

# “Call for Help Immediately”: A Discourse Analysis of Resident Assistants’ Responses to Sexual Assault Disclosures

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## Abstract

Formal support providers can play a critical role in sexual assault survivors’ well-being (e.g., providing resource referrals). In a university setting, resident assistants (RAs) are key support providers with a unique relationship to survivors based on their dual roles as help-provider and peer. We examined 305 RAs’ responses to student sexual assault disclosure scenarios. Employing a critical discourse analysis, we identified four discourses used by RAs in their discussion of resources: controlling, gatekeeping, minimizing, and empowering. Due to power dynamics between RAs and residents, we conclude that empowering discourses would facilitate survivors’ access to other resources (e.g., sexual assault center).

## Keywords

sexual assault, college, social support

Sexual assault continues to be a substantial problem on college campuses (Fedina, Holmes, & Backes, 2018; Fisher, Cullen, & Turner, 2000). Students who experience sexual assault report devastating psychological and educational consequences (e.g., depression, suicidality, low GPA, withdrawal from school; Chang et al., 2015; Kaltman, Krupnick, Stockton, Hooper, & Green, 2005; Jordan, Combs, & Smith, 2014; Mengo & Black, 2016). Formal support providers can play a critical role in

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survivors' well-being after an assault. Across campuses, resident assistants (RAs) are frequently positioned as key support providers for students in crisis; with job roles that include providing emotional and material support, RAs can have a profound effect on students' lives and well-being (Blimling, 2003). There is a strong body of research examining how formal support providers outside the campus community respond to sexual assault survivors who seek help (e.g., police officers, health care providers; see Campbell, 2008), but less is known about how peer support providers, such as RAs, respond to disclosures and the implications of those responses. Using a critical discourse analysis, the purpose of the current study is to examine how RAs communicate about formal supports for sexual assault (e.g., sexual assault centers, reporting options) with survivors following a disclosure.

### **RAs' Role as Support Providers**

RAs are an essential source of support in the campus community. RAs have been described as having "one of the most comprehensive roles in the student affairs division. No student problem escapes the RA's involvement" (Blimling, 2003, p. 18). RA duties include building relationships with students and creating inclusive and welcoming communities (Blimling, 2003). RAs are also expected to understand and follow institutional policies, serving as a role model for other students (Blimling, 2003). However, one of the most central RA roles is assisting students in crisis. RAs are often the "first responders" for students in crisis—responsible for recognizing problems, providing immediate crisis intervention, and referring students to resources on campus that can provide expert, ongoing support (e.g., counseling centers, health services, sexual assault advocates; Paylo, Protivnak, Choi, & Walker, 2017; Reingle, Thombs, Osborn, Saffian, & Oltersdorf, 2010; Taub & Servaty-Seib, 2010). RAs are not expected or qualified to provide mental health counseling, so understanding campus resources and making informed referrals is one of the most important responses to students in crisis (Paylo et al., 2017; Taub & Servaty-Seib, 2010).

In recent years, federal and institutional policy increasingly position RAs as formal support providers for sexual assault survivors (Letarte, 2014). For instance, housing staff are considered Campus Security Authorities under the Clery Act, responsible for reporting aggregate, nonidentifying information about known sexual assaults to campus officials (U.S. Department of Education, Office of Postsecondary Education, 2016). Title IX guidance from the Department of Education's Office for Civil Rights (OCR) under the Obama Administration also identified RAs as potential Responsible Employees, required to report any sexual assault disclosures to a university official and provide students who disclose with information about reporting options and resources (Lhamon, 2014). Although the current acting assistant secretary for civil rights, Candice Jackson, has rescinded 2011 and 2014 guidance (Jackson, 2017), institutions are still required to designate Responsible Employee positions under OCR 2001 Title IX guidance, and most institutions have already done so for RAs. RAs play a vital role in college and university sexual assault response systems, and their primary duty includes ensuring that students in crisis are

connected to resources that can offer more specific and ongoing support (e.g., victim advocacy, counseling).

### *Importance of Support Providers' Responses*

Formal support providers can—and do—respond to survivors' disclosures in positive and negative ways (Campbell, 2008; Ullman, 1999, 2010). Negative, unsupportive responses include blaming survivors for the assault, communicating doubt about the legitimacy or severity of the assault, and controlling survivors' decisions (Ullman, 2000). These responses are often considered secondary victimization (Campbell, 2008)—retraumatizing assault survivors, exacerbating psychological harms, and discouraging help-seeking (Ahrens, 2006; Orchowski & Gidycz, 2015; Orchowski, Untied, & Gidycz, 2013; Ullman & Relyea, 2016). Positive responses, however, can help survivors' coping and psychological well-being (Borja, Callahan, & Long, 2006; Orchowski et al., 2013; Peter-Hagene & Ullman, 2014; Ullman, 1996a, 1996b). Positive, supportive responses include providing emotional support, such as believing and validating the survivor (Ullman, 2000).

Supportive responses also include providing material support, such as offering information about resources and discussing reporting options (Ullman, 2000). For instance, colleges and universities across the United States have instituted sexual assault centers and victim advocacy programs (Richards, 2019), so RAs may refer survivors to such services. In addition, RAs may inform survivors about campus counseling centers or health centers. Under university mandatory reporting policies, many RAs would be required to report the sexual assault disclosure to the university and/or police, so they may also discuss what such reporting processes would entail. RAs receive extensive training before and during their service, and RA training is increasingly covering the topic of sexual assault and preparing RAs to assist students who have experienced sexual assault (Bowman & Bowman, 1995; Koch, 2012).

College students' desire for services is associated with their likelihood to disclose sexual assault to university authorities (Demers, Roberts, Bennett, & Banyard, 2017; Moore & Baker, 2018). Therefore, it is important to consider whether RAs are discussing resources with students who disclose assault. However, *the way* that RAs communicate with survivors about resources may also matter. For instance, the same type of response (e.g., identifying a resource or discussing reporting options) can have a different effect on a survivor depending on the motivation and delivery of that response. Material aid—typically considered as a positive response—can be experienced as a negative response when the support provider delivers the information in a way that feels unhelpful or uncomfortable (e.g., dismissive, controlling; Ahrens, Cabral, & Abeling, 2009; Dworkin, Newton, & Allen, 2016). However, support providers may not understand that the way information about resources is presented after a disclosure can be harmful for survivors (Sit & Schuller, 2018). Thus, it is important to examine the discourses that take place between a survivor and a support provider during a disclosure interaction—considering not just what is said, but how and why it is said.

## Critical Discourse Analysis of Support Providers' Responses

The purpose of a critical discourse analysis is to understand the way that “social power, abuse, and inequality are enacted, reproduced, legitimated, and resisted by text and talk in the social and political context” (van Dijk, 2015, p. 466). Identifying how language in communicative interactions exposes and creates dominance and inequality can help researchers to better understand and challenge such social inequalities (van Dijk, 1993, 2015). A common focus of critical discourse analysis is the language and discourse used by powerful groups and institutions: for example, how people in positions of power control and communicate information and how this affects others' experiences, beliefs, and actions (van Dijk, 1993, 2015).

When a survivor discloses an assault, formal support providers are often in a position of power—socially and institutionally. For example, RAs are granted institutional authority through the nature of their position and generally receive more extensive training on institutional policies and resources (Bowman & Bowman, 1995; Koch, 2012), which means they may also have (and control) information about sexual assault policies, reporting processes, and resources that their residents do not. Through a critical discourse analysis, we explicitly aim to understand how RAs' language and communication when discussing formal resources (e.g., sexual assault center, counseling center, reporting options) following a variety of sexual assault disclosures reflects and reproduces positions of dominance and beliefs about sexual violence.

## Method

### *Procedures and Participants*

Data were collected from undergraduate RAs working at a large Midwestern university as part of a larger study examining RAs' knowledge and perceptions of sexual assault policies and resources and responses to sexual assault disclosures. The university has multiple resources available to survivors, including a Title IX Office that receives and investigates formal complaints of sexual assault, a campus police department, a counseling center, and a campus sexual assault center. These campus resources have specific names/titles, but we use general terms to describe these resources (e.g., “sexual assault center”) to protect the anonymity of the university. All RAs on this campus were designated as Campus Security Authorities and Responsible Employees. As part of mandatory housing staff training, all RAs received training on the university sexual misconduct policy, resources and reporting options, and expectations for responding to disclosures (e.g., reporting the assault to the university; discussing available resources; providing emotional support such as listening to and validating the survivor). The first author introduced the study at a weekly staff meeting for each residence hall on campus and invited the RAs to take an anonymous survey. Every RA in attendance wanted to participate, and all participants were given US\$5 cash. One of the RAs completed less than half of the survey items; their data were removed, for a final sample of 305. All study procedures were approved by the Institutional Review Board.

RAs' average age was 20.5 years (range: 18-25). Just over half the sample were women (55.7%;  $n = 170$ ), 42.6% ( $n = 130$ ) were men, and 1.6% ( $n = 5$ ) identified as another gender identity (e.g., gender queer). Participants' racial/ethnic backgrounds were 40.3% ( $n = 123$ ) White, 26.2% ( $n = 80$ ) Asian/Asian American/Pacific Islander, 17% ( $n = 52$ ) African American/Black, 7.5% ( $n = 23$ ) multiracial, 4.9% ( $n = 15$ ) Latinx/Hispanic, 2.6% ( $n = 8$ ) Middle Eastern/Arab, and 1.3% ( $n = 4$ ) another race/ethnicity. Most of the respondents identified as exclusively heterosexual or straight (70.2%,  $n = 214$ ), and the rest identified as mostly heterosexual or straight (13.8%,  $n = 42$ ), gay or lesbian (9.2%,  $n = 28$ ), bisexual (3.9%,  $n = 12$ ), and another sexual identity (e.g., asexual, queer; 3%,  $n = 9$ ). All RAs were second years or higher: 12.5% ( $n = 38$ ) second years, 43.8% ( $n = 133$ ) third years, 38.2% ( $n = 116$ ) fourth years, and 5.6% ( $n = 17$ ) fifth years or above. On average, RAs had worked in their current job for 1 year ( $M = 11$  months,  $SD = 10$ ; minimum = 1 month and maximum = 5 years).

### Materials and Questions

In the survey, RAs were presented with eight short scenarios depicting a sexual assault between two students (see Appendix). The scenarios were specifically developed to represent diverse examples of "sexual misconduct" and "nonconsent" as defined by university policy (e.g., unwanted sexual contact, unwanted vaginal penetration, coercion, verbal "no"). For example,

Tina agrees to let Paul give her oral sex. After a few minutes, Paul pulls off his pants and inserts his penis in her vagina. Tina did not want to have intercourse, and tells him to stop. Paul does not stop.

Before the scenarios, RAs were asked to imagine that the student who experienced the behavior lives in their residence hall and told them about the experience. After each scenario, participants were asked to "Briefly describe how you would respond to [Tina]." RAs' open-ended responses were analyzed in the current study.

### Analysis Approach

We performed a critical discourse analysis—using a sociocognitive approach—to study participants' descriptions of how they would respond to each scenario. A sociocognitive approach to discourse analysis focuses on the interplay between people's thoughts, discursive interactions, and larger social structures (van Dijk, 2009; Wodak & Meyer, 2009). Using this approach, researchers may first focus on the larger structure of the communicative interaction (e.g., What is the conversation about? What is being referenced?), then researchers may consider the underlying meanings and implications of the interaction (e.g., What are the actors' roles and positionalities in the conversation? What explicit and implicit messages are being communicated? How are social structures and beliefs related to these roles and messages? See van Dijk, 2009; Wodak & Meyer, 2009).

We were interested in better understanding RAs' communication about resources following sexual assault disclosures, so we first reviewed the 305 RAs' open-ended responses to all eight disclosure scenarios and identified those in which the RAs were discussing or making referrals to specific formal resources (e.g., reporting to the police and/or the university, campus sexual assault center, campus counseling center, forensic exam or "rape kit"). We identified 328 excerpts (i.e., responses to a scenario) that contained a comprehensible communication about formal resources (13% of the 2,440 total possible excerpts: 8 scenarios  $\times$  305 participants). There were additional excerpts in which RAs simply stated a resource (e.g., "counseling center" or "refer to sexual assault center"), but these were not included due to the lack of a communicative interaction that could be analyzed (e.g., What would that referral actually sound like?)

Next, we analyzed the underlying meanings and implications of each interaction by focusing on the relationships between discursive interactions, beliefs/cognitions, and social structures expressed within the excerpts. During this process, we identified two underlying dimensions in the 328 resource communication interactions: (1) certainty—the RA's response indicates their (un)certainly that the survivor needs and deserves the resource(s) they are identifying, and (2) control—the RA's response communicates who controls the decision to use the resource(s) they are identifying, the RA herself/himself or the survivor. We then split the 328 excerpts in half: the first author coded the first half along these two dimensions (i.e., low/high certainty and RA/survivor control), and the second author coded the second half. After all excerpts were coded, each author reviewed the other half. Any discrepancies were resolved through discussion, so that there was complete agreement upon how the excerpts fit within the conceptual model.

Both authors acknowledge that their analysis of these excerpts are shaped by their previous experiences as victim advocates for sexual assault survivors and collegiate instructors who have worked closely with student survivors of campus sexual assault. The authors do not believe that all formal resources are beneficial for every survivor, but they do hold a bias that survivors are best suited to label their own experiences and reactions and decide which resources would benefit them.

## Results

Our analysis identified four discourses used by RAs when communicating about resources with hypothetical sexual assault victims: controlling, gatekeeping, minimizing, and empowering. Each of these discourses reflected the two underlying dimensions described above: (1) RA's (un)certainly that the survivor needs and deserves resources, and (2) whether the RA or the survivor controls the decision to use resources. We also include mixed excerpts, which expressed two or more of the four main discourses. These discourses are represented visually in Table 1 and discussed in detail below.

### *Controlling*

The majority of the excerpts were categorized as controlling (45%,  $n = 149$ ). Through these discourses, RAs expressed a high degree of certainty that a survivor needs

**Table 1.** Discourse Dimensions.

	Certainty	Control	Definition	Example
Controlling	High	RA	The RA is certain that the survivor needs/deserves resources and makes decisions for the survivor about using them.	“I would tell Noel to not take a shower until the evidence is collected and to call for help immediately.” (Noel, ID 011)
Empowering	High	Survivor	The RA is certain that the survivor needs/deserves resources and allows the survivor to make the decision about using them.	“If you’d like, I can go to [the sexual assault center] with you and we can talk to someone there who may be able to help too, but only if you’re comfortable.” (Alice, ID 016)
Gatekeeping	Low	RA	The RA is not certain that the survivor needs/deserves resources and decides whether or not to provide resources after gathering additional information.	“Ask if she’s OK, refer to [the counseling center] if she’s ever feeling mentally not fine.” (Dana, ID 022)
Minimizing	Low	Survivor	The RA is not certain that the survivor needs/deserves resources and says that the survivor can use resources only if she or he feels harmed, distressed, etc.	“If you feel like Paul did you wrong, [the sexual assault center] is a great place to go.” (Tina, ID 134)
Mixed	—	—	The RAs’ response reflects at least two of the four discourses.	“You should report this to [the Title IX Office]. If you need help—you can go to [the sexual assault center].” (Alice, ID 052)

Note. RA = resident assistant.

resources and a high degree of personal control over how those resources are accessed. In general, the RAs’ controlling discourses did two things: (a) they took unilateral action to contact or involve a resource without asking for permission and/or (b) they insisted that survivors respond to the sexual assault in a specific way. Both of these are explained below.

When taking action without the survivor’s consent, controlling responses were often extremely simple. The RAs used short phrases like, “Holey shit. Go to [the sexual assault center], please” and “Report to the police!”—forcing survivors into decisions. RAs who elaborated on their responses maintained the same urgent tone. For example, one RA wrote, “I would respond to Noel by calling the police and immediately referring her to [the sexual assault center] to get help.” In these cases, the RAs

took action quickly, and without assessing what the survivor may want. Sometimes, the RAs seemed to know that they might be acting against the survivor's will. For example, one respondent wrote, "I think because this was specifically an attack/rape in the outside, I would be very likely to report this with or without gaging [sic] how Noel felt about the situation." In addition, the RAs who did not overtly say they would disregard a survivor's wishes still acted paternalistically. In response to Ben, one RA wrote,

I would tell him that he should never be afraid of someone, and if he is put in this position, he should find help immediately. This is why I am making sure you feel safe and unthreatened by reporting this incident.

In this case, the RA disregards what Ben might feel and instead tells him what he should feel in response to their unilateral decision to report.

Controlling responses also took the form of strong statements about how a survivor "should" or "must" behave following the assault. In these responses, the RAs commonly made only a single referral and applied pressure to try to sway the survivor into behaving as they saw fit. For example, one respondent wrote, "I would tell Noel to not take a shower until the evidence is collected and to call for help immediately." In some cases, the RAs also defined the sexual assault for the survivor as a catalyst for action. In response to Tina, one RA said, "I would tell Tina that Paul's actions constitute rape, and that she should talk to [the sexual assault center] for her next steps moving forward." By labeling Tina's experience as rape, the RA not only attempts to control how Tina responds to her sexual assault but also how she experiences it. Some of these responses communicated that the RAs' primary concern was not the survivor's well-being, but rather punishing an assailant or preventing future sexual assaults. For example, in response to Noel, one RA said, "John is in the wrong and he should be reported to the authorities. Think that he might do this to someone else." Similarly, another RA said to Alice, "I'd explain to her the importance of reporting and not just leaving it be."

### *Gatekeeping*

Gatekeeping was another discourse identified in a few RAs' responses (4%,  $n = 14$ ). In these excerpts, RAs' response expressed a low degree of certainty that a survivor needs resources but maintained a high degree of personal control over when and why any resources could be accessed.

Most commonly, the gatekeeping discourse demanded more information from survivors before offering a resource. One respondent exemplifies this message as she responds to Ben: ". . . I will ask how he feels, comfort him, make sure he feels alright. If necessary, I will ask him to talk to [the sexual assault center]." The RA not only recognizes that the sexual assault center could be a useful resource for Ben but also indicates that she does not intend to offer that resource unless she determines it suitable. In some cases, gatekeeping respondents explicitly stated an intention to withhold a resource from a survivor. For example, an RA responding to Tasha wrote, "[I would]



let her talk to gauge what she wants since this is less serious than prior situations I wouldn't immediately offer police action." Another RA responded to Helena by saying, ". . . Maybe consider bring [sic] her to [the sexual assault center] if she needs further help." In both of these cases, the RA recognizes a useful resource, but does not intend to share the resource with the survivor unless the survivor demonstrates additional need. Like the controlling responses, gatekeeping responses strip survivors of their ability to choose how they want to respond to their sexual assaults, but gatekeeping responses often also may result in no resource referral at all.

In addition, interaction with a gatekeeping RA could be emotionally distressing for a survivor. Some RAs indicated they would pry for details about the sexual assault, which they would use to evaluate whether a resource was deserved. For instance, in response to Ben, one RA wrote, "Important to get full story and tell resident that I might report up what I hear." In this scenario, Ben not only has no control over whether reporting options are used, but his RA also asked him to disclose intimate details of his sexual assault which he would then judge.

### *Minimizing*

Another common discourse was minimizing: 20% ( $n = 65$ ) of the excerpts were coded as minimizing. We identified a response as minimizing when an RA expressed a low degree of certainty that a survivor needed resources but communicated that a survivor could choose to access resources if they *really* needed it. Usually, these responses were dismissive and hinted that the RA did not think the survivor's complaint necessarily merited a serious institutional response. The RAs did this in two main ways: (a) questioning the authenticity of the sexual assault and/or (b) questioning whether the sexual assault would cause significant harm.

In many cases, the RAs conveyed uncertainty about whether or not the event disclosed was, in fact, a sexual assault. As an example, one RA's response to Tasha was, "If you feel like you have been assaulted in any way please don't hesitate to report it." Similarly, another RA wrote to Tina, "If you feel like Paul did you wrong, [the sexual assault center] is a great place to go." In both of these cases, the RA mentioned and even condoned a resource, but their response also questioned the legitimacy of the concerns raised by the student. Similar to gatekeeping, some RAs also indicated that they might ask the survivor invasive questions to manage their own feelings of uncertainty. For example, an RA responding to Dana wrote, "I would ask more questions if she felt forced but I would tell her she can talk to [the sexual assault center] if she is in an abusive relationship." In this case, the RA expressed some intent to provide a resource to Dana but questioned the validity of Dana's concerns and expected her to provide more details of her assault to prove the resource is needed. In each of these examples, the RAs' referral is couched in language that subtly communicates the incident may not be something that anyone would report or seek help for. It was not clear that the behavior was wrong or forced.

Minimizing discourses often suggested that the RAs believed the student disclosing might deserve resources but did not think that the unwanted sexual experience would

necessarily be harmful. Two RAs responding to Carmen made similar remarks that minimized the pain caused by her assault: "I would suggest [the sexual assault center] if the student feels really hurt" and "If Carmen is uncomfortable, I'd tell her where on campus to go." Another RA responded to Tasha by saying, "If it bothers, shouldn't brush it off, go to [the sexual assault center]/other resources." All of these respondents not only leave the complaint of sexual assault unquestioned but also indicate that other people in the survivor's situation may not believe it severe enough to need resources. Occasionally, an RA would explicitly mark an experience as victimizing but still imply that it may not require resources. For instance, in response to Tina's disclosure, one respondent stated: ". . . tell them that this is a form of abuse and if they feel uncomfortable, they have the right to report it." In cases like this one, the RA sends a clear message that not all abuse causes discomfort, much less harm, and, accordingly, not all merit filing a report with the police or the university. Importantly, each of these responses suggest the RAs do not always see the harm caused by sexual assaults disclosed to them, which could communicate to a survivor that he or she is overreacting or irrationally emotional.

### *Empowering*

Slightly fewer RAs' responses were categorized as empowering (18%,  $n = 58$ ). Empowering discourses expressed a high degree of certainty that a survivor needs resources and communicated that the survivor had the power to decide which, if any, resources to pursue. Unlike the three preceding categories, empowering responses provide the survivor with information needed to pursue an institutional response while also establishing the survivor's control over his or her recovery.

In these responses, the RAs consistently emphasized the survivors' ability to choose which resources to use. In the simplest version, RAs would provide a resource and allow a survivor to designate the next step. For example, one RA said to Dana, "I'm sorry this happened to you. You deserve to be/feel safe in your relationship. [The sexual assault center] has services to help if you want to go." Similarly, an RA responding to Alice attempted to give her every possible option for recourse available when she wrote, "I would tell her that confidential resources are available if she would like them. I would also tell her that if she wishes to press charges or pursue an investigation for sexual misconduct, that is an option as well." In these responses, RAs did not question the legitimacy of the survivor's experience, but recognized that not all resources are appropriate for every survivor's needs. These responses enable the survivor to make an informed decision about which resources and options are available to pursue.

Commonly, empowering discourses also offered substantial support for survivors as they may be determining which (if any) resources to use. Some RAs offered to discuss the survivor's options and help the survivor make a decision about how to act. For example, one RA said to Ben, "I'd reassure him that it was not his fault and he did nothing 'wrong' to deserve this violent treatment. Hopefully we could work together to decide about reporting." Importantly, these discourses did not imply that the RA

would try to sway the survivor toward one particular resource. Often, the RAs offered to accompany the survivor to the service she or he selected. One RA offered Alice, “I know this is not any of my business, but if you need support or want to talk to somebody, I know [the Title IX office] and [the sexual assault center] are always available. I can go with you to the office ‘waiting room’ if you don’t feel comfortable going by yourself.” These RAs not only emphasized the survivor’s power to choose his or her course of action but also provided a solution to a common barrier for accessing resources by offering to keep the survivor company. Similarly, some RAs offered ongoing emotional support. For example, one RA said in response to Alice: “Support her, validate her, go with what she chooses but encourage her to seek out resources. Let her work through the process with your support.” Empowering discourses differed from more controlling discourses in that it was clear that survivors may not want their interference and, again, emphasized that they would respect the survivor’s decision.

### *Mixed Discourses*

In some cases, RAs’ responses expressed more than one of the four discourses outlined above and was categorized as mixed (13%,  $n = 42$ ). These responses gave mixed messages about whether the survivor deserved access to institutional resources or who would control any steps taken for recourse.

In some cases, the RA treated each resource mentioned differently. For example, one RA said to Alice, “You should report this to [the Title IX office]. If you need help—you can go to [the sexual assault center].” In reference to the Title IX office, the RA expresses a controlling discourse—telling Alice what she should do—but in the next sentence, a minimizing discourse questions whether she needs help from the sexual assault center. Sometimes, mixed responses were unclear about whether or not the RA found the survivor’s claim of sexual assault credible or important. One respondent exemplifies this in his treatment of Carmen, writing, “Even if you feel like it was something small, you should still report it because it was forced.” The RA not only minimizes the severity of the sexual assault (it is “something small”) but also controls her response by insisting that she should report it.

Mixed discourses also commonly sent mixed messages about the degree to which the survivor could control institutional reaction to his or her sexual assault. For example, one RA said to Dana, “All sex no matter what kind needs to be consensual. Do you want to report this? I think something needs to be done.” This RA asks Dana how she wants to proceed but then attempts to influence her response by sharing her opinion. Another RA wrote, “I would encourage [Ben] to report the incident to campus police and guide him to the resources available.” The RA’s “encouragement” could be controlling if he tried to sway Ben’s decision, but “guiding” Ben to resources could be empowering.

### **Discussion**

RAs—and other first responders—are a cornerstone of campus sexual assault response. RAs build trusting relationships with students in their residence halls and

housing communities (Blimling, 2003), similar to other members of the campus community, such as faculty members, academic advisors, and coaches. Close relationships and extensive contact with students place all of these employees in an ideal position to receive sexual assault disclosures and provide aid, primarily through referrals to services that provide direct assistance (e.g., victim advocates, mental health counselors; Paylo et al., 2017; Taub & Servaty-Seib, 2010). First responders generally hold formal power over students as well—power granted by their institution's policies, practices, and hierarchies. The discourses that support providers use when making referrals—the way that they communicate—have implications for survivors' well-being and help-seeking decisions (Ahrens et al., 2009; Dworkin et al., 2016). However, RAs hold a unique role as both help-provider and peer, and as such, their responses to disclosures can provide insight into both formal and informal support interactions. The current study took a step toward understanding the discourses support providers use by examining the way RAs discussed resources in response to sexual assault disclosure scenarios.

Using a critical discourse analysis, we identified four primary discourses that RAs used in their discussion of resources with survivors: controlling, gatekeeping, minimizing, and empowering. These discourses were characterized by two underlying dimensions: (1) RA's response communicated (un)certainly that the survivor needs and deserves additional resources, and (2) whether the RA or the survivor had control over the decision to access those resources. These discourses reflect and reproduce larger cultural scripts about sexual assault as well as institutional policies, practices, and power relationships. Below, we evaluate each discourse and its potential impact on survivors.

The most common discourse utilized by RAs was a controlling discourse, in which the RA clearly takes the survivor's concerns seriously but strips the survivor of their control over how to respond to the sexual assault. Paternalistic cultural norms and beliefs about women and victimization can be clearly seen in controlling discourses (e.g., women are fragile and easily victimized, victims are damaged and need to be saved). Moreover, controlling discourses are consistent with most university policies that regulate first responders' responses to disclosures. Specifically, many institutions of higher education have implemented expansive mandatory reporting policies, which require most organizational actors (including the RAs in this study) to respond to all disclosures of sexual assault by reporting the incident to the university, regardless of the survivor's wishes (Holland, Cortina, & Freyd, 2018). These policies require first responders, who hold positions of power over survivors, to unilaterally decide what happens after the disclosure. As such, mandatory reporting policies may also encourage first responders to control other help-seeking decisions. In the controlling responses reported in this study, it is easy to imagine that the RA's swift intervention could be at odds with what the survivor wants or needs in that moment of disclosure—for example, an RA who demands that a survivor report the assault to the police or urges the survivor not to shower and get a rape kit. In some instances, the survivor may want these supports, but that is something that she or he should have the ability to decide without pressure. Urging the survivor to take immediate public action (e.g., initiate an

official investigation) could be a catalyst for tensions within the survivor's social group or retaliation from the assailant. Furthermore, the act of reacting with more urgency than a survivor feels may be distressing on its own. Previous research has indicated that the fear of an overreaction from an authority figure discourages survivors from seeking help (DeLoveh & Cattaneo, 2017).

Strong reactions to disclosures are not always upsetting to survivors but are considered more appropriate coming from a close informal support provider, such as a friend or significant other, who survivors had confidence were acting within their best interest (Ahrens et al., 2009; Dworkin et al., 2016). In contrast, some of the RAs in this study engaged in controlling behavior out of interest for the campus community (e.g., wanting to hold a perpetrator accountable to prevent future sexual assaults) rather than trying to understand and meet the needs of the individual survivor. Survivors commonly disclose their sexual assaults to formal support providers to gain access to individual-level support (e.g., validation, emotional support; Demers et al., 2017), so a first responder's demand that survivors use institutional-level remedies (e.g., immediately going to the sexual assault center or reporting to the university) may be irrelevant to or in conflict with the survivor's best interests. In this moment, the RA's response reflects a greater commitment to the institution than understanding the individual survivor's needs. Even if it is unintentional, formal help-providers employing a controlling discourse could have real consequences for survivors who, for the second time, have lost control and autonomy—and this time, to a person with direct organizational power over them.

The gatekeeping discourse may also pose difficulties for survivors seeking support. In these cases, the RA maintained control of the response to the sexual assault but regarded the survivor's worthiness to access any resources with skepticism. For instance, RAs who invoked a gatekeeping discourse demanded a more detailed account of the sexual assault to determine whether other resources were warranted. Many survivors find it retraumatizing to be asked to give a detailed account of their assault over and over, especially when they feel that formal support providers are judging them and their experience (Campbell, 2008). When responding to someone in a position of power, such as an RA, survivors might feel they are mandated to answer probing personal questions, even if doing so is emotionally distressing. This discourse reproduces a social and institutional position of powerlessness. In the event that an RA determines a survivor's experience does not merit resources, it is easy to imagine that the survivor may not receive information about other resources at all, impeding her or him from making an informed decision about how to respond to the assault. This response may be especially harmful coming from a first-responder who has specialized knowledge about resources on campus, signaling that no resources are appropriate or available for the survivor.

Similar to the previous two categories, minimizing discourses could create additional barriers for survivors seeking support and information about available resources. Minimizing discourses refers to responses in which the RA's response communicates a lack of certainty that a survivor needs or deserves resources and leaves it up to the survivor to use a resource if, and only if, they think they were

assaulted or were traumatized enough. In these cases, the uncertainty expressed could negatively affect the survivor (e.g., was this an assault?). Previous research has found that survivors find minimizing responses hurtful, regardless of the support provider (Ahrens et al., 2009). Furthermore, a service provider's minimizing response may decrease a survivor's likelihood of accessing the resources needed (Campbell, Wasco, Ahrens, Sefl, & Barnes, 2001). In general, minimizing responses could lead survivors to doubt whether their concerns are serious enough to use resources, which is one of the most common reasons that college women give for not seeking help from campus resources (Holland & Cortina, 2017). Minimizing discourses, especially coming from someone in a position of authority, may also lead a survivor to question whether other support providers (e.g., victim advocates, mental health counselors) or campus officials (e.g., Title IX Coordinators, police officers) will take them seriously. This discourse reflects larger sociocultural messages about sexual assault. False and destructive beliefs about the causes and consequences of sexual violence are widely held in our culture—for example, “real rape” is violent, forcible penetration committed by a stranger, and “real victims” have severe physical injury and cry hysterically (Brownmiller, 1975; Edwards, Turchik, Dardis, Reynolds, & Gidycz, 2011; Lonsway & Fitzgerald, 1994). These myths perpetuate and minimize the impact of sexual assault (Edwards et al., 2011). The minimizing discourses observed in this study suggest that myths about sexual assault could color first responders' discussion of resources, possibly hindering survivors' willingness and ability to use resources.

Unlike the previous three responses, empowering discourses could reliably ease the burden on survivors seeking services. Empowering discourses refer to responses in which an RA expressed a high degree of certainty that a survivor deserves resources and communicates that the survivor has agency in navigating the resources available. A sexual assault strips a victim of their agency, and restoring that agency is a key step to healing (Conley & Griffith, 2016). First responders who clearly discuss available supports and how survivors can exercise agency in which services they may or may not pursue is an important step in successfully connecting survivors to resources. Previous research has suggested that survivors may be more likely to cooperate with service providers when they have agency in selecting which services they would like to work with (Greenson & Campbell, 2011). Similarly, survivors report more positive experiences with other service providers (e.g., medical or legal personnel) when someone understands their needs and advocates for them (e.g., a victim advocate; Campbell, 2006). We anticipate that most first responders aim to support those who have disclosed an instance of sexual violence but that few have adequate training or institutional encouragement to do so in an empowering manner. Any training they may have received about empowering survivors could be overshadowed by other institutional demands, such as a strong emphasis on mandatory reporting duties. The current study emphasizes the importance of specifically training *all* first responders—including but not limited to RAs—in using an empowering discourse when making resource referrals, even when an individual survivor's decisions about the appropriate recourse might be at odds with other institutional objectives.

### *Implications for Practice and Policy*

Great care must be taken in training formal support providers to respond properly to survivors, especially when providers are in a position of power over a survivor, which is true for nearly all formal supports (e.g., police officers, medical professionals, RAs). Whether intentional or not, when formal support providers respond to disclosures in negative ways—e.g., communicating doubt, insinuating blame, controlling decisions—they can cause survivors serious, additional harm (Campbell, 2008; Ullman, 2010). Victim advocates (e.g., working in rape crisis centers), for instance, receive extensive training on how to assess what survivors want and need, and then help survivors obtain those desired outcomes or resources. Supportive listening is something that many survivors want from a support provider (Kirkner, Lorenz, & Ullman, 2017). Support from victim advocates is associated with survivors' willingness and ability to use other formal supports (e.g., law enforcement; Campbell, 2006). RAs and other formal support providers should receive training that explicitly identifies negative responses to disclosures—what these responses look like and how to avoid them—and the importance of listening, following survivors' lead, and advocating for survivors' needs. In addition, there must be systematic, empirical evaluation of training efficacy.

Although an institution of higher education should employ a training program that best suits their specific institutional structure, direction at the federal level can help to ensure that training "best practices" are being met across all institutions. Taking important steps in this direction, the Department of Education's OCR under President Obama's Administration outlined some best practices for training employees whom the institution designates as "Responsible Employees" (which includes RAs at most institutions) in a 2014 Q&A Title IX guidance document (Lhamon, 2014). For instance, this document stated that institutions should train such employees to respond to disclosures in appropriate, positive ways (e.g., using nonjudgmental language) and thoroughly explain all of survivors' options for reporting (e.g., filing a Title IX complaint, reporting to law enforcement) and seeking help (e.g., confidential resources on and off campus). We would add that incorporating explicit instruction and practice in supportive listening and assessing survivors' needs would be beneficial, as well as limiting first responders' requirement to contact the police or involve survivors in a formal university sexual misconduct adjudication process.

In our view, the recommendations made by the Obama administration included essential changes in the training of service providers that could mitigate many of the concerns raised by the findings of this study. However, at the time this article was written, the Department of Education rescinded the relevant prior Title IX guidance addressing college sexual assault: the 2011 Dear Colleague Letter and the 2014 Q&A (Jackson, 2017). This decision took significant steps backward in helping colleges and universities respond to sexual assault appropriately and equitably. Given our findings, it is essential to identify ways to include best practices for training formal support providers for sexual assault in higher education in new and/or existing legislation (e.g., via an upcoming reauthorization of the Violence Against Women Act).

### *Limitations and Future Directions*

There are limitations to the study that must be considered. First, the RAs in this study were responding to hypothetical disclosure scenarios, not real sexual assault disclosures from their residents. Although our findings are an important first step toward understanding how RAs communicate with survivors about resources post disclosure, future research will need to examine the content of actual first-disclosure interactions between student survivors and formal support providers in higher education. Although it will be difficult for researchers to capture a disclosure in real time, it is possible that both survivors and RAs could participate in an in-depth interview about the interaction.

Second, the current study provides an analysis of one-side of the disclosure: What the support provider would say. Prior research finds that survivors may interpret support providers' responses to disclosures differently depending on a number of factors, such as the closeness of their relationship with the support provider (e.g., Ahrens et al., 2009; Dworkin et al., 2016). We can infer from prior research how survivors may receive the discourses identified in our study, but future research should explicitly assess how survivors interpret those responses. Moreover, this work should examine factors that may shape those interpretations (e.g., characteristics of survivors and support providers).

Third, our study focused on one specific group of support providers—undergraduate RAs—at a single university. Although RAs share many characteristics with other formal support providers on college campuses, we have not empirically examined the discourses used by other first responders. Future research could test whether these discourses arise for other formal support providers in higher education (e.g., faculty, athletic staff, academic advisors) and within the hierarchies of other types of organizations, including workplaces (e.g., mid-level managers, human resources officials). Although many other students are in a similar university context—a large, primarily residential, public university—researchers should consider how and why support providers' responses may vary across different institutional contexts, paying particular attention to each organization's policies and cultural mores surrounding sexual misconduct.

### **Conclusion**

Through a critical discourse analysis, the current study examined how RAs communicate about formal supports (e.g., reporting options, resources) with students who disclose a sexual assault. We identified four primary discourses: controlling, gatekeeping, minimizing, and empowering. These discourses reflected RAs' (un)certainly that a survivor needs and deserves resources and whether the RA or the survivor controls the decision to use resources. Moreover, most of these discourses reflected and reproduced the position of power that RAs hold over student survivors (e.g., taking control) and dominant cultural beliefs about sexual assault (e.g., what counts as a "serious" assault). Formal support providers in higher education must receive explicit training around responding to disclosures in ways that centralize survivors' needs.



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## Appendix

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### Sexual assault scenarios

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1. Alice gets so drunk at a party that her friend Nick has to help her get home. Alice passed out when they got to her room and Nick had sex with her.
  2. After working on a school project together, Kyle asks Ben to give him oral sex. When Ben says no, Kyle gets angry and threatens to force him. Ben feels afraid and gives Kyle oral sex.
  3. John attacks Noel in the parking lot next to the library at 10 p.m. She screams “No,” but he holds her down, pulls off her pants, and has sex with her.
  4. Tasha is sleeping in her dorm room. Her roommate’s boyfriend Steve starts fondling her breasts. Steve stops when Tasha wakes up and yells.
  5. Luke and Dana have been dating for a few months. One night, Luke wants to have anal sex but Dana does not want to. He threatens to end the relationship if they don’t. They have anal sex.
  6. Tina agrees to let Paul give her oral sex. After a few minutes, Paul pulls off his pants and inserts his penis in her vagina. Tina did not want to have intercourse and tells him to stop. Paul does not stop.
  7. While hanging out in her room, Paige puts her hand under Carmen’s skirt. Carmen pushes her hand away. Paige puts her hand under Carmen’s skirt again and inserts a finger in her vagina.
  8. Helena is having sex with Adam in his room, and his friend Tim walks in. Adam tells him to “go for it.” Helena does not want to have sex with Tim too. Before she can say anything, Tim starts having sex with her.
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