

## NSHE Power-Based Violence Survey

### Consent and Description of Survey

Thank you for taking time to complete this survey. Your input will contribute to efforts to make a safer Nevada System of Higher Education (NSHE). We are interested in your attitudes, perspectives, and experiences about sensitive topics and possible experiences during your time as a student at [Institution].

More specifically, this survey deals with topics of power-based violence, sexual misconduct, and sexual assault.

- **Power-based violence** refers to any form of interpersonal violence intended to pressure, control, intimidate, or harm another person through the assertion of power over the person. This term includes, without limitation, dating violence, domestic violence, family violence, gender-based violence, violence based on sexual orientation or gender identity or expression, sexual misconduct, sexual assault, sexual harassment, sexual exploitation, stalking, and observing another person who is naked or engaging in sexual activity without that person's consent.
- **Sexual misconduct** is a subset of power-based violence and is broadly defined as the use of power or control to intimidate or harass another person through unwanted intimate violence. Examples of sexual misconduct include intimate partner violence and stalking. Sexual misconduct occurs in the absence of consent. There are questions in the survey that address sexual misconduct in greater detail.
- **Sexual assault** is a subset of power-based violence and is defined as any sexual activity that happens without consent. There are questions in the survey that address sexual assault in greater detail.

The [Institution] student wellness team aims to help students, faculty, and staff during difficult times. This survey is not a reporting tool. If you believe you need the assistance of the team or need to report, please contact your institution's Equal Opportunity & Title IX website, student wellness, or counseling center at the following links:

College of Southern Nevada (CSN): [Title IX](#); [Counseling Center](#)

Great Basin College (GBC): [Title IX](#); [Mental Wellness Resources](#)

Nevada State University (NSU): [Title IX](#); [Student Wellness Center](#)

Truckee Meadows Community College (TMCC): [Title IX](#); [Counseling Center](#)

University of Nevada Las Vegas (UNLV): [Title IX](#); [Student Wellness Center](#)

University of Nevada Reno (UNR): [Title IX](#); [Student Health Center](#)

Western Nevada College (WNC): [Title IX](#); [Student Wellness Services](#)

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**This is not a reporting tool.** However, if you wish to report an assault, you will also be linked to your Title IX website at the end of the survey.

Please answer honestly. **You can decline to answer any question in this survey.** Be assured that you will not be identified as a participant and your answers will be kept confidential. **Please do not forward your survey link to anyone else or your confidentiality could be compromised, and your data can be overwritten.**

You do not have to take this survey in one sitting. Your responses will save as you go. If you have any questions or concerns about the survey questions, please email [createam@unlv.edu](mailto:createam@unlv.edu) or [brad.marianno@unlv.edu](mailto:brad.marianno@unlv.edu).

If you have **technical** issues with the survey, please feel free to contact the Center for Research, Evaluation, and Assessment at 1-702-895-3011, Monday – Friday, 8am to 5pm.

## CONTENT NOTICE

The following survey includes questions about power-based violence, sexual misconduct, sexual assault, and related experiences. Some questions ask about personal experiences and may be emotionally difficult or distressing for some people.

Your participation is completely voluntary. You may skip any question, take a break, or stop the survey at any time without penalty. Choosing not to participate will not affect you in any way.

If you prefer not to continue, you may exit the survey now and you will not be contacted again to complete this survey during the current academic year. If at any point you experience distress, support resources are available to you and are listed throughout the survey and at the end.

**By clicking on the “I consent” box below, you are giving your permission to take the survey, and you are indicating that you are at least 18 years old.**

- ☐ I consent.
- ☐ I do not consent.

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## Survey Control Block

1. What is your age? \_\_\_\_\_ [Numeric input limit to integers 0-99]  
[IF age < 18; redirect to SURVEY EXIT with a message stating you must be 18 years or older to take this survey]
2. Please select your campus. If you attend multiple institutions, please select the one you consider your primary campus:
  - A. College of Southern Nevada (CSN)
  - B. Great Basin College (GBC)
  - C. Nevada State University (NSU)
  - D. Truckee Meadows Community College (TMCC)
  - E. University of Nevada Las Vegas (UNLV)
  - F. University of Nevada Reno (UNR)
  - G. Western Nevada College (WNC)[Collect response and use to pipe [Institution] into later items]
3. In the past year, did you take at least one course on campus (i.e., a face-to-face, in-person course)?
  - a. Yes
  - b. No

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## University Leadership and Resources Block

This section asks about your perceptions of your campus leaders.

4. (10 items) These questions address **your overall perception of campus leaders** at [university]. Your perceptions may or may not be based on your personal experience. **Trust your instincts.** Please tell us the extent to which you disagree or agree with the following statements:

[strongly disagree; disagree; neutral; agree; strongly agree]

- A. I think faculty (professors and instructors) are genuinely concerned about my welfare.
  - B. I think administrators (non-teaching staff) are genuinely concerned about my welfare.
  - C. I am happy to be at [Institution].
  - D. The faculty at this school treats students fairly.
  - E. The administrators at this school treat students fairly.
  - F. I feel safe at [Institution].
  - G. If a fellow student or I were sexually assaulted, I know where to go to get help.
  - H. I know procedures to address complaints of sexual assault.
  - I. I have confidence that administrators will address complaints of sexual assault fairly.
5. (5 items) These questions address **your perception** of more **specific behaviors** of leadership at [Institution]. Your perceptions may or may not be based on your personal experience. **Trust your instincts.** Please tell us the extent to which you disagree or agree with the following statements:

[strongly disagree; disagree; neutral; agree; strongly agree]

- A. [Institution] officials (administrators, public safety officers) should do more to protect students from harm.
  - B. If a crisis happened on campus, [Institution] would handle it well.
  - C. [Institution] responds too slowly in difficult situations.
  - D. [Institution] does enough to protect the safety of students.
  - E. There is a good support system on campus for students going through difficult times.
6. We are interested in your awareness of resources available at [Institution]. Please select the answer that best describes your interaction with the following services and centers (Select all that apply): {Replace with list of official names from the institution}

[I have never heard of this resource; I am aware of this resource; I have visited this resource's office or website; I have received services from this resource]

- A. Care Center
- B. Title IX Office
- C. Campus Police

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D. CAPS

E. Wellness/Medical Center

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## Power Based Violence University Response Block

These questions address your **perceptions** of **power-based violence** at [University]. **Power-based Violence** refers to any form of interpersonal violence intended to pressure, control, intimidate, or harm another person through the assertion of power over the person and refers to a wide range of unwanted behaviors including:

- Dating violence
- Family violence
- Gender-based violence
- Intimate partner violence
- Violence based on sexual orientation or gender identity or expression
- Sexual assault (unwanted sexual contact like groping, grabbing, and forced sex)
- Sexual harassment (catcalling, unwanted remarks about physical appearance that are sexual in nature, persistent sexual advances that are unwanted)
- Sexual exploitation (spreading sexual pictures or videos without consent, sex trafficking)
- Stalking
- Voyeurism (observing another person who is naked or engaging in sexual activity without that person's consent.

6. (9 items) If someone were to report an instance of **power-based violence** to a [Institution] authority, how likely is it that...

[not likely at all; a little likely; somewhat likely; most likely; extremely likely]

- A. [Institution] would take the report seriously
- B. The report would be accessible to **only** those at [Institution] who are privy to the information.
- C. [Institution] would take steps to protect the safety of the person making the report.
- D. [Institution] would take corrective action against the alleged offender(s).
- E. [Institution] would take steps to protect the person making the report from retaliation.
- F. Students would label the person making the report a troublemaker.
- G. The alleged offender(s) or their associates would retaliate against the person making the report.
- H. A faculty or staff member's annual evaluation would suffer if they were the person making the report.
- I. A student's grades would suffer if they were the person making the report.

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7. (4 items) If a student, staff member, or faculty member was formally accused of **power-based violence**, how likely is it that:

[not likely at all; a little likely; somewhat likely; most likely; extremely likely]

- A. [Institution] would take steps to protect the safety/reputation of the person **accused** of power-based violence during the investigation
- B. [Institution] would take corrective action against the **accused**.
- C. The educational achievement or career of the **accused** would suffer.
- D. [Institution] would take steps to make sure the investigation was fair.

8. (3 items) Please indicate the extent to which you agree or disagree with the following statements about power-based violence:

[strongly disagree; disagree; neutral; agree; strongly agree]

- A. **Power-based violence** is a problem at [Institution].
- B. I think I can do something about **power-based violence** at [Institution].
- C. There isn't much need for me to think about **power-based violence** at [Institution].

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## Training Block

9. (4 Items) The following behaviors could be initiated by someone known or unknown to the recipient, including someone with whom they are in a relationship.

Please indicate the extent to which you agree or disagree with the following statements:

[strongly disagree; disagree; neutral; agree; strongly agree]

- A. I can affect change if I witness a **power-based violence** situation. For example, if I see a **fellow student** involved in a power-based violence situation on campus, I would feel comfortable intervening in a safe way.

Please respond yes or no to the following statements: [yes; no]

- B. I would like to attend a program about preventing power-based violence.  
C. I have been or am currently involved in ongoing efforts to end power-based violence at [Institution].

<IF “yes” to 9.B., FLAG to redirect to resources at the conclusion of the survey>



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## Reporting Behavior Power Based Violence Block

These questions address your perceptions of **reporting power-based violence, specifically sexual misconduct and/or assault**, at [Institution]. Again, here are the definitions of sexual misconduct and sexual assault, a subset of power-based violence:

Sexual misconduct refers to a wide range of behaviors that are unwanted:

- Unwanted remarks about physical appearance related to a sexual nature (e.g., catcalling;
- Unwanted conversation with sexual innuendoes;
- Persistent sexual advances that are undesired;
- Spreading sexual pictures/photos/videos of an individual without consent;
- Unwanted touching, rubbing, or groping.

Sexual assault refers to a range of sexual behaviors that are unwanted and nonconsensual including unwanted oral, anal, or vaginal penetration or attempted penetration through force, threat of force, or while unable to give consent due to being incapacitated, passed out, unconscious, blackout drunk, or asleep

10. Since you have been a student at [Institution], have you had a fellow student tell you that they were the victim of an unwanted sexual experience?
- a) Yes
  - b) No
  - c) I don't know / Not sure
  - d) Decline to answer

11. Since you have been a student at [Institution], have you observed a situation that you believe was, or could have led to, a sexual assault?
- a) Yes
  - b) No
  - c) I don't know / Not sure
  - d) Decline to answer

<If yes, go to Item 12, else go to Item 13>

12. You indicated that you observed or may have observed a situation that could have potentially led to sexual assault. How did you respond to that situation? Please select all that apply:
- ☐ I separated the people involved in the situation
  - ☐ I asked the person who appeared to be causing the situation.
  - ☐ I confronted the person who appeared to be causing the situation
  - ☐ I created a distraction to cause one or more of the people to disengage from the situation.

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- ☐ I asked others to help diffuse the situation.
- ☐ I told someone in a position of authority about the situation.
- ☐ I considered intervening in the situation, but I could not safely take action.
- ☐ While considering the situation, I lost the opportunity to take action.
- ☐ I decided not to take action

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## Power Based Violence Consent and Intoxicants Block

<Trigger Warning Here?>

13. (5 items) For the following statements, there are no right or wrong responses. Please answer in a way that most accurately describes how you approach consent ranging from Never to Always. **Please note that there is a “Does not apply to me” option that you may use instead of “Never” if you feel that the statement is not applicable to your own personal experiences.**

[Never, Rarely, Sometimes, Often, Always, Does not apply to me]

- A. I have discussed sexual consent issues with my current (or most recent) partner at times **other than** during sexual encounters.
  - B. I have heard sexual consent issues being discussed by other students on campus.
  - C. Typically, I ask for verbal consent, so I know whether or not to continue.
  - D. Typically, I look for consent by making a sexual advance and waiting for a reaction, so I know whether or not to continue.
  - E. During a sexual encounter, I ask for consent multiple times.
14. Have you had consensual sex with someone in the past 12 months?
- a) Yes
  - b) No
  - c) Decline to answer

<If yes, go to Item 15, else go to Item 16>

15. (3 items) During the most recent time you had **consensual** sex within the past 12 months, did you

[Yes; No; Not sure]

- A. Drink alcohol?
- B. Use marijuana?
- C. Use other recreational drugs (not including prescriptions)?

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## Power Based Violence Victimization Screener Block

<Trigger warning here?>

16. (11 items) During your time as a student at [Institution], has anyone done the following to you either in-person or by phone, text message, email, or social media? **Please remember that all responses are confidential and will not be reported on the individual-level.**

[Yes; No; Decline to answer]

- A. Someone made sexual advances, gestures, comments, or jokes to me that were unwelcome.
- B. Someone used intimidation to force me into unwanted intimate behavior.
- C. Someone showed or sent sexual pictures, photos, or videos to me that were unwelcome.
- D. Someone spread sexual rumors to our about me.
- E. Someone watched or took photos or videos of me without consent when I was nude or having sex.
- F. Someone posted photos or videos of me on social media without my consent when I was nude or having sex (even if the photos or video were taken with consent).
- G. Someone committed intimate partner violence against me.
- H. Someone continued unwanted contact with me via texts, calls, social media, or email.
- I. Someone used location technology (eg. Airtag, gps device) to track my location without consent.
- J. Someone stalked me in person or virtually.
- K. Someone used friendship or manipulation to sexually traffic me.

<IF “Yes” to any flag for Incident Follow Up Block>

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## PBV Incident Follow Up

<Trigger warning here?>

You indicated that you had experienced at least one form of power-based violence in the last 12 months at [Institution]. If more than one incident occurred, please consider the incident that had the largest impact on you personally.

1. Where did the incident of power-based violence occur?
  - a) Campus dormitory or residence hall
  - b) Fraternity or sorority house
  - c) Other on-campus housing (e.g. apartments)
  - d) Other on-campus location (e.g. fitness center, library)
  - e) Off-campus location
2. When did this incident of power-based violence take place?
  - a) During the Summer 2026 semester (June – August 2026)
  - b) During the Spring 2026 semester (January – May 2026)
  - c) During the Fall 2025 semester (August – December 2025)
  - d) Prior to the Fall 2025 semester (before August 2025)
3. Which category **best** describes your relationship with the other person involved in the incident of power-based violence?
  - a) Another student at [Institution]
  - b) A faculty member or instructor at [Institution]
  - c) A staff member, coworker, or another employee at [Institution]
  - d) Roommate
  - e) Acquaintance or non-romantic friend
  - f) Current romantic partner
  - g) Ex-romantic partner
  - h) Casual or first date
  - i) Coworker or supervisor off campus
  - j) Family member
  - k) Complete stranger
  - l) Other (please specify but do not include names) \_\_\_\_\_
4. Did you tell anyone or report the incident of power-based violence?
  - a) Yes
  - b) No

<If “Yes,” go to Item 5, Else go to Item 6>

5. Did this incident of power-based violence affect your school work?
  - a) Yes, absolutely
  - b) Yes, somewhat

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- c) No, not at all
6. Did this incident of power-based violence make you consider leaving school or transferring to another institution?
- a) Yes, absolutely
  - b) Yes, somewhat
  - c) No, not at all
7. Did this incident of power-based violence involve (please select all that apply):
- ☐ The other person's use of alcohol
  - ☐ The other person's use of drugs
  - ☐ I do not know
8. Keeping in mind that you are in no way responsible for the incident of power-based violence, even if you had been drinking alcohol or using drugs, please answer the following questions about this incident of power-based violence at [Institution].  
[Yes; No; Maybe; Decline to answer]
- A. Just prior to the incident, had you been drinking alcohol?
  - B. Just prior to the incident, had you voluntarily been taking or using any drugs other than alcohol.
  - C. Just prior to the incident, had you been given a drug without your knowledge or consent?
9. In your opinion, what should [Institution] do to help you, or students like you, stay enrolled at the university when experiencing any form of power-based violence?

<Flag "PBV Incident Follow-Up" = Yes>

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## Intimate Partner Violence Victimization Screener Block

17. Do you currently have, or in the last 12 months have you had, a romantic or intimate partner?

- A. Yes
- B. No
- C. Decline to answer

<IF “No” or “Decline”, SKIP remainder of block >

The next section addresses your perception of interpersonal violence.

18. Have you experienced the following behaviors **at least once** with your partner within the past 12 months?

[Yes; No; Decline to answer]

- A. My partner insulted or cursed at me.
- B. My partner shouted or yelled at me.
- C. My partner stomped out of the room on house/apartment during a disagreement.
- D. My partner said something to spite me.
- E. My partner called me fat or ugly.
- F. My partner accused me of being a lousy lover.
- G. My partner destroyed something belonging to me.
- H. My partner threatened to hit or throw something at me.

19. Have you experienced any of the following behaviors at least once with your partner within the past 12 months?

- A. My partner insisted on vaginal, oral, or anal sex when I did not want to (but did not use physical force)
- B. My partner used verbal threats to make me have vaginal, oral, or anal sex.
- C. My partner used physical force to make me have vaginal, oral, or anal sex.

<IF “Yes” to any, flag for Incident Follow Up Block>

20. Have you experienced any of the following behaviors at least once with your partner within the past 12 months?

[Yes; No; Decline to answer]

- A. I have had a sprain, bruise, or small cut because of a fight with a partner.
- B. I have felt physical pain that still hurt the next day because of a fight with a partner.
- C. I have passed out from being hit by my partner in a fight.
- D. I have gone to a doctor because of a fight with a partner.
- E. I have needed to see a doctor because of a fight but didn’t actually go.
- F. I have had a broken bone from a fight with a partner.

<IF “Yes” to any, flag for Incident Follow Up Block>

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21. How many times has a casual, steady, or serious dating or intimate partner done the following to you with intent to harm during your time as a student at [Institution]?  
[Never, Once, Two or more times]

- A. Scratched or bit me with intent to do harm
- B. Pushed, grabbed, or shoved me with an intent to do harm
- C. Slammed me against a wall or held me against my will with intent to do harm.
- D. Physically twisted my arm.
- E. Tried to choke me.
- F. Slapped or hit me (with a hand or fist) with an intent to do harm.
- G. Threw something at me with an intent to do harm.
- H. Beat me up.
- I. Assaulted me with a knife or gun.
- J. Assaulted me with another weapon or object (e.g., baseball bat, frying pan).

<IF “Yes” to any, flag for Incident Follow Up Block>



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## IPV Incident Follow Up

<Trigger warning here?>

You indicated that you had experienced at least one form of intimate partner violence in the last 12 months at [Institution]. If more than one incident occurred, please consider the incident that personally impacted you the most.

<Check PBV Follow Up Flag. If YES, go to Item 0. Else, go to Item 1>

0. Is this the same incident of power-based violence that we followed up on previously?
  - a) Yes, this is the same incident.
  - b) No, this is a different incident

<If Yes, exit follow up and continue with next victimization screener, Else continue to Item 1>

1. Where did the incident of intimate partner violence occur?
  - a) Campus dormitory or residence hall
  - b) Fraternity or sorority house
  - c) Other on-campus housing (e.g. apartments)
  - d) Other on-campus location (e.g. fitness center, library)
  - e) Off-campus location
2. When did this incident of intimate partner violence take place?
  - a) During the Summer 2026 semester (June – August 2026)
  - b) During the Spring 2026 semester (January – May 2026)
  - c) During the Fall 2025 semester (August – December 2025)
  - d) Prior to the Fall 2025 semester (before August 2025)
3. Which category **best** describes your relationship with the other person involved in the incident of intimate partner violence?
  - a) Another student at [Institution]
  - b) A faculty member or instructor at [Institution]
  - c) A staff member, coworker, or another employee at [Institution]
  - d) Roommate
  - e) Acquaintance or non-romantic friend
  - f) Current romantic partner
  - g) Ex-romantic partner
  - h) Casual or first date
  - i) Coworker or supervisor off campus
  - j) Family member
  - k) Complete stranger
  - l) Other (please specify but do not include names) \_\_\_\_\_

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4. Did you tell anyone or report the incident of intimate partner violence?
  - c) Yes
  - d) No
5. Did this incident of intimate partner violence affect your school work?
  - d) Yes, absolutely
  - e) Yes, somewhat
  - f) No, not at all
6. Did this incident of intimate partner violence make you consider leaving school or transferring to another institution?
  - d) Yes, absolutely
  - e) Yes, somewhat
  - f) No, not at all
7. Did this incident of intimate partner violence involve (please select all that apply):
  - ☐ The other person's use of alcohol
  - ☐ The other person's use of drugs
  - ☐ I do not know
8. Keeping in mind that you are in no way responsible for the incident of intimate partner violence, even if you had been drinking alcohol or using drugs, please answer the following questions about this incident of intimate partner violence at [Institution].

[Yes; No; Maybe; Decline to answer]

  - D. Just prior to the incident, had you been drinking alcohol?
  - E. Just prior to the incident, had you voluntarily been taking or using any drugs other than alcohol.
  - F. Just prior to the incident, had you been given a drug without your knowledge or consent?
9. In your opinion, what should [Institution] do to help you, or students like you, stay enrolled at the university when experiencing any form of intimate partner violence?

<Flag IPV Follow-up = YES>

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## Unwanted Sexual Contact Victimization Screener Block

This next section is about **unwanted sexual experiences**. Your answers will be kept confidential. Please answer, as honestly as you are comfortable, about your experiences with **unwanted sexual contact** during your time as a student at [Institution].

22. (6 items) In the past 12 months, has anyone had any of the following types of sexual contact with you that you did not want (without your consent)?

[Yes; No; Decline to answer]

- A. Touching of a sexual nature (kissing, touching of private parts, grabbing, fondling, rubbing up against you in a sexual way, even if it is over your clothes)
- B. Oral sex (someone's mouth or tongue making contact with your genitals, your mouth or tongue making contact with someone else's genitals).
- C. Anal sex (someone putting their penis in your anus, putting your penis in someone's anus)
- D. Vaginal sex (penis to vagina, vagina to penis)
- E. Sexual penetration with a finger or an object (someone putting their finger or an object like a sex toy, bottle, or candle in your vagina or anus)
- F. Coerced me into being sexually available and/or active.

<IF "Yes" to any, flag for Incident Follow Up Block>

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## Unwanted Sexual Contact Incident Follow Up

You indicated that you had experienced at least one incident of unwanted sexual contact in the last 12 months at [Institution]. If more than one incident occurred, please consider the incident that personally impacted you the most.

<Check PBV or IPV Follow Up Flags. If YES, go to Item 0 and 0.1. Else, go to Item 1>

0. Is this the same incident of power-based violence that we followed up on previously?
  - c) Yes, this is the same incident.
  - d) No, this is a different incident
0. Is this the same incident of intimate partner violence that we followed up on previously?
  - e) Yes, this is the same incident.
  - f) No, this is a different incident

<If Yes to either, exit follow up and continue with Demographics, Else continue to Item 1>

1. Where did the incident of unwanted sexual contact occur?
  - f) Campus dormitory or residence hall
  - g) Fraternity or sorority house
  - h) Other on-campus housing (e.g. apartments)
  - i) Other on-campus location (e.g. fitness center, library)
  - j) Off-campus location
2. When did this incident of unwanted sexual contact take place?
  - e) During the Summer 2026 semester (June – August 2026)
  - f) During the Spring 2026 semester (January – May 2026)
  - g) During the Fall 2025 semester (August – December 2025)
  - h) Prior to the Fall 2025 semester (before August 2025)
3. Which category **best** describes your relationship with the other person involved in the incident of unwanted sexual contact?
  - m) Another student at [Institution]
  - n) A faculty member or instructor at [Institution]
  - o) A staff member, coworker, or another employee at [Institution]
  - p) Roommate
  - q) Acquaintance or non-romantic friend
  - r) Current romantic partner
  - s) Ex-romantic partner
  - t) Casual or first date
  - u) Coworker or supervisor off campus
  - v) Family member
  - w) Complete stranger
  - x) Other (please specify but do not include names) \_\_\_\_\_

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4. Did you tell anyone or report the incident of unwanted sexual contact?
  - e) Yes
  - f) No
5. Did this incident of unwanted sexual contact affect your school work?
  - g) Yes, absolutely
  - h) Yes, somewhat
  - i) No, not at all
6. Did this incident of unwanted sexual contact make you consider leaving school or transferring to another institution?
  - g) Yes, absolutely
  - h) Yes, somewhat
  - i) No, not at all
7. Did this incident of unwanted sexual contact involve (please select all that apply):
  - ☐ The other person's use of alcohol
  - ☐ The other person's use of drugs
  - ☐ I do not know
8. Keeping in mind that you are in no way responsible for the incident of intimate partner violence, even if you had been drinking alcohol or using drugs, please answer the following questions about this incident of unwanted sexual contact at [Institution].

[Yes; No; Maybe; Decline to answer]

  - G. Just prior to the incident, had you been drinking alcohol?
  - H. Just prior to the incident, had you voluntarily been taking or using any drugs other than alcohol.
  - I. Just prior to the incident, had you been given a drug without your knowledge or consent?
9. In your opinion, what should [Institution] do to help you, or students like you, stay enrolled at the university when experiencing any form of unwanted sexual contact?

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## Demographic Block

23. What is your race or ethnic origin? **Check all that apply.**

- ☐ Caucasian / White (e.g. English, German, Irish, Lebanese, Italian)
- ☐ African American / Black (e.g. Ethiopian, Haitian, Jamaican, Nigerian, Somali)
- ☐ Hispanic / Latina/o/x (e.g. Argentinian, Mexican, Spanish)
- ☐ Middle Eastern / North African (e.g. Afghani, Israeli, Pakistani)
- ☐ Asian American / Asian (e.g. Chinese, Filipino, Indian, Japanese, Korean, Vietnamese)
- ☐ Native Hawaiian/Pacific Islander (e.g., Chamorro, Hawaiian, Samoan)
- ☐ Prefer not to answer
- ☐ Something else not listed about (please specify) \_\_\_\_\_

24. What was your sex at birth?

- a) Male
- b) Female
- c) Don't know / Not sure
- d) Prefer not to respond

25. Which of the following best represents how you think of yourself?

- a) Straight, that is, not gay
- b) Gay
- c) Lesbian
- d) Bisexual
- e) Something else not listed above (please specify) \_\_\_\_\_

26. Do you consider yourself to be transgender?

- a) No
- b) Yes, Transgender, male-to-female
- c) Yes, Transgender, female-to-male
- d) Yes, Transgender, gender nonconforming
- e) Don't know / Not sure
- f) Prefer not to respond

27. Is English your primary language?

- a) Yes
- b) No

<IF "Yes" continue to Item 28, Else Item 29>

28. What is your primary language? \_\_\_\_\_

29. Are you an international student or an exchange student from another country?

DRAFT

- a) Yes
- b) No

30. Are you currently employed while in school? **Do not include volunteer work.**

- a) Yes, part-time
- b) Yes, full-time
- c) No, not employed

31. Are you receiving financial support from your parents or someone other than financial aid from [Institution]?

- a) Yes
- b) No

DRAFT

## Debrief and Conclusion

Thank you for participating. Your responses have been recorded. Your assessment of power-based violence and campus safety will help us act to make our institution a better place for everyone. There are resources available to you if you need to report sexual misconduct or assault, or if you need support. The [Institution] student wellness team aims to help students, faculty, and staff during difficult times. If you believe you need the assistance of the team, please contact your institution's Equal Opportunity & Title IX website or student wellness center at the following links:

College of Southern Nevada (CSN): [Title IX](#); [Counseling Center](#)

Great Basin College (GBC): [Title IX](#); [Mental Wellness Resources](#)

Nevada State University (NSU): [Title IX](#); [Student Wellness Center](#)

Truckee Meadows Community College (TMCC): [Title IX](#); [Counseling Center](#)

University of Nevada Las Vegas (UNLV): [Title IX](#); [Student Wellness Center](#)

University of Nevada Reno (UNR): [Title IX](#); [Student Health Center](#)

Western Nevada College (WNC): [Title IX](#); [Student Wellness Services](#)

If you have any questions or concerns about the survey questions, please email [createam@unlv.edu](mailto:createam@unlv.edu) or [brad.marianno@unlv.edu](mailto:brad.marianno@unlv.edu).

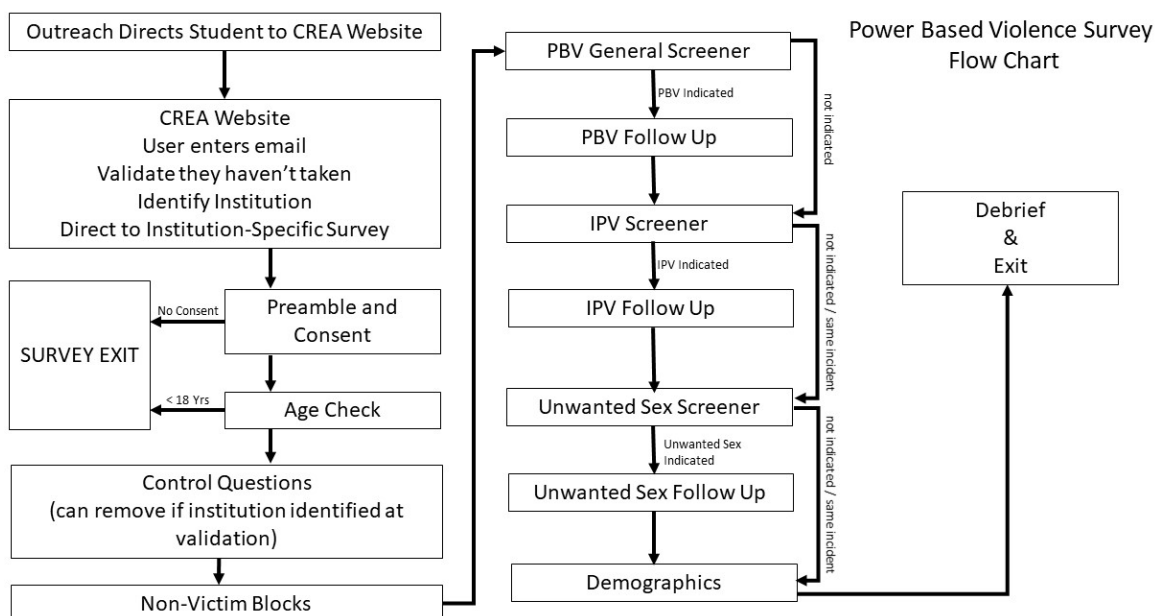
<If Item 9B FLAG is YES, redirect to training resource>

<EXIT Survey>



DRAFT

## SURVEY DESIGN LOGIC:



## NSHE Power-Based Violence Survey (Changes Tracked)

### Consent and Description of Survey

Thank you for taking time to complete this survey. Your input will contribute to efforts to make a safer Nevada System of Higher Education (NSHE). We are interested in your attitudes, perspectives, and experiences about sensitive topics and possible experiences during your time as a student at [Institution].

More specifically, this survey deals with topics of power-based violence, sexual misconduct, and sexual assault.

- **Power-based violence** refers to any form of interpersonal violence intended to pressure, control, intimidate, or harm another person through the assertion of power over the person. This term includes, without limitation, dating violence, domestic violence, family violence, gender-based violence, violence based on sexual orientation or gender identity or expression, sexual misconduct, sexual assault, sexual harassment, sexual exploitation, stalking, and observing another person who is naked or engaging in sexual activity without that person's consent.
- **Sexual misconduct** is a subset of power-based violence and is broadly defined as the use of power or control to intimidate or harass another person through unwanted intimate violence. Examples of sexual misconduct include intimate partner violence and stalking. Sexual misconduct occurs in the absence of consent. There are questions in the survey that address sexual misconduct in greater detail.
- **Sexual assault** is a subset of power-based violence and is defined as any sexual activity that happens without consent. There are questions in the survey that address sexual assault in greater detail.

The [Institution] student wellness team aims to help students, faculty, and staff during difficult times. This survey is not a reporting tool. If you believe you need the assistance of the team or need to report, please contact your institution's Equal Opportunity & Title IX website, student wellness, or counseling center at the following links:

[CSN: Title IX, Student Wellness Center](#)  
[GBC: Title IX](#)  
[Nevada State University: Title IX, Student Wellness Center](#)  
[TMCC: Title IX, Counseling Center](#)

UNLV: [Title IX, Student Wellness Center](#)  
UNR: [Title IX, Student Health](#)  
[and Counseling Services](#) WNC:  
[Title IX, Student Wellness](#)  
[Services](#)

[College of Southern Nevada \(CSN\): Title IX; Counseling Center](#)  
[Great Basin College \(GBC\): Title IX; Mental Wellness Resources](#)  
[Nevada State University \(NSU\): Title IX; Student Wellness Center](#)  
[Truckee Meadows Community College \(TMCC\): Title IX; Counseling Center](#)  
[University of Nevada Las Vegas \(UNLV\): Title IX; Student Wellness Center](#)  
[University of Nevada Reno \(UNR\): Title IX; Student Health Center](#)  
[Western Nevada College \(WNC\): Title IX; Student Wellness Services](#)

**This is not a reporting tool.** However, if you wish to report an assault, you will also be linked to your Title IX website at the end of the survey.

Please answer honestly. **You can decline to answer any question in ~~the~~[this](#) survey.** Be assured that you will not be identified as a participant and your answers will be kept confidential. **Please do not forward your ~~unique~~ survey link to anyone else or your confidentiality ~~will~~[could](#) be compromised, and your data can be overwritten.**

You do not have to take this survey in one sitting. Your responses will save as you go. If you have any questions or concerns about the survey questions, please email:

[PBVsurvey@nshe.nevada.edu](mailto:PBVsurvey@nshe.nevada.edu), [createam@unlv.edu](mailto:createam@unlv.edu) or [brad.marianno@unlv.edu](mailto:brad.marianno@unlv.edu).

If you have **technical** issues with the survey, please feel free to contact the ~~Nevada~~ Center for [Surveys, Evaluations Research, Evaluation](#), and [Statistics Assessment](#) at 1-800-929-9079/702-895-3011, Monday – Friday, ~~9 am~~[8am](#) to ~~9 pm~~[5pm](#), ~~Saturdays~~[5pm](#).

## **CONTENT NOTICE**

[The following survey includes questions about power-based violence, sexual misconduct, sexual assault, and ~~Sundays, 9 am~~ related experiences. Some questions ask about personal experiences and may be emotionally difficult or distressing for some people.](#)

[Your participation is completely voluntary. You may skip any question, take a break, or stop the survey at any time without penalty. Choosing not to ~~5 pm~~ participate will not affect you in any way.](#)

[If you prefer not to continue, you may exit the survey now and you will not be contacted again to complete this survey during the current academic year. If at any point you experience distress, support resources are available to you and are listed throughout the survey and at the end.](#)

**By clicking on the “I consent” box below, you are giving your permission to take the survey, and you are indicating that you are at least 18 years old.**

- ☐ I consent.
- ☐ I do not consent.

## Survey Control Block

4. What is your age? \_\_\_\_\_ [Numeric input limit to integers 0-99]  
[IF age < 18; redirect to SURVEY EXIT with a message stating you must be 18 years or older to take this survey]
5. Please select your campus ~~from~~. If you attend multiple institutions, please select the dropdown menu one you consider your primary campus:
- ~~a. UNR~~
  - ~~b. UNLV~~
  - ~~c. CSN~~
  - H. College of Southern Nevada (CSN)
  - I. Great Basin College (GBC)
  - ~~H.J.~~ Nevada State University (NSU)
  - ~~d. GBC~~
  - ~~e. TMCC~~
  - ~~f. WNC~~
  - K. For Truckee Meadows Community College (TMCC)
  - L. University of Nevada Las Vegas (UNLV)
  - M. University of Nevada Reno (UNR)
  - N. Western Nevada College (WNC)
- [Collect response and use to pipe [Institution] into later items]
- ~~2. In the current semester (Fall 2023), which option best describes your classes?~~
- ~~a. Completely online~~
  - ~~b. Hybrid (partially online; some classes are online and some are in-person)~~
6. Completely in-person (meeting past year, did you take at least one course on campus (i.e., a face-to-face at least once per week, in-person course)?
- a. Yes
  - b. No

## University Leadership and Resources Block

This section asks ~~questions~~ about your perceptions of your campus leaders.

5. (10 items) These questions address **your overall perception of campus leaders** at [university]. Your perceptions may or may not be based on your personal experience. **Trust your instincts.** Please tell us the extent to which you disagree or agree with the following statements: ~~(strongly disagree, disagree, neutral, agree, strongly agree)~~  
[strongly disagree; disagree; neutral; agree; strongly agree]
- J. I think faculty (professors and instructors) are genuinely concerned about my welfare.
  - K. I think administrators (non-teaching staff) are genuinely concerned about my welfare.
  - L. I am happy to be at [Institution].
  - M. The faculty at this school treats students fairly.
  - N. The administrators at this school treat students fairly.
  - O. I feel safe at [Institution].
  - P. If a ~~friend~~fellow student or I were sexually assaulted, I know where to go to get help.
  - Q. I know procedures to address complaints of sexual assault.
  - R. I have confidence that administrators will address complaints of sexual assault fairly.
7. (5 items) These questions address **your perception** of more **specific behaviors** of leadership at ~~[university]~~[Institution]. Your perceptions may or may not be based on your personal experience. **Trust your instincts.** Please tell us the extent to which you disagree or agree with the following statements: ~~(strongly disagree, disagree, neutral, agree, strongly agree)~~  
[University]  
[strongly disagree; disagree; neutral; agree; strongly agree]
- F. [Institution] officials (administrators, public safety officers) should do more to protect students from harm.
  - G. If a crisis happened on campus, [university][Institution] would handle it well.
  - H. [University][Institution] responds too slowly in difficult situations.
  - I. [Institution] does enough to protect the safety of students.
  - J. There is a good support system on campus for students going through difficult times.
8. We are interested in your awareness of resources available at [Institution]. Please select the answer that best describes your interaction with the following services and centers (Select all that apply): {Replace with list of official names from the institution}
- [I have never heard of this resource; I am aware of this resource; I have visited this resource's office or website; I have received services from this resource]
- F. Care Center
  - G. Title IX Office
  - H. Campus Police
  - I. CAPS

J. Wellness/Medical Center

## Power Based Violence University Response Block

These questions address your **perceptions of power-based violence** at [University]. **Power-based Violence** refers to any form of interpersonal violence intended to pressure, control, intimidate, or harm another person through the assertion of power over the person and refers to a wide range of unwanted behaviors including:

- Dating violence
- Family violence
- Gender-based violence
- Intimate partner violence
- Violence based on sexual orientation or gender identity or expression
- Sexual assault (unwanted sexual contact like groping, grabbing, and forced sex)
- Sexual harassment (catcalling, unwanted remarks about physical appearance that are sexual in nature, persistent sexual advances that are unwanted)
- Sexual exploitation (spreading sexual pictures or videos without consent, sex trafficking)
- Stalking
  - ~~I.A.] does enough to protect the safety of students.~~
  - ~~J.A. There is a good support system on campus for students going through difficult times.~~
- Voyeurism (observing another person who is naked or engaging in sexual activity without that person's consent.

9. (9 items) If someone were to report an instance of **power-based violence** to a [universityInstitution] authority, how likely is it that...←

[not at all likely; at all; a little likely; somewhat likely; most likely; extremely likely]

- J. [UniversityInstitution] would take the report seriously.
- K. The report would be accessible to **only** those at [UniversityInstitution] who are privy to the information.
- L. [UniversityInstitution] would take steps to protect the safety of the person making the report.
- M. [UniversityInstitution] would take corrective action against the alleged offender(s).
- N. [UniversityInstitution] would take steps to protect the person making the report from retaliation.
- O. Students would label the person making the report a troublemaker.
- P. The alleged offender(s) or their associates would retaliate against the person making the report.
- Q. A faculty or staff ~~members~~member's annual evaluation would suffer if they were the person making the report.
- R. A student's grades would suffer if they were the person making the report.



~~These questions address your perceptions of power-based violence at [University].~~ **Power-Based Violence** refers to any form of interpersonal violence intended to pressure, control, intimidate, or harm another person through the assertion of power over the person and refers to wide range of unwanted behaviors:

- ~~• Dating violence~~
- ~~• Domestic Violence~~ Family violence Gender-based violence
- ~~• Intimate partner violence~~
- ~~• Violence based on sexual orientation or gender identity or expression~~
- ~~• Sexual Assault (unwanted sexual contact like groping, grabbing, and forced sex), Sexual harassment (catcalling, unwanted remarks about physical appearance that are sexual in nature, persistent sexual advances that are unwanted)~~
- ~~• Sexual exploitation (spreading sexual pictures or videos without consent, sex trafficking)~~
- ~~• Stalking~~

**Voyeurism** (observing another person who is naked engaging in sexual activity without that person's consent)

9.10. (4 items) If a student, staff member, or faculty member was formally accused of **power-based violence**, how likely is it that... (not at all likely, a little likely, somewhat likely, most likely, extremely likely):

~~[University]~~[not likely at all; a little likely; somewhat likely; most likely; extremely likely]

- E. [Institution] would take steps to protect the safety/reputation of the person **accused** of power-based violence during the investigation.
- F. [UniversityInstitution] would take corrective action against the **accused**.
- G. The educational achievement or career of the **accused** would suffer.
- H. [UniversityInstitution] would take steps to make sure the investigation was fair.

40.11. (3 items) Please indicate the extent to which you agree or disagree with the following statements about power-based violence: ~~(strongly disagree, disagree, neutral, agree, strongly agree)~~

[strongly disagree; disagree; neutral; agree; strongly agree]

- D. **Power-based violence** is a problem at [UniversityInstitution].
- E. I think I can do something about **power-based violence** at [UniversityInstitution].
- F. There isn't much need for me to think about **power-based violence** at [UniversityInstitution].

## Training Block

10. (4 Items) The following behaviors could be initiated by someone known or unknown to the recipient, including someone with whom they are in a relationship. ~~Please indicate the extent to which you agree or disagree with the following statements: (strongly disagree, disagree, neutral, agree, strongly agree)~~

~~e. —Please indicate the extent to which you agree or disagree with the following statements: I can affect change if I witness a **power-based violence** situation. For example, if I see a **friend** involved in a power-based violence situation on campus, I would feel comfortable intervening in a safe way.~~

~~I can affect change if~~

~~[strongly disagree; disagree; neutral; agree; strongly agree]~~

- D. I can affect change if I witness a **power-based violence** situation. For example, if I see a **fellow student** involved in a power-based violence situation on campus, I would feel comfortable intervening in a safe way.

Please respond yes or no to the following statements: ~~(yes or, no)~~

- E. I would like to attend a program about preventing power-based violence.  
F. I have been or am currently involved in ongoing efforts to end power-based violence at [University/Institution].

<IF “yes” to 9.B., FLAG to redirect to resources at the conclusion of the survey>

## Reporting Behavior Power Based Violence Block

These questions address your perceptions of **reporting power-based violence, specifically sexual misconduct and/or sexual assault**, at [[University Institution](#)]. Again, here are the definitions of sexual misconduct and sexual assault, a subset of power-based violence:

Sexual misconduct refers to a wide range of behaviors that are unwanted:

- Unwanted remarks about physical appearance related to a sexual nature (e.g., catcalling);
- Unwanted conversation with sexual innuendoes;
- Persistent sexual advances that are undesired;
- Spreading sexual pictures/photos/videos of an individual without consent; ~~Unwanted touching, rubbing, or groping.~~
- Unwanted touching, rubbing, or groping.

Sexual assault refers to a range of sexual behaviors that are unwanted and nonconsensual:

including unwanted oral, anal, or vaginal penetration or attempted penetration through force, threat of force, or while unable to give consent due to being incapacitated, passed out, unconscious, blackout drunk, or asleep.

13. Since ~~you've~~you have been a student at [UniversityInstitution], have you had a ~~friend or acquaintance~~fellow student tell you that they were the victim of an unwanted sexual experience?

- e) Yes
- f) No
- g) I don't know~~/~~/ Not sure
- h) Decline to answer

14. Since ~~you've~~you have been a student at [UniversityInstitution], have you observed a situation that you believe was, or could have led to, a sexual assault?

- e) Yes
- f) No
- g) I don't know~~/~~/ Not sure
- h) Decline to answer

<If yes, go to Item 12, else go to Item 13>

~~h) a) Decline to answer~~

15. You indicated that you observed or may have observed a situation that could have potentially led to sexual assault~~;~~. How did you respond~~?~~ to that situation? Please select all that apply~~;~~:

- ☐ I separated the people involved in the situation~~;~~
- ☐ I asked the person who appeared to be ~~at risk if they needed help~~causing the situation.
- ☐ I confronted the person who appeared to be causing the situation~~;~~
- ☐ I created a distraction to cause one or more of the people to ~~disengaged~~disengaged from the situation.
- ☐ I asked others to help diffuse the situation.
- ☐ I told someone in a position of authority about the situation.
- ☐ I considered intervening in the situation, but I could not safely take ~~any~~ action.
- ☐ While considering the situation, I lost the opportunity to take action.
- ☐ I decided not to take action~~;~~

## Power Based Violence Consent and Intoxicants Block

16. (5 items) For the following statements, there are no right or wrong responses. Please answer in a way that most accurately describes how you approach consent ranging from Never to Always (~~Never, rarely, sometimes, often, always, does not apply to me~~). Please note that there is a "Does not apply to me" option that you may use instead of "Never" if you feel that the statement is not applicable to your own personal experiences.

[Never, Rarely, Sometimes, Often, Always, Does not apply to me]

- F. I have discussed sexual consent issues with my current (or most recent) partner at times **other than** during sexual encounters.
- G. I have heard sexual consent issues being discussed by other students on campus.
- H. Typically, I ask for verbal consent, so I know whether or not to continue.
- I. Typically, I look for consent by making a sexual advance and waiting for a reaction, so I know whether or not to continue.
- J. During a sexual encounter, I ask for consent multiple times.

~~These questions address your perceptions of sex, sexual misconduct, and sexual assault at [University].~~

- ~~3. Please tell us to what extent you disagree or agree that alcohol has the following effects: (strongly disagree, disagree, neutral, agree, strongly agree)~~
- ~~a. Makes other people sexier.~~
  - ~~b. Makes me sexier.~~
  - ~~c. Facilitates sexual opportunities.~~

~~16.17.~~ Have you had consensual sex with someone in the past 12 months?

- d) Yes
- e) No
- f) Decline to answer

<If yes, go to Item 15, else go to Item 16>

18. (3 items) During the most recent time you had **consensual** sex within the past 12 months, did you...:

[Yes, ~~no, or~~, No; Not sure]

- D. Drink alcohol?
- E. Use marijuana?
- F. Use other recreational drugs (not including prescriptions)?

~~These questions address your experience with power-based violence.~~

## Power Based Violence Victimization Screener Block

17. (11 items) During your time as a student at [University], ~~have you~~ Institution], has anyone done the following to ~~anyone you either~~ in-person or by phone, text message, ~~e-mail~~ email, or social media ~~and/or has anyone done the following to you??~~ **Please remember that all responses are anonymous confidential and will not be reported on the individual-level. Answer no in both columns if neither you nor your partner have engaged in these behaviors.**

[Yes; No; Decline] to answer ~~this question, please turn your phone sideways or scroll to the right.~~

L. Someone made sexual advances, gestures, comments, or jokes to me that were unwelcome.

~~i. I did this (yes/no)~~

~~ii. Someone did this to me (yes/no)~~

M. used intimidation to force me into unwanted intimate behavior.

~~iii. I did this (yes/no)~~

~~iv. Someone did this to me (yes/no)~~

N. showed or sent sexual pictures, photos, or videos to me that were unwelcome.

~~v. I did this (yes/no)~~

~~vi. Someone did this to me (yes/no)~~

O. spread sexual rumors to our about me.

~~vii. I did this (yes/no)~~

~~viii. Someone did this to me (yes/no)~~

P. watched or took photos or videos of ~~someone when they were nude or having sex~~ me without consent when I was nude or having sex.

~~ix. I did this (yes/no)~~

~~x. Someone did this to me (yes/no)~~



- Q. posted photos or videos of ~~someone when they were nude or having sex~~ me on social media without my consent when I was nude or having sex (even if the photos or video were taken with consent).
- ~~xi. I did this (yes/no)~~  
~~xii. Someone did this to me (yes/no)~~
- R. committed intimate partner violence against ~~someone~~ me.
- ~~xiii. I did this (yes/no)~~  
~~xiv. Someone did this to me (yes/no)~~
- S. continued unwanted contact with me via texts, calls, social media, or email.
- ~~d. I did this (yes/no)~~  
~~ii. Someone did this to me (yes/no)~~
- T. used location technology (eg. Airtag, gps device) to track ~~someone's~~ my location without consent.
- ~~i. I did this (yes/no)~~  
~~ii. Someone did this to stalk me (yes/no)~~
- U. ~~Stalked someone~~ in person ~~or~~ of virtually.
- ~~i. I did this (yes/no)~~  
~~ii. Someone did this to me (yes/no)~~
- V. used friendship or manipulation to sexually traffic ~~someone~~ me.

<IF “Yes” to any flag for Incident Follow Up Block>

## PBV Incident Follow Up

You indicated that you had experienced at least one form of power-based violence in the last 12 months at [Institution]. If more than one incident occurred, please consider the incident that had the largest impact on you personally.

10. Where did the incident of power-based violence occur?

- f) Campus dormitory or residence hall
- g) Fraternity or sorority house
- h) Other on-campus housing (e.g. apartments)
- i) Other on-campus location (e.g. fitness center, library)
- j) Off-campus location

k)

10.11. When did this (yes/no) incident of power-based violence take place?

- e) During the Summer 2026 semester (June – August 2026)
- f) During the Spring 2026 semester (January – May 2026)
- g) During the Fall 2025 semester (August – December 2025)
- h) Prior to the Fall 2025 semester (before August 2025)

12. Which category **best** describes your relationship with the other person involved in the incident of power-based violence?

- m) Another student at [Institution]
- n) A faculty member or instructor at [Institution]
- o) A staff member, coworker, or another employee at [Institution]
- p) Roommate
- q) Acquaintance or non-romantic friend
- r) Current romantic partner
- s) Ex-romantic partner
- t) Casual or first date
- u) Coworker or supervisor off campus
- v) Family member
- w) Complete stranger
- x) Other (please specify but do not include names) \_\_\_\_\_

13. Did you tell anyone or report the incident of power-based violence?

- g) Yes
- h) No

<If “Yes,” go to Item 5, Else go to Item 6>

14. Did this incident of power-based violence affect your school work?

- j) Yes, absolutely
- k) Yes, somewhat
- l) No, not at all

15. Did this incident of power-based violence make you consider leaving school or transferring to another institution?

j) Yes, absolutely

k) Yes, somewhat

l) No, not at all

~~iii. Someone did this to me (yes/no)~~

16. Did this incident of power-based violence involve (please select all that apply):

☐ The ~~next set~~ other person's use of alcohol

☐ The other person's use of drugs

☐ I do not know

~~14.~~17. Keeping in mind that you are in no way responsible for the incident of power-based violence, even if you had been drinking alcohol or using drugs, please answer the following questions ~~are about your current relationship status~~ this incident of power-based violence at [Institution].

[Yes; No; Maybe; Decline to answer]

J. Just prior to the incident, had you been drinking alcohol?

K. Just prior to the incident, had you voluntarily been taking or using any drugs other than alcohol.

L. Just prior to the incident, had you been given a drug without your knowledge or consent?

18. In your opinion, what should [Institution] do to help you, or students like you, stay enrolled at the university when experiencing any form of power-based violence?

<Flag "PBV Incident Follow-Up" = Yes>

## Intimate Partner Violence Victimization Screener Block

22. Do you currently have, or in the last 12 months have you had, a romantic or intimate partner?

D. Yes

E. No

F. Decline to answer

~~If you currently have a romantic~~ <IF “No” or “Decline”, SKIP remainder of block >

The next section addresses your perception of interpersonal violence.

23. intimate partner, Have you ~~engaged in any of~~ experienced the following behaviors **at least once** with your partner within the past 12 months? Please

[Yes; No; Decline to answer each behavior in terms of what you have done, as well as what your partner has done to you. Answer **no** in both columns if neither you nor your partner have engaged in these behaviors. **To answer this question, please turn your phone**

**sideways or scroll to the right.**

~~e. — Showed care to~~ My partner ~~even though we disagreed.~~

~~i. — I did this (yes/no)~~

~~ii. — Someone did this to me (yes/no)~~

~~f. — Explained own side of a disagreement.~~

~~i. — I did this (yes/no)~~

~~ii. — Someone did this to me (yes/no)~~

~~g. — Suggested a compromise to a disagreement.~~

~~i. — I did this (yes/no)~~

~~ii. — Someone did this to me (yes/no)~~

- ~~h. Said we could work out a problem.~~
  - ~~i. I did this (yes/no)~~
  - ~~ii. Someone did this to me (yes/no)~~
- ~~i. Agreed to try partner's solution to a disagreement.~~
  - ~~i. I did this (yes/no)~~
  - ~~ii. Someone did this to me (yes/no)~~
- ~~j. Showed respect for my partner's feelings about an issue.~~
  - ~~i. I did this (yes/no)~~
  - ~~ii. Someone did this to me (yes/no)~~

If you currently have a romantic or intimate partner, ~~The next section addresses your perception of interpersonal violence.~~

~~4. Have you engaged in any of the following behaviors **at least once** with your partner within the past 12 months? Please answer each behavior in terms of what you have done as well, as what your partner has done to you. Answer **no** in both columns if neither you nor your partner have engaged in these behaviors. **To answer this question, please turn your phone sideways or scroll to the right.**~~

- I. ~~insulted or cursed at~~ partner~~me~~.
  - ~~i. I did this (yes/no)~~
  - ~~ii. Someone did this to me (yes/no)~~
- J. My partner shouted or yelled at partner~~me~~.
  - ~~iii. I did this (yes/no)~~
  - ~~iv. Someone did this to me (yes/no)~~
- K. My partner stomped out of the room ~~or on~~ house/apartment during a disagreement.
  - ~~v. I did this (yes/no)~~
  - ~~vi. Someone did this to me (yes/no)~~
- L. My partner said something to spite partner~~me~~.
  - ~~vii. I did this (yes/no)~~
  - ~~viii. Someone did this to me (yes/no)~~
- M. ~~Called~~My partner called me fat or ugly.
  - ~~ix. I did this (yes/no)~~
  - ~~x. Someone did this to me (yes/no)~~
- N. ~~Accused~~My partner accused me of being a lousy lover.
  - ~~xi. I did this (yes/no)~~
  - ~~xii. Someone did this to me (yes/no)~~
- O. My partner destroyed something belonging to ~~the~~ partner~~me~~.
  - ~~xiii. I did this (yes/no)~~
  - ~~xiv. Someone did this to me (yes/no)~~
- P. My partner threatened to hit or throw something at partner~~me~~.
  - ~~b. I did this (yes/no)~~

~~ii. Someone did this to me (yes/no)~~

24. Have you ~~engaged in~~experienced any of the following behaviors at least once with your partner within the past 12 months?

~~Please answer each behavior in terms of what you have done, as well as what your~~

~~5. My partner has done to you. Answer no in both columns if neither you nor your partner have engaged in these behaviors. To answer this question, please turn your phone sideways or scroll to the right.~~

~~a. Threw something at partner that could hurt.~~

~~i. I did this (yes/no)~~

~~ii. Someone did this to me (yes/no)~~

~~b. Twisted partner's arm or hair.~~

~~i. I did this (yes/no)~~

~~ii. Someone did this to me (yes/no)~~

~~c. Pushed or shoved partner.~~

~~i. I did this (yes/no)~~

~~ii. Someone did this to me (yes/no)~~

~~d. Grabbed partner with intent to harm.~~

~~i. I did this (yes/no)~~

~~ii. Someone did this to me (yes/no)~~

~~e. Slapped partner.~~

~~i. I did this (yes/no)~~

~~ii. Someone did this to me (yes/no)~~

~~f. Beat up partner.~~

~~i. I did this (yes/no)~~

~~ii. Someone did this to me (yes/no)~~

~~g. Hit partner with something.~~

~~i. I did this (yes/no)~~

~~ii. Someone did this to me (yes/no)~~

~~h. Choked partner.~~

~~i. I did this (yes/no)~~

~~ii. Someone did this to me (yes/no)~~

~~i. Slammed partner against wall.~~

~~i. I did this (yes/no)~~

~~ii. Someone did this to me (yes/no)~~

~~j. Used knife or gun on partner.~~

~~i. I did this (yes/no)~~

~~ii. Someone did this to me (yes/no)~~

~~k. Burned or scalded partner on purpose.~~

~~i. I did this (yes/no)~~

~~ii. Someone did this to me (yes/no)~~

~~6. Have you engaged in any of the following behaviors **at least once** with your partner within the past 12 months? Please answer each behavior in terms of what you have done, as well as what your partner has done to you. Answer **no** in both columns if neither you nor your partner have engaged in these behaviors. **To answer this question, please turn your phone sideways or scroll to the right.**~~

- D. insisted on vaginal, oral, or anal sex when ~~my partner~~I did not want to (but did not use physical force).  
~~i. I did this (yes/no)~~  
~~ii. Someone did this to me (yes/no)~~
- E. My partner used verbal threats to make ~~partner~~me have vaginal, oral, or anal sex.  
~~iii. I did this (yes/no)~~  
~~iv. Someone did this to me (yes/no)~~
- F. My partner used physical force to make ~~partner~~me have vaginal, oral, or anal sex.  
~~v. I did this (yes/no)~~  
~~vi. Someone did this to me (yes/no)~~  
<IF “Yes” to any, flag for Incident Follow Up Block>

25. Have you ~~engaged in~~experienced any of the following behaviors at least once with your partner within the past 12 months?  
Please

~~[Yes; No; Decline to answer each behavior in terms of what you]~~

~~7. I have done, as well as what your partner has done to you. Answer **no** in both columns if neither you nor your partner have engaged in these behaviors. **To answer this question, please turn your phone sideways or scroll to the right.**~~

- G. had a sprain, bruise, or small cut because of a fight with a partner.  
~~i. I did this (yes/no)~~  
~~ii. Someone did this to me (yes/no)~~
- H. I have felt physical pain that still hurt the next day because of a fight with a partner.  
~~iii. I did this (yes/no)~~  
~~iv. Someone did this to me (yes/no)~~
- I. I have passed out from being hit ~~on the head~~ by my partner in a fight.  
~~v. I did this (yes/no)~~  
~~vi. Someone did this to me (yes/no)~~
- J. ~~Went~~I have gone to a doctor because of a fight with a partner.  
~~vii. I did this (yes/no)~~  
~~viii. Someone did this to me (yes/no)~~
- K. I have needed to see a doctor because of a fight but ~~didn't~~didn't actually go.  
~~ix. I did this (yes/no)~~  
~~x. Someone did this to me (yes/no)~~
- L. I have had a broken bone from a fight with a partner.  
~~xi. I did this (yes/no)~~  
~~xii. Someone did this to me (yes/no)~~

<IF “Yes” to any, flag for Incident Follow Up Block>

23.26. How many times has a casual, steady, or serious dating or intimate partner done the following to you with ~~the~~ intent to harm during your time as a student at [University Institution]?  
[Never, Once, Two or more times]

K. Scratched or bit me with ~~an~~ intent to do harm:

~~xiii. None~~

~~xiv. Once~~

~~xv. Two or more times~~

L. Pushed, grabbed, or shoved me with an intent to do harm:

~~xvi. None~~

~~xvii. Once~~

~~xviii. Two or more times~~

M. Slammed me against a wall or held me against my will with intent to do harm.

~~xix. None~~

~~xx. Once~~

~~xxi. Two or more times~~

N. Physically twisted my arm.

~~xxii. None~~

~~xxiii. Once~~

~~xxiv. Two or more times~~

O. Tried to choke me.

~~xxv. None~~

~~xxvi. Once~~

~~xxvii. Two or more times~~

P. Slapped or hit me (with a hand or fist) with an intent to do harm.

~~xxviii. None~~

~~xxix. Once~~

~~xxx. Two or more times~~

Q. Threw something at me with an intent to do harm.

~~xxxi. None~~

~~xxxii. Once~~

~~xxxiii. Two or more times~~

R. Beat me up.

~~b. None~~

~~ii. Once~~

~~iii. Two or more times~~

S. Assaulted me with a knife or gun.

~~i. None~~

~~ii. Once~~

~~iii. Two or more times~~

T. Assaulted me with another weapon or object (e.g., baseball bat ~~or~~, frying pan).



- ~~i. None~~
- ~~ii. Once~~
- ~~iii. Two or more times~~

~~This next section is not about~~ <IF “Yes” to any, flag for Incident Follow Up Block>

## IPV Incident Follow Up

           You indicated that ~~you but about your friends.~~

~~8. How many of your friends have done the following?~~

~~a. Made forceful attempts~~had experienced at sexual activity with a person they were dating

~~i. None~~at least one form of my friends

~~ii. One friend~~

~~iii. Two or more friends~~

~~iv. I don't know~~

~~b. Ever used physical force, such as hitting or beating, with a person they were dating.~~

~~i. None of my friends~~

~~ii. One friend~~

~~iii. Two or more friends~~

~~iv. I don't know~~

~~c. Insulted their dating~~intimate partner, ~~cursed violence in the last 12 months~~ at them, and/or ~~withheld affection.~~

~~i. None of my friends~~

~~ii. One friend~~

~~iii. Two or more friends~~

~~iv. I don't know~~

~~d. Talked about giving a date alcohol to get sex.~~

~~i. None of my friends~~

~~ii. One friend~~

~~iii. Two or more friends~~

~~iv. I don't know~~

~~e. Blackmailed someone with embarrassing information or photos/videos to get sex.~~

~~i. None of my friends~~

~~ii. One friend~~

~~iii. Two or more friends~~

~~iv. I don't know~~

~~f. Expected sex when they spent money on a date.~~

~~i. None of my friends~~

~~ii. One friend~~

~~iii. Two or more friends~~

~~iv. I don't know~~

~~g. Expected you to have sex with a friend on a date.~~

~~i. None of my friends~~

- ii. ~~One friend~~
- iii. ~~Two or more friends~~
- iv. ~~I don't know~~
- h. ~~Stalked someone in person or virtually.~~
  - i. ~~None of my friends~~
  - ii. ~~One friend~~
  - iii. ~~Two or more friends~~
  - iv. ~~I don't know~~
- i. ~~Used coercion or intimidation to elicit companionship or sex.~~
  - i. ~~None of my friends~~
  - ii. ~~One friend~~
  - iii. ~~Two or more friends~~
  - iv. ~~I don't know~~

~~For these next questions [Institution]. If more than one incident occurred, please answer as honestly as possible and remember your responses are completely confidential and will not be linked back to you. Note that these experiences may have been as a result of your: Catching someone off guard, or ignoring non-verbal cues or looks; Telling lies, threatening to end consider the relationship or to spread rumors about them, or verbally pressuring them; Showing displeasure, criticizing their sexuality or attractiveness, or getting angry; Taking advantage of them when they were too drunk, asleep, or out of it; Threatening to physically harm them or someone close to them; Using force, or having a weapon.~~

~~Have incident that personally impacted you done any of the following to another student while at [University]? most.~~

- j. ~~I fondled, kissed, or rubbed up against another person's body even though the person didn't want that.~~

~~i. Yes, more than once~~

~~<Check PBV Follow Up Flag. If YES, go to Item 0. Else, go to Item 1>~~

~~1. Is this the same incident of power-based violence that we followed up on previously?~~

~~ii. Yes, once~~

~~iii. No~~

~~iv. Unsure~~

~~g) I removed a person's clothes even though this is the person didn't want that same incident.~~

~~h) No, this is a different incident~~

<If Yes, exit follow up and continue with next victimization screener, Else continue to Item 1>

10. Where did the incident of intimate partner violence occur?

- k) Campus dormitory or residence hall
- l) Fraternity or sorority house
- m) Other on-campus housing (e.g. apartments)
- n) Other on-campus location (e.g. fitness center, library)
- o) Off-campus location

11. When did this incident of intimate partner violence take place?

- i) During the Summer 2026 semester (June – August 2026)
- j) During the Spring 2026 semester (January – May 2026)
- k) During the Fall 2025 semester (August – December 2025)
- l) Prior to the Fall 2025 semester (before August 2025)

12. Which category **best** describes your relationship with the other person involved in the incident of intimate partner violence?

- y) Another student at [Institution]
- z) A faculty member or instructor at [Institution]
- aa) A staff member, coworker, or another employee at [Institution]
- bb) Roommate
- cc) Acquaintance or non-romantic friend
- dd) Current romantic partner
- ee) Ex-romantic partner
- ff) Casual or first date
- gg) Coworker or supervisor off campus
- hh) Family member
- ii) Complete stranger
- jj) Other (please specify but do not include names) \_\_\_\_\_

13. Did you tell anyone or report the incident of intimate partner violence?

- ~~g)i) Yes, more than once~~
- ~~v.) Yes, once~~
- ~~h)j) No~~

14. Did this incident of intimate partner violence affect your school work?

- m) Yes, absolutely
- n) Yes, somewhat
- o) No, not at all
- ~~vi.) Unsure~~
- ~~k. I tried to sexually penetrate someone even though the person didn't want that (including~~

~~putting my finger or an object like a sex toy,  
bottle, or candle in their vagina or anus).~~

- ~~i. Yes, more than once~~
- ~~ii. Yes, once~~
- ~~iii. No~~
- ~~iv. Unsure~~

~~l. I sexually penetrated someone even though the person didn't want that (including putting my finger or an object like a sex toy, bottle, or candle in their vagina or anus).~~

15. Did this incident of intimate partner violence make you consider leaving school or transferring to another institution?

~~j)m)~~ \_\_\_\_\_ Yes, ~~more than once~~ absolutely

~~k)n)~~ \_\_\_\_\_ Yes, ~~once~~ somewhat

~~l)o)~~ No, not at all

~~i. — Unsure~~

~~m. I tried to make someone give me oral sex even though the person didn't want that.~~

16. Did this incident of intimate partner violence involve (please select all that apply):

☐ The other person's use of alcohol

☐ The other person's use of drugs

☐ I do not know

17. Keeping in mind that you are in no way responsible for the incident of intimate partner violence, even if you had been drinking alcohol or using drugs, please answer the following questions about this incident of intimate partner violence at [Institution].

~~i. — [Yes, more than once~~

~~ii. — Yes, once~~

~~iii. — No; Maybe; Decline to answer]~~

~~iv. — Unsure~~

~~n. I made someone give me oral sex even though the person didn't want that.~~

~~i. — Yes, more than once~~

~~ii. — Yes, once~~

~~iii. — No~~

~~iv. — Unsure~~

~~o. I tried to perform oral sex on someone even though the person didn't want that.~~

~~i. — Yes, more than once~~

~~ii. — Yes, once~~

~~iii. — No~~

~~iv. — Unsure~~

~~p. I performed oral sex on someone even though the person didn't want that.~~

~~q. — Yes, more than once~~

- ~~ii. Yes, once~~
- ~~iii. No~~
- ~~iv. Unsure~~
- ~~i. I coerced someone into being sexually available to my friends.~~
  - ~~i. Yes, more than once~~
  - ~~ii. Yes, once~~
  - ~~iii. No~~
  - ~~iv. Unsure~~

M. Just prior to the incident, had you been drinking alcohol?

N. Just prior to the incident, had you voluntarily been taking or using any drugs other than alcohol.

O. Just prior to the incident, had you been given a drug without your knowledge or consent?

18. In your opinion, what should [Institution] do to help you, or students like you, stay enrolled at the university when experiencing any form of intimate partner violence?

<Flag IPV Follow-up = YES>

## Unwanted Sexual Contact Victimization Screener Block

This next section is about **unwanted sexual experiences**. Your answers will be kept confidential. Please answer, as honestly as you are comfortable, about your experiences with **unwanted sexual contact** during your time as a student at [UniversityInstitution].

23. (6 items) In the past 12 months, has anyone had any of the following types of sexual contact with you that you did not want (without your consent)?

[Yes; No; Decline to answer]

- G. Touching of a sexual nature (kissing, touching of private parts, grabbing, fondling, rubbing up against you in a sexual way, even if it is over your clothes) ~~(Yes/No)~~
- H. Oral sex (~~someone's~~someone's mouth or tongue making contact with your genitals, your mouth or tongue making contact with someone ~~else's~~else's genitals) ~~(Yes/No)~~.
- I. Anal sex (someone putting their penis in your anus, putting your penis in ~~someone's~~someone's anus) ~~(Yes/No)~~
- J. Vaginal sex (penis to vagina, vagina to penis) ~~(Yes/No)~~
- K. Sexual penetration with a finger or an object (someone putting their finger or an object like a sex toy, bottle, or candle in your vagina or anus) ~~(Yes/No)~~
- L. Coerced me into being sexually available and/or active ~~to~~.

<IF "Yes/No" to any, flag for Incident Follow Up Block>

For the next set of questions, please think of the **most recent**



## Unwanted Sexual Contact Incident Follow Up

You indicated that you had experienced at least one incident of unwanted sexual contact ~~you~~ have had ~~during your time as~~ in the last 12 months at [Institution]. If more than one incident occurred, please consider the incident that personally impacted you the most.

<Check PBV or IPV Follow Up Flags. If YES, go to Item 0 and 0.1. Else, go to Item 1>

1. Is this the same incident of power-based violence that we followed up on previously?

i) Yes, this is the same incident.

~~h)j)~~ No, this is a **student at [University]**-different incident

1. Is this the same incident of intimate partner violence that we followed up on previously?

k) Yes, this is the same incident.

l) No, this is a different incident

<If Yes to either, exit follow up and continue with Demographics, Else continue to Item 1>

10. Where did ~~your most recent~~the incident of unwanted sexual contact occur?

~~k)p)~~ Campus dormitory or residence ~~hall~~hall

~~l)a)~~ Fraternity or sorority house

q) Fraternity or sorority house

~~m)r)~~ Other on-campus housing (e.g., apartments)

~~n)s)~~ Other on-campus location (e.g., fitness center, library)

~~f)a)~~ Off-campus location

t) ~~How long ago~~Off-campus location

11. When did this ~~most recent~~ incident of unwanted sexual contact take place?

~~i)m)~~ This year:During the Summer ~~2023-Fall 2023~~2026 semester (June – August 2026)

~~j)n)~~ Last academic year: Fall ~~2022~~-During the Spring ~~2023~~2026 semester (January – May 2026)

o) ~~Two or more years ago~~-During the Fall 2025 semester (August – December 2025)

~~k)p)~~ Prior to ~~Fall 2022~~the Fall 2025 semester (before August 2025)

12. Which category **best** describes your relationship with the other person involved in the incident of unwanted sexual contact?

~~y)kk)~~ Another student at [UniversityInstitution]

~~z)ll)~~ A faculty member or instructor at [UniversityInstitution]

~~aa)mm)~~ A staff member, coworker, or another employee at [UniversityInstitution]

~~m)a)~~ Roommate

nn) Roommate

~~bb)oo)~~ Acquaintance or ~~nonromantic~~non-romantic friend

~~n)a)~~ Current romantic partner

~~ee)pp)~~ ExCurrent romantic partner

~~dd)a)~~ Causal or first date

- ~~ee)a) Coworker or supervisor off campus~~
- ~~ff)a) Family member~~
- ~~gg)a) Complete stranger~~
- ~~qq) Other (please specify but do not include names) Ex-romantic partner~~
- rr) Casual or first date
- ss) Coworker or supervisor off campus
- tt) Family member
- uu) Complete stranger
- vv) Other (please specify but do not include names)

13. Did you tell anyone or report ~~your~~the incident of unwanted sexual ~~experience~~contact?

~~j)k)~~ Yes

~~j)l)~~ No

**9. If you did report, who did you tell about the incident? Please select all that apply.**

~~hh)a) Roommate~~

~~ii)a) Friend other than Roommate~~

~~o)a) Family member~~

a. Romantic Partner (other than the one who did this to you)

b. Title IX Officer

c. Residence Assistant or Residence Hall Staff (RA)

~~F.A. Campus Security or Campus Police~~

d. Campus Judiciary

e. City Police or County Sheriff's Office

f. On campus Medical Personnel or Facility

g. Off campus Medical Personnel or Facility

h. Faculty or Staff Member

i. Other (please specify)

14. Did this ~~most recent~~incident of unwanted sexual contact affect your school work?

~~j)a) Yes, absolutely~~

~~k)a) Yes, somewhat~~

~~l)a) No, not at all~~

p) Yes, absolutely

q) Yes, somewhat

r) No, not at all

~~12.1. Did the most recent unwanted sexual contact make you consider leaving school or transferring to another institution?~~

~~m)a) Yes, absolutely~~

~~n)a) Yes, somewhat~~

~~o)a) No, not at all~~

15. ~~Referring to the most recent~~this incident of unwanted sexual contact ~~during your time as a student at [University], did the incident involve... (Please select all that apply).~~make you consider leaving school or transferring to another institution?

p) Yes, absolutely

q) Yes, somewhat

r) No, not at all

16. Did this incident of unwanted sexual contact involve (please select all that apply):

☐ The other ~~person's~~person's use of alcohol

☐ The other ~~person's~~person's use of drugs

~~j. None of the above~~

☐ I ~~don't~~do not know

~~16.~~17. Keeping in mind that you are in no way responsible for the unwanted sexual contact that occurred, incident of intimate partner violence, even if you had been drinking alcohol or using drugs, please answer the following questions, which refer to the most recent about this incident during your time as a student of unwanted sexual contact at [University]:[Institution].

~~J. A. Just prior to the incident, had you been drinking alcohol?~~

~~[Yes; No; Maybe; Decline to answer]~~

P. Just prior to the incident, had you been drinking alcohol?

~~K. Q.~~ Just prior to the incident, had you voluntarily been taking or using any drugs other than alcohol?

~~i. Yes~~

~~ii. No~~

~~iii. Maybe~~

~~L.R.~~ Just prior to the incident, had you been given a drug without your knowledge or consent?

~~iv. Yes~~

~~v. No~~

~~Maybe~~

~~17.18.~~ In your opinion, what should [\[UniversityInstitution\]](#) do to help you, or students like you, stay enrolled at the university when experiencing any form of ~~power-based violence~~[unwanted sexual contact](#)?

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## Demographic Block

32. What is your race or ethnic origin? **Check all that apply.**

- ☐ Caucasian ~~/~~ / White (e.g., ~~English~~, German, Irish, Lebanese, Italian)
- ☐ African American ~~/~~ / Black (e.g., ~~Ethiopian~~, Haitian, Jamaican, Nigerian, Somali)
- ☐ Hispanic ~~/Latino/a~~ / Latina/o/x (e.g., ~~Argentinian~~, Mexican, Spanish)
- ☐ Middle Eastern ~~/~~ / North African (e.g., ~~Afghani~~, Israeli, Pakistani)  
~~k. Native American/Alaskan Native (e.g., Cherokee, Choctaw, Aleut, Eskimo)~~
- ☐ Asian American ~~/~~ / Asian (e.g., ~~Chinese~~, Filipino, Indian, Japanese, Korean, Vietnamese)
- ☐ Native Hawaiian/Pacific Islander (e.g., Chamorro, Hawaiian, Samoan)
- ☐ Prefer not to answer
- ☐ Something else not listed ~~above~~ about (please specify) \_\_\_\_\_

33. What was your sex at birth? ~~Was it male or female?~~

- e) Male
- f) Female
- g) ~~Don't~~ Don't know ~~/~~ / Not sure
- h) Prefer not to respond

34. Which of the following best represents how you think of yourself?

- f) Straight, that is, not gay
- g) Gay
- h) Lesbian
- i) Bisexual
- j) Something else not listed above (please specify) \_\_\_\_\_

~~l. I don't know the answer~~

~~g) a) Prefer not to respond~~

35. Do you consider yourself to be transgender?

- ~~h) g)~~ g) No
- ~~h) h)~~ h) Yes, Transgender, male-to-female
- ~~h) i)~~ i) Yes, Transgender, female-to-male
- ~~h) j)~~ j) Yes, Transgender, gender nonconforming
- ~~h) k)~~ k) ~~Don't~~ Don't know ~~/~~ / Not sure
- ~~l) l)~~ l) ~~Prefer not to respond~~
- Refused

36. Is English your primary language?

- c) Yes
- d) No

~~If English~~ <IF “Yes” continue to Item 28, Else Item 29>

37. What is ~~not~~ your primary language, ~~what is your primary language?~~ \_\_\_\_\_

38. Are you an international student or an exchange student from another country?

- c) Yes
- d) No

39. Are you currently employed while in school? **Do not include volunteer work.**

- d) Yes, part-time
- e) Yes, full-time
- f) No, not employed

40. Are you receiving financial support from your parents or someone other than financial aid from [UniversityInstitution]? \_\_\_\_\_

- c) Yes
- d) No

## Debrief and Conclusion

Thank you for participating. Your responses have been recorded. Your assessment of power-based violence and campus safety will help us act to make our institution a better place for everyone. There are resources available to you if you need to report sexual misconduct or assault, or if you need support. The [UniversityInstitution] student wellness team aims to help students, faculty, and staff during difficult times. If you believe you need the assistance of the team, please contact your institution'sinstitution's Equal Opportunity & Title IX website or student wellness center at the following links:

- CSN: Title IX, Student Wellness Center  
GBC: Title IX

College of Southern Nevada (CSN): Title IX; Counseling Center

Great Basin College (GBC): Title IX; Mental Wellness Resources

Nevada State University: Title IX, Student Wellness Center (NSU): Title IX; Student Wellness Center

Truckee Meadows Community College (TMCC: Title IX, Counseling Center): Title IX; Counseling Center

UNLV: Title IX, Student Wellness Center  
UNR: Title IX, Student Health and Counseling Services WNC:  
Title IX, Student Wellness Services

**Your responses have not yet been submitted. You must go to the next screen to submit your responses.**

**FINAL STEP: Please click ">" below to submit your survey responses.**

[University of Nevada Las Vegas \(UNLV\): Title IX; Student Wellness Center](#)

[University of Nevada Reno \(UNR\): Title IX; Student Health Center](#)

[Western Nevada College \(WNC\): Title IX; Student Wellness Services](#)

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[If you have any questions or concerns about the survey questions, please email \[createam@unlv.edu\]\(mailto:createam@unlv.edu\) or \[brad.marianno@unlv.edu\]\(mailto:brad.marianno@unlv.edu\).](#)

[<If Item 9B FLAG is YES, redirect to training resource>](#)

[<EXIT Survey>](#)