

## Addressing Gender-Based Violence on College Campuses:

How might we reduce violence, survivor trauma, and hold perpetrators accountable?

### Abstract

Gender-based violence is a prevalent problem on college campuses and has great impact students' academic performance, physical and mental health, and overall well-being. While there are currently numerous ideas and initiatives to address gender-based violence, it is difficult to understand which one(s) are effective, and to what extent. Title IX offices specifically are one approach in Universities, currently required by law, to support survivors of gender-based violence, yet in effect Title IX procedures retraumatizes survivors and does not lead to justice and accountability. I built a systems dynamics model to understand to what extent various policies would reduce violence and survivor trauma, while providing justice and accountability. The results suggest that improving the Title IX procedures on its own will not suffice; a holistic approach that also involves trauma reduction services and cultural change is necessary.

### Context and Introduction

1 in 5 female and 1 in 16 male<sup>1</sup> students experience sexual assault in college. Ever more have experienced some form of gender-based violence: stalking, sexual harassment, dating violence, sexual assault, etc. An instance of violence can disrupt one's life, impacting academics, work, housing security, and physical and mental health. Although all universities have a Title IX office which, on paper, does not tolerate gender-based violence, it rarely acts to support a survivor and/or hold the perpetrator accountable.

According to *On the Wrong Side*, most reports fail in their early stage before the Title IX office takes action due to unclear reporting policies, Title IX processes in a "black box" and understaffing, and survivor's high burden of proof. The cases that are enacted upon still have systemic barriers stacked against survivors. A USA News investigation of 56 large public Universities across 7 years (2014 – 2020) shows that, on average universities find 8 students found responsible for sexual misconduct every year with an annual enrollment of 34,600 students.

Moreover, in the current culture, inaction is not neutral: stigma against gender-based violence, lack of accommodations and understanding from professors, and lack of accessible physical and health services continues to retraumatize the survivor in the aftermath of violence and prevent healing, or detraumatization.

The purpose of this work is to develop a model which captures both the survivors in university Title IX systems and the trauma survivors experience, to understand how different strategies to address gender-based violence work in the system. This model can be used to test various policy

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<sup>1</sup> Bedera, 2024.

interventions, consider where they impact the system, where they move survivors in context of the Title IX system, and how much survivors heal or are traumatized.

## Methods

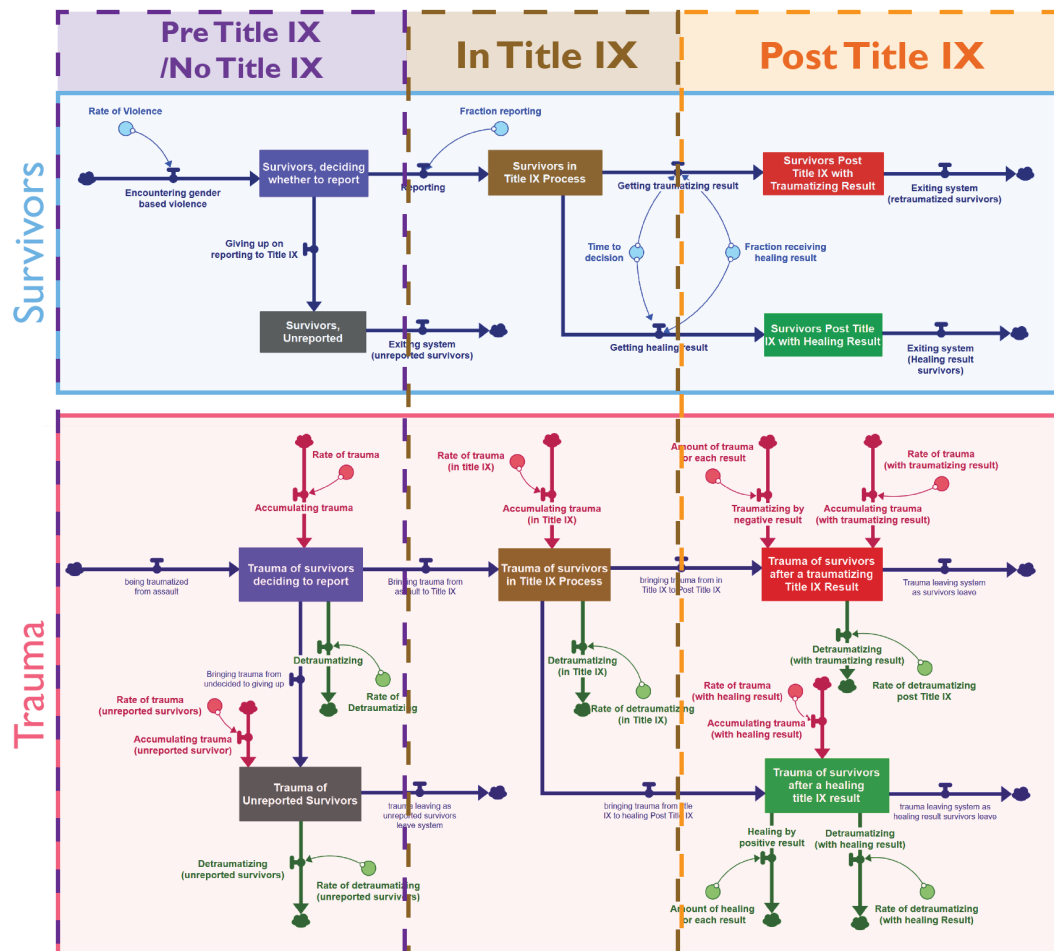
I built a STELLA systems dynamics model (see Figure 1) to explore the dynamics of survivors moving through the Title IX system and accumulating trauma. I based my parameters on insights from *On the Wrong Side*, and tested how gender-based violence is addressed on college campuses.

In the survivor flow, survivors could choose to report, or never report. Those who report move through the title IX process, and receive a result that is either traumatizing or healing for them. The data in my model captures the current dysfunctional state of gender-based violence lack of action in the Title IX system. While my model is in steady state, out of 100 acts of gender-based violence every month, 5.25 people report, and 0.262 people receive a meaningful healing result (3.1 survivors per year), which is roughly in line with the data reported in the USA News Investigation. Policy interventions impact the number of survivors going into each of the different stocks or the time to a Title IX decision.

In the trauma flow, in each stage of the survivor flow, survivors experience continued traumatization from their assault and healing. For example, survivors could be retraumatized by the stigma against sexual violence, the inaction of the Title IX system, or frequently encountering their perpetrator on campus. Survivors could heal if the campus is well-accommodating in their academic responsibilities or offers accessible counseling service.

While trauma is not straightforwardly quantifiable (see Caveat section), I put in parameters to estimate to what extent are survivors retraumatized or healed at each stage of the process relative to the other stages. I relied on *On the Wrong Side* to understand how current policies induce trauma or prevent healing, and put in parameters that captures the impact of the current policies. Policy interventions increase or decrease the amount of retraumatization or healing survivors experience at each step of the model.

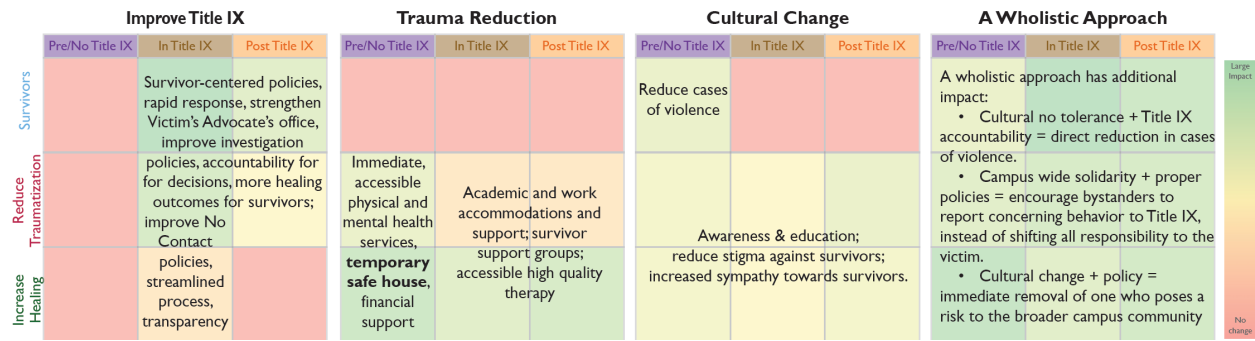
Each individual policy was tested by adding various STEP functions in the converters which the policy impacts, which represented a one-time increase of the effect. Each individual policy impacts a different set of converters. For example, improving the Title IX system would impact the survivors and trauma In Title IX and Post Title IX, but not the survivors and trauma before Title IX involvement.



**Figure 1.** STELLA model outline of the stocks and flows of survivors, trauma, and places of intervention (converters).

I first tested specific policies to test if the model’s response is reasonable and build confidence, gain familiarity with how the model responds, and think through which parts of the model is impacted by which policy levers. For example, strengthening the victim’s advocate’s office would impact the survivor flow (the lever in the model “fraction receiving healing results” would increase, “time to decision” would decrease), and reduce the retraumatization within the Title IX system (reduce “rate of trauma(in Title IX)”). See Appendix 1: Testing individual policy levers for a full analysis of every policy and its corresponding levers in my initial testing.

After testing individual policy levers, I considered larger strategies that generally encompasses the different types of policies. In other words, I combined the specific policies into 4 policy sets as shown in Figure 2. The colors indicate the intensity or effectiveness of the intervention on levers in a 3 by 3 matrix which mirrors Figure 1. To see the amount to which converters were changed to what extent for each policy set, see Appendix 1.

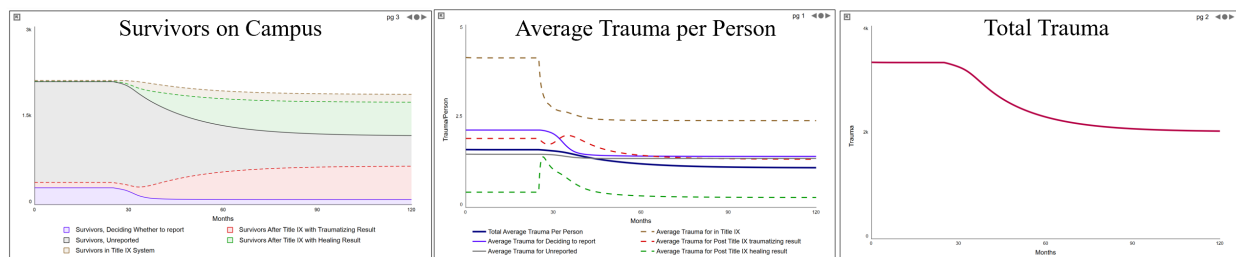


**Figure 2.** Categorization of policy interventions and the intensity of intervention.

## Results

### 1. Improving Title IX policy set includes:

1. Clear and transparent policies that tailor to survivor's needs;
2. Increased resources to the Title IX office and the Victim's Advocate's office;
3. Rapid response to meet survivor's immediate needs;
4. Investigation policies that maintains anonymity, does not systematically discount evidence, is accountable to distributed power instead of a centralized power;
5. Policy interventions that does not systematically benefits perpetrators and retraumatizes survivors (which, for example, the no contact policy currently does not);

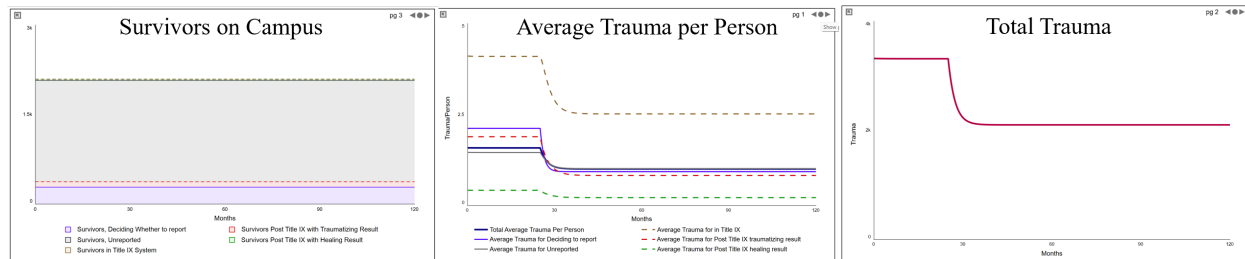


**Figure 3.** Results of improving Title IX system

Figure 3 suggests that improving the Title IX system leads to an increase in the amount of survivors who received a healing result. Because of the increase of survivors with positive results, the rate of violence, and by effect the total amount of survivors, has decreased slightly. The total cases decreased due to deterrence since the perpetrators knowing they might be held accountable, and the proper removal of perpetrators who harm a lot of people. Improving Title IX also has the largest impact on the average trauma per person for those in the Title IX system, but barely impacts those outside of the Title IX system. Given the current political climate, only creating policy changes can only go so far and a significant portion of survivors still receive a traumatizing result.

### 2. Trauma Reduction policy set includes:

1. Immediate physical, mental, sexual health services such as Plan B, HIV PEP, rape kits, crisis lines, emergency health care facilities;
2. Long term physical and sexual health care services, including access to abortion;
3. Accessible temporary safe houses to avoid living in vicinity of the perpetrator;
4. Mental health services such as therapy, counseling, or support groups;
5. Academic/work/other extracurricular accommodations;

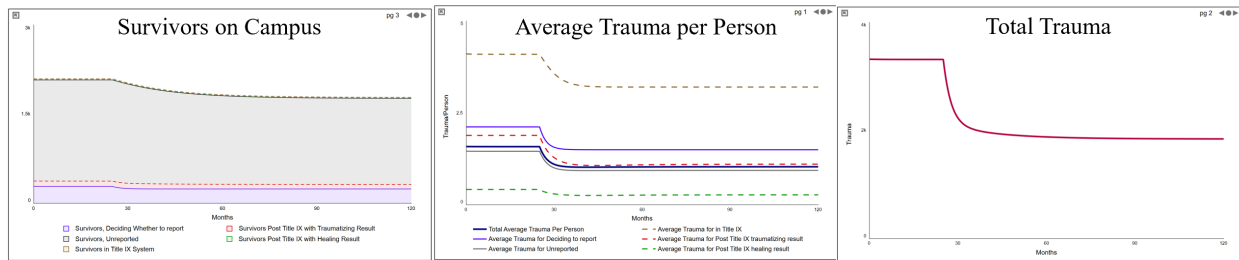


**Figure 4.** Results of reducing trauma

Figure 4 suggests that trauma reduction leads to a decrease in the average trauma per person for survivors at every step of the process. However, despite less trauma there is still the same amount of survivors on campus, and the number of cases of gender-based violence is not impacted. Moreover, as seen in Figure 2, trauma reduction has most effectiveness to increase the rate of detraumatization/healing, and less impact on decreasing the rate of traumatization. This is because while trauma reduction efforts leads to more resources available for survivors to heal (health services, therapy), trauma reduction does not address the stigma around survivors of gender-based violence that continues to retraumatizes the victims. In other words, without cultural change, even if one have a supportive therapist, if they do not feel comfortable disclosing the incident to their friends or if their professors do not believe them, they continue to be retraumatized on a daily basis. However, there are certainly overlaps: academic accommodations and safe houses, both reduces the source of trauma and provides space for the survivor to heal. While healing is important, the survivor would still have to experience the trauma first. If one reduces the level of retraumatization in the first place the survivor would not need to undergo as much healing.

### 3. Cultural change policy set includes:

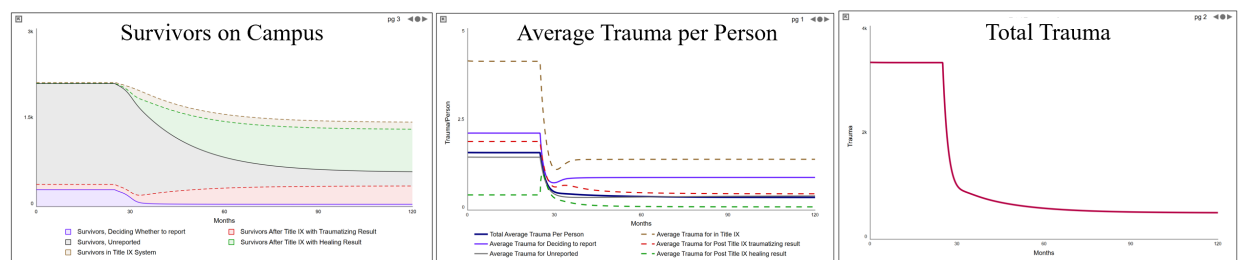
1. Campus wide awareness and education to render gender-based violence unacceptable in the community;
2. Bystander intervention training and action;
3. Empowerment self-defense, especially for vulnerable genders and sexualities;
4. Campus wide awareness and reduction of sexism, misogyny, and stigma against survivors;
5. Training among students to provide support for those encountering gender-based violence;



**Figure 5.** Results of cultural change

Figure 5 suggests that cultural change leads to a slight decrease in the total number of survivors on campus as a result of interventions 1 – 4. Cultural change also reduced the average amount of trauma per person as it impacts both rate of traumatization and rate of healing. This is because reduction in stigma leads to campus-wide support and understanding for survivors, which also facilitates a survivor’s healing. As it addresses both the rate of assault and trauma per person, the total trauma decreases more than just trauma reduction.

**A Holistic Approach** (Figure 6), which includes not only the individual components of the previous 3 tests, but also had greater impacts than simply the sum of the individual interventions. Good Title IX policies, without changing the current political climate, are not currently possible.



**Figure 6.** Results of holistic approach

For example, to reduce rates of traumatization and facilitate healing, in certain cases there needs to be an immediate removal of perpetrator. While this seems radical, it is not that far-fetched: currently, if a cis male student physically assaults another cis male student, and might pose a risk to the broader campus community, that student is put on an immediate interim suspension. Removing the perpetrator immediately sounds radical not because it is a violation of the perpetrator’s rights but because survivors of gender-based violence are not viewed as worth protecting. Therefore, only with enough cultural change could the policy of immediate removal of someone who poses a risk to the broader campus community be implemented.

With similar combination of interventions (see Figure 2), a lot more survivors could receive a healing result, experience much less traumatization and a lot more healing. Moreover, good Title IX policies, the large fraction of survivors reporting, and large fraction of survivors receiving positive results could have a greater impact in decreasing the rate of violence due to deterrence and removal of those who are a risk to the community.

## **Discussion**

Since this is a complex system, policy testing has suggested that no singular intervention can have a huge impact on the system. The only lever that comes close is reducing the rates of violence, however, realistically, there is no straightforward way to eliminate acts of violence within universities, where many come in having already been socialized to be prone to commit violence.

However, this model also demonstrates the amount of power universities do have within this constraint through changing the culture and policies to utilize the internal feedback loops. For example, policy and cultural change could lead to a larger percentage of people with positive Title IX results, increasing the amount of people who received healing results, which encourages more people to report, leading to a larger the percentage of survivors who choose to report, thus more people receiving positive results (positive feedback loop). With more survivors receiving positive results, there would be more perpetrators held accountable, which will deter violence and reduce the rate of gender-based violence (negative feedback loop).

Universities should not feel content that the problem is solved by the Title IX system status quo, which is ineffective. Policies should be improved through a lens that includes reducing trauma for survivors as well as justice and equity. Activists working on gender-based violence also should not neglect the Title IX system and label it as “punitive” and not solving the root of the problem, but should recognize the potential of a well-designed Title IX system to greatly reduce survivor trauma, decrease rates of violence, and help facilitate cultural change, especially given that many Title IX problems could be solved by simply changing policies – much more tangible than reducing trauma or changing culture.

Moreover, this model suggests the importance of keeping in mind that trauma is not impacted only by the healing (accessible counseling services), but also retraumatization (cultural stigma). It suggests the importance of universities not stopping their efforts by simply providing resources to survivors, but to change the culture as well.

## **Conclusion**

Addressing gender-based violence requires a wide variety of interventions. Conversely, there is no singular intervention that “solves” this problem. Just improving Title IX increases the amount of people receiving healing results, but also the amount of people receiving traumatizing results. Total cases declined slightly as more people were held accountable. Average trauma per person decreases little except for survivors who are in the Title IX system. Trauma Reduction reduces total trauma, but the same amount of people experiences violence. Cultural Change reduced the total number of cases slightly, while also having a significant impact on average trauma since survivors are retraumatized less. The results suggest that having a few programs is not enough to address all aspects of a survivor’s experience of gender-based violence. Rather, advocates and

universities should consider how individual policies work in conjunction with other policies, and how different policy sets work in conjunction with other policy sets.

### **Caveat**

The numeric value of trauma does not have a direct meaning. The retraumatization and detraumatization values are relative to one another to show how much more or less people are retraumatized / healed at each stage of the process. The results of this model could be used to estimate which interventions are more impactful than other interventions in what regards. The results could not be used as precise numbers of exactly how much trauma is reduced.

### **Future opportunities**

- Model survivors who experience violence repeatedly or experience retaliation while going through the Title IX process;
- Develop more precise numbers to model the number of survivors going through the process, amount of traumatization and healing, and how much policy interventions impact those metrics;
- Model university resources and how adjusting the resources available impact the policy interventions.

## Works Cited

- Bedera, Nicole. *On the Wrong Side : How Universities Protect Perpetrators and Betray Survivors of Sexual Violence*. First ed., Oakland, California, Univ of California Press, 8 Oct. 2024.
- Jacoby, Kenny. "Despite Men's Rights Claims, Colleges Expel Few Sexual Misconduct Offenders While Survivors Suffer." *www.usatoday.com*, 16 Nov. 2022, [www.usatoday.com/in-depth/news/investigations/2022/11/16/title-ix-campus-rape-colleges-sexual-misconduct-expel-suspend/7938853001/](https://www.usatoday.com/in-depth/news/investigations/2022/11/16/title-ix-campus-rape-colleges-sexual-misconduct-expel-suspend/7938853001/).

Appendix 1. Model Parameters for each policy intervention and policy set.

Testing Policy Sets	Rate of Violence (% decrease)	Impact of Reporting System Quality (0-10) Used to calculate the fraction reporting	Fraction receiving healing results (0-1)	Time to decision (% decrease)	Rate of trauma (for survivors deciding to report) (% decrease)	Rate of trauma (in Title IX) (% decrease)	Amount of trauma for each result (% decrease)	Rate of trauma (with traumatizing result) (% decrease)	Rate of trauma (unreported survivor) (% decrease)	Rate of trauma (with healing result) (%decrease)	Rate of detraumatizing (of survivors deciding to report) (% increase)	Rate of detraumatizing (in Title IX) (% increase)	Rate of detraumatizing (with traumatizing result) (% increase)
Original Numbers	0; base rate of violence: 100 people/month	0; base fraction reporting depends on % with positive result (<.1 for <35% positive result); max would be .5	0.05 + Fraction step	0; initial time to decision: 3 months	0; base: 0.5 fraction of initial trauma from assault	0; base rate: .7	0; base trauma from result: 1	0; base reate of trauma post title IX: 0.2	0; base rate: 0.4	0; base rate: .05	0; base rate of detraumatization: 0.05 low base rate => factor can be > 1 but rate still <1	0; base rate: 0.01	0; base rate: 0.2
Just Title IX	0	2	0.45	0.3	0	0.3	0.2	0.2	0	0.1	0	0	0
Survivor Resources & Trauma Reduction	0	0	0	0	0.4	0.1	0	0.1	0.1	0.2	6	3	1
Cultural Change	0.15	0	0	0	0.2	0.05	0	0.2	0.2	0.3	2	2	0.5
Wholistic Approach	0.15	2	0.65	0.3	0.6	0.5	0.2	0.5	0.6	0.6	7.5	7	1.2
Testing individual policy levers													
Reduce number of <b>people who experience violence</b> (cultural change, bystander intervention, self-defense, address substance use, sexual-dating violence education programs)	0.5					0.1							
<b>Improve reporting system</b> (distinguish between report/complaint, increase ease of reporting, streamline, maintain anonymity of reporting)		5											
<b>Strengthen Victim's Advocate's</b> Office or equivalent; (resources, power, etc)			0.3	0.5		0.3	0.2					20	
Enhanced <b>counseling</b> systems & Victim Support <b>resources</b> (survivor more likely get away from perpetrator but still bears the cost (have to move themselves), but can get support from professors/GPA etc)											4	20	1
Offer range of supportive <b>resources/accomodations</b> for students (housing, financial, job, academics); Instant action to remove perpetrator from survivor's presence, improved no contact policies, enforcement for <b>no</b> <b>contact</b> orders, anti-retaliation measures, maintain anonymity of survivor	0.1 (reduce retaliation; repeated offenders offend less people)					0.3		0.2		0.3		10	1
Improved <b>transparency</b> of Title IX system & processes to victim's advocates & campus			0.1			0.2						3	
<b>Better Title IX</b> System (alternative pathways, between IR & FI; listens to survivors story & need; different productive outcomes for perpetrators; shorten investigation time; restructure investigation process (redistribution of privilege & power, rid myth of insufficient evidence))			0.6	0.5		0.5	0.2	0.1					
<b>Campus wide awareness</b> & responsiblity around sexual assault and against misogyny (Bystander Intervention, survivor support, education about title IX system, build coalition among survivors, reject victim blaming, faculty/student training about identifying & supporting survivors)	0.15	.5 (more people would erport if the first person they talked about it with is supportive)	0.1		0.2 (how the first person they tell determine the healing/retraumatization of the survivor)	0.1		0.1	0.1	0.1	4	10	0.5
Offer immediate help and relief for survivors(sexual health services, 24/7 crisis/information hotlines, clear information)		0.2			0.5						6	5	0.25
Ultra fraction with positive result (all survivors get healing result)			1										
EAAA Program (reduce rape through physical self- defense techniques, explicitly reject victim blaming, traumatized less, for the entire community)	0.5				0.4					0.3	5	10	1.2
Improve reporting system + Victim's Advocate's		5	0.3	0.5		0.3	0.2					20	

Rate of detraumatizing (unreported survivors) (% increase)	Amount of healing for each result	rate of detraumatizing (with healing result) (% increase)	Result (Total Trauma)	Result Total Average Trauma Per Person	% with healing results	Rate of people encountering violence	Fraction of people reporting	Notes
0, base rate: 0.4	0.2 + STEP	0; base rate: 0.5	3310	1.58	0.00225	99.7	0.0185	
0	0	0	see poster					
0.3	0	0.3	see poster					
0.25	0	0.2	see poster					
0.6	0.2	0.4	see poster					
			1660	1.58				total trauma halved, but average trauma per person did not change
			3390	1.62				Just improving reporting system without changing internal title IX mechanisms just put more people in contact with title IX trauma
	0.2	0.3	2860	1.43				works a little on many levers to reduce trauma, drastically reduced in Title IX trauma; but a lot of people still haven't reported so those with healing results is still tiny
0.4		0.3	2220	1.06	0.00225			does not change any experience but did change level of trauma significantly - does not solve real issue of sexual assault or dysfunctional system
	0.2	0.3	2890	1.53	0.00225			Helped reduce trauma, especially after title IX process began; had a reduction of people experiencing trauma since repeated offenders are properly removed to protect the community
			3270	1.57	0.00507			Transparency alone does not do much
	0.3	0.2	1870	1.06	0.278	87	0.363	a more functioning system encouraged a lot more people to report & reduced average trauma for in Title IX by a lot
0.3		0.2	1860	1.05	0.0136	84.6	0.063	This intervention works on reducing many of the retraumatization levers as it reduces the stigma against sexual assault, as well as help survivors detraumatize as it opens up the conversations survivors have with friends & supporters to help them get through; campus wide awareness and bystander intervention would also lead to a decrease in the amount of survivors, while if people react positively to those who tell them would more likely lead to the srurvivors reporting, which is why it changed the impact of reporting system; survivor coalition, support could also help survivors build a stronger case against repeated offenders, as well as support survivors going through the reporting process, which & lead to a slight increase in chance of getting a healing result
0.1		0.1	2390	1.14	0.00267	99.8	0.0222	Yes, does reduce trauma, but effect is quite limiting
			922	0.878	0.625	49.7	0.907	surprisingly, there's still a lot of people without healing results; that's because a lot of people do not report in the first place, and some people are still within the title IX system. Also while it reduces sexual violence on campus by half, since healing result could mean with accountability among perpetrators, which removes them/educates them/deterrs them and other perpetrators from committing violence. However this alone is not enough to address the problem: many still don't report with good reason, the process is still grueling
1		0.6	790	0.75	0.00226	50	0.0185	Pretty powerful approach: if everyone on campus is trained to reject victim blaming & believe survivors, the effect on detraumatizing would be as effective, or even more effective, than counseling (while that has its merits, counseling is not for everyone and only is once a week) & supportive friends who can help support & solve everyday problems is more impactful. Moreover, EAAA halves the number of people who experience violence, and that alone reduces the trauma by a lot. However, does not address whehter perpetrators would actually face consequences/the inner workings of the Title IX system
	2	0.3	2260	1.17	0.156			this does a lot better than just victim's advocates office or enhanced reporting system-> now a lot more people are getting healing results to overcome trauma