Members Present: Ellen Plummer, Bill Grace, Michael Maxey, Raychel Whyte, Daniel Dusseau, Judy Casteele

Members Present via Phone: Peter Blake, Daphne Maxwell Reid, Allen Groves

Members Not Present: Jean Cheek

Staff Present: Melissa McMenemy, Elizabeth Griffin

Meeting Summary

11:11am Meeting is called to order by the Chair, Ellen Plummer. Dr. Plummer asked everyone to introduce themselves around the table and on the phone.

Col. James Inman, Chief of Staff for VMI, welcomed everyone to VMI and discussed VMI’s commitment to ending sexual violence on campus. Col. Inman expressed concerns about proposed legislation and how institutions may get conflicting guidance between the state laws and federal laws as this moves forward. On the phone, Kirsten Nelson of SCHEV informed the committee members that the Office of the Attorney General (OAG) has agreed to ask a Title IX person to address the legislature regarding this topic.

Dr. Plummer asked if any member of the committee had any announcements. Elizabeth Griffin discussed that certain legislative committees have requested hearings on campus sexual violence and explained that the Attorney General is working on addressing the issues. This is one reason why the subcommittee is discussing action items today. Some committee members had questions regarding when the General Assembly would be holding hearings on campus sexual violence. Information about looking up committee meetings was provided and members were directed the General Assembly’s website, http://virginiageneralassembly.gov/ as a starting point. The next General Assembly Session begins on January 14, 2014.

Bill Grace addressed the subcommittee regarding the sponsorship of an app that includes information on sexual assault and is available for all smart phones, iPhone and android. Colonel Grace passed out an article regarding the various apps that are available, "Universities Turn to Smartphone Apps to Help
Sexual Assault Survivors", by Tyler Klink, posted on huffingtonpost.com. The subcommittee discussed the importance of using apps to reach students and which apps can be customized for each institution’s needs. Apps that were mentioned by the committee members were Circle of Six, Live Safe, and Lifeline. For the apps that can be customized, it would be helpful to add information regarding victim’s rights, victim information and resources, and student conduct code. Colonel Grace would like for this to be a statewide initiative that all institutions can access. Chief Dusseau said he supports the idea of an app and says it can be a good way for students to access services. Kimberly Johnson, a student at James Madison University (JMU), informed the subcommittee that JMU launched Live Safe app this year and the student response has been lukewarm. She recently learned about the Circle of Six app and feels that may be a better app. Allen Groves expressed the need to have an app that is user friendly when the student is under stress or impaired. The Circle of Six app is considered easy to use under those circumstances. Chief Dusseau said the apps need to be integrated into the students’ lives in order for the students to use them under duress or stress.

LaSonya Brown, LPC, Director of Client Services for Project Horizon provided an overview of how trauma impacts victims of sexual violence.

Ms. Brown provided statistics from a World Health Organization study on sexual violence that said survivors are:

- Three times more likely to experience depression
- Six times more likely to have PTSD
- Thirteen times more likely to abuse alcohol
- Twenty-six times more likely to abuse drugs
- Four times more likely to contemplate suicide

Ms. Brown explained that everyone has a unique response to sexual assault. For example, some survivors will minimize their experience, feel helpless, out of control, have nightmares, or have concerns for the predator. The DSM V (diagnostic statistical manual, which is used to diagnose mental health disorders) recommends treating the trauma in a sexual assault cases to decrease the likelihood of detachment, nightmares, and minimization of the event. It will also decrease the likelihood of a diagnosis down the road. Survivor responses can differ greatly; some survivors can be calm, compartmentalized, and able to get through the day, while some may be out of control. Ms. Brown discussed the need for training in trauma informed care. Individuals who provide trauma informed care meet the victim where he/she is and are able to work with the victim where they are and help the victim to make their own decisions at that point, which gives them the ability to take control back.

Trauma informed care can reduce re-traumitzation. During the reporting process, if an advocate is present with victim, he/she will be more likely to move forward with the reporting process. Trauma informed care is about supporting the victim. If the survivor has someone advocating for them, they are more likely to talk. Ms. Brown also suggested periodically reviewing reviewing the process for trauma informed care. Remember that each victim/survivor will act differently and each case will be different. Judy Casteele explained that the Virginia Sexual and Domestic Violence Action Alliance recommends trauma informed peer services, informing the victim of where the information goes when they make a report, knowing who the confidential reporting sources are on campus, supporting the victim’s decision, and holding offenders accountable. Ms. Casteele discussed that students are aware of the worst situation reported on campus and how it was handled and that can impact future reporting. She also discussed that services should be coordinated and consistent, integrating sexual assault policies with dating violence and stalking policies, providing prevention programs, considering the victim as new policies are developed, and including trends in those policies.
Dr. Plummer informed the committee members that there is information regarding trauma informed interviewing techniques and that there is literature out there for law enforcement and/or investigators to utilize in their investigations. Peter Blake asked who should be trained in trauma informed care and interviewing. Dr. Plummer explained that at Virginia Tech they are training people who are most likely to receive a report. The staff is trained by the Women’s Center and the Women’s Resource Program on how to respond. Virginia Tech also partners with psychology and sociology departments. They will bring in trainers and train 30-40 people at a time, including peer educators on response because they may receive a disclosure. Ms. Casteele added that trauma informed is a current buzz word and advocates have been providing trauma informed services for years. Local programs are a good place to ask for training.

Mike Maxey asked about longitudinal issues, such as situations where someone has been a victim, the case has been adjudicated and the perpetrator has been removed but other students are mistreating the victim over time. How can mental health support be set up for this? Sara Morales, JMU Student, said education is important for the students. When they train members for CARE (JMU program) they encourage them to become leaders on campus and train them to change the rape culture. This includes acknowledging a joke or inappropriate comment by a student and saying the joke or comment was inappropriate. Ms. Casteele talked about a student who said that if she reported the incident she would have to leave school because of the response on campus. Ms. Morales discussed the importance of educating students on how to talk to a survivor and creating a campus wide environment that is supportive for the victim. LaSonya Brown expressed the importance of having a safe place for the victim to go. Safety planning for the accused student is important as well. Dr. Plummer discussed interim measures and having a set of support structures in place on campus for all involved. Virginia Tech has a Title IX team that meets every two weeks to discuss case management for each case and how to intervene and have peers be helpful in a positive manor. VT wants to make sure that the students succeed and graduate.

Training was discussed by the committee for all involved in sexual assault cases. The Law Enforcement Subcommittee is also working on training issues. Everyone plays a role in making campuses safe for everyone. Dr. Plummer said that at the VT town hall meeting on sexual violence, the faculty asked about what their response should be when a student comes to them. They were informed to contact the Title IX Coordinator and the faculty did not like that. One question that lingers is how do institutions coach faculty to be an advisor and confidant while honoring an existing relationship with the student? What should they do when they receive information that is sensitive in nature? Elizabeth Griffin informed the subcommittee that DCJS looking at training for the investigation of the complaint, however that leaves out those not involved in the investigation side. There may be a place for this committee to have ideas for training the individuals involved in resolution and adjudication.

JMU student Charity O’Connor said that JMU’s Campus Coalition against Sexual Assault is looking at adding items to professors’ syllabi on resources for sexual violence, confidential and non confidential reporting sources, mental health, and medical help. She explained that students and professors do not understand Title IX and this is a good way to provide this information. Sara Morales, who is a training coordinator for CARE, said they are training students to talk with survivors, using a 24/7 hotline when classes are in session. They tell students they are there to listen and provide survivor with resources. As a survivor herself, she feels it is easier to talk with a student instead of a professor.

The subcommittee had questions regarding how JMU funded and ran the CARE program. CARE has the capacity to provide necessary resources to victims and they are working on trainings for bystander intervention, dating violence, and sexual violence. CARE receives administrative support; they have a faculty advisor who is the advocate on campus and a graduate student. They receive a budget from the institution, which is approved by the student activities board and they are not allowed to raise money. Their campus advocate is housed in the health center. Dr. Plummer said that the Women’s Center at VT
no longer triggers a Title IX report but they do trigger timely warnings if needed. Kim Johnson said the benefit of having a resource center is having one place where survivors can go for support and have someone to talk with.

Daphne Maxwell Reid asked if there are situations where men need to go to a women’s center and if calling it a women’s center is detrimental. JMU is looking into having a student advocacy center, which would be less gender specific. Ms. Morales agreed that there needs to be genderless language while keeping in mind that women are still the majority of victims. There need to be a conversation about male survivors and queer survivors. It is possible to call it a student advocacy center versus women’s center. LaWanza Lett-Brewington, the director of Old Dominion University’s (ODU) Women’s Center, explained that they have programming specifically for men at ODU. They are currently partnering with their counseling center and with Safe Space for LGBTQ victims. The Women’s Center has been on campus for forty years. Dr. Plummer said their women’s center has worked with men on campus and they provide counseling and support for male survivors. They will meet the victim anywhere on campus they feel safe to speak. Ms. Maxwell Reid said she supports gender neutrality and that all should be welcome.

Chief Dusseau asked how the subcommittee can create recommendations that fit institutions of all sizes. He said that community colleges do not have the same resources that the four-year institutions have. Northern Virginia Community College (NOVACC) has a part-time advocate and they provide her with a cell phone to take calls. Community colleges also have to duplicate services on multiple campuses. NOVACC has a women’s center on one campus and does not operate on all campuses. In addition, community college staff have multiple roles within their institutions. At least fifty percent of the professors are adjunct professors and some only teach a few hours per week. He also mentioned that student involvement and passion is not the same as at a four-year institution. Most students come for class and then go home. Ms. Casteele encouraged collaboration with local sexual violence programs. She explained that Washington and Lee University has a women’s center and they collaborate with Project Horizon to provide services the campus does not provide. Local programs can offer resources that do not exist on campus.

Ms. O’Connor asked about proposed legislation to require colleges to give all sexual assault cases to local law enforcement. She expressed her concerns that it is a reactionary approach that does not address the main problem and does not include primary prevention. She also mentioned that it may deter survivors from reporting if it mandated that schools report to law enforcement. Survivors need to have a choice in the matter of reporting to police and taking that choice away can be very overwhelming. Survivors may have bad experiences, hear stories about bad experiences, or not be provided options for resources. The discussion continued about proposed legislation. Ms. Nelson asked what if a student is sexually assaulted and decides not to go to law enforcement right away, how is evidence protected, can a rape kit be done and held. Ms. Griffin responded that the proposed legislation requiring college and university employees to report cases to law enforcement does not address the gap between the incident and when the survivor reports it to someone affiliated with an institution of higher education. Ms. Lett-Brewington says students can go to health services or to hospital for a rape kit and move forward later. This legislation does not require the student to report to law enforcement only that higher education employees report to law enforcement once learning of an incident from a student. A question was asked regarding whether information about PERKs can be included in student awareness/resources? Dr. Plummer said that that anyone who is trauma trained knows what to do and will tell the victim that he or she has 72hrs to have PERK completed. VT provides students with this information. This legislation does not stop the Title IX process; it only says that higher education must report to law enforcement.

Ms. Griffin provided background on the action items that were provided to subcommittee members. The Attorney General, as chair of the Task Force, has asked each subcommittee to prepare an interim report including 5-6 action items for future work. This report may be shared with members of the
General Assembly.
The subcommittee members determined that the following action items need to be addressed in the next quarter:

- Trauma-informed response for survivors
- Fair and equitable response to the accused
  - Due Process
  - Interim measures
  - Flag transcript if found responsible? If charged?
- Collaboration
  - Case management
  - Sharing information and resources between college or university, local advocacy groups, and crisis centers in specific cases
  - Statewide collaboration and sharing of resources between all institutions of higher education
- Training and education regarding reporting options and support services for survivors. Use technology, apps, and social media to raise awareness of how to respond when incident occurs.
- Establish standards or metrics for response services and staff (i.e. a certain number of counselors or confidential aides based on student population, ratio of law enforcement to students)
- Address and improve the gaps and collisions between federal mandates (OCR, VAWA, FERPA), Virginia law, and local law and practices, and college and university policies for response

The subcommittee members discussed the possibility of creating a database of all the people who went through the disciplinary process for severe sexual violence and were adjudicated. It should be noted that a sex offender registry for colleges would have a lower standard than the state sex offender registry and that community colleges do not have an admission process outside of signing up for classes. At this time, community colleges do not accept or deny admission into the college. Some are using the state’s sex offender registry to deny entry into school at this time.

Dr. Plummer will like to have the next meeting on January 7, 2015, the day before the Task Force meeting. The time and location need to be determined.

1:13pm Meeting adjourned