than half (45 percent) completed all the sessions. The *results of the outcome evaluation* were disappointing because the students did not exhibit the desired amount of change. However, the data on usage suggest an area for improvement: increasing the amount of communication from the university to increase attendance.

The Bystander program consists of three one-hour lectures describing the benefits of *positively intervening in instances of sexual assault or harassment*. The program was created by local faculty after reviewing other bystander programs, but there is *no research evidence* documenting positive program effectiveness. State University *requires all incoming freshmen* to attend the lectures. *Attendance is taken*, and the university will not allow students to graduate without attending all three lectures. As a result, all students wind up participating in the program (freshman who miss can attend in subsequent years). *No other tracking or evaluation* is conducted on the program.

PPoA Dimension	Criterion Description	EverFi	Bystander	Interpretation
Goals and desired outcomes	Activity goals and SMART desired outcomes (i.e., answering the questions of what, when, who, how much) are clearly written.	1.0	1.0	No specific outcomes were specified in either program.
	There is a logical link between activity goals and desired outcomes, and that link is evidence informed.	1.0	1.0	
	Each activity has at least one desired outcome.	1.0	1.0	
Choosing evidence-informed activities	<p>The activity was chosen after systematically considering</p> <ul style="list-style-type: none"> • available research evidence • the needs of the target populations, also considering population diversity and the unique needs of individuals with cross-cutting identities (e.g., racial minorities who are also sexual minorities) • academy goals and desired outcomes • the opinions of all key stakeholders involved. 	4.5	1.0	EverFi was chosen after the university researched its evidence and saw that it had online delivery (which was a good fit for the population). No process was undertaken involving the Bystander program. Few stakeholders were involved in either decision.

5. Prevention Priorities Based on Self-Assessment

For near-term priorities (within the next six months to a year), what is most pressing, and what is realistically achievable in this time frame? Possible examples include formation of an interdisciplinary prevention team, identification of program goals and outcomes, creation or revision of policies, adaptation of existing programming, discontinuation of programming found to be ineffective, development of communication strategies, and provision of professional development for staff. These can be listed in bullet points.

For longer-term priorities (one to five years), what may be less urgent or take additional time to achieve? Examples may include reallocating university resources to support prevention efforts, increasing collaborative prevention efforts within and outside of the university, and reevaluating university prevention efforts. These can be listed in bullet points.

Key considerations and barriers may, for example, include availability of resources; staff knowledge, capacity, and motivation; and lack of infrastructure supporting collaboration. The working group should identify considerations and barriers that may affect both near- and long-term priorities and give specific recommendations for how these roadblocks may be overcome. These can be listed in bullet points.

Sample

Near-Term Priorities

- Given the self-assessment results, State University should prioritize the formation of an interdisciplinary working group to coordinate sexual assault and harassment prevention efforts across areas. This will help ensure that prevention efforts are comprehensive and that messaging is consistent.
- To facilitate outcome evaluations of each prevention program, State University should ensure that all programs aimed at prevention sexual assault and harassment have goals and outcomes that are clearly defined and measurable.

Longer-Term Priorities

- State University will reassess its sexual assault and harassment prevention efforts in two years to assess progress toward best practices.

Key Considerations and Barriers to Addressing Priorities

- While various working groups at the university are focused on sexual assault and harassment prevention, a lack of coordinated effort has led to different working cultures and priorities that appear to compete. When forming an interdisciplinary prevention team, it will be important to develop a shared vision and priorities to address these challenges and facilitate buy-in.

6. Planned Actions for Next Steps

In this section, clearly define steps, describe who is accountable for each step, and provide a time line for completion. While steps to be taken could encompass a broad range of things, possibilities are communicating the results of the assessment to the broader university community or forming a prevention team, if one did not previously exist.

Sample

State University is committed to continuously improving its efforts toward prevention of sexual assault and harassment. Members of the working group will identify university stakeholders that may be valuable members of the interdisciplinary prevention team. Individuals will be identified from multiple levels of the organization (e.g., administrators, faculty, staff). Because multiple working groups with similar goals already exist, individuals participating in these groups will be included in the formation of an interdisciplinary working group. Identified members will be invited to an informational session defining the goals of the group; the group will convene within six months.

Glossary

AAU	Association of American Universities
Awareness education and activities	These are designed to increase general knowledge about an issue. Take Back the Night is an example of an awareness program.
CDC	Centers for Disease Control and Prevention
Collaboration	This refers to exchanging information, altering activities, sharing resources, and enhancing one another's capacity for mutual benefit and a common purpose. (See OUSD P&R, 2019.)
DoD	U.S. Department of Defense
Evaluation	<p>An evaluation involves systematic methods to collect, analyze, and use information to inform implementation of a policy, program, or practice.</p> <p>In the context of this guide, <i>evaluation</i> refers to both the process (monitoring fidelity, delivery) and outcome (assessing the short-, intermediate-, and long-term goals of the prevention activity) evaluation.</p> <p>See OUSD P&R, 2019.</p>
Leadership and administrators	These terms can refer to upper-level leadership at a university, such as the president, deans, or provost, or may refer to other midlevel leadership or administrators at the institution, such as leaders in the office of student conduct or the director of the student wellness center. Prevention staff and university working groups can use their best judgment to determine which types of leadership they might want to include and think about in the assessment; this may vary across institutions.
LGBTQ community	lesbian, gay, bisexual, transgender, and queer or questioning community
MSA	military service academy
NASPA	National Association of Student Personnel Administrators
OUSD P&R	Office of the Under Secretary of Defense for Personnel and Readiness
PPoA	Prevention Plan of Action
Prevention education and activities	These programs are designed to increase students' knowledge, attitudes, and skills relative to sexual assault and harassment prevention. Examples might include bystander intervention programs or Green Dot. Prevention education programs are distinct from awareness programs in that they go beyond awareness-raising and increasing general knowledge, actively striving to change attitudes and opinions and to provide participants with skills.
Protective factors	These are the factors that make it less likely that a sexual assault or harassment will occur or that increase an individual's resilience when encountering risk factors. Examples include self-defense, access to resources, and emotional health and connectedness. (See OUSD P&R, 2019, and CDC, 2021b.)

Rapid results	This refers to a timely turnaround and timely action taken on the results of the evaluation. What actually constitutes <i>timely</i> will likely vary across institutions.
Risk factors	These factors increase the risk of a sexual assault or harassment occurring. Examples include alcohol or substance use, involvement in Greek life, and hostile environments toward women. (See OUSD P&R, 2019, and CDC, 2021b.)
SART	sexual assault response team
Sexual violence (assault and harassment)	<p><i>Sexual violence</i> refers to sexual activity when consent is not freely given.</p> <p><i>Sexual assault</i> refers to physical acts perpetrated against a person’s will or when a person is unable to freely consent.</p> <p><i>Sexual harassment</i> is any unwelcome conduct of a sexual nature and can include unwelcome advances; requests for sexual favors; and other verbal, nonverbal, or physical conduct of a sexual nature.</p> <p>(See CDC, 2021b; U.S. Department of Education, Office for Civil Rights, 2020.)</p>
Sexual misconduct	This broad term encompasses sexual assault and harassment, as well as stalking and intimate partner violence. (See Cantor et al., 2020.)
SMART	specific, measurable, achievable, realistic, and timebound
Social-ecological model	<p>This model is a framework for understanding violence and the potential effect of prevention strategies. The model examines factors related to violence prevention at four levels of influence:</p> <p>individual—biological or personal factors of individuals</p> <p>relationship—relationships in an individual’s life that may increase risk of experiencing violence</p> <p>community—settings (e.g., schools, workplaces, neighborhoods) that may have characteristics that increase an individual’s risk of experiencing violence</p> <p>society—broad societal factors that create a climate in which violence is encouraged or inhibited (e.g., social and cultural norms, policies, issues of social and economic inequality)</p> <p>(See CDC, 2021a.)</p>

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